

Assessment of 1915 (c) Home- and Community-Based Services Waivers

**Commonwealth of Kentucky
Cabinet for Health and Family Services**

*Summary of Phase One Preliminary
Recommendations*
(User-Friendly Version)

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Introduction and Assessment Approach

In April 2017 the Commonwealth of Kentucky Department for Medicaid Services (DMS) asked Navigant Consulting, Inc. (Navigant) to study Kentucky's 1915(c) waivers (the waivers). The study goal was to find ways to make Kentucky's waiver programs better, such as:

- How the waivers are run,
- Ways to improve services,
- Ways to improve provider and participant experiences, and
- How to make the best use of funds.

Navigant reviewed how Kentucky's waiver programs work. We looked at what Kentucky's six waiver documents say. We looked to find ways to make them better. Navigant had three steps for its review:

1. **Staff Interviews** – We looked at how staff work within the Cabinet for Health and Family Services (CHFS). We looked for ways to improve how work is done. We looked for ways to make it easier for staff to do their best work. This included:
 - Talking to more than 30 CHFS staff and
 - Looking at the steps they take to do their work
2. **Waiver Assessment** - Navigant looked at Kentucky's current waivers. We took these steps:
 - Review and edit all six current waivers,
 - Study who is in the waivers, the use of services, and other information, and
 - Look at other states' waivers and programs.
3. **Stakeholder Engagement** – Navigant held 40 focus groups, across Kentucky. We also read the emails people sent to DMS about the waivers.

Stakeholders said they wanted to have a voice during the decision-making process. CHFS agreed to listen and, while making decisions, think about the issues that impact participants most.

Navigant has ideas about how to make the waivers better. We call these ideas recommendations. This paper talks about these recommendations. We will also talk about these recommendations at the Town Hall meetings.

Next steps are:

1. **DMS will share this summary of Navigant's ideas with the public.**

2. **DMS will hold public Town Halls to talk about these ideas and listen people's thoughts.**
3. **Navigant and DMS will review people's comments. We will think more about how to make the waivers better. Then we will tell DMS about any changes to our ideas or any new ideas.**
4. **DMS will think about our ideas, then DMS will choose which ideas to move forward.**

Navigant and DMS would like to hear YOUR ideas after you read this paper. You can give your thoughts at the Town Halls. The Town Halls will be in 10 towns across Kentucky in May. You can also send your comments to:

Medicaidpubliccomment@ky.gov.

FOR TOWN HALL MEETING INFORMATION PLEASE GO TO:

<http://chfs.ky.gov/NR/rdonlyres/976BD528-623D-46B6-859B-ABFCB0409C72/0/Townhallnotification.pdf>

Initial Ideas to Make Waivers Better

1.1 Define providers and services the same way in all waivers. Define providers and services the same way in the Kentucky Administrative Regulation (KAR)

Ideas to make things better:

- Change the wording in the current waivers and make it similar across all waivers. For instance, today "personal care" means something different in each waiver. Our idea is to have that term mean the same thing in all the waivers.
- Make the regulations easier to use. Take out some of the information about day to day processes. Focus on rules and requirements.

What would this mean for the public? It would be easier to understand waiver rules. This would make it easier for people who need to change to a new waiver. Providers could more easily serve more than one waiver.

1.2 Move to need-based care planning. Use a standard assessment tool. Have someone who is independent do the assessment.

Ideas to make things better:

- Use one tool to help understand a participant's needs. Do not use a different tool for each waiver.
- Make sure the tool asks questions for people who have different disabilities. Each person should have a chance to talk about their needs.

- Find a tool that can better evaluate the needs of children (less than 18 years old).
- Use a team of people who have skills to understand people's needs and who do their jobs based on facts.
- Involve case managers in the assessment and tell them what needs were found.

What would this mean for the public? All waivers will use the same tool to look at a participant's needs. The tool will likely have special sections about the needs for each type of disability. The tool will also have sections for children. Having one tool will make it easier to see needs across all the waivers. Then CHFS can make the waivers better in the future. Case managers will be more involved in the annual check-in. That way, they will know more about each participant's needs and do a better job helping to help plan services.

1.3 Establish waiver budgets based on a participant's needs and not on people's past use

Ideas to make things better:

- Move away from determining a budget on what other waiver participants used on services in the past.
- Move away from giving everyone the same budget. Instead, base budgets on the person's needs.
- Use the assessment results to create a budget for each participant.
- Share the budget with each participant. Each person will then know how much budget or how many hours they can use for a service.
- Help train participants to use their budget wisely.
- Make the budget method clear so people can understand it and ask questions.

What would this mean for the public? In the future, waiver budgets would be based on individual needs identified in the assessment. Participants, caregivers and providers would be able to see what is in the budget. They would also see why changes in a person's needs may result in changes to their budget. This could lead to an increase in services for those with higher needs or a correction for those who need less.

1.4 Conduct a study to develop a sound rate-setting method

Ideas to make things better:

- Study the payment rates to see if changes are needed.

- Conduct a study to learn what costs are “reasonable and necessary.” Meet with providers to hear their thoughts. Collect some data from providers. Then build models to look at different ways to set rates.

What would this mean for the public? Providers would have the chance to give DMS their ideas about how they should set rates. The method used to set rates would be clear to the public. Sound rates may make providers want to serve more waivers than they do today. The new rate method would be in state regulation. The method would be clear and useful in the future.

1.5 Make written guides so DMS can run waivers better. Update how CHFS manages waivers and trains staff.

Ideas to make things better:

- Give staff rules and tools to teach them how to do their work. Then staff who work with waivers can all do their work in the same way.
- Put work areas in the right group. Make sure that there are not two or three different groups doing the same work.

What would this mean for the public? When someone calls CHFS to ask how something is done, it should be much easier to get a clear answer. Staff who work with waivers would all follow the same rules and work steps. There should be fewer mix-ups.

1.6 Create case management standards and training for case managers

Ideas to make things better:

- Have standards that traditional and PDS case managers must follow. Train them to provide better service for their participants.
- Develop forms and tools that everyone can use. Case management can be done in a similar way across the State.
- Do a better job training and helping case managers. Give them extra help when they have questions and when they face tough situations.
- Make sure case managers make decisions based on what participants need and what is important to participants and not only on what makes providers happy.

What would this mean for the public? Case managers would get more support and training. Case managers will also have clear standards, tools and forms. These would make it easier for case managers to follow rules and do paperwork. They would also make it easier for case managers to help serve people. Then, people would be more satisfied with their waivers.

1.7 Streamline Participant Directed Service (PDS) delivery by having standard program guidelines for fiscal management agencies (FMA)

Ideas to make things better:

- Write the rules better so people know what the rule is. For instance:
 - Who can self-direct their services?
 - What self-directed tasks are allowed? Who can help with these tasks?
 - What family members can and cannot be hired by a participant?
 - Which criminal background issues mean you can't hire someone?
- Put terms in new FMA contracts so they can manage paperwork, issue checks, and perform other tasks that make it easy for participants to self-direct.

What would this mean for the public? Clearer rules should make it easier for participants to choose between PDS and traditional services. They should also make it easier for PDS participants to choose a PDS worker. Many people are confused by today's rules. This change should help reduce the frustration participants and caregivers have today. Setting clear rules for FMAs should help to make working with a local FMA a better and easier experience.

1.8 Create one team of staff to do quality management for all waivers.

Ideas to make things better:

- Merge the three current quality teams into one team. Things will be simpler for providers and people who have questions.
- Make sure that providers in all waivers get similar training and help from CHFS.
- The new staff team will make sure that DMS is following all federal rules for the waivers.
- Staff from other groups, like DBHDID or DAIL, can continue to help with their steps in the process. Per CMS, DMS should have the final say in making rules and who must follow the rules.

What would this mean for the public? Having this team will make it easier to know providers who are doing a good job and who needs help from CHFS. All providers should get the same kind of training, so that some providers do not get less help than others. Some providers might want to offer services to more waivers, then people will have more choices.

1.9 Have a better way to hear from people about waivers. (We call this “stakeholder engagement.”) Use the Technical Assistance Committees (TACs) and Medicaid Advisory Committee (MAC) in a new way.

Ideas to make things better:

- Make sure CHFS hears from people regularly. Give people lots of ways to talk about their thoughts.
- Use MAC and TACs meetings to hear from the public.

What would this mean for the public? We think this will help more people feel heard. CHFS would use what it learns from you and other people to make the waivers better. The idea is that each person feels like they can help CHFS make waivers better.

1.10 Form a quality improvement strategy to put more focus on improving service outcomes and participant experiences

Ideas to make things better:

- Focus on making services and quality of life better for participants; not just following the rules.
- Pick high priority areas to focus on first, so the system quickly gets better.
- Put a team in place whose goal is to look at possible changes and see how they will help.

What would this mean for the public? The CHFS would build a plan to focus on improving the waivers in a timely manner. CHFS would ask public and participants for their thoughts. Then CHFS would work on areas where quality could be better and to help improve participant service outcomes and/or quality of life.

1.11 Conduct a future assessment of the need for waiver reconfiguration once changes have been made and reviewed to see if they helped

Ideas in the future:

- Once CHFS has made the changes above, conduct another study to see if any new waivers are needed or waivers should be combined.
- Use the best information available to make sound decisions.
- Ask for and listen to stakeholders’ ideas during this study.

What would this mean for the public? For now, DMS would keep the current waiver configuration of the same. Right now, there would not be any change to the number of waivers.

Conclusion

Navigant knows the waivers are important to you. We have a chance to help make the waivers better. We welcome your thoughts on what changes are important. At focus groups people said, “Nothing about us, without us.” We agree. We (Navigant and CHFS) want to hear your ideas and will think about your ideas as we consider next steps.