



*Redesigning*  
THE MEDICAID PROGRAM



# Public Health and Health Planning Council Meeting - Planning Committee Session

## Long Term Care Policy Questions and Implications

Mark Kissinger

Director, Division of Long Term Care

July 25, 2012



# Long Term Care (LTC)

- Long Term Care is costly and unwieldy
- State is a dominant player in paid care – national policy elusive
- Family or informal care is really the system



# LTC in New York State

- New York is moving away from fee-for-service approach toward care management for all
- Managed Long Term Care platform is the initial approach
- Duals demonstration – important milestone for change
- Full integration of care/benefits is goal



# LTC Policy Implications/Questions

- State oversight of providers/plans will evolve
- Managed care contracts become the vehicle to monitor access/quality
- Reliance on institutions will be reduced
- What is the role of residential providers (not just nursing homes)?



# LTC Policy Implications/Questions (cont.)

- What is the role of the family/informal supports?
- Level of disability – can public health interventions really help?
- New York State role versus local roles
- Wide Geographic variation



# Roll-Out of Mandatory Managed Long Term Care (MLTC)

- **Mandatory Population:** Dual eligible, aged 21 and over, receiving community based long term care services for over 120 days, *excluding* the following for now:
  - *Nursing Home Transition and Diversion waiver participants;*
  - *Traumatic Brain Injury waiver participants;*
  - *Nursing home residents;*
  - *Assisted Living Program participants;*
  - *Dual eligible that do not require community based long term care services.*



# Roll-Out of MLTC

## Phase I: New York City

- Beginning July 2012 - Any dual eligible case new to service, fitting the mandatory definition in any New York City county will be identified for enrollment and referred to the Enrollment Broker for action.
- Enrollment will be phased-in by service type by borough. People will be given 60 days to choose a plan according to the following schedule:
  - A) July 2012 – December 2012:** *Begin personal care cases in New York Boroughs, starting in New York County*
  - B) January 2013:** *Initiate enrollments citywide of long term home health care program, home health over 120 days, adult day health care program and private duty nursing cases not enrolled under personal care case activity*
  - C) February 2013 and until all people in service are enrolled:** *Personal care, consumer directed personal assistance program, long term home health care program, home health over 120 days, adult day health care program and private duty nursing cases in New York, Bronx, Kings, Queens and Richmond Counties*



# Roll-Out of MLTC Final Phase

- As plan capacity is established, dually eligible community based long term care service recipients will be enrolled as follows:
  - **Phase II - V:** *Nassau, Suffolk and Westchester Counties, Long Island, Metro New York and Upstate Counties – Anticipated January 2013 – June 2014*
  - **Phase VI:** *Previously excluded dual eligible groups contingent upon development of appropriate program*



# Context of Proposed Demonstration

- The capitated programs build off the mandatory Medicaid Advantage Plus (MAP) that is being implemented, includes broader benefit package while improving access and enhancing consumer protections.
- The MFFS program will build off of the Health Home program that is being implemented.
- Provides opportunity to test and evaluate fully-integrated care model.



# Highlights of the Duals Demonstration

- Capitated Model (FIDA): duals requiring 120 days or more of community-based LTSS
- OPWDD pilot program for OPWDD duals (10k)
- Added Managed FFS (MFFS) approach – using Health Home for dual eligibles
- Full Demonstration proposal can be found here:  
[http://www.health.ny.gov/facilities/long\\_term\\_care/docs/2012-05-25\\_final\\_proposal.pdf](http://www.health.ny.gov/facilities/long_term_care/docs/2012-05-25_final_proposal.pdf)