

Texas Dual Eligible Integrated Care Demonstration Project

Continuing Your Care After You Join a Health Plan

The Texas Dual Eligible Integrated Demonstration Project (The Texas Dual Demonstration) is a joint Medicare and Medicaid demonstration designed to integrate care for individuals in Texas who receive services from both Medicare and Medicaid. The program is administered by the federal Centers for Medicare & Medicaid Services (CMS) and the Texas Health and Human Services Commission (HHSC). Both contract with Medicare-Medicaid plans (MMPs), known as STAR+PLUS MMPs, to manage services for beneficiaries.

Your STAR+PLUS MMP is required to make sure your care continues once you enroll and that it is not disrupted. You have the right to continue to receive needed medical services. A comprehensive health risk assessment must be completed within the 90 day transition period that begins once you enroll in a STAR+PLUS MMP. All STAR+PLUS MMPs must ensure that your current plan of care will remain in place until the STAR+PLUS MMP conducts a comprehensive health risk assessment. You will be requested to sign your updated plan of care.

If you have a scheduled treatment and just joined a new STAR+PLUS MMP, call your plan right away. Tell the STAR+PLUS MMP about your treatment so they can work with you and your provider to arrange it.

Continuing Care: Your Doctors

If your doctor already works with your STAR+PLUS MMP and he or she is in their network, you may continue to see that doctor indefinitely. You can ask your doctor if he or she is “in-network” or not.

If your doctor is not in your STAR+PLUS MMP network—and is an “out-of-network” provider—you may continue seeing your doctor for up to 90 days after enrolling into your STAR+PLUS MMP, or until you and your STAR+PLUS MMP agree to update your plan of care, whichever is earlier.

If you are receiving treatment for a terminal illness when you enroll into the Texas Dual Demonstration, you may continue to receive covered services for nine months after your enrollment, or until a comprehensive health risk assessment has been completed and you have signed your plan of care.

How to Continue to See Your Out-of-Network Doctor after Joining a STAR+PLUS MMP

1. Talk to both your STAR+PLUS MMP and your doctor:
 - Call your STAR+PLUS MMP and tell them about your scheduled care. Ask if your doctor is in their network.
 - Tell your doctor that you joined the STAR+PLUS MMP and ask if they are in the plan’s network.
2. If your doctor is “out-of-network,” you, your authorized representative, or your doctor should call your STAR+PLUS MMP to tell them you want to keep seeing your doctor.
3. The STAR+PLUS MMP must contact your doctor and allow you to keep seeing your doctor for up to 90 days. Your doctor can also apply to become an “in-network” provider.
4. If you have questions about seeing your existing doctors, contact the HHSC Ombudsman (**1-877-787-8999**).

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Continuing Care: Long-Term Supports and Services (LTSS) Providers

If you receive LTSS, which can include nursing facility services, personal assistance services, or day activity and health services at the time you are enrolled into the Texas Dual Demonstration, you may continue to receive those services for up to six months after your enrollment, or until your comprehensive health risk assessment has been completed and you have signed your plan of care.

Continuing Care: Prescription Drugs

If you are taking a Medicare Part D drug when you enroll in your STAR+PLUS MMP and that drug is not on your STAR+PLUS MMP's formulary, or the drug is on the formulary but there are special rules or limits on coverage for that drug, you can get a temporary supply during your first 90 days of enrollment. If you do not live in a long-term care facility, the temporary supply must be for at least 30 days of medication. If you live in a long-term care facility, the temporary supply must be for at least 91 days and may be up to 98 days of medication. When you get a temporary supply of a drug, you should talk with your provider to decide what to do when your supply runs out. You can change to another drug or ask for an exception.

If you are taking a Medicaid-covered drug when you enroll in your STAR+PLUS MMP, you can continue to receive that drug for up to 90 days after enrolling into your STAR+PLUS MMP, or until you and your STAR+PLUS MMP agree to update your plan of care, whichever is earlier. At any time, you can request a 72-hour emergency supply of Medicaid-covered drugs.