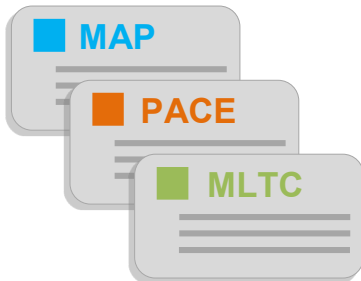


Dually eligible New Yorkers have the following long-term care coverage options:



- Medicaid Advantage Plus (MAP)
- Program of All-Inclusive Care for the Elderly (PACE)
- Original Medicare, Medicare Part D plan, fee-for-service Medicaid, and a Medicaid managed long-term care plan
- Or, Medicare Advantage, fee-for service Medicaid, and an MLTC plan

A **MAP plan** is a type of integrated Dual-eligible Special Needs Plan (D-SNP, a type of Medicare Advantage Plan) combined with a type of Medicaid managed long-term care plan. MAP plans are offered in certain New York counties and provide managed care to individuals who are eligible for (and enrolled in) Medicare and Medicaid (dually eligible) and in need of long-term care.

**PACE** is a program that provides integrated Medicare, Medicaid, and long-term care services under one plan. PACE is available in select New York counties. Enrollees receive their care at PACE centers, which are responsible for arranging all primary care, inpatient hospital care, and long-term care.

**MLTC plans** are available throughout New York for dually eligible individuals who require long-term care. Unlike MAP and PACE, having an MLTC plan does not affect Medicare coverage. This means that the enrollee's primary payer remains Original Medicare or their Medicare Advantage Plan.

Remember, beneficiaries enrolled in FIDA-IDD may continue to use their coverage in 2020.

## Considering plan options

MAP and PACE may be good options for former FIDA enrollees who want to continue receiving all their services through a single plan. Both options offer the possibility of greater care coordination, and some beneficiaries may find these models preferable if they are accustomed to managed care and provider networks.

MLTC may be a good option for individuals who are looking for greater flexibility in choosing a provider and would prefer not to be limited to a network. Keep in mind that if a beneficiary enrolls in MLTC, they will need to navigate multiple insurances—Original Medicare or Medicare Advantage, Part D, and their MLTC plan.

Individuals who need help navigating their long-term care coverage options in New York State should contact ICAN at 844-614-8800 or New York Medicaid Choice at 888-401-6582.

## Transitions for FIDA beneficiaries

New York's Fully Integrated Duals Advantage (FIDA) demonstration program ended December 31, 2019, for all enrollees. Beneficiaries enrolled in FIDA for people with Intellectual or Developmental Disabilities (FIDA-IDD) may continue to use their FIDA-IDD coverage in 2020.

### Continuity of care for FIDA beneficiaries

Beginning in October 2019, all New York Medicaid plans must accept eligible enrollees from closing FIDA plans. The new plan must allow the beneficiary to continue receiving the same services and utilizing the same providers until the earlier of the following:

- The Medicaid plan and the beneficiary have agreed on a new plan of care
- Or, 120 days after enrollment

Beneficiaries who receive any reductions in their new plan of care have the right to appeal with aid continuing, meaning that coverage for the service or item being terminated or reduced continues while the appeal is pending.

### Passive enrollment for FIDA beneficiaries

FIDA beneficiaries who did not select a new plan by the December 2019 deadline should have:

- Been passively enrolled into their FIDA insurer's Medicaid Advantage Plus (MAP) plan, if the MAP plan was approved for passive enrollment by the Centers for Medicare and Medicaid Services (CMS)
- Or, been enrolled into their FIDA insurer's Medicaid managed long-term care (MLTC) plan with Original Medicare and a zero-premium Part D prescription drug plan, if the beneficiary was ineligible for passive enrollment or the MAP plan is not approved by CMS

All coverage changes were effective January 1, 2020.

Passive enrollment from FIDA to MAP is meant to help ensure that beneficiaries continue to receive integrated care without interruption. FIDA beneficiaries eligible for passive enrollment should have received three notices:

1. By October 2, 2019: a nonrenewal notice 90 days before the plan closes
2. By November 1, 2019: a notice 60 days before the passive enrollment effective date
3. By December 1, 2019: a notice 30 days before the passive enrollment effective date

Notices included information about other available coverage options and continuity of care rights.

FIDA beneficiaries who want to make coverage changes on or after January 1, 2020, should contact ICAN at 844-614-8800 or New York Medicaid Choice at 888-401-6582 to discuss their coverage options and learn whether they have continuity of care rights.

## Moving from FIDA to MAP

While MAP plans must offer substantially similar benefits as those covered in FIDA, there are several FIDA benefits that are not included in the MAP benefit package, including:

- Palliative care (however, eligible individuals should be able to access coverage through Medicare's hospice benefit)
- Structured day program
- Social day care transportation
- Home visit by medical professional
- Positive behavioral interventions and support
- Home maintenance services
- Nutritional/educational counseling
- Assistive technology (however, some beneficiaries are eligible to receive this benefit)
- Family planning services
- Certain behavioral health services

Some of these services are available through the beneficiary's fee-for-service (FFS) Medicaid coverage. This means the beneficiary has the option of going to a provider that accepts FFS Medicaid for coverage.

FIDA beneficiaries with behavioral health needs should note that several services, such as continuing day treatment programs (CDTPs), Personalized Recovery-Oriented Services (PROS), assertive community treatment (ACT), and intensive psychiatric rehabilitation treatment (IPRT), are covered by FFS Medicaid. If a beneficiary needs help accessing behavioral health services, they should contact their care manager.

## MAP care coordination

While MAP plans are designed to provide more patient-centered care coordination, beneficiaries moving from FIDA to MAP may experience differences in how the plan coordinates care. For example:

- FIDA enrollees had the option to receive coordinated care from a team of health care providers, sometimes called an Interdisciplinary Care Team (IDT). This team included the beneficiary's care manager and was responsible for developing a personalized care plan.
- MAP enrollees are assigned a care manager (employed by the plan) who should help coordinate access to needed care, including non-covered services that support an enrollee's care plan.

Some MAP plans include the option to receive coordinated care from a team (sometimes called an Interdisciplinary Team or Interdisciplinary Care Team), including the enrollee (and a caregiver or family member, if desired), the care manager, and optional other providers.