Arkansas Health & Opportunity for Me Life360 HOMEs and Other Program Updates





Life360 HOMES



Life360 HOME Concept

The concept: DHS contracts with hospitals to provide or contract to provide intensive care coordination for ARHOME enrollees most at risk

Three types of Life360 HOMES:

- ✓ Maternal Life360 HOMEs: home visiting services to women with high-risk pregnancies
- ✓ Rural Life360 HOMEs: care coordination services to individuals with serious mental illness or substance abuse disorders living in rural areas
- ✓ Success Life360 HOMEs: help with life skills and social-related health needs for young adults most at risk (e.g., former foster youth and formerly incarcerated)

All medical services continue to be provided through QHP or traditional Medicaid; Life360s provide supplemental supports only.



Details for Life360s

For each Life360 type, we'll walk through:

- Overall concept
- Provider criteria
- Client eligibility
- Monitoring metrics

For all three Life360s, we'll walk through:

- Client referrals
- Funding approach
- Communications and outreach



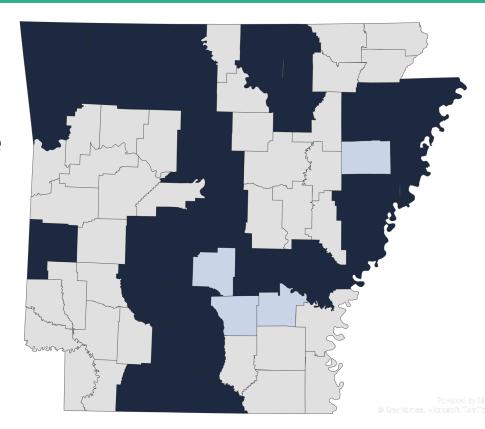
Maternal Life360: Concept

- Life360 HOME (hospital) contracts with evidence-based home visiting provider to provide home visiting services to women with high-risk pregnancies
- Home-visiting program provides services for up to two years after baby's birth
- ARHOME clients can continue to receive Life360 services even if they disenroll from Medicaid.
- Hospitals will be paid a per member per month payment

Maternal Life360: Provider Criteria

- Hospitals with obstetrics unit and enrolled as AR Medicaid provider
 - 39 AR hospitals eligible
- Can be hospital in bordering state





4 evidence-based home visiting programs in AR Currently operate in 38 counties and parts of another 4



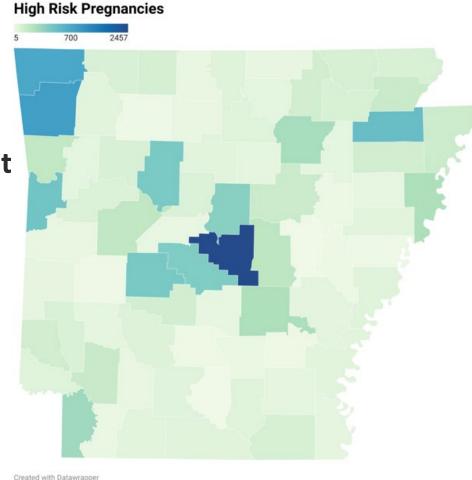
Life 360 Application Process

- Letter of intent: estimated # of clients, partner organization, proposed service area
- **Application:** description of delivery of services, community analysis, partner agreement, referral network, community outreach plan
- Approval of application and signed startup agreement triggers first startup payment
- Readiness Review: Provide client assessment tools, fully executed agreements, demonstrate reporting capabilities
- Approval of Readiness Review triggers second startup payment
- Clients begin enrolling through enrollment organization



Maternal Life360: Client Eligibility

- Clients are eligible if they are:
 - Enrolled in ARHOME or another Medicaid program
 - Have high-risk pregnancy diagnosis and are pregnant at the time of enrollment
 - Live in the Life360 service area
 - Not already receiving homevisiting services
- About 12,500 women on Medicaid diagnosed with highrisk pregnancy in 2021





Maternal Life360: Monitoring Metrics

- Home visits
- Person-Centered Action Plan Milestone Achievement
- PCP assigned, hospital admissions and re-admissions, emergent and non-emergent ED visits
- Prenatal visits
- C-sections
- Live birth
- Pre-term/term
- Birthweight
- NICU stay
- EPSDT visits
- Postpartum contraceptive care



Rural Life360 Concept

- Rural hospitals that become Life360 HOMEs provide clients with serious mental illness or substance use disorder with intensive care coordination for up to 24 months
- Life360 directly provides community screens for healthrelated social needs and intensive care coordination for enrolled clients
- Life360 hospital must also operate an Acute Crisis Unit that is available 24/7

Rural Life360: Provider Criteria

Hospital is eligible if it:

- Is a general hospital or critical access hospital
- Has 50 or fewer beds
- Enrolled AR Medicaid provider
- Located in rural area

Rural area means a county with

- 1.) CAH or a SHIP hospital OR
- 2.) has less than 50,000 population

30 AR hospitals eligible; nonrural hospitals can participate as partner

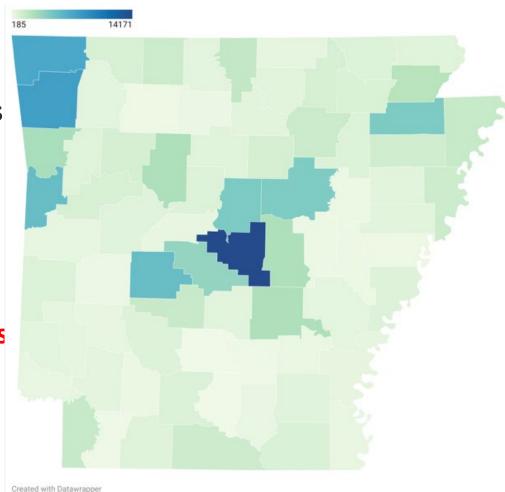






Rural Life360: Client Eligibility

- Clients are eligible for care coordination services if:
 - Enrolled in ARHOME,
 - Have a diagnosis of serious mental illness (SMI) or substance use disorder (SUD)
 - Live in Life360 service area
- PASSE clients are excluded
- About 12,800 ARHOME clients in rural counties with SUD diagnosis and about 48,000 with SMI diagnoses in 2021 (about 52,000 unduplicated)







Rural Life360: Monitoring Metrics

- Person-Centered Action Plan milestone achievement
- PCP assigned, hospital admissions and re-admissions, emergent and non-emergent ED visits
- BH therapy visits
- Drug/alcohol treatment
- Follow-up after hospitalization for mental illness
- Follow-up after ED visit for alcohol and other drug abuse or dependence
- Follow-up after ED visit for mental illness

Success Life360 Concept

- Life360 HOME contracts with community organization with experience working with young adults most at risk of long-term poverty to build life skills
- Community organizations helps clients with health-related social needs, including finding safe housing, accessing education, applying for employment, getting a driver's license, etc.
- Clients receive services for up to 24 months or until they age out of their eligibility category



Success Life360: Provider Criteria

- Acute care hospitals enrolled as AR Medicaid provider
- 49 hospitals
 eligible (though
 the lack of a
 community
 partner may limit
 most of those
 eligible)







Success Life360: Client Eligibility

Clients are eligible if they are:

- Enrolled in ARHOME
- Live in the service area
- Meet one of the four eligibility categories
 - Formerly in foster care, ages 19-27 (about 5,700 in ARHOME)
 - Formerly incarcerated, ages 19-24 (about 750 in ARHOME)
 - Formerly in DYS custody, ages 19-24 (about 800 in ARHOME)
 - Is a veteran; ages 19-30

Success Life360: Monitoring Metrics

- Person-Centered Action Plan Milestone Achievement
- PCP assigned, hospital admissions and re-admissions, emergent and non-emergent ED visits
- Income/FPL changes
- Avoidance of criminal justice system
- Education enrollment/completion
- Workforce training/completion
- Safe housing

Life360 Referrals

- Clients referred for diagnosis (if necessary) and to Life360 services by:
 - OB/GYNs,
 - Behavioral health providers
 - Relevant state agencies (DCFS, DYS, ADC), upon release, if appropriate
 - Veteran's groups
 - QHPs
 - Community network (e.g., homeless shelter, church, etc.)

Life360 Communications and Outreach

- Life360 responsible for outreach to:
 - ✓ OB/GYNs and behavioral health providers: educate about program, referral process and use of diagnosis codes
 - ✓ Community referral network for referring clients TO Life360 (homeless shelters, churches, etc.)
 - ✓ Community resource network to refer clients with healthrelated social needs to (food banks, low-income housing agencies, etc.)
- DMS will develop overall communications plan to include provider outreach/education and communication to clients potentially eligible for Life360
- DMS will help Life360 work with ADC, DCFS, DYS, and VA on establishing enrollment processes for clients upon release from prison, foster care and DYS (if 19 or older)



Life360 Funding

| Payment Type | Maternal | Rural | Success |
|---|----------|----------|---------|
| Start up | | | |
| Per Member Per Month Home Visiting | | | · |
| Transportation | | | |
| Intensive Care Coordination | | | |
| Technology | | | |
| Per-Person Success Award | | | |
| Emergency Equipment and Training | | | |
| Acute Care Unit Observation and Stabilization Staff | | / | |



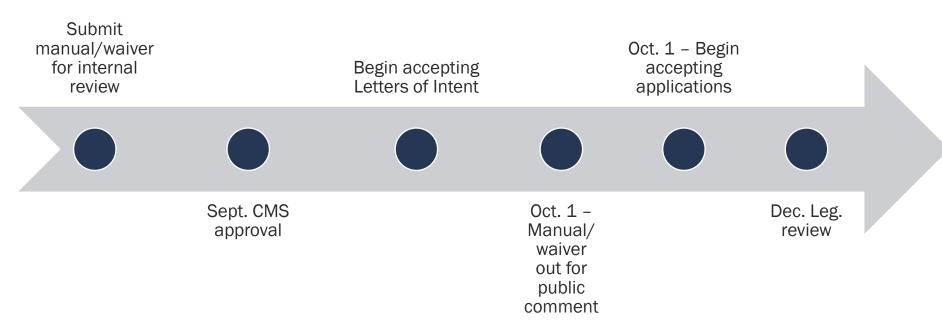


Approvals Needed

- CMS approval of Life360 HOME component of ARHOME's 1115 waiver application; CMS supports the concept but and has submitted draft special terms and conditions; DHS received draft agreement language from CMS on 9/16.
- CMS approval of 1915(b) waiver and state plan amendment to allow high-risk pregnant women who are enrolled in a Medicaid program other than ARHOME to participate in Maternal Life360 HOME
- State promulgation of Life360 HOME provider manual describing the rules for program operations



Implementation Timeline January 1, 2023 Go Live





ARHOME Program Updates



July Updates

Changes that took effect July 1:

- Transitioned some ARHOME enrollees to Provider-Led Shared Savings Entity (PASSE)
 Program; applies to individuals who are medically frail and have been assessed as a Tier II or III on the Behavioral Health Independent Assessment about 1,100 people
- Reduced retroactive eligibility from 90 days to 30 days

September Update

- Beginning September 1, DHS suspended enrollee auto-assignment into QHPs to help with budgetary constraints.
- DHS can suspend auto-assignment if total ARHOME enrollment exceeds 320,000 and the percentage of ARHOME clients enrolled in a QHP exceeds 80%.
- As of 9/6, QHP enrollment was nearly 91% of total ARHOME enrollment, and total enrollment exceeded 340,000
- During the suspension, clients receive medical coverage through traditional Medicaid fee for service.
- Clients still can select a plan. About 25% of new ARHOME enrollees typically select their plan.
- As of 9/16, nearly 2,000 people stayed in Medicaid who would have been assigned to a QHP.
- Auto assignment will resume when the percentage of ARHOME clients enrolled in a QHP dips below 80%.



November Update

- Open enrollment is the only time clients can switch from one QHP to another, but new ARHOME enrollments occur throughout the year
- Begins November 1
- Extends through January 15 to align with federal open enrollment period for Marketplace

Purchasing Guidelines and MOU

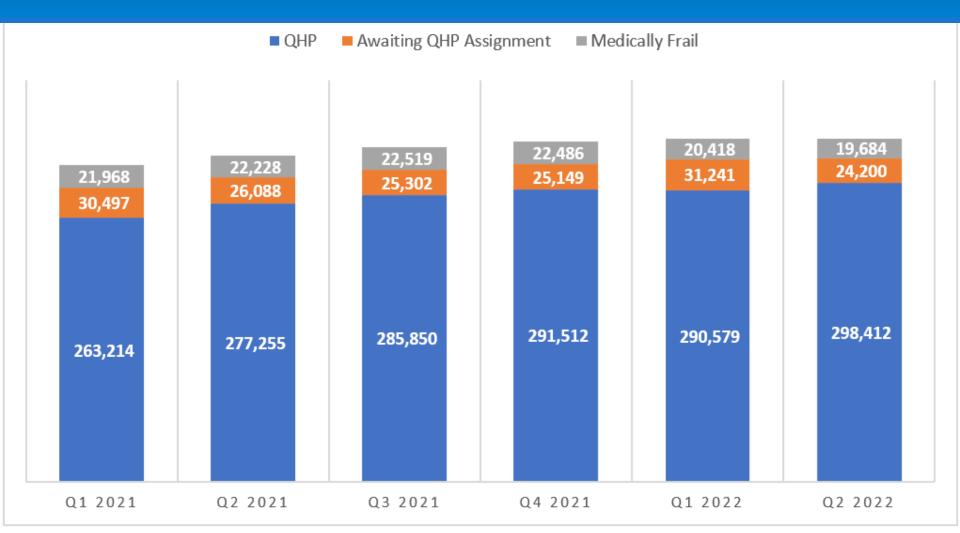
- Purchasing guidelines are the guidance to carriers about what type of plans we will purchase
- MOU is the binding agreement we make with the carriers for the plan year
- Changes for 2023:
 - No client premiums, per CMS
 - Require <u>two</u> health incentives aimed at improving health of specified populations (e.g., pregnant women, individuals with serious mental illness or substance use disorder)
 - Networks must include federally qualified health center or rural health clinic
 - New cost sharing structure



ARHOME Quarterly Report



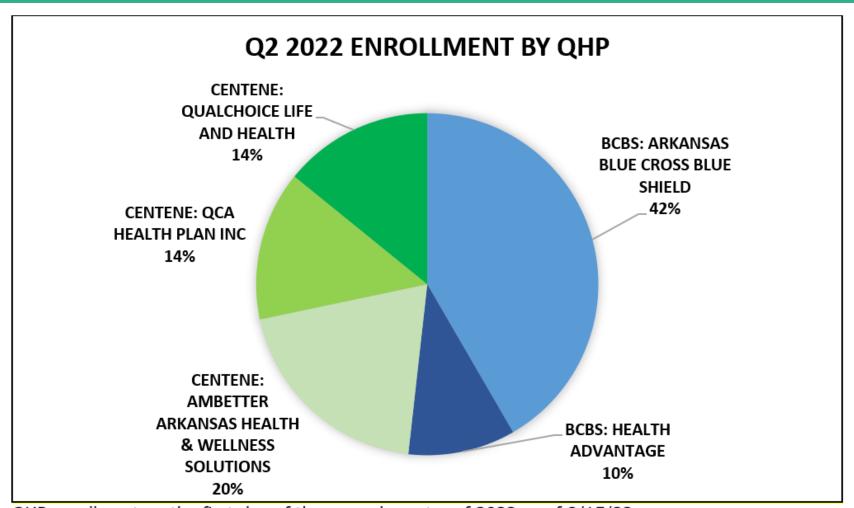
ARHOME Enrollment



Enrollment as of the first day of each quarter as of July 5, 2022



QHP Enrollment



QHP enrollment on the first day of the second quarter of 2022 as of 8/15/22.





2022 and 2023 Premium Rates

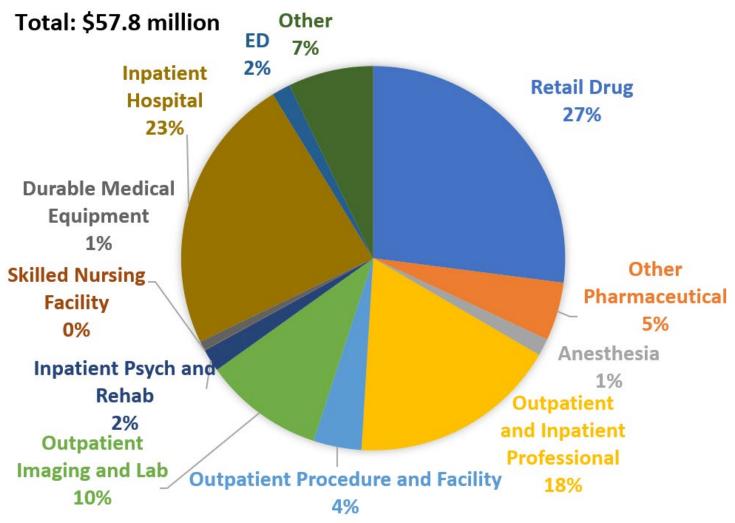
- Average Q2 2022 premium payment: \$487
- Average Q2 2022 Advanced Cost Share Reduction (ACSR) Payment: \$212

2023 Rates

| | Average % | |
|---|--------------|--|
| | Increase | |
| | 2022 to 2023 | |
| Centene Ambetter Arkansas Health & Wellness Solutions | 7% | |
| Centene QCA Health Plan Inc. | 5% | |
| Centene QualChoice Life and Health | 3% | |
| BCBS Arkansas Blue Cross and Blue Shield | 4% | |
| BCBS Health Advantage | 5% | |

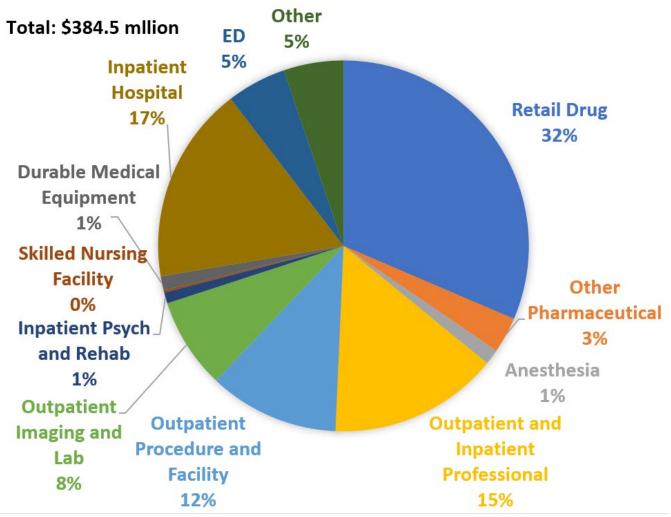


Q1 2022 ARHOME Utilization: Medically Frail and Those Awaiting QHP Enrollment





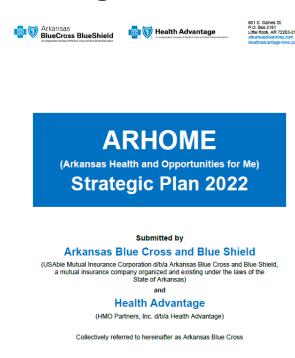
Q1 2022 ARHOME Utilization: QHPs





December Meeting

- Review 2021 performance metrics and establish 2023 performance targets
- Carrier presentations on 2023 strategic plans to meet health outcome targets; drafts are due to DHS by 9/30.





2022 ARHOME Strategic Plan

August 20, 2021

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