Everett Medicaid Transformation Waiver Application Forum

An Opportunity for Public Comment and Conversation

August 3, 2015

Presenters

Health Care Authority

- **Nathan Johnson,** Chief Policy Officer
- **MaryAnne Lindeblad,** Medicaid Director

Department of Social and Health Services

- **Bea Rector,** Director, Home and Community Services
  Aging and Long Term Support Administration
- **Jane Beyer,** Assistant Secretary
  Behavioral Health and Service Integration, DSHS

Community Representatives

- **Jay Fathi**, Coordinated Care
- **Dan Murphy**, Area Agencies on Aging
- **Mary Wahl**, Catholic Community Services of Western WA

Agenda

8:00-9:00	Presentation
9:00-9:20	Small groups share and discuss their top questions and comments
9:20-10:00	Questions, comments and responses *Starting with small groups' questions, and opening up for additional questions and comments as time permits.*

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Healthier Washington is creating healthier communities and sustainable health systems by:

- **Building healthier communities through a collaborative regional approach**
- **Ensuring health care focuses on the whole person**
- **Improving how we pay for services**

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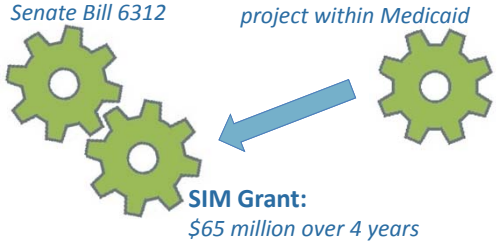
Healthier Washington includes Medicaid Transformation.

2014 Legislation:
- *House Bill 2572*
- *Senate Bill 6312*

Medicaid Transformation
Potential demonstration project within Medicaid



SIM Grant:
$65 million over 4 years from the federal government

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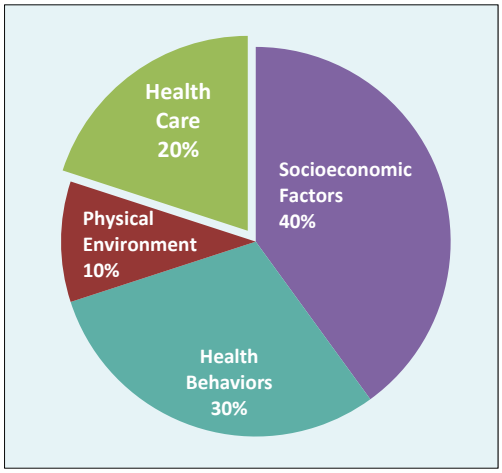
Better Health, Better Care, Lower Costs

Healthier Washington recognizes that good health depends on high-quality health care and more…



Adapted from: Magnun et al. (2010). *Achieving Accountability for Health and Health Care: A White Paper*, State Quality Improvement Institute. Minnesota.

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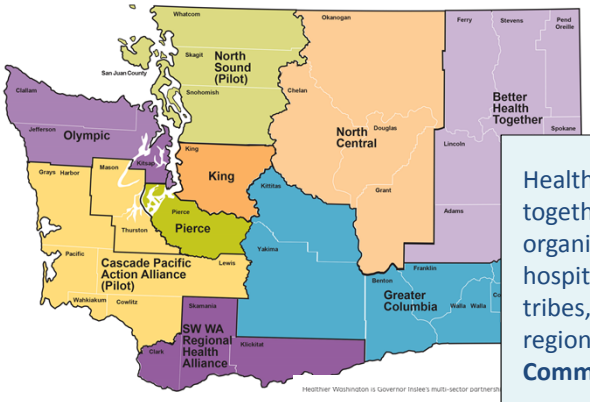
…and that the best way to improve people's health is in the community where they live, work, and play.



Healthier Washington is bringing together providers, social service organizations, health plans, hospitals, county governments, tribes, and others through nine regional **Accountable Communities of Health (ACHs)**.

ACHs will support communities in making informed decisions on health needs and priorities.

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A transformed system = transformed lives

Current System	Transformed System
Fragmented clinical and financial approaches to care delivery	**Integrated** systems that deliver whole person care
Disjointed care and transitions	**Coordinated** care and transitions
Disengaged clients	**Activated** clients
Capacity limits in critical service areas	**Optimal access** to **appropriate** services
Individuals impoverish themselves to access long term services and supports (LTSS)	Timely supports delay or divert need for Medicaid LTSS
Inconsistent measurement of delivery system performance	**Standardized performance measurement** with **accountability** for improved health outcomes
Volume-based payment	**Value-based** payment

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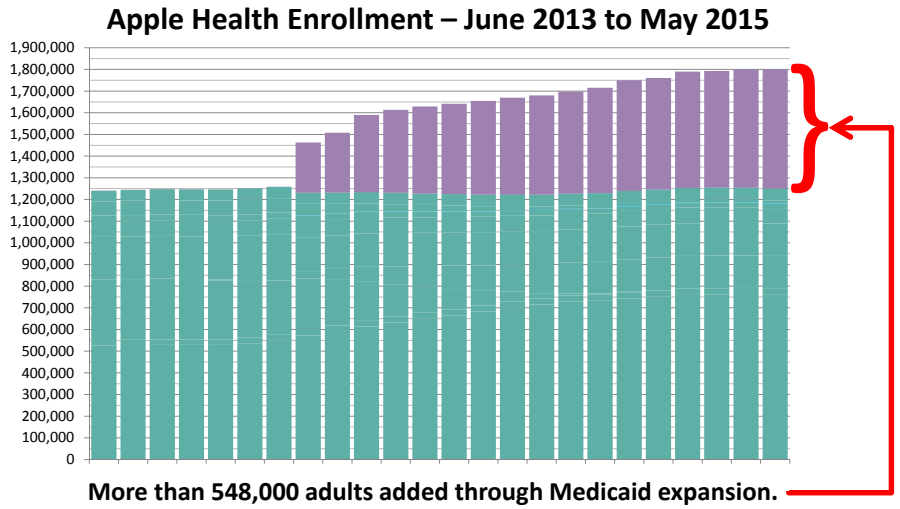
Washington has increased its Medicaid enrollment by 44%...



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…and the enrollees and their needs are different.

- Before the Affordable Care Act, 60% of enrollees were children; now the majority of enrollees (55%) are adults.
- 22% of the new adult enrollees have a mental health diagnosis.
- 14% have a substance use disorder.
- And, while the new adult group has lower hospital admission rates than other non-disabled adults, their inpatient stays average 50% longer.

Data provided by Research and Data Analysis, DSHS, June 2015.

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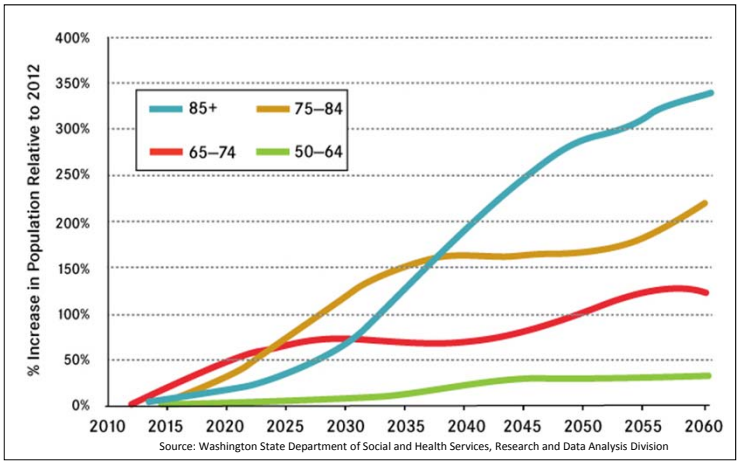
In addition, there will soon be many more people age 65 and over in our state...



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…and their health care needs are likely to increase as they age.

- By 2035, the number of people age 75 or older will have risen by roughly 150%.
- Between 2010 and 2040, we anticipate a 181% increase in Medicaid clients over age 65 with Alzheimer's.
- 70% of people who reach the age of 65 are likely to need long term supports and services at some point in their lives.
- Biennial expenditures by the state for long term supports and services are currently $3.4 billion—or 6 percent of all general fund spending.

Data provided by Research and Data Analysis, DSHS, June 2015.

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What the Medicaid Transformation waiver does for us:

- Gives Medicaid the flexibility and expenditure authority to achieve our vision for a Healthier Washington.
- Allows us to test, scale, and spread new models of care.
- Supports providers in building capacity.
- Builds connections within communities that allow for the right care, at the right place, at the right time, with the right provider.

Medicaid Transformation Goals

- **Reduce avoidable use of intensive services**
  - such as acute care hospitals, nursing homes, psychiatric hospitals, and traditional long-term services and supports.
- **Improve population health**
  *- with a focus on the most critical measures for Medicaid beneficiaries and local communities.**
- **Accelerate the transition to value-based purchasing**
  - so providers are paid for higher quality and improved health outcomes.
- **Ensure that Medicaid cost growth is two percentage points lower than national trends.**

*Such as prevention and management of diabetes and cardiovascular disease, obesity, smoking, mental illness, and substance abuse.

Three Medicaid Transformation Initiatives

Initiative 1: Transformation through Accountable Communities of Health

Initiative 2: Targeted Long-Term Services and Supports for At-Risk Individuals

Initiative 3: Targeted Foundational Community Supports

Transformation through Accountable Communities of Health

Initiative 1

The State will:

- Establish a menu of transformation projects that ACH members can choose for their communities.
- Monitor progress and distribute funds based on project performance.

ACHs will:

- Lead and oversee transformation projects.

ACH members, working collaboratively, will:

- Select from projects to apply for and pursue, based on each ACH's regional priorities, from the State's menu of projects.

Parameters for projects will be established by the State. Some statewide projects may be required.

ACHs will coordinate regional transformation efforts.

Initiative 1

ACHs will:

- Organize ACH members and partners.
- Coordinate project applications.
- Contract to receive State funds.
- Distribute funds to partners carrying out transformation projects.
- Report on progress.
- Work with the State and partners to ensure sustainability.

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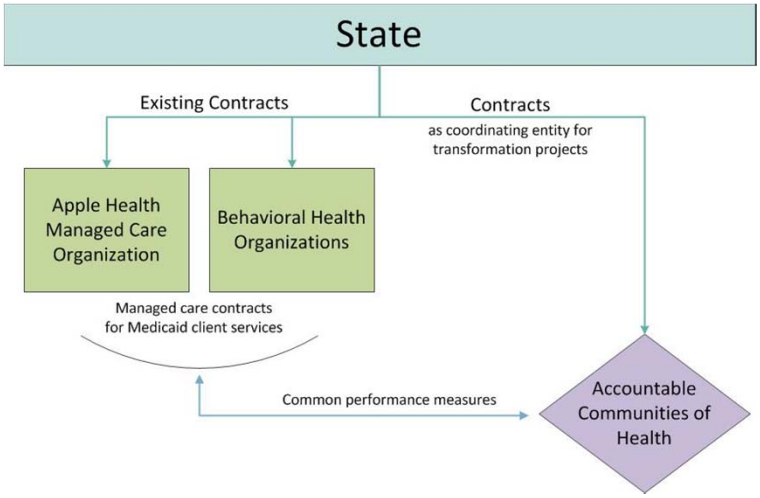
Contracts with ACHs will not affect the State's other managed care contracts.



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Potential transformation projects

Initiative 1

Health Systems Capacity Building	Delivery System Transformation	Population Health Improvement
Workforce Development	Bi-directional integrated delivery of physical & behavioral health services	Prevention Activities for targeted populations and regions
System infrastructure, technology & tools	Transitional care focused on specific populations	
Provider system supports to adopt value based purchasing and payment	Alignment of care coordination & case management to serve the whole person	
	Outreach, engagement & recovery supports	

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Targeted Long-Term Services and Supports

Initiative 2

Washington will tailor long-term services and supports benefits to meet the diverse needs of our aging population by:

- Providing two new benefit packages, one with a new eligibility category to ensure that individuals receive the services and supports they need to avoid or delay more intensive services
- Revising eligibility criteria for nursing home services so that people with the lowest needs do not qualify for these services.

Individuals currently served in nursing facilities will continue to be eligible for this level of care.

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Targeted Foundational Community Supports

Initiative 3

Washington will provide targeted supportive housing and supported employment to clients that meet criteria set by the State.

The criteria will target those individuals most likely to benefit from these services.

Clients will receive supportive services; Medicaid funds will not be used to provide housing or jobs.

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Supportive Housing

Initiative 3

- Targeted to individuals who meet specific risk criteria, such as individuals:
  - Who are homeless and have behavioral health conditions
  - Need long-term services and supports
  - Are exiting inpatient institutional settings
- Activities might include:
  - Individual Housing Transition Services
  - Individual Housing & Tenancy Sustaining Services

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Supported Employment

Initiative 3

- Targeted to Medicaid participants with serious and persistent mental illness or eligible for long-term services and supports, who:
  - Wish to become employed and
  - Need intensive ongoing support to get and keep a job.
- Jobs are anticipated to be at or above the minimum wage.

Federal Requirements

- **Five-year demonstration project**
  - Project goals must be met within 5 years.
- **The State must not spend any more federal dollars than they would have spent without the project.**
- **Ongoing evaluation must be done**
  - to test and confirm how well the program, and its projects, achieve the intended benefits.
- **Transformation must be sustainable after the demonstration period ends**
  - the State and ACHs must develop sustainability plans for projects they take on.

Perspectives from our Community Partners

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Your turn

For the next **20 minutes**:

5 min. Write down your top questions or comments.

10 min. Break into a small group with 5 to 6 people sitting close to you, introduce yourselves and share your top questions or comments.

5 min. Decide as a group on your top 2 questions or comments and a spokesperson to present those issues.

We want to know what you think.
*Please write down **all** of your ideas on the survey.*
We'll collect them at the end.

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Timeline

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Stay informed

Join the Healthier Washington Feedback Network:
healthierwa@hca.wa.gov

Send comments and questions about Medicaid Transformation to: medicaidtransformation@hca.wa.gov

Learn more and take the Medicaid Transformation waiver survey at:
http://www.hca.wa.gov/hw/Pages/medicaid_transformation.aspx

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