National Health Policy Forum

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2001: Mississippi Access to Care plan established a 10-year plan to increase Home and Community-Based Services

2002: Billy A & MS Coalition for Citizens with Disabilities v. Lewis-Payton Case

2011: Money Follows the Person funded Bridge to Independence

2011: Health Homes Planning Grant

2012: Bridge to Independence began as part of the Bureau of Policy, Planning & Development with the Mississippi Division of Medicaid

2012: The Balancing Incentive Payment Program funded MAC 2.0 to assist in rebalancing the long-term care system
Mississippi Statistics

Mississippi Medicaid Beneficiaries

Currently Serving

<table>
<thead>
<tr>
<th>Month</th>
<th>Jan-13</th>
<th>Feb-13</th>
<th>Mar-13</th>
<th>Apr-13</th>
<th>May-13</th>
<th>Jun-13</th>
<th>Jul-13</th>
<th>Aug-13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>641,814</td>
<td>643,286</td>
<td>644,125</td>
<td>644,512</td>
<td>644,423</td>
<td>643,687</td>
<td>642,964</td>
<td>644,504</td>
</tr>
</tbody>
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Mississippi Statistics

Medicaid Beneficiaries Ages

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Total Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ages 0-8</td>
<td>178,379</td>
</tr>
<tr>
<td>Ages 8-19</td>
<td>169,661</td>
</tr>
<tr>
<td>Ages 19-21</td>
<td>11,959</td>
</tr>
<tr>
<td>Ages 21-65</td>
<td>202,999</td>
</tr>
<tr>
<td>Ages 65 &amp; older</td>
<td>81,506</td>
</tr>
</tbody>
</table>

Totals: 644,494
Mississippi Statistics

Medicaid Waiver Population

<table>
<thead>
<tr>
<th></th>
<th>AL</th>
<th>TBI/SCI</th>
<th>ID/DD</th>
<th>IL</th>
<th>E &amp; D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Currently Serving</td>
<td>600</td>
<td>816</td>
<td>1,991</td>
<td>2,244</td>
<td>14,204</td>
</tr>
</tbody>
</table>
Implementing the Programs:

- **Money Follows the Person (MFP)**
  - Staff funded through administrative part of the grant
  - Cost of services are covered by HCBS
  - Cost savings used to fund demonstration services
Implementing the Programs:

Balancing Incentive Program (BIP)

- Tasks are absorbed by current employees
- No funded positions
- Multifaceted approach
- Infrastructure changes funded by savings
- Incredible Buy-in
Implementing the Programs:

1. **Community First Choice (CFC)**
   - Unable to explore at this time
   - On the radar

2. **No staff to manage the program**
Implementing the Programs:

Unable to fully utilize planning grant due to competing projects

No staff to manage the project

Create new state plan

Health Homes State Plan
Which Programs to Implement:

Money Follows the Person (MFP)

- Aligned with current goals of rebalancing Mississippi’s long-term care system
- Timing was right
Which Programs to Implement:

Balancing Incentive Program (BIP)

- Aligned with current goals of rebalancing Mississippi’s long-term care system
- Implement Systems Reform
- 5% savings on every HCBS
- Operationalize No Wrong Door
- Address conflict-free case management
Which Programs to Implement:

Community First Choice (CFC)

- No decision
Which Programs to Implement:

- Health Homes
- State Plan
- No decision
Prioritizing HCBS implementation:

Enrollment is working on Medicaid eligibility expansions

Policy, Long-Term Care & Mental Health are working on Long-Term Services & Support reform

Multiple teams working

Information Technology and Enrollment are working on eligibility changes and watching the exchange issue
Alignment with existing programs and establishing managed LTSS systems:

Bridge to Independence and the Balancing Incentive Program are coordinated with existing long-term care services.

No efforts to establish Medicaid managed Long-Term Services & Support systems.
Continuing programs:

- Able to grow programs
- Expect programs growth to maintain or continue once enhanced matching funds sunset
- Identify cost savings
- Legislative support
The effect of the various programs’ matching funds:

- Waiver expansion
- Infrastructure development
- Conflict-free case management
- Training direct care staff
- Person Centered Planning Training
- Pilot demonstration
- 1915 (i) implementation
- MAC centers (Mississippi Access to Care)
- Addressing housing issues