



# Service Disrupted: MLTSS Falling Short for Adults with Intellectual and Developmental Disabilities



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***January 16, 2020***

# Housekeeping

- This event is being recorded
- All callers are on mute
- We will run Q&A through the Chat function
  - To submit a question, click the Q&A icon located at the bottom of your screen
- For audio you can dial in
- We will send out the slides

# Speakers



**Madison Tallant**  
Program and Policy Coordinator  
Community Catalyst



**Lara Kassel**  
Coalition Coordinator  
Medicaid Matters New York



**Alice Dembner**  
Senior Policy Analyst, LTSS  
Community Catalyst

# Agenda

1. Purpose and Process
2. Major Findings and Recommendations
3. Presentation from Lara Kassel, Coalition Coordinator,  
Medicaid Matters New York
4. Q & A

# Quick Review

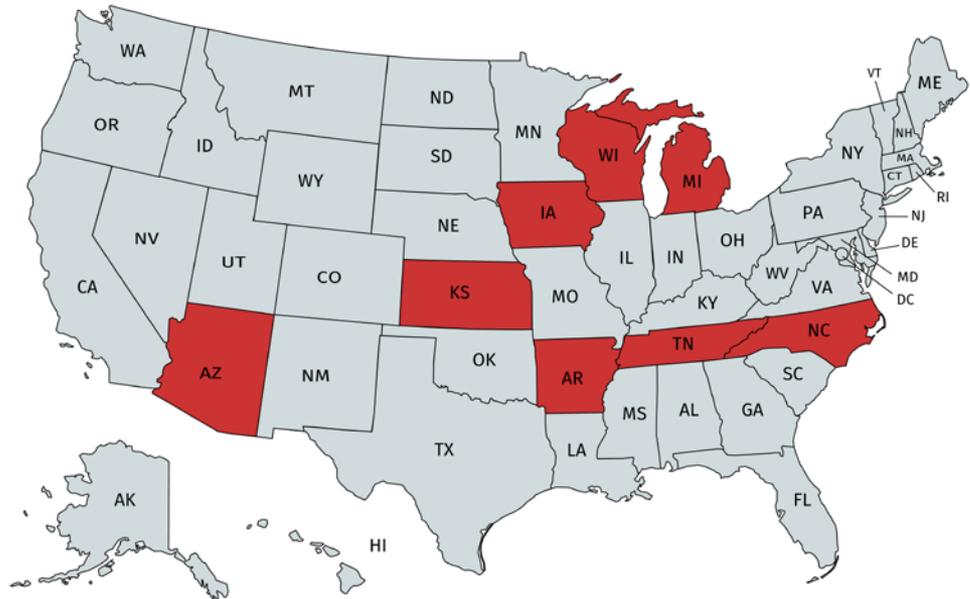


- What is LTSS?
  - Long-Term Services and Supports
    - Institutional Care and Home and Community Based Supports (HCBS)
- What are Intellectual and Developmental Disabilities?
  - Developmental disabilities are chronic disabilities that can be cognitive and/or physical
  - Intellectual disabilities are a type of developmental disability that affects intellectual functioning and adaptive behaviors
- Why this topic?
  - The number of states looking to implement this program has grown.
  - Eight have statewide programs, several more have taken steps toward statewide MLTSS.

# Process

- Reviewed MLTSS programs in eight states:

- Arizona,
- Arkansas,
- Iowa,
- Kansas,
- Michigan,
- North Carolina,
- Tennessee and
- Wisconsin



# Major Findings: Key Issues

- Services Disrupted, Denied or Out of Reach
- Limited Consumer Engagement in Planning, Implementation and Oversight
- Weak Oversight and Protections



Delaine and Duane Petersen with their children, Matthew and Leslie.

# Major Findings: Glimmers of Hope

Three programs have had **some benefits** for consumers:

- Tennessee
  - **access** to services
- Wisconsin
  - increase in integrated **employment**
- Michigan
  - **ended waiting list** for IDD services



Jacob Webne and Melanie Lutenbacher

# Recommendations



- **Resist** any move to managed care for the **sole purpose of saving money**. Proceed with extreme caution in other cases.
- **Authentically engage consumers** in program planning, implementation and oversight
- Build a **robust provider network**, including experienced case managers and direct service workers
- Exercise **strong oversight**

# Recommendations

- Establish **strong quality measures**
- Gather, analyze and **publicly release** grievance and appeals **data**
- Require **consumer-centered policies** in all aspects of MLTSS program design

# Medicaid Matters NY

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- Statewide coalition of organizations representing the interests of New Yorkers served by the Medicaid program
- Established in 2003 in response to threats to Medicaid at the state and federal levels
- Systems advocacy on behalf of Medicaid beneficiaries is crucially important because of the many competing interests in Albany

# Medicaid Managed Care in New York

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- In place in New York since the mid '90s
- Significant expansion in 2011, referred to as “Care Management for All”
  - Multi-year roll-out to remove managed care exemptions and exclusions
  - People and benefits/services previously provided on a fee-for-service basis now provided through managed care

# Transition to Medicaid Managed Care for People with I/DD

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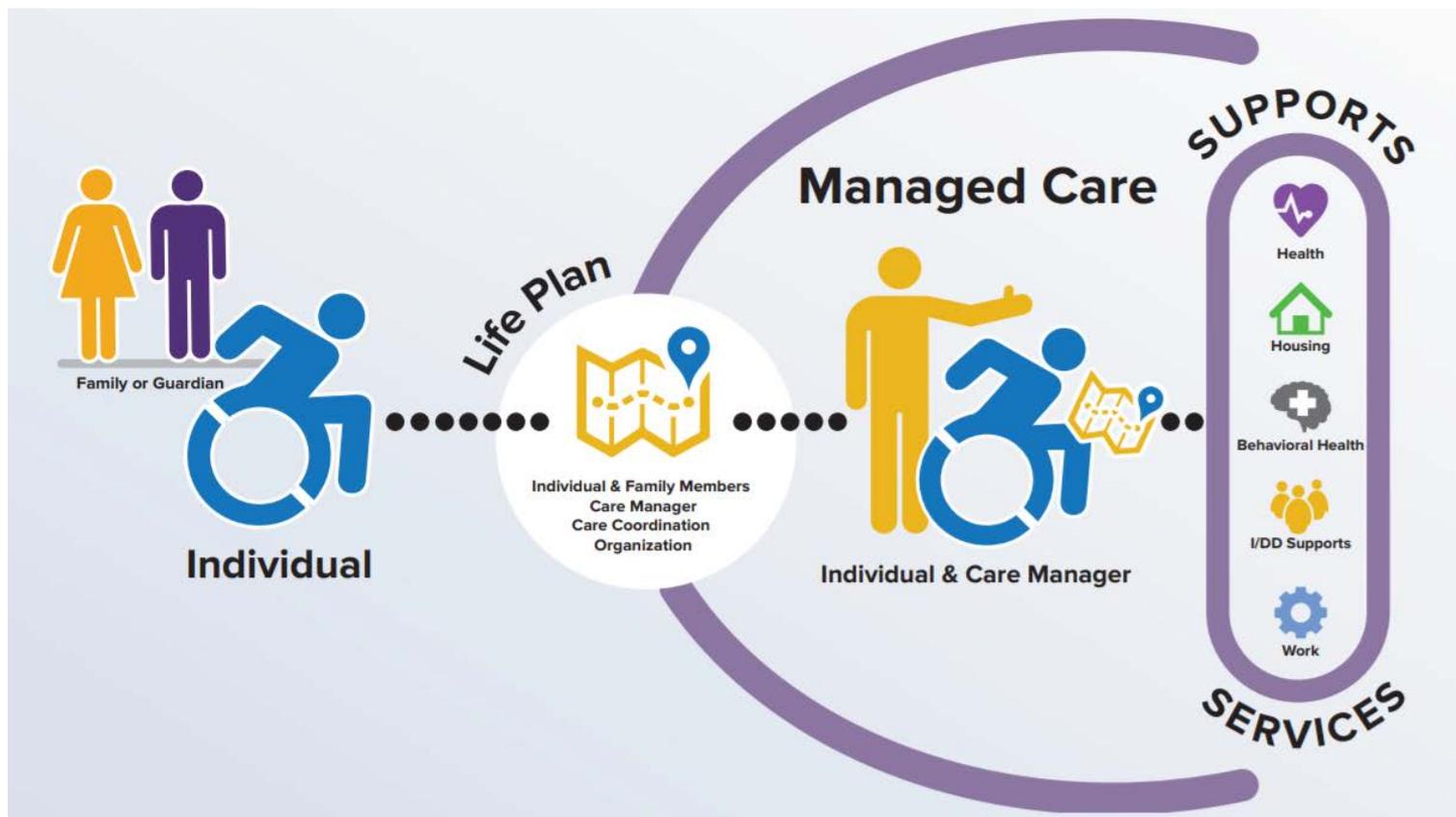
- NYS Office for People with Developmental Disabilities has been discussing this for many years; “evolution”
- Fully-Integrated Duals Advantage-IDD (FIDA-IDD)
  - Began in April 2016
  - Approx. 1000 people enrolled
  - Metro New York area
  - Relies on interdisciplinary team
  - Voluntary
- Approx. 25,000 people are enrolled in mainstream managed care for their medical / non-OPWDD needs

# Transition to Medicaid Managed Care for People with I/DD (continued)

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- Care Coordination Organizations, July 2018
  - Precursor to managed care
  - Mandatory enrollment
  - Replaces Medicaid Service Coordination program
  - New assessments
  - Development of Life Plans, by December 2019
- Managed care forthcoming
  - Specialized I/DD Plans-Provider Led (SIP-PL)
  - OPWDD timing unclear
  - Many big questions remain

# Transition to Medicaid Managed Care for People with I/DD (continued)



OPWDD brochure, "The Evolution of Supports and Services: Managed Care"

**Medicaid**  
**Medicaid Matters New York**  
**Matters**

# Goals of Managed Care

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- Cost control
- Quality improvement
- Population health
- Access to broad array of services
- NYS OPWDD: to find equity

# Consumer advocacy concerns

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- Honoring *Olmstead*
- Network adequacy
- Access to all needed services
- Meaningful care coordination
- Cultural competency
- Communication
- Person-centered
- Choice and rights

# Pursuing funding to support this work

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- Highlight how this population is unique and deserves distinct advocacy attention
- Remind potential funder of the impact of state-level advocacy on the program as a whole
- Claim previous wins that are relevant and expertise gained to lend to the new work

# Our advocacy goals

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- Ensure meaningful care coordination
- Independent ombuds services
- Due process protections
- Clear communications (i.e. notices)
- Individual and family member representation on advisory bodies

# Our advocacy goals (continued)

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- Person-centered, evidence-based assessments
- Preservation of self-direction
- Honor *Olmstead*
- Administrative costs not to come from services

# How will we get there?

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- Legislative
  - State statute
  - State budget
- Administrative
  - Managed care contract
  - Regulations, guidance
- Individual and family member voices
  - Opportunities for public comment
  - Participation on state bodies
- Coalition building

# Thank you!

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# Questions?

**Thank you!**

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