

Accountable Care Collaborative Medicare-Medicaid Advocate

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Colorado Medicare-Medicaid Advocate
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DISABILITY LAW
COLORADO

Protecting the rights of Coloradans of all ages since 1976

Medicare-Medicaid Advocate

- Role of the Advocate
- Connection to the Colorado Accountable Care Collaborative
- The dually eligible Medicare-Medicaid community
- What the MMA Does and How

What Does the Medicare-Medicaid Advocate Do?

- I provide independent help with Beneficiary Rights and Protections for Coloradans who have both Medicare and Full Medicaid
- Assist with issues involving Medicare or Medicaid services
- Help with a problems a beneficiary may have with a doctor, hospital or other health care provider
- Help file a complaint or grievance
- Help with a formal appeal if services have been denied, terminated or reduced

The Medicare Medicaid Advocate services are free and independent.

How Does the MMA Work?

- Takes referrals from clients, their families, friends and advocates
 - Phone
 - Email
 - Mail
- Investigates, seeks information and researches the issue(s)
- Follows all cases to a conclusion
- Sometimes seeks help from others but still follows the case to conclusion
- Maintains contact with the client throughout and provides updates regarding the status of an investigation
- Gathers data to share trends with others including the Colorado State Unit on Aging, the Administration for Community Living and the Center for Medicare and Medicaid Services

How is Medicare Medicaid Advocate Funded?

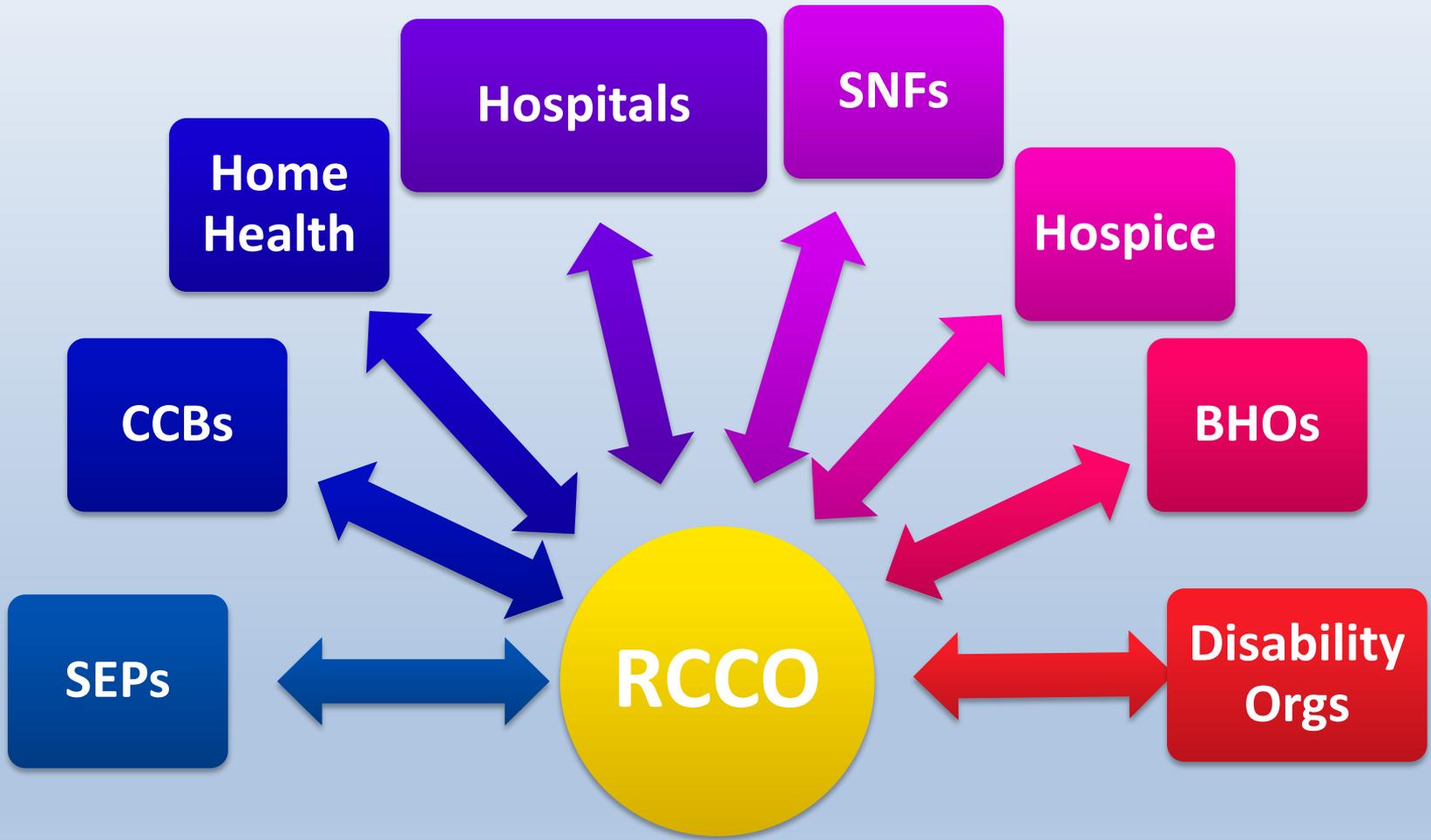
- Colorado is one of 8 states funded by the Centers for Medicare and Medicaid Services to provide ombudsman services
- Colorado's Department of Human Services (CDHS) receives the federal funds
- CDHS contracted with Disability Law Colorado (DLC)
- DLC has long history with Ombudsman services
 - Long Term Care Ombudsman

The Accountable Care Collaborative Connection

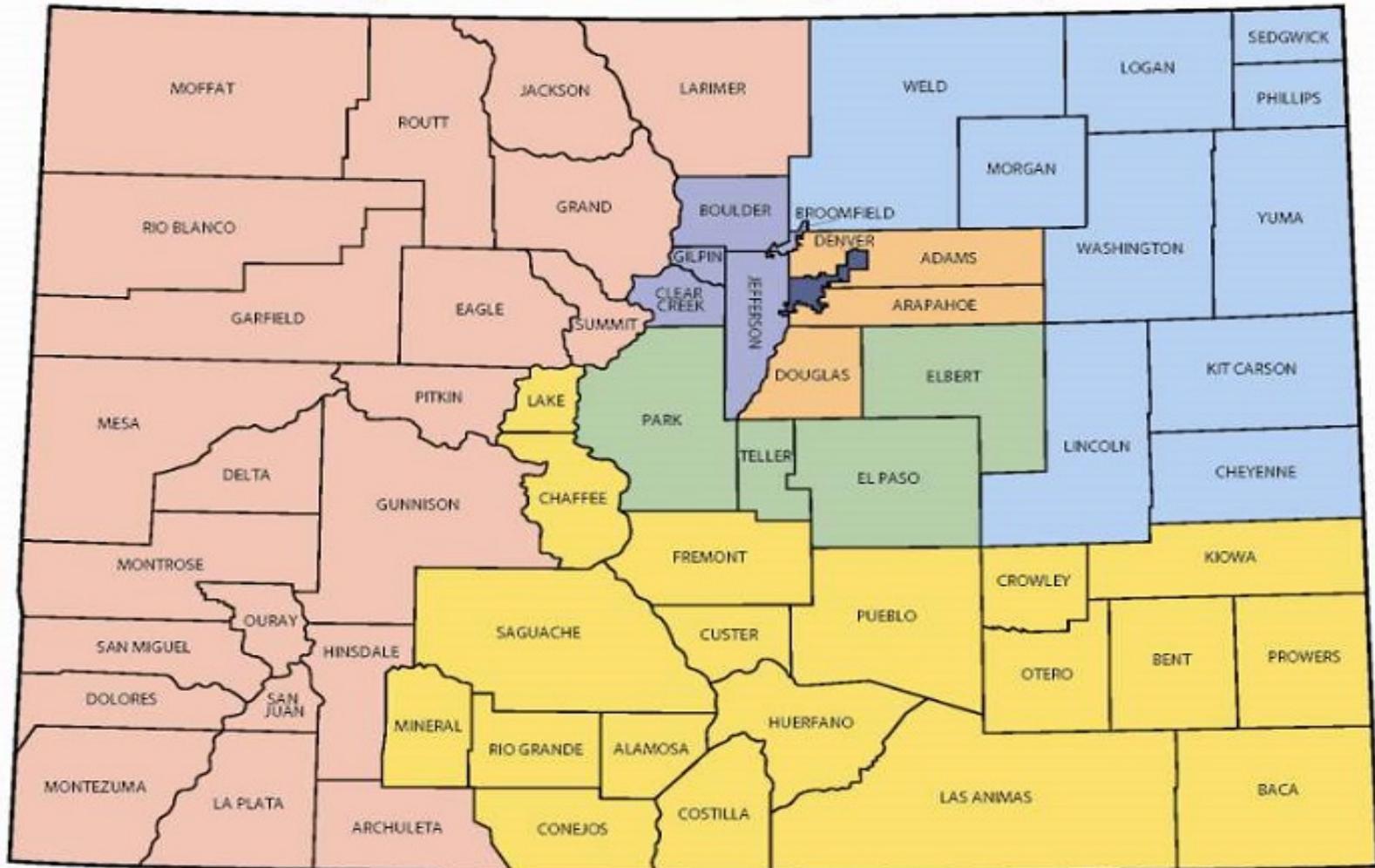
ACC recipients:

- Receive the regular full Medicaid benefit package (in addition to their Medicare coverage)
- Belong to a Regional Care Collaborative Organization (RCCO) and
- Choose a Primary Care Medical Provider (PCMP)
- Website for the ACC: co.gov/hcpt/mmp

RCCO's Coordinate Care through Agreements or Protocols



Colorado's Accountable Care Collaborative Regional Care Collaborative Organization Map



Region 1 Rocky Mountain Health Plans

Region 2 Colorado Access

Region 3 Colorado Access

Region 4 Integrated Community Health Partners

Region 5 Colorado Access

Region 6 Colorado Community Health Alliance

Region 7 Community Care of Central Colorado

Why focus on Medicare-Medicaid enrollees?

- People that rely almost entirely on government programs to help meet their health needs. Most have limited incomes.
- Approximately 60% of these individuals have multiple chronic conditions. 41% of M/M enrollees have at least one mental illness diagnosis, 22% live in institutional settings
- Some also have cognitive impairments, low literacy and face housing isolation
- Most will need long term care services at some point in their lives
- Compared to average Medicaid recipients, they generally require a higher level of care, but face more barriers to receiving the right services at the right time and place
- In 2010, M/M enrollees accounted for approx. \$285 billion in federal and state spending of which \$170 billion was Medicare spending and \$115 billion was Medicaid spending

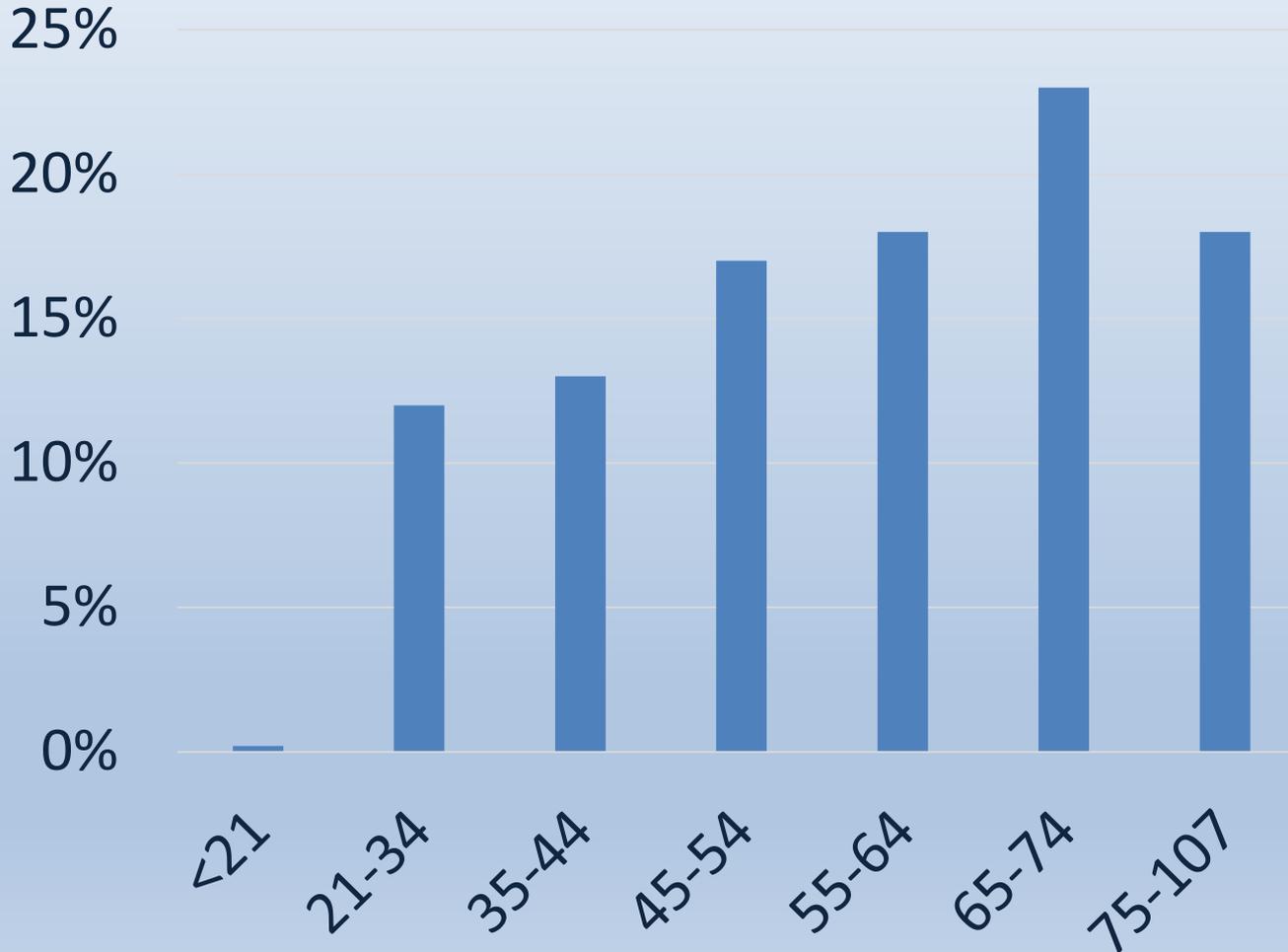
Who are the Dual Eligibles?

- Full benefit Medicare-Medicaid enrollees are individuals who are :
 - Enrolled in Medicare Parts A and B and are eligible for Part D,
 - Receive full Medicaid State Plan benefits,
 - Have no other comprehensive private or public health insurance
 - Approximately 32,000 enrolled in Colorado

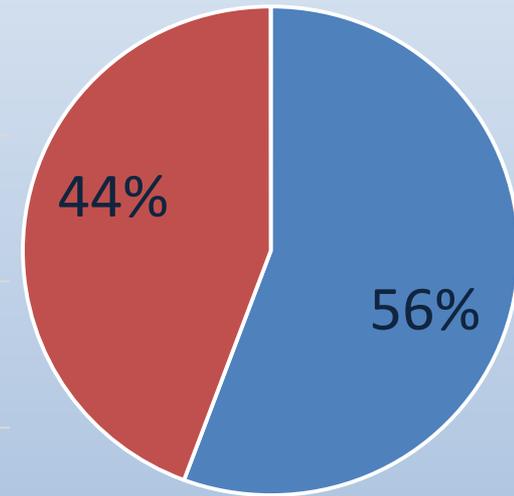
Age & Gender

*April 2015

Age Distribution



Gender



■ Female ■ Male

Medicare-Medicaid Enrollees

Top Five Physical Health Diagnoses

- Hypertension - 30%
- Diabetes - 21%
- Pain in limb - 18%
- Chest Pain - 16%
- Hyperlipidemia (high cholesterol) - 14%

Colorado's Medicare-Medicaid Enrollees Top Five Mental Health Diagnoses

- Depressive Disorder NEC - 12%
- Anxiety State NOS - 9%
- Tobacco Use Disorder - 7%
- Schizoaffective Disorder - 4%
- Bipolar Disorder - 3%

Who is NOT eligible for MMA services?

- Individuals who are Qualified Medicare Beneficiary only recipients
- Beneficiaries enrolled in a Program for All Inclusive Care for the Elderly (PACE)
- Beneficiaries enrolled in a Medicare Advantage Plan (Part C)
- Individuals enrolled in the Denver Health Medicaid Choice Plan, the Rocky Mountain Health Plan or the ACC Rocky Prime Program
- Beneficiaries residing in an Intermediate Care Facility for individuals with Intellectual and Developmental Disabilities

Beneficiary Rights and Protections Alliance

- Medicaid Managed Care Ombudsman
- KEPRO – the Medicare Quality Improvement Organization
- SHIP (State Health Insurance Assistance Program)
- Long Term Care Ombudsman
- Colorado Legal Services
- Colorado Center on Law and Policy (CCLP)
- Colorado Cross Disability Coalition (CCDC)
- Self Advocates
- Colorado Department of Human Services State Unit on Aging (SUA)
- Health Care Policy and Financing (HCPF)

Examples

- Mary E. - 85 year old woman, lives independently in a first floor apartment, there are 6 steps from the parking lot to the landing outside of her apartment, uses a walker, visually and hearing impaired, cardiac and vascular issues, fall risk, has 25hrs/week of personal care support, needs a ramp to get safely to and from her home and a Life Alert system
- Mary W. - 69 year old woman, resides in Pueblo, End Stage Renal Disease, unable to receive dialysis in her community allegedly because a prominent nephrologist is blocking her care, son must drive her to Denver 3x/week for dialysis

Medicare Medicate Advocate - Summary

- Specific, state-wide assistance to Coloradans with both Medicare and Medicaid
- Free and independent service
- Investigates and seeks solutions
- MMA tracks and follows all cases to a conclusion

QUESTIONS??

Contact Information

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Thank you!