Foster Care & Medicaid Managed Care
Presentation Outline

• What is Medicaid Managed Care
• Benefits Medicaid Managed Care
• Eligibility
• Enrollment
• Services
Medicaid Managed Care

- Medallion II - Virginia’s Mandatory Medicaid Managed Care Program
- Began in 1996 in Tidewater and has expanded statewide
- Medicaid clients are enrolled into contracted Managed Care Organizations (MCOs)
- The Focus: to provide access to preventive and coordinated care
What is an MCO?

• It is a managed care health plan in which a group of doctors and other health care providers work together to provide health care services

• Access to in-network, credentialed providers

• All family members do not need to be enrolled in the same MCO or have the same PCP.
Our Managed Care Partners

- Anthem HealthKeepers Plus
- INTotal Health  
  - Formerly known as Amerigroup  
- CoventryCares of Virginia  
  - Formerly known as CareNet – Southern Health  
- Optima Family Care  
- Virginia Premier Health Plan  
- MajestaCare  
- Kaiser Permanente (effective 10-1-13)

www.dmas.virginia.gov
Benefits of Managed Care

- Coordination of health care services
- Case management
- 24 hour nurse advice line
- Improved access to providers
- Targeted services for chronic conditions
Comparison of Member Services

Medicaid Fee-For-Service (FFS)
- Medicaid ID Card
- Recipient helpline (not toll-free)
- Member handbook
- No co-payments for under 21

Managed Care Organization (MCO)
- MCO member ID card, handbook, and provider directory
- Toll-free member helpline
- Access to translation services
- 24-hour nurse advice line
- Access to assistance with medical issues (case management)
- Member outreach and health education materials
- Access to credentialed providers
- No co-payments
Who will transition to Managed Care?

- Two criteria must be met in order for a child to transition:
  - Child is residing in a transitioning locality, and
  - Local Department of Social Services (LDSS) maintaining the case must be in a transitioning locality.

Example: For the Tidewater transition, child’s case must be maintained by a Tidewater LDSS AND child must be residing in a Tidewater locality. A child whose case is maintained by a Tidewater LDSS and who is residing in Henrico (which is a Central locality) will not transition until the November 1 Central transition.
Who is Excluded from Managed Care?

- Children who are hospitalized at time of enrollment are temporarily excluded from managed care until discharged from the hospital.
- Children placed in Level C residential care are temporarily excluded from managed care until discharged.
- Children who are also covered under parent’s private comprehensive health insurance.
- Children enrolled in Medicaid Home- and Community-Based Waivers
  - Exception: If child is enrolled in Medicaid Managed Care prior to waiver enrollment – they will remain in MCO.
- Children in Technology Assisted Waiver.
The transition to managed care will occur in phases:
- September 1, 2013 – Tidewater/Hampton Roads
- November 1, 2013 – Central Virginia
- December 1, 2013 – Northern Virginia
- The transition for the rest of the state will occur prior to July 1, 2014.
Department of Medical Assistance Services

Tidewater Region Localities
Effective September 1, 2013

- Chesapeake
- Gloucester
- Hampton
- Isle of Wight
- James City County
- Newport News
- Norfolk
- Poquoson
- Portsmouth
- Suffolk
- Virginia Beach
- Williamsburg
- York
Central Virginia Region Localities
Effective November 1, 2013

- Accomack
- Amelia
- Brunswick
- Caroline
- Charles City
- Chesterfield
- Colonial Heights
- Cumberland
- Dinwiddie
- Emporia
- Essex
- Franklin City
- Fredericksburg
- Goochland
- Greensville
- Hanover
- Henrico
- Hopewell
- King George
- King and Queen
- King William
- Lancaster
- Lunenburg
- Mathews
- Mecklenburg
- Middlesex
- New Kent
- Northampton
- Northumberland
- Petersburg
- Powhatan
- Prince Edward
- Prince George
- Richmond City
- Richmond County
- Southampton
- Spotsylvania
- Stafford
- Surry
- Sussex
- Westmoreland
Northern Virginia Region Localities
Effective December 1, 2013

- Alexandria
- Arlington
- Clarke
- Culpeper
- Falls Church
- Fairfax City
- Fairfax County
- Fauquier
- Frederick
- Loudoun
- Manassas City
- Manassas Park
- Page
- Prince William
- Rappahannock
- Shenandoah
- Warren
- Winchester

www.dmas.virginia.gov
On the 18th of each month - MCO Pre-assignments occur

Prior to end of month - Pre-assignment letters mailed to case worker
During Pre-assignment

Call Managed Care Helpline at 1-800-643-2273
• To confirm pre-assigned MCO
• To request information
• To find out if providers participate in an MCO

Call MCO Member Services
• To request information
• To find out if providers participate in an MCO
Managed Care Assignment

- On the 18th - MCO assignment processing occurs
- Prior to end of month - MCOs mail ID card, and handbook to parents/placement providers
- First day of the following month - MCO enrollment begins
- Must go to doctor that is part of MCO network
## Transition Timeline for 2013

<table>
<thead>
<tr>
<th></th>
<th>Tidewater</th>
<th>Central</th>
<th>Northern</th>
</tr>
</thead>
<tbody>
<tr>
<td>MCO Preassignment</td>
<td>July 18&lt;sup&gt;th&lt;/sup&gt;</td>
<td>Sept 18&lt;sup&gt;th&lt;/sup&gt;</td>
<td>October 18&lt;sup&gt;th&lt;/sup&gt;</td>
</tr>
<tr>
<td>Managed care</td>
<td>July 25-31</td>
<td>Sept 25-30</td>
<td>October 25-31</td>
</tr>
<tr>
<td>Preassignment letters</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>mailed</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Last day to make a</td>
<td>August 16&lt;sup&gt;th&lt;/sup&gt;</td>
<td>October 18&lt;sup&gt;th&lt;/sup&gt;</td>
<td>November 18&lt;sup&gt;th&lt;/sup&gt;</td>
</tr>
<tr>
<td>change to MCO before</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>assignment</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MCO assignment</td>
<td>August 18&lt;sup&gt;th&lt;/sup&gt;</td>
<td>October 18&lt;sup&gt;th&lt;/sup&gt;</td>
<td>November 18&lt;sup&gt;th&lt;/sup&gt;</td>
</tr>
<tr>
<td>processing occurs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MCO mailings</td>
<td>Aug 20 – 31</td>
<td>Oct 20 – 31</td>
<td>Nov 20 - 30</td>
</tr>
<tr>
<td>MCO begins</td>
<td>September 1&lt;sup&gt;st&lt;/sup&gt;</td>
<td>November 1&lt;sup&gt;st&lt;/sup&gt;</td>
<td>December 1&lt;sup&gt;st&lt;/sup&gt;</td>
</tr>
</tbody>
</table>
Changing MCOs

- Request for changes to MCO can occur at any time during the year
  - Foster care parents/placement providers must contact the Case Worker to request an MCO change
  - Only the Case Worker is authorized to contact the Managed Care Helpline to request an MCO change
- Foster care parents/placement providers cannot make changes to the child’s MCO; however they may make changes to the child’s PCP once enrolled in the MCO.
Changing MCOs - continued

• Contact the Managed Care Helpline at 800-643-2273 to confirm MCO enrollment at any time

• MCO enrollment always begins on the first day of the month
  – If a change is requested before the 18th, change will be effective the 1st day of the next month
  – If change is requested after the 18th, change will be effective the 1st day of the following month

www.dmas.virginia.gov
Placement Changes - ID Cards

- Child is placed in your home
  - Case Worker will provide foster parents with MCO and Medicaid cards or replacement cards will be issued if not available.
  - If this is a newly enrolled Medicaid member, the MCO and Medicaid cards will be mailed to address where the child lives.
Placement Changes

- Child leaves your home
  - Return the MCO and Medicaid card to the case worker.
  - Advise the Case Worker of any medications being received or appointments scheduled with current MCO.
  - If mail is received after child leaves the home, do not return to post office. Please send back to Case Worker.
Loss of Coverage

- If Medicaid eligibility is cancelled, the child’s MCO enrollment ends. Contact the case worker immediately.
- Once reinstated, child is regular (FFS) Medicaid until reenrolled into MCO.
- Child will be disenrolled from MCO but remains eligible for Medicaid if placed in a Level C residential treatment facility. The child will be re-enrolled in Managed Care the month following discharge.
Service Authorizations

- MCOs allow their new members who are transitioning from Medicaid fee-for-service to continue receiving any previously authorized services (either in-network or out-of-network) until an evaluation is completed.

- The MCO will complete a review of any service authorizations and will make a determination for continuation of services. MCO may determine that continuation of services is necessary but may require that services be transitioned to a network provider. The MCO will notify you of their decision.

- Contact the MCO if the member has an appointment(s) that was scheduled or a prescription that was written prior to MCO enrollment. Ask the MCO if an authorization is needed.
### MCO Carved Out Services

<table>
<thead>
<tr>
<th>Category</th>
<th>Services</th>
</tr>
</thead>
</table>
| **Community Mental Health Rehabilitative Services** | - Intensive In-Home Services for Children and Adolescents  
- Therapeutic Day Treatment for Children and Adolescents  
- Day Treatment/Partial Hospitalization  
- Psychosocial Rehabilitation  
- Crisis Intervention  
- Intensive Community Treatment  
- Crisis Stabilization Services  
- Mental Health Support Services  
- Case Management, including Treatment Foster Care Case Management  
- Level A & B Group Homes |
| **Mental Retardation Community Services**      | - Case Management Services  |
| **Private Duty Nursing for HCBS waiver enrollees** | - Substance Abuse Crisis Intervention  
- Substance Abuse Intensive Outpatient  
- Substance Abuse Day Treatment  
- Opioid Treatment  
- Substance Abuse Case Management |
| **Substance Abuse Treatment Services**         | - Case Management Services  |
| **Dental (Smiles For Children)**               | - Case Management Services  |
| **School Health Services**                     | - Case Management Services  |
| **Specialized Infant Formula for Children Under Age 21** | - Case Management Services  |
| **Health Department Lead Investigations**       | - Case Management Services  |
| **Early Intervention Services**                | - Case Management Services  |
| **Personal Care services**                     | - Case Management Services  |

Transportation

- MCOs provide pre-approved transportation if you need to take your child to a physician or a health care facility and you have no other means of transportation
- Call your MCO at least 3-5 business days (if possible) before the scheduled appointment to arrange for transportation
- Trips must be for a Medicaid covered service and must be medically necessary
  - Examples: doctor appointments, counseling, dialysis, dental appointments, etc.
- MCO transportation cannot make stops for shopping except if you need to go to a pharmacy to pick up a prescription
Dental (Smiles for Children)

- Dental services are provided through the Smiles For Children program.

- Use either your child’s Commonwealth of Virginia plastic ID card or MCO member ID card when receiving services.

- If you need help finding a dentist or making a dental appointment, call 1-888-912-3456 to speak with a Smiles For Children representative.

- Additional information is available at: http://dmasva.dmas.virginia.gov/Content_pgs/dnt-enrollees.aspx

www.dmas.virginia.gov
For more information go to
www.VirginiaManagedCare.com

or

Email your questions to:
fostercare@dmas.virginia.gov