DEPARTMENT OF HEALTH AND HOSPITALS

Office for Citizens with Developmental Disabilities

Stakeholder Meeting

November 21, 2013

Kathy H. Kliebert
Secretary

Today's Discussion

- Overview of System Transformation Efforts
- How We Define the RFSR
- Recommended Changes to RFSR
- Prioritization of the RFSR
- Overview of Upcoming Topics

Transformational Outcomes

- Serve more people in home and community-based services (HCBS)
- Achieve cost-effectiveness in HCBS
- Reduce institutional reliance
- Provide access to appropriate services based upon need
- Increase use of appropriate natural and community supports

Progress of Key Efforts

- DHH Internal Workgroup Initiation April 24, 2012
- CMS Technical Assistance, Research and Contact with Other States June-October 2012
- Stakeholder Brainstorming Sessions November 2012
- Application and Award for the Balancing Incentive Payment Program (BIP) January-April 2013
- Initiation of BIP Technical Assistance for Transformational Components May 2013
- Alignment of System Transformation areas with BIP, Managed Long-Term Supports and Services (MLTSS) planning June-July 2013
- Stakeholder Engagement in Implementation Planning Began July 2013
- Operationalization of System Transformation Components Year
  - Year 1 Planning & Implementation Work Plan construction/finalization August-November 2013
  - Year 1 Planning & Implementation Work Plan start/end span October 2013-December 2014
  - Year 2 Planning & Implementation Work Plan construction/finalization July-August 2014
- Benchmarking for Transformational Progress by June 2014
- Full implementation End Target (potential alignment with MLTSS implementation) approx. end 2015

Year 1: October 2013-December 2014

- Year 1 Planning & Implementation Work Plan
- 6 programmatic areas of focus
  - Request for Services Registry
  - Lifespan Planning (ISP, Support Coordination)
  - Supports Utilization and Transformed System Design
  - Single Point of Entry/ No Wrong Door
  - Increased Consumer Choice and Control (Providers)
  - Services
- Stakeholder engagement
- Management of transformational change

Handout: Work plan Goals

Stakeholder Involvement

- Stakeholder Advisory Committee
  - Meets monthly
  - Family and consumer advocacy representation

- Large Stakeholder Meetings
  - Scheduled in alignment with proposals and implementation timelines
- A formal marketing plan
- Targeted involvement in workgroup activities

Managed Long Term Supports & Services

- OCDD stakeholders are represented on the MLTSS Advisory Committee
- OCDD is working to ensure System Transformation activities are consistent with direction pursued in MLTSS
- Where applicable, System Transformation utilizes managed care principles
- Alignment of MLTSS RFP discussion with work plan goals and strategies, as well as transformational outcomes

Current RFSR: Is it really a "waiting" list

- People sign up at entry
- May already have a service (but do not know if it meets their needs)
- May not be signed up by self (added by someone else)
- On list for years with no contact from OCDD
- Don't know what people on list are waiting for
- No process to identify when needs change
- About 50% acceptance rate. Why?
- More like a registration list of persons with ID/DD eligibility and potential need
- Multiple waiting lists for waivers

Ideal Changes to the RFSR

- The idea of a registration list of persons with ID/DD eligibility and potential need makes sense.
  - Data set of characteristics and projection of need for policy planning, budget planning, to identify how to best support folks before crisis.
- Do need a list of people really waiting, and this should be the RFSR.
  - This list may have subcategories that support prioritization.

Ideal Changes to the RFSR

GETTING TO THE NEW RFSR WILL REQUIRE SIGNIFICANT PROCESS CHANGES.

Definitions

Validation – administrative processes

- Who gets on RFSR and
- How they stay on the RFSR

Prioritization – For persons on the RFSR, in what order do they access services

Recommended Immediate Changes to RFSR Validation

- Persons should be eligible for OCDD services (via issued Statement of Approval) to be added to the list.
- With the eligibility criteria applied, persons may enter the RFSR from birth to end of life.
- Persons remaining on the RFSR through validation should not have been issued a Statement of Denial.
- Validation should occur annually, per the current OCDD policy.

Recommended RFSR Changes Contd.

- Persons listed in the official state death data set will automatically be removed from the RFSR.
- Improved communication and family/recipient education is needed regarding the validation process and consumer roles/responsibilities.
- Explore additional opportunities for using data sets and resources external to DHH/Medicaid to identify current contact information of persons on the RFSR. (other states showed use of education databases)
- Implement an online portal for service recipients to update their contact information and check RFSR status.

Recommended RFSR Changes Contd.

- Implement administrative processes that transfer updated contact information and status to the RFSR, rather than siloing case information.
- Retain current “unlocatable” processes, including moving persons off of the active list but allowing reinstatement upon request.
- Remove persons from RFSR who are in a designated pool. (e.g. Public supports and services centers and CEA’s)

Prioritization of the RFSR

- OCDD is developing an assessment tool and process to apply to those waiting on the RFSR.
  - We do not know yet whether we will assess the entire RFSR or only a large sample.
  - Assessments are slated to occur April through June 2014.
  - Assessment data will support informed discussion of prioritization strategies for the RFSR.

What follows are initial ideas about important aspects of prioritization:

Prioritization of the RFSR

Prioritization is a **SUCCESS** if:

- Immediate needs are served
- The system is flexible
- A combination of needs are served
- There is equitable distribution
- The system identifies and sustains success on a personal level (futures planning, preventive supports)
- The prioritization method does not just consider the person whose name is on the list. It also considers the support structure.

Prioritization of the RFSR

Prioritization is a **FAILURE** if:

- People wait and never get access to a needed service
- The system is only funding/serving persons with critical needs or in crisis
- The system is not providing for small needs that make a big difference (e.g. relief for caregivers)
- Needs of the support structure/family are not considered
- The system does not support self-determination or aspirational goals

Prioritization of the RFSR

An effectively prioritized system will accurately show who is actively waiting and with what unaddressed need (s)

- In the restructured RFSR, persons' needs may apply across multiple subcategories, providing multiple opportunities to access services based on the prioritization system.

Prioritization of the RFSR

The prioritization methodology should weigh cost effectiveness carefully

- Must serve persons with high need **BUT** not just spend monies on crisis or people with high cost needs.
- Sometimes serving persons with lower cost services can avoid high costs later on.
- Use Money Follows the Person methodologies where possible, allowing cost-neutral access to waiver services for persons served in institutions.
- Address federal requirements for serving in the most integrated setting.

Prioritization of the RFSR

- The prioritization methodology should use an improved crisis prevention and mitigation system based upon a different structure for accessing needed supports.
  1. Consumer Choice and Control –Flat Rate Billing
  2. Lifespan Planning
     - Core ISP
     - Front-End Support Coordination
  3. Improvements to the Eligibility Determination/Redetermination Processes

Next Steps

Thank You For Your Participation

Please Complete the Survey

To Learn more about System Transformation you can:

- Access the OCDD Website: www.dhh.louisiana.gov and then go to the Developmental Disabilities webpage or
- E-Mail your feedback to OCDDSystemTransformation@LA.GOV