



**CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR MEDICAID SERVICES**

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October 15, 2018

Greetings,

On September 20, 2018 the Department for Medicaid Services (the Department) released Navigant Consulting Inc.'s (Navigant) final report on its assessment of Kentucky's 1915(c) Home and Community Based waiver programs. This report included 11 recommendations for improving the Home and Community Based Services waiver programs based on months of evaluations, extensive stakeholder input, and an examination of the Department's processes and available data.

After receiving the report, the Department conducted a thorough and careful review of each recommendation. While the Department aims to address all 11 recommendations, we recognize the need to focus on priority recommendations first, with a continual focus on those individuals that we serve. Be assured that we will move quickly to initiate implementation but will be deliberate as we move forward to ensure that reforms are well designed and effectively implemented, without flooding the public with change. The Department's response to the report is attached to this letter. When prioritizing which recommendations to adopt first, we took into account the needs of those individuals that we serve, stakeholder feedback, budgetary limits, and the lack of existing data about the programs.

In addition to outlining how we will implement the recommendations, our response details how waiver participants, caregivers, families and providers can be part of the process. Stakeholder feedback has been vital to crafting the recommendations and determining which are most needed. The same feedback will be critical going forward as we make these changes to our 1915(c) Home and Community Based waiver programs. As always, we thank all of our stakeholders for their involvement and look forward to hearing your thoughts as we continue to work together on this project.

Most Sincerely,

A handwritten signature in blue ink that reads "Jill R. Hunter".

Jill R. Hunter
Senior Deputy Commissioner

The Department's Response to Navigant's Post-Assessment Recommendations for 1915(c) Waiver Programs

In the summary below, we present the high-level sequence of activities that will be addressed over the next year of redesign activity. This summary is not intended to provide an exhaustive description but should provide information on how the Cabinet will begin to move toward implementing Navigant's recommendations. Further information on much of these activities will be released throughout the next year to make sure impacted stakeholders are aware of and understand coming changes and how they will be impacted.

Group A: Department activities beginning Fall 2018, to be implemented by Summer 2019

Address current compliance issues

- Improved monitoring, including critical incident reporting and corrective action plan (CAP) follow up.
- The Department will serve as the single state agency administering the waiver programs as required by the Centers for Medicare and Medicaid Services (CMS) in 42 CFR 431.10 with sister agencies serving as subject matter experts and program design experts in addition to carrying out operations in cooperation with the Department

Streamline program administration and consistency

- Update waivers and Kentucky Administrative Regulations (KAR) to standardize service definitions, provider qualifications, and operations across waivers, as appropriate
- Update assurances to comply with new Federal guidance around topics like incident management and access to the community
- Implement a 1915(c) waiver specific call line with logging capabilities to assist case managers, providers, and waiver participants
- Develop standard operating procedures for end-to-end quality management including annual certifications, waiver assurances, centralized data collection, and analysis

Group B: Department activities beginning Fall 2018, to be implemented by Fall 2019

Improve access to, quality, and equity of Home and Community-Based Services (HCBS) across all waivers

- Clarify Participant Directed Services (PDS) policies for individuals
- Improve the approval process for onboarding PDS employees, including individuals with legal responsibility to participants
- Create a rate setting methodology informed by a rate study
- Capture participant assessment data in a usable, electronic format
- Use assessment data to inform future movement to independent assessment method
- Enhance care management using person-centered planning tools and processes, performance standards, training, and a help desk

Group C: Department activities beginning Late 2019 and beyond

Continue enhancing HCBS waivers to reflect national best practices

- Comprehensive and robust quality improvement strategy to increase emphasis on improving service outcomes and participant experience
- Future assessment of need for continued Long Term Supports and Services (LTSS) improvements following implementation and evaluation of above reforms
- Needs-based care planning, within the appropriated budget, and researching assessment methods for all populations

Stakeholder Engagement

Stakeholder feedback is vital to this process. The Department will engage stakeholders in a number of ways.

Informational Webinars

The Department plans to hold a series of informational webinars where we will explain how these changes will affect services. We will allow time for questions and comments from stakeholders. Nothing will be finalized until we have received robust stakeholder involvement. Comments can also be submitted via the Waiver Mailbox.

The purpose of the webinars are to provide a walkthrough of major change areas in the 1915(c) applications that will have participant and provider impacts. Areas of focus for the webinars may include:

- Assessment process and tools/waitlist policy
- Service definitions and limitations
- Person-centered service planning process and case manager role
- PDS policies
- Grievance and Appeals Process
- Critical Incident Reporting and Investigations/Participant Safety

Further information on the webinars will be released as details are finalized.

In-Person Stakeholder Meetings

The Department will also hold in-person meetings to discuss the changes. We will release more information on these opportunities as details are finalized.

Formal Comment Period

1915(c) waiver application amendments will require and provide the federally required thirty (30) day public comment period to allow for stakeholders to have additional opportunity for input on changes within the applications.

Ongoing Stakeholder Engagement

The established email box is open and staff from the Department is monitoring it for your comments and questions. Your feedback is vitally important for this redesign to succeed. Please share your feedback by emailing medicaidpubliccomment@ky.gov, by calling the Division of Community Alternatives (DCA) at (502) 564-7540, or by sending a letter to the following address:

**Department for Medicaid Services
Division of Community Alternatives
275 E. Main Street 6W-B
Frankfort, Kentucky 40621**

You can find this information and updates about the 1915(c) waiver programs on the DCA website: <https://chfs.ky.gov/agencies/dms/dca/Pages/default.aspx>. Stakeholders who wish to receive email updates about the waiver programs can email medicaidpubliccomment@ky.gov and request to be added to our email list.