STAR+PLUS

Presentation by the Texas Health and Human Services Commission to the House Select Committee on Health Care Expenditures February 25, 2003

STAR+PLUS Background

• Delivery of acute and long term care services coordinated through managed care

• 58,000 SSI and SSI-related aged and disabled Medicaid recipients

STAR+PLUS History

- SCR 55 74th Legislature directed TDHS to pilot integrated delivery system
- Procured together with STAR in Harris County
- Initial enrollment voluntary beginning January 1998
- Mandatory enrollment began April 1998
- 82% selected their own plan

STAR+PLUS Service Delivery

- HMOs
 - Amerigroup (21,000)
 - HMO Blue (29,000)
- PCCM (Primary Care Case Management)
 - THN (Texas Health Network administered by ACS) (8,000)

STAR+PLUS Services

Long term care services

- Day activity and health services (adult day care)
- Personal assistance services
- Community-based Alternatives (CBA) waiver services (waiver clients; as value added for non-waiver)
 - Adaptive aids
 - Adult foster home services
 - Assisted living
 - Emergency response
 - Medical supplies
 - Minor home modifications

- Nursing services
- Respite care
- Therapies

STAR+PLUS Services

Acute care services

- Medicaid-only clients
 - All Medicaid acute care services
 - Annual check-up
 - Covered in capitation payment to HMOs
- Dual eligibles (Medicaid and Medicare)
 - Acute care services paid for by Medicare
- HMO provides care coordination between Medicaid or Medicare acute care services and Medicaid long term care services

STAR+PLUS Services

- Texas Health Network (Primary Care Case Management model or PCCM)
 - Only an option for SSI children under 21
 - Medicaid acute care services
 - Annual check-up
 - No care coordination separate application to TDHS for long term care services when needed

STAR+PLUS Quality

- HMOs required to develop detailed Quality Improvement Plans, comply with quality standards
- EQRO (External Quality Review Organization) conducts quality improvement activities
 - Consumer, provider satisfaction surveys
 - Baseline care coordination study

STAR+PLUS Results

- 31% increase in clients receiving personal attendant care services
- 30% increase in clients receiving Day Activity and Health Services (adult day care)
- No increase in state cost absorbed by health plans whose payments are capitated
- Adult disabled clients get unlimited prescription drugs with costs reflected in calculation of savings
- Clients have a primary care doctor and a care coordinator
- Client satisfaction is high

STAR+PLUS Savings

- Estimated \$28.6 million (all funds) FY 03,
 \$29.4 million FY 04
- 6.5% less than Medicaid fee for service
- If STAR+PLUS were expanded, savings would vary by urban area
- Rural areas: savings less likely due to absence of providers