

Progress Made on HCBS Reform

- SB 74 passed in 2016
 - Requires SDS to make significant changes to HCBS system
 - Sets budget cuts SDS must meet
- Developed a detailed plan for HCBS reform
 - Contracts with HMA and HCBS Strategies
 - Moved Behavioral Health into separate initiative
 - Completed plan that details all of the tasks necessary to implement the changes in February 2017
- Have followed plan with only minor changes
 - CFC & ISW ready for implementation in March 2018



Obtaining Enhanced Federal Funding for Development and Implementation

- CMS provides 90/10 match for developing operations if tied to the Medicaid Management Information System (MMIS)
- CMS approved Implementation Advanced Planning Document (IAPD)
- Prevents SDS from losing additional staff and funds contractual and other support for fulfilling the rest of the plan
- Allowed Trust funds to go much farther



3

Converting PCA/CDPCA to Community First Choice (CFC)

- Allows SDS to obtain 6% enhanced match (56/44 vs. 50/50)
- Only applies for people who are waiver eligible (meet an institutional Level of Care (LOC))
- Status:
 - Draft State Plan Amendment reviewed by CMS
 - Regulations out for public comment
 - Target implementation by March 2018



4

CFC Services

- CFC-PCS - Uses same calculation of hours as PCS, except:
 - Additional service hours if participant only requires supervision and cueing for ADLs/IADLs
 - 2-3 ADLs/IADLs- 3 hours
 - 4+ ADLs/IADLs- 6 hours
 - Additional hours for skills-building
- Emergency Response System



5

Individualized Supports Waiver (ISW) for People on IDD Registry



- New 1915(c) waiver that will provide a capped service package to people on the Registry
- Status:
 - Draft Waiver structure reviewed by CMS
 - Regulations out for public comment
 - Target implementation by March 2018



6

ISW Services

Respite	In-Home Supports for ages < 18	Supported Living for ages > 18
Day Habilitation	Supported Employment (including pre- employment tasks)	Time-limited Therapy Services (Intensive Active Treatment)
	Transportation	Chore



7

ISW Individual Cost Limits

- Care Coordinators will first develop a plan that:
 - Reflects participant's needs, goals, and preferences
 - Uses supports from unpaid sources and other funding source before Medicaid
- Service amount capped at \$17,500 per year
 - Amount is adjusted to reflect regional adjustments in rates
- Can also receive additional \$5,000 in services once every 3 years
 - Must be to address temporary emergency needs

8

ISW Enrollment

- Phasing in enrollment to minimize demands on SDS staff (assessments) and (Care Coordinators – application and Support Plan)
- Drawing 100 people off DDDR per month
 - Began in September
 - Will last until Waiver includes 600 people
 - Starting with people with greatest needs
- Collaborating with STARs and Care Coordinators to make sure people have support in completing process



Progress Made on Changing Assessment and Support Planning Processes

- Made changes to intake & Support Plan implement CFC & ISW
- Developed detailed plan for longer range changes
- Replicating current NFLOC and PCA Hours assignment using interRAI items
 - Collected data for interRAI and current tool (CAT) on 400 participants
 - University of Michigan will present proposed new criteria in March 2018
- Developed overall Workflow
 - Presenting to stakeholders on February 1, 2018

Timeline for the New Intake, Assessment & Support Planning Processes

