

Update: MOU Arkansas Long Term-Services & Supports Reform



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Objectives

1. Smart Rebalancing
2. Assessment Process
3. Tiered Levels of Care Determinations
4. Quality, Outcomes and Efficiency
5. Value-Based Payment
6. Care Management, Coordination & Transitions
7. Service Capacity
8. Program Integrity
9. Fiscal Sustainability
10. Workforce Development

Overview

- Signed May 20, 2016
- 5-year period
- Produce \$250 million aggregate savings through improved, high quality, person-centered LTSS care delivery
- Sellers Dorsey retained to assist in development

Long Term Services and Supports (LTSS) Covered Services for Aging Population

- Nursing Facilities
- Living Choices Assisted Living Waiver
- ARChoices Waiver
- Independent Choices State Plan
- Personal Care

Current Work

1. Finalizing personal care reform options for DHS consideration:
 - ✓ Emphasis on program integrity, avoiding duplication, and increasing effectiveness/efficiency
 - ✓ Reforms that may be made through rule changes, State Plan Amendment, and IT changes

2. Designing improved, high quality, person-centered LTSS care delivery:
 - ✓ Comprehensive, integrated, independent assessment and care planning process
 - ✓ Tiered Level of Care
 - ✓ Comprehensive care management, care coordination, and care transitions
 - ✓ Federal shared savings, repurposing federal savings to improve capacity/workforce
 - ✓ Reforms would be made through federal s. 1115 waiver

MOU Activity – Nursing Facilities

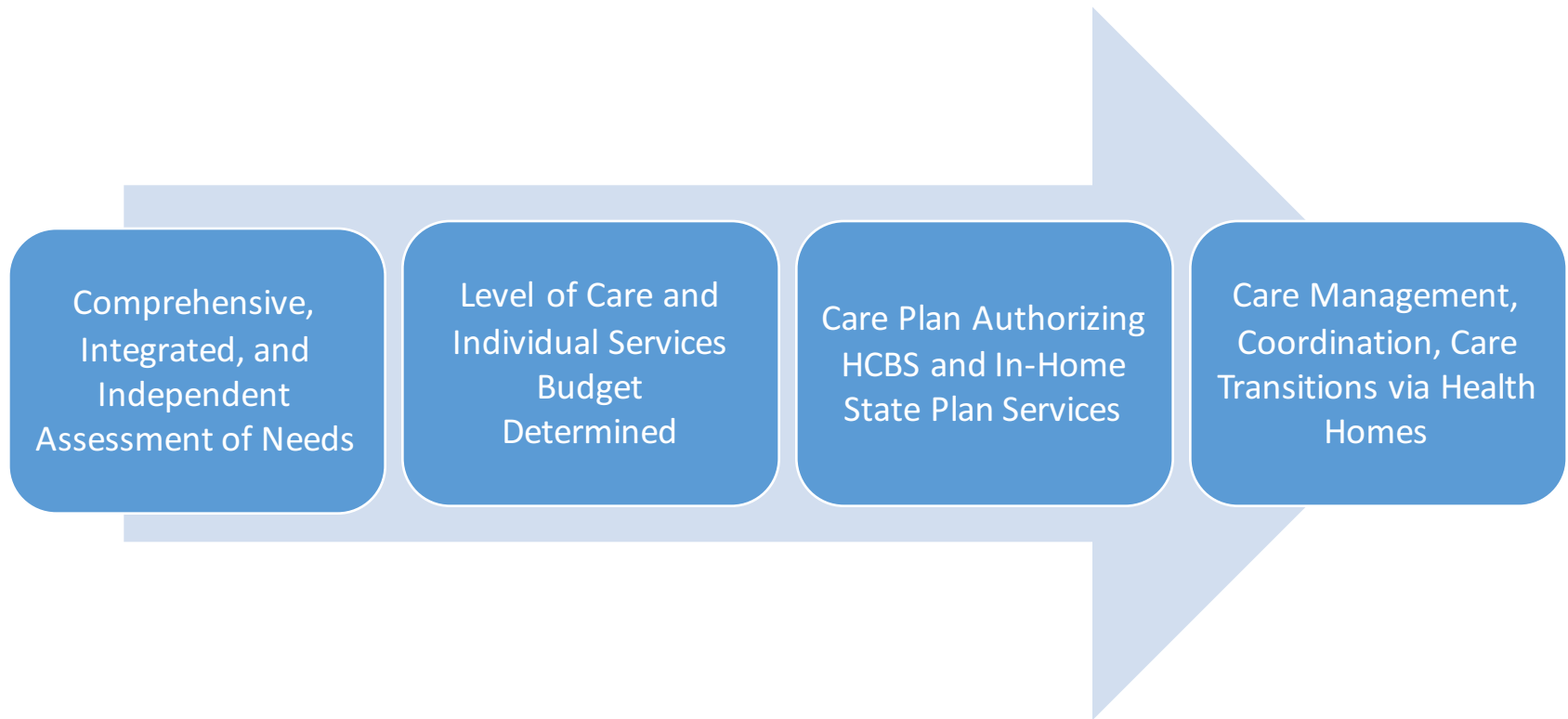
- Changes to Provisional Rate – *Public comment period complete, pending legislative review*
 - *\$7M savings per year*
- Cap on Liability Insurance Premium – *Public comment period complete, pending legislative review*
 - *\$2.3M savings per year*
- Changes to Population Based Beds Methodology – *Approved by HSPA Commission – Out for 30 day comment period*
 - *\$2.4M savings per year*

MOU Activity – HCBS

- *ARChoices Waiver- Renewed January 1, 2016, includes independent assessment, allocation of hours and services based on need*
- *Assisted Living Waiver Renewal – Rates flat for 5 years, 5% increase removed, slots increased from 1,000 to 1,200. Completed*
- *Independent Assessment – DHS released RFP for contractor to perform independent assessments*

New Model for LTSS Care Delivery

Four Primary Steps in Waiver-Based Reforms Under Development



Levels of Care

Tiered Levels Based on Assessed Needs

Level of Care	Type of Needs	Covered Services
1. Highest Needs	<ul style="list-style-type: none">• Significant assistance or total dependence in ADLs• Cognitive or behavioral risks• Unstable, chronic, or recurring conditions• Skilled nursing assessment, monitoring, and care needed (24-hours)• Exceptional, emergency health and safety reasons	<p>Nursing facility services</p> <p>HCBS services if determined safe and within individual services budget</p>
2. High Need	<ul style="list-style-type: none">• Significant needs but below Level 1 criteria• Needs may be met through HCBS services or combination of HCBS and State Plan services (e.g., personal care)	<p>Combination of State Plan in-home services and HCBS, within individual services budget</p> <p>Nursing facility if by choice</p>
3. Moderate Need	<ul style="list-style-type: none">• LTSS needs may be met through approved State Plan services and possibly limited HCBS (e.g., limited home modifications, monitoring tech, and respite)• Emphasis on cost-effective prevention of Level 1-2	<p>State Plan in-home services</p> <p>Limited HCBS if cost effective</p>

Summary

- Several LTSS policy reforms underway through rule and state plan changes.
- Next steps:
 - ✓ Personal care reform options for DHS consideration. Based on DHS direction, necessary rule and state plan changes and public comment process in early 2017.
 - ✓ LTSS care delivery reform model for DHS consideration. Followed by stakeholder and legislator briefings, concept paper, and public comment on waiver application.

Long Term Care Savings & Reform Timeline*



* Timeline subject to change based on federal negotiations, legislative process and stakeholder input.

