Long-Term Services & Supports Rebalancing Updates September 2016

Connecticut Legislative Office Building Long Term Care Planning Committee Meeting Hartford, CT

9/13/2016

CT Long-Term Services & Services (LTSS) Initiatives

Testing Experience & Functional Tools (TEFT)
Innovation Accelerator Program (IAP)
Balancing Incentive Program (BIP)
Community First Choice
No Wrong Door – *Mintz & Hoke
Money Follows the Person Demonstration (MFP)
Status Updates
Focus for Final Years
Benchmarks
Questions
Contacts & Information

9/13/2016

Updates

 EOC Survey Testing completed

 Consumer Assessment of Healthcare Providers & Systems (CHAPS) Certification granted

of Care (EOC) Round 1 Testing complete;
 Round 2 underway

Functional
Assessment
Standardized
Items
(FASI)

 Finalizing options and anticipate announcing which PHR will be made available to individuals served under the Money Follows the

Person Demonstration

Personal Health Records (PHR) Electronic Long- Term Services & Supports Standard (eLTSS)

 Continuing to develop a set of national standards to identify and allow for electronic sharing of components of care plans

Overview

IAP is an intensive, six-month technical assistance opportunity designed to help states support individuals served by Medicaid in accessing and retaining stable housing; and meaningfully engaging with providers they choose to achieve their health goals.

Collaboration among Connecticut's:

- Department of Social Services
- Department of Housing
- Department of Mental Health and Addiction Services
- Department of Developmental Services
- Office of Policy and Management
- CT Housing Finance Authority
- Partnership for Strong Communities, and
- Corporation for Supportive Housing

9/13/2016

Overview

IAP GOALS:

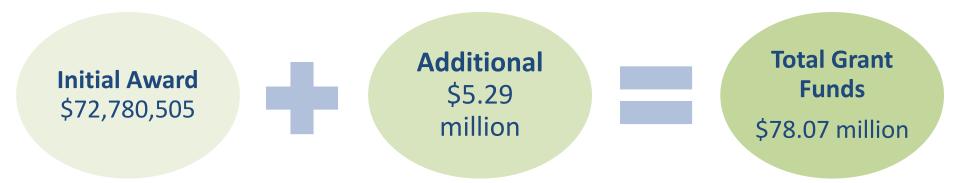
- Help States align policies and funding between state Medicaid, disability services, and housing agencies to maximize affordable and supportive housing opportunities;
- Ensure people experiencing chronic homelessness, people identified as high utilizers of health care services, and/or individuals with disabling conditions who are exiting institutional settings have access to a service package linked to housing to improve access to health care and outcomes and reduce costs; and
- ❖ Help States take advantage of opportunities in Medicaid to cover and finance services in supportive housing while maximizing the use of other resources to pay for non-Medicaid supports.

9/13/2016

Overview

In October 2011, CMS awarded States grants in order to serve more people in community-based settings.

In December 2012, Connecticut received its initial grant award.



Grantees received an enhanced Federal Matching Assistance Percentage (FMAP) on their LTSS spending which was to be used for new or expanded home and community-based services.

States were to transform their long-term care systems by September 30, 2015.

Connecticut's BIP Reinvestment



What is Community First Choice (CFC)?

CFC is a home and community-based service option that supports the highest degree of **choice**, **control**, and **autonomy** for consumers through a self-directed model.

Employer Authority – Decision-making authority over who they recruit, hire, train, and supervise their services

Budget Authority – Decision-making authority over how the Medicaid funds in their budget are spent

4 Budget Areas:

- 1. Assistance with hands-on care, cueing, and supervision
- 2. Assistance with managing a budget and/or staff
- 3. Assistance with back-up supports
- 4. Assistance to increase independence with health-related or daily-living tasks

Determination of CFC Eligibility

Consumers must:

- ☐ Live in a "community setting"
- ☐ Choose to self-direct and manage an individual budget
- ☐ Be covered under one of the Husky coverage groups
- ☐ Be at "Institutional Level of Care"

Institutional Level of Care (LOC)

Defined as:

- 1. Supervision or cueing ≥ 3 Activities of Daily Living (ADLs) + need factor; OR
- 2. Hands-on ≥ 3 ADLs; OR
- 3. Hands-on \geq 2 ADLs + need factor; OR
- 4. A cognitive impairment which requires daily supervision to prevent harm.

Activities of Daily Living include Bathing, Dressing (upper or lower body),

Toilet Use, Eating, or Transferring

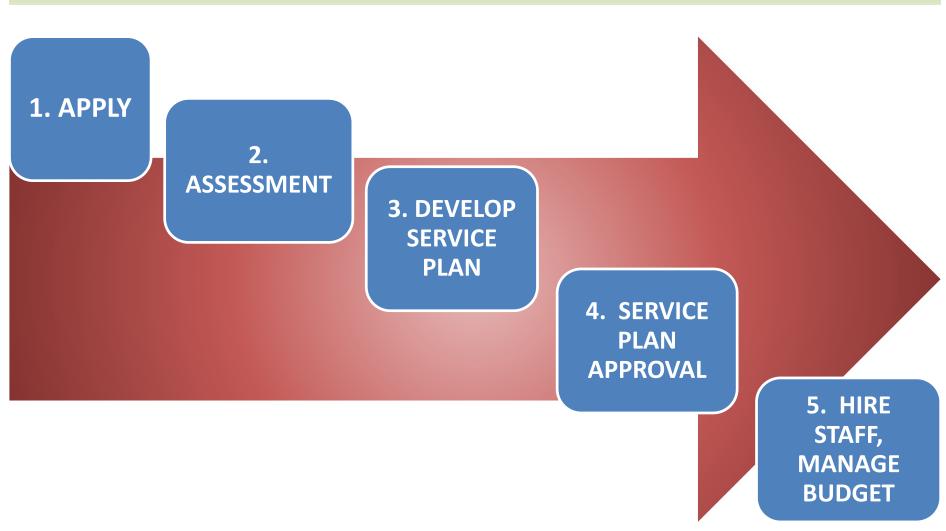
Needs Factors include:

- Rehabilitative Services: Physical, Occupational, or Speech therapy
- Behavioral Need: Behavior requiring daily supervision to prevent harm
- Medication support: Assistance for taking daily medications beyond setting up

Services available under CFC

- Self-hired personal care attendant
- Home delivered meals
- Emergency response system
- Support and Planning Coach
- Health Coach
- Consumer Education
- Personal Attendant Education
- Assistive Technology
- Environmental Adaptations
- Transitional Services

CFC Process



Status of CFC Implementation

As of 8/31/2016,

- 2,197 applications received
- 1,003 applicants referred to an Access Agency
- 383 Service Plans submitted
- 313 Service Plans Approved
- Estimated timeframe application to assessment = 1 to 3 months
- Applicants who are at a immediate risk of institutionalization are prioritized

9/13/2016

Connecticut's BIP Reinvestment



15

Overview

No Wrong Door Systems to be established in order for people to more easily obtain information on Medicaid LTSS.

May 2016 – Request for Qualification (RFQ) released seeking LTSS community partners

September 2016 – 3 communities awarded

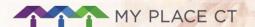
- 1. Enfield Senior Center, Enfield
- 2. Newington Senior Center, Newington
- 3. CCCI Danbury

9/13/2016

GETTING IN-HOME OUT TO THE PEOPLE

2016-2017 Communications plan





PROGRAM COMPONENTS

Workforce Stimulus

Care Through Community Partner

Consumer awareness and education

MyPlaceCT.org



WORKFORCE: BUILD THE SUPPLY NOW.



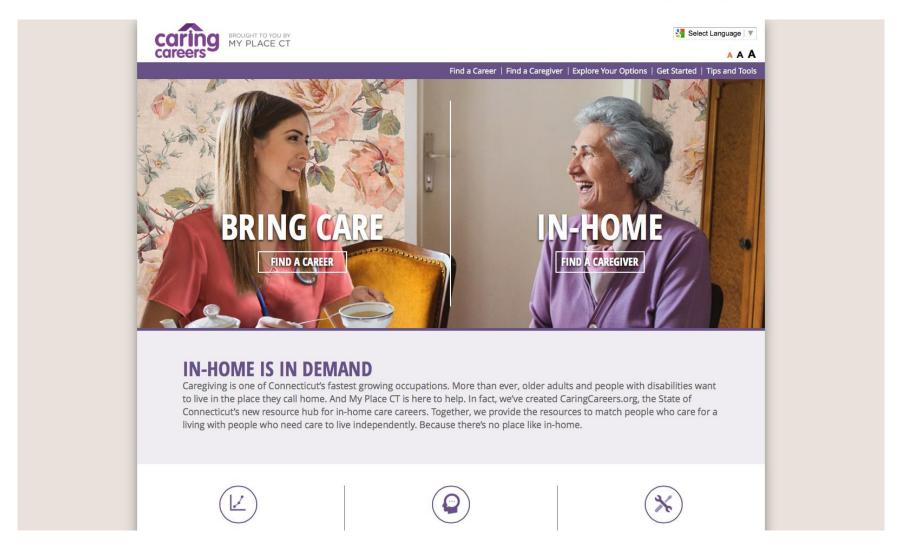






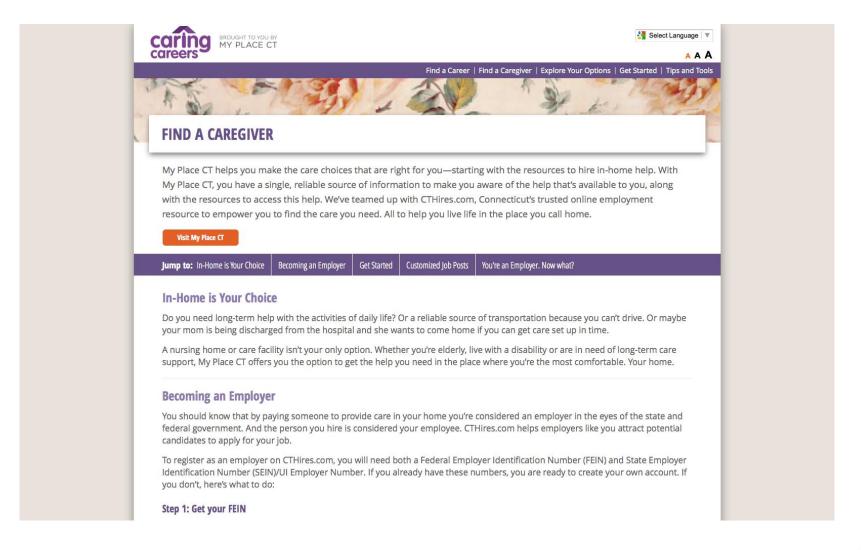
CaringCareers.org





CaringCareers.org/find-a-caregiver



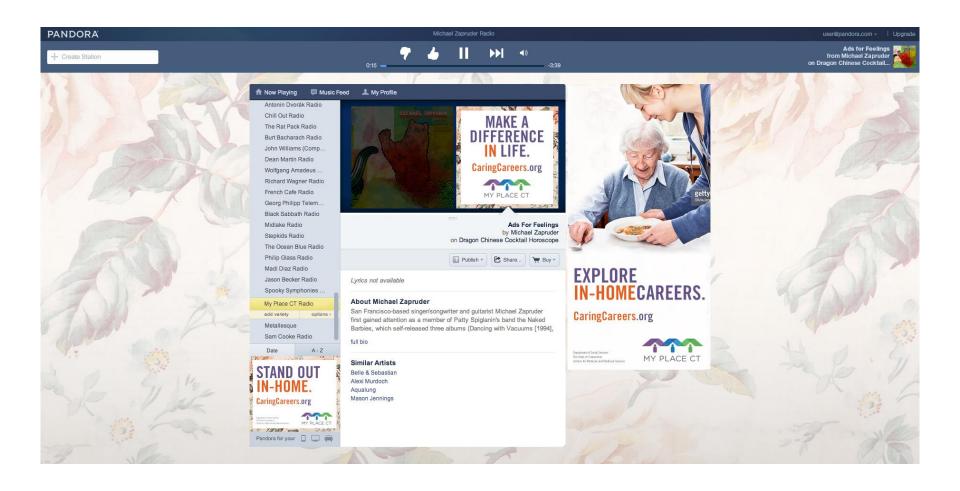




Department of Social Services | The State of Connecticut Centers for Medicare and Medicaid Services

Pandora







PARTNERS: MOBILIZE THE COMMUNITY.





Influencers

Town officials who want the resources to help residents live independently.



Connectors

From pharmacists to hairdressers and first responders, connectors field questions and send people to MyPlaceCT.org, 2-1-1 or a local Navigator.



Providers

Health care and service professionals that provide care and support recommendations.

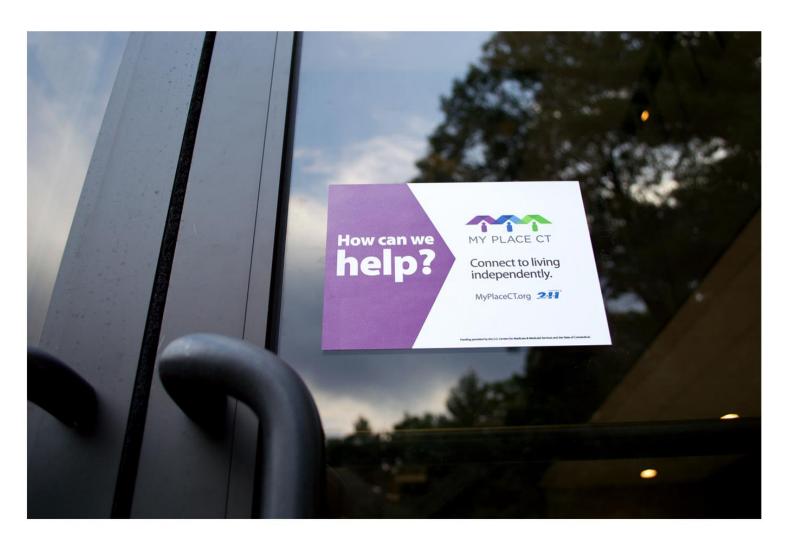


Navigators

DSS-trained individuals that assist residents with the tools to plan and access care and support.

Window Cling





Department of Social Services | The State of Connecticut Centers for Medicare and Medicaid Services

Partner Materials







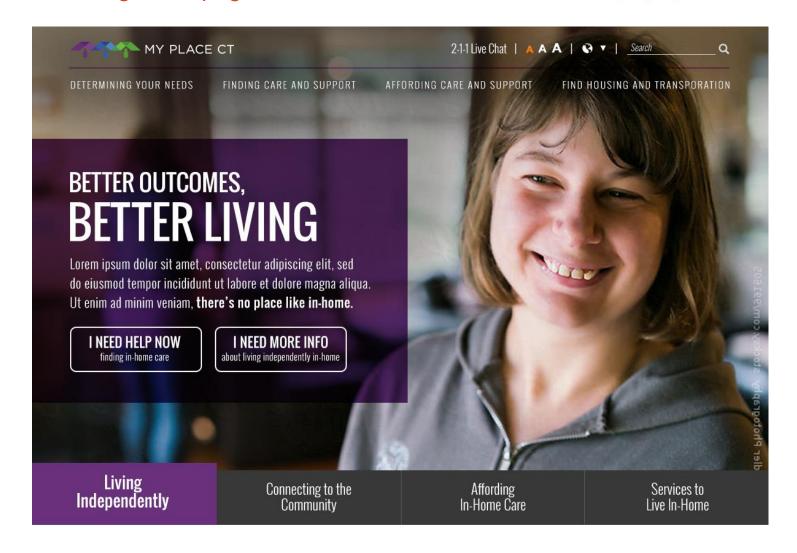
CONSUMERS: MEET THE NEED.

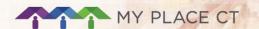




MyPlaceCT.org Homepage







MYPLACECT.ORG: DELIVERS ANSWERS

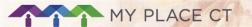
"Is a nursing home my father's only option?"

"How can I hire a caregiver?"

"How can I afford my medicine?"

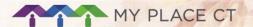
"How can I get help around the house?"

"What is Medicaid?"



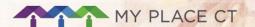
A direct link to help right now

MYPLACECT.ORG: DELIVERS ANSWERS



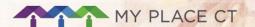
A direct link to help right now Benefits Check-up

MYPLACECT.ORG: DELIVERS ANSWERS



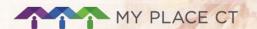
MYPLACECT.ORG: DELIVERS ANSWERS

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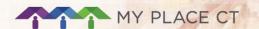


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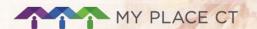
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Benefits Check-up
Benefits Pre-Screen
My Tool Kit



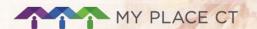
A direct link to help right now
Benefits Check-up
Benefits Pre-Screen
My Tool Kit
A Partner portal with unique log-in



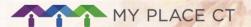
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Benefits Check-up
Benefits Pre-Screen
My Tool Kit
A Partner portal with unique log-in
A Workforce section and landing
page



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My Tool Kit
A Partner portal with unique log-in
A Workforce section and landing
page
Live support from 2-1-1

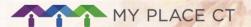


A direct link to help right now Benefits Check-up Benefits Pre-Screen My Tool Kit A Partner portal with unique log-in A Workforce section and landing page Live support from 2-1-1 More.



MYPLACECT.ORG: SCHEDULE

- 1. Partner Beta site: October
- 2. Live to the public: Early 2017



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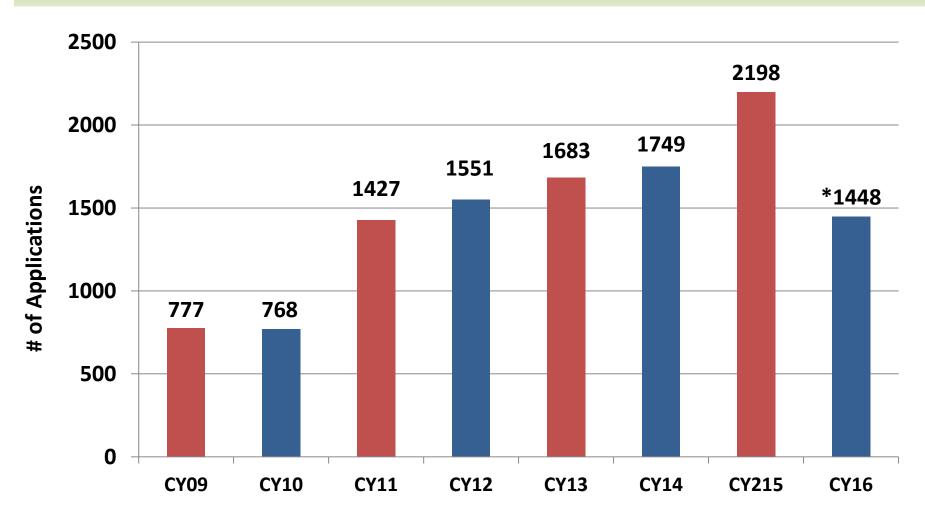


Thank you.



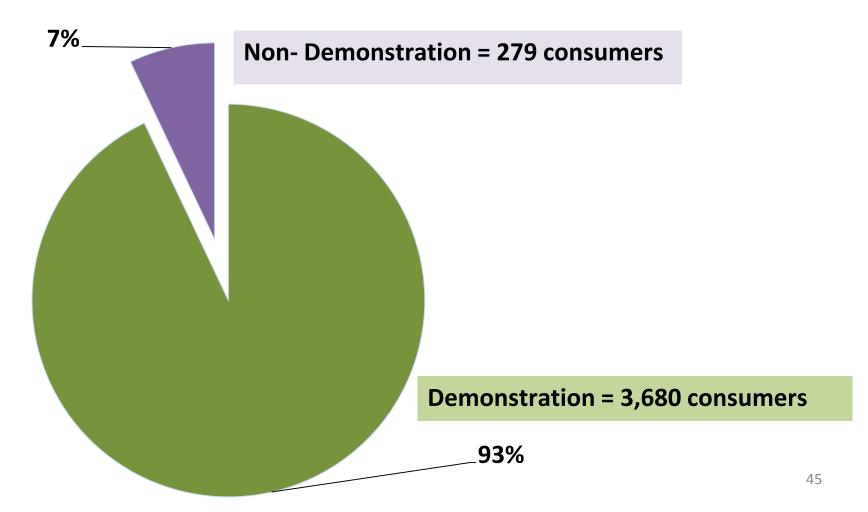
MFP Applications

*as of 8/31/2016 (n = 11,601)

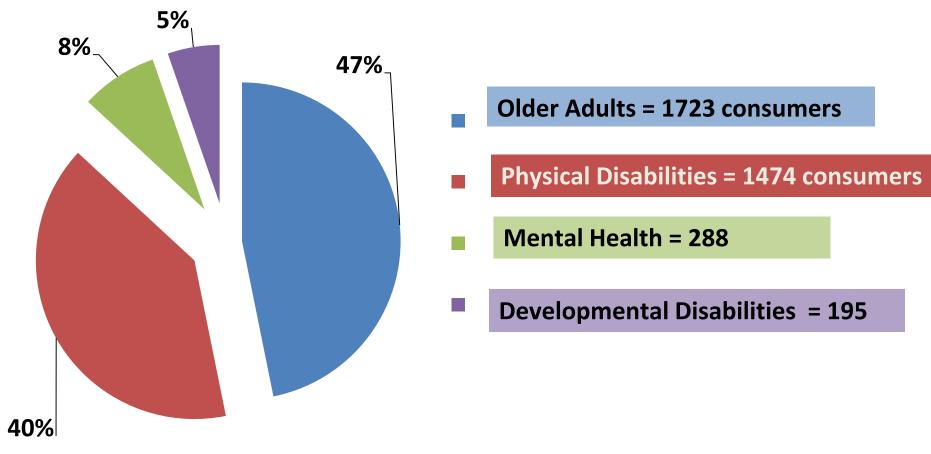


MFP Transitions by Program

as of 8/31/2016 (n = 3,959 transitions)



MFP Transitions by Population as of 8/31/2016



Focus for MFP's Final Years

In April 2016, CMS awarded Connecticut **\$129,920,175** extending the MFP Demonstration into 2020.

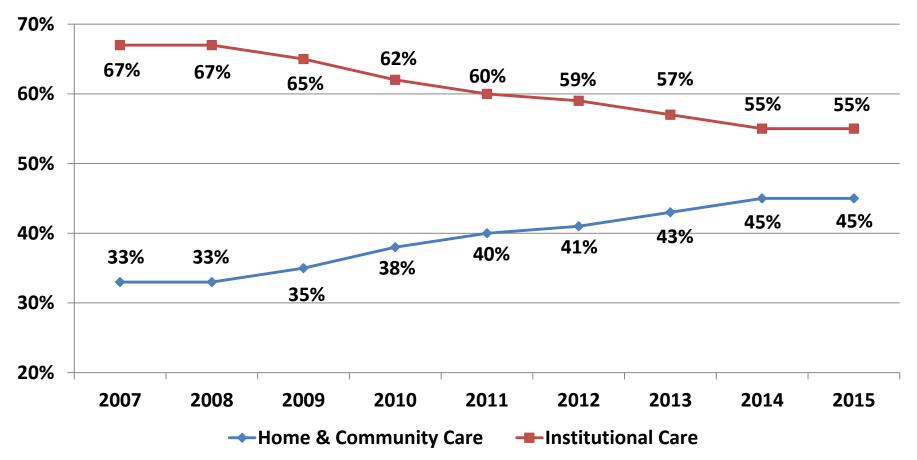
- Housing Initiatives
 - 811 Grant
 - Homelessness
- Continue to demonstrate LTSS services
 - Demo Addiction Services and Supports
 - Informal Caregiver Supports
- Community Options Unit an integrated unit of the former HCBS and MFP Units at DSS

Making a Difference

CT Medicaid LTSS Expenditures

Increase dollars to home & community-based services

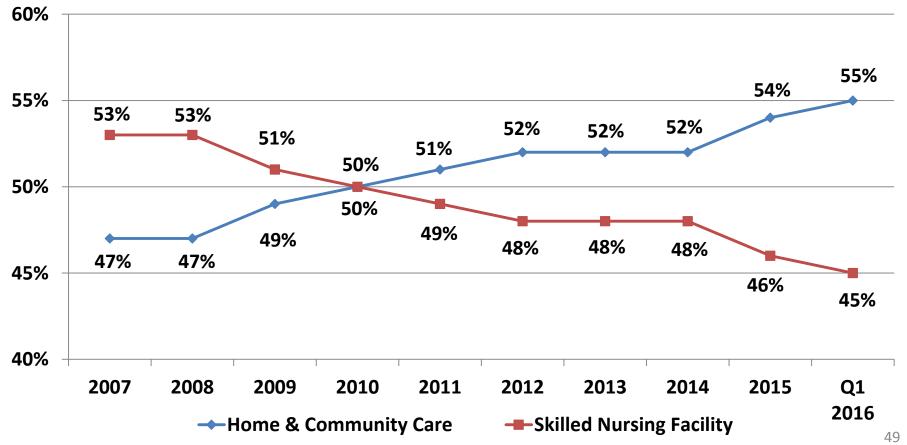
Source: Center on Aging, University of Connecticut



Making a Difference

Percentage of Hospital Discharges to Home & Community Care vs. Skilled Nursing Facility

Increase hospital discharges to the community rather than to institutions **Data Source:** Connecticut Office of Health Care Access

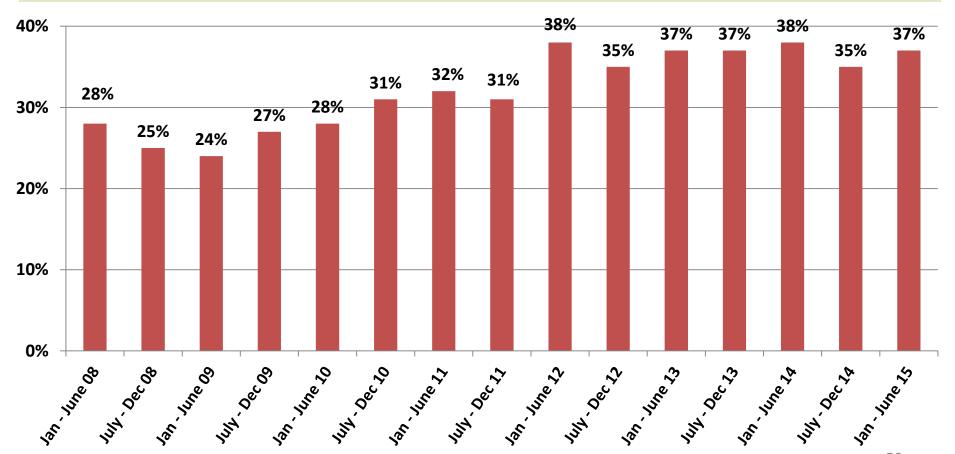


Making a Difference

Percent of SNF Admissions Returning to the Community within 6 Months

Increase probability of returning to the community during the 6 months following nursing home admission

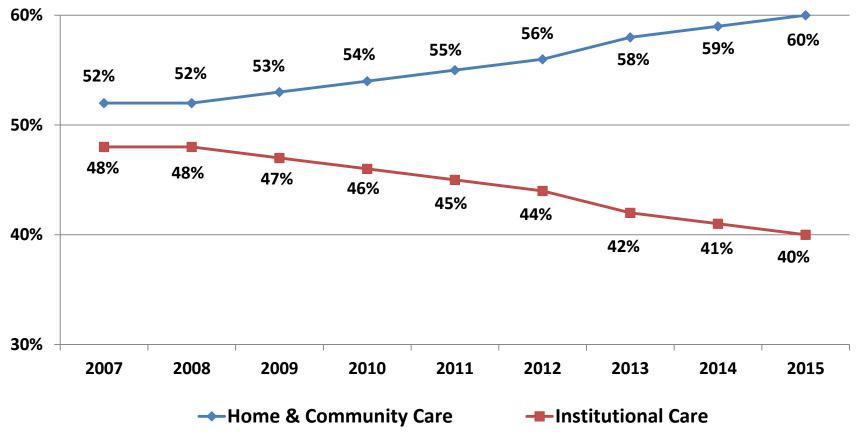
Source: Center on Aging, University of CT



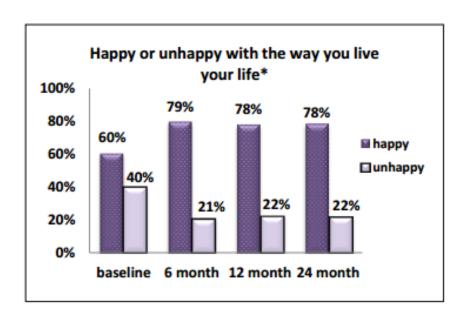
Percent Receiving LTSS in the Community vs. Institutions

Increase the percentage of long term care participants living in the community compared to an institution

Data Source: Office of Policy & Management, Trends in Long-Term Care Annual Report



Quality of Life



Data: Center on Aging, UConn Health

MFP Participant: Melanie Korotash "It takes a village...."



Questions?

Resources

To apply for Community First Choice (CFC)

- Dial 2-1-1, select Option #3; or
- Apply online at ctmfp.com

For more information and to apply for Money Follows the Person (MFP)

Apply online at ctmfp.com

CT Testing Experience and Functional Assessment Tools (TEFT)

http://www.ct.gov/dss/cwp/view.asp?a=3922&q=562672

No Wrong Door Resources

- MyPlaceCT http://www.myplacect.org/
- CaringCareerswww.CaringCareers.org

Contact Information

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