Innovative Practices in Self-Direction

Merle Edwards-Orr
Applied Self-Direction

Kathleen Ujvari
AARP Public Policy Institute

August 8, 2018
Agenda

- Describe ASD/AARP collaboration
- Overview of current status of self-direction per the AARP Scorecard
- Highlights of innovative practices in four states
  - Texas
  - Iowa
  - Wisconsin
  - Florida
AARP and Applied Self-Direction recently partnered to publish an AARP report entitled *Taking it to the Next Level: Using Innovative Strategies to Expand Options for Self-Direction*

- Reviewed data and trends on self-direction
- Identified 4 states using interesting strategies in self-direction programs
- Described lessons learned from those states
Program Enrollment is on the Rise

2016 National Inventory of Self-Directed Program study findings

- 253 programs (all states and DC)
  - 8% ↑ since 2011
- Over 1 million participants enrolled in Medicaid-funded and VD-HCBS programs
  - 43% ↑ since 2011
- Number of statewide programs also on the rise
  - At least 189 programs – up from 116 in 2013
Why an Innovative Strategies Report?

State LTSS Scorecard: [www.longtermscorecard.org](http://www.longtermscorecard.org)

Key component of a high-functioning LTSS system

- Number of people self-directing services per 1,000 population with disabilities
- In the top five states, 71 per 1,000 people with disabilities self-directed their services in 2016 versus < 1 per 1,000 in the bottom five states
- Many states have almost no self-direction
State Rates of Self-Directed Services for People with Disabilities

Number of People Self-Directing Services per 1,000 People with Disabilities

Source: State Long-Term Services and Supports Scorecard, 2017.
Why an Innovative Strategies Report (cont.)?

• Opportunity to help states pick up the pace of change
• Share information about a sample of innovative and promising practices & program resources
• Can be used for training, education, collaboration, and replication
Content of the Report

- Highlights innovative strategies
- Sample of program resources with hyperlinks
- Point of contact for additional information and guidance

Long-Term Services and Supports Scorecard: Innovative and Promising Practices
Taking It to the Next Level: Using Innovative Strategies to Expand Options for Self-Direction

Merle Edwards-Orr
Applied Self Direction
Kathleen Ujvari
AARP Public Policy Institute

www.longtermscorecard.org

AARP PUBLIC POLICY INSTITUTE
APRIL 2018

AARP FOUNDATION
THE COMMONWEALTH FUND
THE SCAN FOUNDATION
Benefits of Expanding Program Opportunities

- Many benefits
- Addresses workforce shortages
  - Majority of people receiving self-direction services (~3/4) are older adults and people with physical disabilities
  - Aging population + challenges in rural settings
  - Many states allow self-directing participants to hire family members
Possible Barriers

- Taking self-direction programs to the next level is not without its challenges
  - Highly individualized nature of each service plan
  - Concerns about ability of plan participants to manage their services effectively
  - Silos and inability to go it alone – need for internal collaborations and external partnerships
  - Time and resources
Self-Directed Programs in Four States: Texas, Iowa, Wisconsin, Florida

- Innovative approaches to:
  - Develop and expand their programs
  - Coordinate and personalize services
  - Promote stakeholder engagement and outreach
  - Implement effective training programs
Four State Programs

- Texas
  - STAR+ Plus Consumer Directed Services (CDS)

- Iowa
  - Consumer Choices Option (CCO)

- Wisconsin
  - Include, Respect, I Self-Direct (IRIS)

- Florida
  - Veteran-Directed Home and Community-Based Services (VD-HCBS)
Texas STAR+ Plus CDS

- MLTSS program
  - Covers almost all of Texas LTSS population of older adults and people with disabilities
  - Requires managed care providers to offer services coordination as a basic service

- Successful transition
  - Slow and methodical statewide rollout
  - Strong service coordination
  - Emphasis on quality
  - Robust participant and stakeholder involvement
Who Does What In Texas STAR+ Plus

**ROLE OF THE STATE**
- Determine which LTSS will be offered
- Contract with Managed Care Entity/Entities (MCE)
- Assess participant eligibility for LTSS (shared by state through its designee, Texas Medicaid Healthcare Partnership and the MCE)
- Facilitate development of FMS provider network (provide mandatory enrollment training and periodic technical assistance training to FMS providers contracted with MCEs)

**ROLE OF THE PARTICIPANT**
- Work with state to become eligible for LTSS
- Select MCE
- Work with MCE to determine mix of services he/she will receive
- Implement self-directed portions of care plan

**ROLE OF THE MCE**
- Assess participant’s specific needs
- Work with participant to develop service plan
- Monitor quality of services delivered
- Pay service providers
- Oversee the network of FMS providers
Iowa’s CCO Program

- Single self-direction program
  - Not a one-size-fits-all program
  - Uses a flexible approach founded on person-centered principles

- Maximizes access and choice
  - Developed a single self-direction flexible program option serving 6 of the state’s 7 LTSS populations
  - Uses budget authority to maximize participant choice
  - Developed a strong support network based around the FMS provider
Wisconsin’s IRIS Program

- Person-centeredness
  - Focus on the participant’s needs and goals
  - Remain in community for as long as possible

- Maintains person-centered culture
  - Maximizing choice from the get-go
  - Using shared decision-making instead of bureaucratic rules to resolve difficult issues
  - Offering strong support that enables participants to be in charge
Florida’s VD-HCBS Program

- VD-HCBS Partnership program
  - Local VA medical center and ADRC
- Startup guidance
  - Being ready when a partnership opportunity arises
  - Developing and trusting the partnership
  - Proving value to bolster the partnership
Questions?

Merle Edwards-Orr
merle@appliedselfdirection.com

Kathleen Ujvari
kujvari@aarp.org