

Manhattan Family Support Services Advisory Council Presentation

June 5, 2013

Where are we and Where are we Going?

- Budget Status
- CQL-Council on Quality Leadership
- Front Door—It's Open!
- Managed Care

Budget Status

- - \$40 Million from a combination of OMIG audits and self-disclosure payments received in the 13-14 state fiscal year. Remember that 40 million is state share so the total anticipated recoveries is 80 million. These savings has no impact on rates.
- \$32 Million from savings derived from movement of consumers from higher cost residential programs to lower cost including state institutions and out of state placements. Cost savings from avoiding "institutional" placements will also count. These savings might be characterized as "cost avoidance." Again, this "cut" has no impact on rates.
- \$6.6 Million savings achieved from moving 2,500 additional consumers on to Medicare and thereby reducing Medicaid spending for medical services DOH side. Again, this "cut" has no impact on rates.

Budget Status

- - \$6 Million from reducing payments for room and supplemental payments (currently \$55 million per year) starting 10/1/13 based on surplus position across all OPWDD Medicaid programs. Currently, 164 agencies receive this payment and the 11% cut will be allocated to high surplus agencies (with adjustments for 2011 rate cuts). OPWDD will work with Provider Associations on exact methodology for allocating the cut.
- \$2.6 Million savings (\$5.2 million state and federal combined) from reducing the administrative portion of rates for ICF, day hab and res hab programs. To be implemented 10/1/13 together with rate rationalization. OPWDD estimates that is only a 1-2% reduction in the admin portion of rates.
- \$3 Million savings from transitioning individuals from sheltered workshops to integrated community employment. This is about an 8% reduction in funding for sheltered workshops effective 10/1/13.

Budget Status

- If the savings are not achieved as outlined, the possibility exists that the budget discussion will be reopened.
- Rate Rationalization process continues-this will impact the rates for Residential Habilitation, Group Day Hab and ICF's. Rates for these services will move toward the average-not necessarily taking into account the individualized needs of the people supported.

What is CQL?

The Council on Quality and Leadership, formerly the accreditation council, has performed a national leadership role in the development of standards to meaningfully support human services organizations in providing person centered supports with a focus on what matters to the individual supported for more than 40 years.

In the early 1990s CQL expanded beyond initially defining quality in terms of compliance with standards to creating a metric through their personal outcome measures that focuses on both what the person really sees as adding quality to their life and the responsiveness of the organization.

How does it Work?

- Personal outcome measures and the personal outcome interviews
- Basic assurances
- Accreditation

Organizations can select which and how many aspects to embrace and any time.

CQL has maintained a database of national and international results from personal outcome interviews since 1993. The personal outcome measurement tool has proven validity, while the interview results have reliability. CQL continues to use the results when the tool requires adaptation.

Personal Outcome Measures, (POMS)

CQL train staff how to complete personal outcome measures interviews. In addition they educate on how to use their results metric to assess status and improvements over time.

A smaller group of staff can be trained in how to be train the trainers for POM interviews.

Personal Outcome Measure Interviews are designed to explore three main areas of life.

1. My Self- my unique heredity, life experience and choices.
2. My World- where I live, work , socialize, belong and connect.
3. My Dreams – how I want my life (self and world) to be.

Interviews consist of questions covering 21 topics which are distributed across the three life areas outlined above.

The interviewer guides the interview to a point where the interviewee provides definite input on their level of satisfaction with the 21 topics discussed.

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The Front Door

- What is it?

The Front Door Initiative is OPWDD's new way to centralize entry and access to services for individuals with DD. It is part of the transition into managed care and is closely tied to service transformation agreement made with CMS. The Front Door is OPEN!!

Goals of the Front Door

- 1. Ensure Consistency and equity of services offered to individuals and families
- 2. Promote Self Direction/Self Determination
- 3. Promote Employment as a service option.
- 4. Build on the philosophy of Person Centered Planning to ensure that individuals and families are given a true informed choice of the full array of service options.

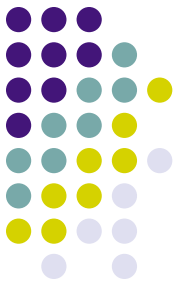
The Front Door Process

- Initial Contact
- Eligibility Determination
- Assessment
- Identification of Service Needs/Plan Development
- Service Authorization
- Service Implementation

IMPACT

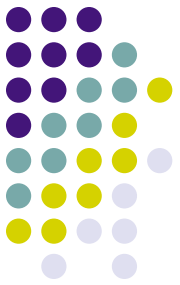
- OPWDD is currently requesting that individuals transitioning out of school and requesting Adult Day services be referred to the DDRO's to participate in this initiative.
- *ALL Individuals* requesting any new service are obligated to go to the Front Door

Managed Care: A New DD Demonstration



Why does NYS need to move to managed care?

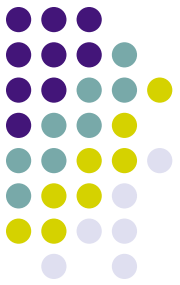
- State Operated billing/quality issues
- State fiscal situation
 - * State revenues/Priorities
 - * Workload
- MRT/Mandatory Managed Care Enrollment (1/2014)
- National Economy/Medicaid Direction



Managed Care:

What will the new Waiver/Demonstration do?

- Managed Care approach for Long Term Care and Medical services
- Capitated Payments vs. fee-for-service
- Flexibility and innovation
- Assessment using CAS
- Outcome-based Quality Measures



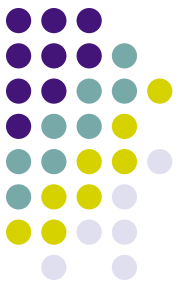
A New DD Demonstration

- **The Demonstration**

- Medicaid Managed Long Term Care (MLTC)

- OPWDD Medicaid Capitation

- OPWDD Fully-Integrated Duals Advantage (FIDA)



A New DD Demonstration

WAIVER Type	Adult Enrollees	Included in Capitated Rates// RateSet By	Fee For Service
MLTC Medicaid	Medicaid and Duals	Various Long-Term Care//DOH	Medical Services
OPWDD Medicaid	Medicaid and Duals	All OPWDD Long-Term Care//OPW	Medical Services
OPWDD FIDA	Duals	All Medical Acute//DOH	N.A.