

Medicaid Matters: Updates on Policy

Kim Donica

Bureau of Long-Term Services and Supports

Ohio Department of Medicaid

Fall 2016



Making Ohio Better

Medicaid Matters

Agenda for today

- » Rate changes for 1/1/17
- » Managed Care Update
- » HOME Choice Sustainability
- » BIP Updates



Medicaid Matters

Rate Changes

Medicaid Matters

- Rate Changes

- » Personal Care Aide and Nursing Services were modernized effective 7/1/15

- Resulted in a new definition of a base unit
 - 35 minutes or more
- Established a rate differential between RN's and LPN's
- 2 new services introduced
 - RN assessment and RN consultation

Medicaid Matters

- Rate Changes

- » Goals of modernization included:

- Development of a transparent rate methodology
- Align payment of RN and LPN services with other sectors
- Incentivize longer shifts
- Reimburse for services that providers were required to either provide or contract for

Medicaid Matters

- Rate Changes
 - » ODM has monitored service utilization and expenditures since 7-1-15
 - » ODM received feedback from individuals and providers regarding impact of rate changes and possible access issues
 - » Legislature approved rate increase for aide services in home health benefit effective 1-1-16

Medicaid Matters

Service	Current Base Rate	Current Unit Rate	New Base Rate	New Unit Rate	Service Codes
PASSPORT Personal Care (Max fee in MITS)		\$4.34		\$4.49	T1019UA, T1019UAU2
ODM Waiver Personal Care: Agency	\$22.45	\$3.73	\$23.12	\$3.84	T1019
ODM Waiver Personal Care: Non-agency	\$18.10	\$2.86	\$18.64	\$2.95	T1019
ODM Waiver Personal Care: Non-agency Overtime	\$22.46	\$3.95	\$22.59	\$4.16	T1019TU or T1019AU
Waiver Home Care Attendant: Personal care	N/A	\$2.86	N/A	\$2.95	S5125U8
Waiver Home Care Attendant: Personal care Overtime	N/A	\$3.95	N/A	\$4.16	S5125U8TU or S5125U8AU
Waiver, State Plan Home Health, and PDN Nursing: Agency RN	\$45.40	\$8.32	\$47.40	\$8.72	Waiver Nursing RN (Agency): T1002 State Plan Home Health RN (Agency): G0299 PDN Nursing RN (Agency): T1000TD
Waiver, State Plan Home Health, and PDN Nursing: Agency LPN	\$37.90	\$6.82	\$40.65	\$7.37	Waiver Nursing LPN (Agency): T1003 State Plan Home Health LPN (Agency): G0300 PDN Nursing LPN (Agency): T1000TE
Waiver and PDN Nursing: Non-agency RN	\$38.60	\$6.96	\$38.95	\$7.03	Waiver Nursing RN (Non-Agency): T1002 PDN Nursing RN (Non-Agency): T1000TD
Waiver and PDN Nursing: Non-agency RN Overtime	\$50.43	\$9.92	\$50.82	\$10.01	Waiver Nursing RN (Non-Agency): T1002TU or T1002AU PDN Nursing RN (Non-Agency): T1000TDTU or T1000TDAU

Medicaid Matters

Managed Care Updates

Medicaid Matters

1634/Disability Determination Redesign (DDR) Conversion Enrollment – Newly Medicaid Eligible			
Population	Description	Approximate Number	Managed Care Enrollment
SSI Recipients/SDX File	Known SSI recipients who have not previously had Medicaid coverage.	11,000	January 1, 2018
Delayed Spenddown	Met spenddown once in last 12 months	35,000	January 1, 2018
1915(i) – Specialized Recovery Services (SRS) Program			
	Delayed Spenddown (SRS Aid Code)	5,500	January 1, 2018
	Newly Eligible due to SRS Clinical Diagnosis ((i) Aid Category)	Using Aid code to exempt from managed care enrollment.	January 1, 2018
	Currently Eligible and Enrolled in Medicaid – SRS Clinical Diagnosis	Anticipate minimal	Maintain current managed care/MyCare enrollment.
	MyCare – Recurring Spenddown	120	Maintain MyCare enrollment.
Adult Extension	Adult Extension members enrolled in managed care able to have HCBS waiver services (Ohio Home Care (OHC), Passport (PP), Assisted Living (AL)) – Waiver services carved out to FFS	785 currently enrolled in waiver could elect to move to adult extension if they are eligible at redetermination.	Maintain managed care enrollment.

Medicaid Matters

January 1, 2017 – New Populations				
Population		Mandatory / Voluntary	Approximate Number	Managed Care Enrollment
Foster / Children in Custody	*Effective Jan. 1, 2017 – all kids in custody Medicaid eligibility will be done in SACWIS	Mandatory – Separate Rate Cell	14,000	January 1, 2017
Adoption Children	*Effective Jan. 1, 2017 – all kids in custody Medicaid eligibility will be done in SACWIS	Mandatory – Separate Rate Cell	12,000	January 1, 2017
BCMh		Mandatory – Current Rate Cell	1,200	January 1, 2017
BCCP		Mandatory – ABD Rate Cells	750	January 1, 2017
DD Waiver		Voluntary	Anticipating low enrollment	January 1, 2017

Medicaid Matters

HOME Choice Sustainability

Medicaid Matters

Ohio Department of Medicaid

HOME Choice Program Activity (as of October 31, 2016)

Program Area	Indicator	Statistics
HOME Choice Transitions (enrollments) To-Date	Total HOME Choice Transitions To Date:	8,950
	– HOME Choice Transitions (2008-2015)	7,423
	– New HOME Choice Transitions in 2016	1,527

Medicaid Matters

HOME Choice Sustainability

- What will stay the same:
 - » HOME choice brand will be maintained
 - » Populations Served
 - » Operational infrastructure including maintain the HOME Choice Operations Unit

Medicaid Matters

HOME Choice Sustainability

- What will stay the same:
 - » Qualified residence requirements
 - » Program enrollment for 365 days post discharge
 - » Limits on Services

Medicaid Matters

HOME Choice Sustainability

- What will change:
 - » Success Project folded into Home Choice
 - » Quality of Life Survey Discontinued
 - » Length of stay requirement will be reduced from 90 to 60 days

Medicaid Matters

HOME Choice Sustainability

- What will change:
 - » Length of stay requirement will be reduced from 90 to 60 days
 - » Residential Care Facilities will be a qualified institution for purposes of HOME Choice

Medicaid Matters

HOME Choice Sustainability

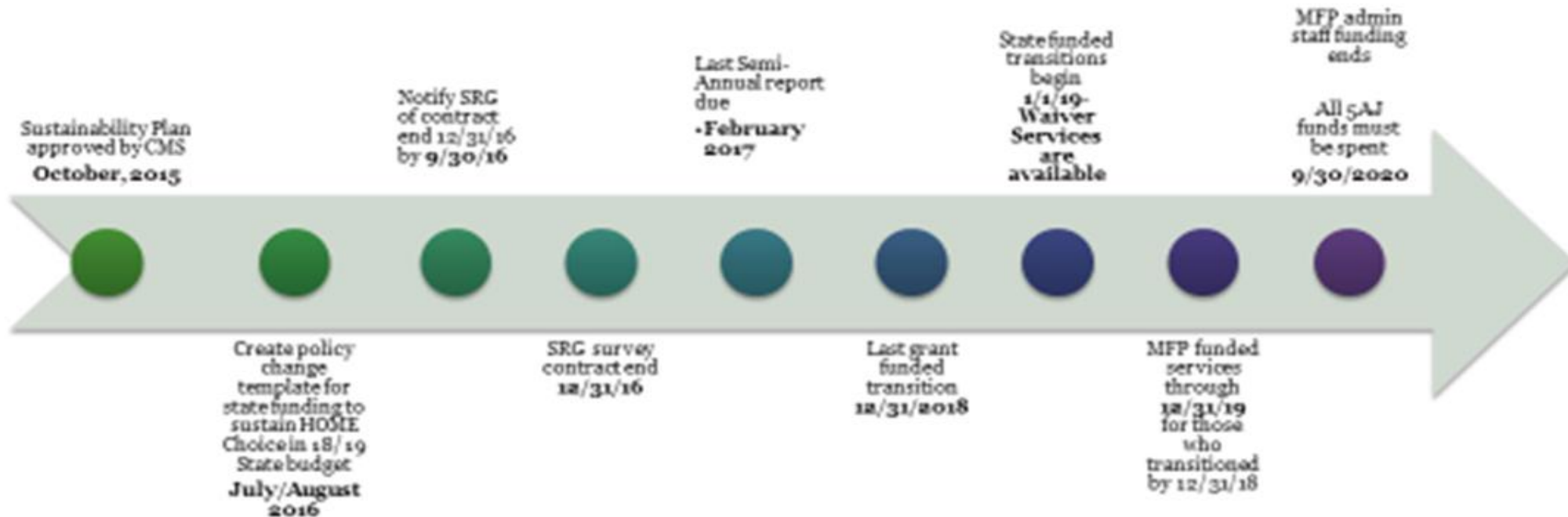
- Services
 - Pre-Transition Case Management and Transition Coordination will be combined into 1 service (TC will continue to be available 90 days post-discharge)
 - Community Transition Services will be available to individuals who cannot receive through a HCBS waiver
 - Community Living Specialist Service will be maintained

Medicaid Matters

HOME Choice Sustainability

- Services
 - Community Support Coach and Independent Living Skills Training will be combined into a new services called Community Integration Supports
 - Emergency Housing Navigation, Service Animals, HOME Choice Nursing, Social Work Counseling, Nutritional Counseling, Communication Aids, Respite Services will be eliminated

HOME Choice Timeline



SUBJECT TO CHANGE

7/21/2016





Medicaid Matters

BIP Updates

Medicaid Matters

BIP Updates

- ODM still planning to implement the Balancing Incentive Program redesigned front door to LTSS (Ohio Benefits Long-Term Care)
 - Implementation will be phased
 - Includes implementation of new, automated level of care assessment tools
 - Obsoleting the ODM 3697/alternative process
 - Revised level of care criteria and determination process rules

Medicaid Matters

BIP Updates

- Hospitals and NFs will submit level of care requests through Ohio Department of Aging's system, HENS
 - Adult Level of Care Questionnaire (LOCQ) has been built, tested and validated
 - Hospitals and NFs will attach documentation to LOCQ
 - PAAs will do level of care desk review determination
- PASRR
 - National PASRR conference in Spring of 2017
 - PASRR work on-going



Questions?



Contact Information

Kimberly J. Donica

Chief, Bureau of Long Term Services and Supports

The Ohio Department of Medicaid

Phone:614-752-3523

Kimberly.Donica@medicaid.ohio.gov

**MAKING
OHIO
BETTER**

