



Diamond State Health Plan Plus 

DSHP-Plus

# 1115 Demonstration Waiver

## Diamond State Health Plan (DSHP)

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- + Managed Care Delivery System
- + Operational since January 1996
- + Served the non-Long Term Care population
- + Full benefit dual eligibles were excluded
- + Covers uninsured adults at 100% FPL



# Long Term Care Landscape Prior to DSHP Plus

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- ❖ Heavily institutional
  - 62% of LTC Members in Nursing Facilities\*
  - 90% of LTC Expenditures Spent on Nursing Facility Care\*
- ❖ Fee-for-Service
- ❖ Three 1915c Home & Community Based Waivers
  - Elderly & Physically Disabled
  - AIDS
  - Developmental Disabilities
- ❖ Three Separate Entry Points for LTC Services

\* When ICF/MR & DD HCB Waiver Excluded <sub>3</sub>

# DSHP Plus Program Goals

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- ✦ Rebalance LTC System in Favor of HCBS
- ✦ Expand Consumer Choices
- ✦ Increase Coordination of Care and Supports
  - Avoid/Divert Need for Costly NF Services
  - Serve Consumers in Cost-Effective Settings that Meet their Needs
  - Improve Care Coordination for Dual Eligibles
- ✦ Create Budget Structure to Shift Resources from Institutions to HCBS

# Diamond State Health Plan Plus

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- ✦ Accomplished through an Amendment to 1115 Waiver.
- ✦ Integrates Nursing Facility and HCBS through Existing Managed Care Delivery System.
- ✦ Streamlines LTC Referrals, Eligibility and Enrollment.
- ✦ Tightens Medical Eligibility for Nursing Facility Placement.

# Populations Included in DSHP Plus

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- ✦ Nursing Facility Residents
- ✦ Children Residing in Pediatric Nursing Facilities
- ✦ 1915c Elderly & Physically Disabled and AIDS Waiver Participants
- ✦ Money Follows the Person (MFP) Demonstration Participants
- ✦ Other Full Benefit Dual Eligibles (Medicaid/Medicare)

# Populations Excluded from DSHP Plus

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- ✦ Individuals in the 1915c Developmental Disability HCB Waiver
- ✦ Individuals in ICF/MRs
- ✦ Partial Duals - QMB and SLMB
- ✦ Individuals Selecting PACE

# Benefit Package

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## DSHP Benefits

- Acute Care Services
- In/Out Patient Hospitalization
- 30 days Nursing Facility Care
- Behavioral Health
- Limited Case Management
- Durable Medical Equipment
- Physician Services
- Lab & Radiology Services
- Private Duty Nursing
- Home Health Services

## Carve-Out Benefits

- Pharmacy
- Child Dental
- Non-Emergency Medical Transportation
- Day Habilitation Services for DD Pop.

## DSHP-Plus Benefits

- Case Management Services
- Nursing Facility Care
- Assisted Living Facility Care\*
- Chore Services\*
- Respite Care
- Home Delivered Meals\*
- Day Habilitation\*
- Cognitive Services for ABI Pop
- Consumer Directed Attendant Care\*
- MFP Transition Services
- Adult Day Services\*
- Emergency Response System\*
- Nutritional Supplements for the AIDS Pop
- Home Modifications\*

\* New or Expanded Service



# Quality Measures

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- + Reduction of Avoidable ER Visits, Hospital Admissions
- + Access to Primary and Preventive Care
- + Appropriate/Timely Assessments, Care Plan & Back-up Plan
- + Members given Choice of Services (Including Ability to Self Direct Care) & Providers
- + Critical Incident Education, Management & Reporting
- + Member Satisfaction
- + Proportion of Members Receiving HCBS vs. NF Services

# Keys to Success

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- ✦ Robust Stakeholder Communications
- ✦ CMS Cooperation
- ✦ Collaboration with Division on Aging & Public Health
- ✦ Utilizing Existing MCOs Streamlined Implementation
- ✦ Address State Staff Concerns
- ✦ Address Nursing Facilities' Concerns
  - State Sets NF Rates for Three Years
- ✦ Address Vendor Case Management Agencies' Concerns
  - MCOs Contract with CM Agencies for One Year

# Keys to Success

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- ✦ Address Client & Advocates' Concerns
  - Aggressive MCO Oversight/Monitoring by State
    - Joint Home Visits
    - State Review of All Service Reductions
  - Enhanced Case Manager to Client Ratio
  - Increase Services Offered
    - New HCB Services Added
    - Case Management Services for NF Residents
  - Eliminated Cost Share Requirements for HCBS

# Timeline – 2011

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February  
2011

- Initial Steering Committee Meeting
- Communication Plan Developed

Spring  
2011

- Systems Design
- Concept Paper to CMS

August  
2011

- 1115 Waiver Amendment to CMS

Dec  
2011

- DSHP Plus MCO Rates Developed

# Timeline - 2012

Jan  
2012

- DSHP Plus Open Enrollment
- January 1, 2012 – February 15, 2012

Feb  
2012

- State / MCO Readiness Review

March  
2012

- HCBS Waiver Transition & Close-Out Activities
- CMS Approves 1115 Waiver Amendment

April  
2012

- Program Implementation

# Implementation Experiences

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- + Health Assessments Initiated for Community Duals
- + Identification of Under-Utilization of HCBS
- + Enhancement of Behavioral Health Services
- + Home Environment Safety Assessments & Medication Reconciliations Initiated
- + Nursing Facility Billing Challenges
- + Transition of MFP Complex
- + Confusion Over Differences in DSHP and DSHP Plus Benefits.

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More Information is available on Website @  
<http://www.dhss.delaware.gov/dhss/dmma/dshpplus.html>

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