

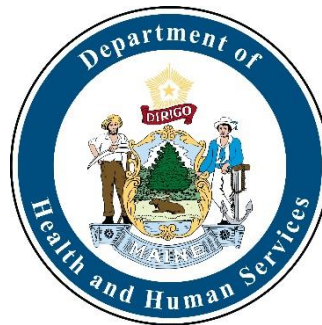
Maine Department of Health and Human Services (DHHS)

Aging and Long Term Services and Supports (LTSS) Update
for Joint Standing Committee on Health and Human Services

Paul Saucier, Director

Office of Aging and Disability Services

January 21, 2020



Agenda

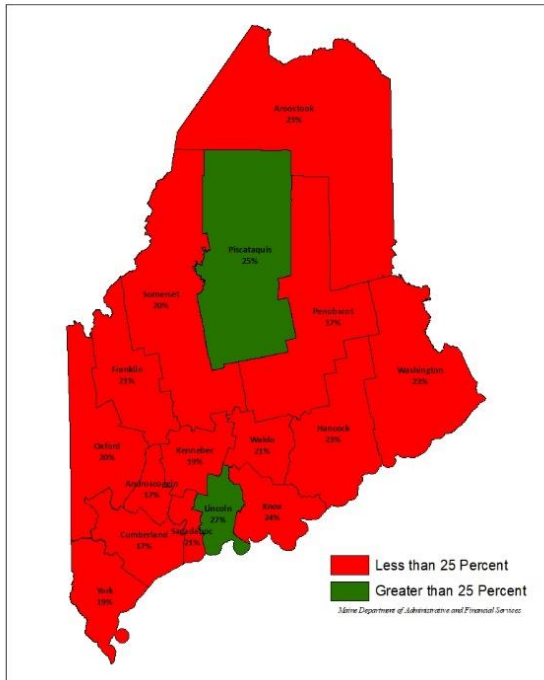
1. **Aging Initiatives Overview**
2. **Aging and LTSS Reforms**
3. **Next Steps**

DHHS Goal

Older Mainers live with dignity in the place that balances their needs and preferences.

Adapting to an Aging Population

Percent of Population Age 65+ in 2016



Aging and
LTSS
Reform

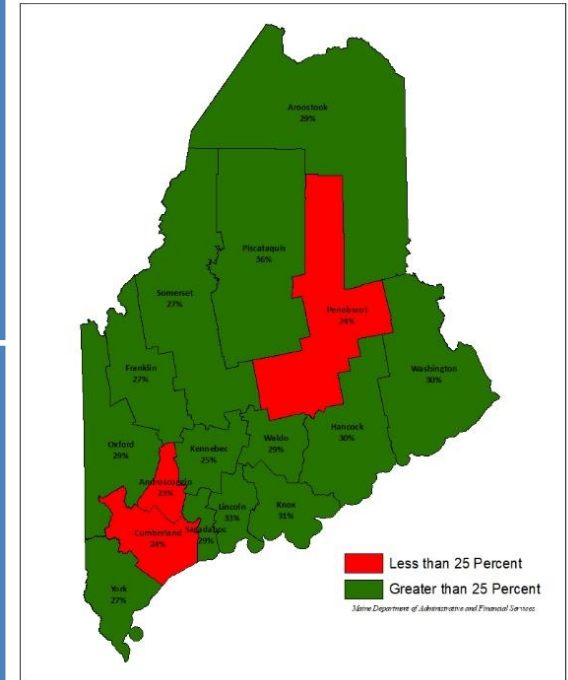
Age
Friendly
State

Aging
Policy

Renewal
of State
Plan on
Aging

Elder
Justice
Partnership

Percent of Population Age 65+ in 2026



Age-Friendly State

- On 10/29/19, Gov. Mills announced that Maine has been designated an AARP Age-Friendly State, joining 5 others (NY, MA, CO, FL, MI)
- Maine has over 100 communities engaged in age-friendly work
- The Age-Friendly State work provides an inter-departmental planning effort that will complement local efforts
- An Age-Friendly State Advisory Committee (AFSAC) is being formed to provide input to the effort
- Maine's Age-Friendly State Plan will be developed in 2020

Maine Age-Friendly State Agencies to Date

- ✓ Agriculture, Conservation and Forestry
- ✓ Health and Human Services (CDC, OADS, OFI, OMS)
- ✓ Labor
- ✓ MaineHousing
- ✓ Public Safety
- ✓ Transportation

Elder Justice Coordinating Partnership

- On 10/23/19, Gov. Mills signed Executive Order 11, creating the Elder Justice Coordinating Partnership to improve Maine's prevention of and response to abuse of older adults.
- Public-private partnership with support from the John T. Gorman Foundation
- Elder Justice Roadmap to be developed by December 2021
- Appointment process underway

Partnership Participation

- ✓ Legal services for older adults
- ✓ Sexual violence coalition
- ✓ Domestic violence coalition
- ✓ LTC Ombudsman
- ✓ Area Agencies on Aging
- ✓ ME Sheriff's Assoc
- ✓ ME Police Chiefs Assoc
- ✓ ME Prosecutors Assoc
- ✓ U.S. Attorney's Office
- ✓ ME Attorney General's Office
- ✓ DHHS
- ✓ Office of Securities
- ✓ Public Safety

State Plan on Aging Renewal

- Planning document that describes the goals and objectives of the Department and Maine's five area agencies on aging (AAAs) in delivering services to adults 60 and older funded by the federal Older Americans Act
- Current State Plan on Aging (2016-2020) expires on September 30, 2020
- New State Plan on Aging (2020-2024) due to Governor Mills for review and signature by June 1st, and to the federal Administration for Community Living (ACL) by July 1st
- DHHS convened a Work Group in July 2019 consisting of various stakeholders to help guide the development of the new plan, and has sponsored 8 listening sessions, surveys of older persons and caregivers, and with support from the Maine Health Access Foundation, focus groups for underserved older populations (Native Americans, New Mainers, LGBTQ adults, and remote island communities).
- Public Hearings on the new plan will be held in May 2020.

Aging and LTSS Reform Initiative

**Office of Aging and Disability Services
&
Office of MaineCare Services**

**Recommendations for Reform:
Aging & Long-Term Services and
Supports**

December 31, 2019

Advisory Committee Members

Ken Albert, Androscoggin Home Healthcare & Hospice
Mollie Baldwin, Consumer
Laurie Belden, Home Care & Hospice Alliance of Maine
Barbara Crowley, MaineGeneral Health
Glen Cyr, North Country Associates
Leo Delicata, Legal Services for the Elderly
Jessica Fay, Representative, Maine Legislature
Brenda Gallant, Maine Long-Term Care Ombudsman
Don Harden, Catholic Charities Maine
Ruta Kadonoff, Maine Health Access Foundation
Paul Linet, 3i Supportive Housing, LLC
Jess Maurer, Maine Council on Aging
Marianne Moore, Senator, Maine Legislature
Tom Newman, Alpha One
Dawn Palmer, Home Care for Maine
Lori Parham, AARP Maine
Betsy Sawyer-Manter, Elder Independence of
Maine/SeniorsPlus
Mike Stair, Care and Comfort
David Winslow, Maine Hospital Association

Focus Areas



Support
Living &
Aging In
Place

Strengthen
Coordination
for
MaineCare-
Medicare
Dual Eligibles

Living and Aging in Place

Adopt Community First Choice (1915(k))

- State Medicaid plan option
- NF level of care
- 6% greater federal match than current 1915(c) waiver
- Agency-delivered and consumer-directed options

Expand Assistive Tech & Home Mods

- Makes home care feasible for more people
- Helps address workforce shortage

Make LTSS Care Coordination More Effective & Efficient

- Enable broader reach, beyond LTSS
- Develop value-based approach with bundled payment and quality metrics

Living and Aging in Place

Strengthen Information and Referral

- Identify sustainable funding for No Wrong Door approach
- Work with Age Friendly communities
- Explore electronic application

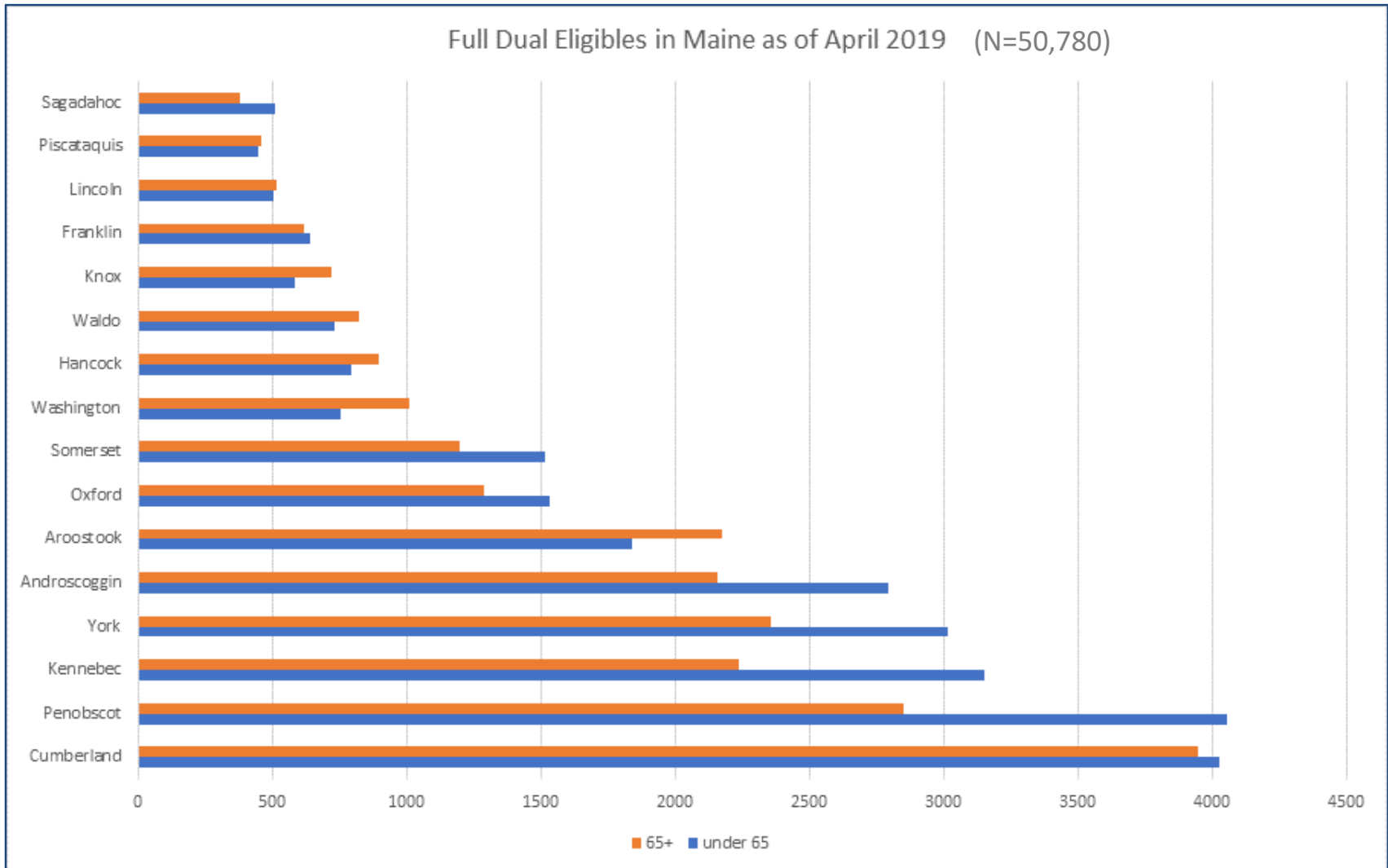
Streamline LTSS Policy and Programs to Improve Access

- Example: Standardize approaches and remove barriers to consumer-directed service options across programs

Strengthen Coordination for Dually Eligible Beneficiaries (MaineCare and Medicare)

- Medicare is the first payer for most preventive, primary, acute services, and for prescription drugs.
- MaineCare is the payer for LTSS, certain behavioral health services not covered by Medicare, and Medicare beneficiary cost sharing expenses.
- In most cases, the medical, behavioral, and LTSS service systems operate separately from one another with LTSS providers often unaware of transitions of care (admissions, transfers, and discharges from hospitals and other facilities).
- Members and their families are often the ones who must connect the dots among multiple providers and sources of insurance coverage.
- “Full” duals have full MaineCare coverage. “Partial” duals receive help from MaineCare for their Medicare cost sharing expenses only.

Distribution of Full Dual Eligibles in Maine



Federal-State Partnership Opportunities

Managed Fee-for-Service

- Build on Health Homes/Accountable Communities
- CMS shares Medicare savings with State
- State must invest in model with no guaranteed savings
- Few LTSS providers participate in HealthInfoNet
- Half of full duals already in Medicare ACOs

Capitated

- Build on existing Medicare Advantage plans or new plans
- Medicare plans can offer “extra” benefits, such as meals, dental
- Shared federal-state savings can be built into capitated rates
- Department has limited managed care infrastructure
- Medicare Advantage plan relationships with LTSS providers are very limited

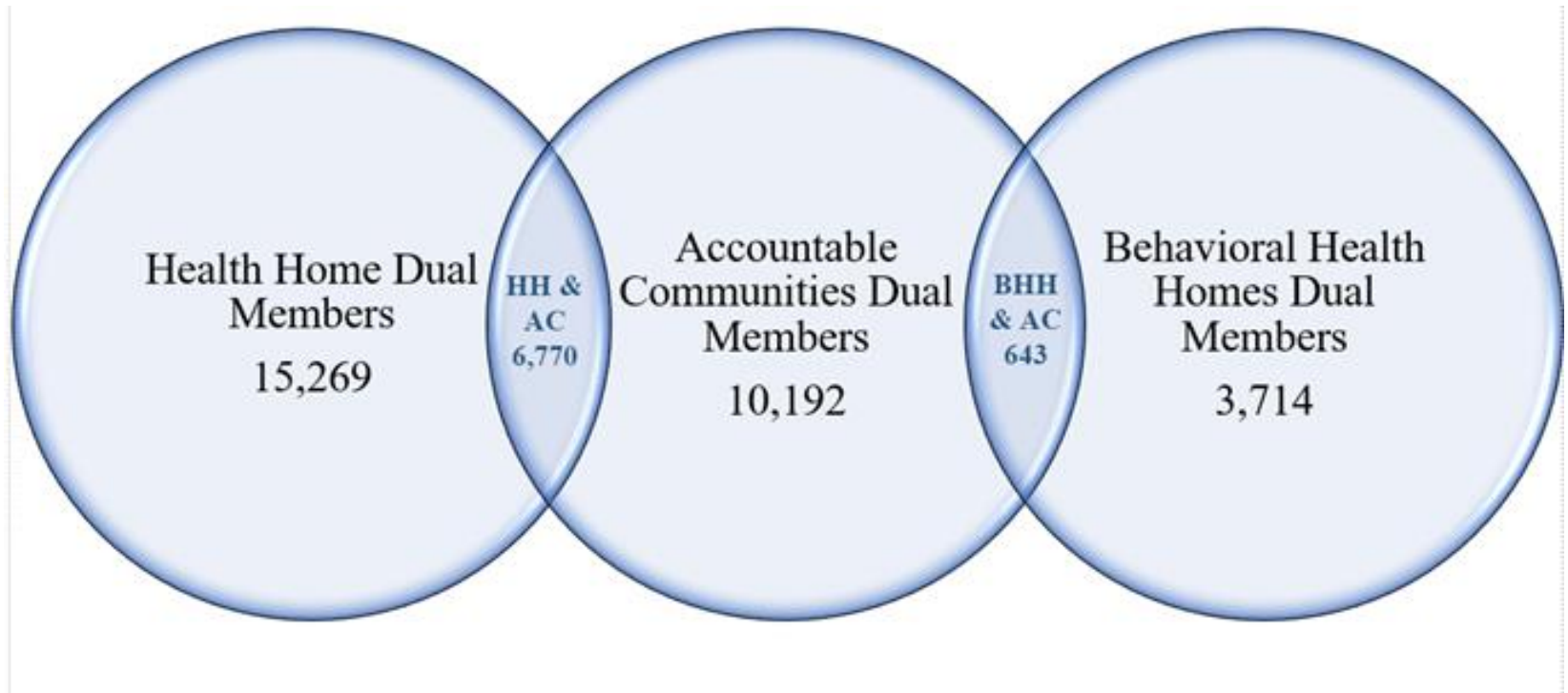
Dual Eligible Special Needs Plans (D-SNPs)

- D-SNPs are a type of Medicare Advantage plan that enroll only dual eligibles
- Medicare requires D-SNPs to have an agreement with the State Medicaid agency in order to operate in the State
- Beginning in 2021, these agreements must include stronger coordination requirements
- The Department will work on strengthening the agreements as it also considers longer term models to improve care for dual eligibles

D-SNPs Operating in Maine, 2020

D-SNP	Availability	Parent Company
Symphonix Health Insurance	Androscoggin, Cumberland, Franklin, Kennebec, Knox, Lincoln, Oxford, Sagadahoc, Waldo, York	United HealthCare
Arcadian Health Plan	Androscoggin, Cumberland, Knox, Oxford, York	Humana
Empire Healthchoice HMO	Androscoggin, Aroostook, Cumberland, Hancock, Kennebec, Knox, Lincoln, Oxford, Penobscot, Sagadahoc, Somerset, Waldo, York	Anthem
Wellcare of Maine	Androscoggin, Aroostook, Cumberland, Hancock, Penobscot, York	Centene (acquisition in progress)
Aetna	Statewide	CVS

Dual Eligibles in MaineCare Value-Based Payment Programs, 2019



Next Steps

- Develop Community First Choice (CFC) analysis, State Plan amendment and rules with program launch target of SFY 22
- Develop care coordination, assistive technology and environmental modification improvements on same timeline, to be included in CFC
- Strengthen the Department's capacity to use Medicare data and continue analysis of potential dual eligible initiatives while strengthening agreements with D-SNPs