

OPTIONS FOR INCLUDING MEDICARE: CONTRACT EXAMPLES

The following excerpts include examples from four states – Arizona, Massachusetts, Minnesota, and Wisconsin – that have fully integrated Medicare-Medicaid MLTSS programs and shows how each differs in the way it addresses integration of program services. The first example from Arizona shows a minimalist approach to the contracting language and outlines the state’s expectation for a streamlined option to dually eligible members. The example from Massachusetts shows how, in an integrated model, the contractor is explicitly responsible for providing both Medicare and Medicaid covered services. The excerpt from Minnesota discusses how the contractor is expected to work with the state and CMS to integrate Medicare and Medicaid. And, finally, the example from Wisconsin’s contract stipulates the circumstances under which a member could be enrolled in the Partnership program under both Medicare and Medicaid.

Arizona Long Term Care System (ALTCS)

From Arizona Health Care Cost Containment System Administration, Contract Amendment, Section D.28, Network Development

Dual Eligibles:

For the purposes of improving the care coordination for dual eligible members AHCCCS requires the Contractor(s) in Maricopa and Pima Counties to have an aligned Medicare Advantage (MA) Plan and/or MA Special Needs Plan (SNP) in the same county. If a Contractor in Maricopa and/or Pima County is not already a MA Plan and/or MA SNP they must be a MA Plan and/or MA SNP by January 1, 2013. In all other counties AHCCCS requires Contractors to be a MA Plan and/or MA SNP or attempt to develop a formal relationship with a MA Plan and/or MA SNP.

Massachusetts Senior Care Options

From MassHealth Senior Care Options, Attachment A, Contract for Senior Care Organizations, Appendix A, Covered Services.

The Contractor is responsible for providing the following Medicare and Medicaid Covered Services, as authorized by the Primary Care Physician or the Primary Care Team, in accordance with the clinical protocols developed by the Contractor. The Contractor may offer additional services, in accordance with clinical protocols developed by the Contractor...

Minnesota Senior Health

3.7.2 Continued Integration of Medicare and Medicaid Benefits under MSHO.

The MCO will cooperate with the STATE to promote the continued integration of Medicare and Medicaid benefits for MSHO Enrollees. The MCO shall respond to reasonable requests from the STATE for SNP operational, benefit, network, financial and oversight information that directly impacts the continued integration of Medicare and Medicaid benefits in order to maintain a seamless service delivery of Medicare and Medicaid benefits to Enrollees. The MCO shall notify the STATE of significant changes in Medicare information to beneficiaries, benefits, networks, service delivery, oversight results or policy that are likely to impact the continued integration of Medicare and Medicaid benefits under this contract. The STATE shall notify the MCO of Medicaid changes that are likely to affect its CMS SNP contract.

Wisconsin Family Care Partnership

Wisconsin Department of Health Services, Division of Long-Term Care, Article II, MCO Governance and Consumer and Member Involvement

6. Medicare Election (Partnership and PACE Only)

- a. To enroll in Partnership, a prospective member who is eligible for Medicare must:
 - i. Enroll in and remain enrolled in all parts of Medicare for which the prospective member is eligible (Medicare Part A, Part B and/or Part D);
 - ii. Enroll in the MCO's Special Needs Plan if the member is eligible; and
 - iii. Obtain all Medicare Part A, Part B and Part D benefits, if eligible, from the MCO's Special Needs Plan...
- b. If a PACE or Partnership member becomes Medicare-eligible after enrollment, the member must enroll in all parts of Medicare for which the member is eligible and must enroll in the MCO's Special Needs or PACE Plan.