



COMMONWEALTH of VIRGINIA

Office of the Governor

Robert F. McDonnell
Governor

May 29, 2012

Melanie Bella, Director
Medicare-Medicaid Coordination Office
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Dear Ms. Bella:

I am writing to express my full support for the *Integrating Medicare and Medicaid for Dual Eligible Individuals* draft demonstration proposal, submitted by the Virginia Department of Medical Assistance Services (DMAS). The proposed Demonstration will significantly advance the shared goals of both the Commonwealth and the Centers for Medicare & Medicaid Services (CMS) to expand access to care and improve the lives of dual eligible individuals, while streamlining the delivery of services and achieving cost savings.

Dual eligible individuals have among the most complex care needs of any Medicaid or Medicare members, including chronic conditions, behavioral health needs, and disabling conditions. Therefore, addressing quality and costs for these individuals in the Commonwealth has been a priority of my administration. As such, I directed the state to pursue the Demonstration and I am committed to the Demonstration's success.

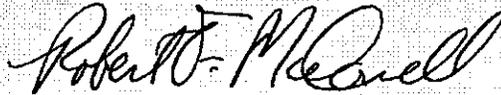
I think that you will find the Commonwealth is well positioned to significantly contribute to CMS' plan to enhance the quality of care furnished to dual eligibles individuals. Specifically, under the Commonwealth's proposed Demonstration, individuals will benefit from expanded access to services and person-centered care coordination. Interdisciplinary teams will also work with members to plan each individual's primary and acute, behavioral health, prescription drugs, and long term services and supports that best meet the individual's needs. Plan performance will be rigorously monitored to ensure the delivery of high quality care.

DMAS has taken steps to implement innovative strategies to improve care and reduce health care costs for the Commonwealth's most vulnerable populations. I believe that this proposal, which was developed based on input from a wide variety of stakeholders, represents an important opportunity to make further progress on this important issue. The Secretary of Health and Human Resources, Dr. William Hazel, and the human service agencies within his Secretariat have been involved in the proposal's planning process. They stand ready to assist DMAS as the lead agency for the continued development and implementation of the Demonstration.

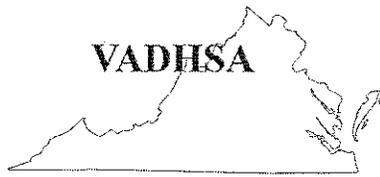
Melanie Bella, Director
May 29, 2012
Page Two

We look forward to continued partnership with CMS on this Demonstration and strategizing ways to enhance the quality of care furnished to dual eligibles individuals, with the goal of increasing access to timely, efficient and effective care without the added burden of navigating multiple systems and processes.

Sincerely,

A handwritten signature in black ink, appearing to read "Robert F. McDonnell". The signature is fluid and cursive, with a large initial "R" and "M".

Robert F. McDonnell



Virginia Adult Day Health Services Association

"Your Partner in Care Giving."

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Consultant

Jane Woods
Driftwood Consulting
703-966-0147

May 18, 2012

Melanie Bella
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244-1850

Dear Ms. Bella:

The Virginia Adult Day Health Services Association (VADHSA) is writing this letter in support of the Virginia Department of Medical Assistance Services (DMAS) Demonstration proposal to integrate care for individuals 21 years and older who are eligible for both Medicare and Medicaid (dual eligible"). This initiative is an important step in improving care for Virginia's most vulnerable populations.

The Virginia Adult Day Health Services Association (VADHSA) represents many of the adult day health care providers in Virginia, all of them serving dual eligible individuals through the current elderly and disabled consumer directed waiver. Our goal is to promote and support adult day services as a viable community based option for long-term care in Virginia.

We believe that the Demonstration will help eliminate barriers to efficient and effective care by: (1) increasing access to comprehensive, appropriate, and cost-effective services; (2) integrating various administrative processes for beneficiaries and providers; and (3) establishing coordinated, person-centered care. These efforts will promote timely, efficient and effective care without the added burden of navigating multiple systems and processes.

More specifically, under the proposed Demonstration, individuals will benefit from expanded access to services and care coordination through person-centered care teams that will include medical providers, behavioral health, long term services and supports, and other individuals (e.g., family caregivers) identified as important contributors to a member's care. The Demonstration will also give individuals and their care teams the flexibility to develop a package of acute, behavioral health, long-term services and supports, and community support services that best meet the individual's health.

DMAS has taken steps over the past few years to implement several innovative strategies to improve care and reduce health care costs for Virginia's most vulnerable populations. We believe that this proposal, which was developed through a collaborative process with a wide variety of stakeholders, represents an important opportunity.

We look forward to having this demonstration approved and implemented with adult day centers playing an integral part in helping to provide and manage care for a population we are already experienced in serving.

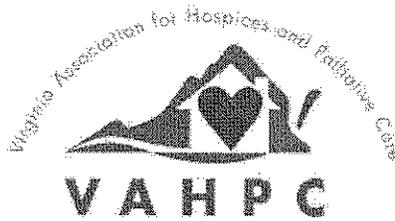
Sincerely,

Lynne K. Seward, CEO

Lynne K. Seward

President

Virginia Adult Day Health Services Association



May 15, 2012

Melanie Bella, Director
Medicare-Medicaid Coordination Office
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Dear Ms. Bella:

On behalf of the Virginia Association for Hospices and Palliative Care (VAHPC), I am pleased to write in support of the DMAS proposal to the Centers for Medicare and Medicaid Coordination Office (CMMCO) to participate in a 3-year Demonstration to coordinate care and create financial alignment of Medicaid and Medicare for selected dual-eligibles.

The Virginia Association for Hospices and Palliative Care consists of members who provide quality care for all persons with life-limiting illnesses. These include physicians, nurses, nursing support personnel, social workers, grief counselors, chaplains and spiritual leaders, and volunteers. Hospice services save money while enhancing quality of life. For example, a study by Milliman found that hospice saved approximately \$7,000 per Medicaid beneficiary enrolled. Savings were attained by avoiding unnecessary and undesired hospitalization, providing medications and durable medical equipment within the hospice per diem, and extending high quality end of life care to nursing home residents.

We believe that the Demonstration has the potential to integrate administrative processes for dually eligible Medicaid and Medicare beneficiaries while reducing barriers to care and unnecessary duplication of services

If the CMMCO approves Virginia's application for this Demonstration, VAHPC will participate in the stakeholder advisory task force meetings. Further, we will encourage our members to partner with the managed care entities that will be implementing the Demonstration. Hospice needs to be an integral component of the Demonstration, and we are fully committed to working with DMAS on this worthy project.

If you have any questions, do not hesitate to contact me.

Sincerely yours,

Brenda Clarkson, Executive Director
Virginia Association for Hospices and Palliative Care



Virginia Association Of
Community Services Boards, Inc.
Making a Difference Together

*Premier Mental Health,
Developmental,
and Substance Use
Disorder Services in
Virginia's Communities*

10128 W. Broad Street, Suite B • Glen Allen, VA 23060 • (804) 330-3141 • Fax (804) 330-3611 • Email vacsb@vacsb.org

May 23, 2012

Melanie Bella, Director
Medicare-Medicaid Coordination Office
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Dear Ms. Bella:

On behalf of the Virginia Association of Community Services Boards (VACSB) and our forty member Community Services Boards (CSBs), please accept this letter in support of the Virginia Department of Medical Assistance Services' (DMAS') Demonstration proposal to integrate care for individuals 21 years and older who are eligible for both Medicare and Medicaid ("dual eligibles"). We view this initiative as important in improving care for a subset of Virginia's most vulnerable populations. In particular, the VACSB is concerned with the improvement of care coordination and reduction of health disparities for individuals with serious and persistent mental illness (SPMI).

Community Services Boards (CSBs) are Virginia's local public behavioral health and developmental disabilities authorities charged by Virginia Code with assuring community services for the most vulnerable populations, among them those with SPMI who are most at risk of institutionalization and incarceration due to the severity and the social and functional limitations of their illnesses. In 2011, CSBs served 206,611 adults and children with the most severely disabling behavioral health and developmental conditions.

The movement by DMAS to include CSBs as Behavioral Health Homes within the Demonstration builds upon the valuable treatment, supports and community strategies honed over time that allow individuals with SPMI to maintain their community tenure. Utilizing CSB Targeted Case Management, behavioral health and primary care conditions will be carefully coordinated to afford each person the most flexible person-centered plan of care so that their overall health outcomes are achieved.

Utilizing the Behavioral Health Homes through CSBs within this demonstration project will help eliminate barriers to efficient, high quality care and promote positive health outcomes for dual eligibles by: (1) increasing access to comprehensive, appropriate, and cost-effective services through the most effective strategies for each subset of the dual eligible population; (2) integrating various administrative processes for beneficiaries and providers; and, (3) establishing coordinated, person-centered care through a "hands on" approach, so necessary to assist those with SPMI and their families in managing their illnesses. These efforts will promote timely, efficient and effective care without the added burden of navigating multiple

VACSB Officers: Chair, Lynne C. Crammer • 1st Vice Chair, Karen W. Grizzard • 2nd Vice Chair, Tim Steller
Secretary, Al Collins • Treasurer, J. B. Comer, Jr. • Executive Director, Mary Ann Bergeron

systems and processes, which are most often ignored by those with SPMI for whom traditional processes and strategies are highly discouraging.

Overall, under the proposed Demonstration, all included individuals will benefit from expanded access to services and care coordination through person-centered care teams that will include medical providers, behavioral health, long term services and supports, and other individuals (e.g., family caregivers) identified as important contributors to a member's care.

Please contact me if you would like further information or if you have questions.

Yours very truly,

A handwritten signature in cursive script, reading "Mary Ann Bergeron". The signature is written in black ink and is positioned below the text "Yours very truly,". A horizontal line is drawn above the signature.

Mary Ann Bergeron
Executive Director



VIRGINIA ASSOCIATION
OF HEALTH PLANS

804-648-8466 phone · 804-648-8036 fax · 1111 East Main Street, Suite 910 · Richmond, VA 23219
Email: info@vahp.org · Website: www.vahp.org

April 27, 2012

Melanie Bella, Director
Medicare-Medicaid Coordination Office
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Dear Ms. Bella:

Virginia Association of Health Plans (VAHP) is writing this letter in support of the Virginia Department of Medical Assistance Services' (DMAS') Demonstration proposal to integrate care for individuals 21 years and older who are eligible for both Medicare and Medicaid ("dual eligibles"). This initiative is an important step in improving care for a subset of Virginia's most vulnerable populations.

VAHP's member health plans include the 6 managed care organizations (MCOs) that contract with DMAS. In Virginia, the MCO program started in 1996, and will be available state-wide beginning July 1, 2012. Approximately 60% of Medicaid beneficiaries are enrolled in managed care. With this 16 year history of collaboration, the MCOs are looking forward to spreading the footprint of managed care to another portion of the Medicaid population, partnering with DMAS once again to reach the dual eligibles. We believe costs can be contained for the dual eligibles utilizing a **risk-based, managed care** coordination model under the proposed Demonstration.

We believe that the Demonstration will help eliminate barriers to efficient, high quality care and positive health outcomes for dual eligibles by: (1) increasing access to comprehensive, appropriate, and cost-effective services; (2) integrating various administrative processes for beneficiaries and providers; and, (3) establishing coordinated, person-centered care. These efforts will promote timely, efficient and effective care without the added burden of navigating multiple systems and processes.

More specifically, under the proposed Demonstration, individuals will benefit from expanded access to services and care coordination through person-centered care teams that will include medical providers, behavioral health, long term services and supports, and other individuals (e.g., family caregivers) identified as important contributors to a member's care. The Demonstration will also give individuals and their care teams the flexibility to develop a package of acute, behavioral health, long-term services and supports, and community support services that best meet the individual's health.

DMAS has taken steps over the past few years to implement innovative strategies to improve care and reduce health care costs for Virginia's most vulnerable populations. We believe that this proposal, which was developed through a collaborative process with a wide variety of stakeholders, represents an important opportunity to make further progress on this important issue. Therefore, we look forward to working with DMAS to implement the Demonstration. We strongly believe that the Demonstration will improve the health outcomes of dual eligibles and will help reduce costs by decreasing unnecessary and duplicative services.

Best regards,

A handwritten signature in black ink, appearing to read 'Doug Gray', written over a horizontal line.

Doug Gray
Executive Director

A handwritten signature in black ink, appearing to read 'Laura Lee O. Viergever', written over a horizontal line.

Laura Lee O. Viergever
Director of Policy

VIRGINIA ASSOCIATION OF CENTERS FOR INDEPENDENT LIVING

1502B Williamson Road, NE ♦ Roanoke, VA 24012
540-342-1231

May 21, 2012

Melanie Bella, Director
Medicare-Medicaid Coordination Office
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Dear Ms. Bella:

The Virginia Association of Centers for Independent Living (VACIL) has reviewed the draft State Demonstration to Integrate Care for Dual Eligible Individuals developed by the Virginia Department of Medical Assistance Services (DMAS). VACIL supports the concept of combining Medicare and Medicaid services for people dually eligible. A duals project has the potential to expand services, simplify services and enhance satisfaction with services.

The Virginia Association of Centers for Independent Living (VACIL) is a private, non-profit, consumer-directed, statewide association of the 15 Centers for Independent Living (CILs) in Virginia. VACIL advocates for the integration and inclusion of people with disabilities into all aspects of society. CILs provide four core services: advocacy; peer mentoring; independent living skills training; and information and referral. In addition to the four core services, CIL staff provide Medicaid services including facilitation for consumer-directed services, case management, and transition coordination. Each CIL is a separate, consumer-controlled, community-based, cross-disability, nonresidential, private non-profit organization. The Board and management staff of each CIL are comprised of a majority of people with disabilities.

It is important that the duals project be developed as an opt-in model to ensure that people with disabilities adequately understand their options and to have control of the decision about whether or not to participate in the developing duals project. Virginia's proposal to allow people to remain with existing providers will be important to ensuring continuity of health care.

VACIL participated in the public meetings held by DMAS to receive input on the development of the draft application. Considerable details regarding provider contracts, services and will need to be discussed and established over the next several months. VACIL looks forward to working with DMAS and others in the development of a duals demonstration project in Virginia.

Sincerely,
Karen Michalski-Karney
President

VIRGINIA'S CENTERS FOR INDEPENDENT LIVING

Access Independence – Winchester ♦ Appalachian Independence Center – Abingdon ♦ Blue Ridge Independent Living Center – Roanoke ♦ Clinch Independent Living Services – Grundy ♦ disAbility Resource Center – Fredericksburg ♦ Eastern Shore Center for Independent Living – Exmore ♦ Endependence Center, Inc. – Norfolk ♦ Endependence Center of Northern Virginia – Arlington ♦ Independence Empowerment Center – Manassas ♦ Independence Resource Center – Charlottesville ♦ Junction Center for Independent Living – Norton ♦ Lynchburg Area Center for Independent Living – Lynchburg ♦ Peninsula Center for Independent Living – Hampton ♦ Resources for Independent Living – Richmond ♦ Valley Associates for Independent Living – Harrisonburg



VIRGINIA HOSPITAL
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May 18, 2012

Melanie Bella, Director
Medicare-Medicaid Coordination Office
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Dear Ms. Bella:

The Virginia Hospital & Healthcare Association (VHHA) appreciates the opportunity to submit a letter of support for the Virginia Department of Medical Assistance Services' (DMAS) Dual Demonstration Proposal.

VHHA has 39 member health systems and hospitals, representing 108 acute care, psychiatric, rehabilitation and specialty hospitals throughout Virginia. Our mission is to improve the health status of the communities we serve and we view the dual-eligible demonstration project as supportive of that mission. It offers an invaluable opportunity to integrate the care provided to individuals who are eligible for both Medicaid and Medicare, leading to better health outcomes for them.

We also support this program because we believe it is an important and necessary step in addressing the long-term viability of Virginia's Medicaid program. Integrating the care delivery system for the dual-eligible segment of the state's Medicaid beneficiaries will reduce fragmentation and service duplication and hopefully result in reduced costs for delivering that care.

We commend DMAS for establishing an inclusive process that has allowed providers to offer input during the proposal development process, and we believe that continued emphasis on provider involvement will be one of the keys to the success of this initiative. This will include meaningful provider engagement by the successful managed care plans.

DMAS has a history of implementing innovative strategies to strengthen Virginia's Medicaid program and VHHA has worked closely with the agency on many of these initiatives. We look forward to continuing that relationship as DMAS pursues this opportunity to improve the care provided to dual-eligible individuals while also reducing costs through better care coordination.

Sincerely,

Christopher S. Bailey
Senior Vice President

Virginia Network of Private Providers, Inc.

804 Moorefield Park Drive, Suite 201

Richmond, Virginia 23236

vnpp@earthlink.net

<http://vnppinc.org>

Board of Directors

Ann Bevan
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Garriss
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May 5, 2012

Melanie Bella, Director
Medicare-Medicaid Coordination Office
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Dear Ms. Bella:

We are writing this letter in support of the Virginia Department of Medical Assistance Services' (DMAS') Demonstration proposal to integrate care for individuals 21 years and older who are eligible for both Medicare and Medicaid ("dual eligibles"). This initiative is an important step in improving care for a subset of Virginia's most vulnerable populations.

The role of this organization is described in the column to the left. While many of our members provide supports under one of the excluded Waivers (and for a variety of reasons we strongly support this exclusion); and others serve the population of "under 21s," we have participated in the discussions with DMAS and will continue to do so as appropriate. We do, generally, support the various efforts to integrate care and eliminate costly and unnecessary barriers.

We believe that the Demonstration will help eliminate barriers to efficient, high quality care and positive health outcomes for dual eligibles by: (1) increasing access to comprehensive, appropriate, and cost-effective services; (2) integrating various administrative processes for beneficiaries and providers; and, (3) establishing coordinated, person-centered care. These efforts will promote timely, efficient and effective care without the added burden of navigating multiple systems and processes.

More specifically, under the proposed Demonstration, individuals will benefit from expanded access to services and care coordination through person-centered care teams that will include medical providers, behavioral health, long term services and supports, and other individuals (e.g., family caregivers) identified as important contributors to a member's care. The Demonstration will also give individuals and their care teams the flexibility to develop a package of acute, behavioral health, long-term services and supports, and community support services that best meet the individual's health.

An association for persons or organizations with an interest in or that provide support for persons who have mental illness, developmental delay or substance use disorder, and who are licensed by or funded by the Department of Behavioral Health and Developmental Services.

DMAS has taken steps over the past few years to implement innovative strategies to improve care and reduce health care costs for Virginia's most vulnerable populations. We believe that this proposal, which was developed through a collaborative process with a wide variety of stakeholders, represents an important opportunity to make further progress on this important issue. Therefore, I/we look forward to working with DMAS to implement the Demonstration. I/we strongly believe that the Demonstration will improve the health outcomes of dual eligibles and will help reduce costs by decreasing unnecessary and duplicative services.

Sincerely,
Jennifer G. Fidura
Secretary

cc: Board of Directors



Virginia Commonwealth University

Medical Center

In the tradition of the Medical College of Virginia

MCV Campus

Chief Executive Officer
VCU Health System
and
VCU Vice President
for Health Sciences

Sheldon M. Retchin, MD, MSPH

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1012 East Marshall Street
P.O. Box 980549
Richmond, Virginia 23298-0549

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May 15, 2012

Melanie Bella, Director
Medicare-Medicaid Coordination Office
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Dear Ms. Bella:

On behalf of the Virginia Commonwealth University Health System (VCUHS), I am writing to express support of the Virginia Department of Medical Assistance Services' (DMAS') Demonstration proposal to integrate care for individuals 21 years and older who are eligible for both Medicare and Medicaid ("dual eligibles"). This initiative is an important step in improving care for one of Virginia's most vulnerable populations.

VCU Health System, which is the only comprehensive academic medical center in Central Virginia, is comprised of MCV Hospitals (MCVH), an 865-bed regional referral center; MCV Physicians (MCVP), a 600-physician faculty group practice; and Virginia Premier Health Plan, a 145,000 member Medicaid managed care organization. Within our clinical enterprise (MCVH and MCVP), approximately 25% of our patients are Medicaid recipients, and another 25% are Medicare recipients. As the largest safety net provider in Virginia, we treat a significant number of the "dual eligible" patients who will be addressed by this Demonstration and know firsthand the kind of specialized services and intensive care coordination that this population requires.

VCUHS believes that the Demonstration will help eliminate barriers to quality care and will improve health outcomes for dual eligibles by: (1) increasing access to comprehensive, appropriate, and cost-effective services; (2) integrating administrative processes for beneficiaries and providers; and, (3) establishing coordinated, person-centered care. These efforts will promote timely and efficient care without the added burden of navigating multiple systems and processes.

More specifically, under the proposed Demonstration, individuals will benefit from expanded access to services and care coordination provided by multidisciplinary teams and family caregivers identified as important contributors to a member's care. The Demonstration will also give individuals and their care teams the flexibility to develop a package of acute, behavioral health, long-term services and supports, and community support services that best meet the individual's health.

DMAS has taken steps over the past few years to implement innovative strategies to improve care and reduce health care costs for Virginia's most vulnerable populations. This proposal, which was developed through a collaborative process with a variety of stakeholders, represents an opportunity to make further progress on this important issue. We look forward to working with DMAS to implement this initiative to improve health outcomes and reduce costs associated with Virginia's dual eligible population.

Sincerely,

A handwritten signature in cursive script, appearing to read "Sheldon Retchin".

Sheldon Retchin, M.D., M.S.P.H.

Chief Executive Officer

Virginia Commonwealth University Health System

Vice President for Health Sciences

Virginia Commonwealth University



May 18, 2012

Melanie Bella, Director
Medicare-Medicaid Coordination Office
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Dear Ms. Bella:

Virginia Premier Health Plan Inc., is writing this letter in support of the Virginia Department of Medical Assistance Services' (DMAS') Demonstration proposal to integrate care for individuals 21 years and older who are eligible for both Medicare and Medicaid ("dual eligibles"). This initiative is an important step in improving care for a subset of Virginia's most vulnerable populations.

As the sole Medicaid safety net health plan in Virginia and wholly owned subsidiary of Virginia Commonwealth University we are keenly aware of the challenges faced by underserved populations such as those dually eligible for Medicare and Medicaid. Virginia Premier Health Plan has over 15 years experience serving Virginia Medicaid enrollees and several years providing Medicare benefits through a dual eligible Special Needs Plan. This demonstration is aligned with our mission to serve the most vulnerable within Virginia and capitalizes on our experience with both the Medicare and Medicaid populations.

We believe that the Demonstration will help eliminate barriers to efficient, high quality care and positive health outcomes for dual eligibles by: (1) increasing access to comprehensive, appropriate, and cost-effective services; (2) integrating various administrative processes for beneficiaries and providers; and, (3) establishing coordinated, person-centered care. These efforts will promote timely, efficient and effective care without the added burden of navigating multiple systems and processes.

More specifically, under the proposed Demonstration, individuals will benefit from expanded access to services and care coordination through person-centered care teams that will include medical providers, behavioral health, long term services and supports, and other individuals (e.g., family caregivers) identified as important contributors to a member's care. The Demonstration will also give individuals and their care teams the flexibility to develop a package of acute, behavioral health, long-term services and supports, and community support services that best meet the individual's health.

Virginia Premier Health Plan, Inc.

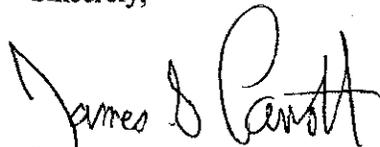
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Virginia Beach, VA 23466-2347
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Roanoke, VA 24008-1751
(540) 344-8838

DMAS has taken steps over the past few years to implement innovative strategies to improve care and reduce health care costs for Virginia's most vulnerable populations. We believe that this proposal, which was developed through a collaborative process with a wide variety of stakeholders, represents an important opportunity to make further progress on this important issue. Therefore, we look forward to working with DMAS to implement the Demonstration. We strongly believe that the Demonstration will improve the health outcomes of dual eligibles and will help reduce costs by decreasing unnecessary and duplicative services.

Sincerely,



James S. Parrott
Chief Executive Officer
Virginia Premier Health Plan, Inc.

Virginia Premier Health Plan, Inc.

Central VA/Fredericksburg
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May 11, 2012

Melanie Bella, Director
Medicare-Medicaid Coordination Office
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Dear Ms. Bella:

On behalf of HealthKeepers, Inc. (HealthKeepers), a Virginia-licensed health maintenance organization affiliate of Anthem Health Plans of Virginia, Inc. d/b/a Anthem Blue Cross and Blue Shield (Anthem), I am pleased to provide this letter in support of the demonstration proposal to integrate care for individuals 21 years and older who are eligible for both Medicare and Medicaid (“dual eligibles”) currently proposed by the Virginia Department of Medical Assistance Services (DMAS). This initiative (the “Demonstration”) is an important step in improving care for a subset of Virginia’s most vulnerable populations.

Through its Anthem HealthKeepers Plus program, HealthKeepers currently serves the unique needs of 237,000 Virginians enrolled in the Commonwealth of Virginia’s Medicaid and CHIP programs. Additionally, HealthKeepers’ affiliate, Anthem, serves approximately 100,000 Medicare Supplemental members and 24,600 Medicare Advantage members in Virginia and offers a wide variety of senior plans, products, and options, such as Medicare Supplement plans, Medicare Advantage plans, long term care and Medicare Part D Prescription Drug Plans to eligible Medicare beneficiaries.

In addition to their Medicaid and Medicare business, Anthem and HealthKeepers maintain robust commercial plans in Virginia. As Virginia’s largest health insurer, Anthem markets preferred provider organization (PPO) plans, and traditional indemnity health plans to individuals, groups, and government employees. HealthKeepers covers over 500,000 commercial health maintenance organization (HMO) members in Virginia through group and individual contracts.

As part of the WellPoint corporate organization, HealthKeepers is able to leverage the longstanding experience of our affiliated Medicaid health plans that provide health care services to vulnerable populations in a number of states, and we have built on this experience to develop a model of care that best meets the needs of dual eligibles. Our solution is based upon the differentiated approach provided by CareMore, a new member of the WellPoint family of companies. CareMore is a senior-focused health care delivery program that includes Medicare Advantage plans and Neighborhood Care Centers designed to deliver proactive, integrated, individualized health care to members. The CareMore model has continuously raised the bar in achieving exceptional outcomes for vulnerable populations, and we will approach DMAS’ proposed program with the same culture of collaboration and focus on doing what is right for the member.

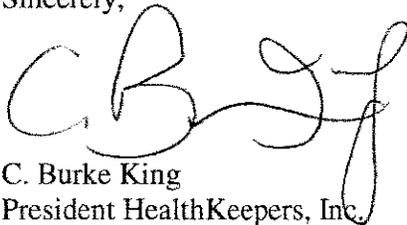
As a longstanding and committed health care partner with the Commonwealth of Virginia, HealthKeepers fully supports DMAS' Demonstration for dual eligibles. We believe this Demonstration will help eliminate barriers to efficient, high quality care and produce positive health outcomes for dual eligibles by: (1) increasing access to comprehensive, appropriate, and cost-effective services; (2) integrating various administrative processes for beneficiaries and providers; and, (3) establishing coordinated, person-centered care. These efforts will promote timely, efficient and effective care without the added burden of navigating multiple systems and processes.

More specifically, under the proposed Demonstration, individuals will benefit from expanded access to services and care coordination through person-centered care teams that will include medical providers, behavioral health, long-term services and supports, and other individuals (e.g., family caregivers) identified as important contributors to a member's care. The Demonstration will also give individuals and their care teams the flexibility to develop a package of acute, behavioral health, long-term services and supports, and community support services that best meet the individual's health.

DMAS has taken steps over the past few years to implement innovative strategies to improve care and reduce health care costs for Virginia's most vulnerable populations. We believe that this proposal, which was developed through a collaborative process with a wide variety of stakeholders, represents an important opportunity to make further progress in this important area.

HealthKeepers looks forward to working with DMAS to implement the Demonstration. We strongly believe that the Demonstration will improve the health outcomes of dual eligibles and will help to reduce costs by decreasing unnecessary and duplicative services. If you have any questions about our plans for participation in the Demonstration, please contact Ms. Candice McAuliffe, Virginia Director of Medicaid Operations, at (804) 354-7060 or candice.mcauliffe@anthem.com.

Sincerely,



C. Burke King
President HealthKeepers, Inc.

May 8, 2012

Comments: State Demonstration to Integrate Care for Dual Eligible Individuals

Bay Aging is very interested in participating in the Financial Alignment Demonstration outlined in the draft proposal dated April 13, 2012. Bay Aging currently provides services in the Tidewater Area which is designated as one of the targeted regions mentioned in the draft proposal during the first year of the demonstration. We are willing to extend services outside our region, if requested. Bay Aging has a 34 year history of providing community based services to the targeted population of dual eligible individuals.

Bay Aging successfully manages programs to include:

- Bay Aging is the ADRC leader in our service area.
- Currently contracting with DMAS as a provider for the EDCD waiver programs,
- Contracts with DMAS to provide Respite Care services.
- Has an established Third Party Fiscal Management Services (FMS) to manage Consumer Directed Model programs.
- Provided leadership to bring Telemedicine Technology to consumers in our service area.
- Has extensive experience providing Care Coordination services to the dual eligible population, currently contracts with DMAS to provide Case Management Services for Elderly Virginians and is prepared to provide Extended Care Coordination services, as outlined in the draft proposal.
- Has an Information Technology Capability for secure transmittal to DMAS, CMS and other contracted services.
- Bay Aging is willing to work with the MCOs to provide services within the targeted area.
- Currently manages three (3) successful licensed Adult Day Health programs and contracts with DMAS and Veterans Administration to provide services.
- Contracts with DMAS as a provider for the EDCD waiver programs.
- Bay Aging has established strong partnerships with community based organizations within our service area.
- Participated in the state effort to develop state wide service standard for Options Counseling.
- Provides VICAP services to residents in the designated service area.

Finally, we feel that DMAS and CMS are moving in a positive direction to integrate care for the dual eligible population in the four targeted regions in Virginia. Bay Aging is ready to join the effort to create a seamless, integrated service delivery system that improves accountability and savings for both Virginia and the Federal government.

May 10, 2012



Melanie Bella, Director
Medicare-Medicaid Coordination Office
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244-1850

Dear Ms. Bella:

I am writing on behalf of Carilion Clinic in support of the Virginia Department of Medical Assistance Services' (DMAS') Demonstration proposal to integrate care for individuals 21 years and older who are eligible for both Medicare and Medicaid ("dual eligibles"). This initiative is an important step in improving care for a subset of Virginia's most vulnerable populations.

Carilion is concerned over the apparent plan to delay implementation of the plan in the Roanoke region until 1/1/15. Carilion Clinic is a large integrated provider with 8 hospitals and over 650 physicians and mid-level providers of whom nearly half are primary care. We have a fully functional electronic medical record across all hospitals, and providers, nearly two dozen NCQA certified Level III Patient Centered Medical Homes, a nursing home, home health and hospice agencies and numerous urgent care centers. We are the provider of choice for a majority of Medicare beneficiaries. As an organization we are committed to the concept of coordinated care. That is why we were selected as one of the original ACO pilot sites for the Brookings/Dartmouth project.

Carilion stands ready to partner with the Virginia Department of Medical Assistance and their selected MCO's in improving care for the Dual Eligibility population in the region. We feel it unfair to withhold this opportunity from that population for an entire year.

We fully support the concept, just not the proposed timing for the Roanoke region.

Sincerely,


Donald E. Lorton
Executive Vice President & CFO

C: Cindi B. Jones, Director
Department of Medical Assistance



April 23, 2012

Melanie Bella, Director
Medicare-Medicaid Coordination Office
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Dear Ms. Bella:

Coventry Health Care is writing this letter in support of the Virginia Department of Medical Assistance Services' (DMAS') Capitated Financial Alignment Demonstration Proposal to integrate care for individuals 21 years and older who are eligible for both Medicare and Medicaid ("dual eligibles"). This initiative is an important step in improving care for a subset of Virginia's most vulnerable populations.

Coventry Health Care has a long history of serving members in government programs. We have been in Medicaid since 1995 and Medicare since 1987. We currently have over 900,000 Medicaid members and nearly 1.7 million Medicare members and 250,000 Medicare health plan members, representing approximately half of our total revenue.

We have developed an integrated model of care, based on giving the member a single point of contact and supported by a health home. Many of our markets include both urban and rural areas, and we are able to adapt our approach to meet the needs of members in both settings.

Our Virginia Medicaid program, CareNet, began in central Virginia in 1996. As of July 1, 2012, our service area includes 73 Virginia localities. In addition to medical services, managed care in Virginia includes behavioral health and pharmacy components. The Aged, Blind and Disabled population is included in Virginia's managed Medicaid program, and we have extensive experience in coordinating the medical, behavioral, pharmacy and community resources required to care for this vulnerable population. We support the natural extension of Virginia's current integrated strategy to develop and implement a seamless experience for dual eligibles that coordinates the full range of services needed to best support some of our frailest members.

Coventry Health Care is a registered trade name of Carelink Health Plans, Inc., a West Virginia HMO, and Southern Health Services, Inc., a Virginia HMO. PPO products are underwritten by Coventry Health and Life Insurance Company and administered by Carelink Health Plans, Inc. in West Virginia and Southern Health Services, Inc. in Virginia.

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804.747.3700
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Roanoke, VA 24019
540.265.6720
Toll-free: 866.240.4345

2001 Main Street
Ste 201
Wheeling, WV 26003
304.234.3481
Toll-free: 800.896.9612

Coventry Data Classification: Public

We believe that the Demonstration will help eliminate barriers to efficient, high quality care and positive health outcomes for dual eligibles by: (1) increasing access to comprehensive, appropriate, and cost-effective services; (2) integrating various administrative processes for beneficiaries and providers; and, (3) establishing coordinated, person-centered care. These efforts will promote timely, efficient and effective care without the added burden of navigating multiple systems and processes.

More specifically, under the proposed Demonstration, individuals will benefit from expanded access to services and care coordination through person-centered care teams that will include medical providers, behavioral health, long term services and supports, and other individuals (e.g., family caregivers) identified as important contributors to a member's care. The Demonstration will also give individuals and their care teams the flexibility to develop a package of acute, behavioral health, long-term services and supports, and community support services that best meet the individual's health.

DMAS has taken steps over the past few years to implement innovative strategies to improve care and reduce health care costs for Virginia's most vulnerable populations. We believe that this proposal, which was developed through a collaborative process with a wide variety of stakeholders, represents an important opportunity to make further progress on this important issue. Therefore, we look forward to working with DMAS to implement the Demonstration. We strongly believe that the Demonstration will improve the health outcomes of dual eligibles and will help reduce costs by decreasing unnecessary and duplicative services.

Sincerely,

A handwritten signature in black ink, appearing to read 'JM', with a long horizontal flourish extending to the right.

John Muraca
Vice President, Government Programs



May 15, 2012

Melanie Bella, Director
Medicare-Medicaid Coordination Office
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Dear Ms. Bella:

Thank you for giving Magellan Health Services the opportunity to offer our support on the Virginia Department of Medical Assistance Services' (DMAS) proposal on the State Demonstration to Integrate Care for Dual Eligible Individuals. We applaud DMAS' decision to create a seamless integration of this complex population ultimately resulting in a more coordinated and better system for patient care.

Magellan Health Services, Inc. is a specialty health care benefits management company, focusing on some of today's most complex and costly health care services. The depth and breadth of our experience in managing behavioral health care, diagnostic imaging, specialty pharmaceutical services and providing pharmacy benefits administration enables us to deliver invaluable insights and innovative solutions that positively impact both the quality and the cost of some of the nation's fastest growing areas of health care. We stand ready to assist DMAS in implementing such a needed program.

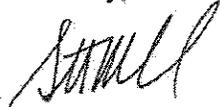
We believe that the Demonstration will help eliminate barriers to efficient, high quality care and positive health outcomes for dual eligibles by: (1) increasing access to comprehensive, appropriate, and cost-effective services; (2) integrating various administrative processes for beneficiaries and providers; and, (3) establishing coordinated, person-centered care. These efforts will promote timely, efficient and effective care without the added burden of navigating multiple systems and processes.

More specifically, under the proposed Demonstration, individuals will benefit from expanded access to services and care coordination through person-centered care teams that will include medical providers, behavioral health, long term services and supports, and other individuals (e.g., family caregivers) identified as important contributors to a member's care. The Demonstration will also give individuals and their care teams the

flexibility to develop a package of acute, behavioral health, long-term services and supports, and community support services that best meet the individual's health.

DMAS has taken steps over the past few years to implement innovative strategies to improve care and reduce health care costs for Virginia's most vulnerable populations. We believe that this proposal, which was developed through a collaborative process with a wide variety of stakeholders, represents an important opportunity to make further progress on this important issue. Therefore, we look forward to working with DMAS to implement the Demonstration. We strongly believe that the Demonstration will improve the health outcomes of dual eligibles and will help reduce costs by decreasing unnecessary and duplicative services.

Sincerely,



Scott Markovich
Senior Vice President, Medicaid Strategy

Ms. Melanie Bella, Director
Medicare-Medicaid Coordination
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244-1850

Dear Ms. Bella,

I am writing to express the support of MajestaCare Health Plan for the application submitted by the Virginia Department of Medicaid Assistance Services (DMAS) seeking to integrate care for Medicare-Medicaid dual enrollees by participating in the CMS Financial Alignment Demonstration program. We pledge our support to work with both CMS and DMAS to offer our insights and expertise to help shape the best program for Virginians.

MajestaCare, which is now managing care and benefits for Medicaid Members in Virginia, was developed as a collaborative effort between Carilion Clinic and Aetna Medicaid. Carilion and Aetna are also collaborating to offer, manage and improve outcomes for Medicare Advantage Members enrolled in the Carilion Clinic Medicare Health Plan. This provides us with a unique perspective on the need to find better ways to improve and integrate care for Dual Eligibles, since we are one of the only Managed Care MCOs in the Commonwealth of Virginia to manage both the Medicaid and Medicare Advantage lines of business.

We would strongly encourage both DMAS and CMS to offer this Dual Demonstration Integration model in the Roanoke Alleghany Region of Virginia on January 1, 2014, the same time as it plans to initiate the program in four other regions of the Commonwealth. Our plan is fully capable and prepared to meet all of the deliverables and timelines to begin enrolling and serving Medicare-Medicaid dual enrollees with an effective "live" date of January 1, 2013.

Sincerely,


Robert E. Tremain
Chief Executive Officer

Copy: Cindi B. Jones, Director Virginia DMAS



5/12/12

Cindi B. Jones, Director
Department of Medical Assistance Services
600 East Broad Street
13th Floor
Richmond, VA 23219

Dear Ms. Jones,

On behalf of Molina Healthcare, I am pleased to submit this letter of support to participate for the Virginia Department of Medical Assistance Services' (DMAS) Medicare-Medicaid Financial Alignment Demonstration proposal. This demonstration is critical to ensure better coordination and integration of care and improved outcomes for Virginia's dual eligible populations.

Molina Healthcare, founded in 1980 by Dr. C. David Molina, has grown into one of the leaders in providing and coordinating quality healthcare for financially vulnerable individuals and families. Currently, Molina Healthcare arranges for the delivery of healthcare services or offers health information management solutions for nearly 4.3 million individuals and families who receive their care through Medicaid, Medicare, and other government funded programs in 16 states.

DMAS' proposal supports a patient-centered model of care that allows for consumer choice of plan, provider, and service delivery model, which our experience shows is critical for an effective program. Molina covers more than 31,000 dual eligibles nationally and has been engaged with DMAS' throughout their collaborative process to develop the proposal. We look forward to working with DMAS to implement a successful demonstration.

Sincerely,

A handwritten signature in black ink, appearing to read "Brian D. Smith", written over a horizontal line.

Brian D. Smith

Virginia President
Molina Healthcare
477 Viking Drive, Suite 310
Virginia Beach VA 23452

May 18, 2012

Melanie Bella, Director
Medicare – Medicaid Coordination Office
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Dear Ms. Bella:

I am writing this letter of support for the Virginia Department of Medical Assistance Services (DMAS) Demonstration proposal to integrate care for individuals 21 years and older who are eligible for both Medicare and Medicaid (“dual eligibles”). This initiative is an important step in improving care for a subset of Virginia’s most vulnerable populations.

Optima Health Plan is an original partner with DMAS, serving 160,000 Medicaid members located throughout the Commonwealth. Optima is a service of Sentara Healthcare, a Virginia-based integrated delivery system with both long-term care and PACE sites. As a result, Optima understands the importance of coordinated care models that put the patient at the center of care. In fact, Optima and Sentara Lifecare - the long term care division that runs PACE- have collaborated on a Sentara senior services plan that seeks to:

- avoid unnecessary hospitalizations, and
- reduce the loss of cognitive and physical functioning as a result of necessary the admissions.

We believe the best solutions for seniors are creative care models that focus on services being rendered at the right time, by the right caregiver and in the right place. Sentara’s PACE program for the duals, coupled with Optima’s Medicaid managed care plan, will leverage the best of both organizations to the benefit of the Commonwealth and the Centers for Medicare and Medicaid Services.

Optima knows the Virginia DMAS Demonstration will eliminate barriers to efficient, high quality care and will improve health outcomes for dual eligibles by promoting timely, efficient and effective care without the added burden of navigating multiple systems and processes. More specifically, under the proposed Demonstration, individuals will benefit from expanded access to services and care coordination through person-centered teams that will include medical providers, pharmaceutical, behavioral health, long-term care and other care coordination and clinical supports. These teams also will work closely with the member, family and/or caregivers who are important contributors to the patient’s health and wellbeing. The Demonstration will also give individuals and their care teams the flexibility to develop a package of acute, behavioral health, long-term services and supports, and community support services that best meet the individual’s health needs.

DMAS has taken steps over the past few years to implement innovative strategies to improve care and reduce concomitant costs for Virginia's most vulnerable populations. We believe that this proposal, which was developed through a collaborative process with a wide variety of stakeholders, represents an important opportunity to make further progress on this important issue.

Optima looks forward to working with DMAS to implement the Demonstration. We strongly believe that this Demonstration will improve the health outcomes and quality of life for the dually eligible and that it will reduce unnecessary and duplicative services as well as the associated costs for these services.

Sincerely,

A handwritten signature in cursive script that reads "Megan Philpotts Padden". The signature is written in black ink and is positioned above the printed name and title.

Megan Philpotts Padden
Vice President of Government Programs



SENTARA

Sentara Life Care Corporation
251 Newtown Road South
Norfolk, Virginia 23502

Tel: 757.892.5400 Fax: 757.892.5401
www.sentara.com

Administration & Support Services

May 15, 2012

Melanie Bella, Director
Medicare – Medicaid Coordination Office
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Dear Ms. Bella:

I am writing this letter in support of the Virginia Department of Medical Assistance Services' (DMAS) Demonstration proposal to integrate care for individuals 21 years and older who are eligible for both Medicare and Medicaid ("dual eligibles"). This initiative is an important step in improving care for a subset of Virginia's most vulnerable populations.

Sentara PACE and Sentara Life Care are a part of Sentara Healthcare, an integrated delivery network in Virginia. Our company was the first to partner with DMAS to introduce PACE in the Commonwealth and have participated in the PACE program for many years. Sentara Life Care also offers skilled nursing care and assisted living at ten sites of care in southeastern Virginia and northeast North Carolina. We welcome the opportunity to work with DMAS, Sentara's Health Plan, Optima, and others in the market to support the Demonstration.

We believe the Demonstration will eliminate barriers to efficient, high quality care and positive health outcomes for dual eligibles by: (1) increasing access to comprehensive, appropriate, and cost-effective services; (2) integrating various administrative processes for beneficiaries and providers; and, (3) establishing coordinated, person-centered care. These efforts will promote timely, efficient and effective care without the added burden of navigating multiple systems and processes.

More specifically, under the proposed Demonstration, individuals will benefit from expanded access to services and care coordination through person-centered teams that will include medical providers, behavioral health, long-term services and supports, and other individuals (e.g. family caregivers) identified as important contributors to a member's care. The Demonstration will also give individuals and their care teams

the flexibility to develop a package of acute, behavioral health, long-term services and supports, and community support services that best meet the individual's health.

DMAS has taken steps over the past few years to implement innovative strategies to improve care and reduce health care cost for Virginia's most vulnerable populations. We believe that this proposal, which was developed through a collaborative process with a wide variety of stakeholders, represents an important opportunity to make further progress on this important issue. Therefore, we look forward to working with DMAS to implement the Demonstration. We strongly believe that the Demonstration will improve the health outcomes of dual eligibles and will help reduce costs by decreasing unnecessary and duplicative services.

Sincerely,

A handwritten signature in black ink, appearing to read 'B. Robertson', written over a horizontal line.

Bruce S. Robertson
President,
Sentara Life Care
Sentara PACE



May 7, 2012

Melanie Bella, Director
Medicare-Medicaid Coordination Office
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Dear Ms. Bella:

ValueOptions is writing this letter in support of the Virginia Department of Medical Assistance Services' (DMAS') Demonstration proposal to integrate care for individuals 21 years and older who are eligible for both Medicare and Medicaid ("dual eligibles"). This initiative is an important step in improving care for a subset of Virginia's most vulnerable populations.

ValueOptions is a health improvement company that specializes in mental and emotional wellbeing and recovery. Incorporated in 1987 with corporate headquarters in Norfolk, Virginia, we now serve 32 million members nationwide and are a dominant behavioral healthcare leader in the public, federal, and commercial markets. Founded and chaired by a behavioral health clinician, our deep experience in helping people with emotional, mental health and substance abuse problems to make the difficult changes needed to be healthier, happier, and more productive is unmatched. ValueOptions offers unequalled experience across the entire spectrum of Medicaid and other publicly-funded populations. ValueOptions' corporate structure includes a division, dedicated to public sector clients and their members, which has oversight of 52 public sector contracts in 14 states, ranging from administrative services only to full-risk arrangements, representing more than eight million Medicaid members.

While our state contracts vary from state to state, they generally feature common approaches that align with DMAS' dual eligible initiative. Including:

- engage members and families in program oversight, design and implementation
- identify and replicate evidence-based practices and emerging best practices
- facilitate collaboration across multiple state agencies
- monitor improvements and document outcomes
- create incentives, which enhance care, for provider organizations
- expand network capacity
- transform the system of care by focusing on recovery, resiliency and person-centered planning in the community

We believe that the Demonstration will help eliminate barriers to efficient, high quality care and positive health outcomes for dual eligibles by: (1) increasing access to comprehensive, appropriate, and cost-effective services; (2) integrating various administrative processes for beneficiaries and providers; and, (3) establishing coordinated, person-centered care. These efforts will promote timely, efficient and effective care without the added burden of navigating multiple systems and processes.

More specifically, under the proposed Demonstration, individuals will benefit from expanded access to services and care coordination through person-centered care teams that will include medical providers, behavioral health, long term services and supports, and other individuals (e.g., family caregivers) identified as important contributors to a member's care. The Demonstration will also give individuals and their care teams the flexibility to develop a package of acute, behavioral health, long-term services and supports, and community support services that best meet the individual's health.

DMAS has taken steps over the past few years to implement innovative strategies to improve care and reduce health care costs for Virginia's most vulnerable populations. We believe that this proposal, which was developed through a collaborative process with a wide variety of stakeholders, represents an important opportunity to make further progress on this important issue. Therefore, we look forward to working with DMAS to implement the Demonstration. We strongly believe that the Demonstration will improve the health outcomes of dual eligibles and will help reduce costs by decreasing unnecessary and duplicative services.

Sincerely,

Dr. Lawrence Goldman
Senior Vice President
ValueOptions



2112 West Laburnum Avenue, Suite 206
Richmond, Virginia 23227
Telephone: (804) 353-9101 Fax: (804) 353-3098
www.vhca.org

May 31, 2012

Cynthia B. Jones
Director
Department of Medical Assistance Services
Commonwealth of Virginia
Suite 1300
600 East Broad Street
Richmond, Virginia 23219

Dear Ms. Jones:

On behalf of the Virginia Health Care Association's 270 long term care member facilities, we offer our qualified support to the Dual Eligible Integration Demonstration (the Demonstration) proposal developed by the Department of Medical Assistance Services (DMAS or the Department). This qualified support is provided based on communications with you subsequent to our review of the Demonstration proposal for public comment and submission of our May 11th comment letter to DMAS.

We thank you for your letter dated May 30th notifying us that the Department has decided to include several key modifications in the Demonstration proposal to be submitted to the Centers for Medicare and Medicaid Services on May 31st. We truly appreciate the efforts put forth by you and your staff in listening and responding to our concerns related to beneficiary access to nursing facilities and Medicaid payment adequacy. Specifically, it is our understanding that under the Demonstration, DMAS will require participating managed care organizations (MCOs) to contract with any willing nursing facility to ensure appropriate access to care for Virginia citizens in all areas of the Commonwealth. Additionally, we understand that participating MCOs must structure Medicaid payment rates with nursing facilities that in general can be no less than the equivalent fee for service rates then in effect. We strongly believe that a similar provision should be incorporated with respect to payment for Medicare skilled services.

Cynthia B. Jones
May 31, 2012
Page Two

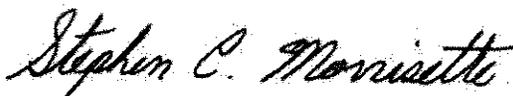
Nursing facilities are keenly aware of the long term economic realities and challenges surrounding Medicare and Medicaid expenditures both in Virginia and around the country. We share the Department's desire to ensure that all sectors that make up the health care delivery continuum for combined Medicare and Medicaid beneficiaries provide services in the most efficient way possible while concurrently working to improve quality through enhanced coordination of care. We support your pursuit of an initiative that has among its primary goals the identification and reduction of unnecessary, duplicative and inappropriate utilization of services.

As we have discussed, the proposed Demonstration will involve at least 60% of all nursing facilities in Virginia. The size of the Demonstration combined with the fact that the care provided to approximately 80% of all nursing facility residents and patients is made possible by adequate and stable Medicare and Medicaid payment quickly highlights the critical need for a coordinated and effective DMAS/CMS managed care monitoring capability that simply does not exist today. To our knowledge, no MCOs have demonstrated the ability to successfully manage the care for dual eligible populations over the long-term while simultaneously preserving provider viability and producing system savings in the form of lower combined Medicare and Medicaid expenditures.

Additionally, we ask that you and your colleagues at CMS not lose sight of a number of additional concerns and comments shared with you in our May 11th comment letter. Among those concerns are increased operating costs to be incurred by nursing facilities as they "staff-up" to handle more complex billing and collection challenges under managed care; the all but assured negative impact to cash flow resulting from longer and more complicated payment procedures followed by MCOs; and potentially greater liability exposure for facilities resulting from following the interdisciplinary team's care management decisions. We remain hopeful that the Demonstration will provide a real opportunity for identifying and paying for effective and safe options for enhancing access to treatment for behavioral health needs in long term care settings. To partially address these important concerns, some portion of shared-savings and quality withhold amounts must be shared with providers.

Again, we thank you for your willingness to address some of our concerns and look forward to continuing to work with the Department to ensure that the Demonstration is developed and implemented in a manner that preserves beneficiary access to high-quality, cost-effective services in a stable provider environment.

Very truly yours,



Stephen C. Morrisette
President

Ms. Melanie Bella, Director
Medicare-Medicaid Coordination
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244-1850

Dear Ms. Bella,

I am writing to express the support of MajestaCare Health Plan for the application submitted by the Virginia Department of Medicaid Assistance Services (DMAS) seeking to integrate care for Medicare-Medicaid dual enrollees by participating in the CMS Financial Alignment Demonstration program. We pledge our support to work with both CMS and DMAS to offer our insights and expertise to help shape the best program for Virginians.

MajestaCare, which is now managing care and benefits for Medicaid Members in Virginia, was developed as a collaborative effort between Carilion Clinic and Aetna Medicaid. Carilion and Aetna are also collaborating to offer, manage and improve outcomes for Medicare Advantage Members enrolled in the Carilion Clinic Medicare Health Plan. This provides us with a unique perspective on the need to find better ways to improve and integrate care for Dual Eligibles, since we are one of the only Managed Care MCOs in the Commonwealth of Virginia to manage both the Medicaid and Medicare Advantage lines of business.

We would strongly encourage both DMAS and CMS to offer this Dual Demonstration Integration model in the Roanoke Alleghany Region of Virginia on January 1, 2014, the same time as it plans to initiate the program in four other regions of the Commonwealth. Our plan is fully capable and prepared to meet all of the deliverables and timelines to begin enrolling and serving Medicare-Medicaid dual enrollees with an effective "live" date of January 1, 2013.

Sincerely,


Robert E. Tremain
Chief Executive Officer

Copy: Cindi B. Jones, Director Virginia DMAS

May 10, 2012



Melanie Bella, Director
Medicare-Medicaid Coordination Office
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244-1850

Dear Ms. Bella:

I am writing on behalf of Carilion Clinic in support of the Virginia Department of Medical Assistance Services' (DMAS') Demonstration proposal to integrate care for individuals 21 years and older who are eligible for both Medicare and Medicaid ("dual eligibles"). This initiative is an important step in improving care for a subset of Virginia's most vulnerable populations.

Carilion is concerned over the apparent plan to delay implementation of the plan in the Roanoke region until 1/1/15. Carilion Clinic is a large integrated provider with 8 hospitals and over 650 physicians and mid-level providers of whom nearly half are primary care. We have a fully functional electronic medical record across all hospitals, and providers, nearly two dozen NCQA certified Level III Patient Centered Medical Homes, a nursing home, home health and hospice agencies and numerous urgent care centers. We are the provider of choice for a majority of Medicare beneficiaries. As an organization we are committed to the concept of coordinated care. That is why we were selected as one of the original ACO pilot sites for the Brookings/Dartmouth project.

Carilion stands ready to partner with the Virginia Department of Medical Assistance and their selected MCO's in improving care for the Dual Eligibility population in the region. We feel it unfair to withhold this opportunity from that population for an entire year.

We fully support the concept, just not the proposed timing for the Roanoke region.

Sincerely,


Donald E. Lorton
Executive Vice President & CFO

C: Cindi B. Jones, Director
Department of Medical Assistance

May 16, 2012

Melanie Bella, Director
Medicare-Medicaid Coordination Office
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Dear Ms. Bella:

We are writing this letter in support of the Virginia Department of Medical Assistance Services' (DMAS') Demonstration proposal to integrate care for individuals 21 years and older who are eligible for both Medicare and Medicaid ("dual eligibles"). This initiative is an important step in improving care for a subset of Virginia's most vulnerable populations.

Inova Health System works to improve community health and has long embraced the philosophy that everyone deserves high quality healthcare. Inova's role as safety net provider remains vital for families across Northern Virginia. We understand that healthy communities are essential if we are all to grow and flourish. That's why we've worked hard to establish a strong presence in neighborhoods across Northern Virginia, and to improve care for everyone by forming partnerships with community groups, physicians and other local organizations.

Inova believes that the Demonstration will help eliminate barriers to efficient, high quality care and positive health outcomes for dual eligibles through a care coordination model that provides a tremendous opportunity to create a seamless, integrated health care delivery program for individuals who receive Medicare and Medicaid services. Integrating and coordinating care across the spectrum of services should result in fewer gaps in service delivery, as all health care needs will be managed and coordinated. Aligned quality measurement and reporting will facilitate a more efficient monitoring system and contribute to improved outcomes and satisfaction.

DMAS has taken steps over the past few years to implement innovative strategies to improve care and reduce health care costs for Virginia's most vulnerable populations. Inova believes that this proposal, which was developed through a collaborative process with a wide variety of stakeholders, represents an important opportunity to make further progress on this important issue. Therefore, we look forward to working with DMAS to implement the Demonstration. We strongly believe that the Demonstration will improve the health outcomes of dual eligibles and will help reduce costs by decreasing unnecessary and duplicative services.

Sincerely,



Robert Hager
Assistant Vice President, Long Term Care
Inova Health System



Virginia Association of Area Agencies on Aging

24 East Cary Street, Suite 100

Richmond, Virginia 23219

(804) 644-2804 • FAX (804) 644-5640

E-mail: Info@theV4A.org • Web Site: <http://www.VAAAA.org>

April 20, 2012

Mrs. Cindi Jones
DMAS, Suite 1300
600 East Broad Street
Richmond, VA 23219

Dear Director Jones:

I understand that DMAS will be setting up a "stakeholder advisory committee" for the dual eligible care coordination pilot program in conjunction with CMS. The Area Agencies on Aging have extensive experience serving Medicaid-, Medicare- and dual-eligible Virginians. Additionally, we provide services throughout Virginia that may not be available under the proposed program, but are vital to sustaining the highest quality of life for these individuals.

As president of the Virginia Association of Area Agencies on Aging, V4A, I offer myself as a member of the Stakeholder Advisory Committee. I welcome the opportunity to ensure that across services, agencies and funding streams, we design programs that are efficient, effective and have a high ROI for individuals and taxpayers. I applaud the agency for this initiative and look forward to making it work well.

Sincerely yours,

A handwritten signature in cursive script that reads 'Courtney Tierney'.

Courtney Tierney, President

