



***National Home and Community Based Services
(HCBS) Conference***

***Shall We Dance?: Collaboration
between Medicaid and Aging***

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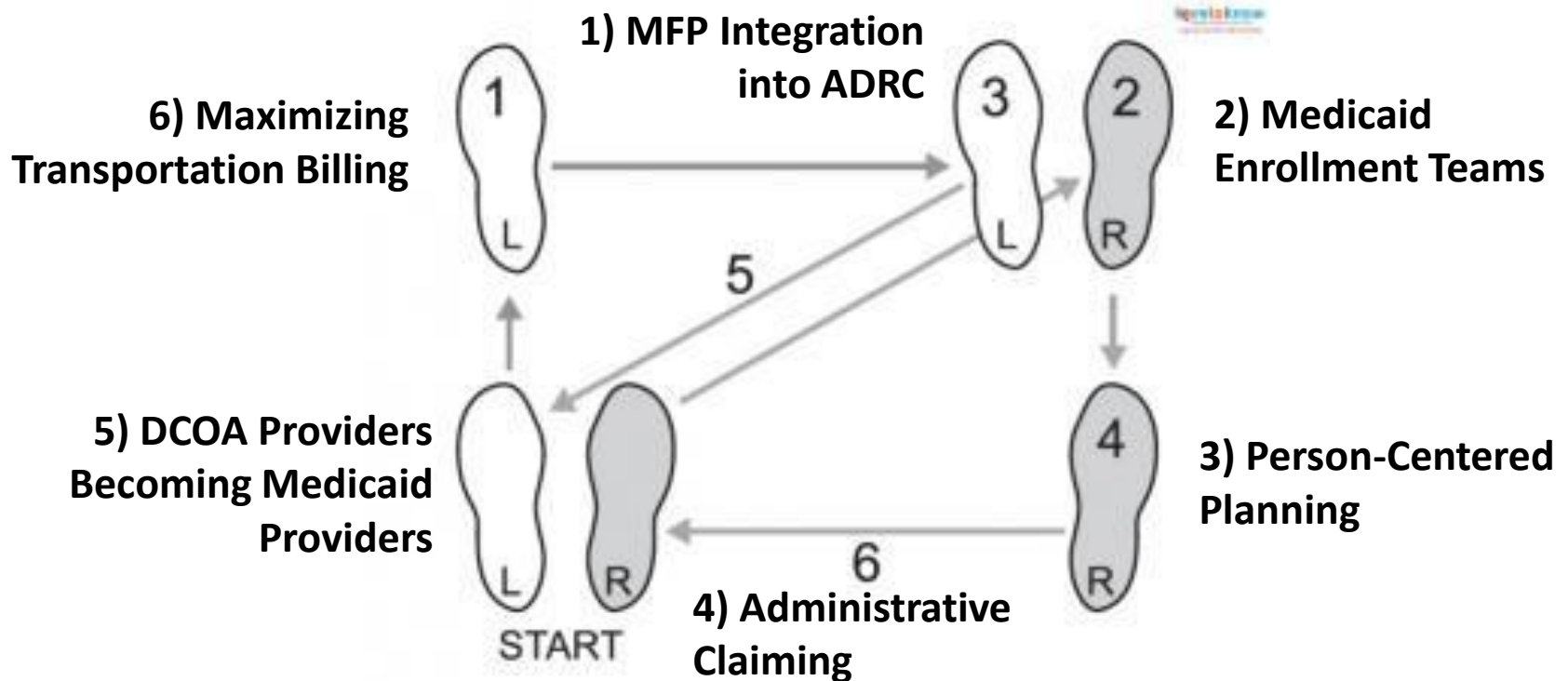
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Two-Stepping Towards Partnership



DC Medicaid and the DC Office on Aging (DCOA) partnered to streamline access to long term services and supports for District residents age 60 and older and people with disabilities age 18 and older.





Integrating MFP into DCOA's ADRC



- Through its Money Follows the Person (MFP) Demonstration, DHCF transferred >\$2.6M from FY10-FY17 to support nursing home (NH) transition and diversion activities at DCOA's ADRC
- The first MFP-EPD transition team was established to support an expanded pilot of the MFP Demonstration for NH residents transitioning to the EPD Waiver
- DHCF hired MFP Transition Coordinators in FY10, and continued to support outreach and new staff at the ADRC through FY14
- With local funding the ADRC established its own Nursing Home Transition Program to assist people ineligible for MFP in FY13
- In FY15, DHCF and DCOA consolidated MFP and NHT operations at the ADRC. Key staff transferred from DHCF to DCOA, while DHCF maintains reporting responsibility of MFP to CMS





Establishing Medicaid Enrollment Teams at ADRC

- The Medicaid Enrollment Specialists (MES) Team was established in June 2015 to improve the District's enrollment process for the Elderly and Persons with Physical Disabilities (EPD) Waiver

- The MES team initially provided home visits to all EPD waiver applicants
- In April 2017, in an effort to reduce enrollment timelines and improve customer service, the ADRC began offering 3 additional pathways to enrollment: self-service, office visits, and phone consultations
- The MES team has submitted about 1,800 EPD waiver applications to the Economic Security Administration (ESA) since June 2015
- Application processing times have reduced from 200+ days to 60 days
- DHCF and ADRC won the 2017 16th Annual Cafritz Award for Team Innovation



Providing Person-Centered Planning



- As part of DC's 1915(i) Adult Day Health Program (ADHP), enrolled beneficiaries required a person-centered plan (PCP)
- Individuals enrolled in ADHP do not have case managers to help support development of a PCP, unless they are also enrolled in the EPD Waiver
- DCOA works with ADHP beneficiaries in PCP development for non-EPD Waiver beneficiaries.





Administrative Claiming for ADRC

- In FY16, DHCF began efforts to allow DCOA to bill Medicaid for DHCF-related services (aka administrative claiming)
- DCOA conducted a time study to determine the ratio of Medicaid to non-Medicaid work within the agency (initially a 72:28 split)
- DHCF incorporated administrative claiming into its MOU with DCOA
- DCOA began conducting Medicaid administrative claiming in FY17





Enrolling DCOA Providers As Medicaid Providers



- DCOA funds locally-funded case management services
- DHCF and DCOA worked to identify individuals served in both systems and imposed restrictions limiting “double” case management
- DCOA stopped funding case management services to EPD Waiver clients and required that its providers enroll as EPD waiver case management providers as long as no conflict exists



Enrolling DCOA Transportation Vendor under DHCF's NEMT



- DCOA operates a transportation service for DC residents >60 years of age which is funded largely through local dollars
- Many of those individuals are also enrolled in DC Medicaid
- A transportation review was done across multiple entities, including DCOA and DHCF, which identified areas of duplication and overlap
- In order to preserve the relationship between DCOA's transportation provider and beneficiaries, DHCF enrolled DCOA's provider into the NEMT provider network
- Beneficiaries can continue getting their usual medical transportation but via DHCF's NEMT, which saves valuable local dollars



It Takes Two to Tango: Lessons Learned

- Develop a common vision and set of goals for the collaboration
- Establish agreed upon outcome measures, performance goals, and reporting requirements
- Synthesize a workflow reflecting various party's responsibilities
- Schedule frequent (i.e., bi-weekly) team discussions for the first 12-18 months of partnership development
- Create an environment of open communication and flexibility





Questions/Discussion