

Medicaid Long Term Services & Supports Rebalancing Updates

DSS Community Options
Money Follows the Person
Strategy Group



Topics

Rebalancing updates

- MFP Benchmarks
- Community First Choice
- My Care Options
- Housing Study
- CHESS
- My Place CT Transition

COVID-19 Pandemic

- Emergency Response for CFC
- Nursing Home Analysis

Presenters

- Dawn Lambert, DSS
- Dane Lustila, DSS
- Karri Filek, DSS



MFP BENCHMARKS

MFP Benchmarks

- 1) Transition 5200 people from qualified institutions to the community
- 2) Increase dollars to home and community based services
- 3) Increase hospital discharges to the community rather than to institutions
- 4) Increase probability of returning to the community during the six months following nursing home admission
- 5) Increase the percentage of long term care participants living in the community compared to an institution

(Based on latest data available at the end of the quarter)

UConn Health, Center on Aging

Operating Agency: CT Department of Social Services **Funder:** Centers for Medicare and Medicaid Services

MFP Benchmark 1

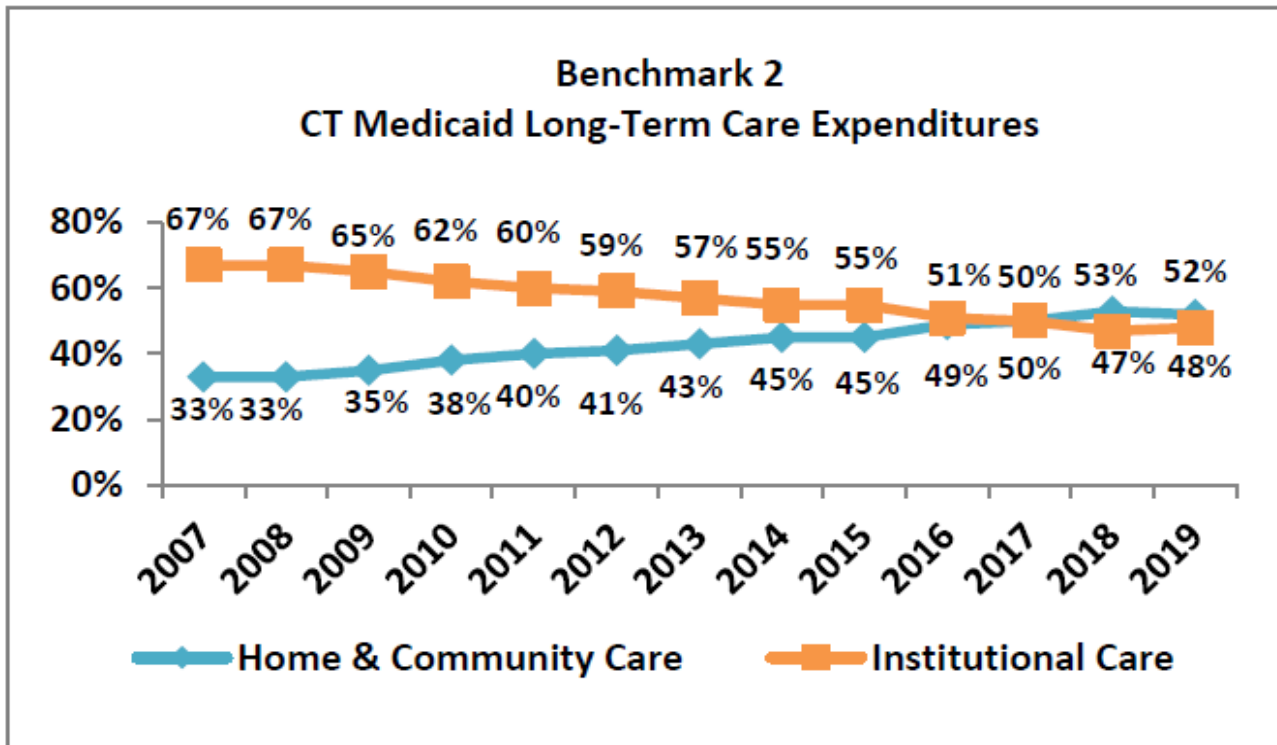
Benchmark 1: Total Transitions = 6,270
Demonstration = 5,869 (94%)
Non-demonstration = 401 (6%)

UConn Health, Center on Aging

Operating Agency: *CT Department of Social Services* **Funder:** *Centers for Medicare and Medicaid Services*

Based on latest data available at the end of the quarter

Benchmark 2

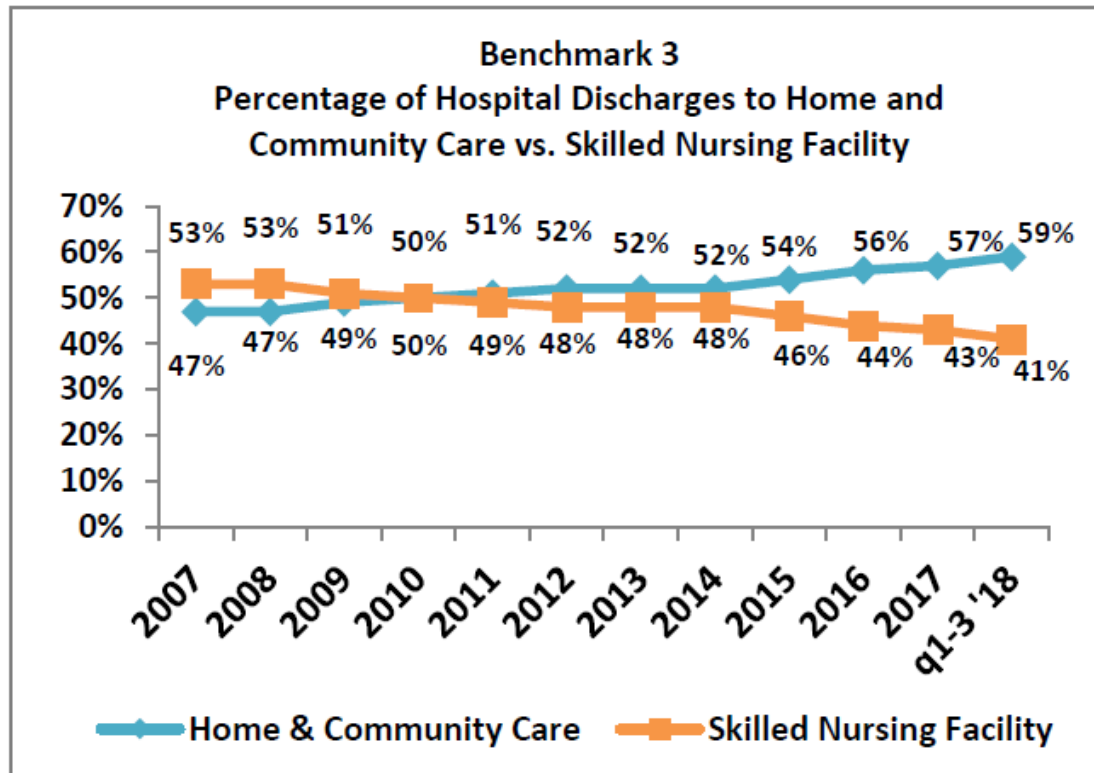


UConn Health, Center on Aging

Operating Agency: CT Department of Social Services Funder: Centers for Medicare and Medicaid Services

Based on latest data available at the end of the quarter

Benchmark 3

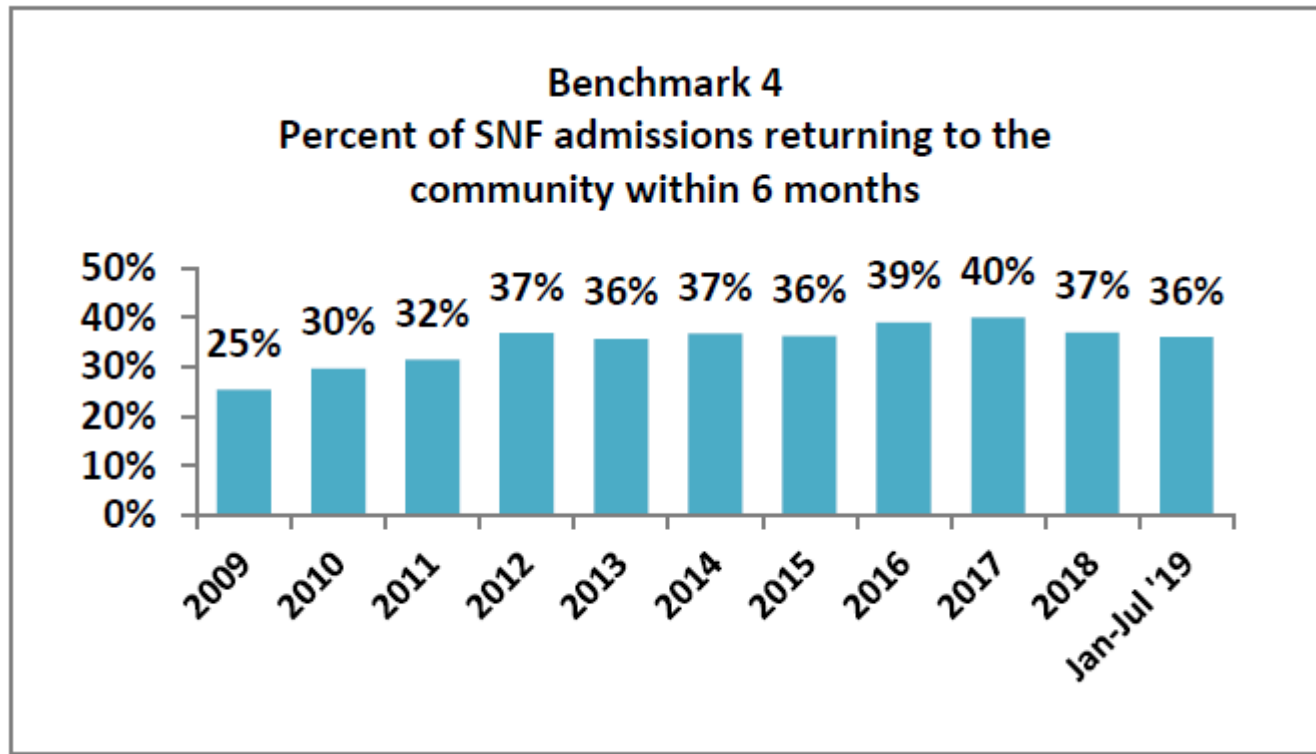


UConn Health, Center on Aging

Operating Agency: CT Department of Social Services Funder: Centers for Medicare and Medicaid Services

Based on latest data available at the end of the quarter

Benchmark 4

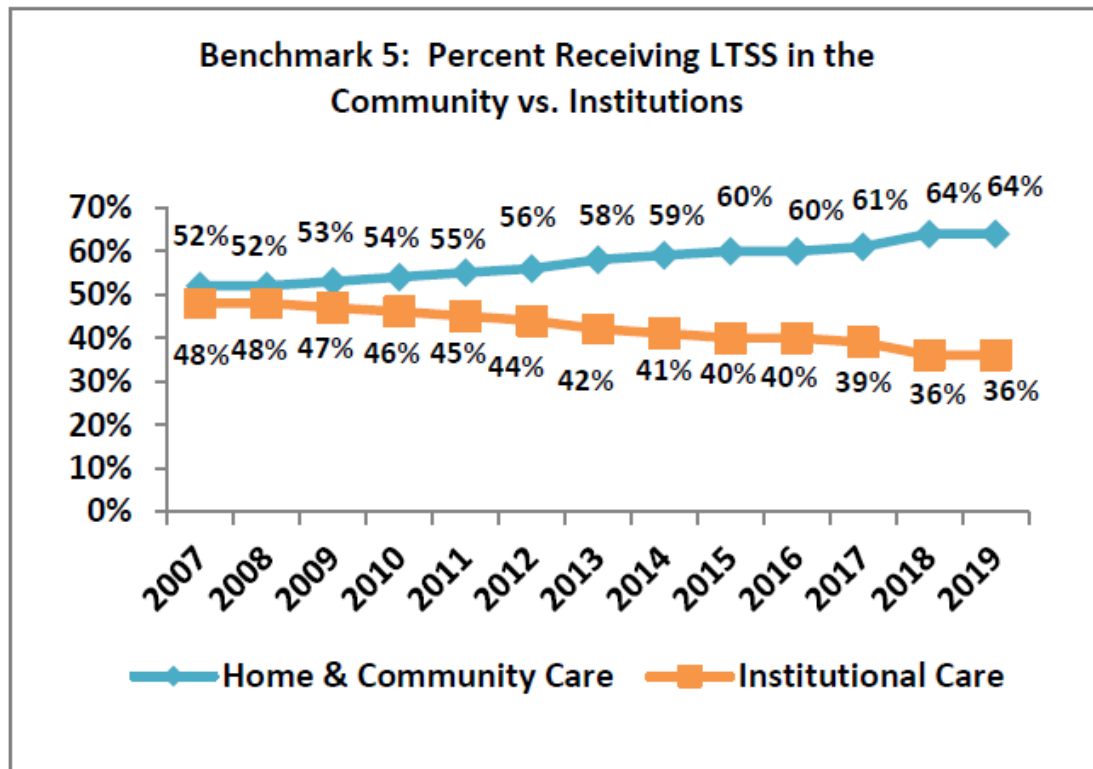


UConn Health, Center on Aging

Operating Agency: CT Department of Social Services **Funder:** Centers for Medicare and Medicaid Services

Based on latest data available at the end of the quarter

Benchmark 5

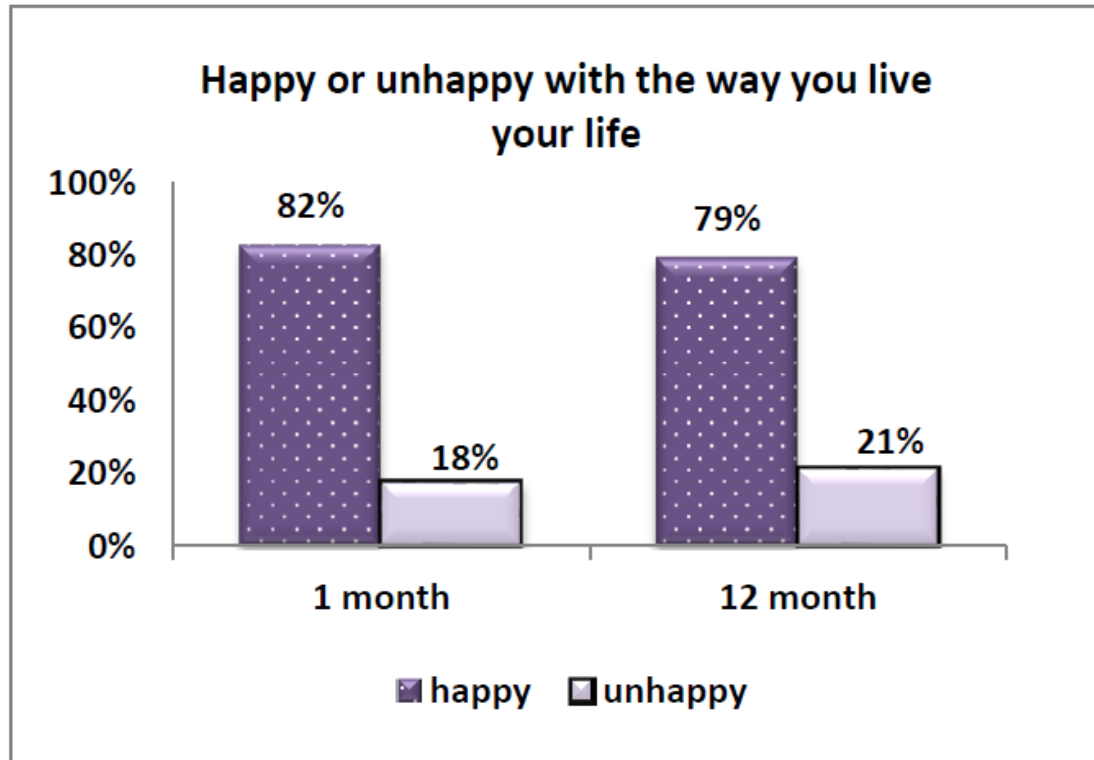


UConn Health, Center on Aging

Operating Agency: CT Department of Social Services Funder: Centers for Medicare and Medicaid Services

Based on latest data available at the end of the quarter

Happy or Unhappy



UConn Health, Center on Aging

Operating Agency: CT Department of Social Services Funder: Centers for Medicare and Medicaid Services

Based on latest data available at the end of the quarter



COMMUNITY FIRST CHOICE (CFC)

CFC

Number of People Active on CFC

Program	Number
CFC (no waiver)	1829
CFC (w/waiver)	2245
TOTAL	4074

Number of People Active on CFC by waiver type

Waiver Type	Number
ABI 1	104
ABI 2	43
PCA	958
CHCPE	873
DDS	267



MY CARE OPTIONS

My Care Options

A new LTSS initiative that uses predictive methodology, claims data, and in the future, MDS data to:

- Identify and educate people on all LTSS options to make an informed choice
- Support discharge of people from nursing homes to community
- Create a support path to Medicaid while private paying for homecare services

My Care Options

Benefits

- Specialized LTSS staff
- Connection to information and/or services
- Access to dedicated LTSS Eligibility staff
- Automated financial tools

Next Steps

- Currently on hold due to COVID
- Working on safe plan to reenter nursing homes



HOUSING STUDY

Housing Study

- Partnership established with Department of Housing
- Study underway to provide us with:
 - Current supply of affordable, accessible housing at local level
 - Future supply needed for affordable, accessible housing to meet projected needs of:
 - Individuals who choose to receive LTSS in the community
 - Individuals who are homeless



CHES (CONNECTICUT HOUSING ENGAGEMENT AND SUPPORTS SERVICES)

CHESS

- New service and support option who meet the following eligibility criteria:
 - Homeless or who were homeless prior to institutionalization; and,
 - Meet the risk criteria; and,
 - Have a minimum of 2 critical needs
- Services include services to support ongoing tenancy as well as behavioral health and medical coordination. Eligible participants receive a housing subsidy.



MY PLACE CT TRANSITION

My Place CT Transition

MyPlaceCT.org

Virtual Home of No Wrong Door

- Updated the Brand
LTSS, Health & Wellbeing
- Transformed the Site
Smarter, New Navigation,
New Content...
- Maximizing Engagement
- Communications
 - Podcast, blog, e-news
- Dynamic! Virtual Insight Panel
(VIP) plus multiple other
forms of input and feedback

Data driven

Aligning with related initiatives

Enhancing access ~ empowering people w/ info

My Place Partner Network

- In Communities Across CT
- Navigators / Connectors
- Partner Portal
- Training Hub



My Place CT Transition

The screenshot shows the MyPlaceCT.org website. At the top left is the logo with three stylized houses in purple, blue, and green, followed by the text "MY PLACE CT | The Virtual Home of No Wrong Door". On the top right are links for "A A", a globe icon, "Favorites", and "Partner Login". Below this is a navigation bar with links for "Health and Wellbeing", "Services and Supports", "Learn", "Get Involved", "Family Caregivers", and "About Us". The main content area features a large blue box on the left with the headline "Find what you need to live the life you want." and a sub-headline "MyPlaceCT.org is a free web-based resource from the State of Connecticut that helps you live life independently. Bringing together the information you need to live how and where you choose." Below this is a search bar with the placeholder text "Enter your search term here" and a magnifying glass icon. To the right of the search bar is a photograph of an elderly man wearing a hat and oxygen, talking to a female healthcare professional who is holding a clipboard. At the bottom of the page, there is a purple heading "Not Sure Where to Start?" and two blue buttons: "View Services and Supports" and "How To Use MyPlaceCT.org".

My Place CT Transition

- Mintz and Hoke transitioned to O'Donnell Marketing firm effective September 1, 2020
- Transitional period between June through August



COVID-19 EMERGENCY RESPONSE FOR CFC

COVID-19 Emergency Response for CFC

- Expedited onboarding process of new CFC participants/EOR & PCAs
- Emergency Hiring of PCA staff for existing CFC participants
- Overtime hours for existing PCA staff
- Temporary budget increases for existing CFC cases
- Temporary suspension of CFC budget reductions

COVID-19 Emergency Response for CFC

- Shifted authority to Access Agencies to authorize immediate services
- No additional approval by DSS during the emergency
- Extensions reviewed in accordance with the Governor's State of Emergency Declaration

To Date:

- Overtime Budgets: 115
- Increase Budgets: 65
- Emergency hire of PCAs: 241 total requests
- Expedited Onboarding for New Participants.: 91 total requests

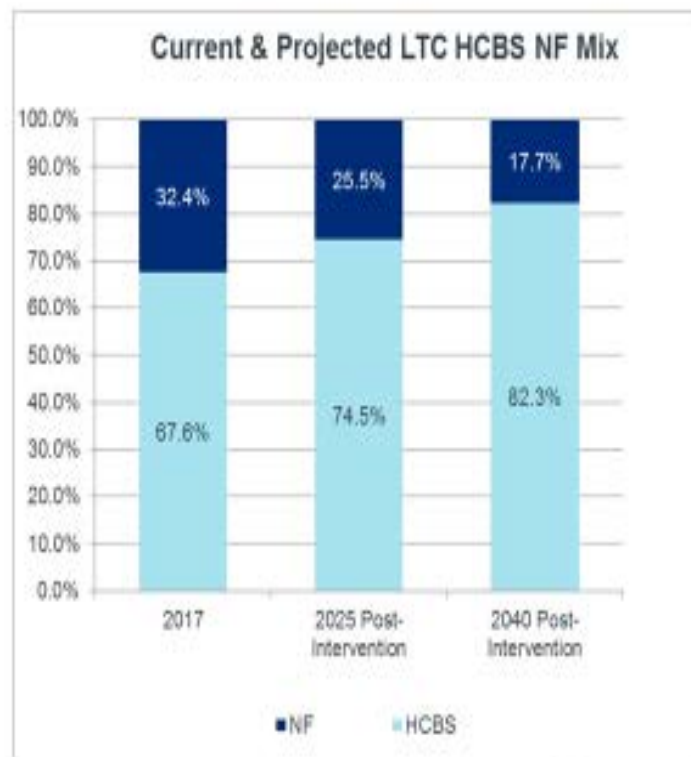
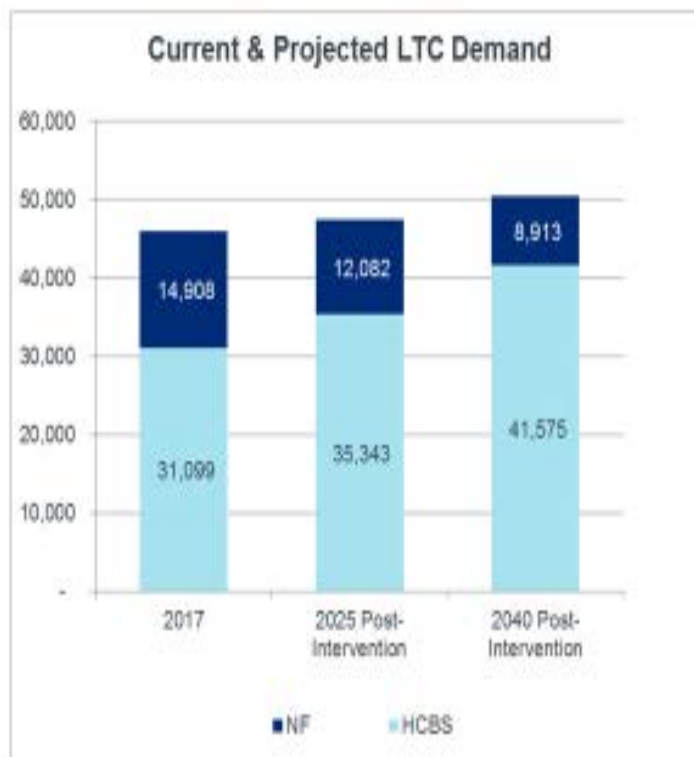


COVID-19 & NURSING HOME ANALYSIS

Analysis

Home and Community Based Services as a Proportion of State Population at Nursing Home Level of Care

Projections of future HCBS/NF levels presume the State will continue to use current initiatives and will utilize additional initiatives in future years in order to achieve the projected 2040 HCBS levels.





QUESTIONS?