PEOPLE FIRST
1115 DEMONSTRATION WAIVER

Update for Voluntary Providers Recent Progress/Next Steps

Statewide VC

April 26,2012

Recent Activities

CMS Dialogue – Recent Questions and Answers Posted online

Needs Assessment Tool Selected (interRAI Integrated Assessment Suite)

Spring Statewide Public Briefings

Final Steering Committee meeting held March 28, 2011

CMS Conversation Continues

Preparation for Case Studies

Vision for the Future

A person-centered service system that delivers coordinated, comprehensive care to meet identified need and measures true effectiveness.

Main Elements of Reform:

1.Creating a Person-Centered, Demand-Oriented System

Big Change: **Need-focused service planning**
Equity across NYS
Self-Direction available to all

2. Enhancing Care Coordination and Person-Centered Planning

Big Change: **Cross system coordination of comprehensive services**
Ready access to one person for all care coordination needs

3. Enhancing Community-based Services

Big Change: **Supports for higher levels of need in community**

4. Modernizing the Financial Platform

Big Change: **Funding individual's service needs, not service allocations means everyone is served.**

Ultimate Reform Objectives

For people with developmental disabilities:

- **Integration**
- **Equity**
- **Civil Rights**

The Waiver's Moving Parts

- CMS Agreement
- Design & Planning Process - continuing from last summer

  Access and Choice
  Care Coordination
  Services & Benefits
  Quality
  Fiscal Sustainability

- Case Studies – launching with waiver approval
- Pilot DISCO projects – launching late 2012/2013

A Five-Year Reform Process

Evaluation

Staged roll-out of DISCO structure (2015 +)

Pilot Projects & Implementation Planning (2013-2014)

Design Team Process, Case Studies (2011-2012)

Focused Case Studies

Purpose – to immediately begin to test key reform concepts on a small scale.

Tested concepts – assessment tool, care planning process, documentation practices, new measures of individual outcomes, global budgeting.

Participating Agencies – about 20 high performing agencies.

Schedule - One year of study beginning with CMS approval, formal evaluation.

Defined Goals of Case Studies

Limited Global Funding Environment

- **Balancing resources**
- **Innovation**

Planning Processes

- **Use of assessment to inform**
- **Increase in Person-Centered Planning; Consolidated Plan**
- **Focus on people with low support, independent skills**

Documentation Practices

- **Rational and Outcome-focused**
- **Includes encounter data collection**

interRAI Assessment Suite

- ✓ **Person-centered, strengths and needs-based**
- ✓ **Standardized**
- ✓ **Strong validity/reliability**
  - Each item is highly researched and tested
- ✓ **Comprehensive and holistic**
  - Multiple domains and items, with no need to supplement HRST
- ✓ **Flexibility**
  - Can customize the tool by modifying or adding necessary items per domain
- ✓ **Informs care planning process**
- ✓ **Informs acuity**

Preparing for Case Studies

- Preparing to hire State Assessment Specialists
- Preparing to train hired staff to implement NY state draft of interRAI tool
- Working with Westchester Institute for Human Development and Council on Quality Leadership to develop practices for agencies/State to measure personal outcomes
- Agencies are preparing to use flexible funding & new planning and support models to improve outcomes

Slide 10

WU1 Windows User, 4/24/2012

Pilot Project DISCOs

Purpose: to demonstrate effective care coordination models on a small scale prior to statewide reform

- Most will provide traditional OPWDD services and other long-term supports/services (partial capitation).
- Some may be prepared to provide comprehensive care (fully capitated).
- Enrollment will be voluntary.
- Outside evaluation will occur.
- Pilots will form the basis for statewide roll-out of initial, non-pilot DISCOs beginning in 2014/15.

Assessment of System Capacity

- To prepare for pilot DISCOs, capacity assessment will occur this spring.
- We will review our provider capacity in the following areas:

Care Coordination	**Financial stability**
Administrative Capacity	**Regulatory Compliance**
Scope of Services	**Integrated Health Care Systems**

- On-site reviews will occur on a stratified, sample basis.

Continuity of Service Provision

- OPWDD will explore and define this during the first year of implementation planning.
- Pilot projects will help us gauge the DISCOs' ability to establish robust provider networks to meet the full range of needs, provide choice of providers, and ensure continuity and quality of care.
- It is our intent that there will be an allowance for the time-limited continuation of current providers during statewide roll out of DISCO services.

Quality in the People First Waiver

The new waiver will:

- Measure quality by meaningful outcomes –

  Individuals' progress **Support for direct care staff**

  Effective governance **Individual/family satisfaction**

- Create a Quality Rating Scale for DISCOs and providers that are available to the public
- Use new technology to bridge current and future operations and improve outcomes.

The Process: Next Steps

(for providers)

- OPWDD anticipates that most agencies will continue to be providers of services and become a part of DISCOs' networks.

- Providers should look at their programs and:
  1. Identify what they do well and how they might focus on those strengths in the new system
  2. Look at strategies to ensure that the people they support and the services they provide will continue within the People First Waiver.
  3. Discuss with other agencies options for collaborating to form DISCOs or provide independent advocacy as contractors

The Process: Next Steps

(for OPWDD)

- ***CMS Agreement*** - Continued negotiations with the federal government to finalize our plan
- ***Statewide Implementation Planning*** – Form work groups, DDAC Subcommittee
- ***Case Studies*** – prepare selected agencies to implement & evaluate planned testing
- ***Pilot Project DISCOs*** – capacity assessment, create application process
- ***Extensive and continued public dialogue***

Transitioning to Care Coordination

A year of planning begins with waiver approval.

- Explore existing roles of MSC

  Care Planning ***Monitoring Care Plans/Service Delivery***

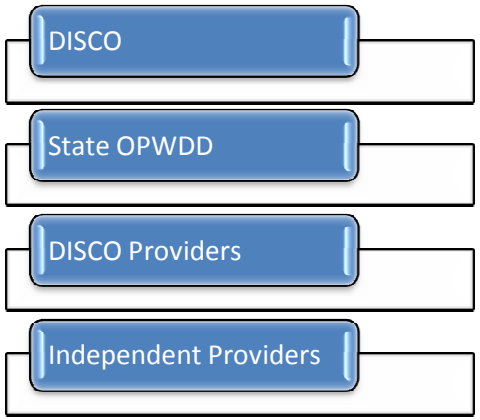
  Advocacy ***Linking and Referring***

- Find ways to provide continuity – either through the DISCO, OPWDD or service providers
- Possible new positions to fulfill roles:

  supports advocate - for people living independently in community settings or in family homes

  enrollment broker

  community specialist

Transitioning to Care Coordination

Who does which functions?