



HOW TO TALK TO PARTICIPANTS ABOUT COMMUNITY HEALTHCHOICES



COMMUNITY HEALTHCHOICES (CHC) is Pennsylvania's mandatory managed care program for individuals who are eligible for both Medicaid and Medicare (dual eligibles), older adults, and individuals with physical disabilities — serving more people in communities, giving them the opportunity to work, spend more time with their families, and experience an overall better quality of life. When implemented, CHC will improve services for hundreds of thousands of Pennsylvanians.

WHAT'S STAYING THE SAME?

► SERVICES

The services that participants are eligible for will not change. In fact, they may be eligible for more services than they receive today.

WHAT'S CHANGING?

► COORDINATION

Today, the Department of Human Services coordinates the care for most participants in two different fee-for-service systems. Under CHC, managed care organizations (MCO) will coordinate both the physical health and LTSS in one system.

PARTICIPANTS WHO ARE TRANSITIONING TO CHC

MAY HAVE QUESTIONS ABOUT HOW CHC WILL WORK FOR THEM. WE WANT TO MAKE SURE YOU HAVE THE INFORMATION YOU NEED TO BE ABLE TO ANSWER THOSE QUESTIONS. IF YOU ARE UNABLE TO ANSWER ANY QUESTIONS PLEASE DIRECT THEM TO THE PARTICIPANT HOTLINE: 833-735-4416.

CHC will use managed care organizations (CHC-MCOs) to coordinate physical health and long-term services and supports (LTSS) for participants. CHC will : (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. LTSS help eligible individuals to perform daily activities in their home such as bathing, dressing, preparing meals, and administering medications.

WHO WILL ENROLL IN CHC?

Individuals will be enrolled in CHC if they are 21 years old or over and:

- Receive both Medicare and Medical Assistance (Medicaid); or
- Receive LTSS in the Attendant Care, Independence, COMMCARE, or Aging waivers;
- Receive services in the OBRA Waiver **and** determined nursing facility clinically eligible; or
- Receive care in a nursing facility paid for by Medicaid.

Individuals will not be enrolled in CHC if they:

- Receive LTSS in the OBRA Waiver and are **not** nursing facility clinically eligible; or
- Are a person with an intellectual or developmental disability who is eligible for services through DHS' Office of Developmental Programs; or
- Reside in a state-operated nursing facility, including state veterans' homes.

Individuals who participate in a Living Independence for the Elderly (LIFE) program can remain in their LIFE program and will not be moved into CHC unless they specifically ask to change. Anyone who is enrolled in CHC and qualifies for LIFE may choose to move to the LIFE program.

WHAT DOES CHC COVER?

All participants will continue to receive the same physical health benefits that are part of the Medical Assistance Adult Benefit Package today. Participants who are eligible for LTSS also get all services now available in waivers offered by the Office of Long-Term Living.

WHAT MAKES THE CHC PROGRAM DIFFERENT?

Participants will select an MCO. The plan will pay for and manage all participants Medical Assistance services including LTSS. Participants will still be able to get all the services they have today. The plans may also offer additional services.

WHO WILL COVER BEHAVIORAL HEALTH SERVICES?

HealthChoices Behavioral Health MCOs will deliver behavioral health services. The CHC-MCO will coordinate care with the Behavioral Health MCOs. This is new for nursing facility residents and Aging Waiver participants who received behavioral health services through the fee-for-service system.

LIVING INDEPENDENCE FOR THE ELDERLY (LIFE)

LIFE is Pennsylvania's existing voluntary managed care program that serves eligible seniors in their homes and communities and will continue to be an option.

Individuals who already participate in a LIFE program will remain in their LIFE program and will not be enrolled into CHC unless they specifically ask to change programs. Anyone who is enrolled in CHC and qualifies for LIFE may choose to enroll in the LIFE program.

LIFE participants receive behavioral health services through LIFE.

What is the LIFE program and am I eligible?

LIFE is the voluntary managed care program that Pennsylvania will continue to offer. If you are 55 years of age or older, the LIFE program may be an option for you.

LIFE uses local programs to pay for, manage, coordinate, and provide all your care and services needs. Go to dhs.pa.gov for more information and to locate a LIFE Program near you.

If you are currently enrolled in a LIFE program, you do not need to do anything and your services will continue to be provided by your LIFE provider, not through a CHC-MCO.

WILL INDIVIDUALS HAVE A CHOICE OF CHC-MCOS?

YES. Each participant may choose his or her MCO. The CHC-MCOs are AmeriHealth Caritas Pennsylvania, PA Health & Wellness, and UPMC Community HealthChoices.

WILL THIS CHANGE MEDICARE?

Participants will not need to change their Medicare. However, participants may choose to have the same CHC-MCO provide their CHC services and Medicare coverage. This will improve coordination between Medicare and Medical Assistance. Participants will receive more information about this option once they select their CHC-MCO. Additionally, CHC-MCOs have the same responsibility for coordination of members' Medicare coverage — whether they participate in traditional Medicare or a Medicare Advantage product.

DO PARTICIPANTS HAVE TO PAY FOR CHC?

There are no extra costs for CHC. Participants will continue to have the same Medical Assistance costs they pay today.

NURSING FACILITY RESIDENTS

DO PARTICIPANTS HAVE TO CHANGE THEIR NURSING FACILITY?

If a participant is in a nursing facility on the day that CHC starts in their zone, they will not have to move to a different nursing facility unless they choose to.

HCBS WAIVER PARTICIPANTS

WHAT HAPPENS TO THE WAIVER PROGRAMS?

With one exception, CHC will replace the waiver programs available through the Office of Long-Term Living. The OBRA waiver will continue to exist for individuals 18 and older who have a severe developmental physical disability and need an Intermediate Care Facility/Other Related Conditions (ICF/ORC) level of care.

DO PARTICIPANTS HAVE TO CHANGE WAIVER PROVIDERS OR SERVICE COORDINATOR?

For the first 180 days of CHC, participants will be able to keep their current waiver providers and service coordinator. After that, they will need to use providers and service coordinators who are in the CHC-MCO's network.

NEED MORE INFORMATION?

GO TO HEALTHCHOICESPA.COM OR CALL:

- **PROVIDER HOTLINE: 833-735-4417**
- **PARTICIPANT HOTLINE: 833-735-4416**

