



**Department
of Health**

Office of
Health Insurance
Programs

MLTC Update

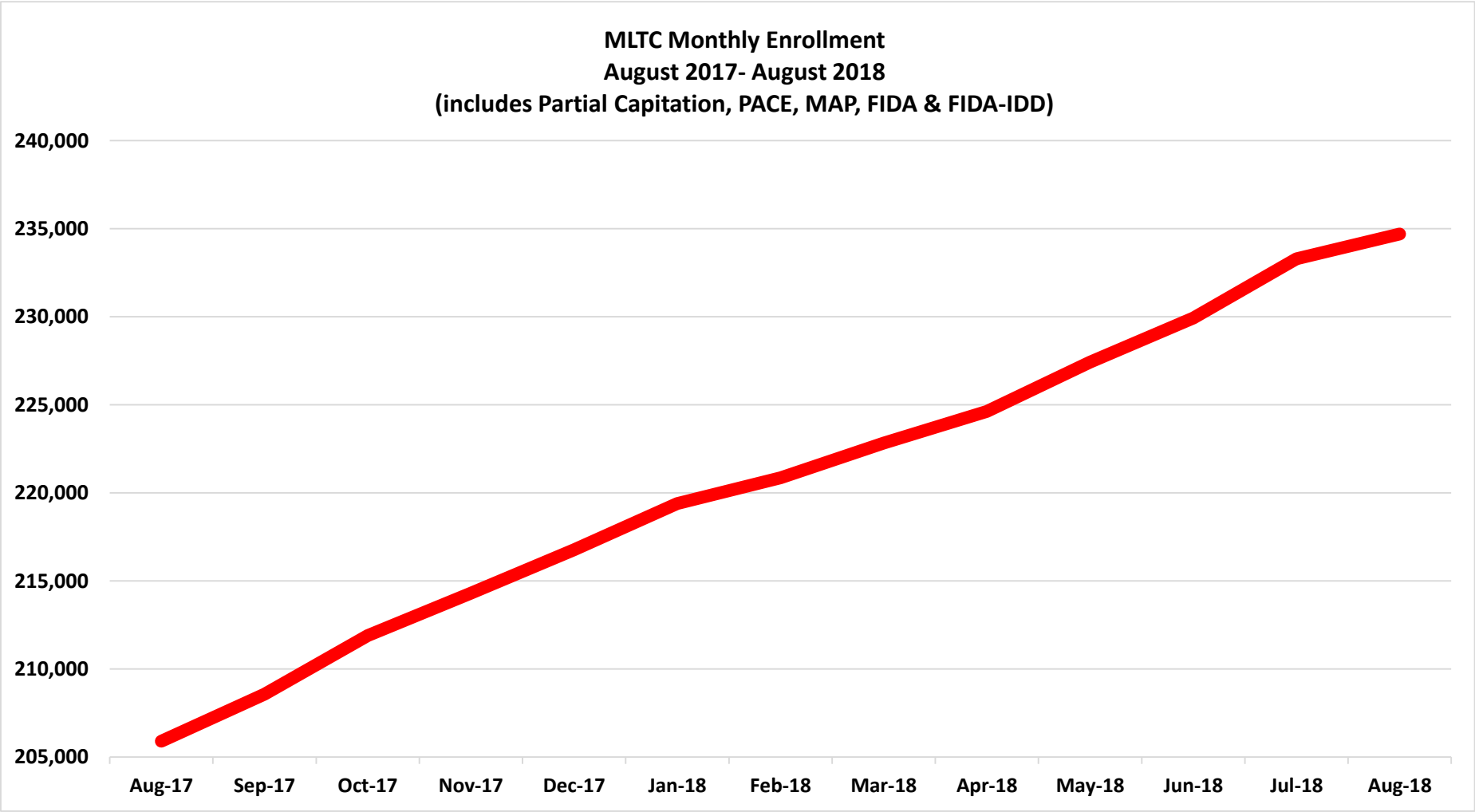
Policy and Planning Meeting

September 13 , 2018

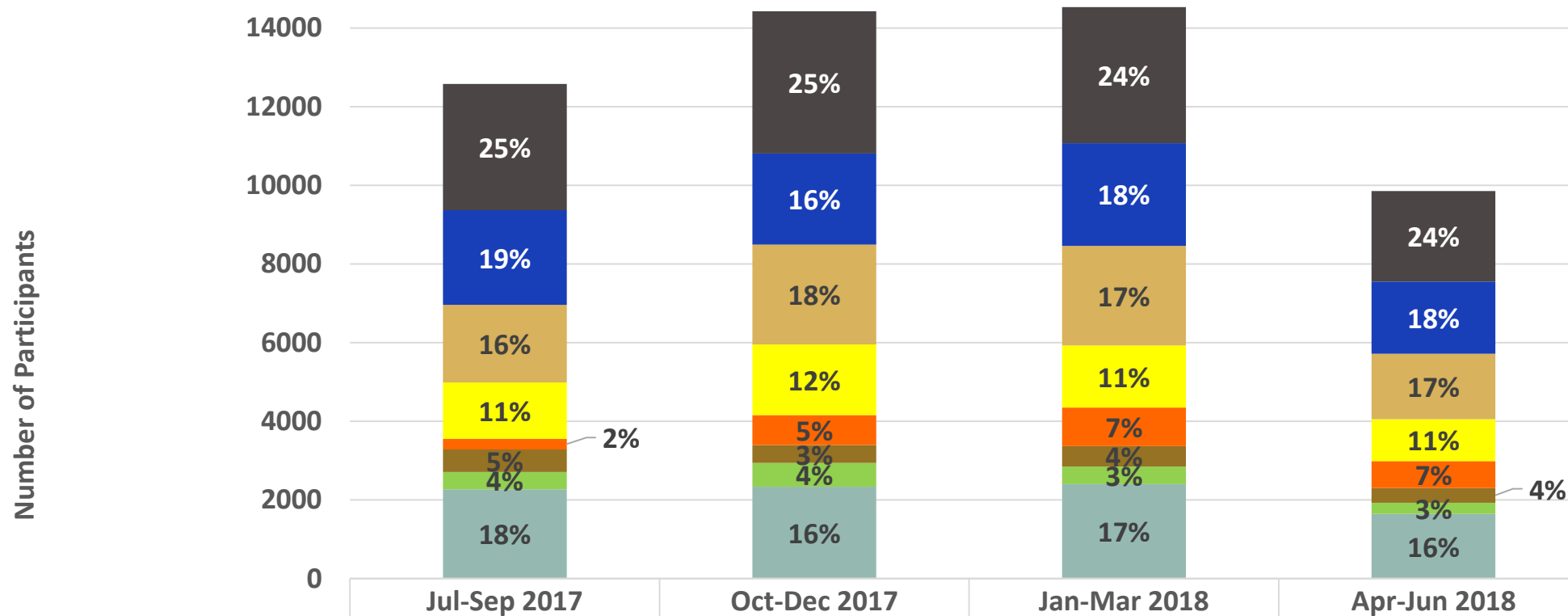
MLTC Statewide Enrollment

	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	YTD Percent enrollment increase from end of 2017
MLTC Product	Enrollment													
Partial Cap	186,626	189,071	192,273	194,455	196,859	199,442	200,799	202,513	204,025	206,438	208,628	211,526	212,736	8.07%
PACE	5,705	5,701	5,737	5,746	5,726	5,733	5,685	5,670	5,654	5,678	5,657	5,689	5,663	-1.10%
MAP	8,356	8,598	8,725	8,928	9,057	9,243	9,495	9,812	10,164	10,489	10,803	11,206	11,459	26.52%
FIDA	4,610	4,566	4,507	4,468	4,405	4,237	4,117	4,037	3,969	3,927	3,895	3,858	3,797	-13.80%
FIDA IDD	598	625	662	701	719	737	764	796	818	888	941	1,013	1,048	45.76%
TOTAL	205,895	208,561	211,904	214,298	216,766	219,392	220,860	222,828	224,630	227,420	229,925	233,292	234,703	8.27%
Growth from previous month		2,666	3,343	2,394	2,468	2,626	1,468	1,968	1,802	2,790	2,505	3,367	1,411	
Percent Change from previous month		1.29%	1.60%	1.13%	1.15%	1.21%	0.67%	0.89%	0.81%	1.24%	1.10%	1.46%	0.60%	

MLTC Statewide Enrollment



CFEEC Evaluation Marketing/Referral Sources



Home Care Agencies and Health Plans Combined: 42%

While referral sources have remained relatively constant, the number of evaluations has **decreased** recently.

■ Home Care Agency	3209	3616	3464	2302
■ Health Plan	2408	2315	2605	1841
■ Family/Friend/Neighbor	1968	2537	2536	1660
■ Doctor/Hospital	1435	1800	1576	1064
■ Social Worker	269	760	982	683
■ LDSS	572	456	518	380
■ Community Center	443	602	449	283
■ Others	2271	2339	2403	1645
Totals	12,575	14,425	14,533	9,858

2018-19 Enacted Budget Update:

- **LHCSA Contract Limitations**

- LHCSA guidance was released on August 20th regarding the statutory limitation on the number of licensed home care service agencies (LHSCAs) a Partial Capitation plan may have in its network
- The law that establishes these methodologies is effective October 1, 2018
- To read the full guidance on this limitation of contracted LHCSAs please go to:
https://www.health.ny.gov/health_care/medicaid/redesign/mrt90/mltc_policy/lhsca_contract_guidance.htm
- The Department is reminding MLTC plans that they may request an exception to this law targeted to specific patient needs
- The Department intends to release an FAQ for the guidance; please email questions to LHCSAExceptions@health.ny.gov

2018-19 Enacted Budget Update

- **Nursing Home and Lock-In**

- The Department issued formal Public and Tribal Notices for comments on the intention to amend the 1115 waiver to create a lock-in mechanism for MLTC Partial Capitation plans and to limit the partial capitation nursing home benefit
- The notice period ended on August 20th; implementation dates are pending CMS approval

- **Social Adult Day Care:**

- The Department intends to issue guidance in September that will highlight various recommendations to efficiently utilize the Social Adult Day benefit

- **Authorization vs. Utilization:**

- The Department is working with Maximus on implementing this proposal
- The Department will issue guidance to plans in September

Community First Choice Option (CFCO)

- The Department held two stakeholder meetings in August to provide an update on the operationalization of CFCO in FFS and Managed Care:
 - August 23rd meeting with the LDSS
 - August 29th meeting with MMC and MLTC Plans
- At both of these meetings, the Department shared the following draft guidance materials:
 - Service Authorization Guidelines on AT, E-Mods, and V-Mods
 - Person-Centered Service Planning Guidance
 - Aide Training Program

Community First Choice Option (CFCO)

- The Department gave a **two week** deadline to each stakeholder group for returning feedback on the Service Authorization Guidelines and the Person-Centered Service Planning Guidance
 - For the LDSS, this date was September 6th
 - For MMC and MLTC Plans, this date was September 12th
- The Department gave a **four week** deadline to each stakeholder group for returning feedback on the Aide Training Program
 - For the LDSS, this date is September 20th
 - For MMC and MLTC Plans, this date is September 26th
- Please direct any comments or questions to CFCO@health.ny.gov

Minimum Wage Implementation Guidance

- The Department has added an online resource to the DOH MRT website that provides information and clarification regarding minimum wage compliance and rate reimbursements
- The following link leads to a series of guidance documents that have been distributed to Managed Care Organizations (MCOs):
https://www.health.ny.gov/health_care/medicaid/redesign/min_wage_guidance.htm
- For January 1, 2019 contracts between MCOs and providers, the Department recommends that contract amendments be executed no later than November 1, 2018

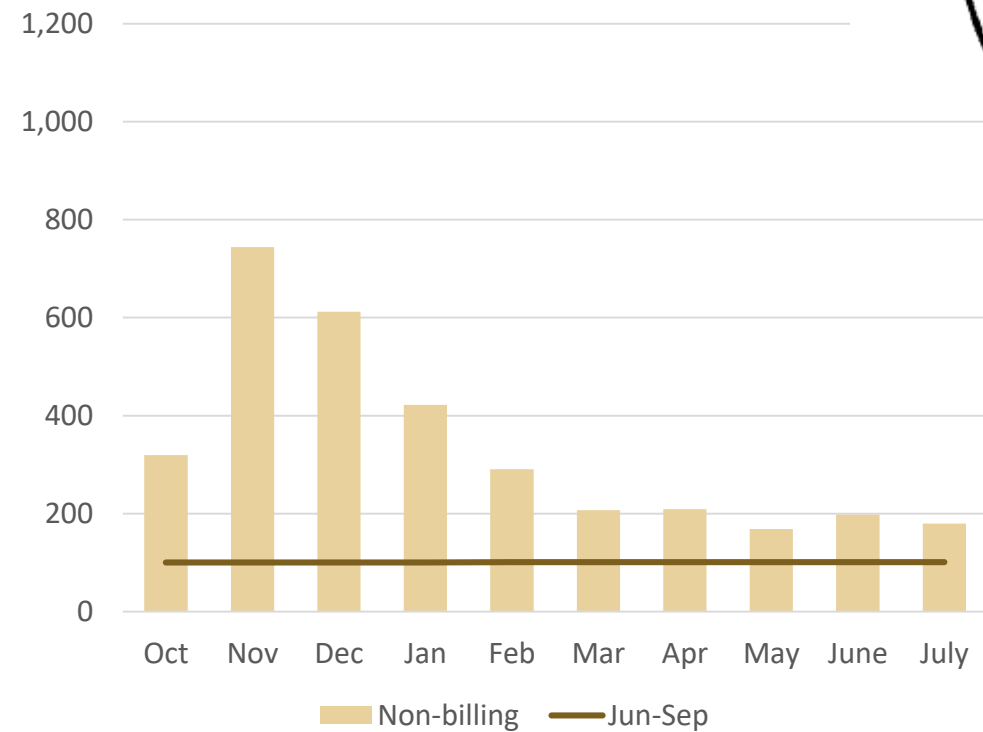
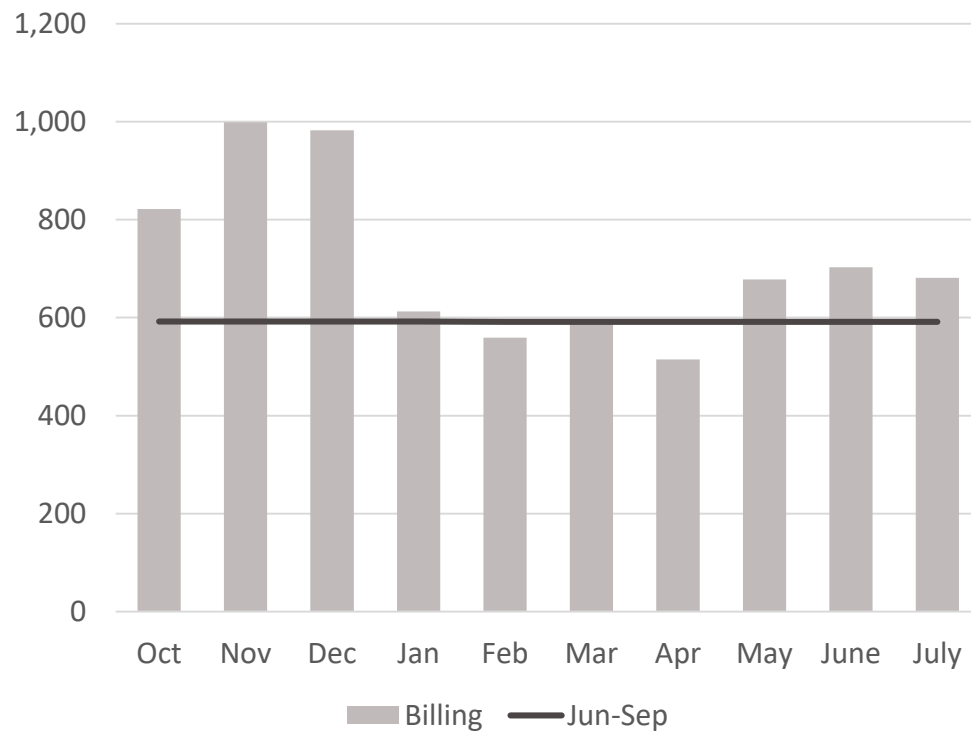
MLTC Workforce

- The Q1 reporting period ended on June 30, 2018
- On September 4, 2018 the Department sent out a reminder email to have their Q1 reports submitted
 - Please submit reports as soon as possible to the BML, MLTCWorkforce@health.ny.gov
 - If there is no activity from your Workforce Investment Organizations for Q1, remind them to indicate that in the reports so the Department can be made aware
- The Q2 reporting period closes on September 30, 2018
- The Q2 reports are due by October 31, 2018
- The first MLTC Workforce Investment Program Learning Series is scheduled for September 28, 2018 from 10-2pm
 - The focus will be on best practices and will provide the WIOs and MLTCPs an opportunity to learn what others in the program are doing

Potential Terminations and Access to Care

- CMS has requested states consult with CMS in circumstances where a termination action would result in access to care concerns
- As States work towards full compliance, CMS encourages states to collaborate closely with MCOs to ensure adequate network coverage and to work through concerns that may arise regarding access to care
- DOH will be outreaching to MCOs to identify MCO contacts on a project to identify providers who have not enrolled and should be terminated, as well where a potential termination would result in an access to care issue

Average Number of New Applications Received Weekly



Non-Enrollable Providers *(not an all-inclusive list)*

<u>PROVIDER TYPE</u>	<u>ENROLLMENT REQUIREMENT</u>
Social Adult Day Care	Not required to enroll
Home Delivered Meals	Not required to enroll
Licensed Mental Health Counselor	Not required to enroll
Licensed Marriage Family Therapist	Not required to enroll
Certified Reg. Nurse Anesthetists (CRNA)	Not required to enroll
Applied Behavioral Analyst	Not required to enroll
Adult Home and Community Based Services OMH	Not required to enroll
LMSW (Licensed Master Social Worker)	Not required to enroll
Licensed Mental Health Counselor	Not required to enroll
Licensed Marriage Family Therapist	Not required to enroll
Applied Behavioral Analyst	Not required to enroll
Adult Home and Community Based Services OMH	Not required to enroll
LMSW (Licensed Master Social Worker)	Not required to enroll
Registered Dietitians	Only if they are Certified Diabetes Educators