



Family and Social Services Administration's Medicaid Forecast & HCBS Waiver Update

Task Force for Individuals with Intellectual and Developmental Disabilities
January 29, 2024

Agenda

- Medicaid Forecast Overview
- Waiver Transition Overview
- Waiver Draft Details
- Second Public Comment Period
- Questions

December 2023 Medicaid Forecast

\$900M Variance from April 2023 Projections

- FSSA team reviewed data, policies, approved waivers, and current waiver drafts to better understand the drivers behind our variance.
- We sought to truly understand the issues so solutions:
 - are as tailored as possible,
 - maintain our focus on the people we serve and,
 - continue forward momentum on agency initiatives.





Drivers of Forecast Variance

- Decrease in Federal FMAP
- Pharmacy Rebates
- Medicare Part D Clawback

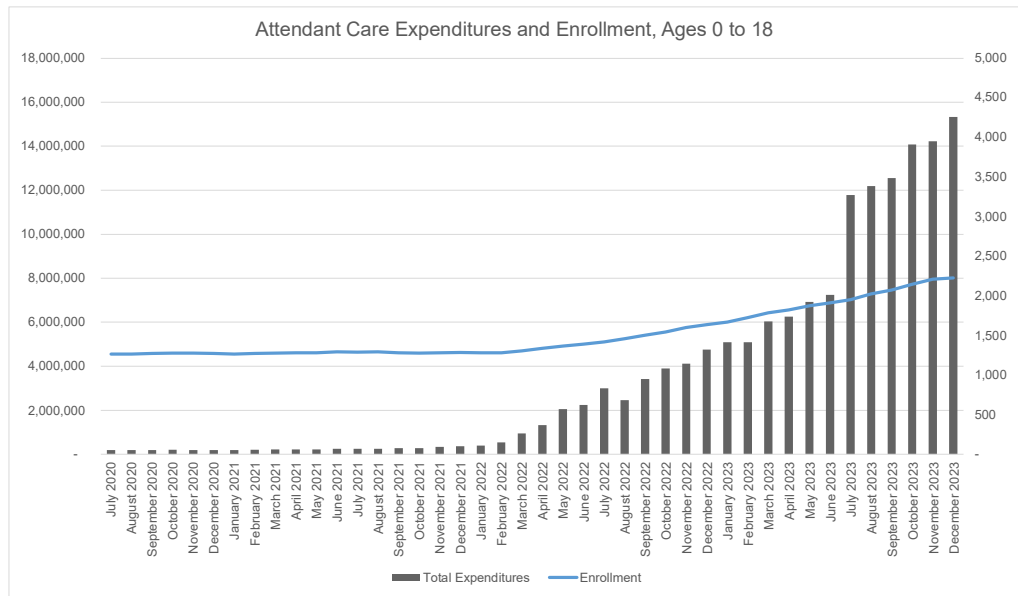
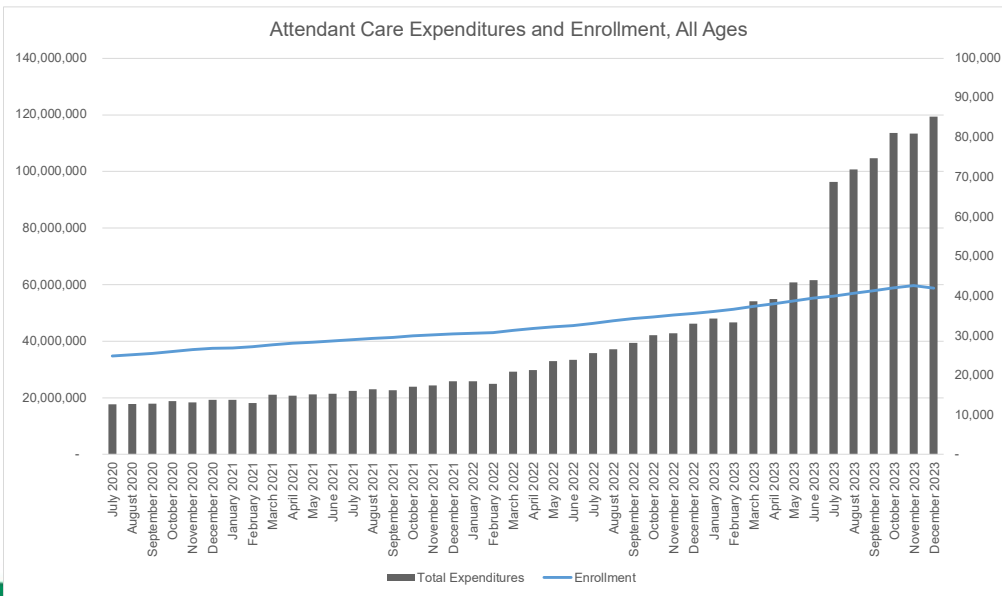
- Delayed Implementation of ABA Rates
- Unanticipated Growth in Enrollment and Utilization
 - A&D Waiver
 - ATTC

Aged and Disabled waiver

Attendant Care Expenditures – all providers - reflecting 48% rate increase effective July 1, 2023

The Aged and Disabled waiver has been experiencing significant growth of Attendant Care Expenditures

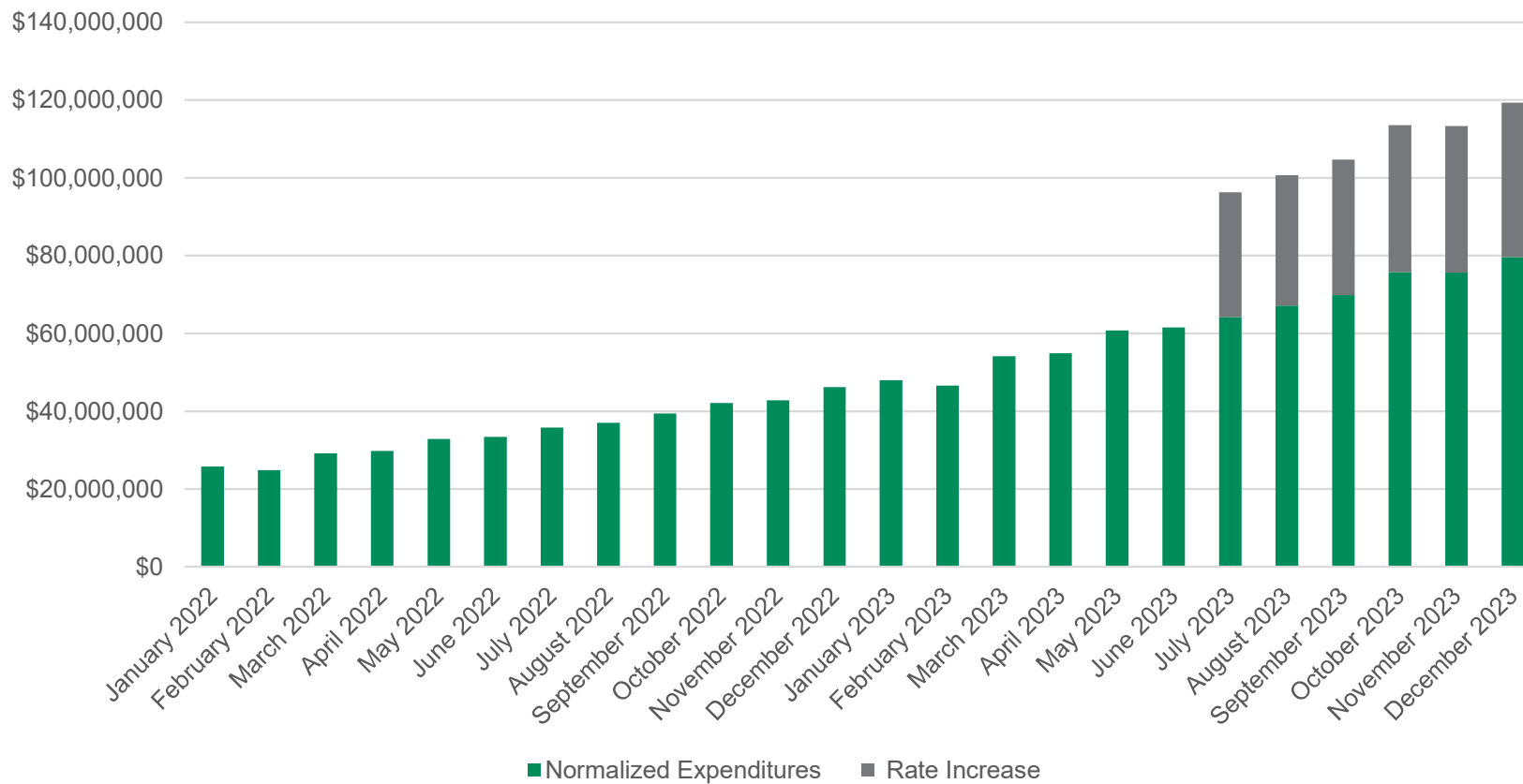
- Growth is especially large in the pediatric population, and for high utilizers (40 to 60 hours or >60 hours per week)
- Tied to operational changes facilitating Attendant Care payment to Legally Responsible Individuals (LRIs), such as parents, spouses, and legal guardians, without explicit limits on hours for which they can be paid



Note: Expenditures may be understated for recent months: Graphs illustrate claims submitted through mid-January 2024 with no adjustment for completion as more claims are submitted in coming weeks.



Attendant Care Expenditures - All Members Normalized to Show Impact of 7/1/2023 Rate Increase



Strategic Approach

- 1) Strategies that help minimize impact
- 2) Strategies focused on addressing drivers



Broad Strategies to Minimize Impact



- ❑ HCBS Enhanced FMAP reallocation
- ❑ Pause on 2% rate indexing

Key Strategies to Address Drivers



- A&D Waiver
 - Ensure Service Definition Compliance
 - Pediatric Eligibility: Training, Reviews, and Future Planning
 - Expedited Waiver Eligibility Pause
 - Retroactive Eligibility
 - Waiver Slots
 - Review of Service Plans and Reduction of Auto Approval
 - Structured Family Caregiving Provision for Legally Responsible Individuals



Who is an Legally Responsible Individual (LRI)*

- Parent of a minor child
- Legal guardian of a minor child
- Spouse

*CMS restricts ability of LRI to deliver personal care services

*Typical responsibilities of an LRI align with the services rendered through ATTC, and it is difficult to differentiate where does the LRI role stop and ATTC start.



What is Attendant Care (ATTC)

- Personal care assistance, including activities such as bathing, oral hygiene, hair care, shaving, hand and foot care, intact skin care, application of cosmetics, dressing
- Mobility assistance
- Toileting assistance - which exceeds assistance required for an individual meeting developmental milestones of the same age ; assistance with nutrition, which includes: meal planning, preparation, clean-up which exceeds assistance required for neurotypical individuals of the same age
- Health and safety and household tasks, such as making the member's environment free from safety risks, providing reminders to take medicine and assisting with correspondence, or paying bills
- Transportation to non-medical community activities which exceeds assistance required for an individual meeting developmental milestones of the same age

Attendant care does not provide compensation for skilled care, though many members may for the State Plan Home Health benefit (this is not a Waiver service but is a Medicaid service).

Why Structured Family Caregiving



- Activities of daily living such as bathing, dressing, toileting, eating, etc. (personal care or attendant care) and instrumental activities of daily living (ADLs) such as bathing, showering, dressing, etc.
- Medication oversight (to the extent permitted under State law)
- Escorting for necessary appointments, whenever possible, such as transporting individuals to the doctor
- Transporting to appointments and community activities that are therapeutic in nature or assist with maintaining natural supports
- Other appropriate supports as described in the individual's service plan
- Respite for the family caregiver for a maximum of 15 days per calendar year
- Reimbursement is per day rather than an hourly unit

Structured Family Care does not provide compensation for skilled care, though many waiver recipients may qualify for the State Plan Home Health benefit (this is not a Waiver service but is a Medicaid service).

Approach to Waiver Redesign

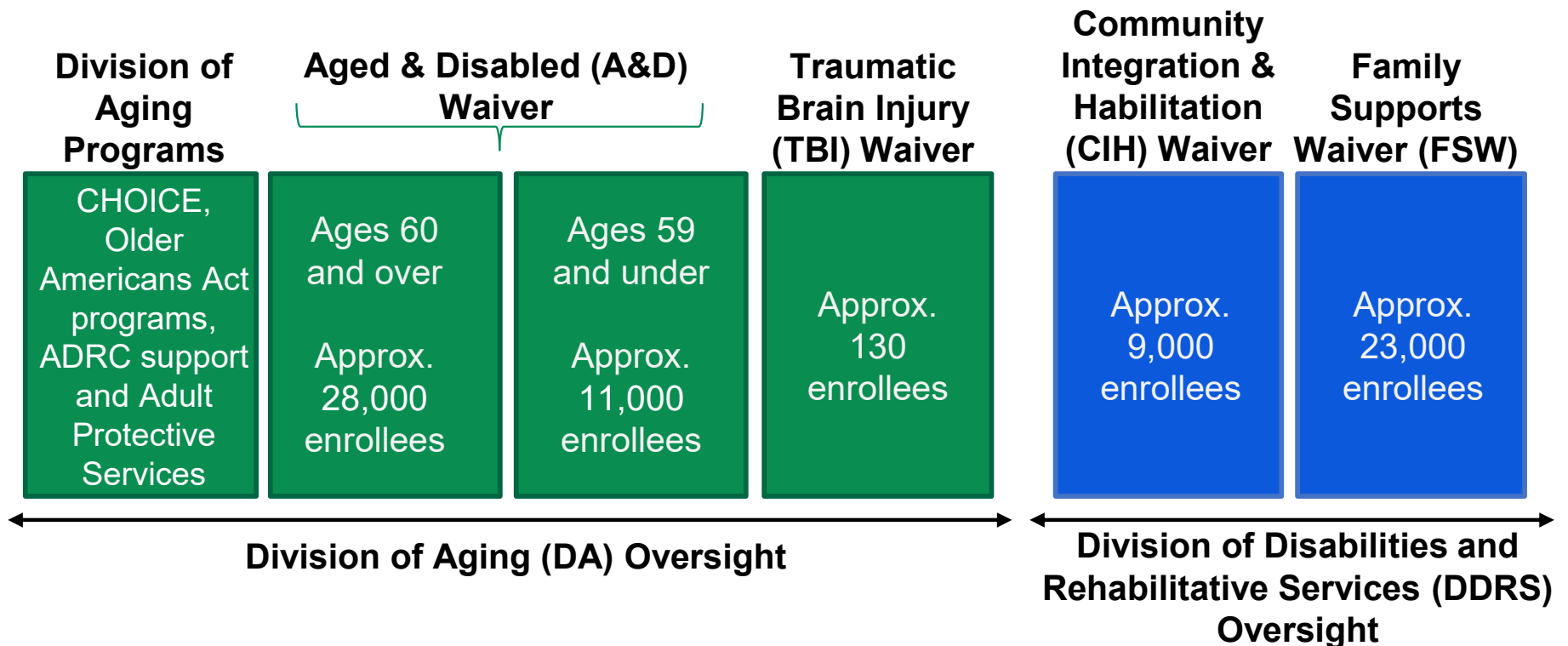
Improve team dynamics through shared outcomes and communication

Enhance Case Management and System Navigation

Focus on key supports to build independence

All people have the right to live, love, work, learn, play and pursue their dreams.

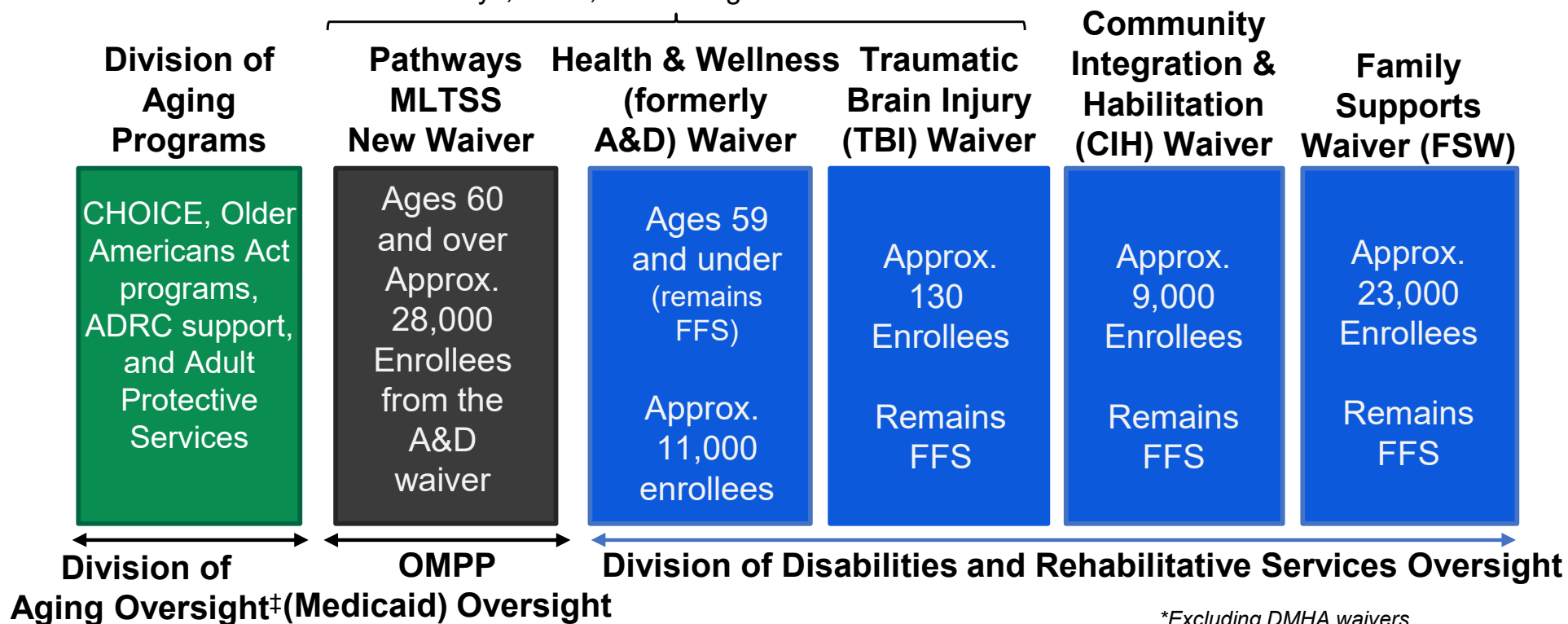
Waiver Transition: Current FSSA HCBS Programs*



*Excluding DMHA waivers

Future FSSA HCBS Programs*

PathWays, H&W, TBI Changes Effective 7/1/24



*Excluding DMHA waivers.

‡The Division of Aging will continue to provide support and subject matter expertise to OMPP and DDRS in managing HCBS waivers.

What is Currently Out for Public Comment?

The following waivers were previously out for public comment November 8, 2023, through December 14, 2023. Slides later in this deck will provide a high-level overview of the changes since the last public comment period and a summary of previously shared updates.

- The Family Supports (FSW) waiver
- The Community Integration and Habilitation (CIH) waiver
- The Traumatic Brain Injury (TBI) waiver
- The Health and Wellness (H&W), formerly known as the A&D waiver (for those under age 60)
- The PathWays 1915(b)/(c) waivers (including those served by A&D waiver for those aged 60+)

The following waiver is now out for public comment but had not been out for comment last November.

- The Hoosier Care Connect (HCC) waiver

TBI Waiver Amendment Overview

Who is served by TBI:

- The TBI waiver provides support for people who have experienced a traumatic brain injury.

Updates in the January waiver amendment draft:

- Keeps provider rates the same as the rates as approved by CMS and effective July 1, 2023. Includes permissive as fiscal situation allows to return to previously planned rate indexing.
- Adds transfers to allowable activities under Attendant Care definition
- Removes reference to exclusion for the family ownership of an agency
- Clarifies the \$15,000 vehicle modification cap is for every 10 years, not per lifetime
- Clarifies the policies surrounding the allowance of services provided by legally responsible individuals to sustainably provide services with appropriate checks and balances; will permit for Structured Family Caregiving and will not permit for Attendant Care.

Items shared during Nov-Dec public comment period:

- Made minor changes to language in the waiver to align all 1915(c) waivers with matching language.
- Switched waiver oversight from Division of Aging to Division of Disability and Rehabilitative Services
- Added the Structured Family Caregiving service and the Home Modifications Assessment service
- Made minimal changes to service definitions to clarify service outcomes and potential ways the services could be used, and to align descriptions across multiple waivers for consistency

Health & Wellness Waiver Amendment Overview (formerly A&D Waiver)

Who is served:

- The H&W provides support to children and adults ages 59 and under who meet nursing facility level of care (NFLOC)

Updates in the January waiver amendment draft:

- Adjusts the transition timeframe for continuity of care for existing service plans to a minimum 90-day period to match timeframes in existing managed care programs. Following this period, services may not be reduced or terminated in the absence of an up-to-date assessment of needs that supports reduction or termination.
- Clarifies the policies surrounding the allowance of services provided by legally responsible individuals to sustainably provide services with appropriate checks and balances; will permit for Structured Family Caregiving and will not permit for Attendant Care.
- Revises provisions for annual rate adjustments to keep provider rates the same as the rates as approved by CMS and effective July 1, 2023. Includes permissive as fiscal situation allows to return to previously planned rate indexing.
- Keeps the number of waiver slots consistent with previously approved slots
- Adds explanation of potential waitlist procedures
- Clarifies language on selection of entrants to the waiver

Health & Wellness Waiver Amendment Overview (formerly A&D Waiver)- Cont'd

Updates in the January waiver amendment draft (continued):

- Updates cost neutrality information
- Revises language regarding when auto-assignments occur for those who do not select a PathWays MCE (applies to those transitioning from H&W to PathWays waiver at 60th birthday)
- Removes reference to exclusion for the family ownership of an agency
- Clarifies the \$15,000 vehicle modification cap is for every 10 years, not per lifetime

Items shared during Nov-Dec public comment period:

- Made minimal changes to service definitions to clarify service outcomes and potential ways the services could be used
- Made minor changes to language in the waiver to align all 1915(c) waivers with matching language
- Switched waiver oversight from Division of Aging to Division of Disability and Rehabilitative Services
- Changed name to Health and Wellness (H&W) waiver
- Changed waiver target population to serve individuals aged 0-59 [note: age 60 and above will be served in PathWays]

Indiana PathWays for Aging - New Waivers

Who is served:

- Individuals who are 60 and over who are aged, blind and disabled and qualify for Medicaid services, or including those age 60 and over currently enrolled in Hoosier Care Connect, or qualify for both Medicare and Medicaid, or receive services on the Aged and Disabled Waiver, or receive services in a nursing facility

Updates in the January waiver draft (continued):

- Adjusts the timeframe for continuity of care for existing service plans to a minimum 90-day period to match timeframes in existing managed care programs. Following this period, services may not be reduced or terminated in the absence of an up-to-date assessment of needs that supports reduction or termination.
- Clarifies the policies surrounding the allowance of services provided by legally responsible individuals to sustainably provide services with appropriate checks and balances; will permit for Structured Family Caregiving and will not permit for Attendant Care.
- Revises provisions for annual rate adjustments to keep provider rates the same as the rates as approved by CMS and effective July 1, 2023. Includes permissive as fiscal situation allows to return to previously planned rate indexing.
- Keeps the number of waiver slots consistent with previously approved slots

Indiana PathWays for Aging - New Waivers

Updates in the January waiver drafts (continued):

- Adds explanation of potential waitlist procedures and reserved capacity for individuals aging out of the Health & Wellness Waiver to ensure continuity of care
- Clarifies language on selection of entrants to the waiver
- Revises language regarding when auto-assignments occur for those who do not select an MCE
- Removes reference to exclusion for the family ownership of an agency
- Clarifies the \$15,000 vehicle modification cap is for every 10 years, not per lifetime

Things to note that were previously shared in the PathWays drafts:

- This waiver is a 1915 (b)/(c) combination. The 1915(b) waiver authorizes the managed care program. The 1915(c) waiver provides the HCBS currently available on the A&D waiver for ages 60+
- Those receiving hospice services when they become eligible for PathWays and American Indians/Alaska Natives can opt-in to managed care
- Maintenance of Effort – Any changes around service definitions are minimal and do not affect services.
- All enrollees are eligible to receive care coordination. Enrollees who have a "nursing facility level of care" will also be offered service coordination.
- Service definitions remain aligned with the current Aged and Disabled waiver
- More information about the new PathWays program can be found at in.gov/pathways

Hoosier Care Connect Waiver Amendment Overview

Who is served:

- The HCC provides support to individuals ages 59 and under who are blind, or disabled and who are also not eligible for Medicare and do not meet a nursing facility level of care.

Updates in the January waiver amendment draft:

- Changes waiver target population to serve individuals ages 59 and under [note: age 60 and above will be served in PathWays]

The HCC waiver was not posted or amended during Nov-Dec public comment period but is now due to be amended

Timeline

Public Comment Period	01/17/24 – 02/16/24
Waiver Effective Date	07/01/24

How To Submit a Public Comment

Comments on the **H&W, TBI, FSW, and CIH Waivers** can be emailed to DDRSwaivernoticecomment@fssa.IN.gov or mailed to:

FSSA Division of Disabilities and Rehabilitative Services
RE: [Insert Amendment Name] Public Comment
402 West Washington Street, Room W453
P.O. Box 7083
Indianapolis, IN 46027

Comments on the **PathWays & HCC Waiver** can be emailed to backhome.indiana@fssa.in.gov or mailed to:

Family and Social Services Administration
Office of Medicaid Policy and Planning
Attention: Holly Cunningham-Piggott
402 W. Washington St., W374
Indianapolis, IN 46027

Questions:

Medicaid@fssa.in.gov

Website: FSSA Medicaid Strategies
<https://www.in.gov/fssa/medicaid-strategies/>



Allowable Care Provision Health & Wellness & PathWays Waivers Effective 7/1/24		
Relationship	Attendant Care (Yes/No)	Structured Family Care (Yes/No)
Biological or Adoptive Parent – of Minor Child (LRI)	No	Yes
Legal Guardian of a Minor Child	No	Yes
Foster Parent	No	No
Stepparent of Minor Child (Relative)	Yes	Yes
Spouse of Waiver Recipient (LRI)	No	Yes
Legal Guardian of Adult (18+ years)	Yes - Can provide up to 40 hours per person per week; additional authorized hours provided by other attendant staff	Yes
Biological or Adoptive Parent of an Adult (who is not a Guardian or POA)	Yes	Yes
Stepparent of an Adult (who is not a Guardian or POA)	Yes	Yes
Authorized Medicaid Representative and Authorized Representative for Social Security,	Yes	Yes
Health Care Representative (non-LRI)	Yes	Yes
Other Relatives (of an Adult or Minor Child)	Yes	Yes

