

# 1915(c) Home and Community Based Services Waiver Redesign Legislative Oversight and Investigations Committee

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Presenter

Lisa Lee, Commissioner

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## 1915(c) Home and Community Based Services (HCBS) waivers...

... are designed to give individuals with disabilities an alternative to institutionalization.

... should complement available state Medicaid program services, public programs, and family/community supports to meet each individual's needs.

... should allow an individual to live safely in the community. If an individual's needs exceed what can be safely provided in the community, he or she may not be appropriate for waiver services.



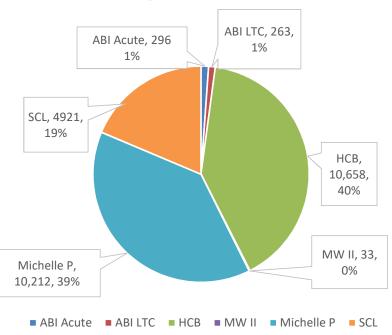
### Kentucky's 1915(c) HCBS Waivers: The Basics

**Acquired Acquired** ABI & ABI LTC: For individuals **Brain Injury** Brain age 18 or older with an **Long Term** Injury (ABI) acquired brain injury Care (ABI LTC) MIIW: For individuals dependent Home and Model II HCB: For individuals age 65 and on a ventilator 12 or more hours a Community Waiver older or individuals of any age day or on an active, physician Based (HCB) (MIIW) with a physical disability monitored weaning program Michelle P. **Supports for** MPW & SCL: For individuals with Waiver intellectual or developmental Community (MPW) disabilities Living (SCL)



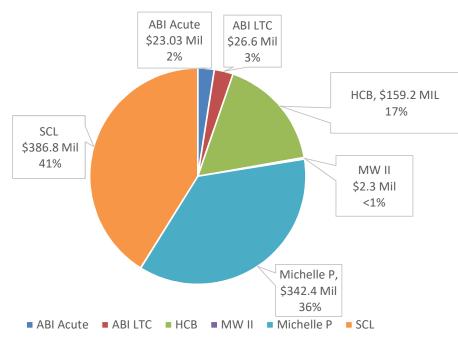
## Kentucky's 1915(c) HCBS Waivers: State Fiscal Year 2019

#### **Population Served**



Total Population Served – 26,383

#### **Total Paid Claims Amount**





# Why Redesign?



## The Wait for 1915(c) HCBS Waiver Services

#### Michelle P. Waiver (MPW) Waitlist Data

#### **Supports for Community Living (SCL) Waitlist Data**

Waitlist Data Points	MPW	Waitlist Data Points	SCL- Urgent	Waitlist Data Points	SCL - Future Planning
Total Number of People	7,441	Total Number of People	121	Total Number of People	2,765
Average Time Elapsed Since Application Processing Date	3 years	Average Time Elapsed Since Waitlist Date	3.64 years	Average Time Elapsed Since Waitlist Date	7.16 years

- In KY, waiting lists for slots on MPW and SCL waivers are lengthy. Multi-year wait times are common.
- Today, MPW is based on a first-come, first-served methodology. SCL is needs-based.
- MPW's earliest application processing dates to 2015. SCL's earliest waitlist date for urgent requests is 2000 and for future planning requests is 1995.
- An average of 78 individuals are added to the MPW waiting list each month. For SCL, an average of 30 are added each month.



# Goals of 1915(c) HCBS Waiver Redesign

Enhance quality of care to participants

Implement consistent definitions across waivers

Universal assessment and individualized budgeting

**Cost containment** 

Diversify and grow provider network

Consistent provider funding

Optimize case management to support person-centered planning and abide by federal conflict free case management regulation



## Update on Waiver Redesign Efforts



## 1915(c) HCBS Waiver Redesign Timeline

#### February 2017

The Department for Medicaid Services (DMS) issued a request for proposals for assessment of 1915(c) HCBS programs

#### August 2018

Final assessment report with recommendations completed







#### **April 2017**

DMS contracted with Navigant and assessment process began



## 1915(c) HCBS Waiver Redesign Activities to Date

Implemented ongoing stakeholder engagement process

Switched service authorizations from third-party to CHFS and case managers

Streamlined incident reporting and moved to an electronic reporting system in the Medicaid Waiver Management Application (MWMA)

Ongoing training for providers, case managers, and internal staff

Expanded MWMA access to all providers

Updated patient liability calculation

Completed a comprehensive rate study with recommendations for new rate methodology



## 1915(c) HCBS Waiver Redesign Activities to Date

Operationalized 1915(c) HCBS waiver help desk

Reviewed and rewrote waiver applications and KARs

Developed resource materials for providers, participants, and internal staff

Planning and implementation of MWMA enhancements

Formalized grievance and appeals process

Moved reconsiderations to an independent third-party (CHFS Office of the Ombudsman)

Introduced updated service definitions, policies, and procedures as able in Home and Community Based and Model II waiver renewals

