



SSI Managed Care Expansion Overview

Milwaukee Mental Health Task Force

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Complex Care Vision and Strategy



Complex Care Vision and Strategy Review

- Over the past several years the Department has been exploring how to best transform its delivery system to address medically complex and high cost members through the Complex Care Management (CCM) initiative. The Department's goals include:
 - Improving overall quality of life for medically complex and high cost members;
 - Establishing a new model of care delivery that incorporates high-touch, high-intensity interventions; and
 - Developing a reimbursement structure that will ultimately lead to lower costs over time.



Complex Care Vision and Strategy Review

- The Department adopted a strategy that allows for a staggered transformation of the delivery system that will support the Department's CCM goals.
 - Phase I: Enhanced SSI care management requirements (implemented with 2017 contract changes, additional changes will be implemented in 2018).
 - Phase II: Statewide SSI managed care expansion and enrollment policy alignment (rollout in 2018).
 - Phase III: Complex care management intervention and payment model (date TBD)



Wisconsin Managed Care Growth

- Consistent with national trends, WI Medicaid has increased enrollment in managed care, especially in last 10 years.

	March 2006	March 2017
Total MC Members	396,000	744,000
# BC+ HMOs	13	18
# SSI HMOs	5	10

- With increasing member, provider, and advocate familiarity of managed care, it has spread to more rural areas and increased number of participants.
- With effective contracting, performance monitoring, and quality initiatives, DHS has moved towards managed care for most populations historically served all or partially in fee-for-service (e.g. HIV/AIDS Health Home, Care4Kids) to help control costs and improve quality.



SSI Managed Care – Care Management Overview

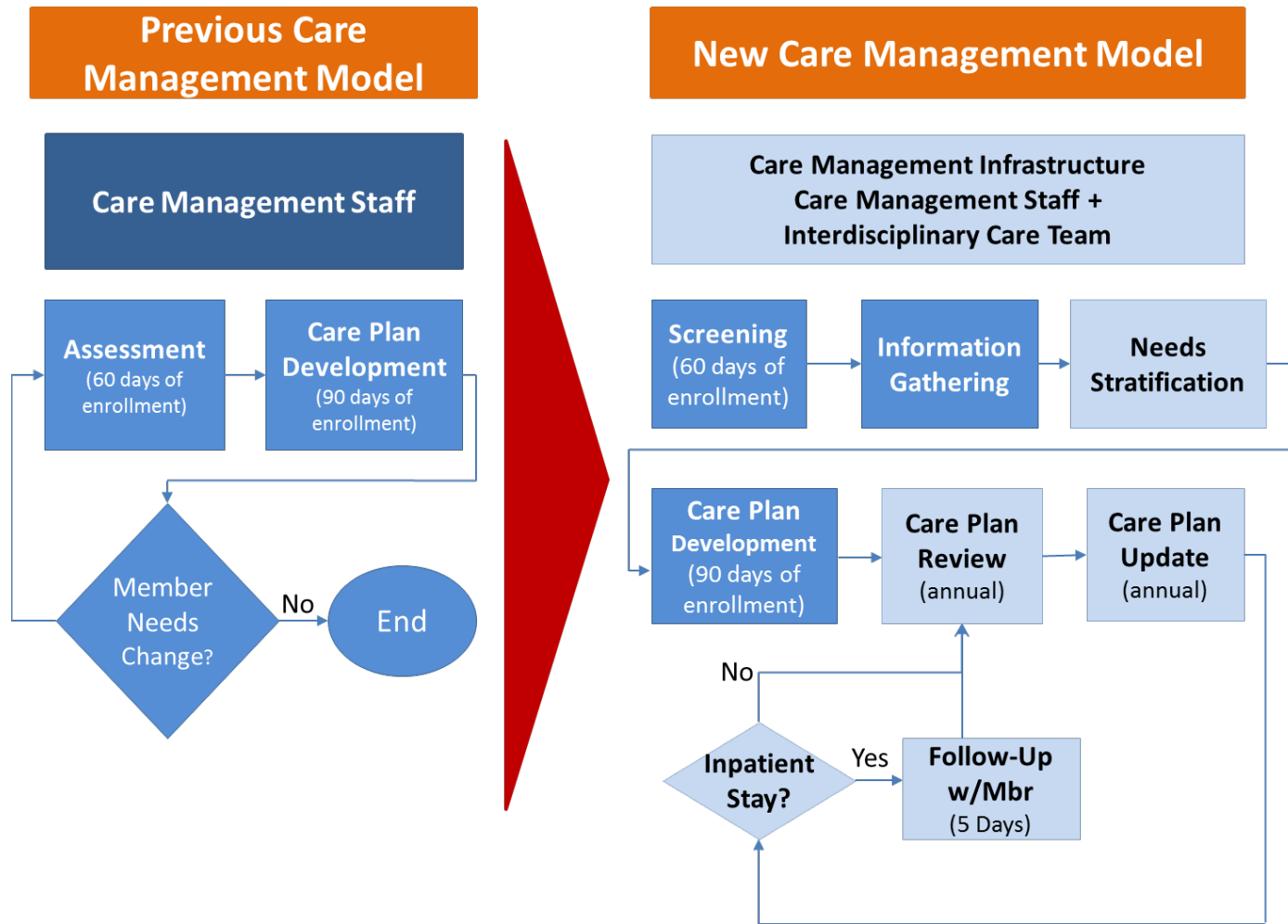


2017 SSI Managed Care Contract Changes

- DHS implemented changes to the HMO contract for SSI HMOs in 2017 to improve care management and care coordination for all enrolled members.
 - Enhance the care management model and services that SSI members receive by incorporating improved care coordination that addresses the member's medical and social needs.



SSI Care Management Model





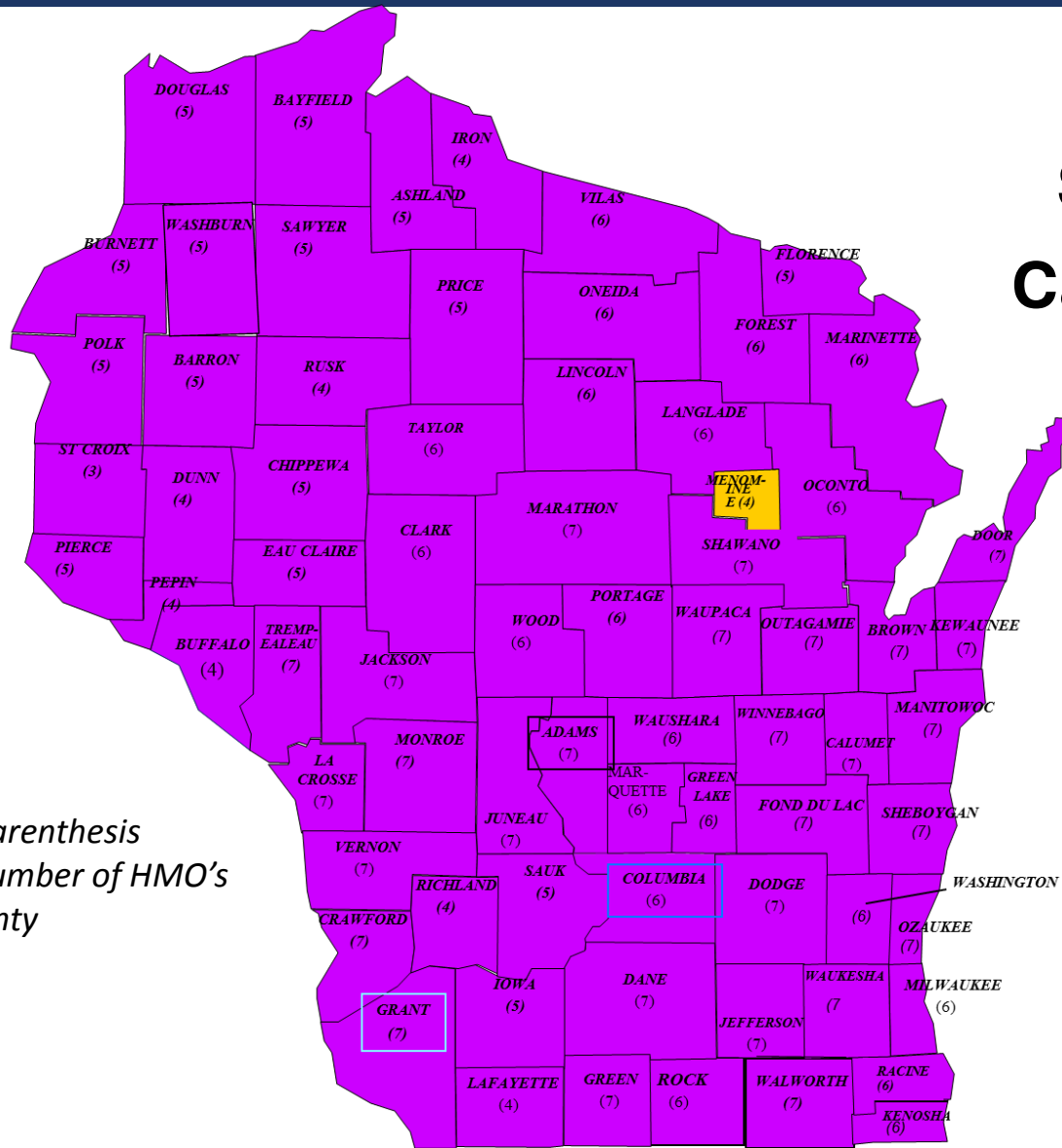
Supplemental Security Income (SSI) Managed Care Expansion Overview

SSI Managed Care Expansion

Consistent with national trends, Wisconsin Medicaid has increased enrollment in managed care, especially in the last 10 years. Nearly 70 percent of Wisconsin's Medicaid members now receive their health care via managed care.

- SSI Managed Care began in Southeast WI in 2005.
- Since then, SSI HMOs have expanded to cover most counties in the state.
- Current number of SSI HMOs serving members is **9**.
- Current SSI HMO enrollment statewide is **36,443**.
- Current SSI adult members in Medicaid fee-for-service and eligible for managed care statewide is estimated at **28,000**.

SSI Managed Care Enrollment



The number in parenthesis represents the number of HMO's serving that County

2 or more HMO's
 Voluntary, Tribal County

What Services are Covered by HMOs

- Doctor visits
- Hospital care
 - Inpatient
 - Outpatient
- Laboratory (x-ray, radiology)
- Mental health
- Substance abuse services (including alcohol and other drug abuse)
- Prenatal and maternity care
- Family planning
- Physical and occupational therapy
- Eye care (with eye glasses)
- Hearing aids
- Medical equipment and supplies
- Home health and personal care

What Services are NOT Covered by HMOs

These services are provided on a fee-for-service basis and not through your HMO :

- Prescription drugs
- Nursing home stays (after 90 days)
- County-matched services
 - Community support programs (CSPs)
 - Comprehensive community services (CCS)
 - Crisis intervention
 - Targeted case management (TCM)
- Dental services*
- Non-emergency medical transportation (covered by MTM)
- Chiropractic services (may be fee-for-service)
- Home and community-based waivers services

*Dental services are covered by HMOs in Milwaukee, Waukesha, Racine, and Kenosha.

Who is Eligible for SSI Managed Care?

To be eligible for SSI Managed Care, the person must:

- Be age 19 or older.
- Be receiving Medicaid SSI or SSI-related Medicaid because of a disability.
- Not be living in an institution or a nursing home.
- Not be participating in a home and community-based waivers program (Community Integration Program, Community Options Program, IRIS, brain injury).
- Not be enrolled in a long-term care program (Family Care, PACE, or Partnership).
- Enroll voluntarily due to the following circumstances:
 - Only one SSI HMO serves the county the person lives in.
 - The person is dual eligible (that is, Medicaid and Medicare).
 - The person is enrolled in a Medicaid Purchase Plan (MAPP).

SSI Managed Care Enrollment

SSI members will now enroll in an HMO the same way BadgerCare Plus members enroll in HMOs.

- Members may choose the SSI HMO in their county that best suits their needs.
- Members that do not make a choice will have an SSI HMO selected for them.
- After enrolling in an HMO, members will have 90 days to change their mind and enroll in a different SSI HMO.
- Once a member chooses an SSI HMO, they will remain enrolled for the 12-month total enrollment period.
- At the end of the 12-month enrollment period, members will have an “open enrollment” period in which they will be able to switch SSI HMOs if they so choose.

SSI Managed Care Regional Rollout Plan

- Region I (North)
 - December 2017 member letter and enrollment packets issued
 - February 2018 members auto enrolled
- Region III (West Central)
 - January 2018 member letter and enrollment packets issued
 - March 2018 members auto enrolled

SSI Managed Care Regional Rollout Plan

- Region V (Southeast)
 - February 2018 member letter and enrollment packets issued
 - April 2018 members auto enrolled
- Region VI (Milwaukee)
 - March 2018 member letter and enrollment packets issued
 - May 2018 members auto enrolled

SSI Managed Care Regional Rollout Plan

- Region II (Northeast)
 - April 2018 member letter and enrollment packets issued
 - June 2018 members auto enrolled
- Region IV (South Central)
 - April 2018 member letter and enrollment packets issued
 - June 2018 members auto enrolled

SSI Managed Care Exemptions

DHS will continue to review SSI managed care exemption requests on a case-by-case basis and grant when appropriate. Exemptions that may be requested by a member include:

- Enrollment in a commercial HMO.
- American Indian or Alaskan Native heritage.
- Continuity of Care - you need to complete a course of treatment before you are enrolled in a SSI HMO. These exemptions are granted for a short period of time.

SSI HMO Responsibilities

Continuity of Care

SSI HMOs must maintain continuity of care for newly enrolled members by:

- Approving and covering services with the member's current provider for 90 days.
- Honoring fee-for-service prior authorizations for at least 90 days after enrollment at the same level of care.

SSI HMO Responsibilities

Care Coordination

Dedicated health care coordinators help members get the care you need, including:

- Conducting assessments within 60 days of enrollment to help better understand health care needs.
- Developing a care plan within 90 days of enrollment.
- Helping members find a primary care provider and get referrals to specialists.
- Helping members make appointments with doctors if you need help.
- Connecting members with other services you need, such as county services, housing, food, and transportation.

SSI Managed Care Member Protections and Safeguards

Grievances and Appeals

- Members have the option to file a grievance or appeal an HMO action.
- Members are able to:
 - Grieve/appeal to their HMO.
 - Grieve to DHS.
 - File an appeal with the Division of Hearings and Appeals for a fair hearing.
- Both DHS and HMOs monitor member grievances and appeals to track trends in concerns.

Member Protection and Safeguards: Resources

Resources to help members with access issues, concerns about health care services, or quality of care.

- **HMO Member Advocates**
 - HMO resource
 - Members can call HMO Member Services to contact
- **Managed Care Ombuds**
 - DHS resource to advocate for members
 - 1- 800-760-0001
- **External Advocate**
 - DHS contracts with Disability Rights of Wisconsin (DRW) to assist SSI HMO members
 - 1-800-708-3034.
- **Enrollment Specialists**
 - Wisconsin Medicaid resource to assist members with enrollment concerns
 - 1-800-291-2002

Thank You!

Questions?

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