Office for Citizens with Developmental Disabilities

System Transformation
Large Stakeholder Meeting
March 31, 2014
Today’s Agenda

Updates on

• System Transformation
• Managed Long Term Supports and Services
• RFSR Validation Process
• Eligibility Improvements
• Suggested Freedom Of Choice Improvements
• Web Communications Improvements

• Next Steps
OCDD System Transformation

• Began exploring in 2012, with input from stakeholders statewide
• Impacts Early Intervention, HCBS, ICF/DD
• Currently in Year 1 Plan for Transformation of a multi-year process
• Alignment with MLTSS is ongoing
## OCDD System Transformation

### Transformational Outcomes

1. Serve more people in home and community-based services (HCBS)
2. Achieve cost-effectiveness in HCBS
3. Reduce institutional reliance
4. Provide access to appropriate services based upon need
5. Increase use of appropriate natural and community supports
Year 1 Transformational Areas

- Request for Services Registry
- Consumer Choice and Control/ Providers
- Lifespan Planning
- Single Point of Entry/ No Wrong Door
- Services
- Supports Utilization and System Design
Stakeholder Engagement

- Stakeholder Engagement is key to making transformation a success!

- Strategies include:
  - System Transformation Advisory Committee (families, consumers, advocates)
  - LGE Executive Directors monthly meeting
  - Focus groups, surveys, web meetings, local meetings
  - Large statewide stakeholder meetings
Managed Long Term Supports and Services
Long-Term Supports and Services

- Through Medicaid, the Office for Aging and Adult Services (OAAS), and the Office for Citizens with Developmental Disabilities (OCDD), DHH currently administers several programs that provide various specialized services for people with age-related or adult-onset disabilities or people with developmental disabilities who need long-term care.

- During the last fiscal year, over $2 billion was spent to serve over 73,000 recipients of long term supports and services in Louisiana.
Managed Long-Term Supports and Services

• “MLTSS refers to the delivery of LTSS (including both home and community based services (HCBS) and institutional-based services) through capitated Medicaid managed care programs. These programs can be operated by a variety of health plans, including managed care organizations.”

• There has been a growing movement in this direction across the nation, from eight states in 2004 to 15 in 2013 with managed LTSS programs.
OCDD Programs Impacted by MLTSS

• Waivers
  – NOW, Children’s Choice, Supports, ROW
• Public and Private ICFs/DD, including CEAs
• EarlySteps
• The RFSR
  – People who are waiting with and without Medicaid services
• State General Fund Programs
  – Flexible Family Fund, IFS, Resource Centers
• Additional Programs:
  – Permanent Supportive Housing, MFP Demo/ My Place
Objectives for Managed Care

The key objectives of restructuring LTSS to a system of managed care are to:

1. Improve quality of services and health outcomes;
2. Decrease fragmentation and improve coordination of care;
3. Create a system that utilizes proven and/or promising practices;
4. Refocus the system in order to increase choice and provide more robust living options for those who need LTSS and their families; and
5. Rebalance the system in order to meet the growing demand for services within the existing level of expenditures for the LTSS population.
MLTSS Advisory Group

- DHH has assembled an advisory group of stakeholders to guide the process towards managed care.
- The advisory group first met on October 3, 2013 and has met three times since then, with the latest meeting on February 6, 2014.
- Additionally, the department has been working with the advisory group to incorporate public feedback through webinars and various public forums.
Feedback from the Advisory Group

- DHH has already incorporated feedback from the advisory group in the following ways:
  - Decision to pursue dual RFPs for the two populations served under LTSS, with one population phasing in after the other
  - Allow waiver recipients to voluntary opt-in/opt-out of Bayou Health prior to MLTSS implementation
  - Hold both webinars and public forum meetings around the state to allow public feedback, including day and night-time meetings
## Timeline for MLTSS

<table>
<thead>
<tr>
<th>Step</th>
<th>Date or Time Frame</th>
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<tbody>
<tr>
<td>Anticipated RFP Release</td>
<td>Summer 2014</td>
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<tr>
<td>Deadline for Proposals</td>
<td>60 days from RFP release</td>
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<tr>
<td>Evaluation of Proposals</td>
<td>30 days from the day following the deadline</td>
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<tr>
<td>Announcement of Contract Awards</td>
<td>TBD, following evaluation period</td>
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<tr>
<td>Assignment of Members to Health Plans and Notices Sent</td>
<td>First day of the month prior to the month MLTSS will go live</td>
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<tr>
<td>Go Live Date</td>
<td>TBD</td>
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How to stay informed about MLTSS

http://www.MakingMedicaidBetter.com/LongTermCare
Request for Services Registry Workgroup
Mark Thomas, Workgroup Chair
Gina Easterly, Ph.D., Co-Chair
RFSR Validation

- Began Validation Process with those residing in ICF/DD and Nursing Homes
- 974 individuals on registry reside in ICF’s/DD and Nursing Homes
- Addressed Advocacy Center’s concerns
- Revised the validation process and documents
- Hoping to involve the Community Living Ombudsman working with individuals in private intermediate care facilities for the developmentally disabled (ICF/DD) and the Long-Term Ombudsman in private nursing homes
- Collaborating with Long-Term Ombudsman and sending us information about the individuals on the Registry
- Individuals who responded to the validation or who contacted SRI or OCDD to update their information on Registry will remain active and not have a face to face validation visit
Other individuals will receive a validation visit. Following these visits, individuals may choose to be active, inactive or voluntarily be removed from the registry.

Active and inactive will allow OCDD to identify which individuals want to leave private facilities now and in the future.
Eligibility Improvements

Supports Utilization and System Design
Brandi Kelly, Ph.D., Workgroup Chair
Eligibility Improvements

• Improve statewide consistency and efficiency through:
  • Core set of required documents
  • Standard set of interview questions
  • Exploration of MOUs with other state agencies for needed information (DOE, local schools, SSI)
  • Adjustment of timeframes to support accurate determinations (avoidance of premature closures)
  • Clarification of redetermination expectations
Eligibility Improvements

• Address informant concerns when NOT individual, close family, or longtime caregiver
  • Typically referrals from short term placement/treatment option
  • Limited historical information
• Training/mentoring of professionals
  • Establishment of best practice approaches
• Individual/Family outreach and informationals
Eligibility Improvement Actions

- Internal operational instruction in process of update
- Will require rule change
- Implementation likely later in year
  - OCDD partnership with LGEs
  - Varied approach to training and information sharing (online, in person, etc.)
Provider Freedom of Choice Enhancements

Consumer Choice and Control Workgroup
Paul Rhorer, Workgroup Chair
Freedom of Choice Enhancements

• Existing problems
  • Lengthy list of all providers
  • No information other than agency name, address, phone number
  • Often individuals and/or families basically start at the top of the list and choose providers alphabetically and not by services needed for the participant
  • Depending on type of support needs the participant has, the participant may choose first provider that agrees to support them regardless of whether or not they are a good match
Freedom of Choice Enhancements

• Provision of basic information on all providers
• Develop series of questions-identifying those that are mandatory for each provider to complete
• Post responses so that individuals and/or their families are able to look this information up
• Individuals and/or their families are able to have a smaller pool of providers to set up interviews with
Freedom of Choice Enhancements

• Next Steps
  – Based on feedback from Stakeholders develop a final list of questions to be completed by service providers
  – Finalize proposal and options for integration online with Freedom of Choice and submit for approval
  – Develop implementation plan
  – Implement
Web Communications Improvements

Single Point of Entry Workgroup
Herman Bignar, Chair
Pam Sund, Co-Chair
On line Portal Proposal

Integrating data systems for participants and families to:

• Update participants demographic info
• Check Request For Services Registry status
• Complete level one screening
Website Improvement Proposal

Based on quality assurance/quality review we will make the following updates:

• More task/topic oriented site
• Convert word documents to PDF files
• Make external links and pages open in new windows
• Inform external partners to provide a link to OCDD website
• Follow ADA best practices
Stay Informed of System Transformation Progress
Updates on System Transformation

• Information about System Transformation can be found on the OCDD Website http://new.dhh.louisiana.gov/index.cfm/subhome/11/n/8

• Inquiries can be emailed to OCDD System Transformation at OCDDsystemtransformation@LA.GOV

• If you would like to be contacted directly with updates or to identify yourself to participate in our focus groups, surveys, and other stakeholder processes, complete the survey today or email us at OCDDsystemtransformation@LA.GOV