

CDCAN DISABILITY RIGHTS REPORT CALIFORNIA DISABILITY COMMUNITY ACTION NETWORK

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Advocacy Without Borders: One Community – Accountability With Action - California Disability Community Action Network Disability Rights News goes out to over 55,000 people with disabilities, mental health needs, seniors, traumatic brain & other injuries, veterans with disabilities and mental health needs, their families, workers, community organizations, including those in Asian/Pacific Islander, Latino, African American communities, policy makers and others across California.

REMEMBERING THE LIFE AND WORK OF CHRISTINA KEIFER

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California Budget Crisis:

SCHWARZENEGGER ADMINISTRATION RELEASES DRAFT IMPLEMENTATION PLAN FOR SWEEPING CHANGES TO MEDI-CAL PROGRAM IMPACTING PEOPLE WITH DISABILITIES, MENTAL HEALTH NEEDS & SENIORS

Proposed Draft Implementation Plan Seeks Renewal and Major Expansion of Existing Medicaid Section 1115 Waiver Set to Expire August 2010 – Plan Needs Approval from Obama Administration – Will Be Discussed At May 13th Stakeholder Advisory Committee Public Meeting

SACRAMENTO, CALIF (CDCAN) [Updated 05/07/2010 07:00 PM (Pacific Time)] – The Schwarzenegger Administration released this week a draft implementation plan that outlines steps to make sweeping changes to the Medicaid program (called “Medi-Cal” in California) that will impact tens of thousands of people with disabilities – including those with developmental disabilities, mental health needs and seniors, as part of an effort to renew and expand an existing special Medicaid demonstration project called a “Section 1115 Medicaid Waiver”. A copy of the 29 page draft implementation plan is attached (titled “2010-May-Section1115WaiverProposedImplementationPlan.pdf”) to this CDCAN Report and also can be viewed or downloaded from the CDCAN website at www.cdcan.us

The draft implementation plan – when finalized – is meant to be submitted to the federal government as the next major step toward gaining approval of renewing and dramatically expanding the State’s Section 1115 Medicaid Waiver. The draft plan is the major part of the agenda of the next Medicaid Section 1115 Stakeholder Advisory Committee meeting scheduled for May 13th, Thursday from 09:30 AM to 12:30 PM (see below for details).

The proposal calls for shifting, over a phased in period of five years, tens of thousands of children and adults with disabilities, the blind, mental health needs and seniors into an “organized delivery systems of care” that could use existing managed health care systems or create new systems, including newly developed “enhanced medical home” models. Among those that would be included would be children and adults with developmental disabilities eligible for services coordinated by the 21 non-profit regional centers under contract by the Department of Developmental Services. The draft implementation plan outlines what

counties would be impacted and contains an outline by month for implementing the proposal – though does not contain specifics.

With California facing an enormous and on-going budget deficits, the issue has major impact – eventually – on the State budget and the State’s compliance with the landmark 1999 US Supreme Court “Olmstead Decision” under the Americans with Disabilities Act.

Depending on how details are finalized, it could also could have major impact on other Medicaid funded services and programs that California provides including In-Home Supportive Services (IHSS), regional center community-based services, and mental health community-based services and children’s health services.

Medicaid Waivers Allows States To Use Pilot Projects To Test Out Different Approaches to Medicaid Community-Based Services

- A Medicaid waiver allows the federal government to authorize a pilot or demonstration project that normally would not be allowed under federal Social Security laws (which Medicaid falls under) and Medicaid regulations) .
- California has several different waivers – including a waiver (set to expire in September) dealing with mental health services’ home and community based services waiver dealing with persons with developmental disabilities and more.

Major Impact To People With Disabilities, Seniors, Mental Health Needs

The Section 1115 Medicaid Waiver proposal is meant to eventually impact nearly all children and adults with disabilities – including those with developmental disabilities, mental health needs and seniors because the idea is to dramatically change how Medi-Cal services are delivered to those individuals from the traditional “fee for service” model to an “organized delivery systems of care” where costs can be controlled while – the State policymakers hope – quality can be maintained and even improved.

The State’s original concept paper and the draft May 2010 implementation plan said the proposal is organized around the “...*four principal vulnerable Medi-Cal populations and the programs that serve them in California*” as follows:

1. Seniors and Persons with Disabilities [sometimes referred to as “SPDs” – though CDCAN is urging policymakers and advocates not to use that abbreviation as the general public has no idea what that term stands for]
2. Children with Special Health Care Needs;
3. Persons with Behavioral Health Disorders and/or Substance Abuse Requiring Integration of Care;
4. Persons with Dual Medi-Cal and Medicare Eligibility [sometimes referred to as “Medi-Medis”].
5. The draft implementation plan says that the “*target population is Medicaid-Only beneficiaries. The waiver will serve a target population of approximately 380,000 Medi-Cal SPDs [seniors and people with disabilities] who are not enrolled in Medicare or who do not have an unmet share of cost or other health coverage. It includes those beneficiaries who reside in the 14 counties where managed care exists and enrollment of SPDs [seniors and people with disabilities] is not currently mandatory. This population accounts for \$7.5 billion in Medicaid*”

expenditures annually, including DHCS [Department of Health Care Services] and other department spending. Attachment 1 [of the draft implementation plan] provides 2007-08 enrollment of this SPD [seniors and people with disabilities] population by county.”

6. The draft implementation plan says the proposal would “*require mandatory enrollment. The waiver will require all seniors and persons with disabilities to enroll in an organized system of care as authorized by ABx4 6 (Statutes of 2009)*”

7. The draft implementation plan says that the proposal would “*Utilize organized delivery system models. The state will begin implementation in the first year of the five-year waiver by enrolling SPDs [seniors and people with disabilities] into existing managed care plans upon approval of the waiver. This approach builds on the state’s existing infrastructure of managed care plans that has been developed over the past 20 years. It will require existing managed care plans to demonstrate compliance with new SPD [seniors and people with disabilities] specific standards developed by the state and in consultation with stakeholder partners.*”

8. The draft implementation plan says that other counties could implement a “*County Alternative Option. In addition to enrollment in existing managed care plans, counties will have the option to establish an additional organized system of care that reflects and meets unique local needs and circumstances. This additional choice could be offered along with existing plans as an additional option for SPDs [seniors and people with disabilities] who are required to enroll in organized systems of care, per ABx4 6.*”

9. The draft implementation plan mentions that the proposal would “*Incorporate essential elements of organized delivery systems. The entities providing services to SPDs [seniors and people with disabilities] will be required to meet more specific standards related to care management and performance measurement.*”

The Schwarzenegger Administration, in the May 2010 draft implementation plan said that the four target populations were selected for two principal reasons:

1. These four populations “*represent the greatest opportunities for improving outcomes of care through greater care coordination and integration*”.
2. These four groups represent “*a significant share of the fee for service costs [where people go to their individual doctor that they choose] in the State’s current Medi-Cal program. Therefore the Waiver provides a significant opportunity to shift the Medi-Cal cost curve and lower the long-term annual rate of State expenditure growth at a time when public finances are severely constrained*”

Advocates Concerned About Implementation Details and “Plan Readiness”

- Many disability and senior advocates, while supporting the need for major reforms to the Medi-Cal program that would improve quality and delivery of services, are concerned on the details of the proposal – and the details of “organized delivery of systems of care” that could include existing managed health care plans. Comments and letters from various advocacy groups and individuals have been submitted to the Department of Health Care Services in recent months.
- Some advocates say some of those existing managed health care systems are not ready or prepared to provide services specifically for persons with disabilities or seniors. Some advocates have pointed out specific physical barriers and related access problems but also cultural and language issues.

- Other advocates over the years have raised concerns about the readiness of existing managed health care plans – or newly developed plans – would address specific needs of persons with developmental disabilities or mental health needs, including quality of care. The Schwarzenegger Administration says that those issues have been or are being addressed as the waiver proposal moves forward.

Proposal Meant to Rein In Growing Medi-Cal Caseload and Cost

- With the State facing on-going enormous budget shortfalls, the Schwarzenegger Administration said last fall and in a December 2009 “concept paper” that the proposal renew and expand the existing Section 1115 Medicaid Waiver is meant to reduce the growth rate of spending in the Medi-Cal program while improving quality of health care and increasing program efficiency.
- Several advocacy groups for people with disabilities and seniors however remain deeply concerned about the potential impact.
- The State wants to renew and expand that waiver to include proposals to reduce costs by moving in certain areas, people with disabilities, the blind and seniors into new “organized delivery systems of care” and possibly in some instances, into existing Medi-Cal managed health care plans.
- The details of the “organized delivery systems of care” and other specifics, including any needed changes to existing managed care plans, have not yet been fully fleshed out or finalized.
- The proposal is meant to rein in the growing costs of the Medi-Cal program, which along with In-Home Supportive Services, regional center funded community based services, SSI/SSP, are among the fastest growing health and human service program in both spending and caseload.

Existing Section 1115 Waiver Set to Expire in August

The existing Section 1115 Waiver deals narrowly with persons uninsured and funding for hospitals who provide services to that population and is set to expire in August. Last year, as part of the 2009-2010 State Budget, the Governor proposed and the Legislature approved budget related legislation that authorized the State to go forward with renewing and expanding the Section 1115 Waiver.

[CDCAN Note: it is called a “Section 1115 Medicaid Waiver” because it refers to Section 1115 of the federal Social Security Act that authorizes the federal government to waive certain Medicaid requirements for states who want to pilot different ideas or approaches to providing Medicaid funded services].

Department of Health Care Services Working On Finalizing Proposal

- The Department of Health Care Services was authorized by budget related legislation (ABx4 6 – the “x4” stands for 4th special or extraordinary session) passed in July 2009, to draft and submit a proposal to the federal government that seeks to renew and significantly expand the “Section 1115 Medicaid Waiver ” that as mentioned, currently deals narrowly with hospital financing and uninsured care, and is set to expire August 2010.
- The Department of Health Care Services – the state agency that oversees the federal Medicaid program (called “Medi-Cal” in California)

- Earlier this year the department established 4 technical workgroups composed of advocates and representatives from various organizations to help by looking more closely at certain details and concerns and to make recommendations to the full department stakeholder advisory committee (see below for details and meeting schedules). It later created a 5th workgroup in April.
- Three of those technical workgroups are meeting this week, including a new one recently created addressing issues concerning “dual eligibles” – persons who are eligible for both the federal Medicare and federal Medicaid programs.
- All meetings of the workgroups and stakeholder advisory meetings are open to the public – though workgroup meeting participation is limited to workgroup members. [see below for details and phone number]
- For more information about the Section 1115 Waiver renewal, go to the Department of Health Care Services website page for this at (including subscribing to free updates on the waiver renewal): <http://www.dhcs.ca.gov/provgovpart/Pages/WaiverRenewal.aspx>
- For specific questions on the waiver renewal, persons can email: WaiverRenewal@dhcs.ca.gov
- The copy of a 12 page concept paper, dated December 16, 2009, provides an overview of the Section 1115 Medicaid Waiver proposal and can also be viewed or downloaded on the CDCAN website at www.cdcan.us CDCAN will be scheduling a series of townhall telemeetings on this issue.]

Section 1115 Medicaid Stakeholder Advisory Group Required by Legislation

- ABx4 6 required the Department of Health Care Services to convene and consult with a “stakeholder advisory group” in developing the waiver and the implementation plan and requires that group to remain in place to advise on the continued operation of the waiver.
- It also requires this stakeholder group to include, but not be limited to persons with disabilities, seniors, legal services agencies, specialty care providers, physicians, hospitals, county government, and labor.
- For a list of who is on this stakeholder advisory committee go to the CDCAN website at www.cdcan.us
- Also created – though not required by the legislation – was the establishment of 5 “technical workgroups” that are looking at specific parts of the proposed waiver, including coming up with recommendations to address concerns and possible problems.
- Both the full stakeholder advisory group and the technical workgroups are composed of a mixture of advocates and other representatives including from other state departments, and also staff from the Department of Health Care Services.
- With the exception of the technical workgroup concerning persons who are eligible for both the federal Medicare and federal Medicaid (called Medi-Cal in California) programs – sometimes referred to as “dual eligibles” or “Medi-Medis” – all the workgroups have met several times previously. The “dual eligible” technical workgroup was just recently established and held its first meeting on April 27th.
- A schedule of all workgroups is listed below.

SCHEDULE OF STAKEHOLDER ADVISORY COMMITTEE AND TECHNICAL WORKGROUP MEETING SCHEDULE

public can submit written comments or questions to the Department of Health Care Services regarding the proposed waiver implementation plan or other related question:

JUNE 10, 2010 – THURSDAY

MEDICAID SECTION 1115 WAIVER

DEPARTMENT OF HEALTH CARE SERVICES STAKEHOLDER ADVISORY GROUP

TIME: Not yet announced, but likely 09:30 AM to about 12 or 12:30 PM (the previous two meetings were scheduled at those times)

LOCATION: Likely the Sacramento Convention Center, room to be determined, 1301 L Street, Sacramento, CA 95814-3900

PUBLIC CALL IN NUMBER(Listen Only): not released yet

WEBSITE PAGE : <http://www.dhcs.ca.gov/Pages/SACMeetings.aspx>

Main Medicaid Section 1115 Waiver Website Page:

<http://www.dhcs.ca.gov/provgovpart/Pages/WaiverRenewal.aspx>

CDCAN PRIORITY: **VERY HIGH**

CDCAN COMMENT: *This will be the fourth meeting of the full stakeholder advisory group, which first met on January 7th, with a second meeting on March 10th. Additional meetings are scheduled for May 13th (Thursday), June 10th (Thursday), and July 8th (Thursday).*

JULY 8, 2010 – THURSDAY

MEDICAID SECTION 1115 WAIVER

DEPARTMENT OF HEALTH CARE SERVICES STAKEHOLDER ADVISORY GROUP

TIME: Not yet announced, but likely 09:30 AM to about 12 or 12:30 PM (the previous two meetings were scheduled at those times)

LOCATION: Likely the Sacramento Convention Center, room to be determined, 1301 L Street, Sacramento, CA 95814-3900

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URGENT!!!!

PLEASE HELP CDCAN CONTINUE ITS WORK!!!

We need your help. CDCAN Townhall Telemeetings, reports and alerts and other activities cannot continue without your help.

To continue the CDCAN website, the CDCAN News Reports. sent out and read by over 50,000 people and organizations, policy makers and media across California and to continue the CDCAN Townhall Telemeetings which since December 2003 have connected thousands of people with disabilities, seniors, mental health needs, people with MS and other disorders, people with traumatic brain and other injuries to public policy makers, legislators, and issues.

Please send your contribution/donation (make payable to "CDCAN" or "California Disability Community Action Network):

CDCAN**1225 8th Street Suite 480 - Sacramento, CA 95814**

paypal on the CDCAN site is not yet working – will be soon.

MANY, MANY THANKS TO the Pacific Homecare Services, Easter Seals, California Association of Adult Day Health Centers, Valley Mountain Regional Center, Toward Maximum Independence, Inc (TMI), Friends of Children with Special Needs, UCP of Los Angeles, Ventura and Santa Barbara Counties, Southside Arts Center, San Francisco Bay Area Autism Society of America, Hope Services in San Jose, FEAT of Sacramento (Families for Early Autism Treatment), RESCoalition, Sacramento Gray Panthers, Easter Seals of Southern California, Tri-Counties Regional Center, Westside Regional Center, Regional Center of the East Bay, UCP of Orange County, Alta California Regional Center, Life Steps, Parents Helping Parents, Work Training, Foothill Autism Alliance, Arc Contra Costa, Pause4Kids, Manteca CAPS, Training Toward Self Reliance, UCP, California NAELA, Californians for Disability Rights, Inc (CDR) including CDR chapters, CHANCE Inc, , Strategies To Empower People (STEP), Harbor Regional Center, Asian American parents groups, Resources for Independent Living and many other Independent Living Centers, several regional centers, People First chapters, IHSS workers, other self advocacy and family support groups, developmental center families, adoption assistance program families and children, and others across California.