Medicaid Transformation Waiver Update

April 26, 2016



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Today's Presenters

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Senior Health Policy Analyst, Health Care Authority



Topics for Today

- Update on session & CMS conversations
- Value Based Payments
- Initiative 1: Transformation Framework
- Update on waiver Initiatives 2 & 3
- What happens next
- Questions and answers



Where to find more information

http://www.hca.wa.gov/hw/Pages/medicaid_transformation.aspx

Available resources

- Project Toolkit Framework
- Updated FAQ and fact sheets
- Waiver application
- Previous webinar presentations (slides & recordings)
- Updates on workgroup activities

Send questions and comments to: <u>Medicaidtransformation@hca.wa.gov</u>



Updates

- Legislative session and budget recap
 Proviso: Explicit authority for 1115 waiver
- CMS Update
 - Motivated to get to 'yes'.
 - Remains budget-based.
 - High level endorsement of programmatic approach.
 - Identifying sources of non-federal share
 - Designated State Health Programs (DSHP)
 - Intergovernmental Transfers (IGT)



Washington's Medicaid Transformation Goals Achieving the Triple Aim

- Reduce avoidable use of intensive services and settings —such as acute care hospitals, nursing facilities, psychiatric hospitals, traditional Long-Term Services and Supports, and jails.
- Improve population health—focusing on prevention and management of diabetes, cardiovascular disease, pediatric obesity, smoking, mental illness, substance use disorders, and oral health.
- Accelerate the transition to value-based payment using payment methods that take the quality of services and other measures of value into account.
- Ensure that Medicaid per-capita cost growth is below national trends—through projects, activities, and services that improve health outcomes and reduce the rate of growth in the overall cost of care for our Medicaid population.





Initiative 1

Transformation through Accountable Communities of Health

Delivery System Reform

 Each region, through its Accountable Community of Health, will be able to pursue projects that will transform the Medicaid delivery system to serve the whole person and use resources more wisely.

Initiative 2

Enable Older Adults to Stay at Home; Delay or Avoid the Need for More Intensive Care

Benefit: Medicaid Alternative Care (MAC)

- Community based option for Medicaid clients and their families
- Services to support unpaid family caregivers

Benefit: Tailored Supports for Older Adults (TSOA)

- For individuals "at risk" of future Medicaid LTSS not currently meeting Medicaid financial eligibility criteria
- Primarily services to support unpaid family caregivers

Initiative 3

Targeted Foundational Community Supports

Benefit: Supportive Housing

 Individualized, critical services and supports that will assist Medicaid clients to obtain and maintain housing. The housing-related services do *not* include Medicaid payment for room and board.

Benefit: Supported Employment

 Services such as individualized job coaching and training, employer relations, and assistance with job placement.

Transformation Projects

Medicaid Benefits/Services

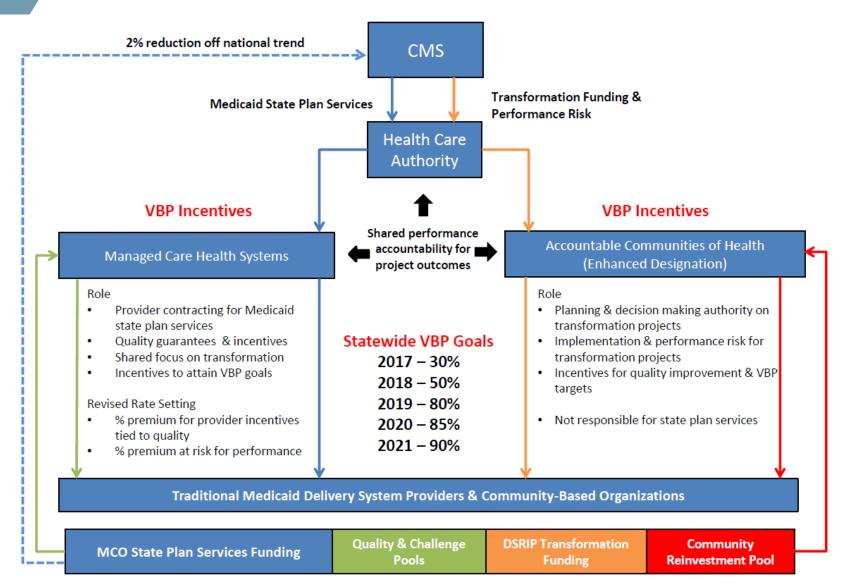
Value-Based Payments (VBP)

The movement toward value-based payment models is critical to the success and sustainability of Medicaid Transformation

- Healthier Washington goal: 80% VBP by 2020
- Medicaid Transformation waiver will incentivize the move towards VBP goals
- We cannot transform the way we deliver services without changing the way we pay for them



Value-Based Payments



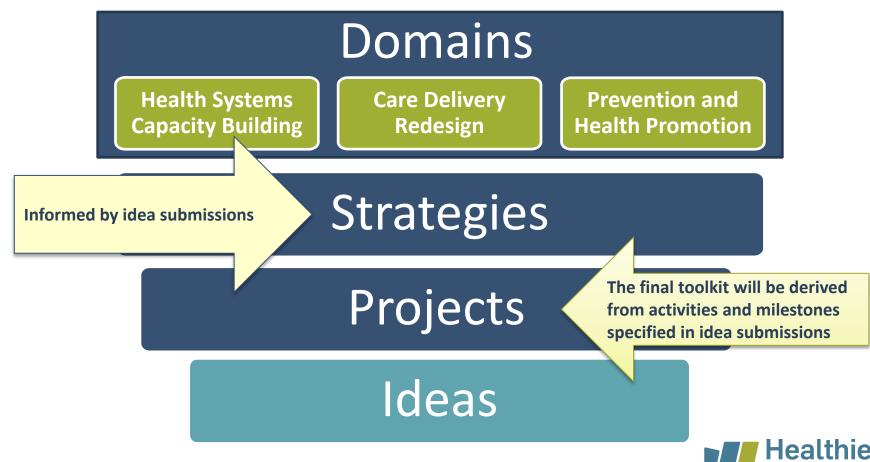
Initiative 1: Transformation through Accountable Communities of Health

Process for Developing Transformation Toolkit

December 2015	Jar	nuary 2016	February 2016	Μ	arch 2016	April 2016	May 2016
Solicit project ideas • Ideas were submitted on the Transformation Project Template		 Independe criteria to r 	mitted project ideas It consultants developed eview project ideas ct toolkit framework				Finalize Transformation Framework
				 Develop Transformation Framework Project toolkit framework will be included in STCs CMS may request additional information about proposed projects 		 STCs published for public comment Guidance for ACH project applications developed after waiver approval 	
			Phase 3	Pł	nase 4		
				12			Health er

Transformation Framework

The framework is a high-level overview of the strategies necessary to achieve the desired outcomes under each domain.



Project Toolkit Elements

- **Project summary**: Includes key **strategies** and activities.
- **Rationale** for the proposed project: Evidence basis and reasoning behind the project.
- **Objectives and outcomes** of the project: The project-specific goals and expected project outcomes.
- **Core components**, or key project elements: These guide development and implementation.
- Metrics required for the project: Participating providers will earn incentive payments based on performance on the project metrics.



Domain 1: Health Systems Capacity Building

Projects and key strategies

- Primary care models
- Workforce and non-conventional service sites
- Data collection and analytic capacity



Domain 2: Care Delivery Redesign

Projects and key strategies

- Bi-directional integration of care
- Care coordination
- Care transitions



Domain 3: Prevention and Health Promotion

Projects and key strategies

- Chronic disease prevention and management
- Maternal and child health



Transformation Toolkit Example

Domain: Care Delivery Redesign

Project title: Bi-Directional Integration of Care

Objectives:

- Address needs of clients not easily engaged in primary care settings
- Improve clients' adherence to treatment regimens
- Reduce avoidable intensive services and settings

Core components:

- Establish behavioral health screenings in primary care settings
- Implement patient-centered behavioral health in primary care

Metrics:

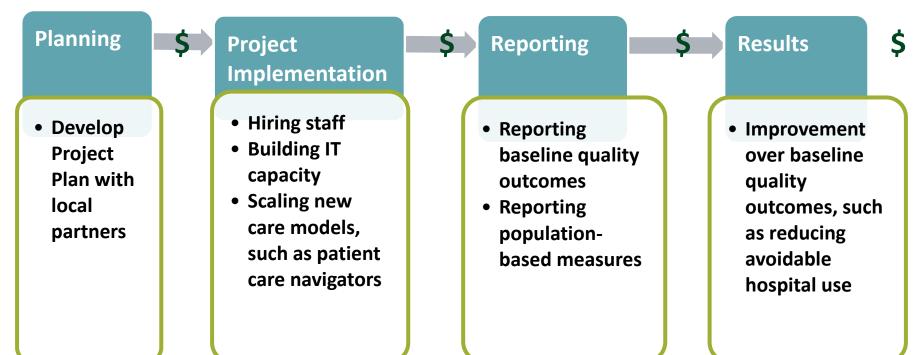
• Consistency with statewide common measures

To be specified in final toolkit



Examples of Incentive Payment Milestones

Types of milestones and system-level improvements hypothetically eligible for incentive-based payments.



Initially, payments focus on more process oriented changes; focus later shifts to more outcome-based measures.



Next Steps

- Project framework survey Respond by 5/27
- Include framework in negotiations with CMS
- State will develop
 - Core Components
 - Project Metrics
- Draft project toolkit for CMS approval



Initiative 2: Service Options that Enable Older Adults to Stay at Home and Delay or Avoid the Need for More Intensive Care

Update on Initiative 2 Long-Term Services and Supports (LTSS)

CMS update

• Continued communication and engaged discussion with CMS

Currently working on operational details

- Meeting internally to identify systems changes necessary to implement.
- Meeting with stakeholders to develop materials.

Find out more at:

http://www.hca.wa.gov/hw/Pages/mt_initiative2.aspx



Estate Recovery

Estate recovery will not apply to the benefits provided under Medicaid Alternative Care (MAC) or Targeted Supports for Older Adults (TSOA).

- Services available to MAC participants are different from state plan or waiver LTSS, therefore Medicaid estate recovery does not apply.
- TSOA participants are individuals who are not currently eligible for Medicaid but are "at risk" of becoming eligible. Therefore, Medicaid estate recovery does not apply.



Application for MAC and TSOA

We are doing extensive work to make the application for these benefits simple and accessible.

Ways an individual will be able to apply:

- On-line through WA Connections
 - We are adding new information for these new benefits.
- Filling out a paper applications (TSOA only).
- Contacting a local Area Agency on Aging (AAA).
- Contact DSHS.





We are working to simplify our processes and create less burdens for clients and caregivers.

- Participants in TSOA will have continuous 12-month eligibility, regardless of whether a service is received every month.
- Participants in both programs will have their financial and functional eligibility for services reviewed every 12 months.



Benefit Specifications

The draft benefit specifications are posted on the Healthier Washington website.

http://www.hca.wa.gov/hw/Pages/mt_initiative2.aspx

- Thank you to everyone who provided feedback during the comment period.
- Additional opportunities to provide feedback will be posted on the website when they are available.



Initiative 3: Targeted Foundational Community Supports

Update on Initiative 3

Supportive Housing & Supported Employment

Key decisions

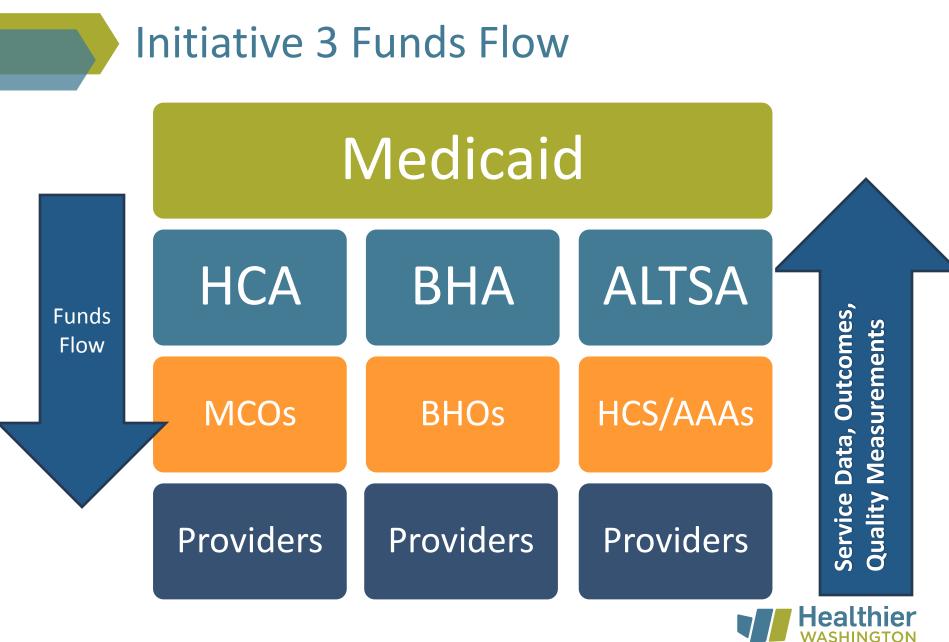
- Supportive housing phasing
- Medical necessity criteria

Other activities

• Community engagement and education efforts

Find out more at: http://www.hca.wa.gov/hw/Pages/mt_initiative3.aspx





Where We Are Today – *Refining critical policy design elements*

Outcome Measures/Indicators	 SB 5732 / HB 1519 measurements: Stable housing in the community Employment rate
Quality Plan (CQI)	Evidence-based practice implementation, training, and fidelity review processes
Administration	 Service encounter definitions Licensing/certification WAC Potential IT modifications
Contracts	Documentation of requirements for eligible populations
Ensuring the most significantly disabled get served	 Referral mechanisms between systems Clarifying differences between other federally funded services



Supportive Housing Proposed Phasing

- 1. Chronically Homeless (HUD Definition)
 - BHO and FIMC
 - Full BHO/MCO benefit
- 2. Frequent/Lengthy Institutional Contact
- 3. Frequent/Lengthy Adult Residential Care Stays
- 4. PRISM Score 1.5+

Why phasing?

- Housing stock
- Delivery system and provider capacity build
- Assessment of demand



Supported Employment – Target Populations

- Aged, Blind, Disabled (ABD)/Housing and Essential Needs (HEN)
- Individuals with severe and persistent mental illness, individuals with multiple episodes of inpatient substance use treatment and/or co-occurring
- Working age youth with behavioral health conditions
- Individuals eligible for long-term care services who have a traumatic brain injury



Supportive Housing & Supported Employment Criteria

Medical Necessity Criteria – for MCO benefit

- Inability to live in an independent or family setting without support
- At risk of serious harm to self or others
- Dysfunction in role performance
- Risk of deterioration

BHO benefit will still use Access to Care Standards. ALTSA benefit will use CARE criteria.



Current Education and Training Efforts

- Webinars and presentations
 - Monthly Division of Behavioral Health and Recovery (DBHR) Technical Assistance presentations for MCOs and ACHs
- Conference workshops
 - Conference to End Homelessness May
 - WA Behavioral Healthcare Conference June
 - Supported Employment Conference August
 - WA Co-Occurring Disorder Conference October
- Pilot Projects Fact sheets available on <u>DBHR website</u>
 - SH: HARPS, PORCH, BRIDGES
 - SE: BEST, TANF SE, Ticket to Work, BRIDGES



Questions?



For more information, contact:

Website: www.hca.wa.gov/hw

Join the Healthier Washington Feedback Network: healthierwa@hca.wa.gov

For questions about Medicaid Transformation: medicaidtransformation@hca.wa.gov

