

DODD Medicaid

Priority initiatives 2012

ARC Conference

March 28, 2012



Department of
Developmental Disabilities

SELF Waiver Go-Live

Community Based Service vs. Facility Based Service

Balancing Incentive Payment Program

What's going on with the Transitions DD Waiver?

SELF Waiver Status

Current Status

The SELF Waiver HAS BEEN APPROVED by CMS

Waiver will become effective **July 2012**

Waiver will offer participant direction, budget authority and employer authority

- Current work in process by DODD:

IT infrastructure

JEVS (Financial Management Service Contract)

Rules

Training Plans

Overview

Unique aspects to the waiver:

- Large emphasis on employment. The new integrated employment service is much more flexible than existing services and has higher provider payment rates – including job development incentives. Employment first policy.
- Clinical Therapeutic Intervention was specifically designed for children with intensive needs. It was one of the original services back when the waiver was targeted for children with Autism.
- Participant Directed Goods & Services will allow individuals to use Medicaid dollars to purchase needed items through companies available to the general public. (Cleaning Service/Target, etc)
- Allows the family to use dollars to receive counseling and/or instruction on providing supports

SELF Waiver Overview

Unique aspects to the waiver:

- Support Broker available as “agent of the individual” : they can help in the team planning process, assist making good/services purchases, negotiate independent provider rates, etc.
- Families will be able to search DODD Provider Portal for Agencies with Choice, or Traditional Agency
- While this waiver requires participant direction on at least one service for enrollment, guardians/family and or a trusted representative can self-direct on the individual’s behalf
- Waiting list: Individual on existing waiting lists, will be able to use their original date of application as their SELF Waiver application date. Allows individuals to transfer from existing waivers – and transfer back for up to 180 days
- Waiver Capacity: Able to serve up to 500 individuals for the first year, 1000 in year 2, and 2000 by year 3

SELF Waiver Service Package and Financial Limitations

Children*

\$25,000/year Individual Cost Cap

Annual Service Limitation of \$8,000

- Support Brokerage

Annual Service Limitation of \$1,500

- Functional Behavioral Assessment

Annual Service Limitation of \$5,000

- Remote Monitoring Equipment

Remaining Services with no annual service limitations (other than the \$25,000 Cost Cap)

- Community Inclusion
- Participant-Directed Goods and Services
- Participant/Family Stability Assistance
- Clinical/Therapeutic Intervention
- Residential Respite
- Community Respite
- Remote Monitoring

*Children are defined as individuals who are 22 years of age or younger, unless eligible for Adult Day Services or Integrated Employment

Adults

\$40,000/year Individual Cost Cap

Annual Service Limitation of \$8,000

- Support Brokerage

Annual Service Limitation of \$1,500

- Functional Behavioral Assessment

Annual Service Limitation of \$5,000

- Remote Monitoring Equipment

Any combination of the below services may not exceed \$25,000 annually

- Community Inclusion
- Residential Respite
- Community Respite
- Remote Monitoring

Remaining Services with no annual service limitations (other than the \$40,000 Cost Cap)

- Participant-Directed Goods and Services
- Integrated Employment
- Clinical/Therapeutic Intervention
- Adult Day Support
- Vocational Habilitation
- Supported Employment-Enclave
- Non-Medical Transportation
- Participant/Family Stability Assistance

Current Status:

Nearly fully transitioned to DODD (funds to transfer on July 1)

IAF processing, Bed-hold technical assistance, Level of care determinations, Non-extensive renovation approvals, Rate Setting, Responding to provider inquiries; point of contact , Outlier coordination and placements, Upper payment limit calculation

Current work:

System re-design (Rate methodology)

Voluntary Conversion

White Paper

IAF evaluation (grant from ODJFS)

Active engagement with ICFMR providers

Rule reviews

Balancing Incentive Payment Program:

Allows States to draw down additional federal dollars to move dollars spent in the state from facility based service to community based service

Information:

2% Enhanced Federal Match

Objective: Move towards 50/50

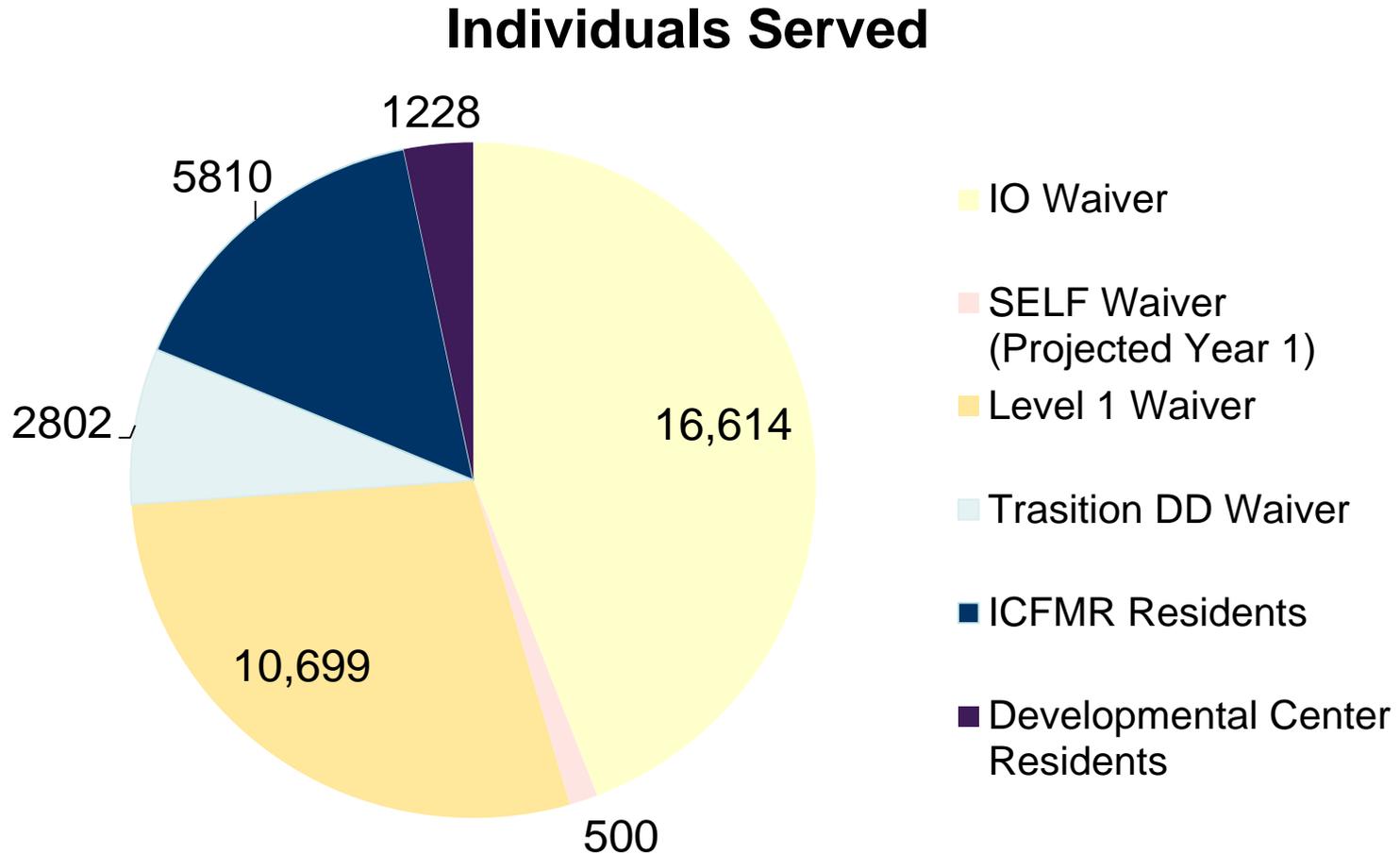
A few high level requirements:

No wrong door

conflict free case management

System: website, single point entry

Individuals Served through DD Medicaid*



* Not including ABD State plan only recipients

T/DD Waiver

Current Status

DODD is assuming responsibility for the administration of the TDD Waiver

Our goal is to offer to provide services that ensure the health and safety of the individuals enrolled in the best manner possible.

Additional:

Approximately 2800 individuals enrolled

Most common services received: personal care and nursing

Over half of the individuals enrolled are on a waiting list for IO or Level 1

Case Management Provided by Carestar

T/DD Waiver

Current Status:

Various Options discussed with Stakeholder workgroup, ODJFS and OHT; no decision has been made on direction to take. There is no firm timetable for this work, we want to get it right.

Options include:

Maintaining TDD but transferring administration to DODD

Taking down TDD and offering other waivers to enrollees (IO/SELF/OHCW)

Variations

Current work:

Data analysis

JFS policy/service/quality discussions

Modeling and cost implications

Questions & Answers

Thank you very much.