Reform 2020 Section 115 Waiver:
Annual Public Forum

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Orientation to Today’s Discussion

DHS HCBS Values and Vision

HCBS systems change

Reform 2020

Non-1115 Waiver Requests

1115 Waiver Requests

Non-1115 Waiver
Section 1115 Waivers

Section 1115 of the Social Security Act allows states to waive certain requirements under Medicaid or use Medicaid funds in ways that are not otherwise allowed under federal rules

- Demonstrate new policy or delivery approaches that promote the objectives of the Medicaid program
- Must be budget neutral to the federal government over course of waiver
- State must conduct an evaluation and report on demonstration outcomes
Reform 2020 1115 Waiver

• Federal support for the Alternative Care Program
  – Status:
    • Receiving Federal Financial Participation
    • Implementing required evaluation

• Federal authority to expand access to the Community First Services and Supports (CFSS) program for people not otherwise eligible
  – Status:
    • Withdrawn from Reform 2020 waiver in March 2018
    • Implementation will require federal authority via state plan amendment
    • DHS plan for CFSS implementation continues
Reform 2020 1115 Waiver, cont.

• Approved by the Centers for Medicare & Medicaid Services through June 30, 2018

• Minnesota’s request to renew for another three-year period, through June 2021.

• Currently operating under temporary extension through March 31, 2019
Updates: Who is covered under CFSS?
Short Answer

Eligibility for CFSS will be the same as eligibility for PCA.
Currently . . .

Medical Assistance

Current PCA participants
To offer CFSS, initially we needed to . . .

Current PCA participants
Due to population shifts because of the ACA . . .

Current PCA participants
Alternative Care Evaluation

• Compare the AC population before and after November 1, 2013 when the waiver was implemented, and compare the AC population to the Elderly Waiver population before and after November 1, 2013.

• Evaluation looks at:
  – Level of need, demographic characteristics, and service use patterns for AC and EW over time
  – Use of and access to consumer-directed options
  – Length of time in the community compared to NF use
  – Use of Essential Community Supports, a program designed to serve seniors with emerging needs for community support
Evaluation, continued

• Outcomes will be examined for AC participants alone, and in comparison to Elderly Waiver participants
• DHS expects the evaluation to show that AC participants have equal or better outcomes, compared to the pre-demonstration AC program
• Evaluation provides DHS an opportunity to examine outcomes for both AC and EW populations with a analytic, research-based approach.
• Understanding better how these programs support older Minnesotans will help DHS to respond to expected increase in demand for services as the population of people age 65 and older grows
Examples of Interim AC Evaluation

Findings

• Trends in the AC program show consistent patterns pre-demonstration and since the implementation of the 1115 waiver

• The demographics of AC participants changed very little from 2012-2015.

• The use of CDCS services among AC participants increased from 3% in 2012 to 5% in 2015. Only 2% of EW participants were using CDCS services each year.
Future Activities

• Annual reports to CMS on the progress made in implementation of the evaluation plan.
• Additional repeated analysis at points in time (snapshots) will add more statistical analysis.
• Follow groups of people or cohorts over time to look at outcomes related to NF admission, mortality, length of time in the community.
• Final report at the end of the waiver approved period.
Opportunity for Public Comment