MMW Topical Brief: Medicaid Managed Long Term Services and Supports (MLTSS)

Dear MMW Members,

We wanted to share with you important information about a new program, the Medicaid Managed Long Term Services and Supports (MLTSS) program. MLTSS is a "sister" program to the Medicare Medicaid Alignment Initiative (MMAI) Program, which provides managed care to dual eligibles (people with both Medicare and Medicaid) in Illinois.

The Illinois Department of Healthcare and Family Services (HFS) has announced that the Managed Long Term Services and Supports (MLTSS) program will begin in the Greater Chicago area on July 1, 2016.

We are including in this topical brief an explanation of what the MLTSS program is, who it affects, what it covers, the managed care plans involved, how the enrollment process will work, information about continuity of care for clients enrolled in the program, and tips for helping consumers navigate MMAI and MLTSS. We are also including resources where you can get more information about MMAI and MLTSS, including a recorded webinar that we held with the department of Healthcare and Family Services (HFS) on June 3 and an MMW FAQ on MMAI.

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The MLTSS program is a managed care program that is inherently paired with the Medicare Medicaid Alignment Initiative (MMAI). To learn more about MMAI, please see the resources that we have included below.

After July 1, 2016 in the Greater Chicago Area, if someone opts out of MMAI, and that person receives Long Term Services and Supports (LTSS), they will be required to enroll in the MLTSS program. Similarly, anyone who has already opted out of MMAI and receives LTSS will be required to enroll in an MLTSS plan on or after July 1. (Note: LTSS services are defined and explained in the next section below.)

Individuals who do not receive LTSS are not affected by this change.

If an individual receiving LTSS is currently enrolled in an MMAI plan, they will not need to enroll in MLTSS. They will continue receiving their medical, behavioral health, prescription drug, and LTSS services through their MMAI plan. If that individual chooses to disenroll from MMAI later (as opposed to simply switching plans) and that individual is still receiving LTSS services, they will then need to enroll in an MLTSS plan. (An individual will never have both MMAI and MLTSS at the same time - only one or the other.)

NOTE: MMAI will continue to exist in Central Illinois as a voluntary program. Because there is only one MMAI plan available in Central Illinois, the Illinois Department of Healthcare and Family Services (HFS) will not be rolling out MLTSS in Central Illinois at this time.

What is LTSS?

Long Term Services and Supports (LTSS) are services that help an individual accomplish activities of daily living (ADL’s). Activities of daily living include (but are not limited to) bathing, dressing, and eating. In Illinois, an individual can receive LTSS one of two ways:

1) They may reside in a long term care facility (sometimes referred to as "nursing homes"). Individuals residing in long term care facilities receive LTSS, and therefore will need to join an MLTSS plan on or after July 1 if they are not enrolled in MMAI.

2) They may receive LTSS services through a Medicaid Waiver program that provides home and community-based (HCBS) services. In Illinois, there are nine HCBS Waiver programs. People who are eligible for MMAI (and therefore eligible for MLTSS) could receive services from one of five Medicaid Waiver programs - the Persons with Disabilities Waiver (often referred to as the Home Services program), the Persons with
Brain Injuries Waiver, the Persons who are Elderly/Aging Waiver (also known as the Community Care Program), the Persons with HIV/AIDS Waiver, and the Supportive Living Facility Waiver. (The Supportive Living Facility Waiver supports people who reside in Supportive Living Facilities.) If an individual receives services through one of these programs, they are receiving LTSS services and will need to join an MLTSS plan on or after July 1 if they are not enrolled in MMAI.

Fact sheets on each of the Illinois Medicaid Waiver programs are available here: [https://www.illinois.gov/hfs/MedicalClients/HCBS/Pages/default.aspx](https://www.illinois.gov/hfs/MedicalClients/HCBS/Pages/default.aspx)

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**What Do MMAI & MLTSS Cover?**

When an individual is enrolled in the MMAI program, all of their medical services, behavioral health services, prescription drugs, and long term services and supports (LTSS) are covered by the person's MMAI plan (a managed care organization):

![Medicare Medicaid Alignment Initiative (MMAI)](image)

Currently, when people opt out of MMAI, fee-for-service Medicare and Medicaid (or a Medicare Advantage plan) cover that person's medical services, behavioral health services, prescription drugs, and long term services and supports (LTSS). (See image below.) **Note: Some of these services (LTSS, transportation, and certain behavioral health services) are covered only by Medicaid, not by Medicare.**

**Note:** After July 1, 2016, the arrangement depicted below will no longer be an option for dual eligibles receiving LTSS in the Greater Chicago area. If an individual does not receive LTSS services and opts out of MMAI, they will continue to utilize fee-for-service Medicare and Medicaid (or a Medicare Advantage plan) to cover their health care.
Beginning July 1, 2016, the state of Illinois is implementing an MLTSS program in the Greater Chicago area for individuals who have opted out of MMAI and receive LTSS services. After July 1, 2016, individuals who have opted out of MMAI and are receiving LTSS must enroll in a managed care organization (MCO) through the MLTSS program. Once an individual is enrolled in MLTSS, that person's Medicaid-only services (LTSS, transportation, and certain behavioral health services) will be covered by the MLTSS managed care organization (MCO). All of the individual's medical services and prescription drugs (as well as behavioral health services that are at least partially covered by Medicare) will be paid for by Medicare (or Medicare Advantage) and fee-for-service Medicaid:
MLTSS Managed Care Plans

There will be four managed care organizations offering MLTSS plans in Illinois:

- Aetna Better Health
- Blue Cross Blue Shield
- IlliniCare
- Meridian

All four of these organizations also offer MMAI plans.

(Note: In addition to the four plans listed above, Humana and Cigna HealthSpring also offer MMAI plans in the greater Chicago area, but they will not be offering MLTSS plans as of July 1.)

MLTSS Enrollment Process

HFS will begin mailing letters in June 2016 to individuals who have already opted out of MMAI and must enroll in an MLTSS plan. Mailings will be staggered, so not all eligible individuals will receive their letters in June - some will receive letters later.

Note: People who are currently enrolled in an MMAI plan will not get a notice about MLTSS because they do not need to enroll in MLTSS. They will continue to receive all of the health care benefits and LTSS services through their MMAI plan. In the future, if these individuals choose to disenroll from their MMAI plan (and they are receiving...
Once an individual has received an MLTSS letter, they will have 60 days to choose an MLTSS plan (the specific date by which they need to choose a plan will be stated in the letter). If they do not voluntarily choose a plan, they will be automatically enrolled into a plan based on an algorithm. That algorithm looks at the following, in this order:

- The client's current Medicare Advantage plan (if the client is enrolled in a Medicare Advantage plan)
- The long term care facility that the client is currently admitted to (if appropriate)
- The client's most recent previous MLTSS enrollment (if there is one)
- The client's most recent prior Integrated Care Program (ICP) enrollment

If an assignment cannot be made based on any of the four criteria listed above (because none of the four apply to that client), the client will be randomly assigned to a plan.

Once an individual has enrolled in an MLTSS plan (or been automatically enrolled into one), they will have a 90 day period to switch plans if they wish.

After that initial 90 day switch period, the only way an individual in MLTSS will be able to change managed care plans (outside of an individual annual enrollment period) will be to enroll into an MMAI plan. (Remember: Dual eligibles are allowed to enroll into MMAI plans at any time. If an individual enrolls into an MMAI plan, that plan will be responsible for all of that person's medical services, mental/behavioral health services, prescription drugs, and long term services and supports.)

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**Transitioning from MMAI to MLTSS**

The only time that an individual will transition from MMAI to MLTSS is when an individual who is currently enrolled in MMAI, living in the greater Chicago area and receiving LTSS services decides to disenroll from the MMAI program entirely. (Note that an individual in MMAI can change MMAI plans at any time. A transition to MLTSS will only occur if these individuals choose to disenroll from/opt out of the entire MMAI program.)

When an individual in the greater Chicago area who is currently enrolled in an MMAI plan and is receiving LTSS services contacts Client Enrollment Services to disenroll from MMAI, Client Enrollment Services will explain that in order to disenroll from MMAI, they must choose an MLTSS plan for their LTSS services. Client Enrollment Services will have network information for each of the MLTSS plans, so the Client Enrollment Services representative will be able to help the person determine with which plans their LTSS provider is in network. The MMAI member can also choose to take time to research the MLTSS plans and call Client Enrollment Services back later to disenroll from MMAI and enroll in an MLTSS plan. However, if an individual in this situation insists on disenrolling from MMAI during that phone call, but refuses to choose an MLTSS plan, one of the following will take place:

- If the individual disenrolling from MMAI is enrolled in an MMAI plan through Aetna Better Health, Blue Cross Blue Shield, IlliniCare, or Meridian (one of the four companies who are participating in both MMAI and MLTSS), the Client Enrollment Services representative will automatically enroll the person in an MLTSS plan through the same parent company as their previous MMAI plan. (So if the person
was in IlliniCare for MMAI, for example, they will be enrolled into IlliniCare’s MLTSS plan.) The individual will have 90 days to switch to a different MLTSS plan if they choose.

- If the individual disenrolling from MMAI is enrolled in an MMAI plan through Humana or Cigna HealthSpring (the two companies who offer MMAI plans but do not have MLTSS plans), Client Enrollment Services will disenroll the person from MMAI and put the individual back into fee-for-service Medicare and Medicaid temporarily. The individual will then receive an MLTSS letter in the mail with a 60 day enrollment window, and they will follow the enrollment process described in the previous section of this topical brief. (Remember: They will be auto-enrolled into an MLTSS plan after 60 days if they do not make a voluntary choice.)

Important Notes to Remember:

- People who do not receive LTSS services can disenroll from MMAI at any time and go back to fee-for-service Medicare (or a Medicare Advantage plan) and fee-for-service Medicaid. These individuals will not be enrolled into MLTSS.

- Anyone eligible for MMAI is allowed to enroll in MMAI at any time. This includes individuals who are enrolled in MLTSS plans. They can always voluntarily enroll in MMAI, even if they have disenrolled from MMAI in the past.

- An individual can only be enrolled in MMAI or MLTSS - not both.

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**Continuity of Care**

Just like the other Illinois Medicaid Managed Care programs, MLTSS has important continuity of care protections to help ensure that MLTSS members are able to access their trusted providers. MLTSS members will have a 180 day transition period from their initial MLTSS enrollment to continue seeing providers who are not in their MLTSS plan's network. During that 180 days, the provider can work with the plan to develop a contract for ongoing services. If a provider does not wish to be part of a plan's network, but wishes to continue serving a particular client, they can also establish a single case agreement with the plan to continue serving that client. Under a single case agreement, the plan will continue to pay the provider for services to that specific client, even though the provider is not in the plan's network.

When someone switches into an MLTSS plan from another managed care plan, they will have a 90 day transition period in their new plan to see out-of-network providers if necessary.

**Important Note About Individual Providers:**

If someone receives LTSS services through an individual provider (such as a Personal Assistant through the Department of Rehabilitation Services (DRS) Home Services Program), they can enroll in any MLTSS plan and continue receiving services from that provider. Individual providers do not need to join MLTSS plan networks; they will continue to bill for services the same way that they have in the past (e.g., Home Services Program Personal Assistants will continue to work through DRS to obtain payment).

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**Tips for Helping Consumers Navigate MMAI and MLTSS**
• **Utilize the Ombudsman Program!** Throughout the state, there are agencies who serve as Ombudsman to assist consumers with MMAI and MLTSS issues. (These Ombudsman can also assist people who live in long term care facilities or people who receive Home and Community Based Waiver services.) The Ombudsman can assist with a variety of issues, from enrollment glitches to helping consumers access care that they need (but are being denied), filing appeals, etc. To find the Ombudsman in your area, call (800)252-8966.

• Make sure clients know to watch their mail, open it, and read it carefully. Individuals with Medicaid in Illinois will receive many important communications via mail, so it is critical that people notice and read these letters, and ask for help if they need it.

• Make sure that clients update information with the Illinois Department of Human Services (DHS) anytime they experience a change - change in address, household size, income, etc. Unreported changes in address can lead to people not getting important letters. Unreported changes in income or household size could affect the benefits that an individual (or family) receives.

• If an individual has an authorized representative, make sure that they have filed the proper paperwork with DHS, Client Enrollment Services, and their managed care plan (through MMAI or MLTSS). Each of these entities may have separate forms that need to be signed, so it is important to make sure that the proper documentation is on file at each point that it may be needed. (Authorized representatives are allowed to speak on behalf of a client, so this can be an important option for consumers with disabilities that affect their ability to communicate, process complex information, make decisions, etc.)

• Make sure that your clients understand the differences between MMAI and MLTSS and their plan options. Check plan networks to see if an individual's health care providers will accept any MMAI plans, and if LTSS providers accept any MMAI or MLTSS plans. Also check drug formularies of MMAI plans to see if an individual's drugs will be covered by the plan.

• Make sure these clients also understand how care coordination works in each program. Both MMAI and MLTSS provide care coordinators to help consumers navigate their care and access services that they need. However, in MMAI, all of an individual's health care is covered by the plan, so the plan's care coordinator will generally be interacting with providers who are in the plan's network. This may give the care coordinator a little more "pull" when trying to help a consumer access something (e.g., get an appointment with a doctor or access a prescription at the pharmacy). In MLTSS, the plan is only responsible for covering certain services (LTSS, transportation, and certain behavioral health services). Most of the person's health care services will be covered by fee-for-service Medicare (or Medicare Advantage) and fee-for-service Medicaid. Therefore, while MLTSS care coordinators can assist consumers with health care related issues, they may have more difficulty helping consumers access those services.

• Regardless of whether a client is enrolled in MMAI or MLTSS, make sure they get connected with their care coordinator. Care Coordinators provide important support, and it is easier to utilize a care coordinator when a relationship has already been established. Consumers should not wait until a crisis occurs to get to know their care coordinator!
• Remember that **single case agreements** are a possibility when providers are not in network for an individual's MMAI or MLTSS plan.

• Remember that individuals eligible for MMAI (and MLTSS) **can enroll in MMAI at any time** (and change MMAI plans at any time).

• Remember that you can **contact MMW staff for help** if you have questions or experience issues with MMAI or MLTSS! (Also remember to utilize the Ombudsman mentioned above, as well!)

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**Resources On MMAI & MLTSS**

**Resources for Health Care and LTSS Providers:**

Illinois Department of Healthcare and Family Services (HFS) letter about MLTSS for nursing facilities (including nursing facilities eligible to be licensed as Specialized Mental Health Rehabilitation Facilities (SMHRF's):  
[http://www.illinois.gov/hfs/MedicalProviders/notices/Pages/pm160519c.aspx](http://www.illinois.gov/hfs/MedicalProviders/notices/Pages/pm160519c.aspx)

HFS letter about MLTSS for Supportive Living Facilities and Home and Community-Based (HCBS) Service Providers:  
[http://www.illinois.gov/hfs/MedicalProviders/notices/Pages/pm160519d.aspx](http://www.illinois.gov/hfs/MedicalProviders/notices/Pages/pm160519d.aspx)

Centers for Medicare and Medicaid Services (CMS) Frequently Asked Questions (FAQ) document about MMAI for providers:  

CMS FAQ about MMAI for pharmacists:  

**Resources for Benefits Counselors and Other Professionals:**

MMW held a webinar on June 3 about MLTSS implementation; Laura Phelan from the Bureau of Managed Care at HFS spoke about the program and answered several questions from webinar attendees. The recording and slides from that webinar are available on the MMW webpage here:  
[http://www.ageoptions.org/services-and-programs_MMW-MedicaidandManagedCare.html#MMAIMaterials](http://www.ageoptions.org/services-and-programs_MMW-MedicaidandManagedCare.html#MMAIMaterials)

MMW also has a toolkit of resources for professionals about MMAI and other Medicaid Managed Care programs in Illinois on our website here:  
[http://www.ageoptions.org/services-and-programs_MMW-MedicaidandManagedCare.html](http://www.ageoptions.org/services-and-programs_MMW-MedicaidandManagedCare.html)

The toolkit includes a recorded webinar on the Medicaid Managed Care Programs in Illinois, Frequently Asked Questions (FAQ) documents about MMAI and the Integrated Care Program (ICP), a toolkit for helping consumers access resources within specific managed care plans, a timeline for managed care enrollment, and a timeline of what
happens after enrollment (with information about the risk assessments conducted and care coordination services).

**Resources for Consumers:**

MMW also has a fact sheet and PowerPoint presentation about MMAI available here *(these materials are currently being updated to include information about MLTSS; we will send an alert to the MMW email list as soon as those updates are complete)*: [http://www.ageoptions.org/services-programs_MedicareMedicaidAlignmentInitiativeConsumerMaterials.html](http://www.ageoptions.org/services-programs_MedicareMedicaidAlignmentInitiativeConsumerMaterials.html)

MMW also recently released a set of videos in American Sign Language (ASL) about MMAI. You can access those videos here: [http://www.ageoptions.org/services-and-programs_ASLVideos.html](http://www.ageoptions.org/services-and-programs_ASLVideos.html)

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To access the Make Medicare Work Coalition's materials on Medicare, Medicaid, and the Affordable Care Act, view a calendar of MMW events or **sign up for our MMW email list**, please visit our website using the button below. If you would like to stop receiving MMW emails, please reply to this email with the word "Unsubscribe."

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