Wednesday, 10:00 – 11:30, D3

Update and Lesson Learned Implementing the MI Health Link Program

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Objectives:

Identify effective methods for the practical application of concepts related to improving the delivery of services for persons with developmental disabilities

Develop strategies to promote community inclusion in meeting the needs of persons with developmental disabilities

Notes:

MI HEALTH LINK DWMHA

(Integrated Care Dual Eligible Demonstration Program)

Update and Lesson Learned Implementing the MI Health Link Program

32nd Annual Developmental
Disabilities Conference
Kellogg Hotel & Conference Center
East Lansing, MI
April 18-20, 2016

What is MI Health Link?

MI HEALTH LINK

- New CMS-MDCH demonstration program that will integrate Medicare and Medicaid benefits, rules and payments into **one** coordinated delivery system
- Capitated payment using new health plans called Integrated Care Organizations (ICOs) and existing Michigan Pre-paid Inpatient Health Plans (PIHPs

DWMHA

Who is Eligible?

MI HEALTH LINK

People who  + 

- Are age 21 or over **AND** are eligible for full benefits under both Medicare and Medicaid
- Reside in one of the four demonstration regions
- Are not enrolled in hospice

People enrolled in PACE and MI Choice are eligible but will not be passively enrolled in MI Health Link **and must leave their programs before joining MI Health Link**

DWMHA

Covered Benefits

MI HEALTH LINK

It is an insurance…..

- All acute and primary health care covered by Medicare and Medicaid
- All behavioral health services covered by Medicare and Medicaid
- Medications (no co-payments)
- Dental and vision
- Home and community-based services
- Nursing home care
- Other benefits offered by the health plans





DWMHA

What is Good?

MI HEALTH LINK

It is a program designed to improve care….

- No co-payments or deductibles for services, including prescriptions
- One health plan to manage Medicare & Medicaid services
- Care coordinator and integrated care team for all enrollees
- Holistic, person-centered care, not just doctor-driven medicine
- Increased data sharing capacity
- Simplified billing with single payer source
- The delivery system will work together, not separated




DWMHA

MI Health Link- Enrollee Protections

MI HEALTH LINK

- **People living in out-of-network nursing facilities at the time of MI Health Link enrollment can continue to stay**
- **Health plans will be required to include enrollees on ICO advisory councils**
- **MI Health Link Advisory Committee is being formed**
- **A MI Health Link Ombudsman Program has been created**
- **An appeal process that incorporates and coordinates Medicare and Medicaid requirements**

DWMHA

Can I Stay with My Current Doctors? Continuity of Care

- **People living in out-of-network nursing facilities at the time of MI Health Link enrollment can continue to stay**
- **Health plans will be required to include enrollees on ICO advisory councils**
- **MI Health Link Advisory Committee is being formed**
- **A MI Health Link Ombudsman Program has been created**
- **An appeal process that incorporates and coordinates Medicare and Medicaid requirements**

Who Will Administer the Services?

Four (4) Regions of the State were selected to implement the Demonstration Program. Eight (8) ICOs were awarded.

- **Region 1: Upper Peninsula-**
  ICO- UP Health Plan
- **Region 4: Barry, Berrien, Branch, Calhoun, Cass, Kalamazoo, St. Joseph, and Van Buren**
  ICOs- Meridian Health, Aetna Better Health
- **Region 7: Wayne; and Region 9: Macomb**
  ICOs- Aetna Better Health, AmeriHealth of Michigan; Centene/Fidelis SecureCare; Hap/Midwest; Molina Healthcare

Who Will Administer the Services?

- **Health plans** with experience providing Medicare and/or Medicaid services will manage acute, primary, pharmacy, dental, and long term supports and services
- **Regional PIHPs** will continue to coordinate services for people with mental illness, intellectual/developmental disabilities and substance use disorders
  - –Delegated Medicare managed care functions

Status – Care Coordination/ Utilization Management

Detroit Wayne

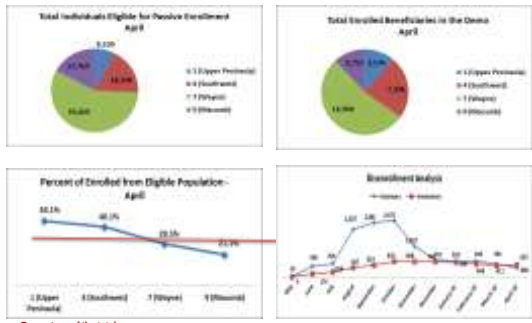
- Management of benefits for the dual eligible population would be at the PIHP level, not the Managers of Comprehensive Networks (MCPN) level.
- Managed care infrastructure was enhanced/developed in provider network management/credentialing; utilization management; claims management; information technology; care coordination at the PIHP level; and grievance/appeals.
- Contracts with providers and hospitals were developed.
- Access Center receives & reviews Level I Assessment Referral from the ICO, conducts screening as necessary. Schedules appointment with contracted providers for completion of Level II Assessment.
  - –Enrollees with out of network providers are scheduled with the PIHP Care Coordinators for Level II Assessment. Process is initiated for credentialing/contracting with out of network provider.
- PIHP Care Coordinators function as Care Coordinators for the SUD, and out of network enrollees. Provide oversight of Level II completion within timelines for contracted providers. Facilitate discharge/transitions of care and residential placement with MCPNs and contracted BH providers.

Understand 5 Core Objectives

Five Core Objectives

1) Provides access to supports and services through person-centered planning and service delivery process, focused on enrollee satisfaction.
   - •Improve quality of care.
   - •Reduce health disparities.
2) Creates service and supports coordination model in Care Bridge that communicates with and links back to all domains of the delivery system.
3) Streamlines administrative processes for enrollees and providers.
4) Eliminates barriers to and encourages home and community based services.
   - •Improve transitions among care settings.
   - •Ability to self-direct care, be involved in one's care, and live independently in community.
5) Demonstrates cost effectiveness for State and federal governments through improved supports and care coordination, financial realignment, and payment reforms.

Source: MDCH

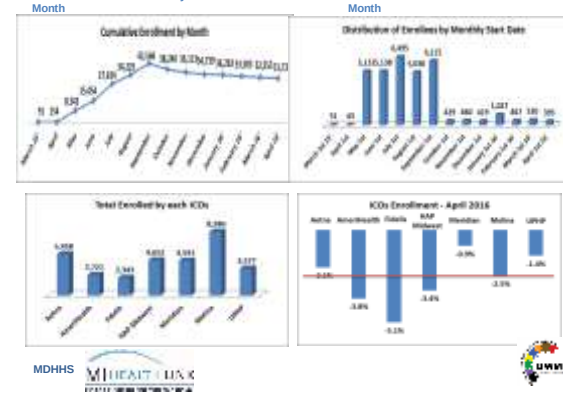


MDHHS

CHAMPS Data Warehouse: 04/11/2016

VI. Cumulative Enrollment by Month

IV. Total New Enrollees for each Month



MDHHS

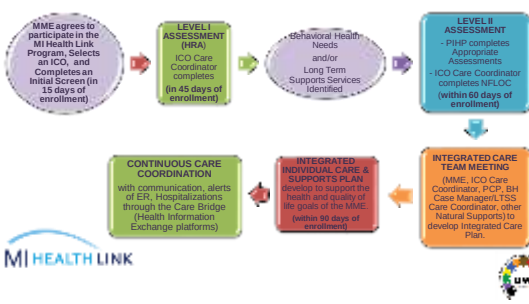
Execution in a Medicaid World

Medicare is a different animal

MI HEALTH LINK

Status – Care Coordination/ Utilization Management

- **After Enrollment- Care Coordination**



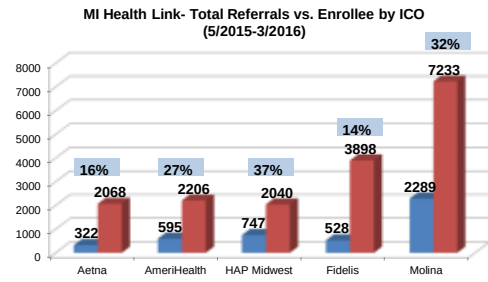
MI HEALTH LINK

Care Coordination

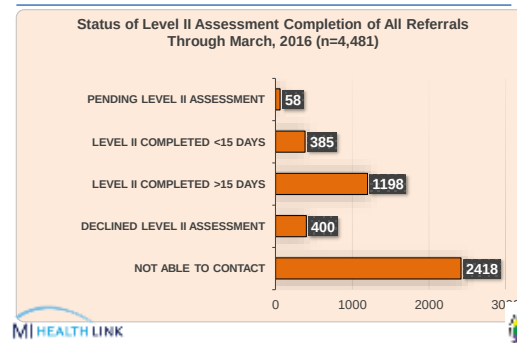
MI HEALTH LINK

PROGRAM ROUTE	SERVICE ROUTE
ICO Care Coordinator Completes the Level I Assessment (Health Risk Assessment) 45 days of enrollment	MI Health Link enrollee goes to provider for Behavioral Health services
If behavioral Health, Referral to PIHP for Level II Assessment (SIS, Locus, ASAM) 60 days of enrollment	Behavioral health provider completes the Level II Assessment
Collaboration on Integrated Care Team to develop Integrated Individual Care Supports Plan 90 days of enrolment	Behavioral health provider reaches out to ICO Care Coordinator for Level I Assessment and /or Integrated Care Team .

Status of Program Route



Status of Program Route



Status – Care Bridge

EXAMPLE OF THE ELECTRONIC REFERRAL FROM THE ICO

46 Level 1 Referrals

02/17/2016 Overdue by 45 days	AETNA Ref #: 0047719348	0123456 1111 Beverly Ct DETROIT, MI 48204 DOB:	Pending Level 2	New Center Community Services, Inc.	View Print Consumer Chart Attach Existing Screening Access Call Add Level 2 Void this Referral Return to Pending Screening

- Related Documents
- 0 Attachments
- 5 Notes

Date / Time	Title
02/17/2016	Dual Eligible HRA ViewPDF
02/19/2016 1:45PM	Clinical Screening ViewPDF

Status – Care Bridge

EXAMPLE OF NOTES REGARDING

days	AETNA Ref #: 0047719348	0123456 1111 Beverly Ct DETROIT, MI 48204 DOB:	Pending Level 2	New Center Community Services, Inc.	View Print Consumer Chart Attach Existing Screening Access Call Add Level 2 Void this Referral

- 2 Related Documents
- 0 Attachments
- Notes

Note Date	Contact Type	Note	
			Add Note
04/15/2016	Call to enrollee	4th Attempt - consumer did not present for intake. Writer attempted to call consumer on 4/14/16 and reschedule, no answer. Case	Change View Delete
04/07/2016	Appointment/ Level II Enclosed	3rd attempt - Writer called consumer and rescheduled her missed intake to 4/14/16 @ 2pm. Consumer states she missed appointment	Change View Delete
03/31/2016	Appointment/ Level II Enclosed	2nd Attempt - Writer called consumer and rescheduled her missed intake to 4/7/16 @ 2pm. Her case should remain open at this time	Change View Delete
03/16/2016	Appointment/ Level II Enclosed	1st Attempt - writer contacted consumer and rescheduled her missed intake appointment to 3/29/16 @ 2pm. Her case should remain o	Change View Delete
02/24/2016	Call to enrollee	Consumer initial intake appointment is originally scheduled through MIWIN for 3/16/16. Writer spoke to consumer on 2/24/16 to se	Change View Delete

Return to Pending Screening

Status – Care Bridge

Referral Date	ICO	Consumer	Status	Provider
04/07/2016	MOLINA Ref #: MOL140335514043117	0123456 11111 Evergreen Rd Detroit, MI 48223 DOB:	Sent to ICO	Neighborhood Service Organization

- Level 2
- 4 Related Documents
- 0 Attachments
- 0 Notes

Assessment Date	Care Coordinator	
04/11/2016	June Cleaver	Change View Delete Print View CCDA

Status – Care Bridge

Name: (XX/Female) Member ID: **111111** Status: **MH:** Open **SUD:** Closed

Date of Birth SSN: XXXXXXXX
Address Gender: Female
1111 Evergreen Rd Home Phone: 313-123-4567
Detroit, MI 48223

Current Assignments
MCPN: ConsumerLink Network (as of 10/23/2009)
MI/DD: DD
CRSP: Neighborhood Service Organization
MI Health Link: Eff: 07/01/2015 ICO: MOLINA HEALTHCARE OF MICHIGAN INC

Chart Documents
Diagnosis
Health Information
Eligibility/Insurance

Level 1 Referral
Referral Date ICO Referral Number
04/07/2016 MOL140335514043117
ICO IdentifierICO Enrollment Date
MOLINA 07/01/2015
Level 2
Level 2 Assessment Date
04/11/2016
Care Coordinator
Care Coordinator NameCare Coordinator Phone
June Cleaver 313-875-7601
Care Coordinator Agency
Neighborhood Service Organization
Population
Co-Occurring
I / DD
Low to moderate
SMI
SUD
Disposition
L2A Completed
L2A Completed Late
L2A Not Completed
Locus Composite Score
Clinical Summary
Documentation
Date Title
05/26/2015Dual Eligible SIS View Print
02/16/2016Dual Eligible BPS View Print
Record Added Record Changed
abcdef 04/11/2016 08:54:52 AM abcdef 04/11/2016 08:54:52 AM

CONSUMER DASHBOARD

- Consumer Header
- CMT Alerts
- CC360
  - Diagnoses
  - Services
  - Providers
  - Medications
- External EHR Documents
- Access to HIE Portal (PIX Chart)

25

CARECONNECT360 PANELS

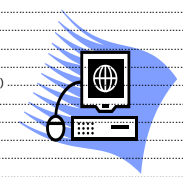
- Loaded Weekly from DWMHA CC360
- Data Aggregation
- Filters on all columns
- Sortable columns

CMT INTEGRATED HEALTH PROFILES

- QI Alerts
- Diagnoses
- Health Alert Outliers
- Pharmacy Alerts
- Medical Events

HEALTH INFORMATION EXCHANGE (PIX CHART)

Status – Integrated Care Bridge Record Version 1
Effective April 1, 2016



MI HEALTH LINK

Provider Experience- Community Living Services, Inc.

- Who we are
- Nonprofit 501 (c)(3) company headquartered in Wayne, MI and a division in Oakland County
- Manager of a Comprehensive Provider Network (MCPN) for the Detroit Wayne Mental Health Authority (DWMHA)
- Core Provider for the Oakland County Community Mental Health Authority (OCCMHA)
- Directly provide Supports Coordination and Peer Mentoring services

MI HEALTH LINK

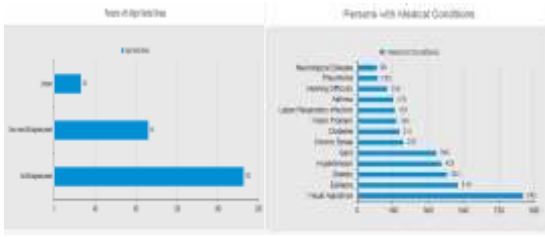
Provider Experience- Community Living Services, Inc.

Who we serve
Over 3,000 individuals with Intellectual/Developmental Disabilities in Wayne County

Provider Experience- Community Living Services, Inc.

About 1,000 individuals with Intellectual/Developmental Disabilities in Oakland County

Provider Experience- Community Living Services, Inc.



- Persons we support may also have co-occurring mental health concerns.
- Persons we support may also have co-occurring medical health concerns.

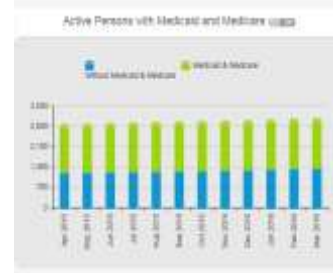
Provider Experience- Community Living Services, Inc.

Support both children and adults in Wayne County and adults in Oakland County

Provider Experience- Community Living Services, Inc.

About 1/3 individuals supported in Wayne County self-direct their budgets and all of the individuals supported in Oakland County self-direct their budgets

Provider Experience- Community Living Services, Inc.



A little over half of persons supported in Wayne County division are dual eligible for both Medicare and Medicaid

Provider Experience- Community Living Services, Inc.

MI Health Link Enrollment

- Around half of the CLS dual eligible population was passively enrolled in MI Health Link
- Many individuals have since opted out
- Notification of enrollment
- Redetermination
- Medical provider participation and awareness

Provider Experience- Community Living Services, Inc.

Level II referrals

- Level II process
- MI Health Link Orientation
- Completing and Uploading documents

Working with ICO Care Coordinators

- Opportunity to provide education regarding person centered planning
- Individual Integrated Care and Supports Plan (IICSP)
- Turnover in assigned ICO Care Coordinator

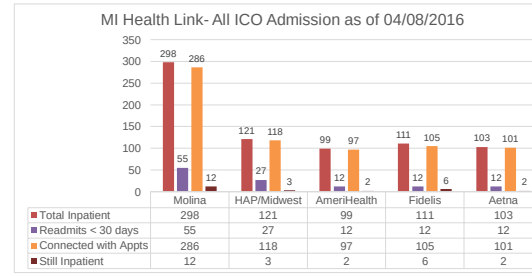
"Nothing About Me, Without Me"

Provider Experience- Community Living Services, Inc.

Changes in authorization and claims submission

- Entering authorizations
- Obtaining documentation of services
- Coordinating benefits for dual eligible in MI Health Link and those not in MI Health Link

Improving Transitions of Care with MI Health Link



	Molina	HAP/Midwest	AmeriHealth	Fidelis	Aetna
Total Inpatient	298	121	99	111	103
Readmits < 30 days	55	27	12	12	12
Connected with Appts	286	118	97	105	101
Still Inpatient	12	3	2	6	2

Improving Transitions of Care with MI Health Link

Success Stories Coordinating with the ICO for complex MI Health Link enrollees with frequent admissions.....

Status-5 Core Objectives

1) Provides access to supports and services through person-centered planning and service delivery process, focused on enrollee satisfaction.
   - Improve quality of care. Reduce health disparities.

1- Minimal Improvement **2** .... 3- Moderate Improvement..... 5- High Improvement

1) Creates service and supports coordination model in Care Bridge that communicates with and links back to all domains of the delivery system

1- Minimal Improvement.. **2** .. 3- Moderate Improvement..... 5- High Improvement

3) Streamlines administrative processes for enrollees and providers.

1 Minimal Improvement..... 3- Moderate Improvement..... 5- High Improvement

Source: MDCH

Status- 5 Core Objectives

4. Eliminates barriers to and encourages home and community based services.
   - –Improve transitions among care settings.
   - –Ability to self-direct care, be involved in one's care, and live independently in community.

• 1- Minimal Improvement..... **2** 3- Moderate Improvement..... 5- High Improvement

5. Demonstrates cost effectiveness for State and federal governments through improved supports and care coordination, financial realignment, and payment reforms.

• 1- Minimal Improvement.... **2** 3- Moderate Improvement..... 5- High Improvement

Source: MDCH

Lessons Learned

- Medicare is a different animal
  - Services: Mild-to-Moderate; In-Patient Psych.
  - Practitioner and organization Medicare IDs, credentialing.
  - NCQA.
  - Reporting.
  - Policies & Procedures.
  - Delegated managed care functions

- Beneficiary and Provider education and engagement is a key factor for success.
- Non contracted provider processes.
- Start up resource commitments were substantial for ICOs and PIHPs over 1.5 year period and ongoing:
  - New and enhanced IT systems and software
  - Organization wide development of processes, procedures and policies
  - New personnel and adjustment of some current employee roles/job descriptions
- Constant administrative and clinical communications channels and contacts among and between MDHHS, ICOs and PIHPs are essential

Opportunities in the works…

- Education of eligible beneficiaries and stakeholder about MI Health Link Program
- Opt Out Rates
- Assessment timeframes
- Person Centered Planning/Integrated Care Teams
- "Care Bridge" , Behavioral Health Consent
- Accuracy of enrollment files
- Access to Medicare data
- Delegation Oversight

Questions & Answers

www.michigan.gov/mihealthlink
www.dwmha.com

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