



State of Louisiana
Department of Health and Hospitals
Bureau of Health Services Financing

April 2012 Report to the Developmental Disability Council

Update/Progress on Agency Initiatives

New Opportunities Waiver (NOW)

Opportunities Allocated	8,832
Recipients Linked and Certified	8,259 as of 3/20/12

Children's Choice Waiver

Opportunities Allocated	1,475 (including 425 opportunities reserved for children who meet state-funded family support priority level 1 or 2)
Recipients Linked and Certified	1,342 (includes 344 opportunities filled by children who meet the above stated priority group) as of 3/20/12

- MVA and OCDD submitted a waiver amendment to CMS on October 1, 2011 for the purpose of adding self-direction as a service delivery option, and additional services, including specialized medical equipment & supplies and alternative therapy services. MVA and OCDD responded to CMS' request for additional information on March 21, 2012. CMS has until June 21, 2012 to approve this amendment. The proposed effective date of this amendment is September 1, 2012.
- MVA and OCDD are in the process of working with CMS to complete the renewal requirements for the Children's Choice Waiver, which is set to expire on February 21, 2014. MVA and OCDD must submit an evidence report to CMS by June 5, 2012 to describe how the State has implemented a quality management strategy for the waiver.

Supports Waiver

Opportunities Allocated	2,050
Recipients Linked and Certified	1,781 as of 3/20/12

Residential Options Waiver (ROW)

Opportunities Allocated	210
Recipients Linked and Certified	26 as of 3/20/12

- MVA and OCDD are in the process of working with CMS to complete the renewal requirements for the ROW, which is set to expire September 30, 2012.

Adult Day Health Care (ADHC) Waiver

Opportunities Allocated	825
Recipients Linked and Certified	696 as of 3/20/12

- MVA and OAAS are working with CMS to renew the ADHC Waiver, which is set to expire on 6/30/12. The renewal application was submitted to CMS on 2/16/12.

Community Choice Waiver

Opportunities Allocated	4,603 (includes 75 opportunities reserved for the ALS priority group)
Recipients Linked and Certified	4,355 as of 3/20/12

- MVA and OAAS submitted an amendment to CMS on 1/19/12 to add 200 additional slots to the Community Choice Waiver. MVA and OCDD responded to CMS' request for additional information on 3/13/12.

Money Follows the Person

- Since fall 2009, 248 individuals have transitioned through the MFP program. Year-to-date, approximately 20 individuals have transitioned from qualified institutions (hospitals, nursing facilities, developmental homes).

- MFP staff and housing partners attended a Housing Capacity Building Initiative for Community Living, jointly hosted by the federal departments of Housing and Urban Development (HUD) and Health & Human Services (HSS). The purpose of the conference is to build working relationships among housing and services program and policy staff.
- To date, over 270 participants have completed Quality of Life surveys, providing CMS with important information about the impact of community living on participant lifestyles.
- MVA continues to collaborate with OBH to leverage the 1915i state plan amendment into the MFP demonstration. Initial ideas will be discussed at the next Coordinating Committee meeting.

Self-Direction

- There are currently 194 recipients participating in the self-direction option, as of March 20, 2012.
- MVA, OCDD, and OAAS are working with Acumen Fiscal Agent to develop an online training curriculum for self-direction participants and employees. We anticipate the online training curriculum will be available by May 2012.

Louisiana Behavioral Health Partnership

- The Louisiana Behavioral Health Partnership (LBHP) began March 1, 2012.
- Two major aspects of this initiative are the funding and management of behavioral health in Louisiana.
- LBHP brings together state funding from the Department of Health and Hospitals, the Department of Education, the Office of Juvenile Justice, and the Department of Children and Family Services. Pooling the state dollars allows for Louisiana to draw down more Medicaid funding that will be used to expand behavioral health programs and services.
- Under the 1915(b) waiver, Magellan began their contract to manage the behavioral health care for both Medicaid and non-Medicaid adults and children who clinically met the criteria for services. Such oversight will expand services, improve outcomes, reduce hospitalizations, and reduce fraud.
- A Coordinated System of Care (CSoC) was established for children who are at risk for institutionalization or currently institutionalized due to significant behavioral health needs. At this time, five regions have implemented regionally based systems of care. Each region has one Wraparound Agency that will provide intensive, individualized care planning and management through a process known as “wraparound”. Wraparound centers on intensive care coordination by a Child and Family Team (CFT). The CFT is comprised of the child/youth, his or her family, providers, informal/natural supports and state agency representatives if

- appropriate. The CFT provides an administrative joint treatment planning activity under Medicaid requirements for developing and facilitating implementation of the individualized plan of care (POC). Eventually the Coordinated System of Care (CSoC) will be a state-wide initiative.
- Children/Youth who do not meet CSoC eligibility will have increased access to a variety of other outpatient mental health services through the Louisiana Behavioral Health Partnership. This includes: community psychosocial rehabilitation, crisis intervention, and community psychiatric support and treatment. LBHP allows Licensed Mental Health Professionals (LMHP) to see children/youth in settings other than Mental Health Clinics (state facilities) or Mental Health Rehabilitation agencies.
 - While there is an emphasis on community based settings and the goal of maintaining the child/youth in their home, LBHP will be establishing an expanded array of residential treatment options for those who require this setting. These include: Psychiatric Residential Treatment Facilities, Therapeutic Group Homes, and Addictive Treatment facilities for several American Society for Addictive Medicine (ASAM) levels of care. These are new services for both Medicaid and non-Medicaid children/youth.
 - As of March 22, 2012, the CSoC enrollment is 116.
 - Jefferson Parish Human Service Authority: 9
 - Region 2 (Capital area): 29
 - Region 7 (Alexandria area): 20
 - Region 8 (Shreveport area): 34
 - Region 9 (Monroe area): 24
 - In order to qualify for behavioral health services, adults will be given an independent assessment by a LMHP. A Severe Mental Illness (SMI) or Major Mental Disorder (MMD), or a need for acute treatment for a behavioral health disorder must be present and the LOCUS assessment tool must indicate at least a moderate level of need.
 - Services for adults include:
 - Treatment by a licensed mental health practitioner (LMHP)
 - Community Psychiatric Support and Treatment
 - Psychosocial Rehabilitation
 - Crisis Intervention
 - A request for services can be made by calling Magellan at 1-800-424-4399 or visit the website at www.magellanoflouisiana.com Detailed information regarding services may be found at: <http://new.dhh.louisiana.gov/index.cfm/page/538>

Status of Council Recommendations to Agency

Objective 3.3: The number of people in private ICFs/DD per capita in Louisiana will decrease to reach the national average through the transition of people to home- and community-based services.

Activity 3.3.1 Advocate for

- changes to the rate structure of the Residential Options Waiver to encourage private ICF/DD providers to convert their beds so individuals can transition to waiver services,
- a Money Follows the Person (MFP) policy to allow residents of private ICFs/DD to obtain waiver services, and
- the MFP grant program to target residents of private ICFs/DD.

Status: OCDD and DHH Legal staff met earlier this month to work on the draft legislative proposal to invest a portion of the MFP rebalancing fund into sustainable, cost-neutral mechanisms geared toward attainment of the goals bulleted above. Fiscal impact analysis continues. The DD Council has been advised of issues relative to the presentation of the proposal during the session. Developments more recent than this writing will be presented to the DD Council representation on the MFP Coordinating Committee at the meeting March 29.

Objective 6.1: Access to quality medical services for individuals with developmental disabilities will increase.

Activity 6.1.1 Advocate for Coordinated Care Network (CCN) policies to ensure people with developmental disabilities have access to adequate health care services.

Status: MVA, OCDD, and OAAS are working to move non-waiver services under the Bayou Health managed care system. This move will allow waiver recipients the opportunity to receive the expanded benefit package offered under the Bayou Health program. The anticipated implementation date is 7/1/12.