**Commonwealth Coordinated Care Plus and Members with Developmental Disabilities**

Individuals receiving services through one of the Developmental Disabilities (DD) Waivers (Community Living, Family and Individual Support, or Building Independence Waivers), and enrolled in the Medicaid Commonwealth Coordinated Care Plus program (CCC Plus), will have their non-waiver services covered by their CCC Plus Medicaid health plan. CCC Plus Medicaid health plans are managed care organizations that provide health coverage on behalf of the state through CCC Plus. DD Waiver services will not be paid for through CCC Plus but will continue to be paid through the Medicaid Fee-for-Service program, in which the state directly pays providers.

The following lists provide examples of the Medicaid services and who pays for them. (This is not a complete list and not all services listed are available to all recipients of the DD Waivers. See <http://www.mylifemycommunityvirginia.org/> for more information.)

|  |  |
| --- | --- |
| **CCC Plus health plan manages and pays for Non-Waiver services** | **Medicaid Fee-For-Service pays for DD Waiver services**  |
| Doctor’s visits | Case management/support coordination |
| Hospital care | Transportation to and from waiver services |
| Inpatient/Outpatient behavioral healthMental health services | Private Duty NursingSkilled Nursing  |
| Pharmacy services | Personal Assistance Service |
| Added benefits that vary by health plan  | Assistive Technology |
| Transportation to non-waiver services | Community coaching or engagement |
| Care Coordination | Community based, center based or crisis support services |
| Non-waiver services covered under EPSDT  | Group Day services |
|  | Environmental modifications |
|  | Group Home service |
|  | Personal Emergency Response System |
|  | Transition services |
|  | Supported Employment and Workplace Assistance |
|  | Service facilitation |
|  | Companion services |
|  | Respite services |
|  | Therapeutic consultation |
|  | In-home support services |
|  | Electronic home based supports |
|  | Individual and family/caregiver trainingPeer mentoring Community guide Benefits planningShared living serviceSponsored residential serviceSupported living serviceEmployment and community transportation services |

*NOTE: Private Duty Nursing, Personal Assistance Service and Assistive Technology services will continue to be carved out including when covered by Early and Periodic Screening, Diagnosis, and Treatment Services (EPSDT), which are medically necessary services available to children under 21.*

**How does CCC Plus affect my Medicare?**

CCC Plus is a Medicaid program and does not affect your Medicare coverage. You have the choice to keep your current Medicare plan. You also have the option to enroll in a Dual Special Needs Plan, a type of Medicare Advantage plan that covers Part A (hospital insurance), Part B (medical insurance) and Part D (prescription drug coverage) and coordinates your benefits across both the Medicare and Medicaid programs.

Your CCC Plus health plan does not require your Medicare providers to be in network or to get service authorization for Medicare covered services. Check with your Medicare providers to see if they are willing to accept payment from the CCC Plus health plan for the Medicaid covered portion of your copays and deductibles. Take all of your CCC Plus Medicaid and Medicare and other insurance cards to your health care appointments.

**Medication**

CCC Plus members who have Medicare receive prescription drug coverage under Medicare Part D.  CCC Plus members are required to pay Part D copayments for prescription drugs. CCC Plus plans will not pay for prescription drugs that are covered under Medicare Part D, including the Part D copayment. Medicaid covers some over the counter drugs that are not covered under Medicare.  The CCC Plus health plan will continue to provide coverage for medically necessary, “FDA approved” over the counter drugs that are not covered by Medicare.

**How does CCC Plus affect my commercial insurance (private insurance or insurance through an employer)?**

You can keep your commercial insurance and be in CCC Plus. You can continue to receive services that are paid for by your commercial insurance. For most services covered by Medicaid that are not paid by your commercial insurance, you must choose a provider that is in network with your Medicaid CCC Plus health plan. The CCC Plus health plan may not be able to pay for services from out of network providers, including the related copayments and deductibles.

CCC Plus Medicaid health plans are required to pay your copayments or deductibles if your commercial provider is in network with the plan. Your plan must provide coverage for emergency and family planning services, including when these are provided out-of-network. Your plan may also agree to authorize and provide coverage out of network to non-participating providers who agree to bill the Medicaid health plan and accept this payment as payment in full.

**Health Insurance Premium Payment (HIPP)**

Medicaid members on the Health Insurance Premium Payment program, which reimburses eligible individuals for private health insurance premiums, are excluded from CCC Plus.

**Dental Benefits**

Dental services are provided through the DMAS Dental Benefits Administrator. The dental program provides coverage for the following populations and services:

* For children under age 21: diagnostic, preventive, restorative/surgical procedures, as well as orthodontia services.
* For pregnant women: x-rays and examinations, cleanings, fillings, root canals, gum related treatment, crowns, partials, and dentures, tooth extractions and other oral surgeries, and other appropriate general services. Orthodontic treatment is not included. The dental coverage ends 60 days after the baby is born.
* For adults age 21 and over enrolled in Medicaid: coverage will include cleanings, x-rays, exams, fillings, dentures, root canals, gum-related treatment, oral surgery and more.

**How do I arrange transportation?**

Transportation is a Medicaid-covered service when you do not have another way to get to your medical appointments. For people on the DD Waiver, transportation for your waiver services will continue to be covered through the Medicaid fee-for-service transportation vendor, ModivCare. For non-waiver services (such as doctor visits), transportation will be provided through your CCC Plus health plan. Your health plan Member ID card will list the phone number to call for transportation. Transportation phone numbers are also available on the DMAS website at: [https://www.dmas.virginia.gov/for-members/managed-care-programs/ccc-plus/information/](https://www.dmas.virginia.gov/for-members/managed-care-programs/ccc-plus/information/%20)