The Future of Integrated Care In New York State

Agenda:

• The Future of Integrated Care In New York State
  Andrew Segal, Division of Long Term Care, Department of Health

• The Medicare-Medicaid Financial Alignment Initiative: Overview and Status Update
  Lindsay Barnette, Medicare-Medicaid Coordination Office, Centers for Medicare & Medicaid Services

• Other State Approaches to Integrating Medicare and Medicaid for Dually Eligible Beneficiaries: Implications for the New York State FIDA Demonstration
  James Verdier, Mathematica Policy Research
  Ann Mary Philip, Center for Health Care Strategies

• Questions and Discussion
  Erin Kate Calicchia, Division of Long Term Care, Department of Health
The Future of Integrated Care in New York State
The Future of Integrated Care In New York State

• The Department’s goal is to increase integration of services, providers, payments, and delivery systems

• Integration:
  – Advances quality, access, and value
  – Promotes a Total Cost of Care approach
  – Aligns with goals of VBP
Current Landscape of Integrated Care

- Medicaid Redesign Team
  - Priority placed on Medicaid and Medicare alignment prompted FIDA Demonstration and PACE/MAP expansion
  - FIDA/PACE/MAP boast success in the following areas:
    - Coordination of care
    - Financial alignment
    - Elimination of service duplication
    - Enhancement of community-based care
    - Minimized reliance on institutional care
    - Increased health value and quality of life
Current Landscape of Integrated Care

• **FIDA:**
  – Offers the most robust managed care service package available in NYS
  – Delivers a streamlined experience for participants and providers
  – Provides a person-centered care planning process and interdisciplinary team (IDT) approach
  – Includes flexibilities unavailable in other programs
    - Fully integrated appeals and grievances processes
Current Landscape of Integrated Care

• MAP:
  – Combines the State’s standalone MLTC Partial Plan with a Medicare Advantage Plan
  – Manages and coordinates care through a care manager
    o Includes MLTC benefit package plus Medicare services
    o Does not include all Medicaid physical health services, Medicaid behavioral health, Medicaid HCBS Waiver services
Current Landscape of Integrated Care

• PACE:
  – Person-centered care planning process
  – Interdisciplinary Team (IDT) approach
  – Services provided in an adult day health center
    o The adult day health center is supplemented by in-home and referral services
    o Health services are provided by a health care team of providers
  – New York is set to lead the nation in PACE advancement and growth
Value of Integrated Care

• Experience of Care
  – Person-Centered Service Plan (PCSP)
  – Interdisciplinary Care Team (IDT) model
  – Tailored care management
  – Comprehensive provider networks

• Experience of Providers
  – Increased participation in care coordination and planning
Value of Integrated Care (continued)

• Alignment of Incentives
  – Enhancing the value proposition
  – Plan incentives

• The Total Cost of Care
  – Individuals live safely in their homes and communities
  – Financial alignment
  – Value-Based Payment (VBP) could apply to integrated Plans
Challenges of Multiple Managed Care Products

• Confusion amongst stakeholders and participants
• Inefficiencies and duplication of efforts
• Potential for cost shifting across payors for products that are not fully integrated
Objectives for Future Integration Planning Process

- Achieve the greatest level of Medicare and Medicaid physical, behavioral, and LTSS integration possible
  - Identify platforms and incorporate best elements for integration
  - Offer stakeholders opportunities to help shape the future of integrated care
  - Allow sufficient lead time to ensure a smooth transition
Next Steps: Mapping a Strategy to Reach Integration Objectives

• Learn about available platforms for integrated care
• Review lessons learned from FIDA
• Obtain input into future stakeholder process to collaborate on:
  – Finding the best vehicle to drive one integrated care product
  – Incorporating the best features of existing programs
  – Envisioning the transition process
  – Continue to work collaboratively with CMS
For More Information

FIDA BML: fida@health.ny.gov

MRT 101:
https://www.health.ny.gov/health_care/medicaid/redesign/mrt_101.htm

FIDA consumer website:
https://www.health.ny.gov/health_care/medicaid/redesign/fida/

MRT 90:
https://www.health.ny.gov/health_care/medicaid/redesign/mrt90/index.htm

MLTC VBP Quality Measures: