John Bel Edwards GOVERNOR



State of Louisiana

Louisiana Department of Health Bureau of Health Services Financing

October 2020 Louisiana Developmental Disability Council Report

Update/Progress on Agency Initiatives

Act 421 Implementation and Timeline

Act 421 of the 2019 Legislative Session mandates that the Department implement a Tax Equity & Fiscal Responsibility Act (TEFRA) option under the Medicaid program. Briefly, TEFRA allows disregard of parental income for children with disabilities who meet institutional level-of-care requirements, thus allowing the child with disabilities to receive Medicaid coverage. Act 421 requires submission of necessary documents to the federal Centers for Medicare and Medicaid Services (CMS). LDH submitted the waiver application on September 1, 2020, which was delayed due to COVID response.

Since passage of Act 421, LDH has worked internally across program offices and with external partners and stakeholders to develop a model for a TEFRA-like program in Louisiana. This modeling involved, among other things, estimating the size of the eligible population and the average annual cost of services for Act 421 members. These models have required continual refinement. Because it is a new eligibility group, at least a portion of the anticipated population is currently untracked by the Department, leading to uncertainty as to the overall size of the new population; likewise, the Department has worked to find suitable analogs among existing programs for projecting costs.

After consideration of numerous models, consultation with the legislative authors and stakeholder outreach, LDH has determined that Act 421 is best implemented as an 1115 demonstration waiver, implemented jointly by Medicaid and the Office for Citizens with Development Disabilities (OCDD) within LDH.

LDH requested \$13.6 million to fund the Act 421 program in the FY 2021 Executive Budget. This amount represents some ramp-up costs and an anticipated service delivery beginning January 1, 2021.

In accordance with federal regulations, LDH published a draft waiver application for public review and comment on July 10, 2020. The waiver was presented to the DD Council at its July meeting. In addition, Medicaid and OCDD held two public hearings on the waiver application in July, and presented the application to the Medicaid Quality Committee on August 21, 2020. Comments and questions from all four public meetings were incorporated into the final application. Members of the public were encouraged to submit written comments as well, and we received several comments through our web portal and via e-mail. These comments were incorporated into the final application to CMS.

The written presentation, initial draft application, and final application are all available for review at www.ldh.la.gov/Act421.

Timeline

The final 1115 demonstration application was submitted to CMS on September 1, 2020. On September 17, 2020, we received notice from CMS that our application was considered complete and it was posted for Federal public comment. We have requested a start date of January 1, 2021, and are currently engaged in systems planning and upgrades, policy development, and other necessary activities to ensure we are able to launch the program on January 1. That said, we must obtain approval from CMS prior to implementation, and are not guaranteed our requested start date. In the event the application is not approved in time for implementation by January 1, 2021, we have requested CMS allow an effective date for the start of the next available quarter following approval. We have not received any additional correspondence from CMS to date. Given that there is no required timeline for CMS review and approval, we are anticipating that an April 1, 2021, or later start date is more likely.

In the meantime, we continue to meet with our stakeholder group and local governing entities in order to obtain feedback on the operational details of the program.

Permanent Supportive Housing Services

The Office of Aging and Adult Services (OAAS), Office for Citizens with Developmental Disabilities (OCDD) and Office of Behavioral Health (OBH) continue to assist participants to transition into Permanent Supportive Housing. There are currently 4,718 individuals being served and 2,765 households providing Permanent Supportive Housing. A total of 7,559 individuals have been served since the beginning of the program.

Money Follows the Person

Since the fall of 2009 through year-to-date (as of September 2020), approximately 3,245 individuals have transitioned through the Money Follows the Person (MFP) program in OAAS and OCDD from qualified institutions (hospitals, nursing facilities, and supports and services centers), with 412 individuals having transitioned in CY 2018 and 275 individuals transitioned in CY 2019. So far there have been 132 individuals to transition CY 2020. While the COVID-19 public health emergency and limited staff presented its challenges, MFP has continued to break barriers. As of December 31, 2019, of the 42 states that were sill participating, Louisiana was and is considered one of the top 5 states for transitions and among those with the highest cumulative transitions to date since the inception of the program.

Over the past several years, Congress continues introduce bills that would provide longer reauthorization of the program. Currently, MFP reauthorization bills are under review in Congress. On November 20, 2019, CMS notified states that participants could transition through MFP through CY 2020 (December 31, 2020), based on available funding. On September 23, 2020, CMS announced a supplemental funding opportunity available to the 33 MFP demonstration states that are still currently operating MFP funded transition programs. Under this supplemental funding opportunity, up to \$5 million in MFP grant funds is being made available to each eligible state for planning and capacity building activities to accelerate LTSS system transformation design and implementation and to expand

HCBS capacity. Eligible states can submit supplemental budget requests under this funding opportunity on a rolling basis through June 30, 2021. Consistent with all MFP grant awards, funds will be available for the federal fiscal year in which it was awarded and four additional fiscal years. States are awaiting instructions from CMS on how and when to apply.

Self-Direction

- There are currently 1,646 individuals participating in the self-direction option as of 8/31/2020.
- All participants new to Self-Direction are given the 'Freedom of Choice' to select either Acumen Fiscal Agent or Morning Sun.
- Self-Direction participants may change fiscal employer agencies for dates of service at the beginning of the calendar quarter. This is to keep tax reporting clear.
- As of August 31, 2020, Morning Sun provided fiscal services to 56 Participants/Employers (OAAS/OCDD).
- A stakeholder meeting was held on October 7, 2020. A larger meeting will be scheduled with all self-direction employers in the upcoming weeks.

Electronic Visit Verification

LDH and its contractor SRI trained and worked with providers statewide to implement in-home electronic visit verification (EVV) to ensure Louisiana complies with requirements listed in the Cures Act. Ongoing technical assistance is provided on an ongoing basis as needed. All providers are reporting services through electronic visit verification. LDH issued a memo to providers on 3/20/19 detailing how compliance (specifically the degree of usage) will be monitored going forward and the expectations around proper use of EVV. At this time approximately 96% of providers are meeting the state benchmark of 80% EVV input.

Self-Direction

The state began requiring self-direction employers/employees to begin electronically entering time effective 1/1/2019. The state's fiscal employer agent contractor hosts an EVV module where employers/employees could utilize two options for reporting services/entering time: 1) a web-based portal requiring dual verification by both employer and employee and 2) a mobile app which records clock-in/out times and GPS. CMS released guidance in August of 2019 stating that option #1 (e.g. web-based portal using dual verification) is not permissible under the Cures Act. Currently, 86% of self-direction employers/employees report services utilizing this mechanism. In addition to the mobile app solution the state has identified alternative Cures compliant solutions 1) Telephony – clock in and clout out is done in real time and the number used needs to be the phone number on file with the participant 2) FOB Device – a fixed device that generates new codes at the press a button used to clock in and clock out. LDH will discuss the alternative solutions with stakeholders and solicit feedback in order to successfully transition from the use of the web-based portal option.

EPSDT Personal Care Services

EPSDT PCS providers have been the final population to implement EVV. Both fee-for-service and managed care providers are required to use EVV to report services as of October 1, 2020. Initially, compliance monitoring will review to ensure EPSDT provider are using the LaSRS EVV system. As with waiver in-home providers, the state will then phase in compliance percentages.

Behavioral Health

The Statewide Coordinated System of Care (CSoC) waiver enrollment totaled 2,327 as of 9/18/2020. *This data includes all children presumptively eligible and enrolled in 1915 b(3)/(c) waivers.

Region/Parish	Participant Count
Region 1 (Jefferson/Orleans area)	347
Region 2 (Capital area)	269
Region 3 (Covington area)	273
Region 4 (Thibodeaux area)	262
Region 5 (Lafayette area)	217
Region 6 (Lake Charles area)	182
Region 7 (Alexandria area)	187
Region 8 (Shreveport area)	198
Region 9 (Monroe area)	392
Total	2,327

Behavioral Health Network Adequacy Report 2020 Q2 (April-June)

All Plans

DHH Administrative Regions	*Addiction Outpatient	BH Rehabilitation	Crisis Stabilization	*Outpatient Therapy	Psychiatric Inpatient	Residential	Family Support Organizations	Total
Region 1 & 10 :								
Greater NO Area & Jefferson Parish	95	442	0	2,983	60	72	0	3,652
Region 2 : Capital	95	442	U	2,363	00	12	U	3,032
Area	112	283	0	1,473	54	70	0	1,992
Region 3 : South Central LA	40	87	0	630	32	11	0	800
Region 4 :	10	O,	· ·	030	32		Ü	555
Acadiana	57	141	0	942	68	34	0	1,242
Region 5:								
Southwest LA	37	90	0	513	42	19	0	701
Region 6 : Central LA	44	129	0	582	36	33	0	824
Region 7 :								
Northwest LA	55	292	1	1,030	32	20	0	1,430
Region 8 : Northeast LA	93	263	0	920	34	59	0	1,369
Region 9 :								
Northshore Area	43	134	0	1,163	29	14	0	1,383
Out of State	0	0	0	0	0	0	0	0
Grand Total	565	1,860	1	9,479	387	332	0	12,624

^{**}Grand Total consist of the sum of all providers from each plan, which may include duplicates.

Source: 328 Detail Report

Note: Provider Type: *=Individuals - Data is run by NPI#; Agency - Data is run by Service Address

DD Council Quarterly Report FY 21 Q1 Page 6

PLAN 1 : AmeriHealth Caritas Louisiana (ACLA)

DHH Administrative Regions	*Addiction Outpatient	BH Rehabilitation	Crisis Stabilization	*Outpatient Therapy	Psychiatric Inpatient	Residential	Family Support Organizations	Total
Region 1 & 10 : Greater NO Area & Jefferson Parish	19	103	0	945	18	14	0	1,099
Region 2 : Capital Area	27	67	0	429	16	13	0	552
Region 3 : South Central LA	11	22	0	237	8	2	0	280
Region 4 : Acadiana	15	33	0	255	22	3	0	328
Region 5 : Southwest LA	7	18	0	154	10	4	0	193
Region 6 : Central LA	11	28	0	178	10	9	0	236
Region 7 : Northwest LA	14	62	0	292	8	4	0	380
Region 8 : Northeast LA	25	59	0	264	11	16	0	375
Region 9 : Northshore Area	11	28	0	386	10	3	0	438
Out of State	0	0	0	0	0	0	0	0
Unduplicated Grand Total	140	419	0	2,663	113	68	0	3,403

PLAN 2 : AETNA BETTER HEALTH OF LOUISIANA

DHH Administrative Regions	*Addiction Outpatient	BH Rehabilitation	Crisis Stabilization	*Outpatient Therapy	Psychiatric Inpatient	Residential	Family Support Organizations	Total
Region 1 & 10 : Greater NO Area & Jefferson Parish	17	84	0	94	10	8	0	213
Region 2 : Capital Area	22	53	0	61	5	12	0	153
Region 3 : South Central LA	8	18	0	35	4	2	0	67
Region 4 : Acadiana	14	23	0	37	12	5	0	91
Region 5 : Southwest LA	9	14	0	19	8	2	0	52
Region 6 : Central LA	10	24	0	31	4	5	0	74
Region 7 : Northwest LA	9	61	1	59	5	3	0	138
Region 8 : Northeast LA	21	42	0	57	2	7	0	129
Region 9 : Northshore Area	9	23	0	37	4	3	0	76
Out of State	0	0	0	0	0	0	0	0
Unduplicated Grand Total	119	342	1	430	54	47	0	993

PLAN 3: Healthy Blue Louisiana

DHH Administrative Regions	*Addiction Outpatient	BH Rehabilitation	Crisis Stabilization	*Outpatient Therapy	Psychiatric Inpatient	Residential	Family Support Organizations	Total
Region 1 & 10 : Greater NO Area & Jefferson Parish	24	92	0	597	11	9	0	733
Region 2 : Capital Area	24	59	0	311	13	13	0	420
Region 3 : South Central LA	8	17	0	134	6	2	0	167
Region 4 : Acadiana	12	26	0	193	11	8	0	250
Region 5 : Southwest LA	6	16	0	139	9	3	0	173
Region 6 : Central LA	6	23	0	150	7	6	0	192
Region 7 : Northwest LA	9	60	0	218	6	3	0	296
Region 8 : Northeast LA	17	54	0	240	7	12	0	330
Region 9 : Northshore Area	8	28	0	230	5	3	0	274
Out of State	0	0	0	0	0	0	V	0
Unduplicated Grand Total	114	375	0	2,142	75	59	0	2,765

PLAN 4: LOUISIANA HEALTHCARE CONNECTION

DHH Administrative Regions	*Addiction Outpatient	BH Rehabilitation	Crisis Stabilization	*Outpatient Therapy	Psychiatric Inpatient	Residential	Family Support Organizations	Total
Region 1 & 10 : Greater NO Area & Jefferson Parish	21	81	0	309	11	20	0	442
Region 2 : Capital Area	24	54	0	158	10	12	0	258
Region 3 : South Central LA	6	16	0	66	7	2	0	97
Region 4 : Acadiana	8	26	0	152	13	7	0	206
Region 5 : Southwest LA	6	21	0	67	7	4	0	105
Region 6 : Central LA	11	26	0	77	7	9	0	130
Region 7 : Northwest LA	7	54	0	132	8	3	0	204
Region 8 : Northeast LA	21	50	0	121	7	16	0	215
Region 9 : Northshore Area	7	30	0	126	5	3	0	171
Out of State	0	0	0	0	0	0	0	0
Unduplicated Grand Total	111	358	0	1,186	75	76	0	1,806

Applied Behavior Analysis-Based Therapy Services

 Applied Behavior Analysis (ABA) therapy was carved in to the managed care delivery system on 2/1/18. Below is a summary of ABA utilization in August 2020.

August 2020 Chisholm MCO Reporting Data

August 2020	August 2020 Chisholin MCO Reporting Data											
	ACLA	AETNA	НВ	LHCC	UHC	TOTALS						
Number of CCMs with ASD	524	200	342	653	425	2144						
Number of PAs Requested for CCMs with ASD	19	8	5	42	35	109						
Number of PAs approved for CCMS with ASD	19	8	5	42	35	109						
Number of PAs denied	0	0	0	0	0	0						
Claims Paid for CCMS with ASD	\$121,301	\$98,605	\$111,857	\$1,492,846	\$215,008	\$2,039,617						
Enrolled Provider Groups	71	77	85	79	70							
Total licensed BCBAs	281	321	209	401	372							

PA = Prior Authorization CCMs = Chisholm Class Members ASD = Autism Spectrum Disorder BCBA = Board Certified Behavior Analyst