

A red-tinted photograph of the Statue of Liberty's head and crown, positioned in the upper right corner of the slide. The background of the slide features a grid pattern of red lines.

Redesign Medicaid in New York State

Balancing Incentive Program

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Balancing Incentive Program

The Balancing Incentive Program (BIP) is a funding opportunity offered under section 10202 of the Patient Protection and Affordable Care Act of 2010 which:

- ❑ Provides enhanced FMAP (+2%) to participating states to rebalance Medicaid Long Term Services and Supports (LTSS) by increasing access and expanding community services as an alternative to institutional care.
- ❑ Requires 3 structural changes:
 - ❑ No Wrong Door/Single Entry Point network
 - ❑ Core Standardized Assessment Instruments
 - ❑ Conflict-Free Case Management

Balancing Incentive Program Overview

- ❑ NYS' BIP application was approved in March 2013, and the State was awarded \$598.7 million.
- ❑ The BIP period is April 1, 2013 – September 30, 2015.
- ❑ BIP will reinforce New York's ongoing efforts to improve access to home and community-based long term care services for those with physical, behavioral health, and/or intellectual and developmental disabilities throughout the State.
- ❑ The State must make progress toward identified targets in the structural requirements and rebalancing goals to maintain additional aid.
- ❑ When BIP ends, the State must show an increase in the community-based LTSS percentage from the baseline percentage by the end of the BIP period.

Balancing Incentive Program Overview

BIP involves:

- ❑ rebalancing the delivery of LTSS towards community-based care;
- ❑ promoting enhanced consumer choice;
- ❑ standardizing information for eligibility determination and enrollment processes;
- ❑ improving access to and expanding community LTSS; and
- ❑ providing essential services in the least restrictive setting.

Balancing Incentive Program Required Structural Change

No Wrong Door/Single Entry Point Network:

- ❑ Delivers consistent information about LTSS options whether an individual seeks information from a 1-800 number, a website, or a local office that is part of the State's NWD/SEP network.
- ❑ Provides individuals with assistance in accessing Medicaid or non-Medicaid services.
- ❑ The State plans to:
 - ❑ expand NY Connects statewide;
 - ❑ add an interactive web-based screening tool to allow individuals to help identify their LTSS needs; and
 - ❑ develop tools and training to ensure consistent information about the LTSS available in communities across New York.

Balancing Incentive Program NWD/SEP Structural Change

Goals:

- ❑ Standardize information so that individuals experience the same eligibility determination.
- ❑ The State has a network of NWD/SEP agencies.
- ❑ NWD/SEPs have access points where individuals can inquire about community LTSS and receive information, community LTSS program options counseling, and enrollment assistance.
- ❑ The NWD/SEP system includes an informative community LTSS web site and a 1-800 number.
- ❑ State advertises the NWD/SEP system to help establish it as the gateway system for LTSS.

Balancing Incentive Program NWD/SEP Structural Change

Current Status:

- ❑ The interagency Work Group meets weekly (DOH, SOFA, OMH, OPWDD, OASAS) on systems design, screening questions.
- ❑ The Work Group is developing the network to expand and enhance the NY Connects structure both functionally and geographically across populations and across the State.
- ❑ Initial overview of the NWD/SEP system is in the final design stages. Stakeholder involvement will be solicited.
- ❑ List of potential NWD/SEPs agencies have been provided to CMS.

Balancing Incentive Program NWD/SEP Structural Change

Next Steps:

- ❑ State will need to promote NWD/SEP as the gateway to information about community-based LTSS.
- ❑ Agencies becoming part of the NY Connects network will need to transform their business model to conform with operational standards.
- ❑ Agencies will have to learn new systems in order to provide general information and be accessible across all populations.
- ❑ Agencies will need to have staff trained on the new system, enhanced functions, and the interpretation of screening results.

Balancing Incentive Program Required Structural Change

Core Standardized Assessment (CSA):

- ❑ Must meet the Core Data Set (CDS) requirements outlined in the BIP guidance.
- ❑ Identifies the support needs and information on service planning and is used across the State and across a given population.
- ❑ Leverages the Uniform Assessment System (UAS-NY).
- ❑ The assessment is completed by a qualified professional.

Balancing Incentive Program CSA/CDS Structural Change

Goals:

- ❑ Develop a Level I screen to indicate eligibility for Medicaid funded community LTSS.
- ❑ Utilize the Level I screen to help identify the options and services available for non-Medicaid funded LTSS.
- ❑ Leverage implementation of NY's Uniform Assessment System (UAS-NY) to expand across populations (Intellectually Disabled (ID)/Developmentally Disabled (DD), Mental Health/Behavioral Health(MH/BH) and fulfill the required domains - topics of CMS's CDS for the Level II assessment.
- ❑ Train qualified professionals and NWD/SEP members to initiate and coordinate the collection of Level II assessments utilizing existing web-based courses.

Balancing Incentive Program CSA/CDS Structural Change

Current Status:

- ❑ The State has submitted to CMS a crosswalk of assessment tools currently in use that includes all required domains and topics within the specified CDS.
- ❑ DOH is currently implementing UAS-NY using the interRAI suite tools for the aged and disabled population.
- ❑ OPWDD is developing a population specific assessment for the I/DD population that utilizes many of the same assessment elements.
- ❑ OMH has selected the interRAI Community Mental Health Assessment for the adult population and CANS-NY for children.

Next Steps:

- ❑ Automation is complex, time consuming and requires IT expertise.
- ❑ Timing of implementation across agencies differs.

Balancing Incentive Program Required Structural Change

Conflict Free Case Management (CFCM) optimally involves:

- ❑ **Separation of case management from direct services provision.** The case manager's responsibility is to develop a plan of supports and services based on the individual's assessed needs.
- ❑ **Separation of clinical eligibility determination and care planning assessment from direct services provision.** Eligibility is determined by an entity or organization that has no fiscal relationship to the individual.

When overlaps do occur, an effective CFCM system mitigates these conflicts through:

- ❑ **Independent evaluation.** A person who is related (through blood or marriage) to the individual or to any paid caregiver of the individual, or who serves as the individual's financial or health representative may not perform evaluations or assessments or develop plans of care for the individual.
- ❑ **Establishment of firewalls and appropriate safeguards.** Monitoring and State oversight assures consumer choice and protects consumer rights.

Balancing Incentive Program CFCM Structural Change

Goals:

- ❑ Identify areas of possible conflict and existing mitigation strategies in case management.
- ❑ Establish protocol to remove/mitigate conflict in community LTSS eligibility determination/enrollment, case management processes, and service delivery.
- ❑ Develop an independent process to assure that person centered plans meet the needs of individuals served in community-based settings.

Balancing Incentive Program CFCM Structural Change

Current Status:

- ❑ The State has submitted to CMS a description of potential conflicts that may exist across programs and agencies as well as strategies currently in place to mitigate risks.

Next Steps:

- ❑ Clarify the scope and duration of the CFCM requirements internally across agencies and programs.
- ❑ Establish a protocol for how NYS will oversee the CFCM structural change.

Balancing Incentive Program Use of Funds

CMS has developed a three-part test to help States assess whether the use of enhanced FMAP meets legislative requirements. If a State can answer “Yes” to all three of the following questions, the proposed use of funds is acceptable.

- ❑ Does the proposal increase offerings of or access to non-institutional LTSS?
- ❑ Does the proposed expansion/enhancement of offerings/access benefit Medicaid recipients?
- ❑ Is the proposal something that Medicaid funds can typically be spent on (i.e. the proposal does not involve a prohibited use of Medicaid funding)?

Balancing Incentive Program Funding Plan

- ❑ **The State's Funding Plan is a fluid tool designed to:**
 - ❑ Change according to identified need,
 - ❑ Encourage providers to serve people within the community, and
 - ❑ Create opportunity for Stakeholder involvement.
- ❑ **\$598.7 million has been allocated to address the following identified gaps in areas of community-based LTSS:**
 - ❑ Insufficient Community Capacity,
 - ❑ Insufficient Financial Incentives for Community Placement,
 - ❑ Insufficient Infrastructure, and
 - ❑ Insufficient Operational Resources.

Balancing Incentive Program Funding Plan

- Appendix E of the BIP work plan details the proposed funding plan. The work plan can be found on the MRT web site at

http://www.health.ny.gov/health_care/medicaid/redesign/docs/nys_bip_master_work_plan.pdf

- The following slides highlight some of the rebalancing expenditures proposed for the BIP funds.

Balancing Incentive Program

Proposed Rebalancing Expenditures

- ❑ Expand availability of community-based residential, support and day service options for populations transitioning from institutional settings (i.e., ID/DD individuals impacted by the closure of OPWDD developmental centers).
- ❑ Establish an ICF peer counseling network.
- ❑ Support costs associated with assistive technologies and/or environmental modification.
- ❑ Increase the number of people offered the option to self direct.

Balancing Incentive Program

Proposed Rebalancing Expenditures

- ❑ Increase OMH capacity for transitions into the community.
- ❑ Transition up to 1,000 individuals in Nursing Homes and Adult Homes to community settings pursuant to Olmstead.
- ❑ Enhance Community Support-Personalized Recovery Oriented Services.
- ❑ Create 24/7 direct Crisis Stabilization Teams for the Mental Health population transitioning to supportive housing.
- ❑ Expand OMH Home and Community-Based Waiver children's slots.

Balancing Incentive Program Proposed Rebalancing Expenditures

- ❑ Increase caregiver support services.
- ❑ Engage and train discharge planners in expanding community services and supports.
- ❑ Enhance reimbursement for residential and day services to support campus and non-campus based transitions.
- ❑ Enhance reimbursements for supported employment programs.
- ❑ Increase statewide capacity to offer evidence based programs to Medicaid adult population.

Balancing Incentive Program Proposed Rebalancing Expenditures

- ❑ Implement NWD/SEP network.
- ❑ Expand NY Connects geographically and functionally.
- ❑ Implement Core Standardized Assessments.
- ❑ Improve Conflict Free Case Management.
- ❑ Improve quality of service delivery.
- ❑ Develop IT infrastructure.
- ❑ Enhance service planning and case management systems.

Balancing Incentive Program Proposed Rebalancing Expenditures

- ❑ As part of the Funding Plan, the State released an Innovation Fund RFA on March 21, 2014, to engage New York's broad network of providers, advocates, and community leaders in developing systemic improvements that address barriers to providing community-based LTSS across all populations and ages of Medicaid beneficiaries.
- ❑ Up to **\$45 million** in Innovation Fund grants will be awarded on a competitive basis.
- ❑ The establishment of the BIP Innovation Fund is intended to support programs offering service solutions that increase the ratio of expenditures on community-based care versus institutional care and foster community inclusion.
- ❑ All Innovation Fund proposals are due by 5:00 p.m. on **May 7, 2014**.

Balancing Incentive Program Data Collection and Reporting

Three Types of Data Are Required:

1. **Service Data** – State must report the percent of funds spent on community-based LTSS from claims and other data sources.
2. **Quality Data** – State must report its collection and dissemination of quality data and outcome measures.
3. **Outcome Measures** – State must evaluate beneficiary and caregiver satisfaction.

Balancing Incentive Program Data Collecting and Reporting

CMS Requirements:

- ❑ States must report service, outcome and quality measure data to CMS.

Current Status:

- ❑ An Interagency Work Group is creating a catalog of quality tools and surveys.
- ❑ A Data Collection Protocol has been identified for semi-annual reporting to CMS.

Balancing Incentive Program Sustainability Requirement

Goals:

- ❑ Develop clear estimates of the cost to maintain structural changes implemented through BIP funding sources.

Current Status:

- ❑ All funding sources to implement BIP structural changes have been identified.
- ❑ The utilization of the enhanced funding has been detailed in the BIP funding plan.

Next Steps:

- ❑ The development of a comprehensive sustainability plan to maintain the implemented structural changes.

QUESTIONS?

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