

Aetna Better Health of Illinois

Medicare-Medicaid Alignment Initiative (MMAI)

February 5, 2013

Aetna Experience

Two decades of Medicaid experience

- Serve as one of two MCOs in the ICP Program
- 46 years experience serving Medicare populations
- 1.2 million Medicaid members nationally / 18K in Illinois
- □ 300K+ Medicare Advantage members nationally / 15K in Illinois and 11K in greater Chicago region
- SPD, Long Term Care and Dual experience, including an integrated program in Arizona (16K + Medicare and Medicaid members)

Local Executive Leadership and staff



Illinois' Integrated Care Delivery System (ICDS)

- Greater Chicago Region 120,000 eligibles
- One point of contact for members
- Person-centered care seamless across services and settings of care
- Easy to navigate for members and providers
- Providers participate in integrated program = Medicare + Medicaid
- Lower cost of care through wellness, prevention, coordination and community-based services



Integrated Care Delivery System (ICDS)



One ID Card

One provider bill / one EOB and provider payment for Medicare primary, Medicaid secondary or Medicaid primary svcs as applicable

One coordinated care team – one case manager responsible for coordination along continuum

One priority - member needs and preferences

One source of flexible, Medicaid, Medicare and non-medical benefits that help members stay in the most appropriate setting



Our Approach

Face-to-face care management

Fully integrated benefits

Member-centered

Stakeholder and Provider Engagement

- Member Advisory Committees
- Community partnerships
- Provider Advisory Committees
- Provider collaborations



Coordination Across All Services

Home & Community-Based Services (HCBS):

- Consumer-directed care
- Full array of home & community-based support
- Adult day care

Support Services:

- Home modifications
- Assistive equipment
- Durable medical equipment (DME)

Member-Centered Approach



Non-Medicaid Community Supports

Assisted Living:

- Adult foster care
- Assisted living

Institutional care:

- Custodial
- Specialty Care

Medical / Acute Services:

• Cost sharing for duals



Innovations in Care Coordination

- Integrated Care Management Program
- Integrate physical and behavioral health with psychosocial supports
- Person centered
- Single case manager
- Predicative modeling and risk stratification
- Promote independence and member engagement in care planning including self direction
- Respond to cultural preferences



Engaging Providers -Supported Payment Structures

Pay for Performance (P4P)

Medicaid Health Homes and Patient-Centered Medical Homes

Shared Savings Model

Risk-Share Models

Accountable Care Organizations (ACOs) – Aetna Medicaid actively supports provider organizations in the development of ACOs. This typically includes data sharing/support, the development of tailored reimbursement structures (with either shared savings or risk), as well as quality benchmarks and outcome measurements.



Look Forward to Being a Part of the Solution

Approximately 9 million nationally

Multiple healthcare needs and high cost

- 36% of total Medicare spending
- 39% of total Medicaid spending

Characteristics of MMEs – Age 21 - 65

- Roughly 1/3 have a physical disability
- 2/3 have mental illness and/or substance abuse
- 10 15% have intellectual and developmental disabilities
- o 2% have Alzheimer's/Dementia

Less than 2% enrolled in a coordinated care program

