



# ICRC Study Hall Call Series: Consumer Direction in Managed Long- Term Services and Supports Programs

March 21, 2013

For audio, dial: 1-800-273-7043; Access code 596413

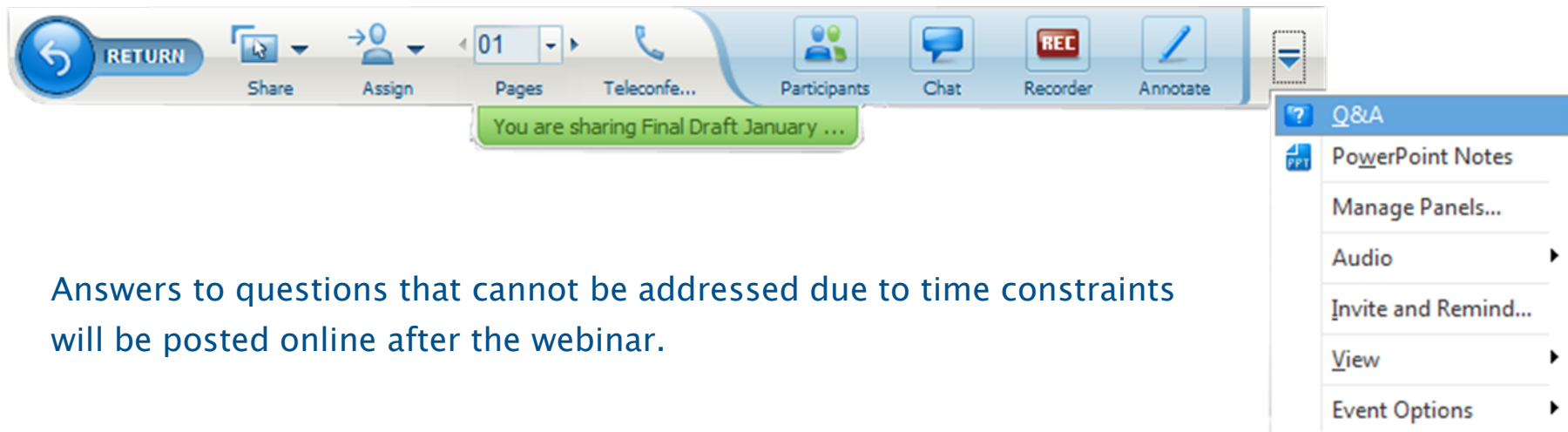
# Agenda

- ▶ Welcome and Roll Call
- ▶ Overview of Participant Direction
- ▶ Consumer Direction in Arizona's ALTCS Program
- ▶ Questions from States

# Questions?

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Your questions will be viewable only to ICRC staff and the panelists.



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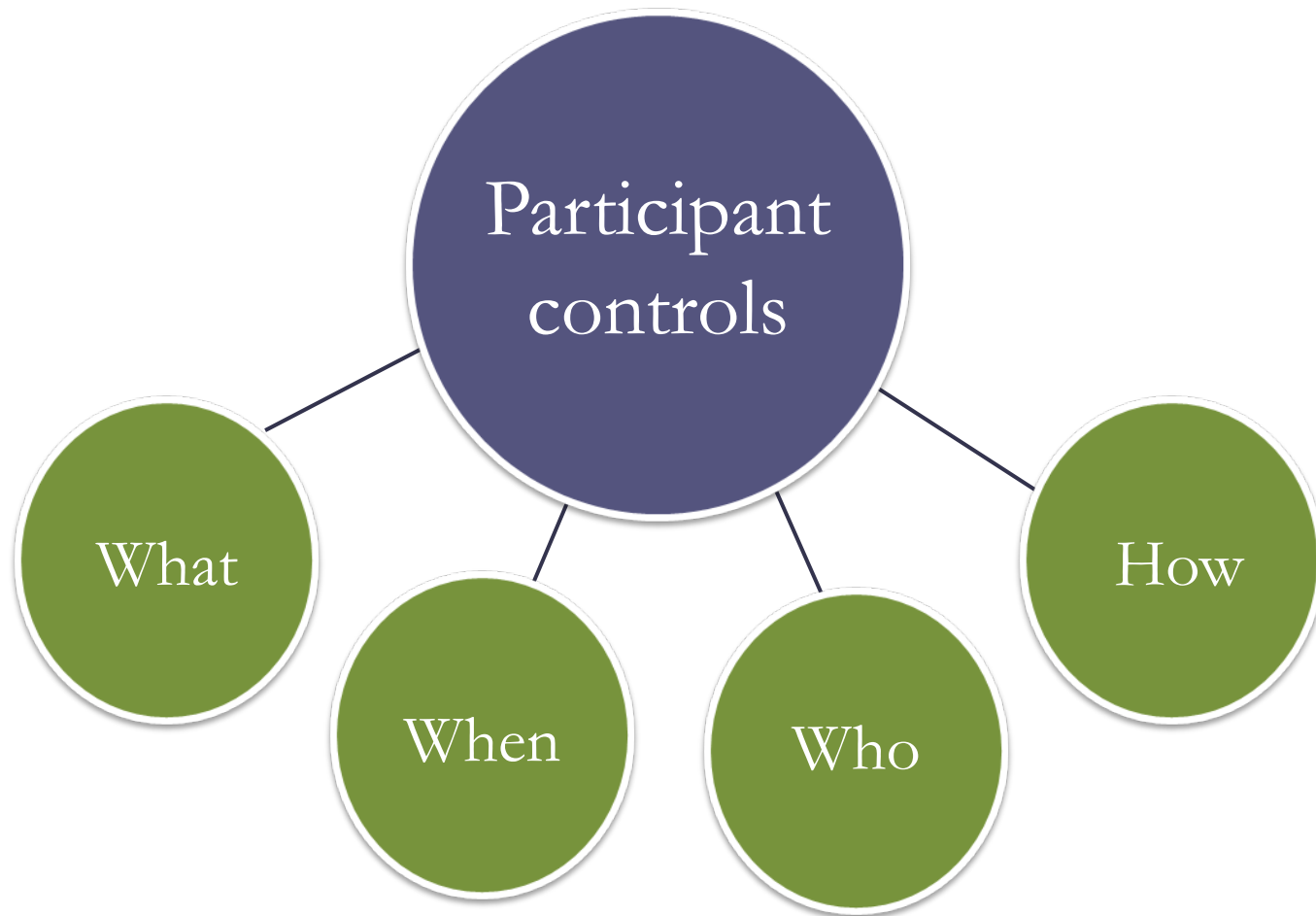
*Capitated Study Hall Session:  
Participant Direction*

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March 21, 2013

Suzanne Crisp,  
*Director of Program Design and Implementation  
National Resource Center for Participant-Directed Services*

# What Is Participant Direction?



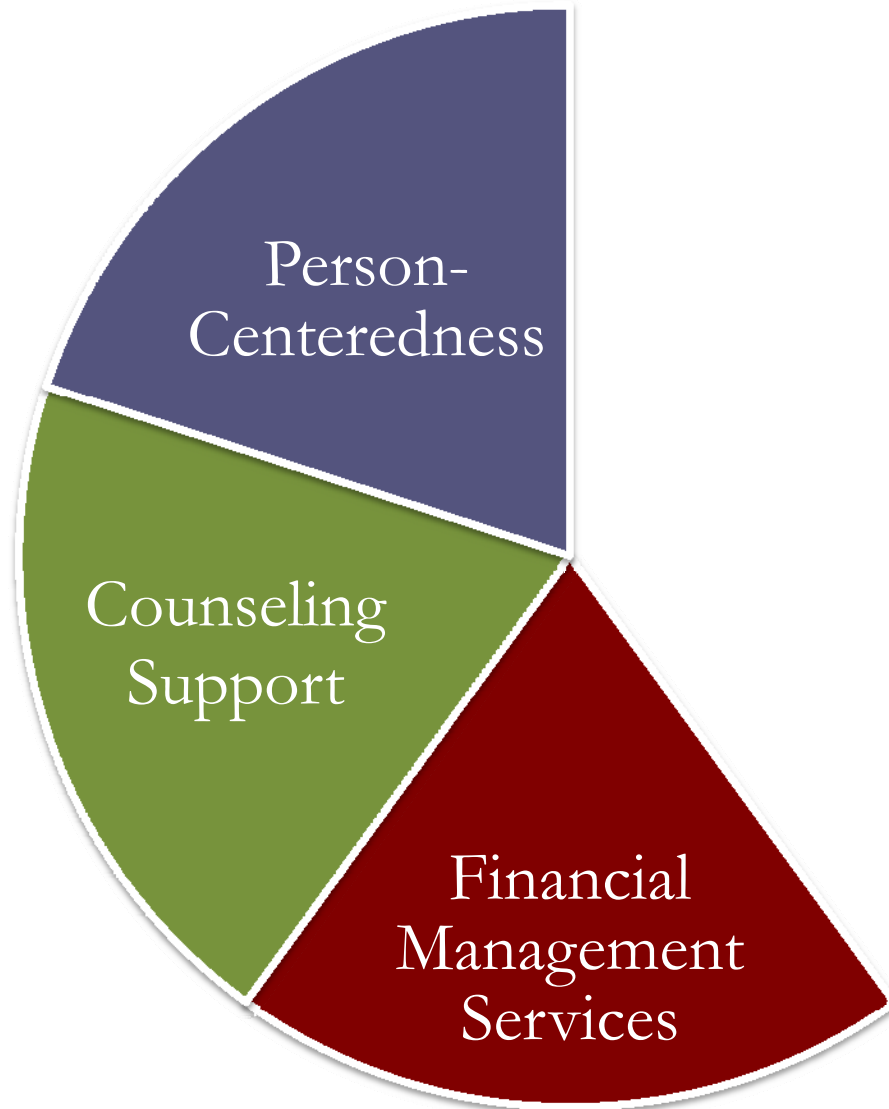
# Elements of Participant Direction



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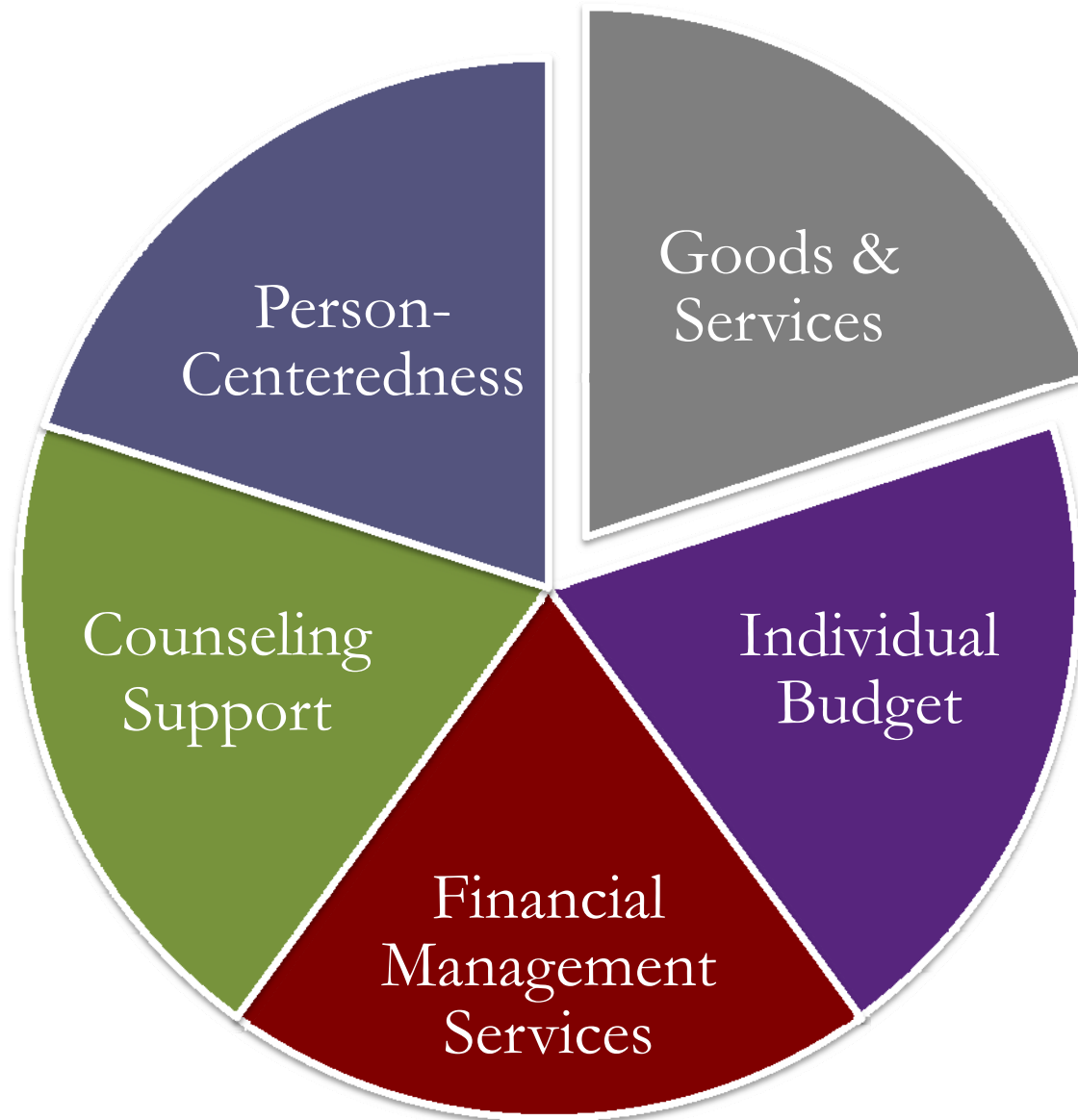




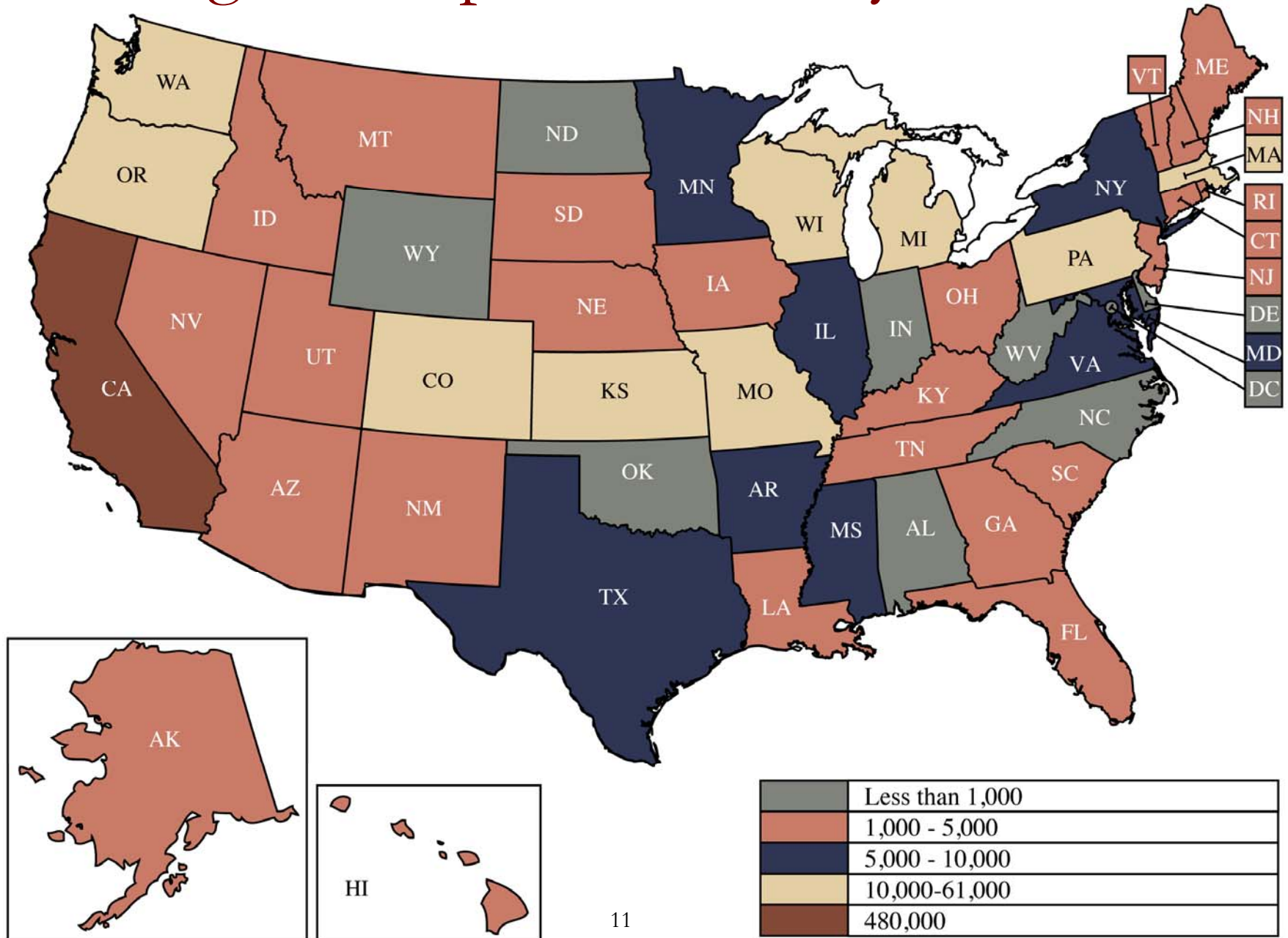
# Elements of Participant Direction



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# PD Programs Operate in Every State



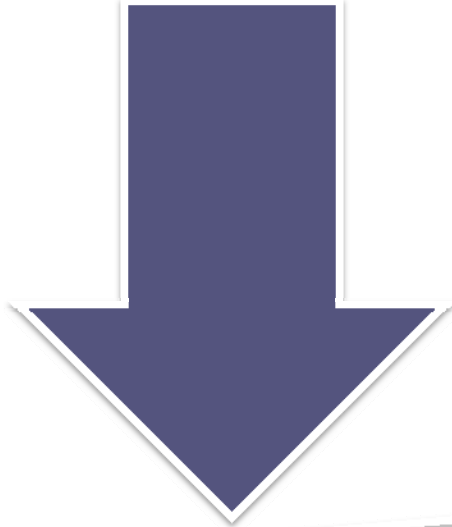
# Are MLTSS and PD Compatible?



- Medical/Clinical model
- Services and supports highly “managed”
- Focus on effective use of resources



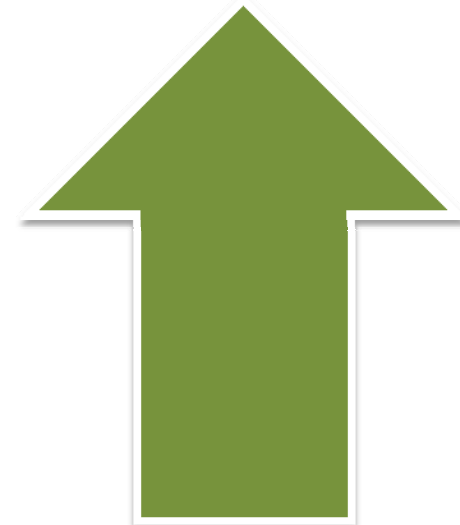
# Are MLTSS and PD Compatible?



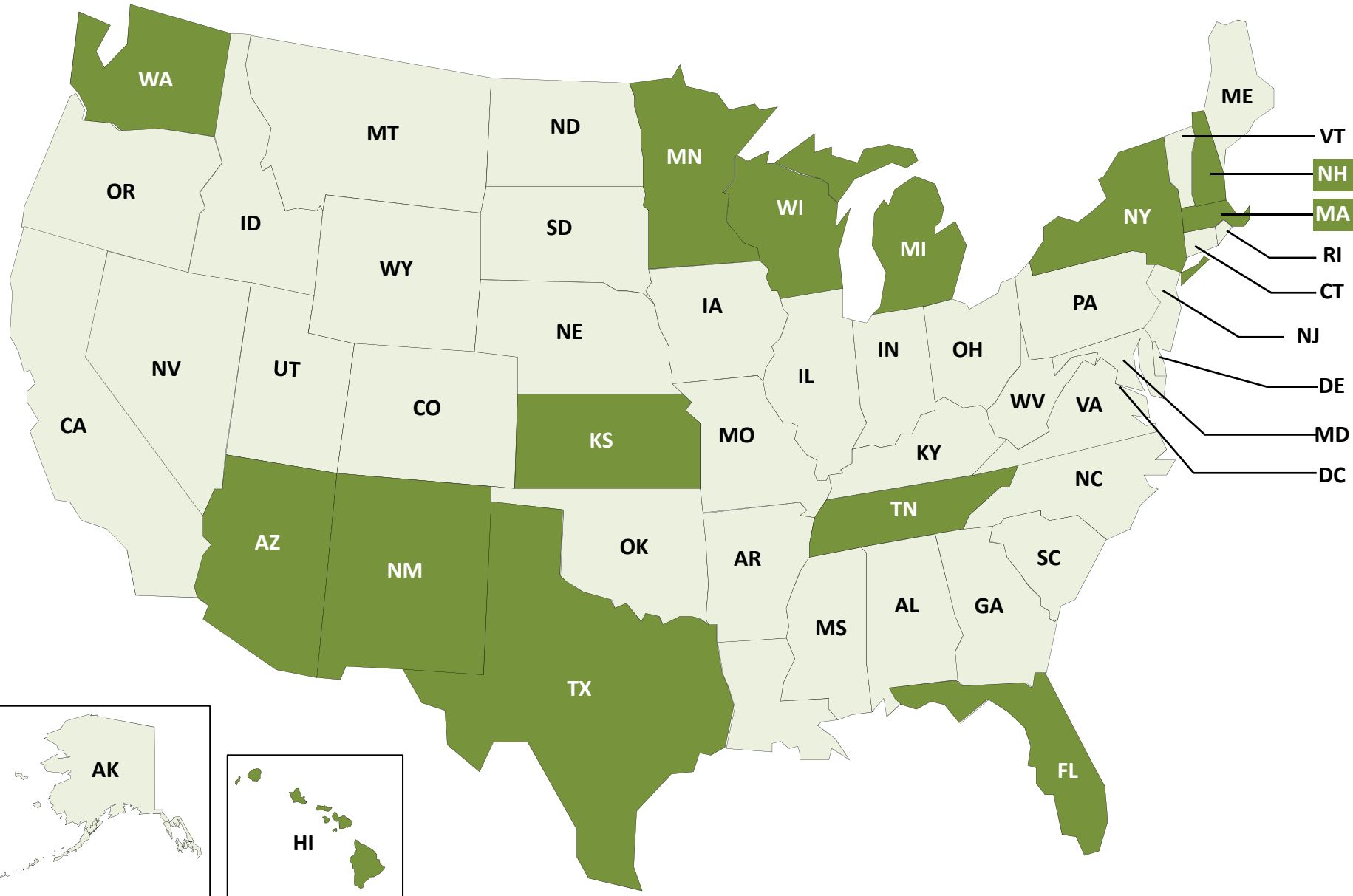
- Medical/Clinical model
- Services and supports highly “managed”
- Focus on effective use of resources



- Member-centeredness
- Service coordination
- Flexible options to meet needs
- Improves access to services and supports
- Supports participants and advocates
- Increases member satisfaction
- More services for same \$



# Participant-Directed Contract Language Study



# Participant Direction is Accelerating in Managed Care

- Of the **17** states that have managed care long-term services and supports, **13** offer participant direction\*
  - **8** offer employer authority
  - **5** offer employer & budget authority
- All 19 programs projecting MLTSS by 2014 will offer a form of participant direction

# Promising Practices for Participant-Directed Contract Language

- Clearly articulate state expectations regarding participant direction
- Require person-centered practices
- Specify responsible staff within the MCO and roles/duties
- Standardize outreach & enrollment
- Put a screening protocol in place



# Promising Practices for Participant-Directed Contract Language (*continued*)

- Detail the individual budget methodology
- Specify training requirements (if any) for members and workers
- Request copies of policies, procedures, and forms
- Specify how the FMS is selected and approve the selection
- Specify how the counseling support is selected and approve the selection

# Promising Practices for Participant-Directed Contract Language (*continued*)

- Ensure counseling support staff is qualified, knowledgeable, and effective
- Establish service coordinator ratios
- Outline the transition policy from participant-directed services back to traditional services
- Apply specific participant-directed performance indicators
- Conduct Readiness Review

# Readiness Review

- Purpose:
  - The State is provided reasonable assurance the MCO is prepared to serve individuals selecting the participant-directed option
  - The MCO is provided assurance it has the operational features in place

# Readiness Review Focus Areas

State's contractual requirements



MCOs collective experience



Processes



Degree of flexibility



Monitoring strategies



Flow of funding



FMS support



Counseling support



Risk assessment and management



Quality performance measures



Member satisfaction

# Contact Information

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National Resource Center *for*  
**Participant-Directed Services**

[www.participantdirection.org](http://www.participantdirection.org)



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# **Overview of Consumer Direction in Arizona's Long Term Care System (ALTCS)**

CHCS Study Hall

March 21, 2013



"Reaching across Arizona to provide comprehensive quality  
health care for those in need"

# History of ALTCS

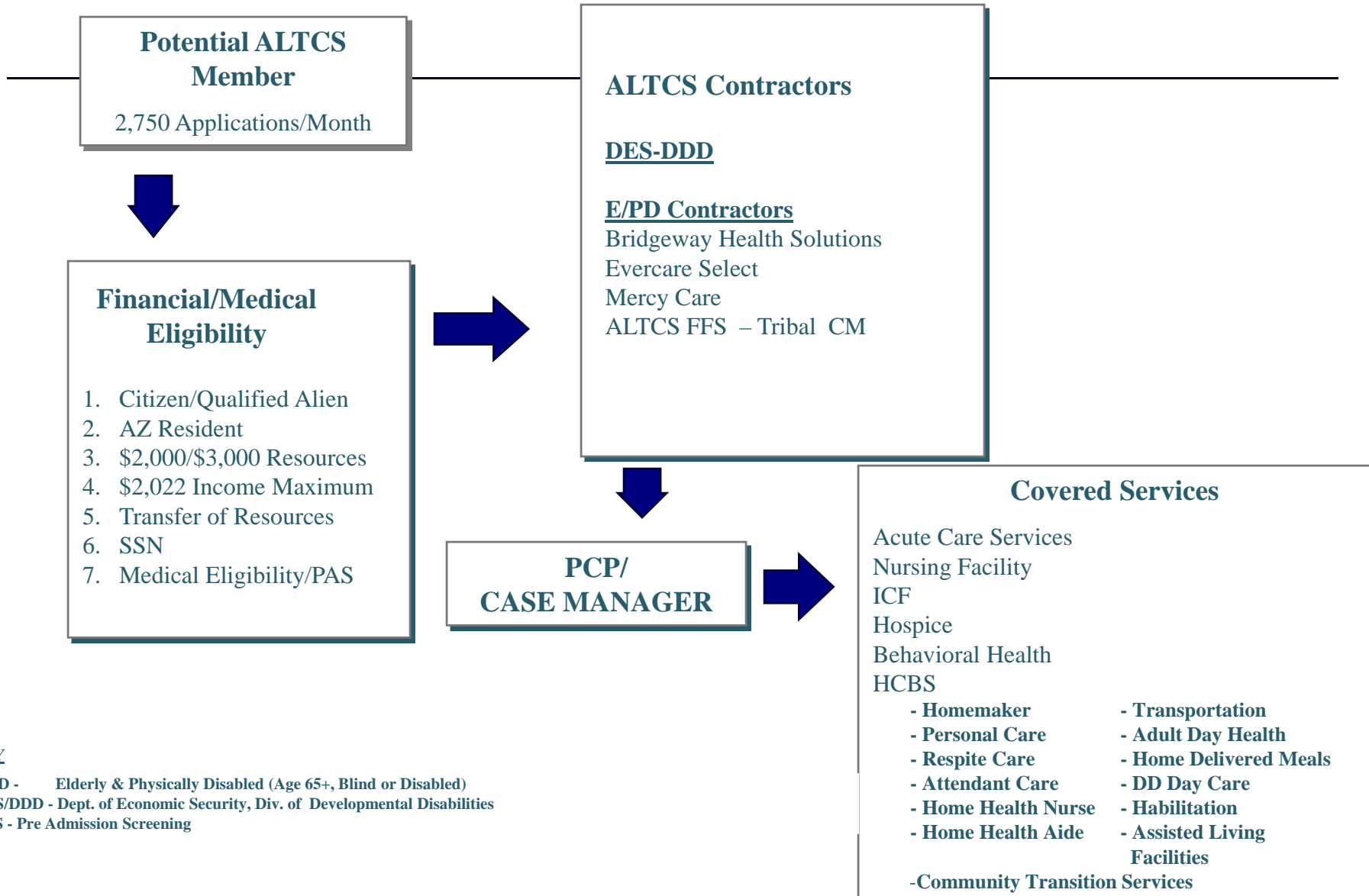
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- ALTCS established in 1988-1989
- Phased in under existing 1115 waiver
- Managed care model since inception



“Reaching across Arizona to provide comprehensive quality health care for those in need”

# ALTCS System Design



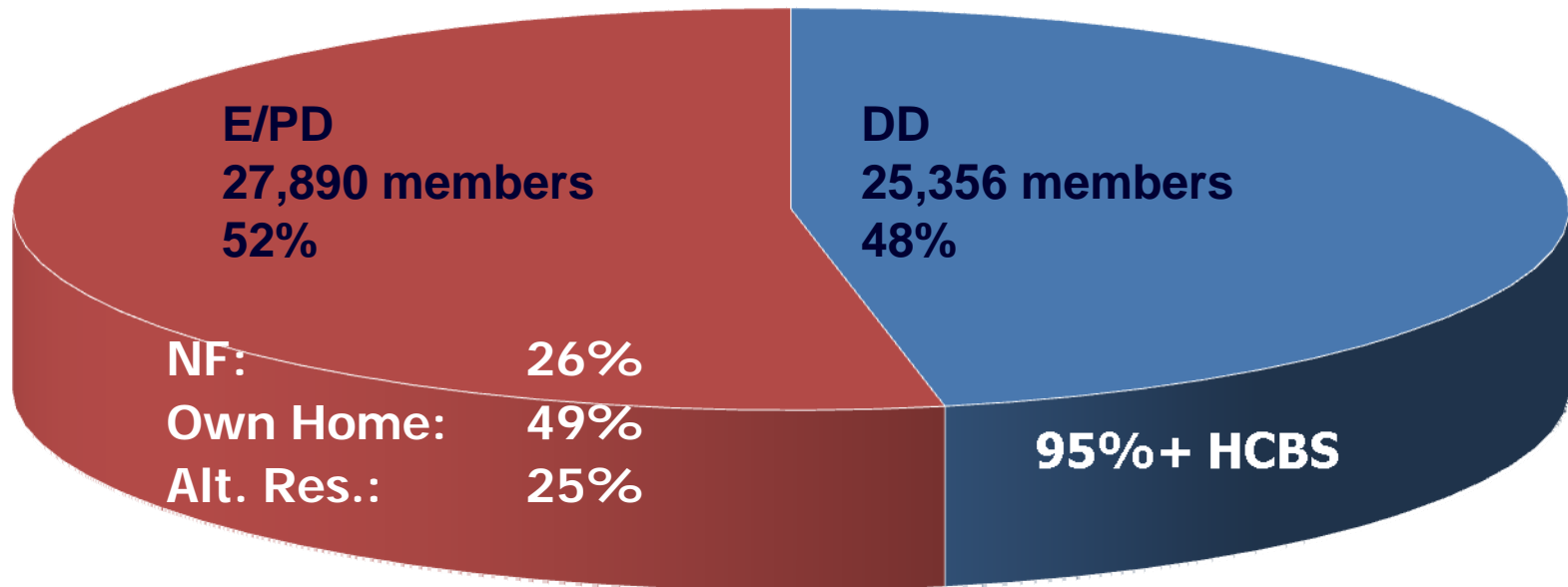
**KEY**

E/PD - Elderly & Physically Disabled (Age 65+, Blind or Disabled)  
 DES/DDD - Dept. of Economic Security, Div. of Developmental Disabilities  
 PAS - Pre Admission Screening



# ALTCS Population – March 1, 2013

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"Reaching across Arizona to provide comprehensive quality health care for those in need"

# State Experience with Self Direction Independent Provider Model

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- ❑ Independent provider model implemented for individuals with developmental disabilities in 2004
- ❑ Allows members/member representatives to direct care using a fiscal intermediary
- ❑ Division of Developmental Disabilities contracts independently with one fiscal intermediary
- ❑ 1,600 members currently using independent providers



# State Experience with Self Direction

## Self-Directed Attendant Care Model

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- ❑ Self-directed attendant care (SDAC) model implemented for individuals served through the E/PD program in September 2008
- ❑ Allows members/member representatives to direct care using a fiscal employer agent
- ❑ E/PD Contractors (Mercy Care, Bridgeway Health Solutions, Evercare Select) contract independently with multiple fiscal employer agents
- ❑ 294 members elected SDAC in CYE 2012, a 22 percent increase from CYE 2011

# State Experience with Self Direction Agency with Choice Model

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- ❑ Agency with choice model implemented in January 2013
- ❑ Service delivery model is “in between” Traditional and Self Directed Attendant Care/Independent Provider models
- ❑ Under Agency with Choice, the agency and member enter into a “co-employment” relationship with the worker or workers
- ❑ The member must select and dismiss the worker and has the option to perform other duties/tasks from a list of employer responsibilities
- ❑ “Formal” employer responsibilities still remain with the agency



## Traditional In-Home Care Option

- This is not a Member-directed option
- The direct care worker is solely employed by the provider agency
- The Individual Representative\* conflict of interest provision does not apply
- Some Members have people in their lives that help them in directing their care including legal guardians. Under this option, these individuals can serve as a paid direct care worker.



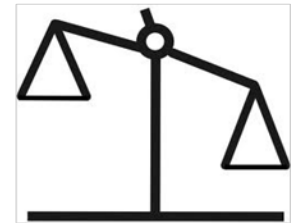
## Agency with Choice Option

- This is a Member-directed option
- The direct care worker is co-employed by both the provider agency and the Member.
- An Individual Representative\* (including a legal guardian) may be appointed to assist the Member in directing his/her care if the Member is unable to fulfill the employer-based responsibilities on their own
- The Individual Representative may not serve as a paid direct care worker



## Self-Directed Attendant Care Option (Fiscal Intermediary)

- This is a Member-directed option
- The direct care worker is solely employed by the Member
- Under SDAC option, a Legal guardian (not an Individual Representative) may be appointed to assist the Member in directing his/her own care. The legal guardian must be present during the provision of care and may not serve as the paid direct care worker.



# Operationalizing Agency with Choice

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- Formed Development and Implementation Council, per requirements of the Community First Choice (§441.575)
  - March 2011
- Drafted State Plan Amendment for submission to CMS
  - July 2012 – October 2012
  - SPA submitted on 10/05/12
  - Currently responding to questions posed by CMS
- Drafted state regulations, outlining basic components and requirements of Agency with Choice
  - July 2012 - January 2013 (effective 01/01/13)
- Drafted necessary policy changes
  - July 2012 – February 2013 (effective 03/01/13)

# Operationalizing Agency with Choice

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- Conducted community/member “orientation”
  - October 2012
- Communicated with community/members through dedicated webpage with information about the model, including a list of FAQs
  - <http://azahcccs.gov/shared/SDAC.aspx?ID=memberresources>
- Conducted train-the-trainer sessions for case management managers
  - October and November 2012
  - Contractor training of case managers is nearly complete
- Conducted series of webinars for providers
  - January and February 2013



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*Goal*

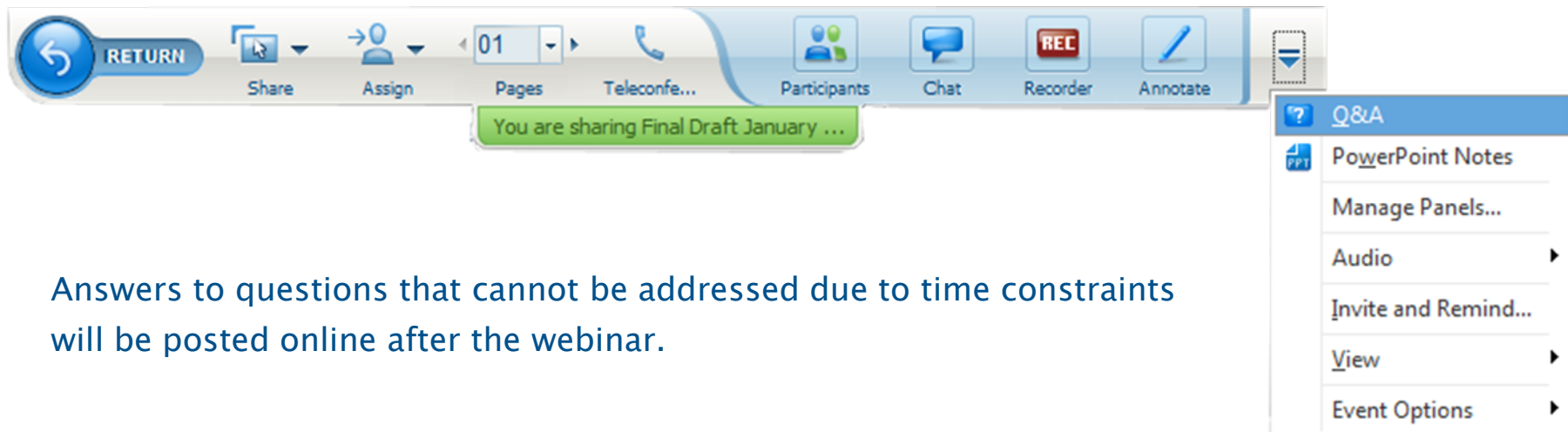
**25 percent of ALTCS members receiving attendant care, personal care, homemaker and in-home habilitation services will receive services under the Agency with Choice service model**



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The image shows a screenshot of a webinar toolbar. The toolbar includes icons for RETURN, Share, Assign, Pages (01), Teleconference, Participants, Chat, Recorder, and Annotate. A green notification bar below the toolbar states "You are sharing Final Draft January ...". A dropdown menu is open on the right side of the toolbar, showing the following options: Q&A (with a question mark icon), PowerPoint Notes (with a PPT icon), Manage Panels..., Audio (with a right-pointing arrow), Invite and Remind..., View (with a right-pointing arrow), and Event Options (with a right-pointing arrow).

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# About ICRC

- Established by CMS to advance integrated care models for Medicaid beneficiaries with high costs and high needs.
- Provides technical assistance (TA) to states at all levels of readiness to pursue integrated care for individuals who are dually eligible for Medicare and Medicaid.
- TA coordinated by Mathematica Policy Research and the Center for Health Care Strategies.
- Visit [www.integratedcareresourcecenter.com](http://www.integratedcareresourcecenter.com) to submit a TA request and/or download resources, including briefs and practical tools to help address implementation, design, and policy challenges.