

CY Q1 & Q2 2023

State Medicaid Integration Tracker©

Welcome to the State Medicaid Integration Tracker[®]

The **State Medicaid Integration Tracker[®]** is published by Advancing States. It is intended to provide a compilation of states' efforts to implement integrated care delivery-system models. Only publicly available and documented activities are included in this tracker.

This tracker includes new updates for each state that occurred since the previous tracker's publication. For comprehensive information on each state, as well as archived versions of the tracker, please visit: <http://www.advancingstates.org/publications/state-medicaid-integration-tracker>

The **State Medicaid Integration Tracker[®]** focuses on the status of the following state actions:

1. Managed Long-Term Services and Supports (MLTSS)
2. State Demonstrations to Integrate Care for Dual Eligible Individuals and other Medicare-Medicaid Coordination Initiatives
3. Other LTSS Reform Activities, including:
 - Medicaid State Plan Amendments under §1915(i)
 - Community First Choice Option under §1915(k)
 - Medicaid Health Homes

Advancing States uses many information sources to learn what is happening across the country in these areas. Advancing States' sources include: the CMS website on Managed Long-Term Services and Supports ([link](#)), the CMS website on State Demonstrations to Integrate Care for Dual Eligible Individuals ([link](#)), the CMS website on Health Homes ([link](#)), the CMS list of Medicaid waivers ([link](#)), state Medicaid Agency websites, interviews with state officials, and presentations by state agencies. Advancing States lists sources for each update, as well as hyperlinks to related CMS and state documents and materials.

For more information, please contact **Camille Dobson** (cdobson@advancingstates.org) or **Annie Kimbrel** (akimbrel@advancingstates.org).

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Overview

<p>Managed LTSS Programs:</p> <p>(Bolded states have updates highlighted in this issue of the tracker)</p> <p>*: Indiana’s MLTSS program is in active development</p>	<p>AR, AZ, CA, DE, FL, HI, IA, ID, IL, IN*, KS, MA, MI, MN, NC, NJ, NM, NY, PA, RI, TN, TX, VA, WI</p>
<p>States with MLTSS Delivered Through Section 1115 Waivers:</p>	<p>AZ, DE, NJ, TX, TN, NM, NY</p>
<p>Medicare-Medicaid Care Coordination Initiatives:</p> <p>All states, except Minnesota, are operating a CMS-approved Financial Alignment Initiative (FAI) demonstration program. Pursuant to Final Rule CMS-4192-F, states must phase out or transition their FAIs no later than December 31, 2025. For links to transition plans, please see the chart at the bottom of the tracker.</p> <p>** : Pursuing alternative initiative</p>	<p>CA, IL, MA, MI, MN**, OH, RI, SC, TX, WA</p>

For details about state integration activities, visit the [Integrated Care Resource Center Map](#).

State	Update
Alabama	<p>Integrated Care Update</p> <p>In an RFP issued 4/28/2023, the Alabama Medicaid Agency requests proposals from vendors with expertise for a plan to ensure the provisions of the comprehensive Primary Care Case Management Program. This program promotes a person-centered approach to care delivery while enhancing the integration of medical and LTSS for Medicaid beneficiaries. The projected implementation date of the RFP is 10/1/2023.</p> <p>(Source: Alabama Medicaid Agency; 4-28-2023)</p>
Arizona	<p>Managed Long-Term Services and Supports</p> <p>On May 24, the Arizona Health Care Cost Containment System (AHCCCS) announced a delay in the planned start date of its federally approved Housing and Health Opportunities (H2O) demonstration project to complete operational and system integration planning. The planned start date is now October 1, 2024. The H2O demonstration aims to address health-related social needs for members with a Serious Mental Illness who are leaving a correctional setting or who have additional chronic health conditions. Once implemented, AHCCCS will be able to reimburse providers for up to six months of medically necessary transitional housing and services that support a member’s success in housing.</p> <p>(Source: Arizona Health Care Cost Containment System; 5-24-2023)</p>
California	<p>Managed Long-Term Services and Supports</p> <p>In a March 17 Stakeholder Update, the CA Department of Health Care Services (DHCS) announced that starting January 1, 2024, DHCS will expand the availability of Medi-Medi Plans for dual eligible Medicare and Medi-Cal members to five additional central valley counties: Fresno, Kings, Madera, Sacramento, and Tulare. Medi-Medi Plans for dual eligible Medicare and Medi-Cal members are currently available in the seven former Coordinated Care Initiative (CCI) counties: Los Angeles, Orange, Riverside, San Bernardino, San Diego, San Mateo, and Santa Clara.</p> <p>Medi-Medi Plans is the California-specific program name for Medicare Advantage Exclusively Aligned Enrollment Dual Eligible Special Needs Plans (D-SNPs). Under Medi-Medi Plans, dual eligible members can voluntarily enroll in a D-SNP for Medicare benefits and in a Medi-Cal managed care plan (MCP) for Medi-Cal benefits, which are both operated by the same parent organization for better care coordination and integration.</p> <p>(Source: CA Dept of Health Care Services; 3-17-2023)</p>

<p>Florida</p>	<p>Managed Long-Term Services and Supports</p> <p>On April 11, the Florida Agency for Health Care Administration (AHCA) released an Invitation to Negotiate (ITN) to select a vendor to provide a statewide Medicaid Managed Care program. The anticipated posting of the notice of intent to award is December 11, 2023. The purpose of the solicitation is to procure contracts to provide Managed Medical Assistance and Long-Term Care services under the Statewide Medicaid Managed Care program. AHCA lists the objectives as being for Medicaid enrollees to receive all medically necessary services in a timely manner and in the most appropriate setting, to give families the freedom to choose a managed care plan, services, and programs, to provide people the opportunity to participate in programs that will improve their health, and for older adults to age in their place of choice.</p> <p>(Source: Florida's Agency for Health Care Administration; 4-11-2023)</p> <p>In June, Florida’s governor signed health care bill SB 2510 that includes a pilot program to provide Medicaid managed-care services to people with developmental disabilities. The pilot program will be created in seven FL counties (Miami-Dade, Monroe, Hardee, Highlands, Hillsborough, Manatee, and Polk). Enrollment will be voluntary and expected to begin by January 31, 2024.</p> <p>(Source: Health News Florida; 6-19-2023)</p>
<p>Indiana</p>	<p>Managed Long-Term Services and Supports</p> <p>On March 1, the Indiana Family and Social Services Administration and the Indiana Department of Administration announced the entities recommended for award for the Indiana Pathways for Aging Program, a new managed LTSS program. The four Managed Care Entities recommended for award are:</p> <ul style="list-style-type: none"> • Anthem Blue Cross and Blue Shield • Humana Healthy Horizons in Indiana • Molina Healthcare of Indiana • United Healthcare Community Plan <p>The state will work with the selected MCEs in the contracting and readiness review process with an anticipated go-live date of summer 2024.</p> <p>(Source: IN Family and Social Services Administration; 3-01-2023)</p>

<p>Massachusetts</p>	<p>Medicare-Medicaid Integration</p> <p>On February 21, the Massachusetts Executive Office of Health and Human Services (EOHHS) announced it intends to release a request for responses (RFR) later this year for One Care and Senior Care Options (SCO), which will result in contracts that would provide coverage beginning in 2026.</p> <p>One Care is an integrated care option for adults with disabilities ages 21-64 at the time of enrollment who are eligible for both MassHealth and Medicare. One Care enrollees can get the full set of services provided by both programs, plus additional behavioral health and community support services. The goal of One Care is to offer a better, simpler way for people with disabilities to get all the care they need and to be more independent. As of January 1, 2026, One Care will consist of Medicare Fully Integrated Dual Eligible Special Needs Plans (FIDE SNPs) with companion Medicaid managed care plans.</p> <p>Senior Care Options (SCO) is a coordinated health plan option for adults ages 65 and older, with or without Medicare. SCO enrollees can get all their MassHealth and Medicare services (for those enrolled in Medicare), plus additional behavioral health and home care services, through a health plan contracted with both Medicare and MassHealth. SCO currently consists of Medicare FIDE SNPs with companion Medicaid managed care plans.</p> <p>Organizations selected for both products would have separate Medicaid managed care contracts with EOHHS, as well as separate Medicare Advantage contracts with CMS for each of the plans’ One Care and SCO products.</p> <p>(Source: Mass.gov Procurement Announcement; 2-21-2023)</p>
<p>New Jersey</p>	<p>Managed Long-Term Services and Supports</p> <p>On March 30, CMS approved New Jersey’s request to extend and amend its Medicaid 1115 demonstration entitled “New Jersey FamilyCare Comprehensive Demonstration.” The 1115 demonstration includes initiatives related to continuous eligibility, coverage expansion, and health-related social needs. The initiative also includes, among other elements, the extension of managed care to include LTSS and certain behavioral services, giving the state the flexibility to carve-in additional behavioral health services to managed care over time, which the state has indicated will take place gradually over the demonstration renewal period (April 1, 2023 – June 30, 2028).</p> <p>Source: CMS Approval Letter; 3-30-2023)</p>

New Mexico	<p>Managed Long-Term Services and Supports</p> <p>On January 30, New Mexico provided official notice that the Human Services Department (HSD) was terminating the Turquoise Care Medicaid Managed Care Request for Proposals that had been issued on September 30th. The current managed care contracts will remain in place until HSD can issue a new RFP, the timeline of which is still in development.</p> <p>(Source: NM Human Services Department; 1-30-2023)</p>
Rhode Island	<p>Managed Long-Term Services and Supports</p> <p>On December 22, 2022, Rhode Island submitted a five-year extension request for its Medicaid section 1115(a) demonstration entitled the “Rhode Island Comprehensive Demonstration” (“the Demonstration”) to be effective January 1, 2024 through December 31, 2028. The Demonstration has been in place since 2009 and Rhode Island’s entire Medicaid program is operated under the Demonstration. The Demonstration offers a complete array of services, including medical, behavioral health, and Home and Community-Based Services (HCBS) to multiple eligibility groups. This Demonstration extension aims to continue to build upon the Demonstration’s foundational aims of equity and access while implementing new focused enhancements targeted at behavioral health, social determinants of health, and long-term services and supports. The state is requesting new expenditure authority to provide outreach and pre-release services to the justice-involved population, a restorative and recuperative care pilot, and authority for parents of disabled children to act as service providers. The federal comment period for this application was open from January 6, 2023 through February 5, 2023.</p> <p>(Source: Medicaid.gov Bulletin; 1-06-2023)</p> <p>On May 30, Rhode Island’s Executive Office of Health and Human Services released a Request for Information (RFI), soliciting informational responses from qualified potential vendors and other interested parties to inform procurement of its Medicaid Managed Care program. The RFI end date was June 27, 2023 and will inform a Request for Qualifications in the fall of 2023.</p> <p>(Source: State of Rhode Island; 5-30-2023)</p>
Texas	<p>Managed Long-Term Services and Supports</p> <p>On January 27, 2023, the Texas Health and Human Services Commission (HHSC) announced its intent to award contracts for its STAR+PLUS Medicaid managed care</p>

	<p>program, which serves aged, blind, and disabled populations, to United Healthcare Community Plan of Texas, Molina Healthcare of Texas, Superior HealthPlan, and Amerigroup Insurance Company, Community First Health Plans, El Paso Health, and Community Health Choice Texas.</p> <p>The Dual Demonstration is authorized by HHSC and CMS to operate through December 2023. HHSC plans to transition its MMPs to integrated D-SNPs and has decided to extend the Demonstration beyond December 2023. HHSC is currently analyzing which of the two potential Demonstration end dates are most appropriate, Dec. 31, 2024, or Dec. 31, 2025.</p> <p>STAR+PLUS contracts will require that MCOs have a companion D-SNP that covers the entirety of their STAR+PLUS service area(s), and that MCOs with existing MMPs continue coverage in Demonstration counties until the end of the Demonstration. Contracts are anticipated to begin in February 2024.</p> <p>(Source: Texas Health and Human Services and HMA Roundup; 2-01-2023)</p>
Wisconsin	<p>Managed Long-Term Services and Supports</p> <p>On June 27th, The Wisconsin Department of Health Services (DHS) announced it is seeking to renew the Family Care and Family Care Partnership waivers, 1915(b) and 1915(c) waivers that provide LTSS for older adults and people with disabilities. DHS has launched an online survey and will collect public input over the next year, with plans to submit proposed changes to CMS in September 2024. The renewed waivers will go into effect in January 2025.</p> <p>(Source: WI Department of Health Services and HMA Roundup; 6-28-2023)</p>

STATE TRACKER FOR DUALS DEMONSTRATIONS

(Updated as of: 6/30/2023)

	States	Proposed Financing Model	Status	Anticipated End Date
1	California	Capitated	TRANSITIONED on 01/01/2023	N/A
2	Colorado	Managed FFS	TERMINATED on 12/31/2017	N/A
3	Illinois	Capitated	INTENDS TO TRANSITION Link to Transition Plan	12/31/2025
4	Massachusetts	Capitated	INTENDS TO TRANSITION Link to Transition Plan	12/31/2025; Duals Demo 2.0 pending
5	Michigan	Capitated	INTENDS TO TRANSITION Link to Transition Plan	12/31/2025
6	Minnesota	Admin. Alignment	Admin. Alignment MOU Signed (9/12/2013)	12/31/2025
7	New York	Capitated ¹	TERMINATED on 12/31/2019	N/A
8	Ohio	Capitated	INTENDS TO TRANSITION Link to Transition Plan	12/31/2025
9	Rhode Island	Capitated	INTENDS TO TRANSITION Link to Transition Plan	12/31/2025

	States	Proposed Financing Model	Status	Anticipated End Date
10	South Carolina	Capitated	INTENDS TO TRANSITION	12/31/2025
11	Texas	Capitated	INTENDS TO TRANSITION Link to Transition Plan	12/31/2025
12	Virginia	Capitated	TERMINATED on 12/31/17	N/A
13	Washington	Managed FFS	MOU Signed 10/25/2012	12/31/2023

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