HCBS Pre-Conference Intensive: Managed Long-term Services and Supports



2021 Hybrid Home & Community-Based Services Conference

Welcome to our hybrid 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 <u>www.advancingstates.org</u>
- 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



ADvancing States' MLTSS Work

MLTSS Institute

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





Managed Long-Term Services and Supports (MLTSS)

- MLTSS is the delivery of long-term services and supports (state plan, waiver or both) through <u>capitated</u> 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

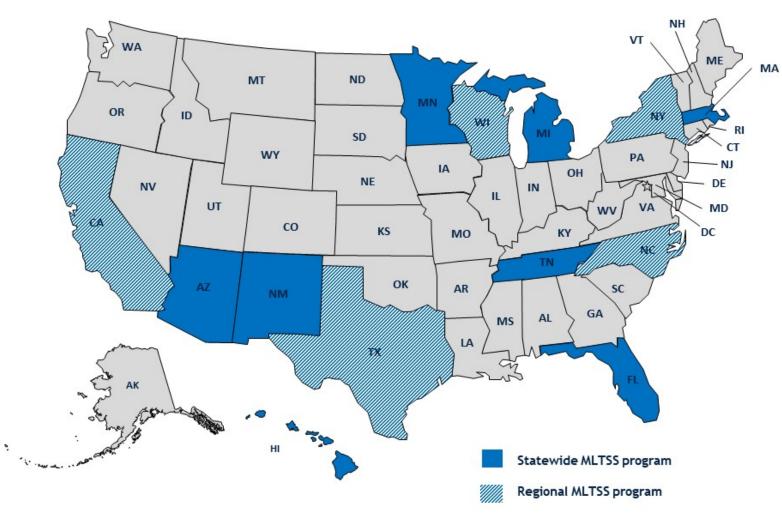


Why MLTSS?

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



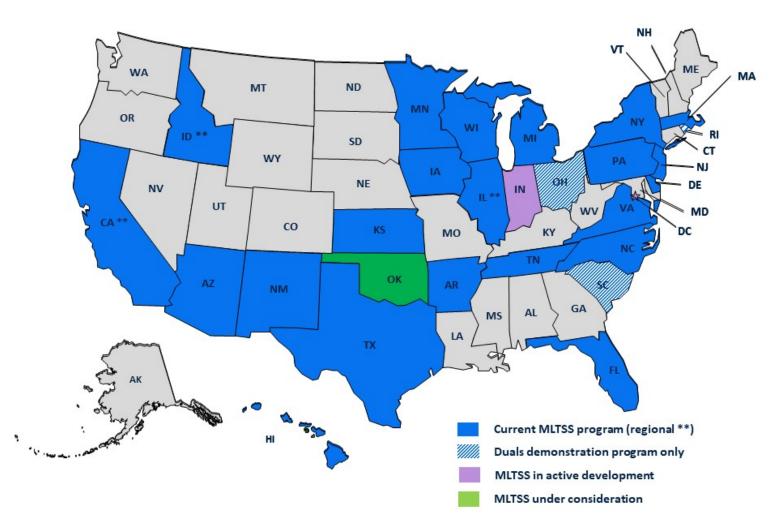
MLTSS Programs - 2010



Source: ADvancing States survey, Truven Health Analytics, 2012



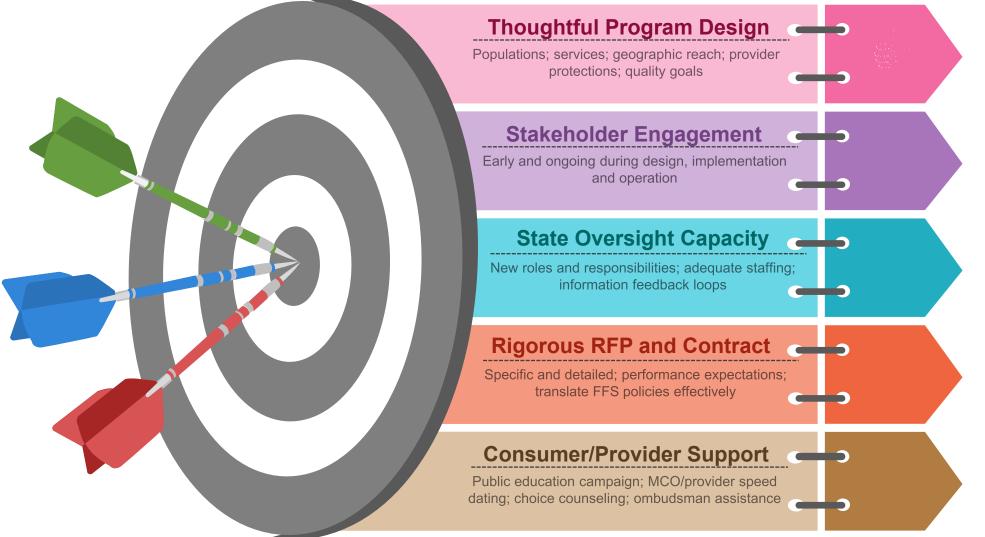
MLTSS Programs, December 2021



Note: CMS includes VT in its map of MLTSS programs



Key Elements for an Effective MLTSS Program





Trends for 2021 and beyond

- No new programs implemented since 2017; however, several states moving slowly toward MLTSS including IN and DC
- 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 Add Value to State Medicaid Programs
 - Serving Dual Eligibles Better
- Intended to pique your interest in learning more

