Arkansas LTSS Reform Update

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Today’s Webinar

• Provide an update on Arkansas LTSS Reform, with focus on:
  o Upcoming major reforms to ARChoices and Living Choices waiver programs
  o Arkansas’ new independent assessment process
  o New reforms to personal care services and Independent Choices

• Implementation of new policies is scheduled for Sept. 1, 2018, contingent on necessary state and federal approvals.

• Public comment process will likely begin in early June 2018 for the necessary waiver amendments, updated provider manuals, and State Plan Amendment.
ARChoices for Home Care

- Home and Community-Based Services (HCBS) Program
- Optional Program Under Federal Section 1915(c) Waiver
- Services and Supports for the Aged and Adults with Physical Disabilities
ARChoices for Home Care

Independent Assessments

• New independent assessment process. Initial assessments of waiver applicants and annual reassessments of waiver participants.

• New Arkansas Independent Assessment (ARIA) instrument. Replaces current ArPath system.

• ARIA also used for assessments for other Medicaid HCBS waiver programs and personal care prior authorization. Will also apply to PACE program.

• Registered nurses from DHS independent assessment contractor (Optum) will perform face-to-face assessments and annual re-assessments.

• DHS nurses will continue to develop person-centered service plans and meet with beneficiaries.

• Detailed information gathered through ARIA-based assessments will aid nurses in service plan development.
ARChoices for Home Care

Level of Care Tiers

• Each waiver applicant or participant will be assigned a tier level (0, 1, 2, or 3) following their assessment. The tiers will help inform waiver program oversight and person-centered service planning.

• In summary:

  **Tier 0** indicates individual does not meet eligibility/coverage criteria for Medicaid personal care services, nursing facility services, ARChoices, or Living Choices.

  **Tier 1** indicates individual’s assessed needs do not support the need for ARChoices, Living Choices, or nursing facility services. Person may qualify for personal care services if already Medicaid eligible.

  **Tier 2** indicates the individual’s assessed needs are consistent with services available through ARChoices, Living Choices, or nursing facilities.

  **Tier 3** indicates the individual needs skilled care available through a licensed nursing facility and is not eligible for ARChoices or Living Choices.

• The tiers do not replace the Level of Care criteria set in longstanding DHS rules.
ARChoices for Home Care

Individual Services Budgets

• Maximum dollar value of services in each person-centered service plan will be limited to a prospectively determined Individual Services Budget (ISB).

• To ensure cost effectiveness and fiscal sustainability of waiver services.

Estimated Medicaid Cost of Nursing Home Stay

Estimated Cost of Non-ARChoices Waiver Services (“halo costs”)

= Individual Services Budget

Maximum amount available for all waiver services in person’s care plan
1. Individual Services Budgets will vary based on population-based factors, including age group, sex, and tier level assigned by ARIA assessment. Persons with same population factors will have same Individual Services Budget amount for upcoming year.

2. Participants may request different mix of waiver services to stay within budget. Any service authorized within the budget amount must still be necessary for the person.

3. Individual Services Budgets will be updated at least annually and published in advance (in table format showing applicable ISB for different population grouping by age group, sex, and tiers).

4. Waiver amendment and ARChoices manual will include safeguards and transition procedures.

5. Federal guidelines for HCBS waivers allow prospective individual services budgets.

6. Individual Services Budgets will apply to ARChoices and Living Choices waiver services.

7. Individual Services Budgets will not apply to Medicaid State Plan services. They will only apply to the ARChoices and Living Choices waivers. They will not apply to other Arkansas waiver programs (e.g., Alternative Community Services, Arkansas Works).
ARChoices for Home Care

Attendant Care Services

• New attendant care policies to:
  
  o Clarify scope of services descriptions to reduce overuse, misuse, duplication, and potential abuse

  o Ensure that attendant care services support ADL and IADL needs supported by independent assessments

  o Determine amount of time and frequency of attendant tasks based on written Task and Hour Standards

• Task and Hour Standards will help guide nurses in setting medically necessary hours for following based on type of task, intensity of person’s needs, and availability of other supports:

  o ARChoices attendant care
  o Personal care services
  o Independent Choices
Benefit Changes

• Prevocational Services added as new benefit:

  o For participants with physical disabilities who wish to join the general workforce. Optional for participants.

  o Prevocational Services are a range of learning and experiential type activities to help prepare a participant for paid employment or self-employment in the community.

• Adult Family Home Services – a service no longer used by waiver enrollees – is eliminated.
Living Choices Assisted Living Program

- Home and Community-Based Services (HCBS) Program
- Optional Program under Federal Section 1915(c) Waiver
- Assisted Living Facility Services for the Aged and Adults with Physical Disabilities
Living Choices Waiver Program

Reforms to Assisted Living Services

These major reforms described for ARChoices Waiver Program will also apply to the Living Choices Assisted Living Waiver:

1. New independent assessment system
2. New care tiers to inform service planning
3. New Individual Services Budgets
Personal Care and Independent Choices

Assistance with Activities of Daily Living Tasks (ADLs and IADLs)

- Medicaid Personal Care Services (optional State Plan benefit)
- Independent Choices Self-Directed Personal Assistance (optional State Plan benefit)
Personal Care and Independent Choices

New Policies

• As mentioned, new Task and Hour Standards will apply to ARChoices attendant care and:
  
  o State Plan personal care services and prior authorization process
  
  o Independent Choices self-directed personal assistance

• State Plan Amendment to formalize the 64-hour a month limit on personal care services for Medicaid beneficiaries aged 21 or older.
  
  o Does not affect beneficiaries under age 21
  
  o Does not affect ARChoices attendant care

• Safeguards and clarifications to reduce overuse, misuse, duplication, and potential abuse. Similar to new policies for ARChoices attendant care.
Public Comment Process on Required Documents

30-Day Comment Period with Regional Briefings

• Proposed Amendments to Federal Medicaid HCBS Waivers:
  • ARChoices for Home Care Waiver Amendments
  • Living Choices Assisted Living Waiver Amendments

• New Medicaid Provider Manuals:
  • ARChoices Waiver Program Manual
  • Living Choices Manual for Assisted Living Providers
  • Personal Care Services Manual
  • Independent Choices Self-Directed Services
  • Program for All-Inclusive Care for Elderly (PACE)

• Medicaid State Plan Amendment (SPA): Personal Care Services 64-hour/month limit for beneficiaries aged 21 or older

• Task and Hour Standards for Personal Care, ARChoices Attendant Care, and Independent Choices: Stakeholder comment on written medical necessity guidelines DHS will use to help determine hours in prior authorizations and service plans
Questions?

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