



1915(c) Home and Community Based Services (HCBS) Task Force

Amending Kentucky's 1915(c) HCBS Waivers

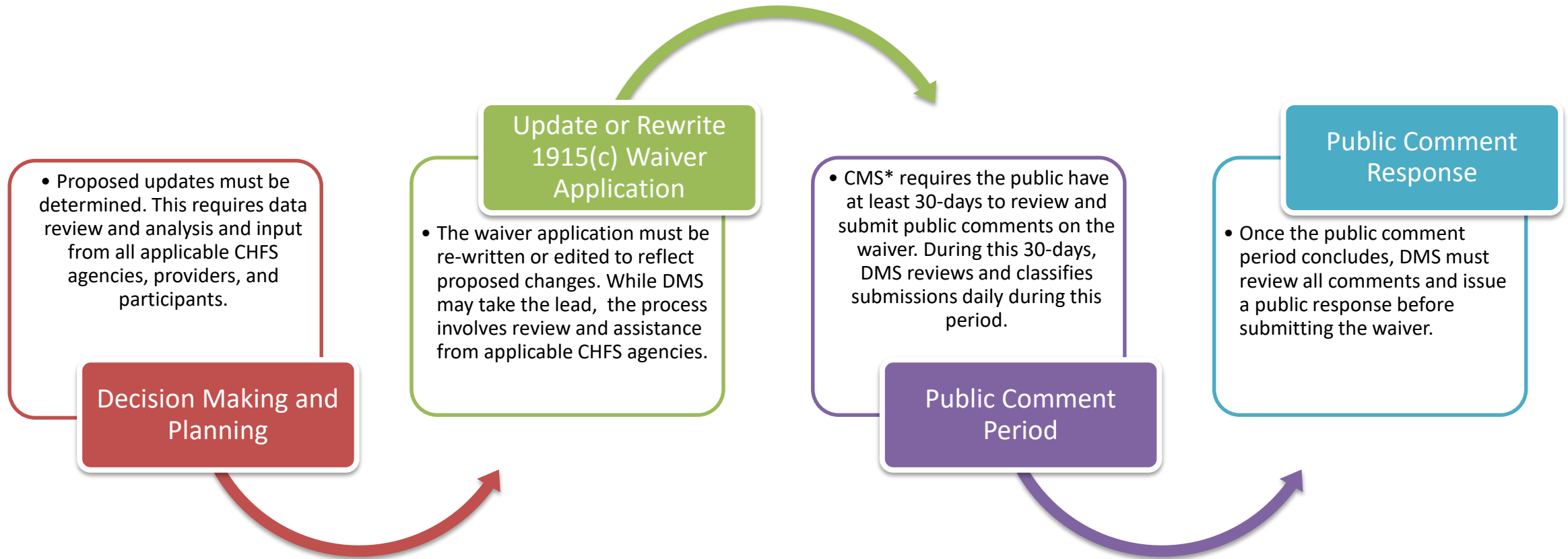
August 23, 2021

Presenter

**Pam Smith, Division Director
Division of Community Alternatives**

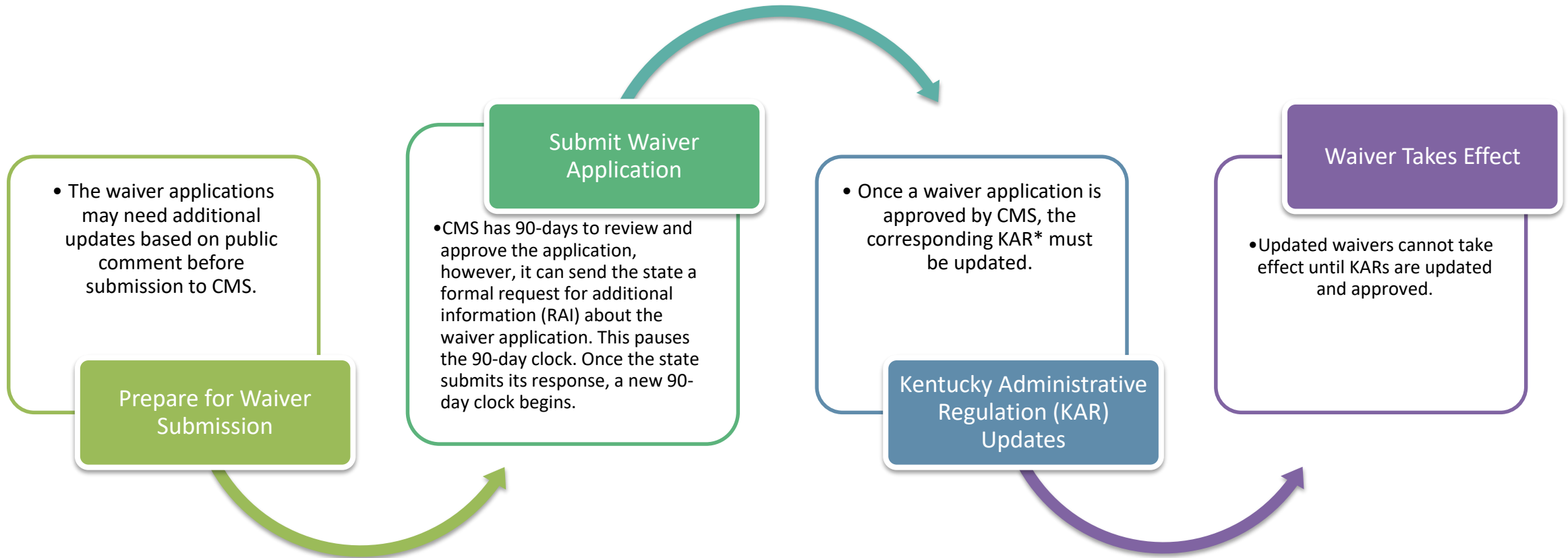


The Process of Updating a 1915(c) HCBS Waiver



*Centers for Medicare and Medicaid Services

The Process of Updating a 1915(c) HCBS Waiver



*Kentucky Administrative Regulation

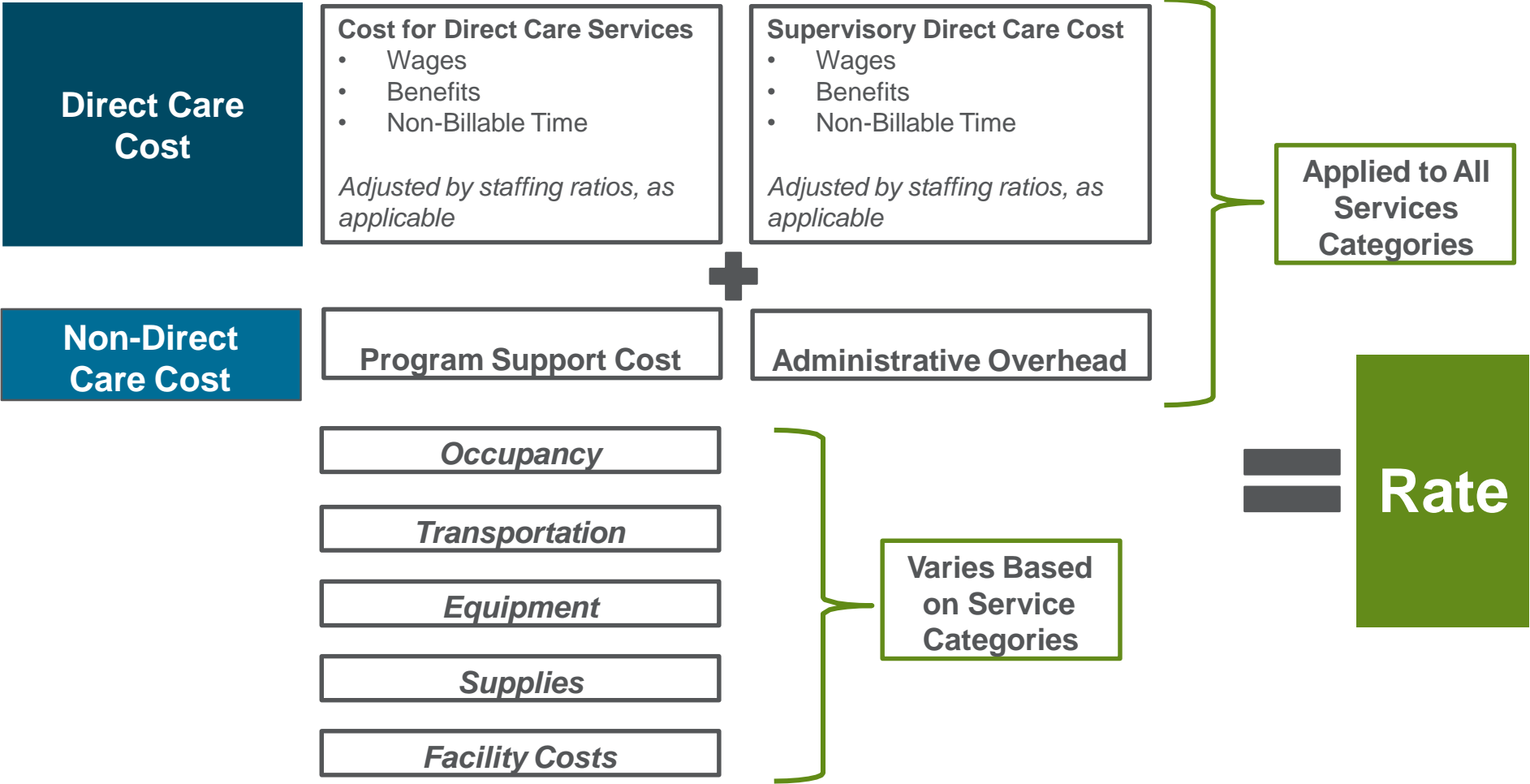
Priority Actions to Improve Kentucky's 1915(c) HCBS

Proposal	Legislative Action Required	Regulatory Changes Required	Waiver Application Changes Required
Update provider reimbursement rates	Funding Public Support	Yes	Yes
New wait list management policies	Public Support	Yes	Yes
Independent and universal assessment	Funding Public Support	Yes	Yes
Strengthen participant directed services design and operations	Public Support	Yes	Yes
Individual budgeting	Funding Public Support	Yes	Yes
Evaluate new waivers or reconfiguration of current waivers	Funding Public Support	Yes	Yes

2018-2019 1915(c) HCBS Waiver Rate Study

- DMS conducted a study of 1915(c) HCBS waiver rates between November 2018 and September 2019.
- The purpose of the study was to identify rates in need of adjustment, make rates consistent for similar services across waivers, and develop a rate-setting methodology for HCBS services.
- The rate methodology and proposed rate adjustments were developed by taking into consideration:
 - Input from a rate study work group comprised of CHFS staff, provider agency and association representatives, participants, and advocates
 - State-specific Bureau of Labor Statistics (BLS) wage data
 - BLS employment benefits data
 - Economic data from the Kentucky Center for Statistics
 - State-specific data from the Medical Expenditure Panel Survey – Insurance Component

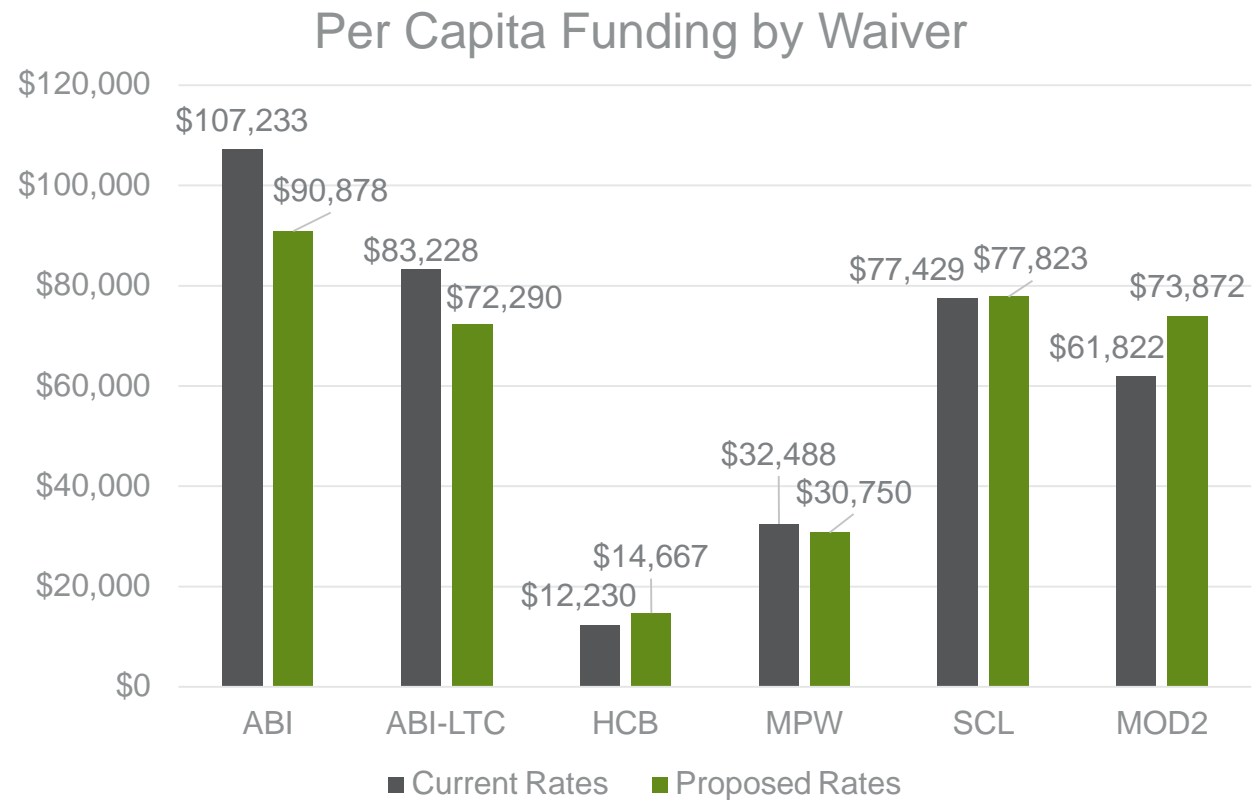
The Rate Methodology Developed



Fiscal Impact: Per Capita Expenditures by Waiver

Although the Acquired Brain Injury (ABI) acute waiver is the most heavily impacted by the proposed rate structure, its' overall per capita funding remains the highest of all waivers.

Waiver	Individuals Served
ABI	222
ABI-LTC	257
HCB	8,799
MPW	9,960
SCL	4,887
MOD2	41
Total	24,096



The Wait for 1915(c) HCBS Waiver Services

Michelle P. Waiver (MPW) Waitlist Data

Waitlist Data Points	MPW
Total Number of People	7,583
Time Elapsed Since Application Processing Date prior to Allocation	6 years

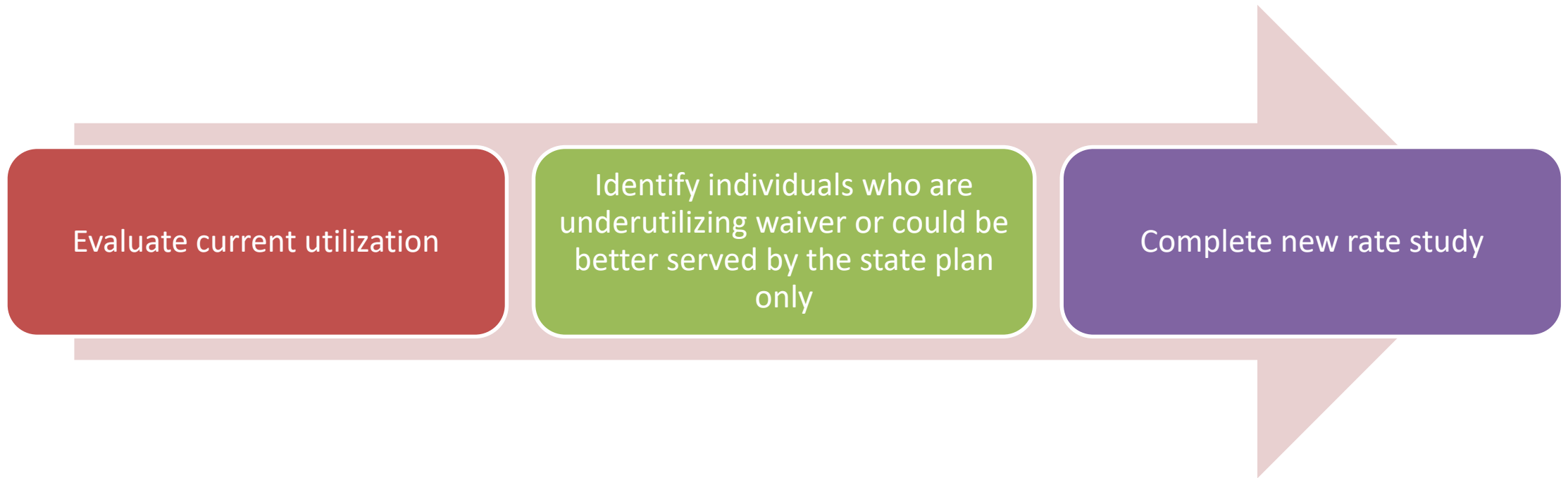
Supports for Community Living (SCL) Waitlist Data

Waitlist Data Points	SCL- Urgent	Waitlist Data Points	SCL - Future Planning
Total Number of People	119	Total Number of People	2,814
Max Time Elapsed Since Waitlist Date	21 years	Max Time Elapsed Since Waitlist Date	26 years

- In Kentucky, waiting lists for slots on MPW and SCL waivers are lengthy. Multi-year wait times are common.
- 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.

Eliminating Wait Lists: The Cost

Calculating the dollar amount it would take to eliminate the wait list is difficult. It's hard to estimate what each individual would need or what their services would cost. There are some practical steps that could be taken to reduce and better manage wait lists.



How Can the General Assembly Help?

Funding

- Additional money is needed to improve HCBS programs for current participants and expand availability to all Kentuckians in need of supports.

Holistic Consideration of HCBS

- Certain populations receiving HCBS have a stronger advocacy network than others; however, all of Kentucky's HCBS programs are in need of updates and improvements.

Public Support for HCBS Updates

- DMS anticipates pushback from stakeholders regarding certain updates and needs support to move those forward. Hot button issues include rate-setting and participant directed services policies.