Department of Human Services Money Follows the Person AND Medicaid Expansion



October 16, 2013
Tribal and State Relations Committee

Money Follows the Person Rebalancing Demonstration Grant: Tribal Initiative

Purpose:

- Enable Tribes to design, manage, and provide culturally sensitive community-based long term services and supports to provide choice and reduce the use of institutional services.
- Eliminate barriers that prevent the use of Medicaid funds to support tribal members with long term services and support needs.
- Strengthen the ability of state Medicaid programs to respond to the unique needs of tribal communities while acknowledging the relationship between federal, state and tribal governments.

Money Follows the Person Rebalancing Demonstration Grant: Tribal Initiative

Purpose: (continued)

- Advance the development of an infrastructure required to implement community-based long term care services and supports for American Indians using a single, or a variety of applicable Medicaid authorities.
- To provide existing MFP state grantees and tribal partners the resources to build sustainable community-based long term services and supports specifically for Indian country.
- Long term goal is for all individual service claims to be eligible for 100% enhanced federal match in accordance with the 1996 Memorandum of Agreement (MOA) between the IHS and CMS.

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The project has four distinct phases:

Phase One: Concept Paper

Phase Two: Operational Protocol: Detailed Timeline and Activities

Phase Three: Execution of Operational Protocol and Program Submittal

Phase Four: Program Implementation

Money Follows the Person Rebalancing Demonstration Grant: Tribal Initiative

- Funding Opportunity Announcement Released: July 22, 2013.
- Planning team including the ND Indian Affairs Commission Tribal Council and staff from the Three Affiliated Tribes, Aging Services staff, Health Disparities Office, Dr. Don Warne and his staff from NDSU, and Medical Services HCBS Staff have been meeting weekly to create application narrative and grant budget.
- Grant Application submitted on 10/15/13.
- Anticipated Notice of Award: November 14, 2013
- Will contract with Dr. Warne's office to develop formal working agreement with all ND tribes and secure needs/demographic data.
- Anticipated Grant Period: November 19, 2013 through April 19, 2014 with funding continuing through the end of the MFP Grant in 2016 with spending through 2019.

Medicaid Expansion

Coverage begins January 1, 2014

Background

- Affordable Care Act (ACA) included a mandate for all states to expand Medicaid.
- June 2012 Supreme Court decision indicated that the US Department of Health and Human Services could not enforce the mandate.
- The North Dakota legislature passed and Governor Dalrymple signed legislation to authorize ND to expand Medicaid.
- Coverage will begin January 1, 2014.

Eligibility

- Individuals under the age of 65 and below 138% of the Federal Poverty Level (about \$16,000 for a household of 1 and \$21,000 for a household of 2).
- Historically for Medicaid, an individual had to be in one of the qualifying "categories" and be income eligible – in order to receive Medicaid.

Healthcare Coverage

- The Department has issued a Request for Proposal (RFP) for private insurance carriers interested in providing coverage for the Medicaid Expansion population.
- Notice of Intent October 15
- A choice of plans must be provided in Burleigh and Cass counties.

Healthcare Coverage

- Coverage will not be the same as the traditional Medicaid coverage.
- Individuals who are medically frail will be offered a choice to receive traditional Medicaid coverage.
- Coverage will include the essential health benefits and must also comply with the Mental Health Parity and Substance Abuse Equity Act.

Essential Health Benefits (from HealthCare.gov)

- Outpatient care—the kind you get without being admitted to a hospital
- Trips to the emergency room
- Treatment in the hospital for inpatient care
- Care before and after your baby is born
- Mental health and substance use disorder services: This includes behavioral health treatment, counseling, and psychotherapy
- Your prescription drugs
- Services and devices to help you recover if you are injured, or have a disability or chronic condition. This includes physical and occupational therapy, speech-language pathology, psychiatric rehabilitation, and more.
- Your lab tests
- Preventive services including <u>counseling</u>, <u>screenings</u>, <u>and vaccines to keep you healthy</u> and care for managing a chronic disease.
- Pediatric services: This includes dental care and vision care for kids

Application Processing

- Estimates are between 20,000 and 30,000 thousand people in North Dakota may be eligible for the Medicaid Expansion.
- It is <u>uncertain</u> as to how many of those individuals will apply for coverage (employer sponsored coverage, healthcare needs, individual mandate and penalty).

Eligibility System

- The Information Technology Department is building a system to manage eligibility processing for the Medicaid Expansion AND to process applications under Modified Adjusted Gross Income (MAGI) rules.
- Goal is for most people applying for coverage (Medicaid expansion and other Medicaid) to use the electronic system.
- The system is expected to be ready in November - Coverage for the Medicaid Expansion group begins in January.

Outreach and Community Meetings

- Outreach materials have been developed to "get the word out" about Medicaid Expansion and how to apply for coverage.
- The Department is hosting meetings around the state to provide information about the Medicaid Expansion.

Summary

- Eligibility system for Medicaid Expansion group is expected to be ready in November.
- The current online application and renewal system <u>remains available</u> for traditional Medicaid applications.

 Questions on coverage for private insurance through the Federal Health Insurance Marketplace should be directed to www/Healthcare.gov or 1-800-318-2596

Department of Human Services- Medicaid Expansion Federal Government- Private Insurance Coverage