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Community Health Choices is coming; deadline to enroll fast approaching

Community Health Choices (CHC) is Pennsylvania's **mandatory** managed care program for most of those who receive Medical Assistance (Medicaid) services, including those who are on Medicaid and Medicare (dual eligible) and many individuals with disabilities. There are some exceptions but the vast majority of those who are receiving Medicaid coverage will be required to choose their new provider by **November 13, 2018** or one will be chosen for them. This includes individuals in skilled nursing facilities as well as those who are receiving Long Term Care and Support Services at home. Families and representatives of those who cannot choose for themselves need to become involved.

The Department of Human Services (DHS) has information on its website that is helpful for consumers and their families and loved ones (http://www.healthchoices.pa.gov/cs/groups/webcontent/documents/document/c_237795.pdf). Per DHS, CHC has been developed to "(1) enhance access to and improve coordination of medical care and; (2) create a person-driven, long-term support system in which people have choice, control, and access to a full array of quality services that provide independence, health, and quality of life. Long-term services and supports (LTSS) help eligible individuals to perform daily activities in their home such as bathing, dressing, preparing meals, and administering medications."

There are three providers in this area for CHC-MCOs. They are Keystone First Community Health Choices, PA Health and Wellness, and UPMC Community Health Choices. Individuals as well as providers will be asked to choose. Therefore, every skilled nursing facility will be required to choose a CHC-MCO (although some may choose to contract with more than one), and every agency that provides care at home or in other settings (other than current LIFE program enrollees) will need to contract with a provider. Simultaneously, the individuals receiving the care will be required to choose one of the CHC-MCOs, hopefully coordinating with their current provider's choice. Enrollment also requires that the individual choose a primary care physician who is a provider in their choice of CHC-MCO. Everyone who is affected currently should have received a mailing or more than one mailing regarding this. This will include many individuals who may not be receiving LTSS directly but may have Medicaid as insurance.

CHC has been rolled out in Southwest PA since last January. It starts in Southeast PA, specifically in Bucks, Chester, Delaware, Montgomery, and Philadelphia Counties on January 1, 2019. Note that Berks County is in the next roll out which is January, 2020.

Especially note that MEDICARE enrollment is not affected. It is confusing since we are in open enrollment for Medicare but individuals who are dually eligible for Medicare and Medicaid (including many seniors on LTSS and those in facilities) do not need to switch their Medicare coverage. There is an option to choose a managed care Medicare option related directly to the CHC-MCO choice, but it is an option and should be researched. Some may choose this option to potentially save money. The new MCOs are required to coordinate with whatever Medicare plan is in place.

Those who cannot enroll in CHC are those in state operated nursing homes such as VA homes, many of those with intellectual disabilities or autism, those with behavioral health service needs, OBRA participants not nursing facility clinically eligible, Act 150 program participants who are not dual eligible, and those under 21 years.

If an individual chooses to ignore the deadline, he or she will be assigned a CHC-MCO. Do not lose your or your loved one's opportunity to make an informed choice. There will be some ability to switch plans in the first six months after implementation, but it is a better option to make an informed choice now.