A Call to Action:
Redesigning Medicaid LTC

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Today’s Task

- What AARP Wants
- Innovations in Long-Term Care in 50 States
- 20 Minutes!!
What AARP Wants

- Consumer Independence
- Dignity
- Autonomy
- Choice
Medicaid LTC $$ for FY 2003: Institutional vs. Community-Based

United States

- Home and Community Services 33.1%
- Nursing Facilities 53.4%
- ICF/MR Facilities 13.5%

Medicaid LTC $$ for FY 2004: Great State Variation

Percentage of Medicaid Long-Term Care Expenditures Going to Community-Based Services

- Oregon: 70.5%
- New Mexico: 67.6%
- Alaska: 62.1%
- U.S. Average: 35.5%
- Tennessee: 17.3%
- Washington DC: 11.7%
- Mississippi: 5.2%

Source: Medstat, 2005.
Medicaid LTC $$ for FY 2004: Georgia

Percentage of Medicaid Long-Term Care Expenditures Going to Community-Based Services

<table>
<thead>
<tr>
<th>State</th>
<th>Percentage</th>
</tr>
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<tbody>
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<td>Oregon</td>
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<td>17.3%</td>
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<td>Washington DC</td>
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<tr>
<td>Mississippi</td>
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Source: Medstat, 2005.
Single Point of Entry

- “No Wrong Door”
- “One-Stop-Shopping”
- Neutral, independent entity
Money Follows the Person

Some Examples

New Mexico

New Jersey

Texas

More to come
Money Follows the Person (con’t)

- Rider 37 in 2001; Rider 28 in 2003, statute in 2005
- Transfer funds from NH budget to HCBS when folks are transferred from NH to community care
- More than 9,300 transferred

Texas
Nursing Home Diversion

- **Bottom Line:** The earlier diversion programs intervene, the more likely they are to prevent a long-term stay

- Pre-admission Screening
- Hospital Discharge Education
- Presumptive Eligibility
Nursing Home Diversion (con’t)

Oregon and Maine
- Mandatory screening for all NH applicants

Wisconsin
- Voluntary info and options counseling

Massachusetts & Washington
- Post-admission screening
Hospitals are responsible for almost 50% of nursing home admissions.

New Hampshire
- Hospitals required by law to inform the state of discharges to nursing homes

Minnesota & Indiana
AAA case managers work with hospital discharge planners

From 2002-2004, 1,500 patients diverted

Average monthly cost per diverted recipient was $2,232 as compared to $2,800 in nursing home
Presumptive Eligibility

- Allows care managers—based on info in the Medicaid application—to initiate services before an official determination is completed
  - Michigan
  - Nebraska
  - Ohio
  - Pennsylvania
  - Washington
Presumptive Eligibility (con’t)

- Goal: No consumer enters a nursing home because of delays in process the application
- AAAs are encouraged to serve the applicant ASAP
- Less than 2% of approved applications were in error
Presumptive Eligibility (con’t)

- Since 1985
- AAAs for the PASSPORT program
- Services may be initiated ASAP
- Over ½ application processed
- Error rate is about 1% of applications
Presumptive Eligibility (con’t)

- Care coordinators can authorize services temporarily for 90 days
- Application over phone, by mail or home visit
- Average time down from 37 to 17 days
- Saves Medicaid an average of $1,964 per month

Washington State
Presumptive Eligibility (con’t)

WARNING:

Address Waiting Lists
Consumer Direction

- Consumers direct their personal assistance services

- Different Types
  - Agency Model
  - Budget Authority
Cash and Counseling

States with Cash and Counseling Programs

Source: www.cashandcounseling.org
<table>
<thead>
<tr>
<th>Program Name</th>
<th>Funding</th>
<th># of Counties Served</th>
<th># of Caregivers Served</th>
<th>Voucher/Reimbursement</th>
<th>Avg. Annual Amount Offered</th>
<th>Can Family Members Be Paid?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legacy Express</td>
<td>NFCSP</td>
<td>8</td>
<td>84</td>
<td>Voucher</td>
<td>$1,000</td>
<td>No</td>
</tr>
<tr>
<td>Southwest Georgia Council on Aging</td>
<td>NFCSP</td>
<td>6</td>
<td>80</td>
<td>Reimbursement</td>
<td>$1,750</td>
<td>Yes</td>
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<tr>
<td>Jewish Family &amp; Career Services</td>
<td>NFCSP</td>
<td>10</td>
<td>60</td>
<td>Voucher</td>
<td>$500–$1,200</td>
<td>Yes</td>
</tr>
<tr>
<td>Caregiver Timeout</td>
<td>NFCSP</td>
<td>35</td>
<td>208</td>
<td>Reimbursement</td>
<td>$1,200</td>
<td>Yes</td>
</tr>
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</table>
Consumer Direction (con’t)

Figure 1: Consumer Preferences for Managing and Paying Home Care Workers

- Consumer receives money, manages and pays workers: 53%
- Agency receives money, manages and pays workers: 15%
- Consumer manages workers; agency receives money and pays workers: 25%
- Unsure / No response: 7%

Source: AARP, Beyond 50:03
Challenges

- Short-Term Cost Cutting
- $$$ for Home and Community-based Infrastructure
- Shortage of Direct-Care Workers
Opportunities

- Person Centered and Family Centered Planning
- Money Follows the Person
- Consumer or Self Direction