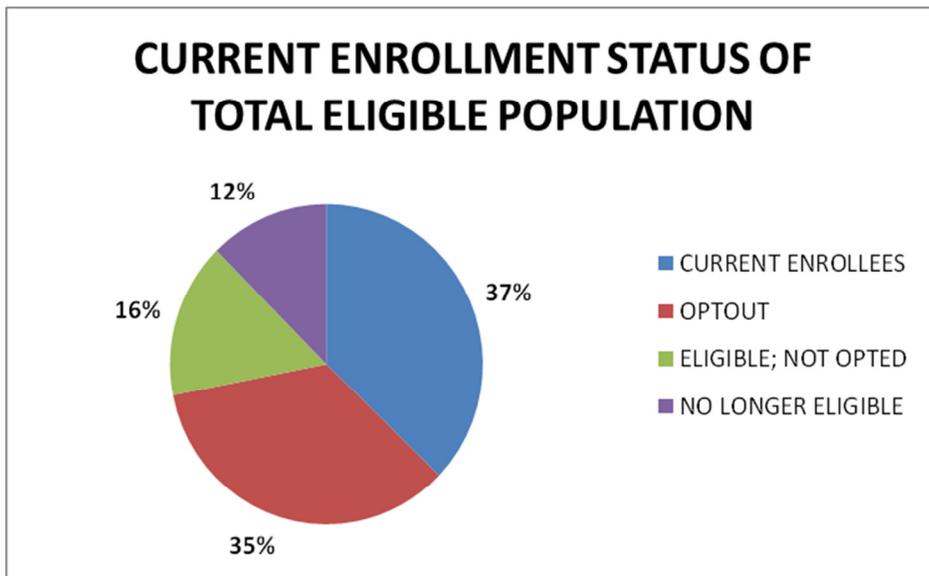




Commonwealth Coordinated Care Update – February 2015

In response to the feedback and suggestions we have received, the CCC Team is excited to announce a new format for sharing CCC enrollment information-The CCC Enrollment Dashboard! The Enrollment Dashboard provides more detailed enrollment information as requested by stakeholders, including a breakdown of: the total enrollment population; enrollment by region; enrollment by plan; and waiver type (community well, EDCD waiver recipient, or nursing facility resident). In addition, the dashboard includes information about the enrollment broker (MAXIMUS), the number of letters mailed to prospectively eligible beneficiaries, and the top 5 opt-out reasons as captured by MAXIMUS. The CCC Team thanks our Stakeholders for your ongoing engagement with the CCC Demonstration as your feedback continues to make this program stronger! Dashboard elements are included below and will be updated monthly on the DMAS website http://www.dmas.virginia.gov/Content_pgs/altc-stkhld.aspx.

CCC Enrollment

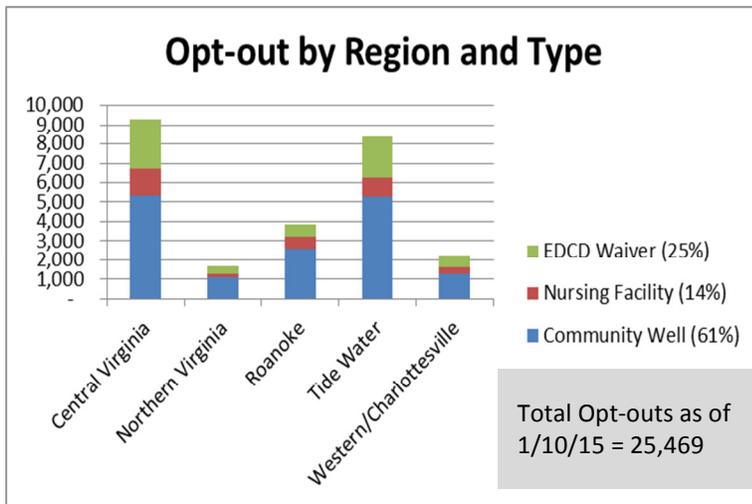
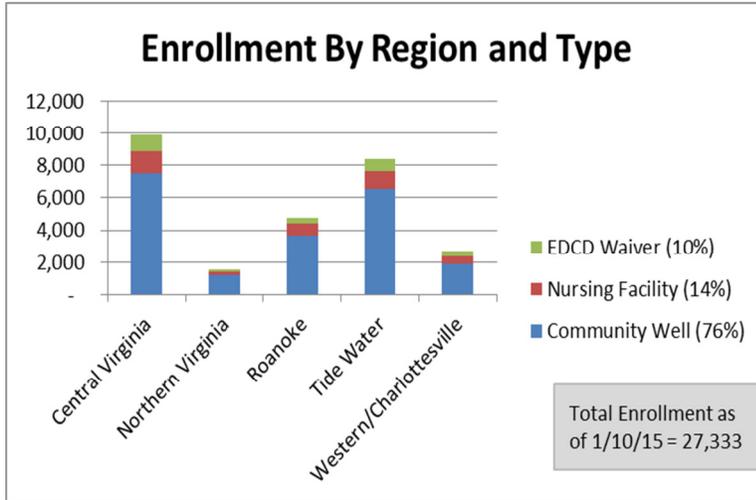


CURRENT ENROLLEES = All Active and Automatic Enrollments as of 1/10/15; **OPTOUT** = All potential enrollees that elected to not participate as of 1/10/15; **ELIGIBLE, NOT OPTED IN**= Beneficiaries are CCC eligible but are not scheduled for automatic assignment; **NO LONGER ELIGIBLE** = All potential enrollees that lost CCC eligibility because they lost Medicaid eligibility, moved out of the demonstration area, or because they now participate in some other exempt program or are in an exempt facility.



Commonwealth Coordinated Care

Medicare & Medicaid working together for you



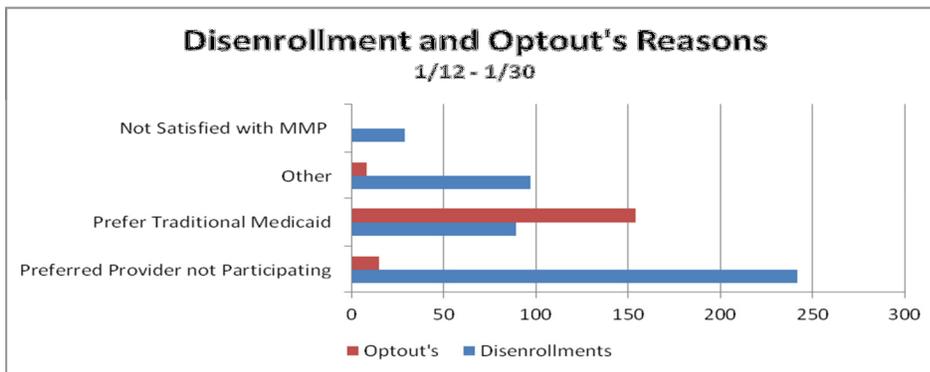
CCC Enrollment By Plan and Region

	Central Virginia	Northern Virginia	Roanoke	Tide Water	Western/ Charlottesville	Grand Total
Virginia Premier	2,700	65	1,213	1,549	775	6,302
Anthem HealthKeepers	3,722	741	1,688	3,588	1,113	10,852
Humana	3,503	750	1,889	3,243	794	10,179
Total	9,925	1,556	4,790	8,380	2,682	27,333



Maximus Call Center Statistics for January 2015						
For Week Ending	Total Calls Received	Total Calls Answered	Total Calls Abandoned	Average Abandon Rate	Average Talk Time (minutes)	Average Wait Time (seconds)
1/9/2015	1,231	1,183	48	3.74%	6.2	32
1/16/2015	780	779	1	0.00%	6.2	4
1/23/2015	861	853	8	0.81%	6.5	13
1/30/2015	1,037	1,022	15	1.25%	6.2	6
Totals For Month	3,909	3,837	72	1.45%	6.3	14

CCC Enrollment Mailing		
	30 Day Letter	60 Day Letter
Volume	947	539
Mailing Date	1/27/2015	1/30/2015



Other = No reason given; Don't like change; Don't like CCC benefits; Pharmacy benefit not included; Co-pay too high; Too Complicated. Each is less than 5% of total Disenrollment's and Opt-out's

Program Updates

A Note about Continuity of Care:

As a reminder, some beneficiaries are nearing the end of their initial 180 day Continuity of Care (CoC) period. Many health care providers are serving beneficiaries and working towards joining MMP networks but network status is still "in-process." As you near the end of the CoC transition, please keep in touch with your MMP provider relations representative to answer any questions about CoC. CCC Members with questions about CoC can reach out to their MMP Care Coordinator for information and support.



Claims Update

DMAS is aware there have been claims issues for certain groups of providers and DMAS is working together with the MMPs to rectify these issues. If you have experienced claims issues you have not yet voice to the MMP, please reach out to that MMP to work through those concerns.

Success Stories from the Field:

Beneficiary Story

In the 90 days prior to joining CCC, one dually eligible Virginian receiving EDCD waiver services had **10 Emergency Room visits** and **4 hospital stays**. After enrolling in CCC her pharmacy was not familiar with CCC and informed her she may have new costs for her prescriptions. The member felt confused and was worried CCC was not a good choice for her. The Care Coordinator from her CCC health plan came to her home and met with her for two hours discussing her benefits and helping her identify her goals for care. The pharmacy received information on CCC and the beneficiary does not have any costs for her prescriptions! In the 5 months since joining CCC she had only **2 Emergency Room visits** resulting in **1 total overnight hospital stay**.

A Few Things Stakeholders Have Told Us

"I love my CCC health plan. It's a nightmare trying to coordinate all these services!"-CCC Enrollee

"Thank you for all your assistance to providers as we navigate this transition to the CCC program. I really appreciate DMAS' active participation- it's had a positive impact."- Health Provider

Quality Update

Quality Learning Collaborative

The CCC Quality Learning Collaborative is an opportunity for the CCC Team to engage enrollees and external stakeholders in CCC quality improvement. The first Quality Learning Collaborative meeting was held on January 21, 2015. A few key CCC stakeholders were invited to participate in this initial meeting as determined by the planning task force. The initial meeting was used as an opportunity to introduce the Learning Collaborative to external stakeholders and Members/Member representatives. There was also an engaging discussion around Health Risk Assessments (HRAs) and Plans of Care (POCs) and how to improve on these processes. Quality Learning Collaborative meetings will be held quarterly and future meetings will be opened to a wider stakeholder attendance.



Other Quality Updates:

- The CCC Program is currently revising state specific reporting requirements (current reporting requirements and future updates will be available on the DMAS website: http://www.dmas.virginia.gov/Content_pgs/ccc-qm.aspx).
- The Medicare-Medicaid Coordination Office (MMCO) at the Centers for Medicare and Medicaid Services (CMS) will soon release preliminary data from all Demonstration states regarding initial HRA completion rates.
- The CCC Team is also reviewing MMPs' CY 2015 quality improvement project proposals together with CMS, and kicking off External Quality Review Organization (EQRO) activities. EQRO is a federal charge under Medicaid Managed care for operational system review, performance measure validation, encounter data validation, and performance improvement project validation. EQRO activities will be implemented throughout the demonstration by the new contractor Health Services Advisory Group (HSAG) that came on board February 1, 2015

Evaluation Update

During 2014, the evaluation team partnered with the Virginia Association of Centers for Independent Living to organize a series of focus groups with CCC enrollees with long term service and support and/or behavioral health needs. The partnership was successful and the team conducted four focus groups in the Tidewater and Central Virginia regions. Findings from these groups will be released shortly on the DMAS website http://www.dmas.virginia.gov/Content_pgs/ccc-eval.aspx. The evaluation team is currently partnering with the Virginia Association of Area Agencies on Aging and the Virginia Association of Community Services Boards to organize a second wave of focus groups for 2015. To date, the team has developed a focus group schedule with the following Area Agencies on Aging: Jefferson Area Board for Aging; Peninsula Area Agency on Aging; Senior Connections, The Capital Area Agency on Aging; Prince William Area Agency on Aging; New River Valley Agency on Aging; and LOA-Area Agency on Aging, Inc.

In addition, the evaluation team presented on DMAS' implementation of the CCC Program at the Fourth Annual Dual Eligible Best Practices Summit (Ft. Lauderdale) on February 9, 2015. The presentation will be posted on the DMAS website (http://www.dmas.virginia.gov/Content_pgs/ccc-eval.aspx). Finally, individuals interested in the evaluation should direct inquiries to Gerald A. Craver (DMAS lead evaluator: gerald.craver@dmas.virginia.gov).



Outreach and Education

The CCC Team is currently working with community partners to schedule ongoing CCC educational events and Provider Townhalls in the different CCC regions. If you would like to partner with DMAS to offer CCC education in your area, please reach out to us at CCC@dmas.virginia.gov.

Reminder, Provider and Beneficiary Call Schedule changes:

CCC Calls for Beneficiaries & their Advocates

The Second and Fourth Friday of each month at 10am

Dial-In Information: 1-866-842-5779

Pass Code: 6657847797#

Monday Provider Calls (LTSS)		Friday Provider Calls	
Adult Day Services The Second and Fourth Monday of each month	1:30-2p Conference Line 866-842-5779 Conference code 7143869205	Hospitals & Medical Practices The Second and Fourth Friday of each month	11-11:30am Conference Line 866-842-5779 Conference code 8047864114
Personal Care, Home Health & Service Facilitators Weekly	2-2:30p Conference Line 866-842-5779 Conference code 8047864114	Behavioral Health Weekly	11:30am-12pm Conference Line 866-842-5779 Conference code 8047864114
Nursing Facilities Weekly	2:30-3p Conference Line 866-842-5779 Conference code 7143869205		

*If you would like to be added to the email distribution list to receive notifications and Q&A Logs from the calls, please email us at CCC@dmas.virginia.gov and indicate which call(s) you are interested in.

NEXT STAKEHOLDER ADVISORY COMMITTEE MEETING:

**March 18, 2015
1:00 to 3:00 pm
Conference Room 7A&B
Department of Medical Assistance Services
600 East Broad Street
Richmond, VA 23219**