Long Term Care Planning Committee

September 12, 2023 Meeting Minutes

LTC Planning Committee Members in Attendance: Melissa Morton, Chair, Office of Policy & Management (OPM); Margy Gerundo-Murkette, Department of Aging and Disability Services (ADS), Kelley Kendall, Department of Developmental Services (DDS); Erin Leavitt-Smith, Department of Mental Health and Addiction Services (DMHAS); Commissioner Amy Porter, ADS; Jessica Rival, Office of Health Strategy (OHS); Michael Santoro, Department of Housing (DOH); William Seals, Department of Children and Families (DCF); Laura Watson, DOH; Representative Mitch Bolinsky.

Others Present: Barbara Cass for Kim Hriceniak, Department of Public Health (DPH); Heather Ferguson-Hull, OPM

Excused Absence: Kim Hriceniak, DPH

Called to order by Melissa Morton at 10:02 AM

1. Welcome

Ms. Morton offered words of welcome.

2. Approval of Minutes from July 11, 2023, Meeting

Motion made by Commissioner Amy Porter. Seconded by Michael Santoro. Abstention: Margy Gerundo-Murkette.

All in favor

3. Introduction of New Community Ombudsman

Mairead Painter, Long-Term Care Ombudsman, introduced the new Community Ombudsman Manager, Daniel Beem. Mr. Beem shared a presentation giving an overview of the new Connecticut Community Ombudsman Program, which can be found here. He noted that they are in the process of hiring the first Regional Community Ombudsman.

4. Annual DSS LTSS Rebalancing Update

Various staff from DSS provided the annual DSS rebalancing initiative update to the LTC Planning Committee. William Halsey, Deputy Director of Medicaid and Division of Health Services, DSS, introduced the staff members presenting the update: Lauren Carabetta, Karri Filek and Colleen Hudson. The full DSS presentation can be found here. Highlights of the presentation included the following:

Money Follows the Person (MFP): Ms. Carrabetta shared benchmark data from the quarter ending June 30, 2023, regarding the transition of individuals from LTC facilities to the community. Since the inception of the program, 7,697 people have transitioned back to the community. As of June 30, 2023, 58% of Medicaid LTC expenditures were for Home and Community Care (also known as HCBS), and 42% were for institutional care. The shift towards HCBS has been continuous since 2017. In addition, 69% of

Medicaid members receive services in the community, and 31% receive services in an institution. Over 80% of members receiving HCBS reported being happy with the way they live their lives, 12 months after returning to the community. Ms. Carabetta noted that two of the ongoing challenges for members are in accessing affordable housing and in finding caregivers. She added that some of the programs included in today's update have been developed to help address some of the issues faced in providing HCBS.

<u>Community First Choice (CFC)</u>: Karri Filek prefaced her presentation with a brief reminder that CFC is a program that enables Medicaid members who require an institutional level of care to remain in the community with supports, including Personal Care Attendant (PCA) services. Currently 6,270 people are enrolled in CFC. Ms. Filek shared that DSS is partnering with DDS to implement a new PCA employment network website and that the contract with the new Fiscal Intermediary is close to being finalized. She added that there will be information forthcoming regarding the development of the new option for members to access agency-based PCAs for their services.

Connecticut Housing Engagement and Supports Services (CHESS): Ms. Filek explained that CHESS assists qualifying Medicaid members who are experiencing, or are at risk of, homelessness. It combines Medicaid services, supportive housing benefits, and non-Medicaid housing subsidies. Currently, 214 people are in housing under CHESS. She shared that the state-funded Rental Assistance Programs (RAPs) are now exhausted, so DSS is re-evaluating the program to determine the best way to serve more people.

<u>American Rescue Plan (ARP) 9817</u>: Ms. Filek shared that the ARP 9817 initiatives are focused on strengthening, expanding, and enhancing HCBS for Medicaid members and introduced the program leads.

- Health Information Exchange (HIE) and Value Based Payments: Colleen Hudson presented an
 overview of the program, including the provider benchmarks regarding data sharing with
 Connecticut's HIE (CONNIE), and participation in DSS Learning Collaboratives, including Racial
 Equity trainings. She highlighted that the goal of the latter is to provide quality care, that is
 culturally sensitive, to all members.
- <u>Assistive Technology (AT)</u>: Ms. Filek described the different Smart Home Technology initiatives being pursued, including an RFA that is being developed to generate a pool of planning and development projects. The goal is to improve quality of life for members, and to increase their ability to remain independent and age in place. She added that DSS is prioritizing expanded use of AT for all HCBS and Medicare Savings Program (MSP) members. There has been consultation with other states, and engagement with community partners to that end.
- Innovative Services and Supports: Ms. Filek described the Community Hubs model that DSS has been developing to provide remote supports to members. The goal is to have providers who can offer Medicaid members access to remote support professionals: by appointment, on demand, or in response to an alert from an in-home device. Ms. Filek said that DSS continues to make progress with its plans, and that she hopes to share an implementation timeline soon. She also touched on the Healthy Food Initiative, and the Programs of All-Inclusive Care for the Elderly (PACE), and DSS will share more information and timelines in the future.

- <u>Universal Assessment</u>: Ms. Carabetta explained that this assessment tool is being updated to
 expand and improve it. This tool was established as part of the overall rebalancing strategy, and
 is currently used by multiple state programs to determine Level of Need and Level of Care.
 There has been a thorough review of the UA, and areas for improvement have been identified.
 Next steps include finishing the Quality Control review, working on an RFQ, and then submitting
 an Advanced Planning Document (APD) to CMS.
- Supports at Home Option: Ms. Filek stated that this is a new program they are hoping to offer to members. It would be an option to expand MSP to offer more HCBS to members, with the goal of reducing institutionalization and improving quality of life. The services would include Case management, Care of Persons with Dementia in their Environment (COPE)/Confident Caregiver (same model, without dementia component), Respite Care, Community Aging in Place, Advancing Better Living in Elders (CAPABLE), Environmental Adaptation, and Assistive Technology. She said that DSS hopes to begin offering these services sometime this winter. Ms. Filek shared more detail about the evidence-based programs COPE and CAPABLE.

Discussion

Ms. Morton thanked DSS for their excellent presentation. She asked Ms. Filek what types of entities would be serving as Community Hubs: who they are, where they are, and what concrete services they will provide to individuals. Ms. Filek replied that this will be a new provider type and that there will be qualifications for providers to be credentialled as Community Hubs. She said that they are looking at Adult Day Centers, and she added that there is an RFA for Smart Home technology for subsidized housing, and she wondered if they could also be an expanded provider under Community Hubs. Angelique Pearson (DSS) stated that Homemaker and Companion agencies, congregate housing sites and other subsidized housing sites, and municipal Senior Centers would also be eligible to become Community Hubs. Ms. Filek noted that DSS is defining qualifications and expectations of Community Hub providers. She highlighted that 24-hour access will be a provider requirement, as well the ability to offer scheduled and unplanned check-ins with members and responding to alerts. She that added Community Hubs would also have the ability to provide emergency back-up PCA services, and the ability to support AT.

Michael Santoro asked DSS to reach out to DOH when they release their RFA for AT in supportive housing. He said that they are happy to distribute the RFA to projects that are under development.

5. Member Updates and Announcements

Margy Gerundo-Murkette shared that the State Unit on Aging division of ADS submitted an application to participate in a Multi-Sector Plan for Aging national learning collaborative through the Center for Health Care Strategies, and that they are one of ten states that have been accepted into the collaborative. It will be a one-year process to develop a multi-sector plan for aging. It is also referred to as a Master Plan on Aging (MPA). She said the goal of the planning efforts is to meet the needs of a growing aging population and people with disabilities over the next decade. She noted the other plans that have been developed in Connecticut, including the LTC Plan and the State Plan on Aging, but the MPA planning efforts are broader in scope than existing plans and it is a longer-term plan: 10 years or more. It will be a road map to help states transform policy, infrastructure, and service coordination. The process will engage a range of state departments and stakeholders, identify and align common goals, and elevate aging and disability initiatives. Ms. Gerundo-Murkette said she will provide updates to this committee and share progress reports.

6. Long-Term Care Advisory Council Comments

Michael Werner, the Commission on Women, Children, Seniors, Equity and Opportunity, shared that the next Advisory Council meeting is being scheduled for September 28, 2023, at 12:00 PM. He said that the agenda is being finalized and added that the Long-Term Care Ombudsman Program, the Alzheimer's Association and the State Unit on Aging will be joining the meeting and sharing updates.

7. Other Business

No additional items were raised by committee members.

Public Comment: Andrei Brel, representing the Connecticut Association of Adult Day Services, shared his appreciation for the DSS team and their LTSS Rebalancing initiatives. He expressed enthusiasm for Value-Based Payments and added that the Community Hubs are an organic expansion of what Adult Day Centers are already doing. He noted that mobile supports were essential during the pandemic, and he is pleased that the service modality is being made permanent. He thanked the agencies for the programs that are being developed and shared his optimism for the coming year.

8. 2023 Meetings

Tuesday, December 12th -- 10:00 AM to 12:00 PM - Via Microsoft Teams

Vote to adjourn:

Motion made by Michael Santoro. Seconded by Commissioner Amy Porter. All in favor

Meeting adjourned at 11:05 AM

Full meeting recording can be accessed here:

https://youtu.be/BusdfuUmTX0