



**NCCD**

Nebraska Consortium for Citizens with Disabilities

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# Principles of Managed Long Term Services and Supports

## Policy Brief on Managed Care

By

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## **Principles of Managed Long Term Services and Supports (MLTSS)<sup>1</sup>**

The central organizing goal of system reform must be to assist people with disabilities to live full, healthy, participatory lives in their community.<sup>2</sup> Recognizing the many unique challenges involved, NCCD recommends the following guiding principles are rigorously applied in designing and operating Medicaid managed long term services and supports (MLTSS) systems serving children and adults with chronic disabilities:

### **Core Values**

1. Managed Long Term Services and Supports (MLTSS) systems must treat people with disabilities with dignity and respect.
2. MLTSS systems must be designed to honor, support and implement person-centered practices and consumer choice. People with disabilities will be able to hire and fire providers, choose outcomes important to their lives, and change priorities as dictated by life events or as needed.
3. Delivery systems for MLTSS must be capable of addressing the diverse needs of all beneficiaries on an individualized basis.
4. All individuals should be able to access comprehensible information and usable communication technologies to promote self-determination and engage meaningfully in major aspects of life.
5. Beneficiaries in managed long-term services and supports must have access to the durable medical equipment, assistive technology and technology-enabled supports to function independently and live in the most appropriate integrated setting.
6. Primary and specialty health services must be effectively coordinated with any long-term services and supports an individual might require.
7. MLTSS must result in choice for the beneficiary in the most appropriate integrated setting.
8. MLTSS must plan to provide support over the lifespan in addition to a person's episodic needs.
9. Services and supports accessed through each managed care entity must be sufficiently robust and diverse to meet the contracted scope and needs of all beneficiaries with disabilities.
10. Beneficiaries must have a choice among Managed Care entities.

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<sup>1</sup> ANCOR. *Principles in MLTSS*. ANCOR. 5 Sept. 2014. Web. <<http://ancor.org/sites/default/files/ancor-principles-of-mltss-09052014.pdf>>

<sup>2</sup> Robert Gettings, Charles Moseley, and Nancy Thaler. *Medicaid Managed Care for People with Disabilities*. National Council on Disability, 18 Mar. 2013. Web. <<http://www.ncd.gov/publications/2013/20130315/>>.

11. MLTSS must promote an Employment First philosophy. Working-age enrollees with disabilities must receive the supports necessary to secure and retain competitive employment or other meaningful daytime activity. For people who have not succeeded in being able to sustain employment with appropriate supports, there must be meaningful alternatives that meet that person's needs available during any period of unemployment.
12. All eligible individuals must be included in the transition, including those residing in state institutions. Resolving waitlists, including addressing the needs of individuals who are underserved, should be addressed in state plans, such as using any savings to reduce the waitlist.

### **Stakeholder Engagement**

1. MLTSS must allow for multiple opportunities for meaningful stakeholder engagement throughout the process to include people with disabilities, families, providers of supports, state government and other individuals knowledgeable about integrated community settings and both medical and non-medical outcomes for people with disabilities. States should be required to identify stakeholder input to CMS, how they incorporated input into plans, or why they chose not to do so.
2. The existing reservoir of disability-specific expertise, both within and outside of state government, should be fully engaged in designing service delivery and financing strategies and in performing key roles within the restructured system.

### **Health Information Technology (HIT) and Electronic Health Records (EHR)**

3. MLTSS must design and implement health information technology and electronic health records prior to the implementation of the MLTSS system.
4. States should design, develop, and maintain state-of-the-art management information systems with the capabilities essential to operating an effective managed long term services and supports delivery system.

### **Assessment and Rate Setting Methodology**

5. MLTSS rates and/or payment methodology and the provider rate-setting mechanisms must be actuarially sound, transparent, and adequate to attract and retain a highly valued, stable, and qualified workforce; and, geared to achieve valued outcomes.

### **Implementation**

6. MLTSS implementation must require states to complete a readiness assessment before enrolling people with disabilities.

## **Performance Measures and Metrics**

7. Must include non-medical metrics focused on LTSS (in addition to acute and behavioral health into the RFP and contract). These metrics must incorporate equality of opportunity, independent living, economic self-sufficiency and full participation as defined in the Americans with Disabilities Act (ADA) and the integration mandate of the ADA and the Olmstead Supreme Court decision. Performance reports on these metrics will be shared with all stakeholders.

## **State Responsibility and Regulations**

8. MLTSS implementation must be accompanied by regulations that encourage and support innovation, be modified to reduce process burden in exchange for performance outcome measures as the accountability standard, and allow provider creativity on how to meet the regulation.
9. MLTSS regulations must assure individuals are safe and secure without compromising an individual's civil rights, choice, informed decision making and dignity of risk.
10. States must assure transparency in the contract procurement process for MLTSS, monitoring, and quality assessment.
11. MLTSS contracts must define financial risk between the state and the MLTSS entities and providers
12. States must require MLTSS systems for people with disabilities to cover the full range of services and supports needed to address the diverse needs of people with disabilities on an individualized basis across the life span.
13. Benefit packages should build upon existing services and supports needed by beneficiaries to live in the community, including services for acquiring, restoring, maintaining and preventing deterioration of function or acquisition of secondary disabilities.

## **Appeals and Grievances**

14. MLTSS must safeguard individual rights and all applicable federal (e.g. ADA/Olmstead) and state statutes.
15. Enrollees with disabilities should be fully informed of their rights and obligations under the plan, as well as the steps necessary to access needed services in accordance with the requirements of the Social Security Act.
16. Grievance and appeal procedures must be established that take into account physical, intellectual, behavioral, and sensory barriers to safeguarding individual right.