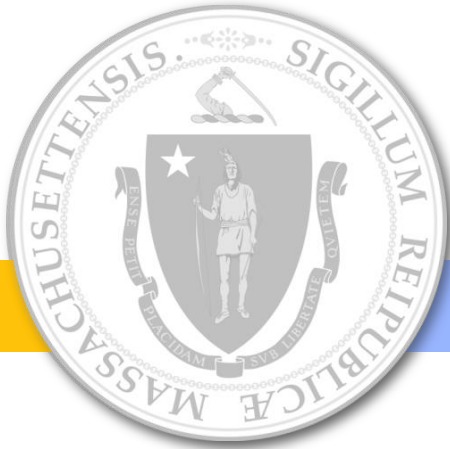


MassHealth Payment and Care Delivery Innovation (PCDI)

Presentation to the Boston Bar Association



Executive Office of Health & Human Services

Robin Callahan, Deputy Medicaid Director

Agenda



1. Overview of MassHealth Payment and Care Delivery Innovation (PCDI)
2. MassHealth Plan Options for 2018
3. Accountable Care Organization Information
4. Eligibility Verification System
5. Member Enrollment and Assignment
6. Community Partners
7. Provider Information and Training

MassHealth Payment and Care Delivery Innovation (PCDI)



- The Executive Office of Health and Human Services (EOHHS) is committed to a sustainable, robust MassHealth program for its 1.8 million members
- EOHHS is making changes to MassHealth for managed care-eligible members – introducing ACOs and Community Partners (CPs) to emphasize care coordination and member-centric care
- ACOs have groups of primary care providers (PCPs) and other providers who work together to improve member care coordination and better meet overall health care needs
- Community Partners (CPs) are community-based experts who will provide care coordination services to and connect members with available behavioral health and LTSS services. CPs will be available to certain members with high needs as determined by MassHealth or the ACO/MCO. Providers make referrals for consideration.



Fundamentals of Coordinated Care and Population Health Management



- Improve population health and care coordination through sustainable, value-based payment models
- Improving patient outcomes and member experience. Providers rewarded for delivering value and not the volume of services provided
- Provide incentives to improve care coordination and achieve performance standards across multiple measures of quality, including prevention and wellness, chronic disease management, and member experience
- Invest in Community Partners to collaborate with ACOs to provide care coordination and care management supports to individuals with significant behavioral health issues and/or complex long term services and supports (LTSS) need
- Improve integration of physical and behavioral health care

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MassHealth Health Plan Options for 2018



Accountable Care Partnership Plans (Model A)	Accountable Care Partnership Plans Collaborations
<ul style="list-style-type: none"> • Be Healthy Partnership 	<ul style="list-style-type: none"> • Baystate Health Care Alliance with Health New England
<ul style="list-style-type: none"> • Berkshire Fallon Health Collaborative 	<ul style="list-style-type: none"> • Health Collaborative of the Berkshires with Fallon Community Health Plan
<ul style="list-style-type: none"> • BMC HealthNet Plan Signature Alliance 	<ul style="list-style-type: none"> • Signature Healthcare Corporation with Boston Medical Center HealthNet Plan
<ul style="list-style-type: none"> • BMC HealthNet Plan Community Alliance 	<ul style="list-style-type: none"> • Boston Accountable Care Organization with Boston Medical Center HealthNet Plan
<ul style="list-style-type: none"> • BMC HealthNet Plan Mercy Alliance 	<ul style="list-style-type: none"> • Mercy Health Accountable Care Organization with Boston Medical Center HealthNet Plan
<ul style="list-style-type: none"> • BMC HealthNet Plan Southcoast Alliance 	<ul style="list-style-type: none"> • Southcoast Health Network with Boston Medical Center HealthNet Plan
<ul style="list-style-type: none"> • Fallon 365 Care 	<ul style="list-style-type: none"> • Reliant Medical Group with Fallon Community Health Plan
<ul style="list-style-type: none"> • My Care Family 	<ul style="list-style-type: none"> • Merrimack Valley ACO with Neighborhood Health Plan
<ul style="list-style-type: none"> • Tufts Health Together with Atrius Health 	<ul style="list-style-type: none"> • Atrius Health with Tufts Health Public Plans
<ul style="list-style-type: none"> • Tufts Health Together with BIDCO 	<ul style="list-style-type: none"> • Beth Israel Deaconess Care Organization with Tufts Health Public Plans
<ul style="list-style-type: none"> • Tufts Health Together with Boston Children's ACO 	<ul style="list-style-type: none"> • Children's Hospital Integrated Care Organization with Tufts Health Public Plans
<ul style="list-style-type: none"> • Tufts Health Together with CHA 	<ul style="list-style-type: none"> • Cambridge Health Alliance with Tufts Health Public Plans
<ul style="list-style-type: none"> • Wellforce Care Plan 	<ul style="list-style-type: none"> • Wellforce with Fallon Community Health Plan

Primary Care ACO Plans (Model B)

- Community Care Cooperative (C3)
- Partners HealthCare Choice
- Steward Health Choice

MCOs

- Boston Medical Center Health Plan (BMCHP)
- Tufts Public Plans (Tufts)

MCO-Administered ACO (Model C)

- Lahey Clinical Performance Network (Participating with Boston Medical Center HealthNet Plan and Tufts Health Public Plans)

PCC Plan

- Primary care Providers in the PCC Plan network



Defining Health Plan Options for 2018

Types of ACOs

- **Accountable Care Partnership Plans (Model A):** A network of PCPs who have exclusively partnered with a single MCO to use the MCO's provider network to provide integrated and coordinated care for members.
- **Primary Care ACOs (Model B):** A network of PCPs who contract directly with MassHealth, using MassHealth's provider network, to provide integrated and coordinated care for members. Members who enroll in a Primary Care ACO receive behavioral health services through the Massachusetts Health Behavioral Partnership (MBHP).
- **MCO-Administered ACOs (Model C):** A network of PCPs who may contract with one or multiple MCOs, and use the MCO provider networks to provide integrated and coordinated care for members. MCO-Administered ACOs are not presented as an enrollment option for members because they will be attributed through their relevant MCO.



Defining Health Plan Options for 2018

MCOs

- MCOs are health plans run by insurance companies that provide care through their own provider network that includes PCPs, specialists, behavioral health providers, and hospitals. Care coordinators are employed by the MCO.

Primary Care Clinician (PCC) Plan

- The Primary Care Clinician (PCC) Plan is statewide plan run by MassHealth that uses the MassHealth provider network. Behavioral health services for the PCC Plan are provided by Massachusetts Behavioral Health Partnership (MBHP). Members must choose a PCC in order to enroll in a PCC Plan.



Member Perspective

“If I am enrolled in ____, which providers can I see for ____?”

	Primary Care	Hospital/ Specialists	Behavioral Health (BH)	Long-Term Services and Supports (LTSS)	Pharmacy
PCC Plan	MassHealth PCPs	MassHealth Hospital/ Specialists	MBHP providers	MassHealth LTSS providers	MassHealth network Pharmacies
Primary Care ACO	Primary Care ACO's PCPs	MassHealth Hospital/ Specialists	MBHP providers	MassHealth LTSS providers	MassHealth network Pharmacies
MCO	PCPs in the MCO's network	Hospitals/ specialists in the MCO's network	BH Providers in the MCO's network or the network of its BH vendor	MassHealth LTSS providers	Pharmacies in the MCO's network
MCO-Administered ACO	MCO- Administered ACO's PCPs				
Partnership Plan	PCPs in the Partnership Plan's network	Hospitals/ specialists in the Partnership Plan's network	BH Providers in the Partnership Plan's network or the network of its BH vendor	MassHealth LTSS providers	Pharmacies in the Partnership Plan's network



Provider Perspective (1 of 2): PCPs

“What are my ACO participation options and their implications?”

My options for ACO participation are . . .	And what it means for the MassHealth managed care-eligible members I can serve is . . .
Do not participate in an ACO	I need to contract with the PCC Plan and/or MassHealth MCOs in order to have any of their enrollees on my primary care panel
Join a Partnership Plan as a Network PCP	I serve a panel of members who are all enrolled in my ACO . I cannot simultaneously have a PCP panel in other products (i.e., the PCC Plan, an MCO, or another ACO)
Join a Primary Care ACO as a Participating PCP	
Join an MCO-Administered ACO as a Participating PCP	My ACO will partner with one or more MCOs (in year 1, my ACO will partner with all the MCOs operating in its geography). I will be required to contract with those MCOs as a Network PCP for their enrollees, and all of their enrollees who are assigned to my panel will be considered part of my ACO’s attributed population

- This primary care exclusivity is **site- / practice-level**, similar to PCC Plan enrollments or participating in the ACO Pilot
- MassHealth will provide additional operational details of primary care provider enrollment/ACO affiliation to those providers participating with ACOs over the coming months

Provider Perspective (2 of 2): non-PCP providers

“What does ACO reform mean for my contracts and who I can see?”



		<i>I want to see members enrolled in . . .</i>			
		The PCC Plan	A Primary Care ACO	An MCO <i>(regardless of whether or not they are attributed to an MCO-Administered ACO)</i>	A Partnership Plan
<i>I am a...</i>	Hospital	Be in MassHealth's hospital network <i>(via the MassHealth hospital RFA)</i>		Contract with each MCO whose enrollees I want to see <i>(negotiated rate)</i>	Contract with each Partnership Plan whose enrollees I want to see <i>(negotiated rate)</i>
	Professional (e.g., specialist)	Be a MassHealth-participating provider <i>(via MH professional reg/fee schedule)</i>			
	Behavioral Health (BH) Provider	Be an in-network provider for MassHealth's BH Vendor <i>(via contract with the BH Vendor)</i>	Contract with each MCO (or that MCO's BH Vendor if they have one) whose enrollees I want to see <i>(negotiated rate)</i>	Contract with each Partnership Plan (or that Plan's BH Vendor if they have one) whose enrollees I want to see <i>(negotiated rate)</i>	
	Long-Term Services and Supports (LTSS) Provider	Contract with MassHealth as an LTSS provider at the MassHealth fee schedule; LTSS is "wrapped" coverage directly by MassHealth	Contract with MassHealth as an LTSS provider at the MassHealth fee schedule; LTSS is "wrapped" coverage directly by MassHealth for all members, regardless of model		
	Pharmacy	Contract with MassHealth as an in-network pharmacy provider	Contract with each MCO (or that MCO's pharmacy benefit manager as applicable) whose enrollees I want to see	Contract with each Partnership Plan (or that Plan's pharmacy benefit manager as applicable) whose enrollees I want to see	

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ACO Participation

- Primary Care Providers may participate in an ACO if their practice has signed a contract with an ACO
- ACO participating primary care practices are set for the first year of the ACO program (March 2018 – December 2018)
- Leadership at your practice should be able to confirm whether or not they are participating in an ACO
- If your practice would like to join an ACO in future years, reach out to that ACO and begin discussions for participating in performance year 2 (beginning January 2019)
 - Note that provider participation lists will be set well in advance of the January 2019 start date
- EOHHS and the ACOs are developing an annual process for adding new participating practices



Role of Plans in Contracting

Accountable Care Partnership Plans and MCOs (Model A):

- Responsible for contracting for both primary care and non-primary care networks
- Responsible for paying providers for ACO/MCO-Covered services
- Primary care providers must be exclusive, whereas specialists, hospitals, and behavioral health providers may contract with multiple plans

Primary Care ACOs (Model B):

- Responsible for contracting for primary care network
- Primary care providers must be exclusive
- Enrollees use Massachusetts Behavioral Health Partnership (MBHP) for behavioral health and the MassHealth network for other services
- MassHealth pays for all covered services



ACO Provider Leadership & Engagement

- ACOs are provider-led organizations and must have provider representation on the governing board
- Success of this program requires that participating providers engage with their ACOs and take appropriate ownership of meeting the ACO's goals (cost, quality and member experience performance)
- Contact your ACO to find out about opportunities for provider leadership and participation in your ACO's structure, including:
 - Participating on committees (e.g., the quality committee)
 - Being a target site for investment of infrastructure dollars or the roll-out of a population health management initiative
 - Participating in financial incentives under the ACO structure



ACO Incentives and Requirements

- Providers in ACOs may have **enhanced responsibilities**. Talk to your ACO to understand these expectations, which may include:
 - Sharing clinical data with your ACO for quality reporting
 - Meeting certain performance benchmarks for your assigned panel
 - Using certain data systems
 - Participating in certain governance structures or meetings
 - Taking on financial responsibility for ACO performance
- Providers in ACOs may also have **enhanced opportunities**. Talk to your ACO to understand these as well, which may include:
 - Data and analytics provided by your ACO or by MassHealth to providers in the ACO program
 - Infrastructure funding and investment
 - Population health management infrastructure and resources (e.g., ACO-employed care managers that embed in and support practices)
 - Opportunities for financial participation in ACO savings

AC Partnership/MCO Covered & Non-Covered Services



- MassHealth members enrolled in AC Partnerships and MCOs will receive certain services that are **paid for by their plan** (“ACO-Covered” or “MCO-Covered”) and certain services that are **paid for by MassHealth** (“Non-ACO-Covered” or “Non-MCO-Covered”). Covered services may differ by coverage type
- AC Partnership/MCO-Covered services include:
 - **Physical health** services such as primary care, inpatient, outpatient, professional specialty, and emergency physical health services
 - **Behavioral health** services such as inpatient, outpatient, diversionary, and emergency behavioral health services
 - **Pharmacy** services, with limited exceptions
 - **Certain post-acute services**, including home health (except continuous skilled nursing), durable medical equipment, hospice, therapy, chronic disease hospitals, rehabilitation hospitals, and nursing homes for the first 100 days of admission
- MassHealth-covered long term supports and services (e.g., adult day health, adult foster care, personal care attendants, etc.) are Non-ACO/MCO-Covered services and will be paid for by MassHealth as they are today.



PCP Participation and Exclusivity

- ACO participating primary care practices are set for the first year of the ACO program (March 2018 – December 2018)
- ACO-participating PCPs cannot also participate as primary care providers in MCOs or the PCC Plan or any other ACO. ACO-participating PCPs “exclusively” provide primary care to MassHealth managed care members enrolled in their ACO. This exclusivity is enforced at the **practice or entity level** rather than at the individual doctor level. Exclusivity does not apply to other programs such as Senior Care Options (SCO), One Care, or MassHealth fee-for-service.
- This fall, MassHealth will “**special assign**” to each ACO the members who have primary care assignments to that ACO’s PCPs effective March 1, 2018. Member may choose to change plans following special assignment.



Continuity of Care Requirements

- ACOs and MCOs are required to have procedures in place to minimize disruptions in care for new members.
- Plans are required to provide all members with timely access to medically necessary covered services.
- Plans must make best-efforts to minimize disruptions to existing relationships and approved treatments.
- Members should contact the plan directly for any questions or concerns related to existing provider relationships, scheduled appointments, or authorized services.
- PCPs and their care team are responsible for working with the member as well as the plan's network of providers to support coordination of care and connect the member with available services and supports.



Referral Circles

- Members in the PCC Plan and Primary Care ACOs require primary care referrals to access many services
- Primary Care ACOs will have the option of defining a Referral Circle, a subset of providers in the MassHealth network that their enrollees can visit without the need for a referral if one would otherwise have been required
- To participate in a referral circle for a Primary Care ACO, the provider must be enrolled as a MassHealth billing provider, and identified to MassHealth by the Primary Care ACO
- Referral circles are intended to improve access to coordinated care, and cannot be used to limit members' access to other providers in the MassHealth network
- Accountable Care Partnership Plans and MCOs may have similar preferred networks within their overall networks that have modified authorization requirements. For more information on these potential arrangements, talk to the health plans you have contracted with

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Eligibility Verification System (EVS)

Restrictive Messages

The Eligibility Verification System (EVS) on the Provider Online Service Center (POSC) will be updated with messages so providers know which type of health plan a member is enrolled in and who to contact for help with billing

There are two types of Restrictive Messages that will appear when checking eligibility: eligibility restrictive messages and managed care data details restrictive messages. The following managed care data details restrictive messages will appear for an ACO enrolled member:

Model A – Accountable Care Partnership Plan

[Plan Product Name] member. [Plan Product Name] is an Accountable Care Partnership Plan. For medical services, call 1-xxx-xxx-xxxx. For behavioral health services, call 1-xxx-xxx-xxxx. For claims, policy or billing questions, call 1-xxx-xxx-xxxx.

Model B – Primary Care ACO

[Plan Product Name] member. [Plan Product Name] is a Primary Care ACO Plan. For medical services, call 1-xxx-xxx-xxx. For behavioral health services, call the Massachusetts Behavioral Health Partnership at 1-800-495-0086.



Eligibility Verification System (EVS)

- Plan names are clearly displayed.
- Phone number to contact the plan if you have questions is listed.
- Restrictive messages will include plan contact numbers for plan services such as medical, behavioral health, and claims, policy or billing questions.
- Enhancements will be effective **3/1/2018**

Lists of Managed Care Date (For MCO/ACO)

MCO Name	NPI	MCO Phone	Date Range
→ Health Plan Name		1-888- 555-0000	07/25/2017-07/25/2017

Managed Care Data (For MCO/ACO) Details

Begin Date 07/25/2017 End Date 07/25/2017

ACO/MCO Name Health Plan Name

NPI ACO/MCO Phone 1-888- 555-0000

001-001- Plan name - Type of plan

Restrictive Messages 002-002 For medical services questions, call 1-888-555-0000 . For behavioral health services questions, call 1-888- 555-1111 .

003-003 For claims, policy, or billing questions, call [123- 555-3333]

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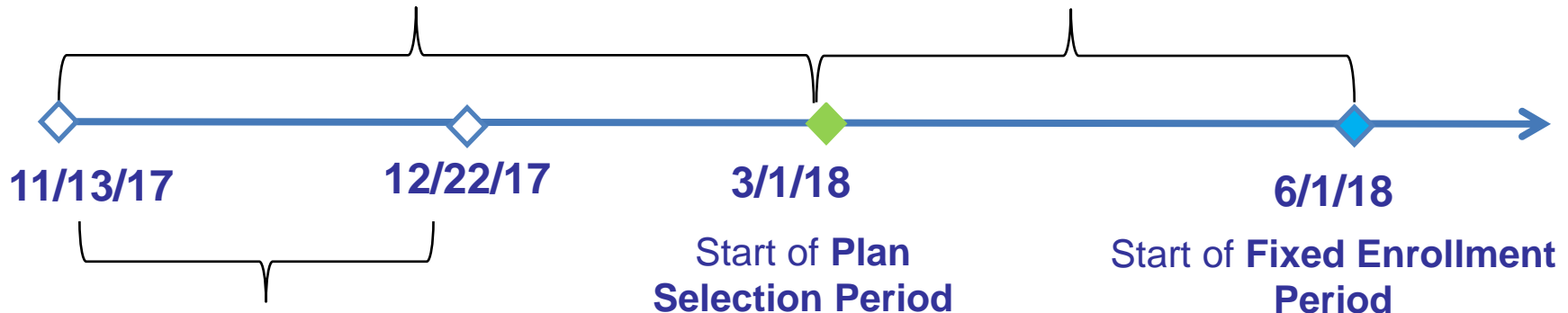


Important Member-Choice Dates

- Below are important dates for current managed care eligible members.
- For new managed care eligible members, after March 1, 2018 plan selection is the first 90 days after enrollment in an ACO/MCO, and fixed enrollment is for the remaining 275 days of the year.
- All members have a new plan selection period every year.

Members can choose and enroll in a new health plan for March 1, 2018.

Plan Selection Period. Members can change health plans for any reason.



Members will follow their PCP into a new ACO will enroll in a new health plan.

Members enrolled in an ACO or MCO can only change their health plans for certain reasons.

MassHealth Customer Service



The MassHealth Customer Service Center is making changes to deliver and maintain the best possible customer experience throughout the PCDI implementation

- Members are encouraged to use the new MassHealth Choices online tool and enhanced online enrollment form
- The robust technology platform is prepared for increased call volume
- The number of Customer Service Representatives (CSR) available to assist Members is increasing by 80% during periods of anticipated high volume
- Provider Customer Service is enhanced
 - In person trainings, webinars and on site visits
 - Enhancements to EVS
 - Dedicated Provider CSRs to support PCDI, billing and enrollment questions

Agenda



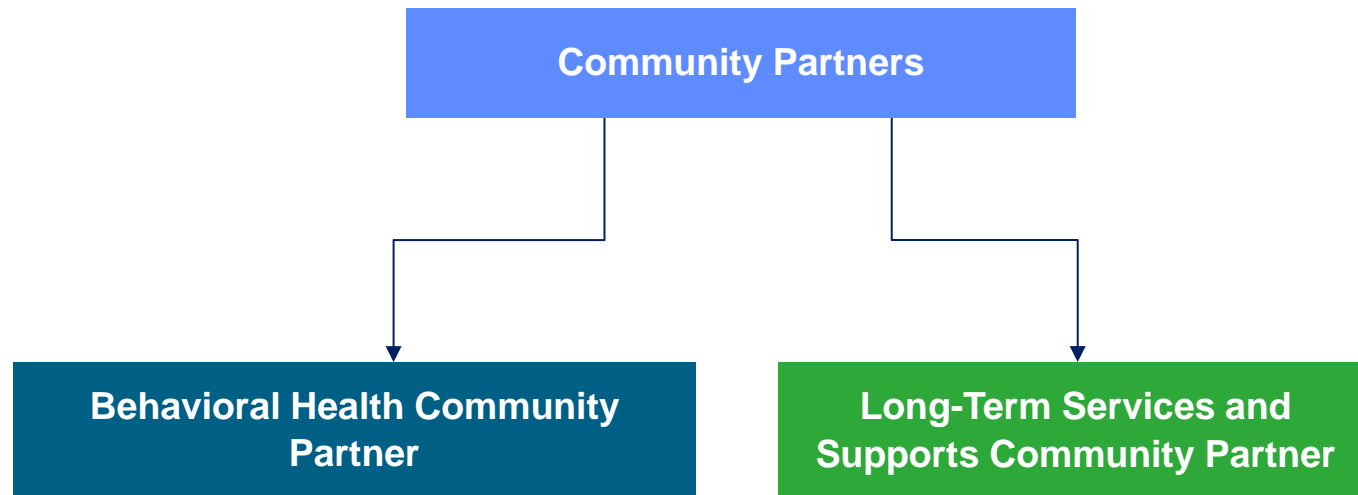
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Community Partners (CPs)

CPs are organizations experienced with either Behavioral Health or Long-Term Services and Supports that partner with ACOs and MCOs in coordinating and managing care for certain CP-eligible members

MassHealth will procure CPs to support ACOs and MCOs in coordinating and managing care for certain members. CPs address the social determinants of health. ACOs will be required to partner with CPs so that care can be coordinated. CPs are expected to launch in June 2018.



BH Community Partners (BH CPs) will provide comprehensive care management including coordination of physical and behavioral health, bringing in BH clinical management expertise to overall care coordination

Long-Term Services and Supports Community Partners (LTSS CPs) will coordinate between physical health and LTSS systems

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Provider Resources: Information and Training



MassHealth website

- MassHealth website with access to information, notices, and tools relevant to providers
- www.mass.gov/masshealth-for-providers



Provider bulletins and Fact Sheets

- Provider bulletins and Fact Sheets will be issued around key events (i.e. Special Assignment, CP go-live, Provider Directory launch, etc.)



Webinars

- Webinar series will be hosted by the MassHealth Customer Service Center (CSC) to train providers on a variety of topics
- www.masshealthtraining.com (Note: a valid PID/SL is required to access these resources)



MassHealth Innovations

- MassHealth page describing innovations in delivery system and payment models, patient engagement, and the use of data to monitor and improve performance
- www.mass.gov/hhs/masshealth-innovations

Upcoming PCDI Provider Training Webinars



Phase 1: Awareness

2017 Provider Webinar Schedule

December 2017	
Date	Time
12/12/17	1:00 PM
12/14/17	10:00 AM
12/19/17	1:00 PM
12/21/17	10:00 AM

To enroll in a webinar session, please register at the **MassHealth Learning Management System (LMS)** via www.masshealthtraining.com and create your profile. Once you are registered, select the preferred course date and time available.



Upcoming PCDI Provider Events and Trainings

Schedule of Upcoming PCDI Provider Events			
January 2018			
Location	Date	Time	Occupancy
Bristol Community College 777 Elsbree Street, Fall River, MA 02720	January 10, 2018	Session 1 10:00 AM to 11:00 AM Session 2 1:00 PM to 2:00 PM	150
Holiday Inn 30 Washington Street, Somerville, MA 02143	January 19, 2018	Session 1 10:00 AM to 11:00 AM Session 2 1:00 PM to 2:00 PM	70
Lawrence Public Library 51 Lawrence Street, Lawrence, MA 01841	January 25, 2018	Session 1 10:00 AM to 11:00 AM Session 2 1:00 PM to 2:00 PM	200
UMass Medical School Amphitheater 333 South Street, Shrewsbury, MA 01545	January 31, 2018	Session 1 10:00 AM to 11:00 AM Session 2 1:00 PM to 2:00 PM	100
March 2018			
Location	Date	Time	Occupancy
Holiday Inn 30 Washington Street, Somerville, MA 02143	March 5, 2018	Session 1 10:00 AM to 11:00 AM Session 2 1:00 PM to 2:00 PM	70
Castle of Knights 1599 Memorial Drive Chicopee, MA 01020	March 21, 2018	Session 1 10:00 AM to 11:00 AM Session 2 1:00 PM to 2:00 PM	300
Berkshire Crowne Plaza 1 West Street, Pittsfield, MA 01201	March 28, 2018	Session 1 10:00 AM to 11:00 AM Session 2 1:00 PM to 2:00 PM	100
To attend one of our events, please register at the MassHealth Learning Management System (LMS) via www.masshealthtraining.com and create your profile. Once you are registered, select the preferred event date and time available under the Community Based Training Events tab.			