REPORT TO DEVELOPMENTAL DISABILITIES COUNCIL
Bureau of Health Services Financing (Medicaid)
April, 2017

Status of Current Initiatives:

MEDICAID EXPANSION.

Current Medicaid enrollment as of 04/13/2017 is **418,128** new members!

Demographics (new information which may be of interest):

FEMALE	MALE
Age	Age
19-24: 55,002	19-24: 32,793
25-39: 107,750	25-39: 57,872
40-49: 43,013	40-49: 27,455
50-64: 55,121	50-64: 38,949
65+: 85	65+: 87
Total: 260,971	Total: 157,156

As previously reported to this council, eligibility for parents with Medicaid eligible children will increase to 138% of the Federal Poverty Level, and childless adults will now be eligible for Medicaid as a group.

Applied Behavior Analysis: State Plan for licensed providers to deliver ABA services under Medicaid was approved by CMS for services as of February 1, 2014. Services must be prior authorized through the Molina prior authorization process.   Services are available to children/youth from birth through age 20 for whom they are medically necessary. A clinical diagnostic evaluation that recommends ABA is required for this service. As of 4/18/2017 there were **136** enrolled providers statewide, and **2,035** children/youth

approved for services. ABA services were NOT carved in to Healthy Louisiana in December, 2015. If you have questions about ABA, how to access those services, how to locate a provider, or any other questions, please call this toll-free number: **1-844-423-4762**.

Permanent Supportive Housing:

OAAS, OCDD and OBH continue to assist participants to transition into Permanent Supportive Housing. There are currently approximately **4,324** households in Permanent Supportive Housing. Since the program began a total of **6,326** individuals have been served.

Money Follows the Person (MFP):

- Since fall 2009, approximately **2,025** individuals have transitioned through the program in the Office for Aging and Adult Services and Office for Citizens with Developmental Disabilities from qualified institutions (hospitals, nursing facilities, and supports and services centers); year-to-date (through 03/31/17), **52** individuals have transitioned. Through MFP **443** individuals transitioned in 2016 which exceeded 350 benchmark! The Money Follows the Person program continues to exceed existing benchmarks.

- Participants can be transitioned through MFP until December 31st, 2018. Grant funding can be expended through September 30, 2020.

Self-Direction:

- There are currently **846** individuals participating in the self-direction option, as of 2/28/2017.
- Acumen is currently acting as the Financial Agent/Employer through an emergency contract.

Behavioral Health: Our Behavior Health section continues to work tirelessly to address any issues that may arise as a result of integration with the Healthy Louisiana Plans. Children/youth who are either in or qualify for the Coordinated System of Care (CSoC) receive all behavioral health services from Magellan.   CSoC services are for children/youth who are at risk for out-of-home placement, or are currently experiencing out-of-home placement due to significant behavioral health challenges. Out of home placement may be defined as detention, secure care facilities, psychiatric hospitals, residential treatment facilities, addiction facilities, alternative schools, homeless, foster care. Magellan is in the process of validating those children/youth who are in the 1915(c) CSoC waiver to ensure that the child/youth still meets the eligibility criteria and is appropriately placed in the waiver.

The Statewide CSoC waiver enrollment totaled 2,215 as of 3/10/2017.

Region/Parish	Participant Count
Region 1 (Jefferson/Orleans area)	395
Region 2 (Capital area)	234
Region 3 (Covington area)	263
Region 4 (Thibodeaux area)	285
Region 5 (Lafayette area)	121
Region 6 (Lake Charles area)	164
Region 7 (Alexandria area)	165
Region 8 (Shreveport area)	216
Region 9 (Monroe area)	372

*This number includes all children presumptively eligible and enrolled in b3/c waivers.

Attached at the end of this report is the Behavioral Health Network Data, which includes Crisis Stabilization.

NEW ADDITION:

Electronic Visit Verification (EVV)

- EVV was successfully implemented for HCBS direct-care services delivered outside of the home on March 1, 2016 through the prior authorization data contractor, Statistical Resources, Inc. These services include the center-based, vocational and transportation services. The web-based EVV solution for these services is accessed and utilized from any device that is able to access the internet including PCs, smart phones and tablets of all types and carriers. This solution allows us to detect when two providers claim to provide services to the same client at the same time. While center-based services account for less than 13% of all services, they are involved in 97% of all client overlapping incidents.

- H.R.34, the 21st Century Cures Act, was signed into law on December 13, 2016. This law requires that all states implement an Electronic Visit Verification (EVV) system for Medicaid-funded Personal Care Services by January 1, 2019 or the Federal medical assistance percentage shall be reduced for these services.

- During fall of 2016, the Division of Administration approved a sole-source request to include EVV for in-home services in the existing prior authorization data contract with Statistical Resources, Inc. (SRI). This approval was based on the joint conclusion of the Louisiana Department of Health (LDH) and the Division of Administration/Office of Technology Services (DOA/OTS) that there is no contractor other than SRI that can currently meet the state's need for an EVV system with the capacity for automated billing of EVV services. While there are numerous EVV systems that provide a clock-in/clock-out solutions, none of the many EVV systems presented to LDH demonstrates an off-the-shelf solution for automated billing of the EVV services. Through the EVV procurement process LDH learned that an automated billing solution can only be accomplished following extensive customization activities, and even then with no guarantee of success.