



Department of Medical Assistance Services



Foster Care / Adoption Assistance Transition to Virginia Medicaid Managed Care

National Institute for
Health Care Management
April 2013



www.dmas.virginia.gov



Department of Medical Assistance Services



The Beginning...





Richmond Foster Care Pilot Program

- The Richmond Foster Care Medicaid Pilot Program was developed in response to a request from the City to provide more coordinated care for children in foster care.
- The Virginia Department of Medical Assistance Services (DMAS) received permission from the federal government to move foster care children in the City into managed care health plans.



Authority for Pilot Program

- In 2011, the Virginia General Assembly and the Governor formally endorsed a pilot project with the City of Richmond Department of Social Services to meet the health care needs of children in foster care through the managed care delivery system.
- Item 297 MMMM1.b. of the 2011 Appropriations Act required the Department to *allow on a pilot basis, foster care children, under the custody of the City of Richmond Department of Social Services, to be enrolled in Medicaid managed care (Medallion II).*



Richmond Foster Care Pilot Program

- Workgroup developed of SMEs serving the Richmond area to make the transition as smooth as possible
 - 1 Department of Medical Assistance Services
 - 1 Department of Social Services
 - 120 Local Department of Social Services – all locally driven
 - 6 Managed Care Organizations
 - Numerous Advocacy Groups
 - Numerous Child Placement Agencies



Richmond Foster Care Pilot Program

- December 1, 2011 - Implementation
 - Foster care children under the custody of the City of Richmond Department of Social Services and who are not in residential care
 - Non-custodial children who are not in residential care
 - Minor children of eligible foster care children
 - Excluded children receiving adoption assistance



Statewide Transition

- The Richmond Foster Care Pilot Program has been successful.
 - Pilot program enhanced communication between state and local agencies and the managed care plans.
 - Pilot program enhanced communication between local eligibility workers and case workers.
 - MMIS eligibility system has been cleaned up so that children are correctly identified in system as well as have correct addresses.



Statewide Transition

- Virginia General Assembly and the Governor approved for the managed care statewide expansion of children in foster care and receiving adoption assistance.
- Virginia is implementing the statewide transition this year in two phases.



Department of Medical Assistance Services



Why Managed Care?





Managed Care Enrollment

- Statewide Medicaid Enrollment for children as of March 2013:
 - Managed Care 89%
 - Fee-for-Service 11%



Anticipated Improvements

- Coordination of health care
- Case management
- 24 hour nurse hotline
- Increased access to practitioners
- Targeted services for chronic conditions
- Better coordination
- Choice of primary care providers



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 free translation services /language telephone line
- 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



MCO Carved Out Services

- **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
 - Level A & B Group Homes
- **Mental Retardation Community Services**
 - Case Management Services
- **Private Duty Nursing for HCBS waiver enrollees**
- **Substance Abuse Treatment Services**
 - Substance Abuse Crisis Intervention
 - Substance Abuse Intensive Outpatient
 - Substance Abuse Day Treatment
 - Opioid Treatment
 - Substance Abuse Case Management
- **Dental (Smiles For Children)**
- **School Health Services**
- **Specialized Infant Formula for Children Under Age 21**
- **Health Department Lead Investigations**
- **Early Intervention Services**
- **Personal Care services**



Department of Medical Assistance Services



Virginia Managed Care Partners

- Anthem HealthKeepers Plus
- Amerigroup
- CoventryCares of Virginia
- Optima Family Care
- Virginia Premier Health Plan
- MajestaCare



Department of Medical Assistance Services



Who will be transitioning to Managed Care?





Who will move to Managed Care?

- Effective July 1, 2013 for Central and Tidewater managed care regions;
 - Children receiving Medicaid as part of Adoption Assistance
 - Children placed in Foster Care who are not in Level C residential care
 - Children in non-custodial placement agreements who are not in Level C residential care
 - Minor children of eligible foster care youth



Who is Excluded from MC Expansion?

- Children who are hospitalized at time of enrollment
- Children placed in Level C residential treatment care
- Children who are also covered under other comprehensive insurance
- Children in Medicaid home and community based waivers
- FYI - July 1st expansion will only include those FC/AA children residing in a Central or Tidewater locality
 - FC children must also be in the custody of a Central or Tidewater LDSS or CPA



MC Expansion Timeline – Phase I

- May 18, 2013 - MCO Pre-assignments occur
- First week of June 2013 - Pre-assignment letters received by LDSS Case Worker (CW) for foster care or adoptive parent
- June 18, 2013 – Last day for CW/adoptive parent to request MCO change before assignment to MCO



MC Expansion Timeline – Phase I

- June 18, 2013 - MCO assignment processing occurs
 - MCOs mail ID card, handbook and provider directory to parents/placement providers
- July 1, 2013 - MCO enrollment begins
 - Must go to doctor that is part of MCO network
- Phase II – October 1, 2013
 - Will follow similar timeline beginning August 2013.



Changing MCOs – Foster Care

- Request for changes to MCO can occur at any time during the year
 - Foster care parents/placement providers must contact the Case Worker at the LDSS or CPA to request an MCO change
 - Only the Case Worker is authorized to contact the Managed Care Helpline to request the change
- Foster care parents/placement providers cannot make changes to the youth's MCO



Changing MCOs – Adoption Assistance

- Request for changes to MCO can occur at any time during the year
 - The Adoptive parent may contact the Managed Care Helpline directly to request an MCO change
- Adoptive parent is responsible for requesting MCO changes



Loss of Coverage

- If Medicaid eligibility is cancelled, the child's MCO enrollment ends.
- If Medicaid eligibility is regained within 60 days, MCO reinstated on the first of the next available month.
- Child may be disenrolled from MCO but remain eligible for Medicaid if placed in a Level C psychiatric residential treatment facility. The child will be re-enrolled in Managed Care once released.



Department of Medical Assistance Services



Impact on Families/Providers





Impact on Families/Providers

- Parents/placement providers will have two ID cards for each child.
 - Medicaid plastic ID card – received from LDSS.
 - MCO ID card – received from MCO.
 - Both cards must be taken to appointments.
- Parents/CWs will need to choose the best MCO to ensure that their child's provider(s) participate in the assigned MCO.



Managed Care Implementation

- Systems Updates for Eligibility Records
- Training and Communications
- Transition/Continuity of Care
- Rate Setting



Department of Medical Assistance Services



Managed Care Experience

- Seamless Integration with Membership and Processes
- Minimal Access and Care Management Issues
- Preparation for 2013 Expansions



Lessons Learned

- Trainings critical among various agencies involved (state agencies, local DSSs, managed care plans)
- Cross training to educate DSS on managed care, health plans on foster care/ adoption assistance processes, etc.
- Information infrastructure needs established
- Including families/placement providers in process
- Need for review of utilization data to determine trends and special care management needs



Department of Medical Assistance Services



Thank you

Anthem HealthKeepers Plus

Katina Goodwyn

Program Director

Virginia Dept. of Medical Assistance Services

Ashley Harrell, Acting Manager

Maternal and Child Health Division

Tammy Whitlock

Senior Programs Advisor