



August 9, 2018

H0927

Ms. Kim A. Green VP, Government Programs, Compliance Officer Blue Cross Blue Shield of Illinois 300 East Randolph Street Chicago, IL 60601

VIA EMAIL: Kim\_Green@bcbsil.com

RE: HCSC Blue Cross Community MMAI Passive Enrollment Stop

Dear Ms. Green:

Please be advised that the Centers for Medicare & Medicaid Services (CMS) and Illinois Department of Healthcare and Family Services (HFS) are stopping ongoing passive enrollment for Health Care Service Corporation's (HCSC) Blue Cross Community Medicare-Medicaid Alignment Initiative (MMAI) Medicare-Medicaid Plan (MMP) for effective dates of enrollment beginning with October 1, 2018.

CMS and HFS recently received performance data for the first quarter of 2018 for HCSC's Blue Cross Community MMP's health risk assessment (HRA) and care plan completions. HCSC's Blue Cross Community MMP reported significantly lower completion rates for both Core Measures 2.1 (Members with an assessment completed within 90 days of enrollment) and 3.2 (Members with a care plan completed within 90 days of enrollment) as compared to prior quarters and as compared to the performance of other MMPs. For example, HCSC's Blue Cross Community MMP's HRA completion rate decreased from 96 percent in Q4 2017 to 64 percent in Q1 2018, and care plan completion decreased from 77 percent in Q4 2017 to 24 percent in Quarter 1 of 2018. The MMAI Contract Management Team (CMT) asked HCSC to provide information on why these rates dropped so significantly. HCSC's responses indicated that the root cause for the drop in completions stemmed from issues related to the plan's staffing and resource capacity dedicated to the Blue Cross Community MMP. In addition, CMS and HFS also continue to have concerns regarding ongoing noncompliance from appeals and grievance issues.

Section 2.3.1.13 of the MMAI three-way contract allows CMS and HFS to stop passive enrollment for MMAI MMPs based on ongoing capacity:

Section 2.3.1.13 "Adjustments to the volume of Passive Enrollment based on the capacity of the Contractor will be subject to any capacity determinations including but not limited to those documented in the CMS and Department final readiness review report and ongoing monitoring by CMS and the Department."

Future enrollment will be evaluated based upon HCSC's demonstration to CMS and HFS that its Blue Cross Community MMP is completing HRAs and care plans timely; has addressed systemic, root causes that caused these completion rates to drop; and has made significant progress related to complying with appeals and grievance requirements.

If you have any questions about this notice, please contact Marla Rothouse, at <u>Marla Rothouse@cms.hhs.gov.</u>

Sincerely,

Robert Mendonsa
Deputy Administrator
Division of Medical Programs
Department of Healthcare and Family Services
State of Illinois

Lindsay P. Barnette Director, Models, Demonstrations and Analysis Group Medicare-Medicaid Coordination Office Centers for Medicare & Medicaid

cc via email:

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