HCBS Pre-Conference Intensive: Managed Long-term Services and Supports
Welcome to the first (and hopefully only) virtual HCBS Conference

• HCBS is the premiere national conference on LTSS, including Medicaid, the Older Americans Act, and a broad array of programs, services, and supports for older adults and people with disabilities

• Learn more about ADvancing States at www.advancingstates.org

• Don’t forget to sign up for:
  – The Friday Update: a weekly electronic newsletter that consolidates federal and other news on aging and disability policy

  – The State Medicaid Integration Tracker: a bi-monthly publication that highlights LTSS activities, including MLTSS, dual eligible programs and other integrated care activities in the states
Managed Long-Term Services and Supports (MLTSS)

MLTSS is the delivery of long-term services and supports (state plan, waiver or both) through capitated Medicaid managed care plans.

Plans can be a managed care organization, pre-paid inpatient health plan, or a pre-paid ambulatory health plan (depending on scope of benefits provided).

In most states, plans are covering medical services as well, which provides a comprehensive delivery system for consumers.

Plans are typically contracted after a public procurement process.
ADvancing States’ MLTSS Work

MLTSS Institute

- Provide intensive technical assistance to states
- Bring thought leaders together to discuss policy issues
- Publish research papers (http://www.nasaud.org/initiatives/managed-long-term-services-and-supports/resources)

May 2017
- Demonstrating the Value of Medicaid MLTSS Programs

May 2018
- MLTSS for People with Intellectual and Developmental Disabilities

April 2019
- Collaborating to Address HCBS Workforce Challenges in MLTSS Programs

November 2019
- The Value of Pursuing Medicaid-Medicaid Integration for Medicaid Agencies

June 2020
- Working together to build the workforce for MLTSS

October 2020
- On-warding Data: How Medicaid Data Can Support Medicaid Agencies
Why MLTSS?

**Accountability & Simplification**
- State can drive performance through contracting with few entities
- Eliminates need to contract with/monitor hundreds/thousands of LTSS providers
- Managed care plans take on claims payment, member management, utilization review

**Access**
- Reduce HCBS waiting lists
- Plans can integrate siloed streams of care (primary/BHI/LTSS) more effectively
- Increased use of primary and preventive care

**System Balance**
- Increase HCBS options (consistent with consumer desire)
- Plans have incentive to divert NF admissions
- May be less susceptible to political influences on NF downsizing

**Innovation and Quality**
- Shift to person-centered, integrated care and services
- Plans have more flexibility to deliver services
- Can better measure health and quality of life outcomes

**Budget Predictability**
- Capitation minimizes unanticipated spending
- LTSS interventions can lower acute care costs
- May slow growth in per-person costs
Note: CMS includes VT in its map of MLTSS programs
Key Elements for an Effective MLTSS Program

- **Thoughtful Program Design**
  - Populations; services; geographic reach; provider protections; quality goals

- **Stakeholder Engagement**
  - Early and ongoing during design, implementation and operation

- **State Oversight Capacity**
  - New roles and responsibilities; adequate staffing; information feedback loops

- **Rigorous RFP and Contract**
  - Specific and detailed; performance expectations; translate FFS policies effectively

- **Consumer/Provider Support**
  - Public education campaign; MCO/provider speed dating; choice counseling; ombudsman assistance
Trends for 2020 and beyond

• MLTSS continues to be the biggest trend/opportunity for states to address accountability, cost efficiency and better outcomes
• No new programs implemented since 2017; however, several states moving slowly toward MLTSS including NC, OK, and DC
• As state budget pressure increases, MLTSS is likely to be an option for states looking for a value proposition for their LTSS programs
• States continue to focus on quality especially outcome measurement
• States also looking at expanding pay-for-performance/value-based purchasing from NFs and other large providers to HCBS providers
• Increasing focus in MCOs on combatting social isolation, addressing workforce shortages and caregiver supports – all the more critical given the pandemic and its impact on LTSS consumers
Today’s Intensive

• Focusing on what you need to hear/know about
  – MLTSS Program Evaluation in PA
  – How MLTSS Programs Addressed COVID
  – Serving Dual Eligibles Better

• Intended to pique your interest in learning more

• Welcome feedback on topics for next year’s intensive!