



## State of Louisiana

# Department of Health and Hospitals Office of the Secretary

February 1, 2011

The Honorable Joel T. Chaisson, II, President Louisiana State Senate P.O. Box 94183, Capitol Station Baton Rouge, LA 70804-9183

The Honorable Kay Katz, Chairwoman House Health and Welfare Committee Louisiana State House of Representatives P.O. Box 44486, Capitol Station Baton Rouge, LA 70804-4486

The Honorable Jim Fannin, Chairman Joint Legislative Committee on the Budget P.O. Box 44486, Capitol Station Baton Rouge, LA 70804-4486 The Honorable Jim Tucker, Speaker Louisiana State House of Representatives P.O. Box 94062, Capitol Station Baton Rouge, LA 70804-9062

The Honorable Willie L. Mount, Chairwoman Senate Health and Welfare Committee Louisiana State Senate P.O. Box 94183, Capitol Station Baton Rouge, LA 70804-9183

Dear President Chaisson, Speaker Tucker, and Honorable Chairs:

In response to House Bill No. 1185 of the 2010 Regular Session, the Louisiana Department of Health and Hospitals (DHH) submits the enclosed report. The bill requires DHH to submit quarterly reports to the House and Senate Committees on Health and Welfare and the Joint Legislative Committee on the Budget regarding costs and other pertinent data for the New Opportunities Waiver, the Elderly and Disabled Adult Waiver, and the Long-Term Personal Care Services Program. R.S. 24:772 also requires that the report be submitted to the President of the Senate and the Speaker of the House.

DHH is available to discuss the enclosed report and recommendations with you at your convenience. Please contact Kathy Kliebert, DHH deputy secretary, at (225) 342-7092 or Lou Ann Owen, Medicaid Deputy Director, at (225) 342-9767 with any questions or comments you may have.

Sincerely,

Bruce D. Greenstein

Secretary

#### Enclosures

Cc: The Honorable Members of the House Health and Welfare Committee
The Honorable Members of the Senate Health and Welfare Committee
The Honorable Members of the Joint Legislative Committee on the Budget
David R. Poynter Legislative Research Library



## State of Louisiana

Department of Health and Hospitals
Office of Management and Finance

## House Bill 1185/Act 305 - First Report - October 2010

Previous quarter results, as reported in HCR 142 of the 2009 R.S., are included for comparison

a) The number of recipients served in the Long-Term Personal Care Services program, the Elderly and Disabled Adults Waiver program, and the New Opportunities Waiver program, and the average annual cost per recipient served in each program.

			R	Report Date	:	
Reporting Measure	Program	Jul'09	Oct'09	Jan'10	Apr'10	Oct'10
	EDA	3,856	3,568	3,568	3,758	3,908
Number of Recipients	LTPCS	8,792	9,464	10,061	10,878	12,021
	NOW	6,372	6,516	6,811	6,919	7,046
	EDA	\$37,752	\$34,801	\$32,161	\$31,169	\$30,516
Average annual cost per recipient	LTPCS	\$21,035	\$18,262	\$18,407	\$18,751	\$18,575
	NOW	\$70,472	\$68,528	\$67,541	\$65,844	\$64,408

b) The number of recipients in each program whose annual cost of services exceeds the average cost for that program.

				Report Dat	e	
Reporting Measure	Program	Jul'09	Oct'09	Jan'10	Apr'10	Oct'10
1 0	EDA	1,799	1,753	1,733	1,782	1,962
Number of recipients whose cost exceeds program average	LTPCS	2,527	4,755	5,144	5,754	6,476
cost exceeds program average	NOW*	2,754	2,895	2,946	2,965	2,989

\*Current reductions in the average costs of plans have statistically affected the number of plans higher than the program average. This number is expected to decrease as more participants are added to the Resource Allocation plan program.

- c) The number of recipients in each program whose annual service cost has increased from the previous year.
  - EDA: Six hundred eighty-one (681) EDA participants had a cost increase between July 1, 2009 and June 30, 2010 compared to their previous year's plan. However, the average cost of plans completed during this time under resource allocation is 19% less than the average cost from the previous plan year.
  - LT-PCS (without EDA): Three thousand, one hundred and thirteen (3,113) LT-PCS participants had an increase between July 1, 2009 and June 30, 2010 compared to their previous year's plan. However, the average cost of 5,514

- plans completed during this time under resource allocation is 13% less than the average cost from the previous plan year.
- NOW: Eight hundred forty-three (843) had a cost increase during this quarter as compared to their previous year's plan. However, the average cost of 3,039 plans completed since resource allocation began is \$12,276 less than the average cost of plans from the previous fiscal year. Currently, CPOC's are 18.11% less than the average cost of plans from the previous year.
- d) The number of persons on waiting lists for each program.

		Report Date				
Reporting Measure	Program	Jul'09	Oct'09	Jan'10	Apr'10	Oct'10
EDA Waiting List		11,246	11,989	12,511	17,250	18,696
NOW Waiting List		9,287	9,263	9,440	9,372	9,453

e) The number of persons on waiting lists who are currently receiving services and the type of services they are receiving.

			F	Report Da	te	
Reporting Measure	Receiving other HCBS	Jul'09	Oct'09	Jan'10	Apr'10	Oct'10
	LTPCS	3,389	3,716	3,605	5,363	5,565
The number of persons on the EDA waiting	ADHC	351	341	330	376	406
List who are currently receiving services and	NOW	47	47	41	47	86
the type of services they are receiving	Supports	73	76	75	128	133
	LTPCS	272	210	212	208	196
The number of persons on the <b>NOW</b> waiting	ADHC	28	22	23	15	16
List who are currently receiving services and	EDA	143	145	146	135	120
the type of services they are receiving	Supports	1,191	1,208	1,265	1,184	1,157

f) The number of persons moved from an existing service to the New Opportunities Waiver and the additional cost or savings for each person.

TRANSFER PROGRAM TYPE	TOTAL TRANSFERS SFY 2008-2009	TRANSFERS THRU 1ST QTR SFY 2009-2010	TRANSFERS THRU 2ND QTR SFY 2009-2010	TRANSFERS THRU 3RD QTR SFY 2009-2010	TRANSFERS THRU 4TH QTR SFY 2009-2010	ESTIMATED ANNUAL SAVINGS/INCREASE
PRIVATE ICF/MR	89	9	30	46	67	-\$278,732
CHILDREN'S CHOICE	72	19	39	57	71	\$3,423,407
SUPPORTS WAIVER	179	69	169	217	254	\$13,027,660
NURSING HOME	14	2	2	3	5	\$107,885
SUPPORTS AND SERVICES CENTERS	25	4	10	13	42	-\$6,270,969
EDA & LT-PCS	27	10	21	31	39	\$1,147,575
ADHC & LT-PCS	2	0	1	1	1	\$39,357
TOTAL	001-000	113	272	368	479	\$11,196,183

### **CHART NOTES**

1. As of June 30, 2010 851 persons have been certified into the New Opportunities Waiver (NOW) during state fiscal year 2009-2010.

- 2. 479 of these participants were previous recipients of the Medicaid programs listed above during the 2009-2010 state fiscal year.
- 3. The savings/increase estimated is based on the average cost per recipient of each program as compared to the average cumulative 4<sup>th</sup> quarter average cost of the NOW.
- 4. Average cost information in this comparison does not include acute care.
- 5. The estimated increase in cost of \$11,196,183 above the previous program cost will be adjusted each quarter to reflect updated expenditures and plan information.
- g) The average cost of persons receiving services from both the Long Term Personal Care Services program and the Elderly and Disabled Adults Waiver program.
  - Effective July 1, 2010 persons enrolled in Elderly and Disabled Adults Waiver receive personal assistant services under the waiver and no longer utilize Long Term Personal Care Services.
- h) The average cost for persons receiving services in privately operated nursing facilities and privately operated intermediate care facilities for persons with developmental disabilities.

		F	Report Dat	e	
Program	Jul'09	Oct'09	Jan'10	Apr'10	Oct'10
NF	\$31,782	\$33,915	\$33,915	\$33,915	\$37,480
ICF\DD	\$62,305	\$64,476	\$64,130	\$64,468	\$64,302
	NF	NF \$31,782	Program         Jul'09         Oct'09           NF         \$31,782         \$33,915	Program         Jul'09         Oct'09         Jan'10           NF         \$31,782         \$33,915         \$33,915	NF \$31,782 \$33,915 \$33,915 \$33,915

<sup>\*\*</sup> Changed the NF reporting in Oct'11 – using annualized monthly per capita expenditures\a better comparison to CPOC cost

i) The number of waiver recipients whose cost of care exceeds the average cost of the services being waived.

			F	Report Da	ite	
Reporting Measure	Program	Jul'09	Oct'09	Jan'10	Apr'10	Oct'10
The number of waiver recipients whose cost of care exceeds the average cost of the services being waived*	EDA	n/a	n/a	n/a	n/a	1,502
The number of waiver recipients whose cost of care exceeds the average cost of the services being waived***	NOW					2,948

<sup>\*</sup> defined as the number of EDA\NOW recipients whose approved waiver costs exceed the Institutional average cost

<sup>\*\*</sup> as compared only to the cost of privately operated intermediate care facilities for persons with developmental disabilities

# **ACT No. 305**

Regular Session, 2010

## HOUSE BILL NO. 1185

### BY REPRESENTATIVE NOWLIN

1	AN ACT
2	To enact Part LXIX of Chapter 5 of Title 40 of the Louisiana Revised Statutes of 1950, to
3	be comprised of R.S. 40:1300.321 through 1300.323, relative to long-term care; to
4	provide for legislative findings and purpose; to provide for definitions; to provide for
5	certain reimbursements and procedures in the Medicaid state plan as it relates to
6	long-term care services for the elderly, the disabled, and persons with developmental
7	disabilities; to provide for promulgation of rules by the Department of Health and
8	Hospitals; to provide for a date for promulgation of the rules by the Department of
9	Health and Hospitals; and to provide for related matters.
10	Be it enacted by the Legislature of Louisiana:
11	Section 1. Part LXIX of Chapter 5 of Title 40 of the Louisiana Revised Statutes of
12	1950, comprised of R.S. 40:1300.321 through 1300.323, is hereby enacted as follows:
13	PART LXIX. THE HOME-AND COMMUNITY-BASED
14	LONG-TERM CARE ACT
15	§1300.321. Legislative findings; purpose
16	A. The Legislature of Louisiana hereby finds that Medicaid currently spends
17	in excess of seven hundred eighteen million dollars annually on a variety of home-
18	and community-based programs to address the long-term care needs of our citizens
19	who are elderly or have severely disabling conditions. These expenditures constitute
20	in excess of sixteen percent of all Medicaid costs for health care services delivered
21	by private providers.
22	B. Expenditures for Medicaid home- and community-based long-term care
23	supports and services accounts for fifteen percent of the total growth of Medicaic
24	spending in the past five years.

HB NO. 1185 ENROLLED

1	C. Despite the substantial financial commitment that the legislature has made
2	to provide home- and community-based long-term care services, many Louisiana
3	residents are still required to wait for years to receive the services they need.
4	§1300.322. Definitions
5	As used in this Part:
6	(1) "Adult with disability" means an individual who is twenty-one to sixty-
7	four years of age and disabled according to Medicaid standards or the Social Security
8	Administration's disability criteria.
9	(2) "Department" means the Department of Health and Hospitals or its
10	successor in the role of designated state agency under Title XIX of the Social
11	Security Act or any successor Act providing funding for medical care for the poor.
12	(3) "Elderly" means an individual who is sixty-five years of age or older.
13	(4) "Long-term care services" means the following services provided
14	pursuant to Louisiana's approved Medicaid state plan for medical assistance:
15	(a) Long-term personal care services.
16	(b) Adult day health care waiver services.
17	(c) Children's Choice Waiver services.
18	(d) Elderly and Disabled Adult Waiver services.
19	(e) New Opportunities Waiver service.
20	(f) Supports waiver services.
21	(5) "Person with developmental disability" means an individual of any age
22	who has a developmental disability as defined in R.S. 28:451.2(12).
23	(6) "State plan for medical assistance" means the plan promulgated by the
24	department in accordance with its role as designated state agency under Title XIX
25	of the Social Security Act or any successor Act providing funding for medical care
26	for the poor.
27	§1300.323. Medical assistance programs
28	A. The department shall adopt rules and regulations in accordance with the
29	Administrative Procedure Act with regards to the following:

HB NO. 1185 ENROLLED

1	(1) Taking actions necessary to complete implementation of the resource
2	allocation models for the New Opportunities Waiver, the Elderly and Disabled
3	Adults Waiver, and the Long-Term Personal Care Services program by July 1, 2012.
4	(2) Developing an objective formula to determine the staff needed to
5	appropriately regulate and monitor the various home- and community-based
6	programs to control fraud and abuse, to ensure program regulations are adhered to
7	and services are delivered in a quality manner, and to report the department's
8	findings.
9	(3) Changing the policy on the allocation of waiver slots so that the office
10	for citizens with developmental disabilities and the office of aging and adult services
11	may allocate all Centers for Medicare and Medicaid Services-approved waivers, such
12	as Children's Choice, Supports, Residential Options and Adult Day Health Care,
13	based upon individual need and cost-effectiveness, as long as individual needs are
14	met with the alternative waivers.
15	(4) Developing and implementing a budget neutral pilot program in selected
16	areas of the state for an integrated, coordinated, prepaid delivery model for long-term
17	care services for the elderly and people with adult-onset disabilities.
18	(5) Submitting quarterly reports, the first report being submitted no later than
19	October 1, 2010, to the House and Senate committees on health and welfare and the
20	Joint Legislative Committee on the Budget. Each report shall include:
21	(a) The number of recipients served in the Long-Term Personal Care
22	Services program, the Elderly and Disabled Adults Waiver program, and the New
23	Opportunities Waiver program, and the average annual cost per recipient served in
24	each program.
25	(b) The number of recipients in each program whose annual cost of services
26	exceeds the average cost for that program.
27	(c) The number of recipients in each program whose annual service cost has
28	increased from the previous year.
29	(d) The number of persons on waiting lists for each program.

**ENROLLED** HB NO. 1185 (e) The number of persons on waiting lists who are currently receiving 1 services and the type of services they are receiving. 2 (f) The number of persons moved from an existing service to the New 3 Opportunities Waiver and the additional cost or savings for each person. 4 (g) The average cost of persons receiving services from both the Long-Term 5 Personal Care Services program and the Elderly and Disabled Adults Waiver 6 7 program. (h) The average cost for persons receiving services in privately operated 8 nursing facilities and privately operated intermediate care facilities for persons with 9 developmental disabilities. 10 (i) The number of waiver recipients whose cost of care exceeds the average 11 cost of the services being waived. 12 (j) Other pertinent data as requested by the committees. 13 B. The rules and regulations shall be promulgated no later than October 1, 14 2010. The department shall also submit to the secretary of the United States 15 Department of Health and Human Services the necessary revisions to the state plan 16 for medical assistance and the various approved waivers that are necessary to 17 conform those documents with the provisions of this Part. 18 SPEAKER OF THE HOUSE OF REPRESENTATIVES PRESIDENT OF THE SENATE GOVERNOR OF THE STATE OF LOUISIANA

APPROVED: