Waiver Slot Enrollment Progress Report

As Required by the 2016-17 General Appropriations Act (Article II, Department of Aging and Disability Services, Rider 31, House Bill 1, 84th Legislature, Regular Session, 2015)

Texas Department of Aging and Disability Services

March 2016

INTRODUCTION AND CHARGE

The 2016-17 General Appropriations Act (Article II, Department of Aging and Disability Services, Rider 31, House Bill 1, 84th Legislature, Regular Session, 2015) directs the Department of Aging and Disability Services (DADS) to submit a plan for waiver slot enrollment to the Legislative Budget Board, the Governor, the Senate Finance Committee and the House Appropriations Committee. This plan should include waiver slot enrollments appropriated for the following programs and purposes:

a. Promoting Independence (PI) Initiative for the Home and Community-based Services (HCS) waiver program:
   (1) for persons moving out of large and medium Intermediate Care Facilities for Individuals with Intellectual Disabilities or Related Conditions (ICF/IID);
   (2) for children aging out of foster care;
   (3) to prevent institutionalization/crisis;
   (4) for persons moving out of State Hospitals; and
   (5) for children moving out of Department of Family and Protective Services (DFPS) general residential operations (GRO).

b. Reduction of the interest lists (IL) for the following waiver programs:
   (1) Medically Dependent Children Program (MDCP);
   (2) Community Living Assistance and Support Services (CLASS);
   (3) HCS; and
   (4) Deaf Blind with Multiple Disabilities (DBMD).

c. Compliance with federal Preadmission Screening and Resident Review requirements for the HCS waiver program:
   (1) for persons with intellectual and developmental disabilities (IDD) moving from nursing facilities; and
   (2) for persons with IDD diverted from nursing facility admission.

PROGRESS REPORT

In accordance with the rider, the progress report identifies:

- the number of individuals enrolled in each type of slot and for each purpose identified in the rider;
- the planned enrollment for the remainder of the 2016-17 biennium;
- any systems delays or barriers with enrollment, as identified by the agency; and
- a plan to address those issues to achieve targets by the end of fiscal year 2017.

INDIVIDUALS ENROLLED IN EACH TYPE OF SLOT AND PURPOSE

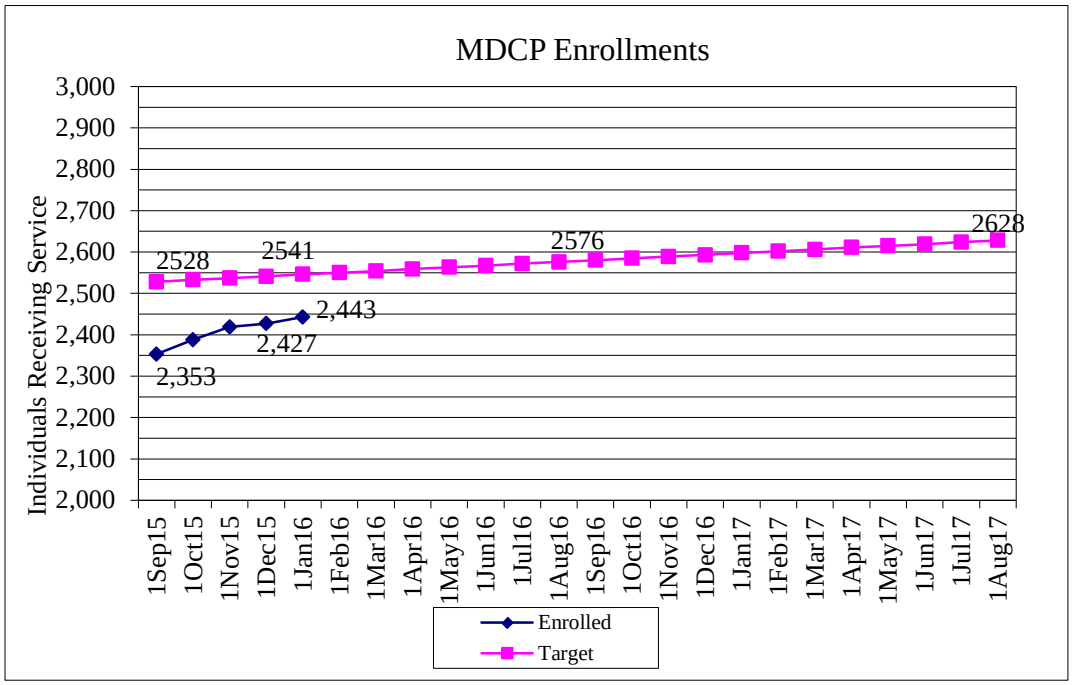
Program	Type of Slot	Purpose	Net Change In Enrollment as of January 2016	End of FY 2016 Target*	End of FY 2017 Target* (Cumulative)
MDCP	IL Reduction		59	192	244
CLASS	IL Reduction		(37)	715	853
DBMD	IL Reduction		6	51	76
HCS	IL Reduction		691	269	1692
HCS	PI Initiative	For persons moving out of large and medium ICF/IID	68	250	500
		For children aging out of foster care	44	108	216
		To prevent institutionalization/crisis	82	200	400
		For persons moving out of State Hospitals	27	60	120
		For children moving out of DFPS GRO	2	13	25
HCS	Compliance with federal PASRR requirements	For persons with IDD moving from nursing facilities	70	350	700
		For persons with IDD diverted from nursing facility admission	40	300	600

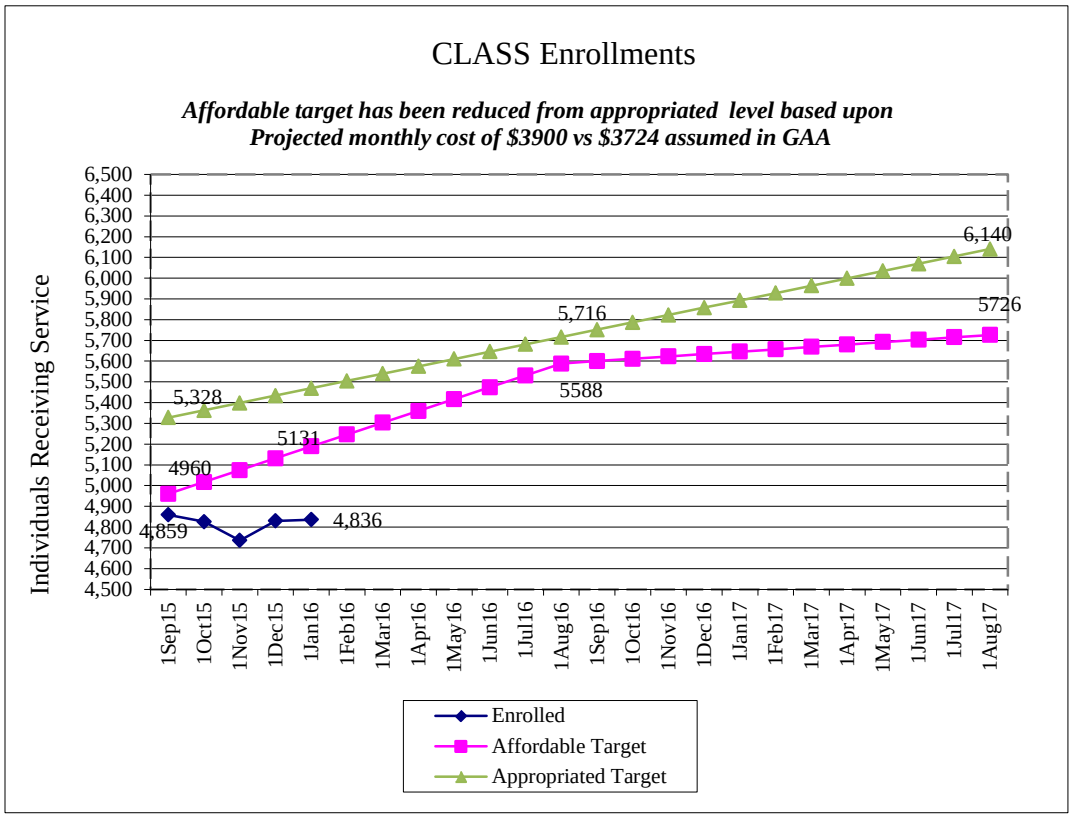
* DADS adjusted end-of-fiscal-year targets to account for any under- or overfilled slots as of the end of August 2015. In August 2015 there were 140 unfilled slots in MDCP, 494 unfilled slots in CLASS, and 26 unfilled slots in DBMD. The HCS waiver was *overfilled* by 442 slots. In addition, the CLASS slot target was adjusted to account for higher per person costs than were assumed in the General Appropriations Act.

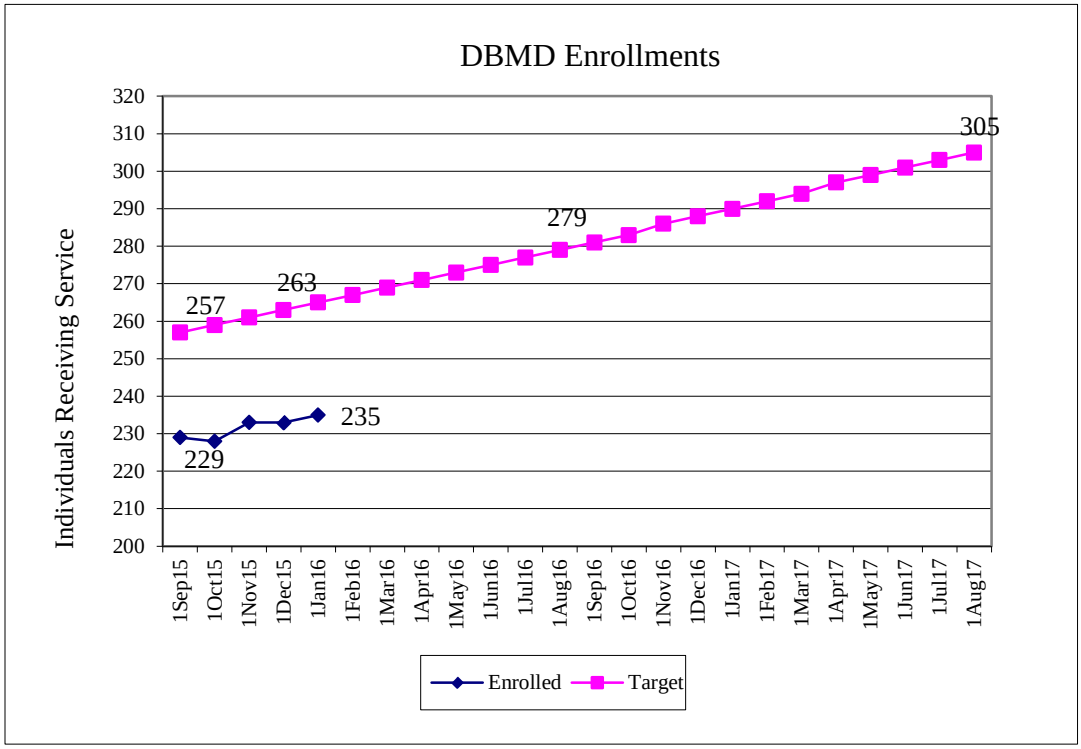
Monthly HCS Enrollment Counts

HCS Data - Legislative Progress Report for HCS Slots			Enrollment Counts by Month (cumulative)				
Program	**Type of Slot**	**Purpose**	**Sept-15 (thru 9/30/15)**	**Oct-15 (thru 10/31/15)**	**Nov-15 (thru 11/30/15)**	**Dec-15 (thru 12/31/15)**	**Jan-16 (thru 1/31/16)**
HCS	PI Initiative	For persons moving out of large and medium ICF/IID	14	28	37	50	68
		For children aging out of foster care	8	17	28	35	44
		To prevent institutionalization/crisis	7	33	54	73	82
		For persons moving out of State Hospitals	7	14	17	19	27
		For children moving out of DFPS GRO	1	2	2	2	2
HCS	Compliance with federal PASRR requirements	For persons with IDD moving from nursing facilities	9	19	34	45	70
		For persons with IDD diverted from nursing facility admission	8	13	16	27	40

Targeted Enrollment and Actual Enrollment Comparison Illustrations




CLASS Enrollments
Affordable target has been reduced from appropriated level based upon
Projected monthly cost of $3900 vs $3724 assumed in GAA
Individuals Receiving Service
6,500
6,400
6,300
6,200
6,100
6,000
5,900
5,800
5,700
5,600
5,500
5,400
5,300
5,200
5,100
5,000
4,900
4,800
4,700
4,600
4,500
6,140
5726
5,716
5588
5,328
5131
4960
4,859
4,836
1Sep15
1Oct15
1Nov15
1Dec15
1Jan16
1Feb16
1Mar16
1Apr16
1May16
1Jun16
1Jul16
1Aug16
1Sep16
1Oct16
1Nov16
1Dec16
1Jan17
1Feb17
1Mar17
1Apr17
1May17
1Jun17
1Jul17
1Aug17
Enrolled
Affordable Target
Appropriated Target


DBMD Enrollments
Individuals Receiving Service
320
310
300
290
280
270
260
250
240
230
220
210
200
305
279
263
257
235
229
1Sep15
1Oct15
1Nov15
1Dec15
1Jan16
1Feb16
1Mar16
1Apr16
1May16
1Jun16
1Jul16
1Aug16
1Sep16
1Oct16
1Nov16
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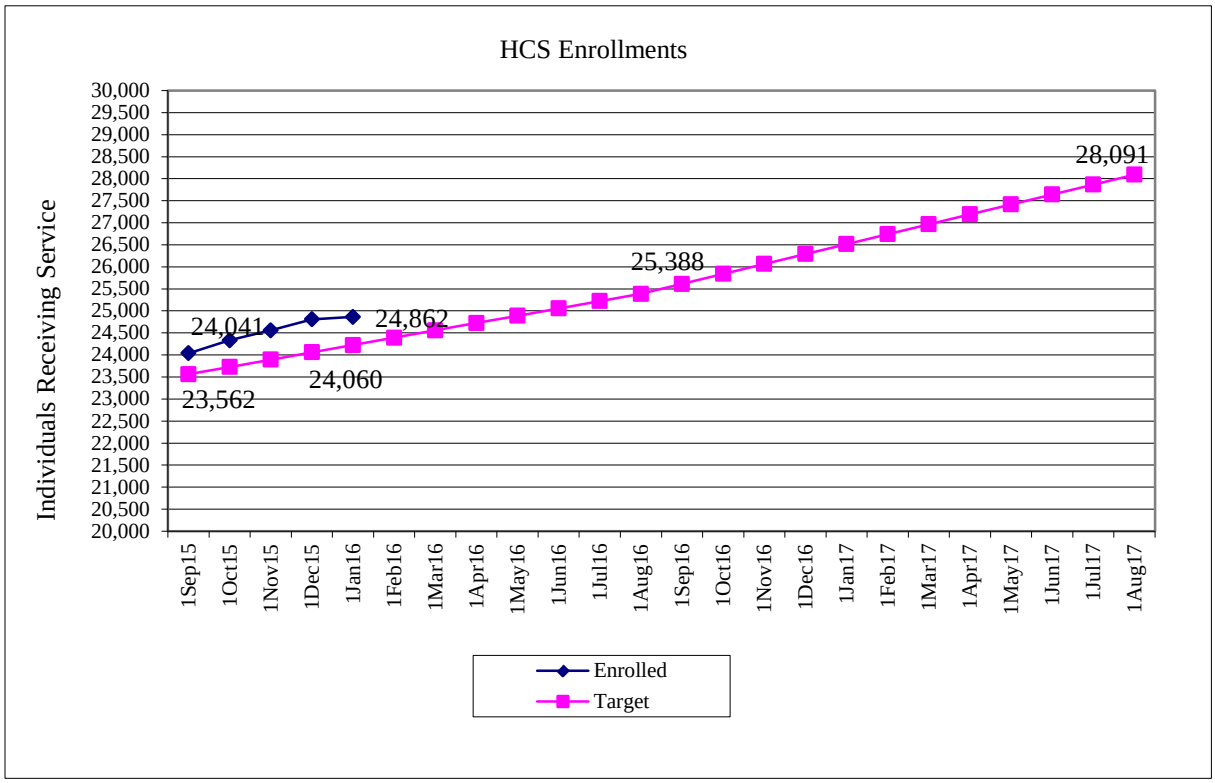
1Jan17
1Feb17
1Mar17
1Apr17
1May17
1Jun17
1Jul17
1Aug17
Enrolled
Target



PLANNED ENROLLMENT FOR THE REMAINDER OF THE 2016-17 BIENNIUM

Enrollment data for DADS waiver programs is a snapshot in time. The number of individuals who are in various stages of enrollment, enrolled in a waiver program or whose providers submitted claims fluctuates. Following a waiver slot offer, several factors may impact an individual's progress through the enrollment process to successful enrollment or closure of the slot offer, including:

- functional and diagnostic eligibility;
- provider selection;
- Medicaid eligibility;
- bed availability of a preferred residential setting;
- transition planning from an institution to the community; and
- plan of care development.

Below are the enrollment actions DADS takes to ensure individuals are enrolled in waiver services as intended by appropriations.

1. DADS calculates the affordable average number of slots for each waiver based upon projected service costs, and if needed, adjusts the enrollment targets in order to remain within appropriated funding levels. For example, for the 2016-17 biennium, DADS estimates the monthly cost for CLASS to be $3,900 compared to $3,724.61 as assumed in the General Appropriations Act.

The appropriation assumes DADS will roll out slots equally throughout the 2016-17 biennium, except as directed by Rider 31, Subsection (b)(3), which requires an enrollment of 711 persons by the end of fiscal year 2016 and the remainder enrolled in fiscal year 2017.

2. In order to achieve a gradual rollout of slots, DADS prospectively releases names from the interest list on a monthly basis.
   a. In determining the number of names to release each month, DADS takes into account the historical "take-up-rate"[1], as well as the historical number of waiver slots expected to come open each month as the result of attrition.
   b. Because the enrollment process can be lengthy, DADS releases more names from the interest lists at the beginning of the fiscal year to ramp up enrollment.

3. To maintain target enrollments for the biennium, DADS staff meets monthly to:
   a. review the number of individuals enrolled in each waiver program[2];
   b. identify the number of individuals whose eligibility is in the process of being determined;
   c. discuss the waiver slot take-up-rate; and
   d. review the number of remaining slots available.

4. Executive management uses the information identified above and determines the number of names to release from the interest lists in the following month.

5. When DADS identifies individuals whose Medicaid eligibility is not progressing timely, the agency works with:
   a. HHSC to prioritize these cases for expedited resolution; and
   b. service providers to offer technical assistance and identify potential waiver program enrollment barriers.

IDENTIFIED ENROLLMENT SYSTEMS DELAYS OR BARRIERS BY THE AGENCY AND PLAN TO ADDRESS IDENTIFIED ISSUES TO ACHIEVE TARGETS BY THE END OF FISCAL YEAR 2017

Based on implementation of the enrollment plan, DADS expects to meet the appropriated waiver slot enrollment targets and identified no system delays or barriers from achieving this goal.

In accordance with the rider, DADS will submit the second progress report by September 1, 2016.

[1] A formula takes into account the number of successful enrollments in proportion to the number of names released in the past.
[2] The number of individuals enrolled in a waiver program is based on paid claims.