



PEOPLE FIRST
1115 DEMONSTRATION WAIVER

Welcome Design Team Members

June 20, 2011



Courtney Burke
Commissioner



Andrew M. Cuomo
Governor



Nirav R. Shah, M.D.
Commissioner



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Meeting Objectives

1. Overview of New York's People First Waiver initiative, its purpose, scope, and process
2. Roles/Responsibilities of Design Team Members and Scope/Key Questions for Design Teams to Explore
3. Afternoon Session—Design Team Breakout Brainstorming Related to Charters



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Design Team Kick-Off Meeting June 20, AM Agenda

Welcome and Introductions and Meeting Objectives	9:30-9:40
Overview of the People First Waiver	9:40-10:30
<ul style="list-style-type: none">– Background– People First Goals and Objectives– Themes from the Listening and Public Forums– Process and Timeline– Project Management Structure– Federal requirements	
Overview of Design Teams and Charters	
— Purpose/Roles and Responsibilities of Design Team Members	10:30-10:45
— Scope and Key Questions for Each Design Team	10:45-12:00
<ul style="list-style-type: none">• Access and Choice: Jerry Huber• Care Coordination: Jill Gentile• Benefits: Suzanne Sennett• Quality: Stan Butkus• Fiscal Sustainability: Jay Kiyonaga	
Questions	12:00-12:30



Design Team Kick-Off Meeting June 20, PM Agenda

- **Introductions and Go Around** 1:00-1:15
- **Overview of Briefing Material Related to Design Team** 1:15-1:45
- **Guided Brainstorming and Prioritization of Key Design Areas** 1:45-3:30
 - Review of Work of Design Team in Relation to Charter
 - Guided Brainstorming and Prioritization
- **Plan Agenda for Next Design Team Meeting** 3:30-4:00



Supporting Meaningful Outcomes Through the Waiver Initiative

New York's People First Waiver will infuse the principles of quality, choice, and community into the heart of a redesigned service system and result in meaningful outcomes for people with developmental disabilities.





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Address Complexities of the Current System

Multiple agencies with predefined services and structures.

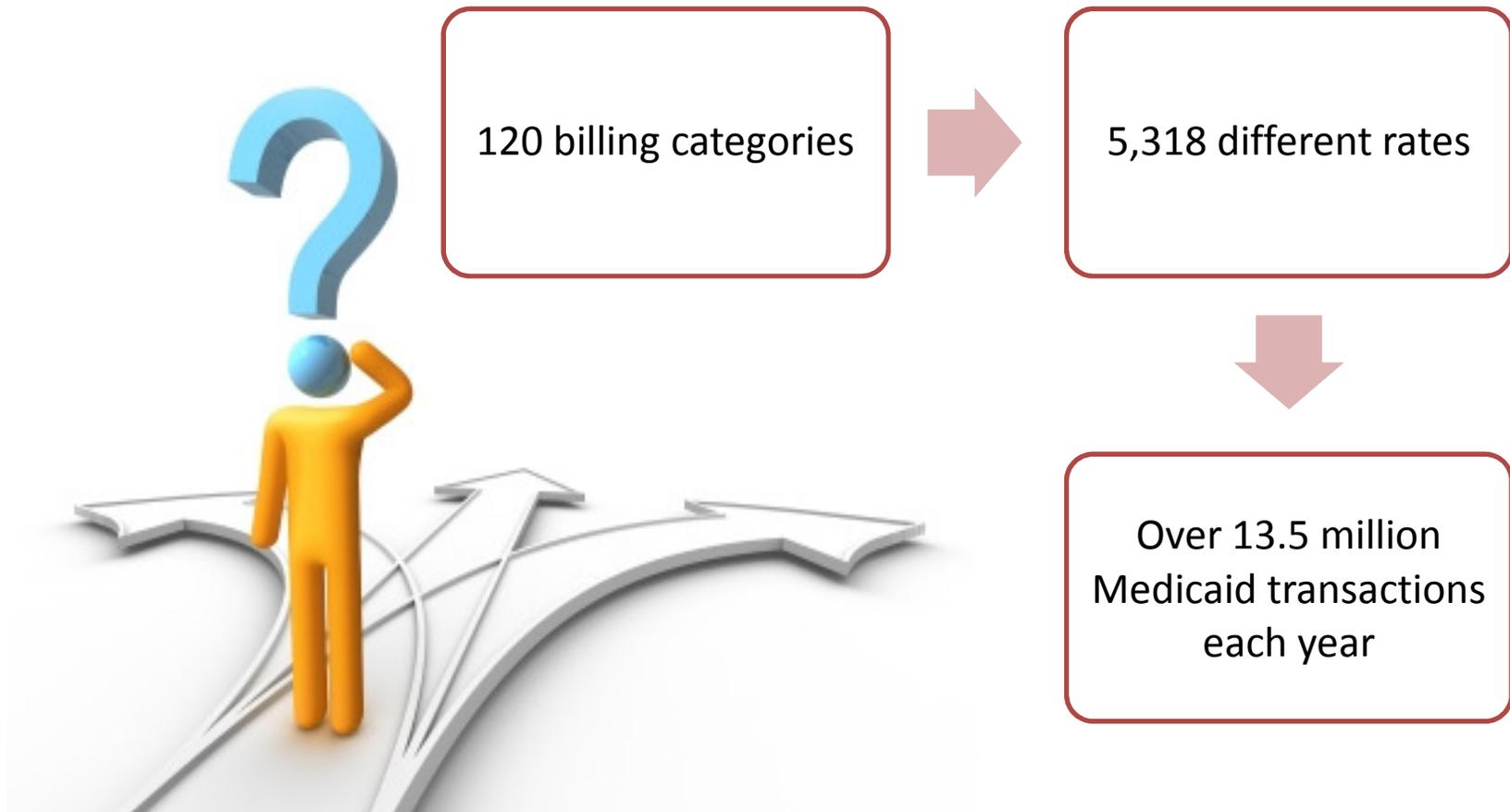
A person may have to work with multiple agencies to get services to meet needs.

Service structures may not have the flexibility to meet a person's needs in the way he/she chooses.





Over 600 Not-for-Profit Provider Agencies



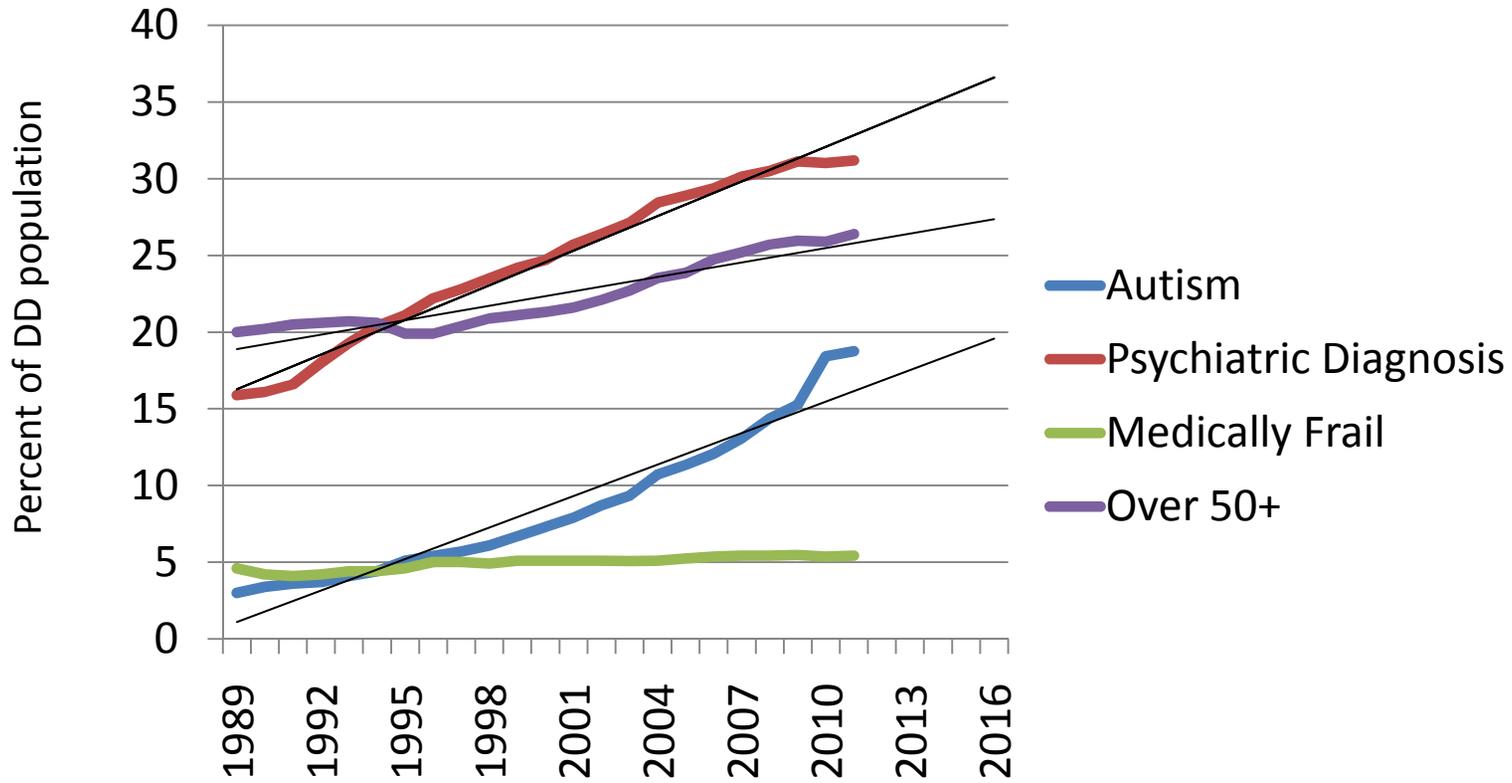


Ensure Sustainability

- The population OPWDD serves is growing faster than the rate of the general population.
- The population (like all of us) is aging and living longer and more active lives while primary caregivers also age.
- The needs of people with developmental disabilities are complex and life-long.



Increasing Percent of DD Population Served is over 50+, and/or has Multi-System or Complex Needs that Generally Drive Higher Per Capita Medicaid Expenses





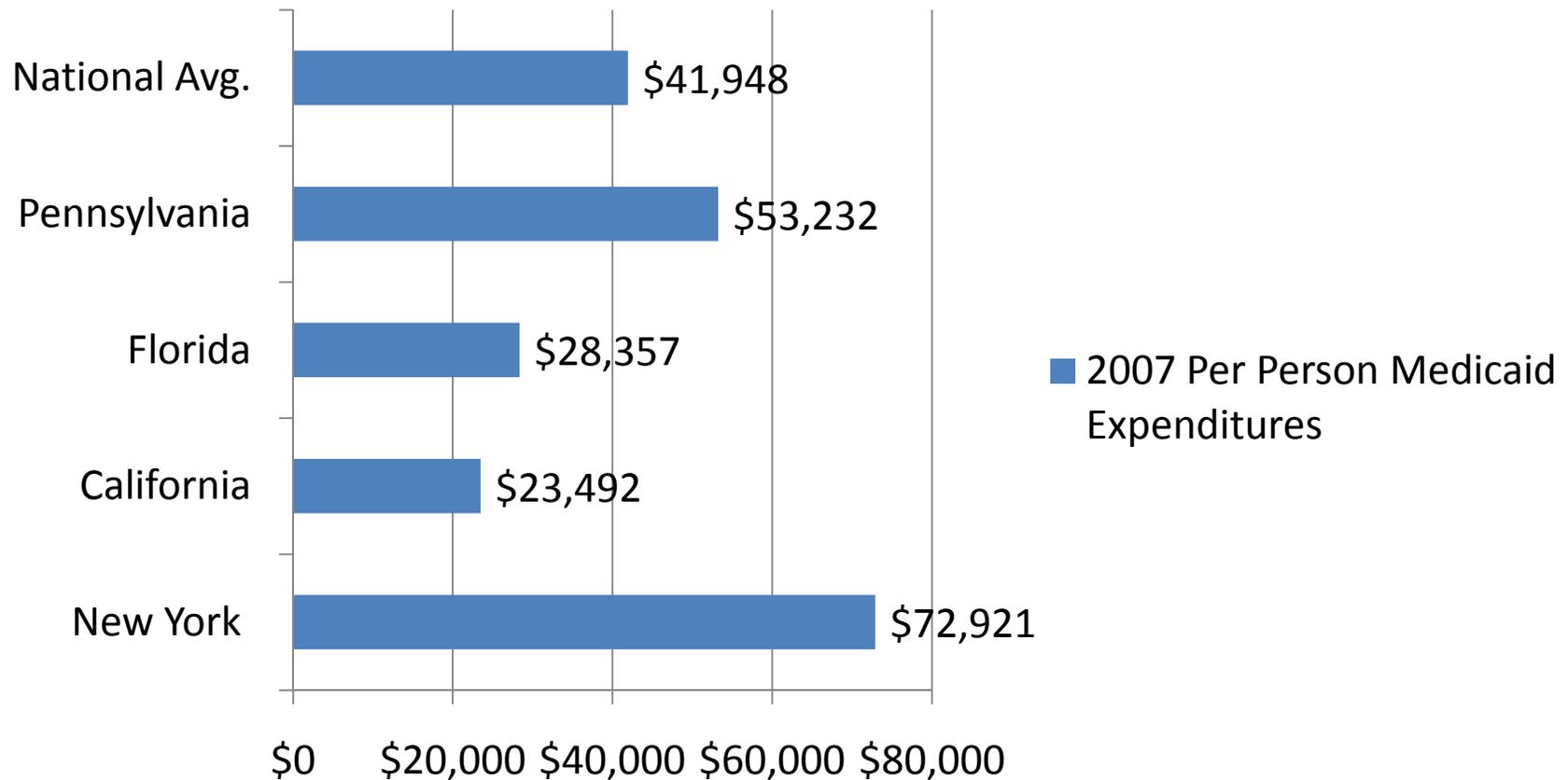
Medicaid Expenditures for People with Developmental Disabilities Growing Faster than the Average Rate of Inflation

OPWDD Medicaid Expenditures	6.2%
Inflation Rate	3.26%
Difference	2.94%

Average percentage growth from Annual Growth in CPI-U (Northeast urban) (All Items) (SFY 05-06 TO SFY 09-10) – 3.26% from 2005 through 2010

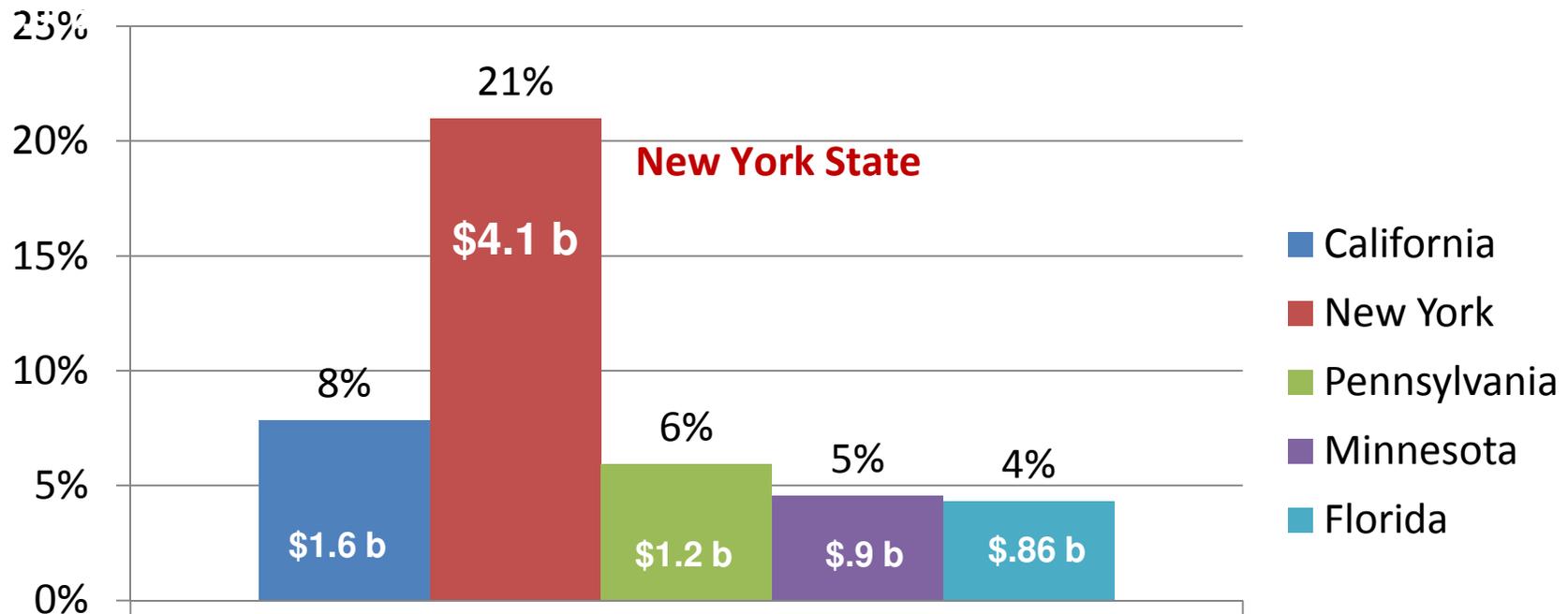


NY's Per Capita Expenditures for DD HCBS Medicaid Services Exceed the National Average and Comparable States





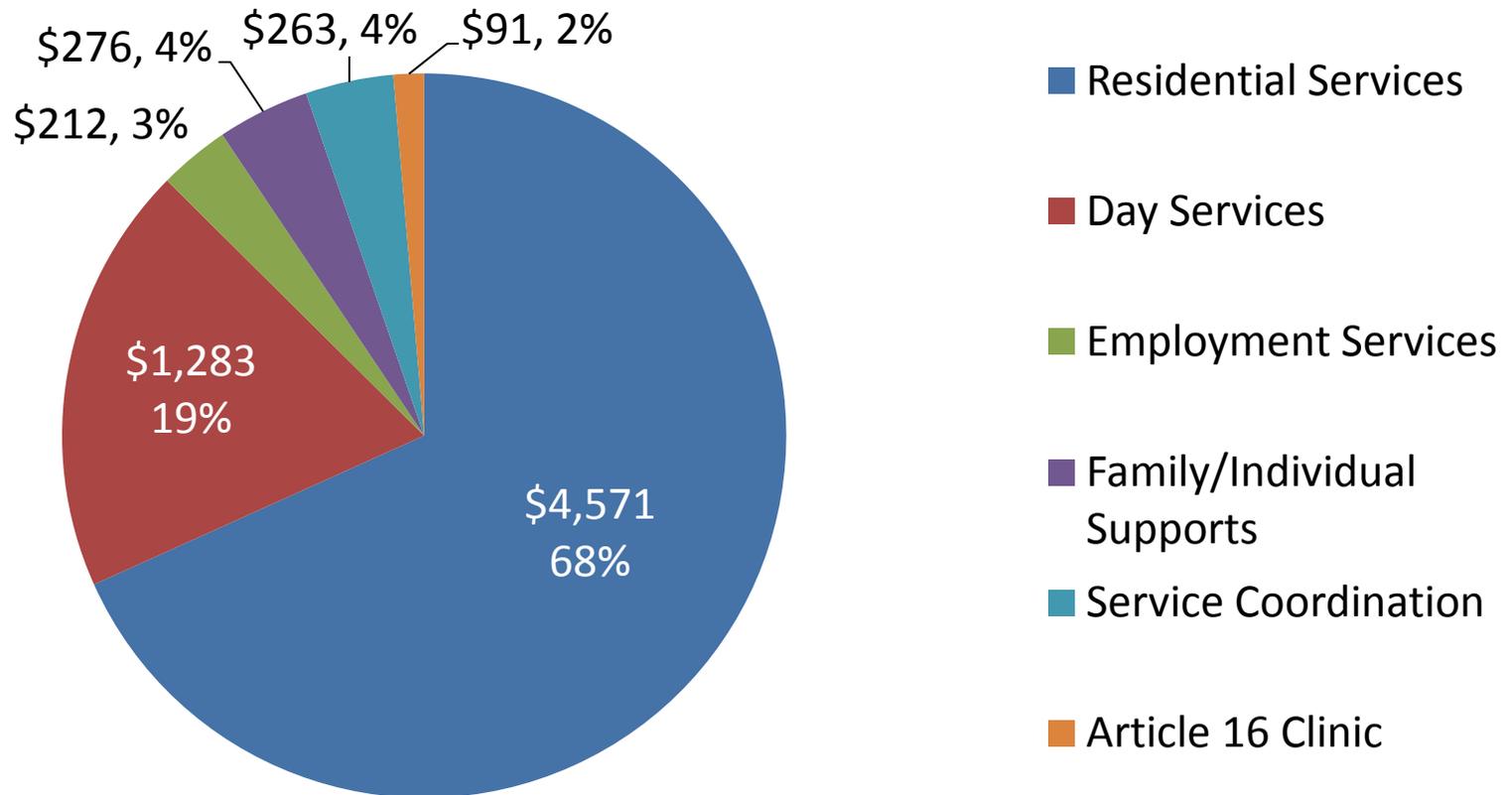
NYS Accounts for Over 20% of the Total National DD HCBS Waiver Expenditures (\$19.8 billion – 2007 data)



Percent of Total National HCBS Waiver Expenditures –
Top Five States



Non-Institutional OPWDD Medicaid Spending (SFY 09-10)





Increasing Need for Flexible Residential Services

- 23% respondents stated they would “prefer to live someplace else”
(2009-10 NCI consumer satisfaction survey data, people across ALL living situations from independent to facility-based)
- 9% of people living in supervised residences resemble people in supportive settings
(January 2011 analysis of select DDP characteristics for individuals living in supportive living arrangements and individuals living in supervised living arrangements)
- 36.8% people on residential wait list have needs similar to people in supportive settings
(January 2011 analysis of select DDP characteristics for individuals living in supportive living arrangements and second quarter 2010 residential wait list)



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Opportunities for Savings

- Ability to flexibly respond with appropriate levels of residential supports
- Self Direction
- Care Coordination



Vision for the Future System

Minimize reliance on institutional care by enhancing specialized community-based services so that people in institutional settings can successfully transition to the community.

Provide enhanced care coordination and person-centered planning

Establish valid needs assessment and equitable resource allocation

Create streamlined and flexible service delivery structures

Modernize financial and administrative platform to be more person-centered and encourage efficiency and accountability

Improve access and choice through “No Wrong Door”

Provide enhanced supports for families enabling individuals to reside in less restrictive settings

Measure quality outcomes at the system and individual level





Vehicle to Achieve the Vision

MEDICAID 1115 WAIVER

- 1115 waivers allow Medicaid funds to be used in ways that are not otherwise allowed under federal rules
- The 1115 must be a “research and demonstration project” that “furthers the purposes” of the Medicaid program
- Budget neutrality must be maintained so federal costs under a waiver must not be more than federal costs would be without the waiver



Scope of the People First Waiver

Comprehensive services for Medicaid-enrolled individuals with developmental disabilities:

- **All Medicaid health care services**
- **Long-term care services** within OPWDD system (DC, ICF, HCBS waiver, CAH waiver, MSC, clinic, day treatment) and also under the auspice of other state agencies (nursing homes, personal care, etc.)



1115 Waiver

Requirements

Comprehensive description of program goals and objectives, including the current or new beneficiaries who will be affected

Description of proposed healthcare delivery system

Enrollment data and expenditure projections

Other program features that the demonstration would modify in the State's current Medicaid program

The type of waiver and expenditure authorities that are necessary to authorize the research and demonstration

Research hypotheses

Written evidence of the State's compliance with public notice requirements



The People First Waiver will demonstrate that:

Better care coordination for people with complex medical/behavioral needs can be achieved through specialized systems of care management/care coordination.

A transformed long-term care delivery system that places person-centered planning, individual responsibility and self-determination at the forefront can enhance care and individual satisfaction and lower Medicaid costs.

New financial models for institutional and community based care systems can encourage efficiency, improve accountability, and reduce costs.

The continued provision of essential mental hygiene services will provide lower-cost services that meet individuals' needs and defer entry into higher cost Medicaid services.



Key Deliverables Outlined in Concept Paper

1. Achieve deinstitutionalization goals
2. Design and implement specialized community services for former DC population
3. Create safety net care pool
4. Enhance quality management
5. Establish “No Wrong Door” to provide better access to cross-system services
6. Create specialized care management programs within 3 years



Relationship to Medicaid Redesign

- The budget process brought together health care providers, labor, government, and other Medicaid stakeholders to form Governor Cuomo's Medicaid Redesign Team (MRT).
- MRT was tasked with identifying ways to provide critical health care services at lower costs and to control unsustainable growth. The MRT recommended a series of proposals to fundamentally restructure and reform New York.
- Several MRT proposals included in the enacted budget will be foundational in the development of the People First Waiver, including the movement of services into managed care environments.



Public Participation Plan

- A wide-reaching and multi-faceted solicitation of public input to help shape the final waiver design
 - Seven listening sessions and four public forums
 - Online survey
 - Multiple public presentations with various groups of stakeholders
- A transparent design process accessible to the public via a detailed People First Waiver Web page
- Waiver development process implemented by teams representing individuals and families of interested parties and experts



Major Themes Public Forums – Preliminary Results

- The need to prioritize services that adapt to the individual rather than asking individuals/families to adapt to the service
- Access to employment services, transition services for those leaving educational system or family home for the first time, and other specialized services related to medical support (like psychiatric services for those with behavioral challenges)
- Noted several times: Emerging needs of growing special populations with intense needs (e.g., autism)
- Residential development, community integration, acceptance, inclusion, and opportunities for choice
- The difficulty accessing some supports and services in certain areas
- Individualized options are beneficial but challenging to access
- Need for safety oversight and proficiency among direct support professionals



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Project Leadership Structure

Steering Committee

- Public / Private Representatives

Executive Team

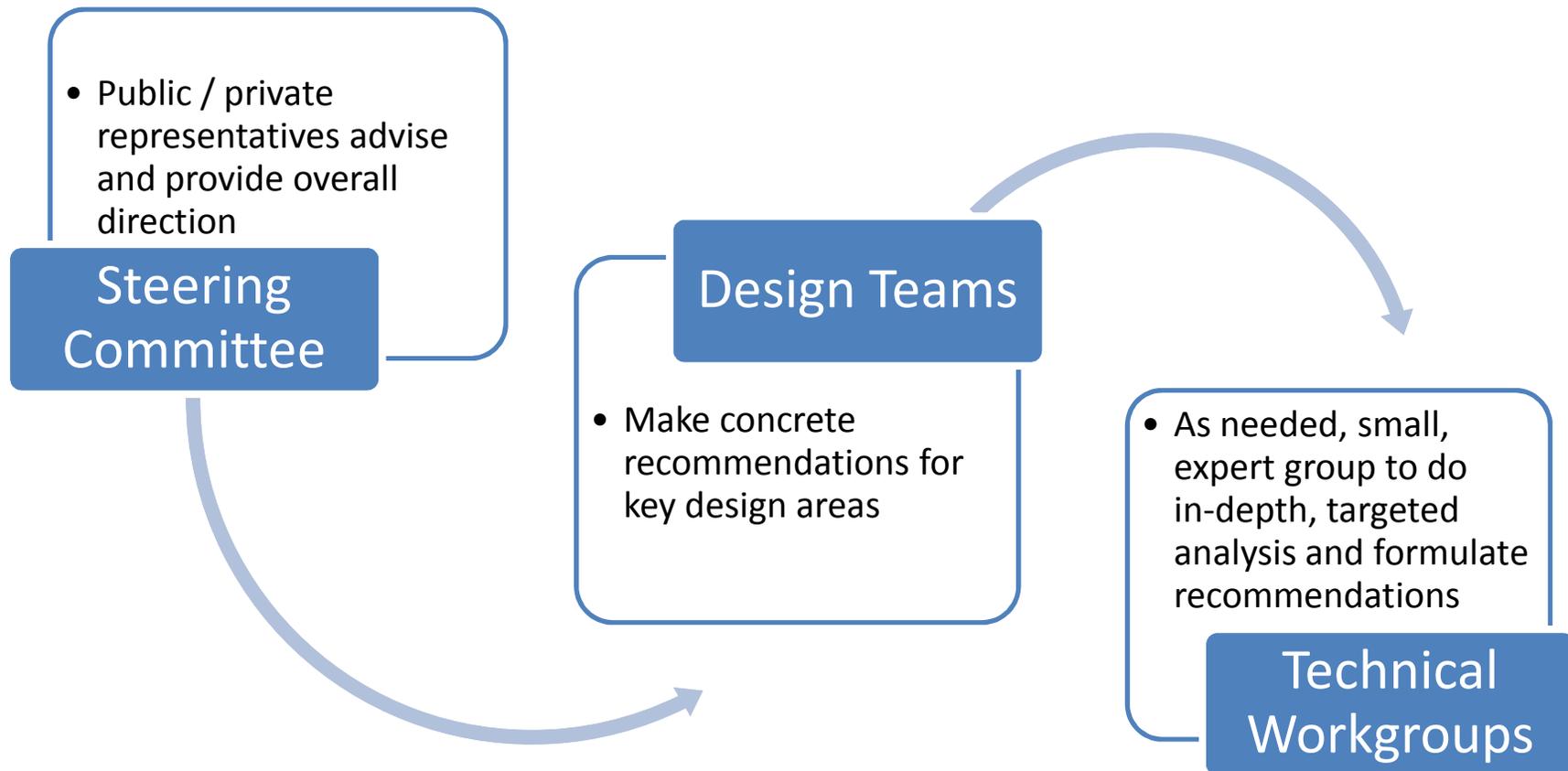
- Governor's Office Leadership
- Key State Agencies

Project Management Team

- Commissioner Burke
- Design Team Facilitators

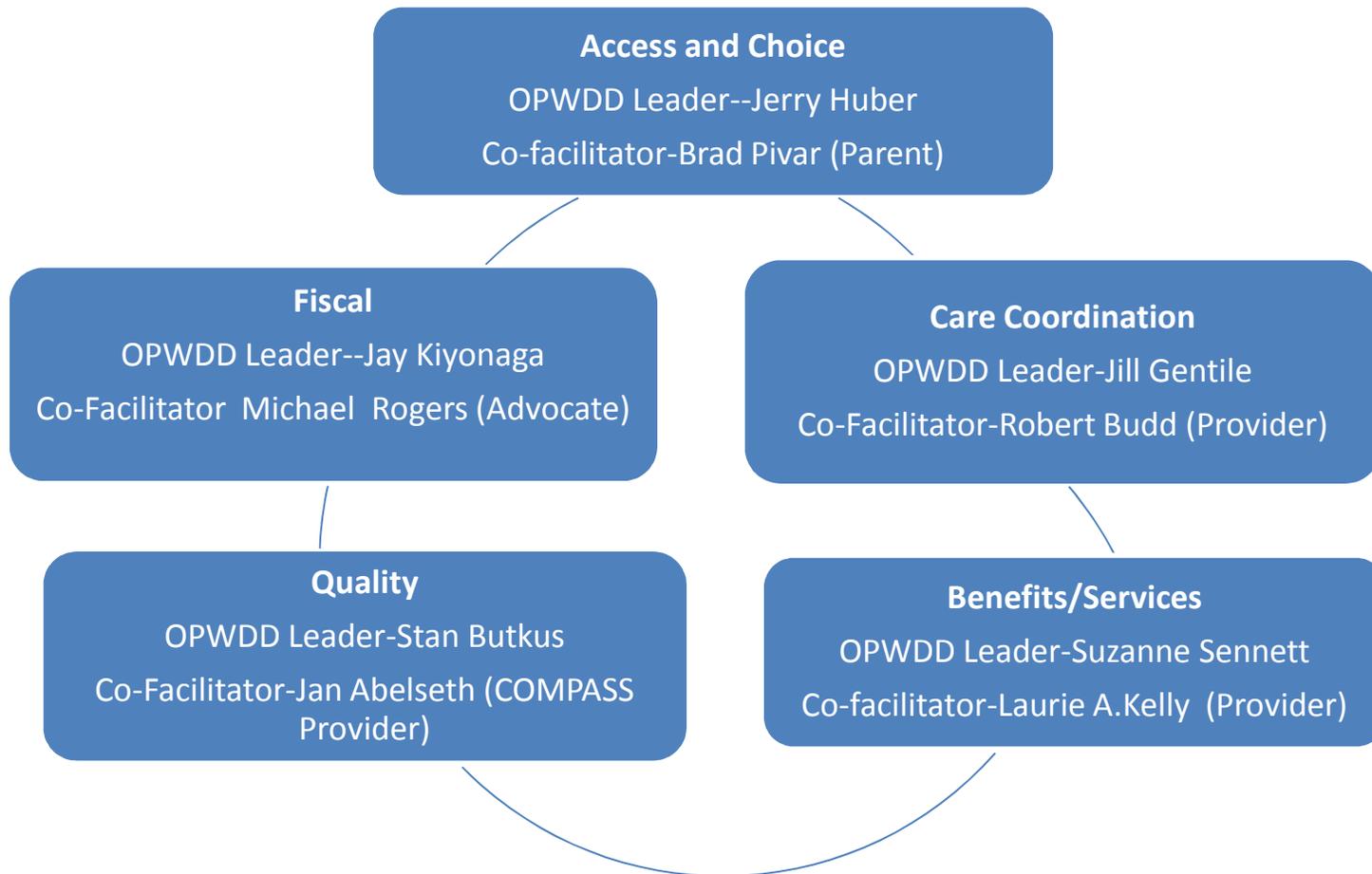


Design of the People First Waiver





Five Interconnected Design Teams





Role and Responsibilities of Design Team Members

Make recommendations in Key Design Areas

- Expectation is attendance at all design team meetings
- Work within Design Team to build consensus
- Balance unique perspectives with Statewide needs
- Balance the needs of all individuals served through the system

Represent outside stakeholder perspectives on policy concepts and operational issues

- Coordinate information flow with peers and stakeholder cohorts, including presenting information discussed in design team meetings
- Gather and bring cohort perspectives back to design team discussion

Ensure Accountability

- To guiding principles of the People First Waiver
- To all people with developmental disabilities
- To the public and all stakeholders



Accountability to Guiding Principles

Respect for Individuals and Families

- The needs of families will be respected and supported.
- Cultural diversity will be respected and supported.
- Individuals' rights – including the right to live in the least restrictive environment – and opportunities for choice will be safeguarded.
- Fair opportunities for dispute resolution will be available to all individuals, families, and providers.

Care Coordination

- All services provided to individuals, including those funded outside the waiver, will be coordinated.
- Services will be provided pursuant to a comprehensive plan intended to assure the individual's well-being and achieve specific goals.
- Individuals and families will be afforded easy access to needed services.

Realigned Incentives

- Financial support will be directed to individuals, **not** to programs or institutions.
- Predictable funding levels.
- Operational transparency and full disclosure.
- Funding will support program flexibility to reflect individuals' changing service needs.



Work of Design Teams

- The work of the design teams will be ongoing and will span an initial 12-month period while the People First Waiver Design is finalized.
- Design Team meeting materials and summaries will be posted to the People First Web page.
- Technical workgroups may be formed to explore areas in more detail.

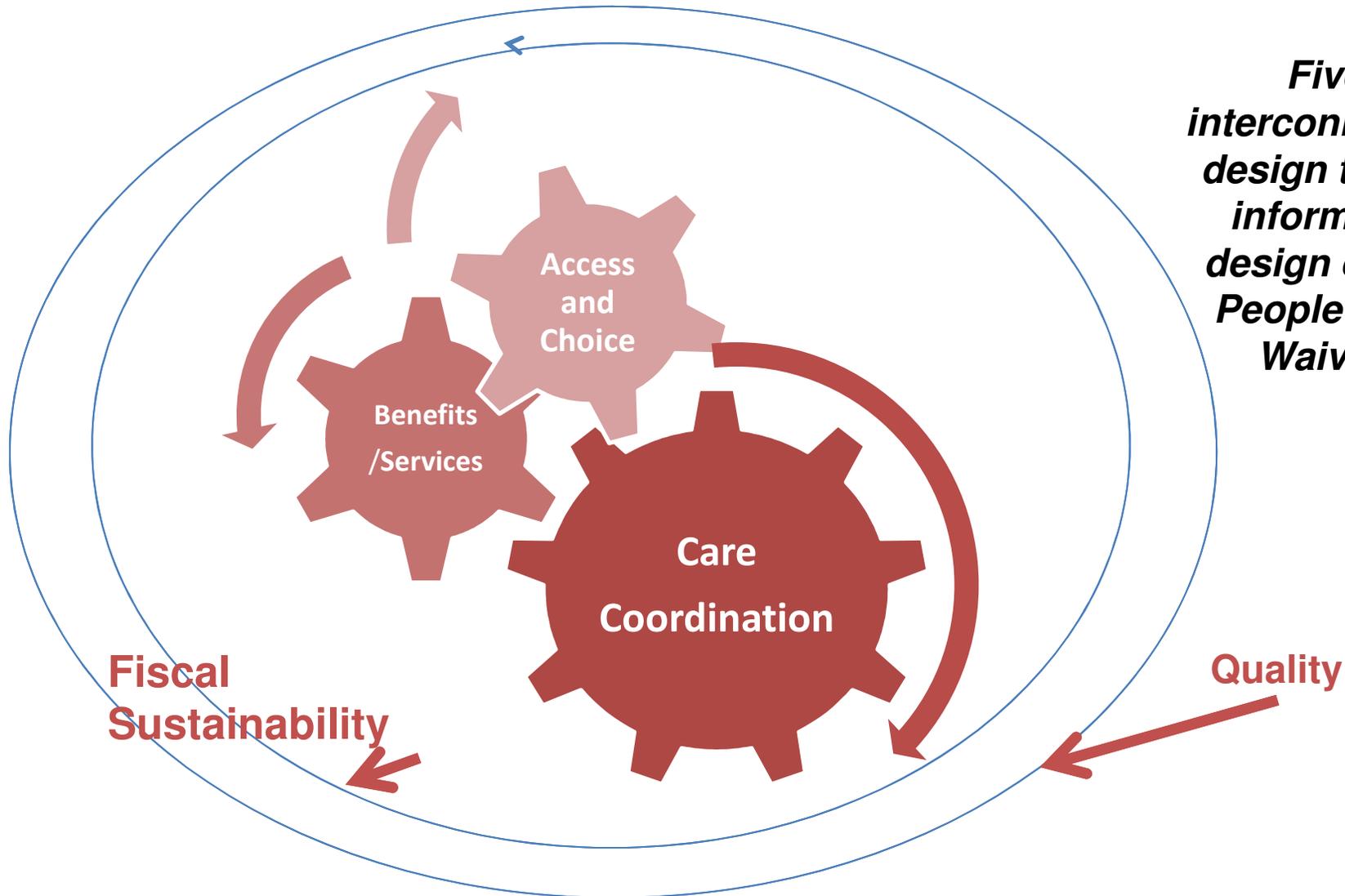


Work of Design Teams, cont.

- Each design team will be guided by a charter that includes the scope and key questions for the team to explore.
- These charters have been approved by the Steering Committee and as such represents the Steering Committee's conceptual approval to focus on these design areas.



“The Whole is Greater than the Sum of its Parts”



Five interconnected design teams inform the design of the People First Waiver.



Access and Choice Design Team

Purpose and Scope

To make reform recommendations related to waiver and service access and eligibility that addresses each individual's choices and goals, health and safety needs, and rights in the most appropriate community setting with an equitable level of resources/services appropriate to each individual's unique needs.

Key Design Areas

*Eligibility and
Needs
Assessment*

*"No Wrong
Door"*

*Role of State in
Needs
Assessment and
Resource
Allocation*

*Individual
Choice and
Managed Care*



Care Coordination Design Team

Purpose and Scope

To make reform recommendations that will result in comprehensive care coordination within a managed care environment for all people with developmental disabilities. Ensure that individualized and person-centered principles direct how Medicaid and non-Medicaid primary and acute health care, behavioral health care, and long-term care services will be planned and coordinated between multiple service systems through “No Wrong Door” and with an effective and flexible written care plan to coordinate and monitor quality of services.

Key Design Areas

*Care coordination
in a managed care
environment and
interface with MRT
Health Homes*

*Care coordination
considerations
unique to people
with
developmental
disabilities*

*Features of a
comprehensive
care plan*

*Provider
qualifications*



Benefits/Services Design Team

Purpose and Scope

To make service and supports reform recommendations that enhance person-centered planning and increase the capacity to serve people in the most appropriate community setting with an equitable level of resources based on the needs assessment process.

Key Design Areas

Residential services, community and behavioral supports for individuals with DD transitioning from institutional settings

Reforms in services and supports for subpopulations with developmental disabilities

Enhancing supports for families

Employment first services/supports



Quality Design Team

Purpose and Scope

Recommend reforms that will enhance the development of an integrated comprehensive quality structure driven by performance metrics that are linked to both individual outcomes and system performance; related to the key features of quality oversight/quality management/improvement to enhance performance and achieve outcomes.

Key Design Areas

HCBS quality framework and transition to People First

Systems and Individual Outcome Measures

Health and Safety

Assessing quality in a managed care environment

Ideas for measuring research and demonstration goal achievement



Fiscal Sustainability Design Team

Purpose and Scope

Recommend a financial platform that supports the goals and desired outcomes of the People First Waiver.

Key Design Areas

Rational, equitable, and efficient financial resource distribution based on individual needs not historic program costs

Modernize reimbursement and align financial incentives to achieve waiver goals and outcomes

Strategies for sustainable growth



Initial Design Team Work Schedule

Kickoff Meeting: June 20th

2nd Meeting: Week of July 11th

3rd Meeting: Week of July 26th
(optional meeting)

1st Report to Steering Committee due Aug. 1st

4th Meeting: Week of August 10th

5th Meeting: Prior to Sept. 2nd

2nd Report to Steering Committee due Sept. 5th



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Design Team Reports

Tentatively Due 8/1 and 9/5

- **Status Report Template:**
 - Meetings and Activity During the Reporting Period
 - Progress from the Design Team Charter/Recommendations or Outcomes of Discussions during the Report Period (provide detail)
 - Discussions/Recommendations/Outcomes and/or Deliverables Planned for the Next Reporting Period
 - Design Team Questions and/Issues/Obstacles (note any unanswered questions, issues etc. that are obstructing the ability of the design team to move forward)
- **From the Report Templates, one final summary of the initial design Team work will be prepared that will encompass the work of all five design teams related to the charters—September 2011**



Project Timeline

May 2011

- Listening Sessions and Public Forums
- Establish Steering Committee

Spring 2011

- Steering Committee Reviews Design Team Charters
- Establish Design Teams & Technical Workgroups

Spring &
Summer/Early Fall
2011

- Formulate Initial Recommendations



Next Steps

- Design Team work
- Establishment of any needed technical work groups
- Next Steering Committee meeting – late summer, TBD



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Public Resources

People First Waiver application Web page:

www.opwdd.ny.gov/2011_waiver

People First email address for comments
and questions: People.First@opwdd.ny.gov

People First comment line:

1-866-946-9733 or TTY: 1-866-933-4889



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PM Session Room Assignments

Access and Choice – Bldg 3 CR 5

Care Coordination – Bldg 3 VR 2

Benefits and Services – Bldg 3 CR 4

Quality – **Bldg 10** Directors VR

Fiscal Sustainability – Bldg 3 VR 6