Medicaid Innovation Accelerator Program (IAP)

IAP Information Session: Promoting Community Integration in Long-Term Services and Supports (LTSS) Programs

October 22, 2015 – 2:00 PM (ET)

Welcome

- Timothy Hill

  Deputy Center Director, Center for Medicaid and CHIP Services (CMCS), CMS

Today's Speakers

- Karen LLanos, Director Medicaid IAP

- Mike Smith, Director, DEHPG – Division of Community Systems Transformation

- Brian Burwell, Truven Health Analytics

Agenda for Today's Call

- What is the Medicaid Innovation Accelerator Program?

- Why Focus on Community-based Long-Term Services and Supports?

- Overview of Proposed Approach to Program Support for States

- How to Apply for Program Support

- Next Steps

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What is the Medicaid Innovation Accelerator Program (IAP)?

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- Four year commitment by CMS to build state capacity and accelerate ongoing innovation in Medicaid through targeted program support

- A CMMI-funded program that is led by and lives in CMCS

- Supports states' and HHS delivery system reform efforts
  - The end goal for IAP is to increase the number of states moving towards delivery system reform across program priorities

IAP Program Priority Areas

Substance Use Disorders	Beneficiaries with High Needs & High Costs/ Superutilizers	Community Integration – Long-term Services & Supports	Physical Health/Mental Health Integration
Launched with 7 selected states Jan 2015	Opportunity announced June 29, 2015. Work started with states October 2015.	Today's Information Session (October 22, 2015)	*Information session to be held in early December 2015

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Functional Areas: Targeted Technical Support For States

- Functional areas:
  - Data Analytics
  - Quality Measures
  - Rapid Cycle Learning
  - Payment Modeling & Financial Simulations

- States can request targeted technical support unique to their own needs in these areas

- Available in mid-2016

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How Do We Define Success for IAP?

- Has participation in IAP led to increased delivery system reform in the IAP program priority areas/populations?

- Has IAP increased states' capacity to make substantial improvements in:
  - Better care, Smarter spending, Healthier people

- Has IAP built states' capacity in the following areas:
  - Data analytics, rapid cycle learning, value-based payment, and quality measurement

Long-Term Services and Supports Programs

Community Integration in Long-Term Services and Supports Programs (CI-LTSS)

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Why Focus on People with Long-Term Services and Supports Needs?

- People with LTSS needs account for about one third of all Medicaid expenditures

- States want better tools for managing the growth of LTSS expenditures

- States are investing in policies and programs to increase the percentage of the LTSS population served in community settings

- States are putting increased emphasis on measuring program and population outcomes in LTSS

Source: Eiken S, Sredl K, Burwell B, and Saucier P. *Medicaid Expenditures for Long-Term Services and Supports (LTSS) in FY 2013: Home and Community-Based Services were a Majority of LTSS Spending* Truven Health Analytics, June 30, 2015.

What Does the LTSS Population Look Like by Age?
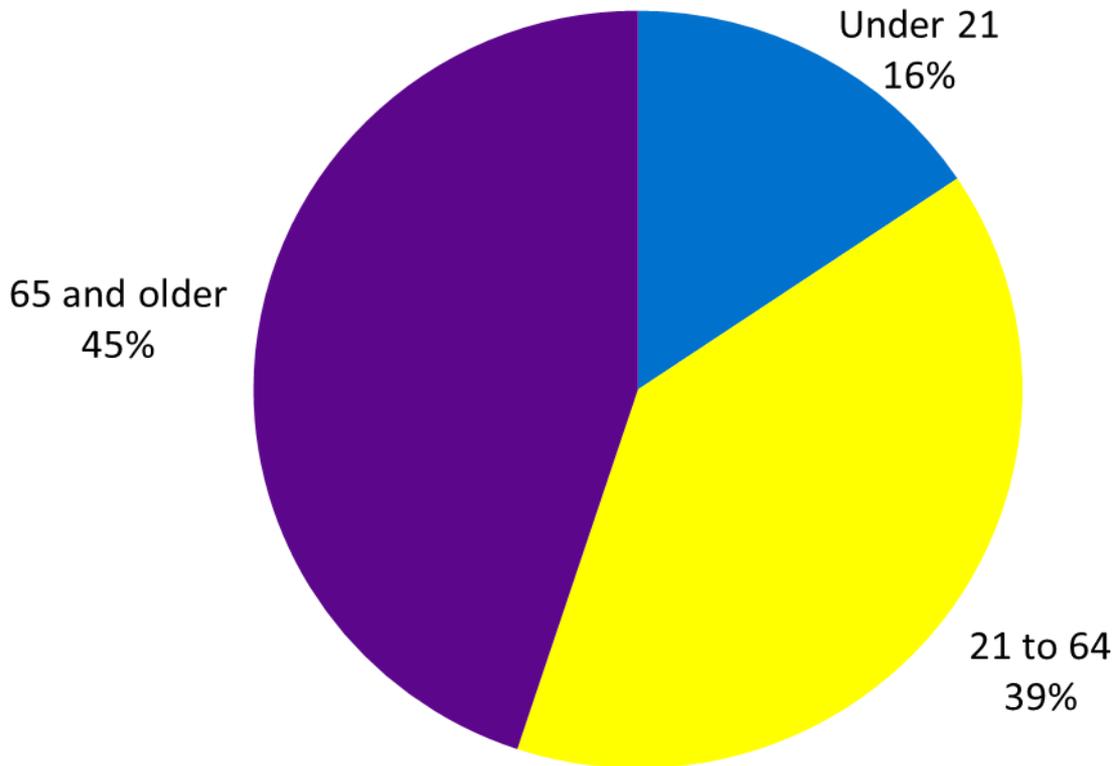
Source: Medicaid Analytic eXtract (MAX). Data were not included for Arizona, Colorado, the District of Columbia, Hawaii, Idaho, Kansas, Maine, Massachusetts, Ohio, Texas, and Wisconsin because these states did not have 2011 data in MAX. Age data were not available for 48,322 beneficiaries, one percent of total beneficiaries.

What Does the LTSS Population Look Like?

Institutional
1,421,594
29%

HCBS
3,194,462
66%

Both
225,732
5%
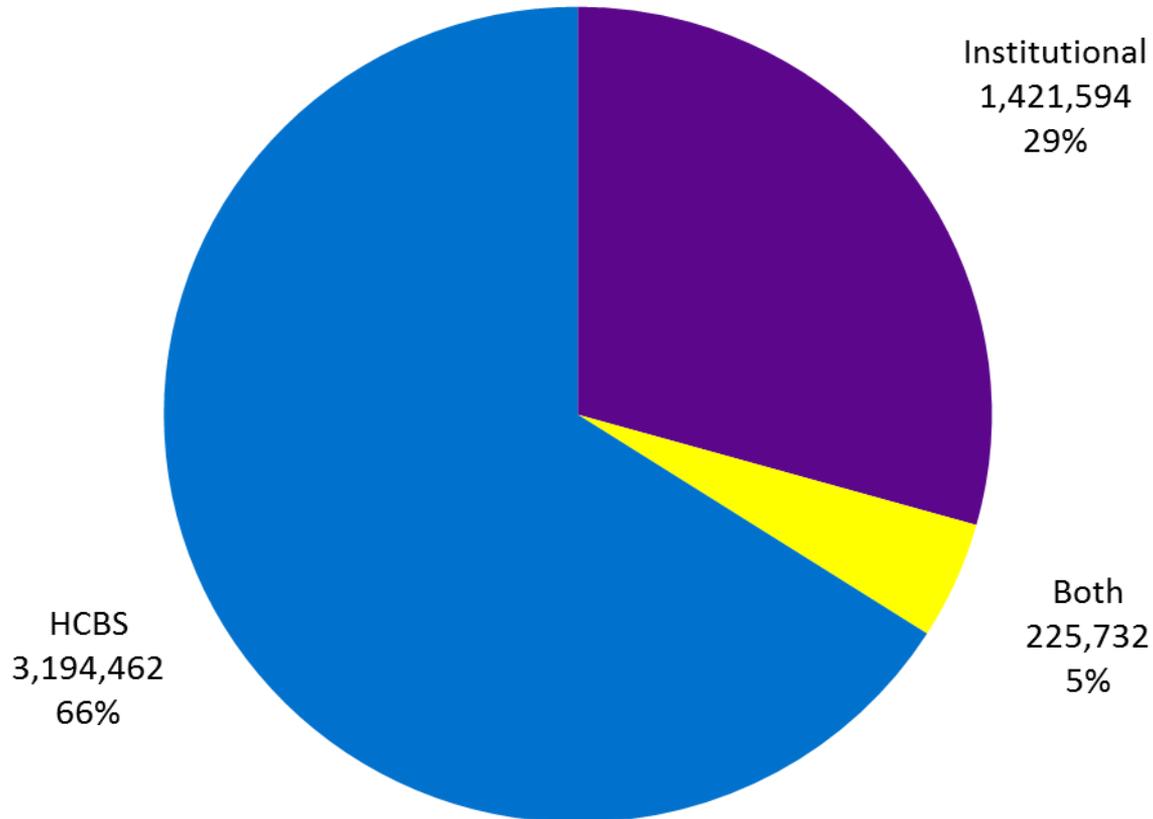
Source: Medicaid Analytic eXtract (MAX). Data for 2010 are used for Arizona, Colorado, the District of Columbia, Hawaii, Idaho, Massachusetts, Ohio, Texas, and Wisconsin because these states did not have 2011 data in MAX. Kansas and Maine are excluded because MAX did not include data for either year.

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What Does the LTSS Population Look Like, continued?

Medicaid HCBS Expenditures as a Percentage of Total Medicaid LTSS, FY 1995 - 2013
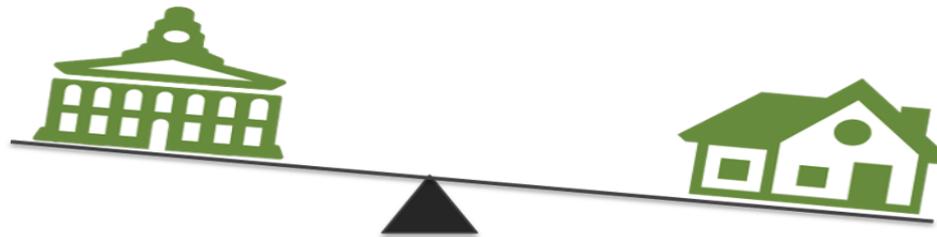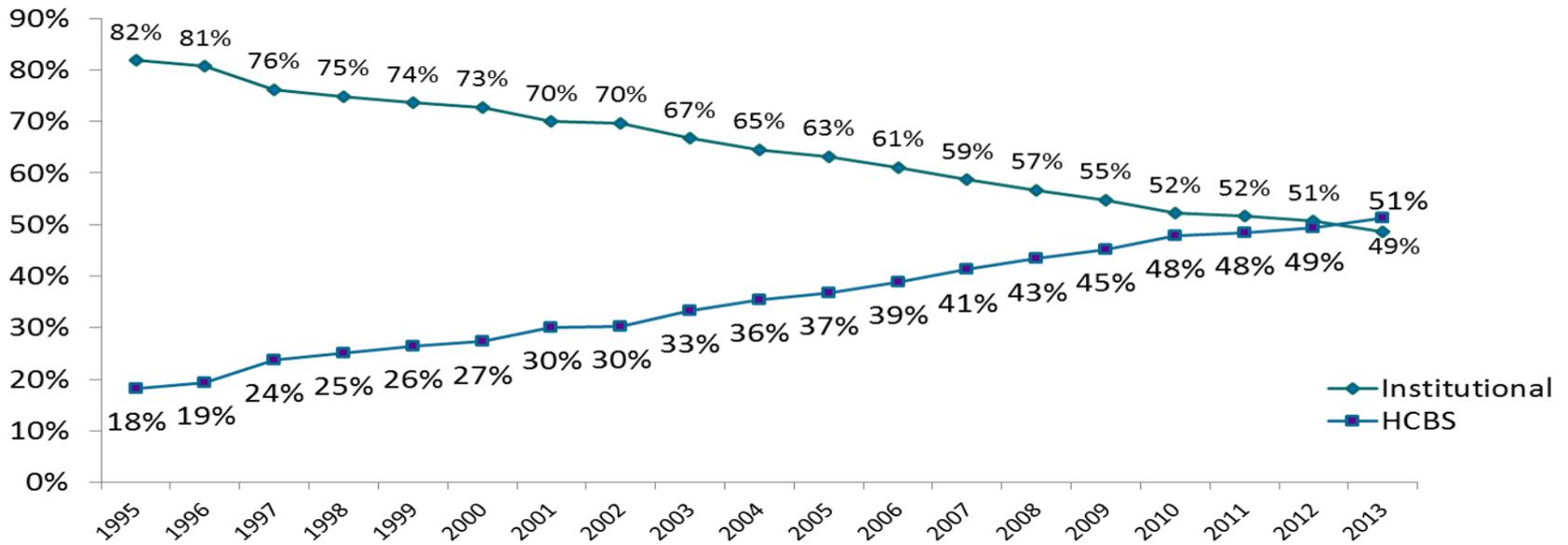
Institutional: 82%, 81%, 76%, 75%, 74%, 73%, 70%, 70%, 67%, 65%, 63%, 61%, 59%, 57%, 55%, 52%, 52%, 51%, 49%

HCBS: 18%, 19%, 24%, 25%, 26%, 27%, 30%, 30%, 33%, 36%, 37%, 39%, 41%, 43%, 45%, 48%, 48%, 49%, 51%

Years: 1995, 1996, 1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013

Source: Eiken S, Sredl K, Burwell B, and Saucier P. *Medicaid Expenditures for Long-Term Services and Supports (LTSS) in FY 2013: Home and Community-Based Services were a Majority of LTSS* ics, June 30, 20*Spending* Truven Health Analyt15

Recent State and Federal LTSS Policy Changes

- People who need LTSS have a legal right to live in the community whenever it is medically possible

- New federal policy guidance gives greater definition to community-based settings

- Increased emphasis on person-centered planning as a program modality

- Continued growth in Participant-Directed Service models

- Many states are shifting from fee-for-service to managed care purchasing models

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Community-based LTSS Program Models are Becoming More Outcomes Focused

- Residing in a community-based setting not sufficient— LTSS programs should support people in connecting with their communities (Community Integration)

- Increasing focus on incorporating outcome (e.g., quality of life, etc.) type measures

- Person-centered planning recognizes the unique circumstances and preferences of every individual

Questions or Comments?

Use the Chat Box

Or

Press *7 to un-mute your line

When complete press *6 to mute your line

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Overview & Proposed Approach

Overview & Proposed Approach of Program Support Available to States

IAP's Goals for Community Integration-Long-Term Services and Supports

- Increase state adoption of individual tenancy sustaining services to assist Medicaid beneficiaries

- Expand housing development opportunities for community-based LTSS Medicaid beneficiaries through facilitation of partnerships with housing agencies

- Increase state adoption of strategies that tie together quality, cost, and outcomes in support of community-based services LTSS programs

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Two Areas of Program Support Available for State Medicaid Agencies

1. **Medicaid Housing-Related Services and Partnerships (HRSP):**
   - Track 1. Supporting housing tenancy
   - Track 2. State Medicaid-Housing Agency Partnerships

2. **Incentivizing Quality and Outcomes (IQO) in Community-based LTSS**
   - Track 1. Planning an IQO strategy
   - Track 2. Implementation of an IQO strategy

Why Focus on Medicaid Housing-Related Services & Partnerships?

CMS <u>does not</u> provide Federal Financial Participation for room and board in home and community-based services, <u>but can assist</u> states with coverage of certain housing-related activities and services.

Why Focus on Medicaid Housing-Related Services & Partnerships, continued?

- Continued growth of community-based service systems for people with LTSS needs has greatly increased demand for accessible and affordable housing

- Lack of affordable and accessible housing for people with LTSS needs is a significant barrier to further LTSS system rebalancing

- People in community-based settings face many difficulties maintaining tenancy

Housing-Related Services & Partnerships: Two Tracks

- Two sequential opportunities for states

- States can apply for one or both of these tracks

  - **Track 1.** Supporting Housing Tenancy

  - **Track 2.** State Medicaid-Housing Agency Partnerships

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Housing-Related Services Track 1: Supporting Housing Tenancy

- Many individuals in community-based settings face difficulties in maintaining their homes:
  - Lack of physical accessibility of the home
  - Lease violations that can lead to eviction, such as late rental payments
  - Late rent, tax, or utility payments due to impairments affecting financial management
- Loss of housing tenancy can lead to institutionalization or homelessness

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Housing-Related Services Track 1: Types of Program Support Available

- Three month web-based learning series that begins in February 2016

- Content of program support to be refined based on the selected states' needs and include:

  - Webinars with experts to advise on housing tenancy issues

  - Sharing of housing tenancy best practices, tools and case studies

  - Understanding which housing-related activities and services are covered by Medicaid

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Housing-Related Services Track 2: State Medicaid-Housing Agency Partnerships

- Medicaid agencies and housing agencies speak different languages

- Partnerships require commitments from both sides at a high level and need to be sustained over an extended period of time to create change

- Best practices in building collaborative relationships can be shared across states

- Federal agencies have developed a partnership to facilitate relationships at the state and local levels, including USICH, CMS, HUD, SAMHSA, and ASPE

Housing-Related Services Track 2: Types of Program Support Available

- A six month intensive, hands-on opportunity that begins April 2016

- Designed to move selected states closer towards building collaborations with key housing partners in their states

- Content of program support will be customized to states' needs and may include:

  – In-person workshops

  – Roundtables on Medicaid and housing agency collaborations

  – Facilitation of meetings between Medicaid and housing agencies

Why Focus on Incentivizing Quality and Outcomes in Community-based LTSS?

- Efforts to incentivize quality and outcomes have been utilized more for acute care and nursing facilities than for community-based LTSS

- Previously, states have been focused primarily on expanding <u>access</u> to HCBS for persons with LTSS needs (getting people services)

- Growing focus on assessing the <u>outcomes</u> being achieved with investments in HCBS (how resources can be used most efficiently)

LTSS Incentivizing Quality and Outcomes Models: Two Tracks

- Two sequential opportunities for states

- States can apply for one of these tracks

  – **Track 1.** Planning an IQO Strategy

  – **Track 2.** Implementation of an IQO Strategy

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Planning an IQO Strategy: Types of Program Support Available

- Six month program support opportunity beginning in April 2016

- Targeting states needing strategic planning support in developing an IQO approach for community-based LTSS

- Content of program support will be customized to states' needs and may include:

  - Case studies of operational models

  - One-on-one webinars with experts

  - Roundtables with other states planning to implement IQO strategies for community-based LTSS

  - Understanding of relevant federal authorities

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Implementation of an IQO Strategy: Types of Program Support Available

- Six month program support opportunity beginning in September 2016

- Targeting states that are past the planning phase, but are in need of support with the early stages of their implementation activities

- Content of program support will be customized to states' needs and may include:

  - Specification of target populations

  - Determining accountable entities

  - Analysis of relevant data

  - Development of an incentives strategy

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Program Support

How to Apply for Program Support

Key Considerations

- Expression of Interest

- State Selection Factors

- Key Dates

- Where to go with questions or for more information

How to Apply: Expression of Interest

- Elements
  - General Information
  - HRSP Focus Area
  - IQO Focus Area

State Selection Factors

- Overall Factors
  - Evidence of commitment from State Medicaid program leadership
  - Designation of state Medicaid IAP program lead (point person for state)
  - Designation and commitment of other key staff

- Examples of HRSP-Factors
  - Clear articulation of technical support needs to support housing tenancy and alignment of goals to IAP's goals in this area
  - Evidence of willingness to create a Medicaid-Housing Agency Partnership

- Examples of IQO Factors
  - Articulated state interest in developing an IQO strategy in LTSS and alignment of goals to IAP's goals in this area
  - Evidence of current state activity in designing and implementing an IQO strategy for LTSS (implementation track)

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Key Dates

Event	Date	
	HRSP	**IQO**
Expression of Interest Forms Due (for all opportunities)	December 1, 2015	
CMS conducts 1:1 calls with states that submit Expression of Interest Form	December 2015 – January 2016	
States Selected for Participation	January 2016	
Program support Begins	February 2016 *Supporting Housing Tenancy*	April 2016 *Planning an IQO Strategy*
Program Support Begins	April 2016 *State Medicaid-Housing Agency Partnerships*	September 2016 Implementation of an IQO Strategy

For More Information Visit the Medicaid IAP Home Page

[Medicaid IAP Home Page](#)

Where Can Interested States Go with Questions?

States with questions about this opportunity can email: **MedicaidIAP@cms.hhs.gov**

Include subject line "CI-LTSS"

Watch for SOTA emails from CMS for additional information on IAP

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Questions or Comments?

Thank you for joining today's webinar!