

State of Idaho: Money Follows the Person Rebalancing Demonstration Idaho Home Choice

Project Abstract

The state of Idaho proposes to continue rebalancing its long-term services and support system so individuals have more choices in determining where they live and the services they receive. Idaho plans to use the current 1915c waivers and self-direction services to help individuals living in institutions to live in the place of their choice. The goal of the Money Follows the Person (MFP) demonstration in Idaho is to encourage rebalancing by improving the transition process from an institution to community living through increasing outreach and decreasing barriers to transition.

Idaho Home Choice will transition 265 qualified participants who currently are in institutions to Home and Community Based Services (HCBS). The Idaho Home Choice Project will also increase state Medicaid expenditures for HCBS during each year of the demonstration program as well as show a percentage increase in HCBS versus institutional long-term care expenditures under Medicaid. Through the demonstration piece of the Home Choice Project, Idaho will use transition managers to ensure that individuals and their families have access to the resources, information, and paid and informal supports they need to live successful lives and be included in their communities. The Idaho Home Choice Project will also develop additional outreach materials targeting potential participants. Lastly, the Home Choice Project will collect and report on the number of Medicaid providers serving HCBS participants who have achieved meaningful use of electronic health records.

Idaho will use grant funds for enhanced match to provide home and community-based services to more individuals, improve outreach efforts, and invest more funds in transition processes. The Idaho Home Choice Project will be accomplished through partnerships with multiple stakeholders that include individuals with disabilities and their families, state agencies, community providers, consumer advocacy groups, and others. The Idaho Department of Health and Welfare, Division of Medicaid, will have overall responsibility for administering this project.

The total proposed budget for this project is \$8,379,192. Idaho will request 2,264,682 in administrative expenses and \$6,114,510 for home and community-based services eligible for the enhanced Federal Medicaid Assistance Percentages match in calendar years 2011 through 2016.

Operational Protocol Elements

The goals of the Idaho Home Choice Demonstration Project will achieve the following:

- Increase the use of home and community-based services in relation to institutional, long-term care services.
- Eliminate barriers that would prevent individuals to receive support for long term-care services in the settings of their choice.
- Increase the ability of the Medicaid program to ensure the continued provision of home and community-based long-term care services.
- Expand on the procedures already in place to provide quality assurance and continuous quality improvement in Medicaid home and community-based long-term care services.

Benchmarks

The following are the five benchmarks that will be measured for the Idaho Home Choice - Money Follows the Person Demonstration.

Benchmark #1: Successfully transition the projected number of eligible individuals in each target group from an inpatient facility to a qualified residence during each calendar year of the demonstration. (Proposed revision)

For calendar year 2009, 3,653 elderly and 1,176 physically disabled Medicaid participants resided in skilled nursing facilities. For this data, elderly is defined as individual over the age of 65 while physically disabled is defined 64 and under. Three hundred seven (307) Medicaid participants resided in ICF/MRs in calendar year 2009. Based on this data, the following table represents the projected number of eligible individuals in each target group to be assisted in transitioning from a qualified institutional setting to a qualified residence during each year of the demonstration beginning April 1, 2011.

Calendar Year	Elderly	Individuals with MR/DD	Physically Disabled	Total
2011	8	2	5	15
2012	30	5	18	53
2013	35	5	25	65
2014	45	5	30	80
2015	45	7	30	82
2016	20	7	10	37
TOTAL	183	31	118	332

Benchmark #2: Increase State Medicaid Expenditures for HCBS during each calendar year of the demonstration program.

Projected qualified expenditures are shown in the table below. These figures are based on historical waiver costs. The HCBS (A & D and DD waivers) amounts were based on the 2009 state fiscal year Medicaid expenditure data and were trended forward by 2 Percent Year 1 and 8 percent years 2 through 5 of the demonstration. Year one will not begin until the Operational Protocol is approved.

Year	2011	2012	2013	2014	2015
HCBS Qualified Expenditures	\$173,681,787	\$187,576,330	\$202,582,436	\$218,789,031	\$236,292,154

Benchmark #3: Demonstrate a percentage increase in HCBS versus institutional long-term care expenditures under Medicaid for each calendar year of the demonstration.

Idaho intends to increase HCBS expenditures versus institutional care. The annual benchmarks are expressed as the percentage of all long-term care-funding going to home and community-based long-term care. The rebalancing benchmarks are based on projected expenditures for home and community-based services described in the spending benchmark above. The institutional amount includes qualified institutional settings paid by Medicaid.

Percentage Increase in HCBS vs. LTC	2011	2012	2013	2014	2015-2016
SFY2009 Baseline is 42%	2%	8%	8%	8%	8%

Benchmark #4: Demonstrate an increase in the utilization of transition managers used to assist Medicaid participants to find appropriate services and supports in the community for each calendar year of the demonstration.

The Idaho Home Choice Project will use transition managers to help Medicaid participants make the move from institutionalized care to home and community-based services. Idaho believes adding this will make a remarkable difference in successfully transitioning and sustaining participants in the community.

Percentage Increase in Utilization of Transition Managers	2011 Baseline	2012	2013	2014	2015-2016
	80%	80%	80%	80%	80%

Benchmark #5: Demonstrate an increase in the use of “one-time” transition services. (Proposed revision)

One-time transition services will be offered to all Idaho Home Choice Participants. These services will be available 60 days before transition and up to 60 days after transition occurs.

Percentage Increase in Utilization of Transition Services	2011 Baseline	2012	2013	2014	2015-2016
	80%	80%	100%	80%	80%

Qualified Institutional Settings

Qualified institutional settings include skilled nursing facilities intermediate care facilities for the mentally retarded (ICF/MR) and institutions for mental diseases. A level of care assessment will be conducted and a service plan will be developed specific to the needs of each individual following the requirements of the waiver program for which they are eligible.

Residency Requirements

Idaho Home Choice participants will meet the minimum residency requirement of 90 days excluding any rehabilitative services funded through Medicare.

Enrollment

Individuals who wish to participate in Idaho Home Choice or, if appropriate, the individual’s legal guardian or representative, will be required to sign an Informed Consent indicating that they have freely chosen to participate, are aware of and understand the transition process, have full knowledge of the supports and services provided, and have been informed of their rights and responsibilities as participants. Participants and their family/guardian are informed about the state’s protections from abuse, neglect, and exploitation and the process for reporting critical incidents.

Re-enrollment Policy

Idaho Home Choice participants who are re-institutionalized for more than 30 consecutive days will be categorized as no longer enrolled in the program. An individual may re-enroll in the program without re-establishing the 90 consecutive day institutional residency requirement as long as their stay has not exceeded 90 days. If the former participant remains in the qualified institutional setting beyond 90 consecutive days, the participant will be defined as a “new” participant in terms of Idaho Home Choice services and the Federal Medicaid Assistance Percentage.

Once the individual is assessed to be appropriate for home and community-based services, a referral will be made to the transition manager for development of the individualized service plan of care that addresses any change in the status of the Idaho Home Choice participant and/or any lack of necessary supports in the community. After three incidences of re-institutionalization of 30 consecutive days or longer, the re-institutionalized Idaho Home Choice participant will not be considered for re-entry into the project.

Outreach/Marketing/Education Participants

Participants in the Idaho Home Choice Program are those who have expressed an interest in transitioning to providers, qualified institutional setting staff, Medicaid staff, or others involved in their care, and who wish to live and receive supports and services in the community of their choosing. Information is disseminated to participants in several stages: pre-transition, post-transition, and ongoing. During the pre-transition stage, a

transition manager will contact those who express interest in transitioning. During the transition and on a periodic basis, participants will be notified of additional services and supports in the community. Participants, potential participants, and/or guardians will be kept informed about services that are available through the Idaho Home Choice Program.

Providers

Providers in the Idaho Home Choice Program are those public, private, and community organizations that will provide services and supports to the participants so they are able to successfully transition to, and remain in, the community. A mass mailing will be designed for providers to make them aware of Idaho's Home Choice Program and the opportunities for involvement.

Stakeholders

Stakeholder involvement is acquired through various committees and workgroups. Idaho Home Choice is overseen and administered by the Department of Health and Welfare, Division of Medicaid. Leadership from the Department of Health and Welfare is represented on the Idaho Home Choice Governance Committee. This Committee will set policy and resolve issues. The Idaho Home Choice Advisory Council will be formed to aid in the development, structure, and implementation of benefits and service deliveries of Program. This group will meet three to six times per year. Additionally, there will be stakeholder workgroups addressing areas of the demonstration such as outreach, marketing, education, housing; participant recruitment and enrollment; benefits, services, consumer supports, self direction, informed consent and guardianship; and quality assurance and continuity of care. Each group will be comprised of IDHW staff, consumers and their families, providers, community advocates and others.

Consumer Involvement

Consumers, families of consumers, providers, and advocates will be asked to participate in workgroups. (See above) Members are defined as consumers and/or family members of consumers who receive Medicaid long-term-care services; agencies or providers; or representatives of people who are aging with care needs, have an intellectual or other developmental disability, have a physical disability, or have a mental illness.

Provider Involvement

Institutional providers, consumers, advocates, and State staff will be invited to participate in workgroups.

Roles and Responsibilities

During the implementation phase of the demonstration project, stakeholders at all levels will be responsible for providing input to the workgroup focus areas and workgroups will meet as needed.

Operational Activities

Each year, the Division of Medicaid will coordinate state forums to be held in conjunction with the Stakeholder Advisory Council meetings. These meetings will be held via video conferencing throughout the state. These forums will be open to the public and efforts will be made to invite a wide range of potential participants, their families, friends and guardians, providers, state staff, and other important community stakeholders. These groups will continue to provide input into the implementation of the demonstration project through face-to-face meetings, emails, and conference calls and additional video conferencing opportunities.

Benefits and Services

The Idaho Home Choice Program will be used to transition individuals into existing 1915(c) home and community based waiver programs. Idaho Home Choice participants will be enrolled in waiver services the first day they transition into a community setting. After 365 days of demonstration services, individuals will continue in the same 1915(c) waiver program as long as they meet the eligibility requirements of the program. Idaho currently operates one 1915(c) Aged and Disability waiver that targets individuals who are aging and/or have disabilities as an alternative to residing in a nursing facility and also operates a 1915(c) Developmental Disability waiver that targets individuals with intellectual or developmental disabilities as an

alternative to residing in a public or private Intermediate Care Facility-Mental Retardation. Upon referral, eligibility is determined, a program assessment is performed, and a service plan is developed. The 2-1-1 Idaho CareLine, and Aging and Disability Resource Centers can link consumers to lead agencies. The chart below describes the services currently covered under existing waiver programs.

Current Covered Services

Service	1915 (C) Aged And Disabled Waiver	1915 (c) Developmental Disability Waiver	State Plan
Adult Day Care	Yes	Yes	No
Adult Residential Care	Yes	No	Yes
Attendant Care	Yes	No	No
Behavior Consultation/Crisis Management	Yes	Yes	No
Chore Service	Yes	Yes	No
Companion Services	Yes	No	No
Consultation	Yes	No	No
Day Habilitation	Yes	No	Yes (DT)
Environmental Accessibility Adaptations	Yes	Yes	No
Home Delivered Meals	Yes	Yes	No
Home Health Services	Yes	Yes	Yes
Homemaker	Yes	No	No
Non Medical Transportation	Yes	Yes	No
Personal Emergency Response System	Yes	Yes	No
Psychiatric Consultation	Yes	No	Yes
Residential Habilitation	Yes	Yes	No
Respite	Yes	Yes	No
Service Coordination	No	No	Yes
Skilled Nursing	Yes	Yes	Yes
Specialized Medical Equipment and Supplies	Yes	Yes	No (DME Only)
Support Broker Services – Self-Direction	Yes	Yes	No
Supported Employment	Yes	Yes	No

Home and Community Based Demonstration Services

Demonstration services are provided and reimbursed with demonstration funds when not covered under current waiver services and benefits. Idaho will evaluate the services and determine whether to continue the services after the Money Follows the Person demonstration period for waiver participants ends.

Transition Management

Transition Management assists individuals in gaining access to needed medical, social, education, and other services for persons moving from a Medicaid funded institution to a qualified community residence. Idaho Home Choice participants may receive up to 8 hours of transition management services per month for up to sixty days prior to transitioning into the community and for up to sixty days after the transition.

Community Transition Services

Community Transition Services are goods, services, and supports that are provided to the Idaho Home Choice participant for addressing identified needs, including maintaining the participant's opportunities for membership in the community. Transition services are furnished only to the extent that the person is unable to meet such expense or when the support cannot be obtained from other sources. Transition services do not include monthly rental or mortgage expenses; regular utility charges; and/or household appliance or diversion/recreational items such as televisions, VCRs, and DVDs. The monetary limit for transition services is \$1,500 per participant. Transition services are only available once in the lifetime of waiver enrollment, must be accessed within 90 days of the first day of transition and cannot be accessed for any subsequent moves. Funds should be used to meet needs that are barriers to transition. Funds cannot be used to pay existing bills, past due balances, rent or groceries.

Transition at Termination

The 1915(c) waivers and the Medicaid State Plan Services will continue to provide services at the termination of Idaho Home Choice. Program participants will be assisted to access other community-based services for which they may qualify. At the end of demonstration services, waiver services and benefits for which an individual qualifies will support continued community and home based living. This will result in no loss of services and supports to individuals who transitioned under demonstration services.

Housing

Information on the type of qualified residence that an individual chooses is verified at the time the participant is enrolled in a 1915(c) waiver. Idaho will only enroll an individual to a setting that meets the definition of a "qualified residence" as defined in Section 6071(b) (6) of the Deficit Reduction Act. For individuals transitioning from a qualified institutional setting and accessing the A & D Waiver, the residences must be (1) A home owned or leased by the participant or a family member or (2) An apartment with an individual lease, with lockable access and egress, and which includes living, sleeping, bathing and cooking areas over which the participants or their family has domain and control or (3) An Adult foster care home.

For individuals transitioning from a qualified institutional setting and accessing the DD Waiver, the residences must be (1) A home owned or leased by the participant or a family member or (2) An apartment with an individual lease, with lockable access and egress, and which includes living, sleeping, bathing and cooking areas over which the participants or their family has domain and control or (3) A Certified Family Home/Supported Living residence.