

BROADCAST DMAS-23

DATE: January 16, 2018

TO: Local directors and Medicaid staff

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SUBJECT Use of FIPS Codes by CCC Plus

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The following acronyms are used in this broadcast:

ABD – Aged, Blind or Disabled
ALF – Assisted Living Facility
CCC Plus - Commonwealth Coordinated Care Plus
DMAS – Department of Medical Assistance Services
FIPS – Federal Information Processing Standard
LDSS - Local Departments of Social Services
MCO – Managed Care Organization
MMIS – Medicaid Management Information System
PHI – Protected Health Information

The purpose of this broadcast is to alert LDSS to the importance of correct FIPS codes for CCC Plus and to facilitate the transmission of correct information and managed care assignments for enrollees under the CCC Plus Program.

Background

Effective January 1, 2018, the CCC Plus Program has been implemented statewide. CCC Plus now includes all individuals receiving long term services and supports (i.e. nursing facility care or home and community based waiver services), the ABD members who were formerly in the Medallion 3.0 program, and enrollees who were formerly enrolled in CCC (which ended on 12/31/17). CCC Plus covers Medicaid services through a choice of six (6) contracted health plans (MCOs): Anthem HealthKeepers Plus, Aetna Better Health of Virginia, Magellan Complete Care of Virginia, Optima Health Community Care, United Healthcare Community Plan, and Virginia Premier Elite Plus. The Medallion 3.0 Managed Care Program, which now covers primarily women and children, continues to operate throughout Virginia.

LDSS Actions

Enrollees who qualify for the CCC Plus Program are enrolled based on their Demographic FIPS found in the MMIS system. The enrollee's Demographic FIPS is important because it is used to

determine the capitation rates for payment to the MCOs. If an individual is living in an ALF or nursing facility **outside** of their original locality, take the following actions:

- * The **Case FIPS** remains with the original locality

- * The **Demographic FIPS** must be changed to correspond with where the individual actually resides. While VaCMS is able to capture multiple address and information fields, this information is limited in MMIS. When address changes are made in VaCMS for an individual placed in an ALF or in a nursing facility, there are several additional questions/steps (via drop down boxes) which must be answered in VaCMS in order to “secure” the information that is transferred to MMIS.

- * The **Demographic Address** in MMIS must be the address at which the individual actually resides. This is the address to which DMAS and the CCC Plus MCOs send correspondence. Additionally, every enrollee in the CCC Plus Program is assigned to a care coordinator with their MCO, who must locate and reach out to the enrollees. Correct information in MMIS (such as correct addresses, phone numbers, authorized representative contacts, etc.) greatly facilitates the care coordinators’ outreach.

Should you have questions regarding this broadcast, please send an email to the CCC Plus inbox at cccplus@dm.virginia.gov. Do **not** include PHI in emails sent to this address.