Updates on MassHealth Changes and Impact on BPHC Programs

3.7.18
Board Meeting
MassHealth Changes

• As of 3/1/18, approximately 1.2 million MassHealth managed-care members will have a new set of plan options to enroll in:
  • 13 new Accountable Care Partnership Plans;
  • 3 new Primary Care Accountable Care Organizations (ACOs);
  • 2 Managed Care Organizations (MCOs); and
  • MassHealth’s Primary Care Clinician (PCC) Plan.

• Accountable Care Partnership Plans and MCOs have their own network of providers, including behavioral health providers.
In November 2017, MassHealth began taking steps to notify its members of new plan choices that are effective March 1, 2018.

Members whose primary care provider (PCP) of record is affiliated with an ACO (either Accountable Care Partnership Plan or Primary Care ACO) received information about that ACO and were prospectively enrolled into that ACO.

All prospective enrollments are effective on 3/1/18, unless the member makes a different choice.

Continuity of Care Notification

The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
One Ashburton Place
Boston, Massachusetts 02108

Date: February 21, 2018

TO: Interested Parties

RE: Continuity of Care through transition to new managed care arrangements

Starting March 1, 2018, new Accountable Care Organization (ACO) and Managed Care Organization (MCO) contracts will become effective to improve accountability and integration of care for MassHealth members.

MassHealth is committed to working with all relevant parties to ensure continuity of care for the many members who are moving to new plans, whether they are going to or from an ACO Partnership Plan, a Primary Care ACO, an MCO, or the Primary Care Clinician (PCC) Plan.

Please read the attached information carefully. Here are the most important things for you to know:

- These changes apply to MassHealth managed care members (generally, this includes members under age 65 who do not have another primary insurer, either employers or Medicare, and are not in a long-term facility).
- All members have a minimum 90-day continuity of care period.
- During the continuity of care period all existing prior authorizations for services and for provider referrals will be honored by the member’s new plan. Members can continue to see their existing providers for at least 90 days, even if those providers are not in their new plans.
- Providers who are not in the new plans network must contact the new plan to make appropriate payment arrangements.
- In some cases, the continuity of care period may be extended. For example, members who are pregnant can continue seeing their existing OB/GYN providers throughout their pregnancy and up to six weeks postpartum.
- We are asking all plans, providers, and assistants to support members in receiving all needed health care during this transition.
Targeted Support with Transition

- MassHealth has worked with its ACOs and MCOs to identify members who may need extra help during this transition.
- People who may be:
  - Pregnant;
  - Have significant health care needs or complex medical conditions;
  - Have autism spectrum disorder;
  - Have significant mental health or substance use needs;
  - Are receiving Children’s Behavioral Health Initiative (CBHI) services; and/or
  - Are receiving ongoing services such as dialysis, home health, chemotherapy and/or radiation, or HepC treatments; or are hospitalized.
Behavioral Health

• Three behavioral health contractors among all of the managed care plans:
  • Beacon Health Options is the behavioral health contractor for Accountable Care Partnership
    • Plans affiliated with BMC Health Net, Fallon, and Neighborhood Health Plan as well as the BMC Health Net MCO.
  • Tufts Health Plan provides its own behavioral health network for its Accountable Care Partnership Plans and its MCO.
  • Massachusetts Behavioral Health Partnership (MBHP) provides the behavioral health network for all Primary Care ACOs, the PCC Plan, and Health New England/Be Healthy Partnership Plan.
Continuity of Care Documents from MBHP and Beacon Health Strategies

The Beacon Bulletin
Provider Relations // February 2018

IMPORTANT: PLEASE READ THIS BULLETIN CAREFULLY AND SHARE IT WITH ALL APPROPRIATE CLINICAL AND ADMINISTRATIVE STAFF.

IMPORTANT ADDENDUM TO MASSHEALTH CONTINUITY OF CARE ALERT: CONTINUITY OF CARE FOR BEHAVIORAL HEALTH CARE

BEACON IS IMPLEMENTING A 90 DAY CONTINUITY OF CARE FOR BEHAVIORAL HEALTH SERVICES FOR MEMBERS TRANSITIONING INTO BEACON PARTNERED PLANS ON MARCH 1, 2018

CONTINUITY OF BEHAVIORAL HEALTH CARE FOR HNE BE HEALTHY MEMBERS DURING TRANSITIONS TO NEW ACCOUNTABLE CARE ORGANIZATIONS (ACOs) AND MANAGED CARE ORGANIZATIONS (MCOs)

The following information should be noted immediately by your chief executive officer, chief medical officer, chief operating officer, program director, quality management director, compliance officer, billing director, and staff.

Starting March 1, 2018, new Accountable Care Organization (ACO) and Managed Care Organization (MCO) contracts will become effective to improve accountability and integration of care for MassHealth Members. These new plans include:

- 10 new Accountable Care Partnership Plans;
- 3 new Primary Care Accountable Care Organizations;
- 2 Managed Care Organizations (MCOs); and
- MassHealth's Primary Care Clinician (PCC) Plan.

Accountable Care Partnership Plans and MCOs have their own network of providers, including behavioral health providers. Primary Care ACOs and the PCC Plan use the MassHealth provider network for medical services and the Massachusetts Behavioral Health Partnership (MBHP) network for behavioral health services.

Members whose primary care provider (PCP) of record is affiliated with an ACO (either Accountable Care Partnership Plan or Primary Care ACO) received information about that ACO and were prospectively enrolled into that ACO. All prospective enrollments are effective on March 1, 2018, unless the Member makes a different choice.
Coverage Changes in Residential Programs

• The Executive Office of Health and Human Services has also approved MCO coverage of Residential and Recovery Home Programs – Beginning March 1, 2018
  • These programs were previously covered by entirely by a contract with the Massachusetts Department of Public Health
  • In FY17 MDPH split the reimbursement rate into two segments - Clinical Services and Room and Board with an off-set in Room and Board to the clients food stamp benefit.
  • On March 1, 2018 the initial roll-out is Massachusetts Behavioral Health Partnership that will cover their enrollees who are utilizing either Entre Familia or Wyman Recovery to cover their clinical fee with the room and board being billed to MDPH along with the off-set. Further roll-out will include the other MCO’s
• Contracts that are currently in place to provide services at BPHC
  • Medicare for the Dual Eligible population – Medicare for Pscyh/Medicaid for Behavioral Health
  • Mass Medicaid for the Primary Care Plan – Delivery Model – One Care
  • Massachusetts Behavioral Health Partnership
  • Beacon Health Strategies
    • BMC Health Net Plan
    • Tufts Navigator
  • Tufts/Network Health – Tufts Together
  • Commonwealth Care Alliance
  • Blue Cross and Blue Shield - HMO Blue – Subsidized BC/BS
Support for BPHC Programs

- Informational documents have been shared with programs.
- All job aides/tools from the State have also been shared.

- BPHC Software for assistance.
  - Eligibility Verification System (EVS) Commonwealth of Massachusetts – Immediate Response
  - NEHEN – New England Health Exchange Network – Immediate Response
  - HTSgo – Large Batch submission of client information – Batch Results return in 5-10 minutes.
RECOVERY BUREAU CURRENT CLIENTS

- Men’s Health/Recovery, 450, 42%
- South Boston Collaborative, 332, 31%
- Psychiatry Services, 93, 8%
- Behavioral Health, 34, 3%
- Mom’s Program, 172, 16%

Total Clients 1,081
RECOVERY BUREAU - CLIENTS WHO NEED TO CHANGE MEDICAID PRODUCT

- Psychiatry Services, 13
- Behavioral Health, 3
- South Boston Collaborative, 50
- Mom's Program, 18
- Men's Health/Recovery, 23

Total Patients: 107
Mayor’s Health Line

• Many clients are unaware of changes to MassHealth and impact on their coverage and services.

• Tools to get the word out:
  • Direct outreach to Mayor’s Health Line clients
  • Ethnic media
  • Social media
  • Community television
  • Coordinating messaging with Health Care for All and Mass League
  • Outreach to community partners
• Mayor’s Health Line ACO Services:
  • ACO enrollment events
    • Collaborate with community partners (Children’s Hospital / Martha Elliot, VACA, Mujeres, BPL)
    • Office of Recovery Services
    • Engagement Center

• Resident assistance
  • Over the phone
  • In person at 1010 Mass Ave (by appointment / walk-in)
  • In the community
Discussion questions

• Are there other strategies for helping clients with these transitions?
• Are there other tools/supports that we should be sharing with staff to help them support clients’ with transitions?