



**Ohio** | Department of Medicaid  
John R. Kasich, Governor  
John B. McCarthy, Director

## Improving Access to Long-Term Services and Supports through the Balancing Incentive Program (BIP)

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August 2014

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### What is BIP?

The Balancing Incentive Program

- Time-limited opportunity for states to receive enhanced federal funding for:
  - Improving access to home and community-based long-term services and supports (LTSS)
  - Making structural changes to the state’s LTSS delivery system or the “Front Door” to LTSS

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### What are the goals of BIP?

1. Provide more people with the opportunity to receive care outside of institutional settings
2. Help states start up their balancing initiatives
3. Help states further their balancing efforts
  - States like Ohio

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### What are the goals of BIP?

- 4. Create tools to facilitate person-centered assessment and care-planning
- 5. Improve systems performance and efficiency
- 6. Enhance quality measurement and oversight

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### Eligibility and Timeline for BIP

- States spending less than 50% of their total LTSS funding on community-based services are eligible to participate
- Ohio's application was approved on June 12 for a July 1, 2013 effective date

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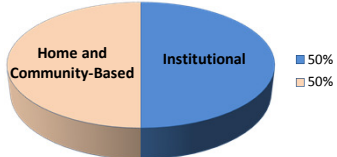
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### BIP Benchmark

- BIP states must achieve a benchmark of 50% percent of total Medicaid LTSS expenditures on community-based (non-institutional) services by September 30, 2015



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**What are the community-based LTSS?**

- HCBS waiver services
- State Plan:
  - Home health services
  - Personal care services
  - Private Duty Nursing (PDN)
  - Behavioral health services
- PACE
- Health Home services

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**3 required structural changes**

1. Conflict-free case management services
2. Core standardized assessment instrument
3. No Wrong Door/Single Entry Point (NWD/SEP) system

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**Conflict-free case management**

- Ensure that the LTSS delivery system is free from conflicts of interest
  - Ideally, a different agency or entity performing:
    - Functional assessment
    - Eligibility determination
    - Case management
    - Service delivery
  - And when there is overlap, appropriate safeguards are in place to lessen the risk of potential conflict

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### Core Standardized Assessment

- Each assessment instrument used to evaluate a person's need for LTSS has a core data set
  - Question set that provides a summative view of the person's support needs in specific topics
    - Activities of daily living (ADLs)
    - Instrumental activities of daily living (IADLs)
    - Managing medications
    - Cognitive functioning
    - Behavior concerns

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### Other Assessment Guidelines

- Supports-based, not deficits-based language
- Question set that is person-centered and serves 2 of the following 3 purposes:
  1. Eligibility
  2. Identifying support needs
  3. Informing service plan

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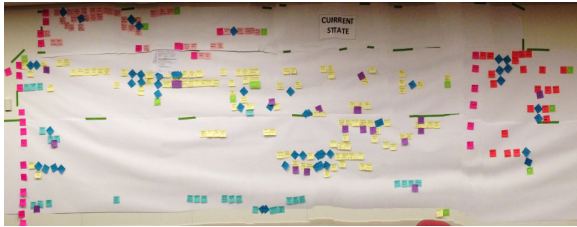
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### Current LTSS system



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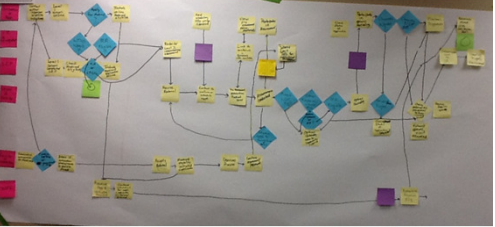
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### Future LTSS system



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### NWD/SEP system

1. Designated Single Entry Point (SEP) agencies
  - Building on current Aging and Disability Resource Networks (ADRN)s

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### A "Brief" ADRC History

- AoA/CMS partnership
- Grants in 2003-2005
- Vision:
  - "To have ADRCs as a single point of entry access in every community, serving as highly visible and trusted places where people of all incomes and ages can find information on a full range of support options and benefits."

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## History, continued

- Key Elements
  - Awareness and Information
  - Assistance
  - Access

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## History, continued

- Ohio's successful application- 2005
- Focused effort on Cleveland area
  - Start with older adult population
  - Add persons over 18 with disabilities
  - Streamlining access plan (across agencies)
  - Target private pay individuals
  - Create formal linkages to critical pathways
  - Management information system

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## History, continued

- Partners:
  - AAA
  - Center for Independent Living
  - CDJFS
  - 2-1-1
  - LTCOP
  - Others (as determined locally)

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### History, continued

- Expansion Grants in 2009
  - ALL regions of the state
  - Part of Unified Long Term Care System
  - Emphasis on partnership and collaboration
  - Key partners
    - AAA and CIL
    - CDJFS, 2-1-1, MHAS, DD, LTCOP, Home Care waiver operator, Managed Care Entities, hospitals, physician offices

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### Some things remain the same

- All populations/ ages/ disabilities
- All incomes
- Medicaid/ non-Medicaid
- Partnership/ collaboration
- Infrastructure building

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### A slight change in direction

- 2010 Key Components
- Information, referral and awareness
- Options counseling and assistance
- Streamlined eligibility determination for public programs
- Person-centered transition support
- Quality assurance and continuous improvement

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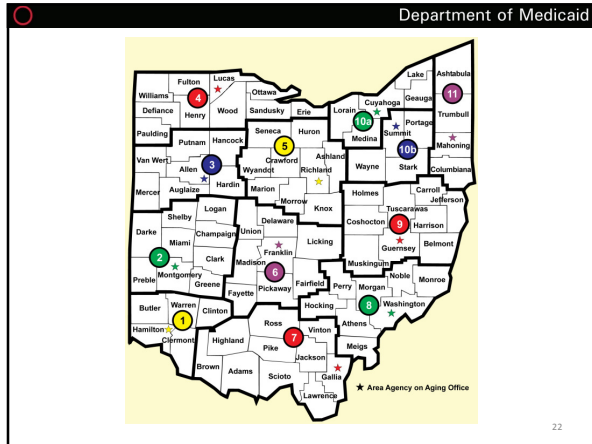
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- Department of Medicaid
- ### NWD/SEP system
1. Designated Single Entry Point (SEP) agencies
    - Building on current Aging and Disability Resource Networks (ADRN)s
  2. Informative website about LTSS options in the State
    - To be developed
  3. Statewide 1-800 number that connects people to SEP agencies
    - To be developed
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- Department of Medicaid
- ### Single entry point (SEP) agency
- Serve people with disabilities who are any age
    - Children and older adults
  - Connect people to the LTSS they need regardless of their disability
    - Physical disability or medical condition
    - Developmental disability
    - Behavioral health needs
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### NWD/SEP system

- Two unique services:
  1. Person-centered Level 1 Screen
    - Medicaid eligibility and LTSS need
    - Potential outcomes:
      - Referral to a community-based service
      - Referral for a more comprehensive functional assessment (Level of care and LTSS needs)
  2. Support Navigator
    - Technology or a real person
      - Person sees them through all steps to enrollment and/or receipt of LTSS

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### NWD/SEP system

- Other services:
  - Options counseling: information about services the person is eligible for and decision support
- Services for people who are not eligible for Medicaid:
  - Options counseling and decision support – to support nursing home diversion

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### Common elements

- All populations, all ages
- All incomes
- Medicaid/ non-Medicaid
- Partnership and collaboration
- Infrastructure

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### Common elements

- Information, referral and awareness
- Options counseling/ Assessment
- Streamlined Eligibility determinations
- Quality Assurance
- Standardized information and common experience

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### September 30, 2015 Deadline

- Complete the 3 required structural changes
- Achieve benchmark of 50% of total Medicaid LTSS expenditures on community-based services

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- Questions?

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**Thank you!**

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