

FIDA Demonstration Phase-out Plan

OVERVIEW

On June 24th, the New York State Department of Health (NYSDOH) released a Fully Integrated Duals Advantage (FIDA) Demonstration Phase-out Plan, encompassing operational and policy aspects of the transition of FIDA members to affiliated Medicaid Advantage Plus (MAP) plans.

The plan provides new detail on the content and timeline NYSDOH will submit to CMS for approval in a formal written phase-out plan. Additional non-renewal guidance is being developed with instructions for FIDA plans regarding closing out their operations, including beneficiary communications and enrollment functions during the transition.

More information on the demonstration phase-out plan can be found [here](#).

PHASE-OUT PLAN

At its peak, 8,900 members were enrolled in the FIDA Demonstration in New York State, though as of June 2019, only 2,706 remained. The FIDA Demonstration is ending on December 31st, 2019, and in its final year there are six FIDA plans operating: Centers Plan, Elderplan, RiverSpring, Healthfirst, Senior Whole Health, and VNSNY. Each of the remaining six FIDA plans has a Medicaid Advantage Plus (MAP) product aligned with a Dual Eligible Special Needs Plan (D-SNP) that serves the same geographic region as their FIDA.

In order to avoid a disruption in care, NYSDOH and CMS have been working to ensure a seamless transition of FIDA participants to MAP plans and MAP-participating D-SNPs through passive (auto) enrollment of individuals from one integrated product to another. FIDA participants would have the option to opt-out of the assigned MAP/D-SNP combination. Enrollees would still have the option to elect different Medicare coverage options (e.g., Original Medicare or a different Medicare Advantage plan) under this scenario. These passive enrollments would take effect January 1st, 2020.

Timeline

Based on FIDA's December 31st, 2019 end date, the following timeline is currently underway:

- June 24th, 2019: NYSDOH posts phase-out plan for public comment
- June 24th – July 22nd, 2019: Public comment period
- July 22nd – August 5th, 2019: NYSDOH reviews comments
- By August 5th, 2019: NYSDOH submits phase-out plan to CMS
- August 19th, 2019: NYSDOH and CMS approve phase-out plan
- August 26th, 2019: NYSDOH and CMS begin implementing phase-out plan

Beneficiary Assignment and Coverage Options

CMS is considering the following requirements for this passive enrollment:

- Existing Medicare providers for the FIDA plan and MAP-participating D-SNP must be comparable;
- Medicare benefits between the FIDA and MAP-participating D-SNP must be similar;
- Premium and cost-sharing between the FIDA plan and MAP-participating D-SNP are similar; and
- Medicare payment for the MAP-participating D-SNPs are less than or equal to the Medicare fee-for-service rates

CMS will review the above criteria for each FIDA plan that applies for passive enrollment on a county-by-county basis. Members of different FIDA plans may have different transition coverage options for Medicare and Medicaid based on whether the member chooses to opt-out of auto-enrollment or not, and whether the member lives in a county that does not meet the CMS-specified criteria. Specifically, Medicaid alternate plan options include another Medicaid Advantage Plus plans, PACE (Programs of the All-Inclusive Care for the Elderly), or partially capitated plans. Medicare alternative plan options include original Medicare with Part D plans or other Medicare Advantage plans, including D-SNPs. For different Beneficiary assignment and coverage options for Medicaid and Medicare, please reference Tables 1 and 2 of the phase-out plan located [here](#).

Beneficiary Communications

In late September, CMS will release to FIDA plans a memo detailing the non-renewal and service area reduction guidance and enrollee notification models. NYSDOH and CMS will draft the FIDA participant notices that will be mailed by the applicable FIDA plan and New York Medicaid Choice (Maximus). The letter will include notification that the participant's FIDA plan is ending December 31st, 2019, and provide both Medicaid and Medicare plan options as well as an outline for assessing care along with an explanation of the ability to decline the enrollment or choose another plan. Two notices will be required to be mailed to participants by Maximus:

- By November 1st, 2019 the first of two letters will be mailed to FIDA participants eligible for passive enrollment. The first letter will be mailed 60 days prior to the effective date of the enrollment.
- By December 1st, 2019 the second letter will be mailed to 30 days prior to the effective date of enrollment. These letters will list the name of the plan that the FIDA participant will be enrolled into if they do not take action.

Maximus will serve as the FIDA participant's support system for all Medicaid enrollment and disenrollment needs, in addition to supporting transitioning from one health plan to another. Maximus will also serve as a resource for members to obtain counseling for each of the Medicaid Managed Long

Term plans available. Throughout the transition phase, NYSDOH will continue to meet with stakeholders during regularly scheduled bi-weekly and monthly meetings.