Joint Medicaid Oversight Committee: Medicaid Waivers 101

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What is a Medicaid “Waiver”? 

State Medicaid programs may seek and use federally-approved waivers to augment the way services and care are delivered to individuals.

There are four primary types of Medicaid waivers:

• Section 1115 Research and Demonstration
• Section 1915 (b) Managed Care
• *Section 1915 (c) Home and Community-based Services*
• *Sections 1915(i) State Plan Home and Community-Based Services*
• Section 1915(c) provides the HHS secretary with the authority to waive Medicaid provisions in order to allow long-term care services to be delivered in community settings.

• This program is the Medicaid alternative to providing comprehensive long-term services in institutional settings.

• These waivers have been critical in state strategies to provide alternative settings for long-term care services.
Waivers: Sections 1915(i) State Plan HCBS

- Section 1915(i) provides states the opportunity to offer services and supports before individuals need institutional care.

- The section also provides a mechanism to grant State plan home and community-based services to individuals with mental health and substance use disorders.

- The State Plan service package is very similar to the options and services available through 1915(c) home and community-based services waivers. However, a significant difference is that 1915(i) does not require individuals to meet an institutional level of care in order to qualify for home- and community-based services.

- Changes made through the Affordable Care Act (effective 10/1/10) removed certain barriers of offering home and community-based services through the Medicaid State Plan.
Ohio’s Medicaid Waiver Options

MyCare Ohio

- Administered through the Ohio Department of Medicaid
- Current Enrollment: 95,164 (Total); 24,688 (*HCBS)
- Services available:
  - Adult day health
  - Alternative meals
  - Assisted living service
  - Choices home care attendant
  - Chore services
  - Emergency response
  - Enhanced community living
  - Home care attendant
  - Home delivered meals
  - Home medical equipment & supplemental adaptive and assistive devices
  - Home modification, maintenance and repair
  - Homemaker services
  - Independent living assistance
  - Nutritional consultation
  - Out-of-home respite
  - Personal care aide
  - Pest control
  - Social work and counseling
  - Waiver nursing
  - Waiver transportation
Ohio’s Medicaid Waiver Options

**Home Care Waiver**

- Administered through the **Ohio Department of Medicaid**
- **Current Enrollment**: 5,655
- **Services available**:
  - Adult day health
  - Emergency response
  - Home care attendant
  - Home delivered meals
  - Home modification
  - Out-of-home respite
  - Personal care aide
  - Supplemental adaptive and assistive devices
  - Supplemental transportation
  - Waiver nursing
Ohio’s Medicaid Waiver Options

Transitions Carve-Out Waiver (*ends June 30, 2015)

• Administered through the Ohio Department of Medicaid

• Current Enrollment: 1,311

• Services available:
  • Adult day health
  • Emergency response
  • Home care attendant
  • Home delivered meals
  • Home modification
  • Out-of-home respite
  • Personal care aide
  • Supplemental adaptive and assistive devices
  • Supplemental transportation
  • Waiver nursing

• Individuals served through this waiver are being transitioned to PASSPORT.
Ohio’s Medicaid Waiver Options

PASSPORT

• Administered through the Ohio Department of Aging

• Current Enrollment: 17,629

• Services available:
  • Adult day health
  • Alternative meals
  • Choices home care attendant
  • Chore services
  • Community Transition
  • Enhanced community living
  • Minor Home Modification
  • Home care attendant
  • Home delivered meals
  • Homemaker
  • Independent living assistance
  • Non-medical transportation
  • Nutritional consultation
  • Out-of-home respite
  • Personal care
  • Personal emergency response systems
  • Pest control
  • Social work and counseling
  • Specialized medical equipment and supplies
  • Waiver nursing
  • Waiver transportation
Ohio’s Medicaid Waiver Options

**Assisted Living Waiver**

- Administered through the **Ohio Department of Aging**
- **Current Enrollment**: 2,579
- **Services available**:  
  - Assisted living services  
  - Community transition
Ohio’s Medicaid Waiver Options

Transitions DD Waiver

- Administered through the Ohio Department of Developmental Disabilities
- Current Enrollment: 2,862
- Services available:
  - Adult day health
  - Emergency response services
  - Home modification
  - Home-delivered meals
  - Out-of-home respite
  - Personal care aide
  - Supplemental adaptive and assistive devices
  - Supplemental transportation
  - Waiver nursing
Ohio’s Medicaid Waiver Options

Individual Options Waiver

• Administered through the Ohio Department of Developmental Disabilities
• Current Enrollment: 17,951
• Services available:
  • Adaptive and assistive equipment
  • Adult day support
  • Adult family living
  • Adult foster care
  • Community respite
  • Environmental accessibility adaptations
  • Homemaker/personal care
  • Home-delivered meals
  • Interpreter
  • Non-medical transportation
  • Nutrition
  • Remote monitoring equipment
  • Residential respite
  • Social work
  • Supported employment (adaptive equipment, community and enclave)
  • Transportation
Ohio’s Medicaid Waiver Options

Level One Waiver

- Administered through the Ohio Department of Developmental Disabilities
- Current Enrollment: 14,090
- Services available:
  - Environmental accessibility adaptations
  - Habilitation (adult day support and vocational)
  - Homemaker/personal care
  - Non-medical transportation
  - Personal emergency response system (PERS)
  - Respite (institutional and informal)
  - Specialized medical equipment and supplies
  - Supported employment (adaptive equipment, community and enclave)
  - Transportation
Ohio’s Medicaid Waiver Options

**S.E.L.F.**

- Administered through the **Ohio Department of Developmental Disabilities**
- **Current Enrollment**: 412
- **Services available**:
  - Clinical/therapeutic intervention
  - Community inclusion
  - Functional behavioral assessment
  - Habilitation (adult day support and vocational)
  - Integrated employment
  - Non-medical transportation
  - Participant-directed goods and services
  - Participant/family stability assistance
  - Remote monitoring and equipment
  - Respite (institutional and informal)
  - Support brokerage
  - Supported employment (enclave)
DODD Waiver Oversight

Director John Martin, Dept. of Developmental Disabilities
DODD: Case Management and Oversight

The DD system is built on multiple types of monitoring and reviews at different times.

Different people look at different items at different times. We are not dependent on one type of review that is conducted at intervals with long stretches in between.

In that sense, our reviews are continuous, not episodic.
Everyone with a waiver is assigned a Service and Support Administrator (SSA) who is employed by the County Board.

The SSA works with the individual and family/guardian to determine what is important to the individual, and what is important for the individual.

This information is incorporated into a plan that must include actions to protect the individual’s health and welfare.
County Board Involvement

How the SSA monitors the individual and services is specified in the plan. County Board SSAs are required to:

• Provide ongoing coordination to ensure services/supports are provided per the service plan, and to the benefit and satisfaction of the individual.

• Maintain contact with providers to ensure there is clear understanding of the expectations and desired outcomes of services.

• Implement a continuous review process to ensure that service plans are implemented. This includes face-to-face visits with individuals at least annually, and more frequently based on need.

• Request a special compliance review if the continuous review process identifies areas of non-compliance with waiver/rule requirements.
DODD: County Board Oversight

• All County Boards are accredited by DODD.

• One of the areas stressed in the accreditation reviews is the County Board’s management of the waiver program.

• County Boards are given accreditation for periods from 1 to 3 years.
DODD: Agency Provider Oversight - Provider Certification

• Applicants must submit evidence of background checks and applicable training to certify or re-certify to be a service provider.

• Agency CEOs and the designee of the CEO responsible for operations must meet education and experience requirements to ensure they are capable of operating an agency that will provide direct services.

• DODD conducts additional layers of review, and may deny certification for applicants who have been involved in previous Major Unusual Incidents (MUI), and for applicants who are related parties to an agency whose certification was previously revoked.

• Agency must have comprehensive general liability insurance and enrollment in Workers’ Compensation

• Agency must participate in the new criminal background check system, Rapback, through the Office of the Attorney General
DODD: Agency Provider Oversight - Provider Certification

- An agency must be certified to provide either locally funded services or Medicaid-funded services.

- An agency must have an internal compliance program.

- Staff must receive initial training in CPR and first aid, and in person-centered planning, community integration, self advocacy, the rights of individuals, and reporting of unusual incidents.

- Agencies must develop policies and procedures to address areas such as staff training and supervision, management of individual funds, and incident reporting and investigation.
DODD: Agency Provider Oversight - Provider Compliance Reviews

• Compliance reviewers receive ongoing training on rule requirements, and recognizing non-compliance and potential fraud.

• Technical assistance on waiver and rule requirements routinely is provided to providers during compliance reviews.

• If citations are made, the agency must submit a plan of correction, and its implementation of the plan of correction is verified. If a citation also relates to the County Board’s action, a citation could also be sent to the County Board.

• The first compliance review is conducted within 9 months of first billing.

• Subsequent routine compliance reviews occur every 3 years.

• All reviews include observations, and interviews with a sample of individuals served and guardians.
DODD: Agency Provider Oversight - Provider Compliance Reviews

- Special reviews may occur at any time as a result of a complaint, Major Unusual Incident (MUI), or significant non-compliance.

- Providers demonstrating significant non-compliance are referred for sanctions such as suspension of admissions and/or revocation of certification.
  - In 2014, DODD initiated 84 suspensions of admissions and 40 revocations.

- An agency must meet additional requirements in the HCBS rule that is specific to the service.

- Each agency must report any MUIs to the County Board for investigation.

- Each agency must analyze and look for trends and patterns for its unusual incidents.

- Every direct service employee must be trained annually in the reporting requirements for unusual incidents, all Health & Safety alerts issued during the year, and person-centered planning, community integration, self advocacy, and the rights of individuals.
County Board Involvement

In addition to SSA involvement, DODD delegates authority to County Boards to do provider compliance visits.

These are done outside of the SSA system so that two sets of eyes are involved with each individual.

Each provider is reviewed, including an on-site visit to individuals receiving services.
Nursing Quality Assurance

- County Boards are responsible for conducting quality assurance reviews on delegated nursing and medication administration every three years.
  - May include interviews with individuals
DODD: Major Unusual Incident Reporting System (MUI)

- DODD has a robust MUI reporting and investigative system. Anyone can report, and it can be anonymous.

- Every direct service staff worker has to be trained in abuse, neglect, and MUI reporting prior to working, and annually thereafter.

- Approximately 20,000 incidents are reported annually into our system. Our definitions are broad; for example, neglect is reported even if there is no negative outcome.
  - 24 hour reporting is required; some within 4 hours
  - All incidents are categorized and investigated via required protocols
  - There are 200 MUI investigators statewide who are certified by DODD, and are required to attend civil and criminal investigatory practices training, and obtain credit hours to maintain their certificate
DODD: Major Unusual Incident Reporting System (MUI)

• On a semiannual basis:
  – Each provider is required to do a trend and pattern analysis of its MUIs
  – Each County Board is required to do a trend and pattern analysis for its entire county
  – DODD does trend and pattern analysis for the entire State

• Health & Safety Alerts
  – Based upon the trend and pattern analysis, DODD issues Health & Safety alerts to the field. We typically issue 8-10 alerts a year.
  – Each agency is required go over these Health & Safety alerts in annual mandated trainings.
DODD: Major Unusual Incident Reporting System

• Other system components are:
  
  – DODD manages a central complaint hotline
  
  – Every death is reviewed by a statewide Mortality Review Committee
  
  – A steering committee assists DODD with trend and pattern analysis
  
  – The MUI Unit, with the assistance of a stakeholder group, manages the DODD Abuser Registry
  
  – MUIs may trigger DODD’s Compliance Division to conduct a special review
DODD: The Role of the Family

• One of the strengths of the waiver program is the ability of the family or individual to hire or fire their provider (agency or independent).

• Another strength is the family can choose one provider for day services, and another for residential services, giving another set of eyes on the individual.

• To assist the family in making choices, we place provider compliance reports online so there is transparency in the compliance process.

• Because the family is an important component of our waiver system, we have a robust guardianship program when the family is no longer able to participate.
ODA Waiver Oversight

Director Bonnie Burman, Dept. of Aging
Ohio Department of Aging

• Our mission is to keep Ohio on the leading edge of innovation and responsiveness to the growing and changing older population.

• We believe:
  – Our elders should be respected as vital members of society who continue to grow, thrive and contribute throughout their lives.
  – State agencies and local communities must integrate aging needs into their plans and services.

• We work with and lead a network of agencies and service providers that help Ohioans maintain quality of life and independence by taking preventive measures and maintaining health throughout their lifespans.

• Our goal is that Ohioans will have access to an array of services and supports that are person-centered in policy and practice, and well-coordinated.
ODA Waiver Operations

• ODA works with 13 Passport Administrative Agencies (12 PAAs + Catholic Social Services of Miami Valley), which perform

Clinical:
  – intake and screening
  – program eligibility
  – Assessments
  – case management,
  – Oversight.

Provider:

• PAAs assist in the provider certification process, ensure background checks are in order, and that providers are in compliance with ODA requirements.

• PAAs conduct on-site reviews of providers to ensure quality measures are met in accordance with the federally approved waiver.
Accessing ODA Waivers

• In-person assessment
  – Functional needs
  – Preliminary Financial Determination

• Support for Medicaid application process

• Enrollment in waiver or

• Advice about or direction to other options
ODA’s Waiver Case Management

• Ongoing assessment, coordination and monitoring of a consumer’s needs, strengths and services to assure health and safety;

• Development of an individualized, culturally competent, written care plan for each consumer in order to maximize the individual consumer’s quality of life based on his/her capacity and preferences – including the opportunity to self-direct services;

• Consumer education in order to promote informed choice, understanding of risk, benefits of care options and decisions; and

• Consumer advocacy, as needed, on behalf of the consumer and/or caregiver.
Key Principles of Self Direction

• Informed consumers are the experts on their care needs, how those needs are best met, and if needs are being met appropriately;

• Consumer choice and control in service delivery is the foundation;

• All consumers should be given the opportunity to self direct their care.
Consumer Self-Direction

- All consumers are given the opportunity to self direct their care.

- Participant-direction is a service model that empowers public program participants and their families by expanding their degree of choice and control over the long-term services and supports they need to live at home.

- Participant-directed services are long-term care services that help people of all ages across all types of disabilities maintain their independence and determine for themselves what mix of personal care services and supports work best for them.

- Informed consumers are the experts on their care needs, how those needs are best met, and if needs are being met appropriately.

- The PASSPORT Medicaid Waiver provides consumers opportunities to exercise more choice and control over the delivery of home and community-based services. The consumer or their authorized representative hires, fires and trains their employees. The flexibility of scheduling services at times preferred by the consumer, and selecting the person who provides the service are principles of self direction.
Oversight of ODA’s Waivers

- Continuous monitoring and evaluation of consumer health and safety, comprehensive case management and provider performance;

- Maintaining separate provider certification process giving ODA the ability to discipline and decertify non-compliant providers;

- Ensuring continuous quality improvement of ODA’s waiver programs;

- Ensuring adequate mechanisms are in place to capture evidence-based performance data.
Additional Items:

• Single/Unified Waiver

• Wraparound Services
  o Housing
  o Transportation
  o Day Services

Questions?