



**SeniorCare Public Meetings**  
**Department of Health Services**  
**Kevin Moore**  
**Wisconsin Medicaid Director/Administrator**

May 11, 2015: Madison

May 12, 2015: Milwaukee



# SeniorCare Program: Agenda

- Welcome and Introductions
- SeniorCare Program
  - Overview of Program and Statistics
  - Waiver Renewal Process and Timeline
  - Program Evaluation
- Public Comments



# SeniorCare Program: Budget Deliberations and Waiver Renewal

- We are aware of changes being discussed as part of the Wisconsin biennial budget deliberations that could affect the waiver renewal.
- For the purposes of this presentation and meeting the deadline for submission of the waiver renewal application, we are assuming the SeniorCare program will continue to operate as it does today.
- If any additional changes are required as a result of the budget deliberations, we will assess the impact of these changes on the waiver renewal timeline.



# SeniorCare Program: Overview

- Comprehensive prescription drug benefit for Wisconsin residents who are age 65 and older with income at or below 200 percent of the federal poverty level (FPL) and not otherwise receiving full Medicaid benefits
- Several innovative program features including:
  - Simple application and enrollment processes
  - Open formulary and broad network of providers
  - Affordable cost-sharing for participants



## SeniorCare Program: Goals

Key program goals:

- Keeping Wisconsin seniors healthy by continuing to provide a necessary primary health care benefit
- Helping control overall costs for the aged Medicaid population, age 65 and over, by preventing seniors from becoming fully eligible for Medicaid benefits due to deteriorating health and spending down to Medicaid eligibility levels
- Promoting cost-effective and therapeutically appropriate services
- Maintaining budget neutrality (Medicaid costs with SeniorCare can be no more than what estimated Medicaid costs would have been without SeniorCare)



## SeniorCare Program: Two Parts

- Wisconsin statute requires the Department of Health Services (DHS) to operate a SeniorCare prescription drug program and to request a waiver from the Centers for Medicare and Medicaid Services (CMS).
- Levels 1 and 2a are the Waiver Program portion of SeniorCare for individuals with income up to 200 percent of the FPL and governed by federal statutes and federal funding.
- Levels 2b and 3 are the Non-Waiver or State Pharmaceutical Assistance Program (SPAP) portion of SeniorCare for individuals with income over 200 percent of the FPL and funded by General Purpose Revenue (GPR), with no federal funding.



## SeniorCare Program: Waiver History

- On **July 1, 2002**, CMS approved the waiver for DHS to operate a portion of SeniorCare as a five-year demonstration project. The waiver expired on **June 30, 2007**.
- DHS requested an extension of the waiver to begin on July 1, 2007; CMS denied the extension. Federal supplemental appropriations bill included provision to continue the waiver through **December 31, 2009**.
- Waiver was extended from **January 1, 2010**, to **December 31, 2012**.
- Waiver was extended from **January 1, 2013**, to **December 31, 2015**.



# SeniorCare Program: Wisconsin State Statute

Wis. Stat. § 49.688 includes details on program:

- Eligibility
  - Cannot be a recipient of full Medicaid benefits
  - Must be 65 years of age or older
- Cost sharing (may depend on income)
  - Enrollment fee: \$30 per year
  - Level 1 income limit: less than or equal to 160 percent of the FPL
    - No deductible or spend-down
    - \$5 generic copay; \$15 brand name copay
  - Level 2a income limit: greater than 160 percent, and less than or equal to 200 percent of the FPL
    - \$500 deductible per person
    - Same copays



# SeniorCare Program: Overview of Enrollment and Expenditures

- Total waiver program enrollment is about 49,000 as of December 2014; non-waiver (state-only) enrollment is about 36,700 for the same time period.
- For calendar year 2014, waiver program expenditures were \$78,296,448, compared to non-waiver expenditures of \$10,868,809.
- The rest of the statistics presented will focus on Levels 1 and 2a Waiver Program because that is what is up for renewal by December 31, 2015.



# SeniorCare Program: 2014 Renewal Rates

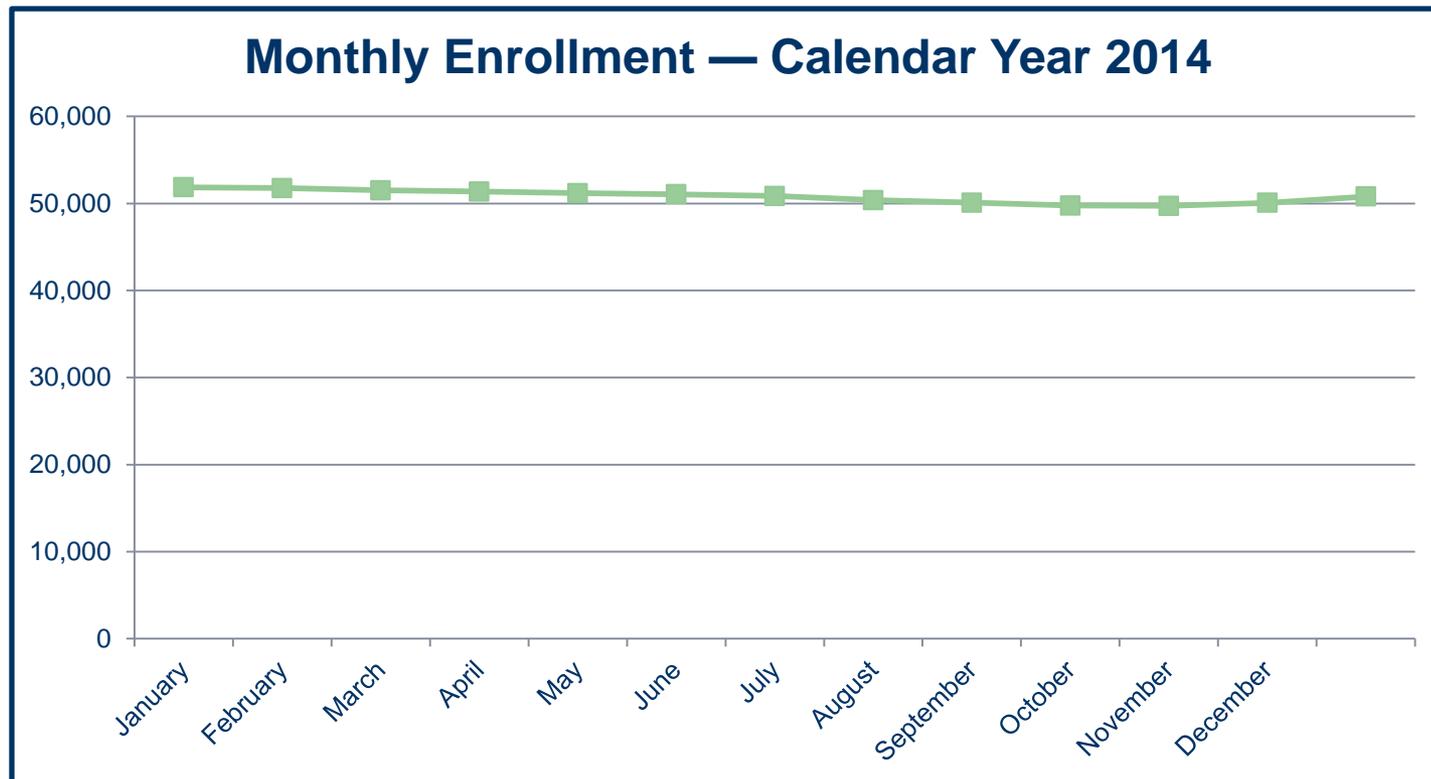
On average, 81 percent of those eligible to renew each month send in their renewals.

**SeniorCare Monthly Enrollment, New Applications, Renewals Due and Received, and Renewal Rate 2014**

Month	Enrollment	New Applications	Renewals Due	Renewals Received	Dis-enrolled	Renewal Rate
January	51,869	1,108	4,907	3,252	1,655	66%
February	51,768	978	5,064	3,572	1,492	71%
March	51,496	1,066	4,586	3,921	665	85%
April	51,356	895	4,588	3,852	736	83%
May	51,177	981	5,015	4,363	652	86%
June	51,053	798	3,528	2,980	548	84%
July	50,852	924	3,827	2,684	603	82%
August	50,371	974	10,079	8,911	1,168	88%
September	50,083	855	5,046	3,762	1,284	74%
October	49,750	1,506	5,809	4,896	913	84%
November	49,712	2,553	8,429	7,041	1,388	83%
December	50,064	3,160	11,620	10,053	1,567	86%
<b>Total</b>	<b>50,796</b>	<b>15,798</b>	<b>72,498</b>	<b>59,287</b>	<b>1,056</b>	<b>81%</b>



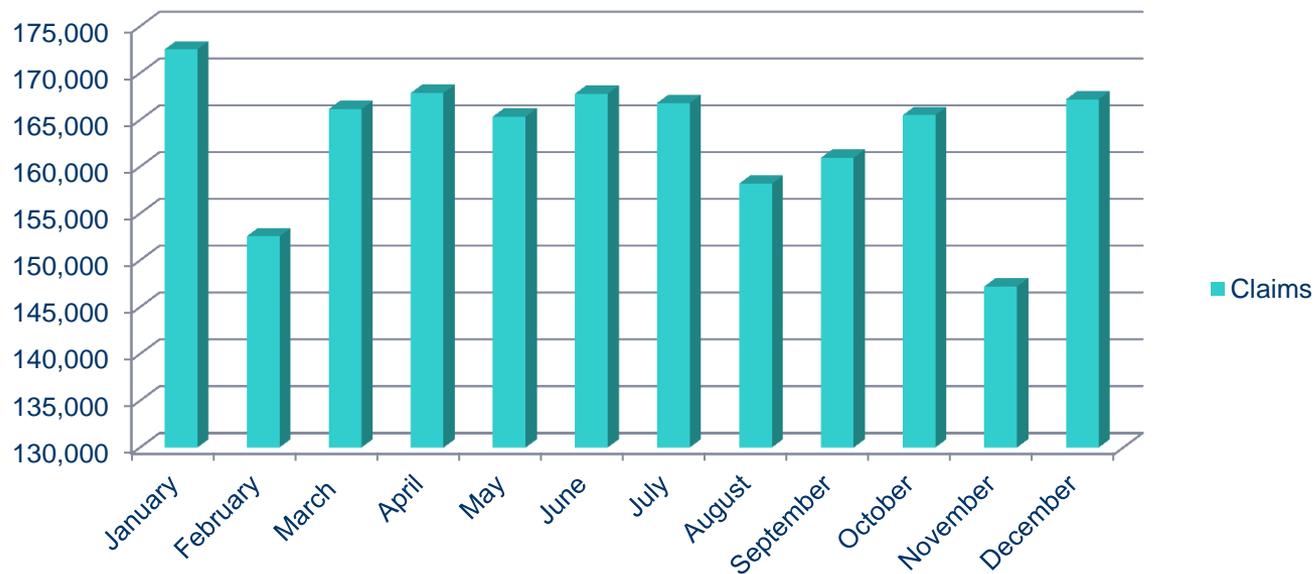
# SeniorCare Program: 2014 Enrollments Relatively Steady





# SeniorCare Program: 2014 Claims Relatively Steady

## 2014 Total SeniorCare Waiver Program Pharmacy Claim Counts by Month





# SeniorCare Program: Member Cost Sharing

## 2014 SeniorCare Member Cost Sharing

Month of Service	Copay Amount Detail	Deductible Amount
January	780,939	530,735
February	697,580	410,809
March	765,421	411,503
April	773,293	392,272
May	771,001	351,733
June	753,734	347,200
July	774,251	324,724
August	734,181	299,126
September	721,191	494,680
October	737,715	430,249
November	656,724	381,451
December	745,896	457,189
<b>Total</b>	<b>8,911,926</b>	<b>4,831,671</b>



# SeniorCare Program: Fiscal Year 2014 Top 10 Drugs

Drug Description	Amount State Paid	Number of Prescriptions State Paid	Average Amount State Paid Per Prescription	Number of Members	Average Cost Per Member
FLUTICASONE	\$7,414,506.16	21,758	\$340.77	6,727	\$1,102.20
TIOTROPIUM	\$5,664,164.56	11,425	\$495.77	2,168	\$2,612.62
INSULIN LISPRO	\$4,859,932.06	7,286	\$667.02	1,883	\$2,580.95
METOPROLOL	\$3,909,953.86	35,441	\$110.32	13,231	\$295.51
ADALIMUMAB	\$3,535,650.62	652	\$5,422.78	102	\$34,663.24
IMATINIB	\$3,473,079.44	230	\$15,100.78	37	\$93,869.71
SITAGLIPTIN	\$3,179,521.50	6,218	\$511.34	996	\$3,192.29
INSULIN GLARGINE	\$3,148,460.18	4,775	\$659.36	974	\$3,232.51
SOLIFENACIN	\$2,807,860.14	7,174	\$391.39	1,305	\$2,151.62
BUDESONIDE	\$2,771,416.64	6,157	\$450.12	1,616	\$1,714.99



# SeniorCare Program: Medicare Part D Key Points

- Medicare Part D also provides outpatient prescription drug coverage for Medicare-eligible seniors.
- Standard Part D cost sharing includes:
  - Monthly premiums, which are based on income.
  - Annual deductible, which may not exceed \$320 in 2015 and \$360 in 2016.
  - Coverage gap, commonly referred to as the donut hole, which is being phased out and will be closed by 2020.



## SeniorCare Program: Medicare Part D Key Points (Continued)

- Some seniors qualify for Extra Help under Medicare Part D, which covers a member's Part D premium and deductible and reduces allowable copayments.
  - In 2015, copays are \$2.65 for a generic prescription and \$6.60 for a brand name prescription.
  - In 2016, copays are \$2.95 for a generic prescription and \$7.40 for a brand name prescription.
- SeniorCare coordinates benefits with Medicare Part D.



## SeniorCare Program: Waiver Renewal Process and Timeline

- The 2013–2015 SeniorCare waiver will expire on December 31, 2015.
- DHS plans to submit an application to extend the SeniorCare waiver for calendar years 2016–2018.
- The waiver extension application assumes the SeniorCare program will continue to operate as it does today.
- If any additional changes are required as a result of the Wisconsin biennial budget deliberations, DHS will assess the impact of these changes on the waiver renewal timeline.



# SeniorCare Program: Federal Rule Changes Affecting Renewal Process and Timing

- A new federal rule was issued in February 2012 regarding waiver renewals.
- A 30-day State public notice and comment period is required, including the release of an initial waiver program description.
- The State website will be used to share materials and allow for anyone to sign up for an email list to receive information.
- The State will hold at least two public hearings on separate dates, in separate locations, that offer the public an opportunity to learn about the application and comment on it.



## SeniorCare Program: Federal Rule Changes Affecting Renewal Process and Timing (Continued)

- The final waiver application must include similar specifics to the initial waiver program description.
- The State must also document the public process that was conducted, with a report on how it considered issues raised by the public, to develop the final application.



# SeniorCare Program: Waiver Renewal Process and Timeline

May:

- **Conduct a Tribal consultation by May 1, 2015.**
- Launch the SeniorCare Waiver website, including a public comment section by May 1, 2015.
- Attend the Tribal Health Directors meeting in Wausau on May 6, 2015.
- Conduct a SeniorCare Advisory Committee meeting on May 11, 2015.
- Hold a Public meeting in Milwaukee on May 12, 2015.
- Post the draft waiver on the SeniorCare website by May 22, 2015, for public review and comments.



# SeniorCare Program: Waiver Renewal Process and Timeline

- June:
  - Hold a SeniorCare Advisory Committee meeting to review final application.
  - Close the public comment period on June 22, 2015.
  - Incorporate public comments into the draft proposal.
  - **Submit the waiver renewal application to CMS by June 30, 2015.**
- July:
  - Receive CMS acknowledgement of the application.
  - Start federal public comment period.



# SeniorCare Program: Waiver Renewal Process and Timeline

- August:
  - Close Federal public comment period.
  - Conduct a SeniorCare Advisory Committee meeting.
  - Receive final decision from CMS on the status of the waiver.
- September:
  - Publish the draft evaluation plan on the State's website.
- December:
  - Complete current waiver period on December 31.
- January 2016:
  - Begin new waiver period on January 1, 2016.



# SeniorCare Program: Program Evaluation

- 2013–2015 terms and conditions:
  - “The State must provide an evaluation report reflecting the hypotheses being tested and any results available.”
- Evaluation of hypotheses:
  - The rate of Medicaid entry among Wisconsin seniors age 65 and older will be lower after SeniorCare implementation than before SeniorCare.
  - The rate of hospital admissions among Wisconsin seniors age 65 and older for selected medical conditions such as diabetes and heart disease will be lower after SeniorCare implementation than before.
  - The rate of Medicaid-funded nursing home admissions among Wisconsin seniors age 65 and older will be lower after SeniorCare implementation than before.



## SeniorCare Program: Program Evaluation (Continued)

- Evaluation of hypotheses, continued:
  - Recent enrollees in the SeniorCare waiver program will report lower levels of financial hardship and prescription nonadherence after enrolling in SeniorCare than for a comparable period prior to program enrollment.
  - SeniorCare waiver program members who receive Comprehensive Medication Review and Assessment (CMR/A) services will have improved medication adherence, compared to members who do not receive CMR/A services.
- The Office of Policy Initiatives and Budget (OPIB), a Office in the Secretary's Office, is conducting the evaluation this year.



# SeniorCare Program: Program Evaluation (Continued)

- SeniorCare Survey
  - One thousand randomly selected members with enrollment in SeniorCare of six months or less received the survey.
  - The survey asks about the members' habits before and after SeniorCare.
- OPIB is supplying preliminary data to be submitted in the waiver.



# SeniorCare Program: Public Comments

- The public is welcome to share their comments about SeniorCare at this time.
- Speaker forms are available.