



## Commonwealth Coordinated Care Plus Update – October 2018

We are pleased to provide you with the following important updates on the Department's Commonwealth Coordinated Care (CCC) Plus program.

### **Background**

The CCC Plus program provides medical, behavioral health, substance use disorder, and long term services and supports services. The program serves full Medicaid Members who are either 65 or older, children or adults with disabilities, nursing facility residents, and those receiving services and supports through a home and community based waiver. Each Member is assigned a Care Coordinator from their health plan.

### **CCC Plus Health Plan Websites**

Aetna Better Health of Virginia	<a href="https://www.aetnabetterhealth.com/virginia">https://www.aetnabetterhealth.com/virginia</a>
Anthem HealthKeepers Plus	<a href="https://mss.anthem.com/va/Pages/aboutus.aspx">https://mss.anthem.com/va/Pages/aboutus.aspx</a>
Magellan Complete Care of Virginia	<a href="http://www.mccofva.com/">http://www.mccofva.com/</a>
Optima Health Community Care	<a href="https://www.optimahealth.com/communitycare/Pages/default.aspx">https://www.optimahealth.com/communitycare/Pages/default.aspx</a>
UnitedHealthcare Community Plan	<a href="http://www.uhccommunityplan.com/">http://www.uhccommunityplan.com/</a>
Virginia Premier Elite Plus	<a href="https://www.virginiapremier.com/">https://www.virginiapremier.com/</a>

### **Personnel Update**

DMAS is pleased to announce the promotion of Jason Rachel, Ph.D., to the position of Division Director for Integrated Care. In this role, he is responsible for providing executive leadership in the management and implementation of both current and new integrated care programs. Dr. Rachel directs and oversees all operations, policies, contract compliance and quality monitoring activities within the division to provide high quality, person-centered coordinated care services. His former roles include serving as a Senior Research Leader at Truven Health Analytics providing technical assistance to state Medicaid home and community-based programs on their quality framework, and as Virginia's Money Follows the Person (MFP) Project Director at DMAS. Dr. Rachel received his doctorate in Health Related Sciences with a specialization in Gerontology from Virginia Commonwealth University, School of Allied Health Professions. He enjoys spending time with his wife and five children, often on a soccer field!



## **Communication Update**

DMAS is currently in the process of transitioning our CCC Plus list serv to a more robust service that will allow you to specify which Medicaid programs you would be interested in receiving email or text updates on. These updates include information on CCC Plus, Medallion 4.0, and new health coverage for adults. To sign up, click on: <https://public.govdelivery.com/accounts/VADMAS/subscriber/new>

## **Medicaid Expansion News**

Governor Ralph Northam announced that beginning on November 1, 2018, state agencies will accept applications from Virginia adults newly eligible for health coverage under Medicaid expansion. Eligible adults will begin receiving services starting January 1, 2019. The new coverage is available to adults ages 19 through 64 who are not eligible for Medicare and who meet income requirements, which vary by family size. For example, a single adult with an annual income at or below \$16,754 may be eligible for coverage. An adult in a three-person family with a total household annual income at or below \$28,677 may be eligible.

More information about the new health coverage and eligibility rules is available at [www.coverva.org](http://www.coverva.org). The website includes an eligibility screening tool to help individuals assess whether they may qualify for coverage. Visitors to the website can sign up to receive regular information through email and text about the new coverage and enrollment process. Information is also available by calling 1-855-242-8282. Individuals who are deaf or hearing impaired can call 1-888-221-1590.

## **Medicaid Expansion and Governor's Access Plan**

Beginning January 1, 2019, more adults living in Virginia will have access to quality, low-cost health coverage. This includes individuals currently enrolled in the [Governor's Access Plan](#) (GAP). Those individuals recently received a letter advising them that most are being automatically enrolled into full Medicaid. More information will be mailed to them in November confirming their enrollment and in December notifying them which health plan they are enrolled in. If you serve these individuals, you should check Medicaid eligibility after December 21, 2018 to confirm their enrollment into a health plan.

For more information, the [coverva.org](http://coverva.org) website continues to be the central location for information about the new coverage for adults. Also, find us on social media to get the latest health coverage updates! We regularly post about how to apply, what coverage is available, and any important upcoming dates. Follow us on Facebook @CoverVA and Twitter @CoverVA and @VaMedicaidDir.



**CCC Plus Enrollment**

CCC Plus Enrollment							
As of Week 09/21/2018							
MCO	Tidewater	Central	Charlottesville	Roanoke Alleghany	Southwest	Northern VA/ Winchester	Total
Aetna	5,233	8,687	3,911	3,524	3,819	4,676	29,850
Anthem	13,640	15,806	5,236	4,731	3,436	16,177	59,026
Magellan	6,005	4,776	2,889	2,350	2,104	3,357	21,481
Optima	10,972	7,334	7,338	2,424	2,515	3,035	33,618
United	4,181	4,559	2,171	3,031	2,181	6,836	22,959
VA Premier	5,103	9,373	7,147	8,758	6,547	3,860	40,788
Total	45,134	50,535	28,692	24,818	20,602	37,941	207,722

**Open Enrollment**

CCC Plus open enrollment is Oct 1, 2018 – Dec 18, 2018 and is an opportunity for all CCC Plus members to change their health plan for any reason. All open enrollment health plan changes will be effective Jan 1, 2019. DMAS mailed an open enrollment letter and updated [comparison chart](#) to members during the week of September 24, 2018. An electronic version of the materials is available on the enrollment website ([cccplusva.com](http://cccplusva.com)) under [member materials](#). Members with both Medicare and Medicaid also receive information on [Dual-eligible Special Needs Plans](#). Members can check health plan provider networks and change their health plan by calling the Enrollment Helpline at 844-374-9159 (TTY: 1-800-817-6608) or through the Enrollment website: [cccplusva.com](http://cccplusva.com).



In addition to updating the added benefits on the comparison chart, the health plans provided information about the services, limits and rules for the added benefits. These details are available under [member materials](#) on the enrollment website or by calling the Enrollment Helpline.

**Hospice Providers**

The hospice chart on how to do business with the health plans has several new updates. Optima has a new fax number for hospice providers to fax in notifications: 844-857-6409. Please see details on the [CCC Plus Provider](#) webpage.

**Dual Eligible Special Needs Plans (D-SNP)**

The July Dual Eligible Special Needs Plans (D-SNP) enrollment numbers are in the table below.

<b>Monthly CCC Plus and DSNP Alignment (as of July 2018)</b>				
<b>MCO</b>	<b>Aligned</b>	<b>Unaligned</b>	<b>Percent Aligned</b>	<b>Total DSNP Enrollment</b>
Aetna	216	5	98%	221
Anthem	3,725	404	90%	4,129
Optima	44	3	94%	47
United	2,641	5,309	33%	7,950
VA Premier	2,874	98	97%	2,972
<b>Total</b>	<b>9,500</b>	<b>5,819</b>	<b>62%</b>	<b>15,319</b>

**Community Mental Health Rehabilitative Services (CMHRS)**

The Managed Care Organization Collaborative Workgroup developed a CMHRS Provider Training on submitting Continuing Authorization requests in a managed care environment. This live webinar occurred on August 24, September 7 and September 21 by DMAS and the health plans. The CMHRS Provider call is now a joint, CCC Plus and Medallion 4.0 call for CMHRS providers to ask questions or raise concerns as it relates to their CCC Plus or Medallion 4.0 clients. The [CMHRS provider calls](#) continue through December.



### **Care Coordination in Action: Proactive Steps Toward Wellness**

A Care Coordinator recently began working with a Member who had chronic medical conditions including hypertension, Type II diabetes, obesity and chronic pain. The Member also had been diagnosed with Major Depressive Disorder. During the initial assessment, it was noted there was increased difficulty in independently performing Instrumental Activities of Daily Living (IADLs). During this same meeting, they discussed Member concerns about smoking more than seven cigarettes per day, gaining unwanted weight and having high blood sugar readings. The Care Coordinator began planning how to join with the Member and work towards better management of these medical and behavioral health needs.

The Care Coordinator contacted the local Community Services Board (CSB) to determine what behavioral health services were available to support the Member's behavioral health needs. The CSB was able to implement services with the Member in the home two times per week. The Care Coordinator met with the Member and the pain management provider to discuss pain management as well as smoking cessation. The Member agreed to see an endocrinologist who suggested better ways of diabetic management including nutritional planning to address unstable blood sugar levels and weight gain. The Care Manager arranged for home delivery of diabetic testing supplies to promote regular monitoring of blood sugar levels. The Care Coordinator encouraged the Member to discuss knee pain with the Primary Care Provider (PCP). The PCP referred the Member to an Orthopedist who saw the Member the next day. The Care Coordinator responded to concerns about transportation problems and worked to arrange consistent cab transportation to physical therapy and other appointments.

With support from the pain management specialist, the Member began to taper the use of Suboxone for breakthrough pain. Cigarette smoking has been significantly reduced. Diabetic supplies are now being consistently used to better manage blood glucose levels in consultation with the endocrinologist. Nutritional planning has resulted in better choices being made in regards to food and beverage intake. This has included drinking more water and eating healthier foods. Member was proud to report losing 24 pounds due to making these changes.

The Care Coordinator utilized a person-centered approach to address the Member's medical and behavioral health needs. By providing support and encouragement, the Member was empowered to take proactive steps to manage chronic illnesses and pain. This has led to positive changes in both physical and mental well-being using appropriate services and supports.



### **Outreach and Education**

DMAS and the health plans updated the [MCO Directory by Region](#).

Please email [ccplus@dmass.virginia.gov](mailto:ccplus@dmass.virginia.gov) if you would like to be added or removed from our CCC Plus email distribution list.

If you have questions or concerns about CCC Plus for DMAS, please email the CCC Plus inbox, [ccplus@dmass.virginia.gov](mailto:ccplus@dmass.virginia.gov), for assistance.