

Draft plan for HCBS Waiver Expenditure Reductions

#	Initiative	Expected	Detailed Description	Action Needed	Comments/Status
		Savings FY11-12 Combined Total \$63,151,071			
1	Companion ratio/limit adjustment	\$18,605,801	Allow up to 3 people to be served/Set rate at average of the 1:2 level	Handbook change, Rate Rule change	Completed as of August 1, 2011
2	Allow IHSS in all tiers in the family home as a less costly option for PCA at lower IHSS rate	\$1,765,277	PCA at 15 per hour versus IHSS at 12 per hour - optional to help reduce cost of services and must always be considered for an increase of services	Case Review	Started July 1, 2011 with case by case review
3	Transportation Review and service limitations	\$1,375,000	Ensure transit is funded by waiver only as a last resort and limited number of round trips	This requires a county by county review to ensure cost effectiveness.	Reviews to be completed in September 2011 with service limitations effective November 1, 2011. Areas are working with Transportation Disadvantaged Providers to achieve most cost effective delivery of service.
4	Pool Respite services for families to draw from and reduce allocation	\$975,042	This initiative primarily reduces unused service authorizations in current cost plans. The actual savings are based on 3% reduction in actual billings with 10 months implementation		Currently being implemented and will be completed by October 1, 2011.
5	Move SMH Therapy to MSP (adults)	\$1,395,703	JT to DCF remove expenditure from waiver through amendment for the long term because service is provided by DCF/ACHA	Handbook change, Rate Rule change, Waiver Amendment	While waiting for waiver amendment, case by case transition of services to MSP. Waiver will be amended this FY.
6	Move Skilled nursing to MSP (adults)	\$1,615,650	JT from AHCA and remove expenditure from waiver and do waiver amendment for the long term because skilled nursing is provided by MSP	Handbook change, Rate Rule change, Waiver Amendment	While waiting for waiver amendment, case by case transition of services to MSP. Waiver will be amended this FY.

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#	Initiative	Expected Savings FY11-12	Detailed Description	Action Needed	Comments/Status
7	Rate adjustment for all ADT recipients and reduce burdensome regulations.	TBD	Rate adjustment to targeted savings	Handbook change, Rate Rule change with reduced paperwork and regulation	Prior proposed to consolidate into one ADT rate not well received. Seeking provider input for alternative savings in this category.
8	Eliminate Behavior assistant services with ResHab and ADT	?\$5,000,000	Elimination of duplicative services occurring in the same settings	Handbook change for policy clarification.	Behavior Assistance services are duplicative of the services and training provided in residential habilitation and adult day training.
9	Agency Rate premium set to a maximum of 20% above solo rates for all services with agency rate	\$3,712,169	Currently there is a range of 5% to 45% over solo rates as a agency premium.	Rate Rule change	Current rate premiums vary from 5% to 42% depending on the service category
10	Behavior Analyst collapse rate from level 1 to level 2	\$2,580,874	Rate for level 2 is \$50 per hour for solo and agency is 20% above - based on average	Handbook change, Rate Rule change	Current behavior analyst rates for level 1 are not directly associated with the client level of need or service outcomes and is based solely on years of experience
11	Rates reduced to MSP (nursing and therapies and assessments)	\$1,530,476	Use current waiver rate x units -MSP rate x units	Rate Rule change	Currently in process of including this change in the DD Rate Rule
12	Res Hab reduce rate levels from 9 to 4	\$21,113,087	redefine level of support descriptions and associated rates and revise associated staffing levels in the handbook	Handbook change, Rate Rule change	Seeking provider input for alternative savings in this category.
13	IHSS collapse quarter hour above live in rate	\$2,714,937	delete use of quarter hour above the day rate	Using QSI 1,2,3 and eliminate IHSS 1/4 hr above day rate	Individuals with level of need 1,2, and 3 do not require additional supports beyond a daily rate for in home supports.

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14	Utilization management of behavioral services	?\$3,000,000	6 month increment with reapplication and approval required after each increment: declining hours based on matrix scores		Implementing on site reviews for continued stay in intensive behavioral programs. Additional utilization reviews ongoing to match services to level of need of client.
15	Publish Standardized IB Rates for future with lower rates retained	\$1,549,764	Standardizing rates based on individual needs rather than negotiated contracts	Rate Rule promulgation required.	Rate Matrix in development. Savings dependent on effective date
16	Res Hab quarter hour eliminate since other options are available for in home supports	\$917,290	Eliminates the quarter hour unit for this service. Typically used for individuals in their own home and the service is more appropriately provided as in home support.	Rate Rule change.	This would increase IHSS use and reduce service array
17	Fee collection by residential providers	*FARF estimate 8,401,147	Create form to calculate recipient responsibility to be deducted from waiver service bills, monthly surplus frozen or swept by service	Develop method and procedures to monitor.	Implementation strategy and monitoring procedures need to be developed and vetted, late year implementation
18	12.5% reqd match as state share	TBD	Would leverage current spending to decrease GR effort	Long term research with AHCA and CMMS	Unknown if local effort is applicable to matching in this context. Variables include in kind share, local funds, and other sources
19	Core service models	TBD	Limit waiver services to only those services considered core to prevent institutionalization.	Waiver amendment required.	
20	Service limits	TBD	Reduce service limits for each waiver service.		Services limited to only essential elements within budget.
21	Limit individual cost plan to not greater than average ICF/DD	\$3,300,000	FL ARC estimates 3.3 m based on "limiting most Cost plans to \$150,000".	Waiver Amendment required prior to implementation	CMMS will require alternative supports for adversely impacted clients. Data suggest that 17 m in savings could be realized if waivers were limited to Individuals cost of ICF/DD service.