

Committee on Comprehensive System Change

Council on Long Term Care Reform

Meeting of December 8, 2006

Draft Minutes

Members present: Pat Anderson, Gerry Born, Paul Cook, Carol Eschner, Tom Frazier, George Potaracke, Tim Sheehan, and John Sauer

Members absent: Lynn Breedlove, Rich Kammerud, Craig Thompson

Others present: Lorraine Barniskis, Chuck Wilhelm, Sue Schroeder, Mark Stein, Bill Jensen, Nachman Sharon, Kathleen Luedtke, Janice Smith

Chair George Potaracke called the meeting to order at 9:10 a.m.

Nursing home access issues

Nachman Sharon highlighted the four phases of the DHFS analysis of the projected need for MA-funded nursing home beds in a managed care environment and the key findings of the report, and responded to questions. (See handout.) Members complimented him on the report and noted that it would be useful both as an input to policy-making and for nursing home industry planning.

Among the points made in the discussion were:

- It would be good to get to the point where all MA-funded nursing home residents were required to be in a managed care program, but current federal regulations require that consumer choice between two CMOs be available for this to happen.
- Further effort should be given to assuring informed choice for everyone entering nursing homes. We could require ADRC screens and counseling as part of accessing the MA card benefit for nursing facility care. This is complicated by the fact that most admissions are from hospitals and are Medicare covered for the first part of a stay.
- Some older nursing homes resemble hospitals; to update these will require assistance with capital costs.
- As the major purchaser of nursing home care, the state needs to strengthen its efforts to control nursing home utilization and guide the right-sizing of the industry.

The committee would like to discuss nursing home issues with Kevin Hayden and Sinikka Santala in February. A list of questions for that discussion was discussed. Members may email Lorraine with additional questions.

Updates from DHFS

Kathleen Luedtke reported in detail on progress in the Comprehensive System Change grant project. (See her handout, which includes links to sub-projects mentioned.) Plans for next year include:

- Support for state-level efforts to expand ADRCs and managed LTC statewide
- Additional support for regional planning groups
- Continuation of one-on-one technical assistance for planning groups with particular needs
- Deployment of a virtual ADRC
- Making permanent the dementia screening program
- Continuation of the Community Relocation Initiative

- Expansion and strengthening of consumer participation in reform planning, including support of the Consumer Corps project
- Implementation of the nursing home Recognition for Performance Initiative
- Evaluation of regional planning efforts

In response to Kathleen's request for guidance on how to use funding that will likely be left at the end date for the project, the committee unanimously recommended, on a motion by Paul Cook, seconded by Pat Anderson, that DHFS apply to CMS for a no-cost extension to continue the project for a fourth year. Other suggestions included: (1) increased technical assistance and support for ADRC development; and (2) continued work on the children's functional screen.

Chuck Wilhelm updated the committee on the ICF-MR Restructuring Initiative. The project is within budget, and has assisted 489 people to relocate to date. A total of 573 relocations is projected by the end of the biennium, with about 575 people remaining in ICFs-MR at that time. It is expected that by that time, the number of ICFs will have decreased by half (from 30 to 15). Counties, especially, are interested in closing facilities in order to free up county funds. Costs for community placements are averaging about \$207 per day. This is higher than the MA cost for institutional care, but if county supplemental funding is counted, costs are about the same.

Janice Smith updated the committee on the Community Relocation Initiative (see handouts). Chuck noted that the official DHFS report will go to the legislature next week; the committee may want to go into more detail on this project later. John Sauer noted the request for that he had sent to DHFS (distributed by email to the committee). He noted that his members don't see a noticeable change in discharge patterns related to this initiative, and suggested that some relocations were of people who would have been discharged to home or another community placement without the project. He requested further analysis using MDS data to determine the acuity levels of relocated individuals. There was general agreement that those who were relocated after relatively long nursing home stays probably would not have relocated without this program. Janice also provided an update on the limited nursing home diversion program.

Comments from the public

There were no public comments.

Committee business

- The minutes of the April 13, 2007 meeting were approved unanimously, on a motion by Carol Eschner, seconded by Paul Cook.
- The minutes of the August 10, 2007 meeting were approved unanimously, on a motion by Gerry Born, seconded by Pat Anderson.
- After some discussion, the committee decided to continue meeting on the second Fridays of the month (alternate months to full Council meetings) in 2007. Meeting dates will be:
 - February 9
 - April 13
 - June 8
 - August 10
 - October 12
 - December 14
- John Sauer distributed copies of a brochure describing the recommendations of AAHSA for financing long-term care. The position posits that the current welfare-

model Medicaid system is unsustainable, and proposes a payroll-tax based universal insurance program.

Nursing Home Recognition for Performance (R4P) Quality Initiative

Sue Schroeder distributed a memo from Sinikka Santala and Kevin Hayden on the nursing home R4P initiative, described the process of development and goals of the initiative (see handout), and responded to questions. She emphasized that getting to a real pay-for-performance program will take considerable time and money.

Stakeholder involvement in regional LTC planning efforts

Carol Eschner noted that her experience with the Council's Stakeholder Committee indicates that a large part of the task of getting people more involved is to educate consumers and other stakeholders about what is being discussed by whom at various stages and to help them determine where and when they really want to be involved. Tim Sheehan agreed with this and added that a mandated voice for consumers in the actual governance of the system is more important than being at the table when arcane issues such as technical mechanisms for governance and rate-setting are discussed. It was noted that both the ADRC application and the CMO RFP include sections requiring collaboration with consumers and other stakeholders, including county aging units. Paul Cook said that the best forum his planning group has had to date was one in which consumer families talked about the issues that were important to them, while planning committee members just listened. There was discussion of planned training sessions for consumers through the Consumer Corps project.

It was suggested that efforts be intensified (perhaps through a strong suggestion from DHFS) to ensure that members of the Council's Stakeholder Committee members are at the table in regional planning. These members could add a voice to these planning efforts and bring back information to the committee. There was committee agreement that this should be pursued.

Future agenda items

- Next meeting scheduled for February 9. Suggested items for future agendas (cumulative list):
 - Discussion on assisted living – impact of managed care, appropriate roles, quality assurance systems (including CMO contracts). (Likely begin by looking at the Residential Options Task Force recommendations.)
 - Continued discussion on workforce development.
 - Transportation issues – Ask co-chairs of the DHFS-DOT interagency committee to participate (Fred Bove and director of DOT's E & H unit)
 - Capacity development in the area of accessible, affordable independent apartments, especially for younger people with disabilities.
 - Invite leadership of the aging network to talk about their role in reform efforts.
 - Update on planned changes to the MMIS system and its interface with LTC reform and other county functions.
 - Continued updates on efforts of local planning consortia.
 - Continued discussion of nursing home access issues (reports from DHFS and discussion).

- Discussion of what insurance regulations will impact LTC reform efforts
- Discuss the roles of PACE/Partnership in the new system; will they run side by side with other programs?
- Invite Family Care representatives and nursing home representatives from Family Care counties to speak
- Review data on nursing home relocations by target group and length of stay
- Review status of nursing home downsizing agreements and payments
- Possibly meet in a nursing home
- County issues raised by the Southeastern planning consortium, including:
 - Retention of sufficient funds to provide administrative infrastructure for serving people not eligible for Family Care
 - Need for funding to have fully functional ADRCs
 - Funding for sufficient county economic support staff to do financial eligibility determination for Family Care
 - Funding for APS, crisis and short-term case management services for people not eligible (or not yet eligible) for Family Care
 - Infrastructure needs for remaining county responsibilities, including mental health, child welfare, juvenile justice and public health, in light of past decades of stagnation in state and federal funding for these county-mandated services.
 - Potential county costs for local oversight, public accountability and consumer grievance processes in the new LTC system
 - Potentially inaccurate assumptions regarding LTC costs.
- Updates on nursing home quality and acuity-based rates (as timing is appropriate)
- Overview of federal requirements and needed waivers to proceed with reform (after it is more clear what regional consortia want to do)
- Update on efforts to develop affordable assisted living and housing.
- Planning for consumer advocacy in the new system.
- Additional discussion on how Medicaid LTC reform will interface with Medicare managed care, including how to avoid Medicaid investments in reform resulting only in savings to Medicare and cost-shifting from SNPs to Medicaid. Related interface issues from provider perspectives (address concerns expressed by WPSA). Relationships between SNPs and counties for people receiving services from both.
- Overviews of various risk-based payment systems and trends toward individually based rates
- Updates on ICF-MR Restructuring Initiative, Community Relocation Initiative and the CSC project.

Meeting adjourned at approximately 2:35 PM.