

May 2, 2013

Ms. Courtney Burke
Commissioner
New York State Office for People With Developmental Disabilities
44 Holland Avenue
Albany, NY 12229-0001

Dear Commissioner Burke:

In response to the request by the Office for People with Developmental Disabilities (OPWDD) for Letters of Intent and Expressions of Interest – Specialized Managed Care for Individuals with Developmental Disabilities, we would like to take the opportunity submit the following proposal for your consideration. ArchCare would like to work with OPWDD to create a Program of All-inclusive Care for the Elderly (PACE) for individuals with intellectual and developmental disabilities (IDD). This managed care model would be highly synergistic with OPWDD's goals of providing holistic, person-centered care in the most integrated setting that fosters quality of life, community participation and meaningful relationships. This innovative model would leverage the experience of ArchCare's Managed Long Term Care Plan (MLTCP) as a PACE provider since 2009, as well as the experience of the OPWDD Clinic at ArchCare's Terence Cardinal Cooke Health Care Center that has been serving this vulnerable population for over 35 years.

The philosophy and core components of PACE are highly consistent with the principles of serving individuals with IDD. PACE respects autonomy and choice, serves individuals in the location where they choose to live, and optimizes community supports that help individuals achieve their personal goals, particularly related to community participation and maintaining meaningful relationships. The model includes person-center care coordinated by an interdisciplinary care team based on a comprehensive uniform assessment, and health and supportive services to meet each individual's needs. Importantly, PACE is a proven evidenced-based model of integrated care (both acute and long term care) designed to serve low-income frail elders in the community that can be appropriately adapted to meet the needs of aging individuals with IDD. A more fully-developed concept paper is attached to this letter.

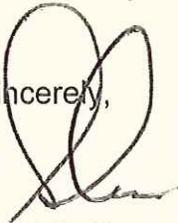
The proposed IDD-PACE program will expand community-based long term support services which will forestall the need for admissions into institutional/nursing homes settings. It is envisioned that the service area of the program can encompass New York, Bronx and Richmond counties. ArchCare Senior Life's Board of Trustees is comprised of experienced professionals who are dedicated to guiding the organization to the forefront of long-term care. Board members come from diverse fields, such as medicine and health care services, business, law, public policy, banking, finance, technology, and

insurance. The PACE model also includes a Participant Advisory Council (PAC), which provides regular input to program leadership. Representatives from the PAC also attend and have direct input at the Board of Trustees' meetings.

Consistent with New York State's move towards *Care Management for All* and the OPWDD People First Waiver, ArchCare is seeking to create a person-center, provider-based model of managed care for individuals with intellectual and developmental disabilities who are also experiencing frailty and chronic illnesses related to aging. The proposed IDD PACE program would also advance the goals of the Balancing Incentive Program by creating access to new home and community based services and forestalling the need for institutional nursing home care. The proposal would offer OPWDD individuals the option to choose a high-touch care management option. With the improved life expectancy for individuals with developmental disabilities, IDD PACE program would be tailored to the unique needs of OPWDD older adults.

We would like to meet with you to discuss how we can work collaboratively so that the PACE model of care can become a managed care option for individuals with intellectual and developmental disabilities. Thank you for your consideration.

Sincerely,

A handwritten signature in black ink, appearing to read 'Scott LaRue', written over the word 'Sincerely,'.

Scott LaRue
President & CEO

cc: James Introne
Mark Kissinger



ArchCare Initiative to Leverage the PACE Model Of Care To Meet The Needs Of Individuals With Intellectual And Developmental Disabilities

Executive Summary

Consistent with New York State's move towards *Care Management for All* and the Office for Persons with Developmental Disabilities (OPWDD) People First Waiver, ArchCare proposes to create a person-centered, provider-based model of managed care for individuals with intellectual and developmental disabilities (IDD) who are also experiencing frailty and chronic illnesses related to aging. Building on its experience as an OPWDD healthcare provider and a Program of All-inclusive Care for the Elderly (PACE), and its partnerships with other OPWDD providers, ArchCare will develop a PACE Program tailored to the needs of those with intellectual and developmental disabilities, ages 55 and older. The model includes person-centered care coordinated by an interdisciplinary care team based on a comprehensive uniform assessment, and health and supportive services to meet each individual's needs. The core components of PACE align with the principles of serving those with IDD by respecting autonomy and choice, by serving individuals in the location where they choose to live, and by maximizing community supports that help individuals achieve their personal goals, particularly related to community participation and maintaining meaningful relationships. This proposal will expand community-based long term support services which will forestall the need for admissions into institutional/nursing homes settings.

Background

The New York State Medicaid Redesign Team's *Care Management for All* initiative began in 2012 with the goal of increasing enrollment by Medicaid recipients in managed care programs from 77% to 95% by 2016. This shift away from fee for service (FFS) Medicaid to a capitated, coordinated care model is expected to improve benefit coordination, quality of care and health outcomes for patients, as well as reduce costs for New York's health care system. Similarly, individuals with intellectual and developmental disabilities (IDD) will move towards managed care arrangements through the Office for Persons with Developmental Disabilities (OPWDD) People First Waiver. Health care for this population has been primarily on a FFS basis. In addition to accessing long term care support services through OPWDD, these individuals also use long term care services provided by the Department of Health (DOH), such as skilled nursing facility, personal care, certified home health care, private duty nursing, and other community services. These long term care services accounted for 45% of all non-OPWDD Medicaid services in SFY 2009-2010.¹ This highlights the opportunity for care coordination to improve health outcomes and reduce costs among those who are aging with intellectual and developmental disabilities. The introduction of effective, integrated models of care will advance the State's goal of successfully transitioning this vulnerable population from FFS to managed care.

¹ People First Waiver, OPWDD Briefing Book, June 9, 2011.

ArchCare is the continuing care community of the Archdiocese of New York, and its mission is to foster and provide holistic care to frail and vulnerable people who are unable to fully care for themselves. Through shared commitments, it seeks to improve the quality of the lives of those individuals and their families. ArchCare is dedicated to serving older adults in a nurturing environment that recognizes and enhances each individual's potential to live as independently as possible.² ArchCare proposes to leverage its experience as both a provider of medical care to the developmentally disabled and a provider of managed long term care through a Program of All-inclusive Care for the Elderly (PACE) to meet the needs of the IDD members of our community.

ArchCare's Experience and Qualifications

ArchCare's **Terence Cardinal Cooke Health Care Center** (TCC) has operated a community-based clinic for the developmentally disabled for more than 35 years. This Article 16 on-site clinic provided 20,900 visits last year, as well as 40,300 off-site visits. Nearly 1,400 consumers are served each year at the on-site clinic, and the vast majority of these consumers reside with a parent or other family member in the community. TCC is located in East Harlem, and most consumers live in Manhattan or the Bronx. Approximately 75% of patients are adults (over age 18), and 17% or 235 of these are ages 55 and over. The group, ages 55 and older, accounted for 3,654 clinic visits in 2012. The annual number of visits per patient over age 55 ranged from one to 78, with a median of 11.5. Clinic patients are predominantly male (62%), Hispanic (83%) and African-American (12%). In addition, since 1978, TCC's **Specialty Hospital** has served children born with severe disabilities or complex medical problems which require placement in a specialized facility where they can receive the 24-hour-a-day care they need. The Specialty Hospital serves 50 children and young adults.

ArchCare Senior Life offers an alternative, non-institutional, long-term care options for frail elderly New Yorkers. The program serves low-income individuals 55 years of age or older who are assessed as eligible for nursing home care but who desire to remain at home aging in place with the support of PACE. PACE participants are dually eligible for Medicare and Medicaid services. These "duals" are among the sickest and poorest individuals covered by either Medicaid or Medicare.³ The prevalence of chronic conditions is also significantly higher among dual eligibles.⁴ Dual eligibles often find coordination issues to be a major barrier to getting needed health care services.⁵ The Program of All Inclusive Care for the Elderly (PACE) is one of the few cost-effective models of care that integrates and coordinates care for this population across all service settings. Over 95% of seniors served by the Office for People with Developmental Disabilities are dually eligible for Medicare and Medicaid services.⁶

² ArchCare, the Continuing Care Community of the Archdiocese of New York, includes six nursing homes located in New York City and the Hudson Valley region. ArchCare's health system also includes Calvary Hospital, a Program of All-inclusive Care for the Elderly, a partial capitation Medicaid Managed Long Term Care Plan, and a Medicare Advantage Special Needs Plan.

³ "Where Does the Burden Lie? Medicaid and Medicare Spending for Dual Eligible Beneficiaries?" T. Coughlin et al. The Kaiser Commission on Medicaid and the Uninsured (April 2009)

⁴ Dual Eligibles: Medicaid Enrollment and Spending for Medicare Beneficiaries" J. Holahan et al. The Kaiser Commission on Medicaid and the Uninsured (July 2005)

⁵ "Dual Eligibles" Center For Medicare Education / Issue Brief Vol.5 No.2: (2004)

⁶ People First Waiver, OPWDD Briefing Book, June 9, 2011.

ArchCare Senior Life's first Program of All-inclusive Care for the Elderly (PACE) opened in Harlem in November 2009. ArchCare Senior Life opened a second PACE Center in May 2012 in the South Bronx, and a third center will open on Staten Island by mid-2013. The program currently serves 266 seniors of which 36% are Hispanic, 32% are African-American, 31% are Caucasian, and 1% are Asian or another ethnicity.

Given the experience serving the IDD population and dual eligibles and providing interdisciplinary and integrated care through PACE, ArchCare is well-positioned to deliver person-centered managed care for individuals with intellectual and developmental disabilities.

ArchCare Initiative To Leverage The PACE Model of Care To Serve Individuals With IDD

PACE offers a highly individualized model of care that is well-suited to meet the complex needs of individuals, ages 55 and older, with intellectual and developmental disabilities. The core components of PACE align with the principles of serving those with IDD by respecting autonomy and choice, by serving individuals in the location where they choose to live, and by maximizing community supports that help individuals achieve their personal goals.

PACE is a provider-based managed care model where interdisciplinary teams (IDTs) have an intimate understanding of each participant's needs. It is not a typical managed care organization that manages services remotely. It is a high-touch, comprehensive program of individualized care that helps individuals avoid serious health crises as the IDT identifies health conditions early and treats health problems on a timely basis; over the long term, nursing home admission is forestalled. The PACE staff also works closely with family members and caregivers to foster participants' independence and community integration. This proposal will expand community-based long term support services which will forestall the need for admissions into institutional/nursing homes settings.

The core elements of ArchCare's IDD PACE Initiative and the ways in which these support the overarching goals of the People First Waiver are described below:

- **Primary, Preventive and Specialty Medical Care**
Through PACE, dual eligibles, ages 55 years and older, have improved access to quality primary care and other needed health care services. PACE provides timely access to doctors and other primary care professionals who specialize in caring for older adults. PACE professionals get to know the participating seniors well, are able to discern any changes in their health status and mood, and respond proactively. PACE's preventive approach to care helps avert avoidable hospitalizations and prevents illnesses as health care providers identify health conditions early and treat health problems on a timely basis. As needed, home health aides care for participants in their homes.
- **Care Coordinated by an Interdisciplinary Team**
In PACE, participants are cared for by an interdisciplinary team that is comprised of primary care physicians, nurses, social workers, therapists, van drivers, aides and others, including the participant and his or her caregiver(s). To best meet the care needs of persons with IDD, these care teams may work closely with education and employment specialists, as needed. The interdisciplinary care team designs care plans aimed at maintaining each participant's

maximum level of physical, social and cognitive functioning and improving quality of life. These care plans take into account individual strengths, interests and needs with the goal of best serving the individual in the least restrictive setting. The interdisciplinary care team meets daily to ensure appropriate care for participants.

PACE uses the Semi-Annual Assessment of Members (SAAM) as its assessment tool and will be implementing the Uniform Assessment System (UAS-NY) that is being rolled out by the NYS Department of Health in the near future. To address the needs of the IDD population, the program would utilize the Coordinated Assessment System (CAS) authorized by OPWDD. The CAS uses a similar core data set as the UAS-NY. The CAS is based on the interRAI assessment system, which assesses 16 domains to effectively identify a person's unique medical and behavioral needs. The CAS will also include questions from other tools, such as Community Mental Health and Long Term Care, which can trigger further assessments in a particular domain. In PACE, the assessment is completed in person by an RN; similarly, a qualified professional/assessment specialist would complete the CAS for the PACE serving individuals with IDD. In PACE, participants' health care and supportive service needs are reassessed at least every six months and as often as necessary.

- The ArchCare IDD PACE Center

A distinguishing feature of the PACE model of care is the day center, which is open to all participants and provides participants the opportunity to socialize with peers and engage in therapeutic recreational activities. The Center also offers social work services, nutritional counseling, meals, personal care, supportive services, and physical, occupational, speech and recreational therapies. The majority of participants attend the day center two to three days a week with some coming more often.

- Transportation

Transportation services contribute to the program's success. PACE participants are unable to perform many activities of daily living without assistance, and the City's public transportation system does not adequately support their transportation needs. Through PACE, participants receive transportation services from their homes to the PACE Center and to other physician specialist appointments as necessary.

- Health Outcomes, Participant Satisfaction and Quality

Over the past three years, ArchCare Senior Life's PACE has documented its impact on participant health outcomes including hospitalization and nursing home admissions, as well as participant satisfaction and other quality measures. The program would continue to track PACE quality measures, as well as develop and track quality measures specific to OPWDD members and families, such as promoting individual self-determination and choice, community integration, health and safety.

ArchCare Senior Life is using an electronic medical record that is certified by the federal Office of the National Coordinator - Authorized Testing and Certification Body (ONC-ATCB) and has a track record of service with PACE programs nationally. The EMR will be modified as needed to capture any additional data elements to ensure comprehensive care planning for the IDD participants.

Participant satisfaction is critical to the program. The program conducts annual surveys of participant satisfaction. Additionally, the program is continually refined to meet participant needs in response to suggestions from the PACE Participant Advisory Council (PAC). The Participant Advisory Council meets monthly and provides input to program leadership regarding program activities, trips, menu selections, staff performance and other matters of concern to participants. Representatives from the PAC also attend the regularly scheduled Board meetings and have direct input to the Board of Trustees.

- Fiscal, Administrative and Organizational Experience

In addition to PACE, ArchCare operates a partial capitation Managed Long Term Care Plan, and a Medicare Special Needs Plan (I-SNP and IE-SNP). As mentioned previously, the PACE serves residents in Manhattan and the Bronx, and will expand to serve Staten Island residents in 2013. The MLTCP is serving individuals in all five boroughs of New York City, as well as Westchester and Putnam counties, and plans to expand its service area to Orange and Rockland counties by the end of the year. The I-SNP is active in all five boroughs of New York City, as well as Westchester, Dutchess, Orange, Putnam and Onondaga counties.

To support these managed care operations, ArchCare has developed a management structure that ensures effective linkages among the various administrative services, including quality management, network development and contracts management, IT (utilization review), enrollment/disenrollment, care coordination, accounts receivable/accounts payable, and budget, finance and accounting.

In sum, ArchCare is well-positioned to develop an innovative, person-center, provider-based PACE model of care for individuals with intellectual and developmental disabilities consistent with the goals of the Department of Health and OPWDD.