**FULLY INTEGRATED DUALS ADVANTAGE (FIDA)**

**Frequently Asked Questions**

**What is FIDA?**

FIDA is a joint Medicare and Medicaid program that uses a streamlined and seamless patient-centered care model based on comprehensive, multidisciplinary care planning and management.

*The program goal is to improve coordination of services for dual eligibles (Medicare and Medicaid enrollees), enhance quality of care, and organize care around the unique needs and preferences of enrollees, in the most integrated fashion possible, to improve their health outcomes.*

**What will FIDA do for you?**

* You can collaborate with other providers as part of a care team to develop a single, customized care plan to address all of your client’s specific needs.
* You can save time as the FIDA Care Manager will document your client’s care plan, and any changes to it, help your client schedule appointments and arrange for transportation, and keep you in the loop about any services or care your client receives.
* You can help decrease avoidable hospitalizations and emergency care visits by having more opportunities to speak with your clients to make sure they understand and follow the goals of their care plan.
* You can spare your office staff the complication of sending claims to multiple payers. Most FIDA plans have one claims address and process for both Medicare and Medicaid services.

**Why should individuals enroll in FIDA?**

Individuals will:

* Receive full Medicare and Medicaid coverage, long term care services, Part D and Medicaid drugs, and additional benefits from a single, integrated managed care plan. In other words, FIDA covers all the benefits that your clients may receive through their managed long term care (MLTC) plan, Original Medicare or their Medicare Advantage plan, and their Part D plan.
* Have a 90-day continuity of care period to be able to adjust to the program. This means they will be able to receive all of their benefits as they are now for at least 90 days after their enrollment effective date. If they receive behavioral care, their continuity of care period will be 2 years.
* Pay no deductibles, premiums, or copayments/coinsurance.
* Be able to access specialists directly. No need for provider referrals.
* Have a Care Manager who can schedule doctor’s appointments, arrange transportation and help them get their medicine. (In most cases, your clients will be able to keep their current care manager.)
* Be able to add their caregivers or someone else that they trust to their care team to help them make decisions regarding their care and understand the goals of their care plans.
* Use one phone number for all questions regarding their benefits.
* Use one ID card to receive all of their benefits.
* Have extra resources to help them navigate the managed long term care system or the appeals process through the new Ombudsman, called the Independent Consumer Advocacy Network (ICAN).
* Have the right to leave FIDA at any time and for any reason. If they decide to do so, they will continue to receive all of their Medicaid long term care benefits through the MLTC program and all of their Medicare benefits through Original Medicare or a Medicare Advantage plan, and a Part D plan.

**What additional benefits does FIDA provide?**

FIDA offers additional services, most of which are *not* currently available through managed long term care (MLTC) plans,for example:

* Home and community support services
* Mobile mental health treatment
* Peer mentoring
* Positive behavioral interventions and support
* Substance abuse services
* Wellness counseling

Some FIDA plans offer supplemental benefits, such as monthly OTC allowances and annual vision exams.

**Who is eligible for FIDA?**

Your clients must:

* Reside in any of the New York City boroughs or Nassau County,
* Be 21 years or older, ***and***
* Be entitled to Medicare Part A, enrolled in Medicare Part B, and eligible to enroll in Part D, and receiving full Medicaid benefits; ***and***
* Be in need of long-term care services.

*Some exclusions apply.*

**Is FIDA mandatory?**

No. FIDA is not mandatory for anyone in New York State. There is a passive enrollment process in FIDA. Eligible individuals who do not make a specific election to either opt into a specific FIDA Plan or opt out of the program will be passively enrolled into the program. In the overwhelming majority of cases, they will be passively enrolled into the same company as their MLTC plan. Passive enrollment begins April 1, 2015 and will occur over several months.

**Where can someone get more information about FIDA?**

For questions about benefits, provider networks or how to enroll into FIDA, your clients can call New York Medicaid Choice at 1-855-600-3432 (TTY users: 1-888-329-1541; for a free interpreter: 1-855-600-3432). For the list of FIDA plans, you can also go to: [www.nymedicaidchoice.com](http://www.nymedicaidchoice.com)

If your clients have a question about Medicare, Medicaid, long term care, FIDA plans, or enrollees’ rights and responsibilities, they can also call the new ombudsman program, the Independent Consumer Advocacy Network (ICAN), who can provide free, confidential assistance to people enrolled in Medicaid managed care plans and receiving long term care. Your clients can call ICAN toll-free at 1-844-614-8800 or go to [www.icannys.org](file:///C%3A%5CUsers%5Ceec02%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CTemporary%20Internet%20Files%5CContent.Outlook%5CUJI8SGME%5Cwww.icannys.org).

**Do you have a question for the New York State Department of Health (NYSDOH)?**

If you have a question about FIDA, please email NYSDOH at fida@health.ny.gov or visit the Medicaid Redesign Team 101 website at <https://www.health.ny.gov/health_care/medicaid/redesign/mrt_101.htm>