

Waiver Slot Enrollment Progress Report

As Required by

**2020-21 General Appropriations
Act, House Bill 1, 86th Legislature,
Regular Session, 2019 (Article II,
Health and Human Services
Commission, Rider 20)**

Health and Human Services

Commission

March 2020



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Health and Human
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Executive Summary

The Waiver Slot Enrollment Progress Report for March 2020 is submitted in compliance with the 2020-21 General Appropriations Act, House Bill 1, 86th Legislature, Regular Session, 2019 (Article II, Health and Human Services Commission [HHSC], Rider 20).

Rider 20 requires three progress reports that discuss advancement towards waiver enrollment goals included in the Waiver Slot Enrollment Plan (plan) submitted October 2019.¹ Subsequent progress reports will be submitted on September 1, 2020, and March 1, 2021.

Medicaid waiver programs provide home and community-based services and supports to individuals as an alternative to institutional living and to maximize the quality of life, functional independence, health, and wellbeing of individuals served. The 86th Legislature, appropriated funding for the following Medicaid waiver programs to increase enrollment and reduce waiver program interest lists:

- Community Living and Assistance Support Services (CLASS);
- Deaf-Blind with Multiple Disabilities (DBMD);
- Home and Community-based Services (HCS); and
- Medically Dependent Children Program (MDCP).

HHSC is funded to enroll 1,628 individuals by August 31, 2021, as directed by Rider 20, in the following waivers:

- 1,320 individuals enrolled in HCS;
- 240 individuals enrolled in CLASS;
- 60 individuals enrolled in MDCP; and
- 8 individuals enrolled in DBMD.

During the first quarter of fiscal year 2020, all waiver program enrollments progressed as expected based on historical data trends. Collectively, to increase waiver enrollments during fiscal year 2020, 3,208 new waiver enrollment offers were released during the first quarter.

The waiver enrollment process can take up to five months to complete. HHSC completed 45 waiver enrollments during the first quarter. There were 2,574 accepted slot offers in process and pending confirmation of waiver program eligibility.

¹ <https://hhs.texas.gov/sites/default/files/documents/laws-regulations/reports-presentations/2019/waiver-slot-enrollment-plan-report-oct-2019.pdf>

As each of the 2,574 new waiver enrollment offers complete the enrollment process, additional interest list releases will be made using HHSC's straight-line release methodology. HHSC anticipates higher levels of new waiver enrollments during the third quarter of fiscal year 2020.

1. Introduction

The 2020-21 General Appropriations Act, House Bill 1, 86th Legislature, Regular Session, 2019 (Article II, HHSC, Rider 20), made appropriations to HHSC to reduce interest lists by the following targets and to achieve these targets by fiscal year 2021:

- 1,320 individuals enrolled in HCS;
- 240 individuals enrolled in CLASS;
- 60 individuals enrolled in MDCP; and
- 8 individuals enrolled in DBMD.

HHSC submitted a Waiver Slot Enrollment Plan (plan) in accordance with Rider 20 to describe processes and necessary actions for HHSC to achieve the enrollment targets for CLASS, HCS, MDCP, and DBMD. CLASS, HCS, MDCP, and DBMD are Medicaid waiver programs that provide home and community-based services and supports to individuals as an alternative to institutional living and to maximize the quality of life, functional independence, health, and wellbeing.

Rider 20 also directed HHSC to submit three progress reports related to actions taken to achieve the targeted enrollments on March 1, 2020, September 1, 2020, and March 1, 2021, to the Governor, Legislative Budget Board, Senate Finance Committee, and House Appropriations Committee. This first progress report for March 1, 2020, identifies:

- The number of persons enrolled in each type of waiver slot;
- Planned enrollment for the remainder of the 2020-21 biennium;
- Any issues with enrollment identified by HHSC; and
- How HHSC plans to address those issues to achieve targets by the end of the fiscal year 2021.

2. Background

Texas has multiple Medicaid waiver programs that offer services in the community as an alternative to services delivered in an institution. To receive waiver services, a person must:

- live in Texas;
- be eligible for Medicaid;
- have a need for services offered in the program;
- have a service plan or plan of care within the program's cost requirements;
- meet program-specific eligibility requirements; and
- have a slot.

Waivers operate on a slot-based enrollment system. The number of slots is based on an agreement with the Centers for Medicare and Medicaid Services (CMS) and available state funding. A person who is interested in receiving services from the program requests to place their name on the program's interest list. Individuals are removed from the interest list for eligibility determinations on a first-come, first-served basis when funding or program attrition creates an available slot. The HCS waiver program has specific plans for using attrition slots to serve people with the most immediate needs (see Appendix B).

Waiver programs offer an array of services specific to the population served. Some services are available in all waiver programs, such as service coordination or case management, while other services are unique to the respective waivers. Individuals who are eligible for these programs are also eligible for a benefit through the Medicaid program called Community First Choice (CFC). CFC offers attendant care to help with activities of daily living, such as bathing, eating, or getting dressed. Habilitation, or assistance for someone to perform activities of daily living through hands-on assistance, prompting or queuing, and emergency response services are also available through CFC.

Information about specific eligibility criteria and services for waiver programs for which the Legislature appropriated additional funds is available in Appendix A.

3. Enrollment Plan for the 2020-2021 Biennium

Enrollment Process

HHSC began releasing interest list slots, as funded by the 86th Legislature, in September 2019. HHSC releases waiver program interest list slots monthly in accordance with appropriated funds to achieve targeted monthly enrollment.

HHSC maintains an interest list for each waiver program because individuals can be on multiple interest lists at the same time. HHSC coordinates slot releases for people who are coming to the top of more than one interest list by providing them with information about each of the waiver programs. The individual's eligibility will be assessed for the program they choose first. If they are ineligible for that program, HHSC will begin the eligibility assessment process for the individual's second-choice waiver program if he or she is still interested. This process allows an individual to choose which program they are assessed for first and allows HHSC to maximize resources by only starting an assessment process if the individual has not started the enrollment process for a different program.

An individual must apply for Medicaid if they are not enrolled in Medicaid at the time the waiver slot is offered. Medicaid eligibility can usually be established within 45 days if the individual has a confirmed disability determination. If the individual does not have a confirmed disability determination, it may take up to 90 days to establish disability and Medicaid eligibilities. Individuals are enrolled in a waiver program when all eligibility criteria are met. The process to establish program eligibility and complete enrollment may take several months. See Appendix A for detailed eligibility and service descriptions for all waiver programs.

HHSC releases more slots in the beginning of the biennium to account for a lag in enrollment. Staff closely monitors enrollment into the program to ensure the agency remains within appropriated slots and funding. HHSC staff take the following enrollment actions to meet the waiver services enrollment targets identified in Rider 20:

1. Calculate the average cost to fill each waiver slot, and if needed, adjust the monthly waiver enrollment targets to remain within appropriated funding levels.
2. Meet monthly to plan waiver interest list release amounts for each upcoming month. The monthly plans take into consideration available funding, client demand, and provider capacity.

3. Identify interest list individuals whose Medicaid eligibility is not progressing in a timely manner and prioritize these cases for expedited resolution by offering technical assistance to service providers and identifying potential waiver program enrollment barriers.

Senate Bill 1207

Government Code, Section 531.00601, established by Senate Bill (S.B.) 1207, 86th Legislature, Regular Session, 2019, requires HHSC to provide additional 1915(c) waiver interest lists placement options for individuals who become ineligible for services under MDCP.

S.B. 1207 allows new interest list placement options for MDCP enrolled individuals who lose waiver eligibility because they do not meet medical necessity criteria and individuals enrolled in MDCP who age out of the program.

1. Individuals in MDCP who become ineligible for the waiver because they no longer meet the level of care criteria for medical necessity may elect to:
 - Be returned to the top of the MDCP interest list in the first position once only; and/or
 - Request to apply their MDCP interest list request date to their position on another 1915(c) waiver interest list; and/or
 - Request to be added to the bottom of another 1915(c) waiver interest list).
2. Individuals in MDCP who become ineligible for program services due to their age may request to:
 - Apply their MDCP interest list request date to their position on another 1915(c) waiver interest list; and/or
 - Request to be added to the bottom of another 1915(c) waiver interest list).

In accordance with S.B. 1207, HHSC is creating waiver program communications to inform individuals in MDCP of these new program options. HHSC is planning to implement required changes to interest list placement processes following federal approval, which is anticipated in March 2020. In anticipation of federal approval, HHSC is amending agency operational process flows, updating agency policies and procedures, and implementing technology changes to meet S.B. 1207 requirements.

Enrollment Data

HHSC may offer more slots than there are available to account for declined waiver slot offers and individuals deemed ineligible during the enrollment process. HHSC releases additional slots throughout the year depending on the number of completed enrollments.

HHSC increased the number of waiver interest list offers for the first two months of fiscal year 2020 to a combined total of 3,208. HHSC continually evaluates the number of released slots and adjusts them to remain close to the waiver enrollment targets. Out of the 3,208 waiver offers released, 2,574 individuals accepted the slot offer and are going through the process to determine eligibility – 634 of the 3,208 individuals did not accept the offer.

Out of the 2,574 individuals who accepted the offer, 45 have completed enrollment during the first quarter of SFY 2020.

Table 1 shows the first quarter (September 1 through November 30, 2019) current and planned waiver enrollment progress for the 2020-21 biennium. Note: Table 1 does not represent the total number of individuals enrolled in these waiver programs.

Table 1. Current and Planned Slot Enrollment by Waiver Program, 2020-21 Biennium as of First Quarter, 2020²

Program	Purpose	New Number of offers released	New Number of Offers Pending	SFY 2020 Current Enrollment ³	SFY 2020 Planned Enrollment	SFY 2021 Planned Enrollment	Total Appropriated Enrollment for Biennium
CLASS	Reducing the statewide interest list	169	107	0	120	120	240
DBMD	Reducing the statewide interest list	20	11	0	4	4	8
HCS	Reducing the statewide interest list	468	369	39	660	660	1,320
MDCP	Reducing the statewide interest list	2,551	2,087	6	30	30	60
Total		3,208	2,574	45	814	814	1,628

Note: The process to establish eligibility (offers released and pending) and complete enrollment into a program may take 3-5 months.

² Data Source, Community Services Interest List (CSIL) and Client Assignment Registration System (CARE) Interest List Data with Times and Dispositions through November 30, 2019.

³ Enrollment data is based on program eligibility on the last day of the month. MDCP figures are subject to change and take 7 months to be final.

Enrollment Issues

Once an individual accepts a waiver slot offer, they begin the waiver enrollment process. Several factors may impact the individual's progress through this process, including:

- Delays in scheduling and completion of pre-enrollment assessments due to scheduling conflicts with the individual or Legally Authorized Representative;
- Delays in determining Medicaid eligibility, a process that can take up to 90 days;
- Competing enrollment offers which may delay an individual's waiver program decision; and
- Delays in transitioning to the community if individuals transitioning out of nursing facilities require additional nursing facility services to stabilize health conditions before the transition.

HHSC staff actively monitors the enrollment of each waiver and provides families and contracted providers with guidance and technical assistance to prevent waiver enrollment delays where possible. HHSC staff also monitors waiver enrollments against available waiver slots throughout the year to meet waiver enrollment targets.

4. Conclusion

HHSC will continue to increase access to community-based services by enrolling the remaining 1,583 individuals across the CLASS, DBMD, HCS, and MDCP waiver interest lists during the 2020-21 biennium. This means HHSC will release slots for enrollment on an ongoing basis with half of the slots released in fiscal year 2020 and the other half of slots released in fiscal year 2021. HHSC will continue using attrition slots and appropriated slots to meet the needs of individuals with IDD who are in crisis situations or are transitioning from institutions into a waiver program.

HHSC will continue to monitor the progress of enrollments monthly to address barriers and ensure enrollments are completed as intended. HHSC will also monitor enrollment progress to ensure waiver enrollments remain within appropriated funds. Future waiver slot enrollment progress reports will include updates on the direction from CMS, the status of S.B. 1207 implementation, and the results of coordinating multiple waivers offers for individuals who come to the top of more than one interest list. In accordance with Rider 20, HHSC will submit the second progress report by September 1, 2020.

List of Acronyms

Acronym	Full Name
CARE	Client Assignment Registration System
CMS	Centers for Medicare and Medicaid Services
CLASS	Community Living Assistance and Support Services
CSIL	Community Services Interest List
DBMD	Deaf-Blind with Multiple Disabilities
HCS	Home and Community-based Services Program
HHSC	Health and Human Services Commission
ICF/IDD	Intermediate Care Facility for Individuals with an Intellectual and Developmental Disability
IDD	Intellectual and Developmental Disability
ILM	Interest List Management
MDCP	Medically Dependent Children Program

Appendix A. Waiver Program Eligibility and Service Descriptions

CLASS

CLASS provides home and community-based services to individuals with related conditions as a cost-effective alternative to an ICF/IID. To be eligible, a person must:

- Be eligible for ICF/IID Level of Care VIII criteria for placement in an ICF/IID;
- Have been diagnosed with a related condition manifested before the individual was 22 years of age as described in the Texas Approved Diagnostic Codes for Persons with Related Conditions; and
- Have a qualifying adaptive behavior level.

CLASS offers:

- Adaptive aids
- Auditory integration/enhancement training
- Behavioral support
- Cognitive rehabilitation therapy
- Continued family services
- Dental treatment
- Dietary services
- Employment assistance
- Transportation-habilitation
- Minor home modifications
- Nursing
- Occupational and physical therapy
- Prevocational services
- Respite (in and out-of-home)
- Specialized therapies
- Speech and language pathology
- Support family services
- Supported employment
- Transition assistance services

DBMD

DBMD services help people live in a community-based setting instead of in an institution. People enrolled in the program live in residential settings such as their home, their family's home, or a licensed assisted living facility. To be eligible, a person must:

- Have one or more diagnosed related conditions and, as a result:
 - Have deaf-blindness;
 - Have been determined to have a progressive medical condition that will result in deaf-blindness; or
 - Function as a person with deaf-blindness; and
 - Have one or more additional disabilities that result in impairment to independence
- Have related conditions manifested before the individual became 22 years of age as described in the Texas Approved Diagnostic Codes for Persons with Related Conditions; and
- Be eligible for Level of Care VIII.

DBMD offers:

- Residential habilitation
- Respite (in or out-of-home)
- Nursing
- Day habilitation
- Dental services
- Behavioral support
- Occupational, physical, or speech therapy
- Dietary services
- Audiology
- Minor home modification
- Adaptive aids
- Transportation – Residential Habilitation
- Employment Assistance
- Supported Employment
- Chore Services
- Orientation and Mobility
- Intervener services

HCS

HCS provides home and community-based services and supports to help people live as independently as possible. To be eligible, a person must:

- Have a primary diagnosis of an intellectual disability or an intelligence quotient of 75 or below and a related condition as described in the Texas Approved Diagnostic Codes for Person with Related Conditions; and
- Be eligible for Level of Care I or VIII.

HCS offers:

- Residential services
- Day habilitation
- Dental
- Behavioral Support
- Social work
- Occupational and physical therapy
- Speech/language pathology therapy
- Dietary services
- Audiology
- Minor home modification
- Adaptive aids
- Transition assistance

MDCP

MDCP offers community-based services for people who need the level of care provided in a nursing facility but would like to remain in the community. To be eligible, a person must:

- Be age 20 or younger; and
- Need the level of care provided by a nursing facility.

MDCP offers:

- Respite
- Flexible Family Support Services
- Adaptive aids
- Minor home modifications
- Transition assistance
- Employment assistance
- Supported employment
- Financial management services

Appendix B. Attrition Slot Utilization for HCS

Attrition slots are created when previously funded HCS slots are permanently discharged by an individual after enrollment. HHSC will use attrition slots in the 2020-21 biennium to address specific target groups listed in the HCS waiver that did not receive allocated funding. Staff will meet frequently to distribute any attrition slots available.

Attrition slots will be distributed based on the date, time, and order received. Any requests for slots received above the monthly attrition allotment will be evaluated by HHSC staff based on the time of the request with the intent to release an HCS slot for as many as possible.

If enough attrition slots are not available to cover the number of slots needed, the request for slots will be held until the next month's meeting. Any attrition slots available after the meeting will be held for distribution at the next meeting. If a surplus of attrition slots accumulates after a six-month period, staff may make recommendations for some of the surplus of attrition slots to be released to individuals on the HCS interest list.

Attrition slots will be utilized for the following target groups:

- Crisis Diversion
- Nursing Facility Transition
- Nursing Facility Diversion
- Nursing Facility Transition for Children
- State Supported Living Center (SSLC) Promoting Independence
- Child Protective Services (CPS) Aging Out of Conservatorship
- HCS Interest List Reduction