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>> Testing the captioning.

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>>SPEAKER: Good afternoon, we'll be starting in approximately four minutes, thank you.

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DEPUTY SECRETARY BURNETT Good afternoon this is Jennifer Burnett I'm the secretary for the office of long term living I want to welcome the folks to the first of a -- a -- we're going to be holding monthly Webinars this is the first one this is also the first webinar following our round of listening sessions which completed at the end of June. I am the deputy secretary for the office of long term living. And, I am very pleased to be able to communicate with you through this technology. This is the first time we're doing this particular technology so, please bare with us on any glitches we run into, we'll try to get it right.

I want to welcome Steve Horner who is representing secretary Osborne, from the Department of Aging Steve?

>>SPEAKER: Good afternoon, and behalf of the secretary Theresa Osborne,

I offer welcome warm welcome to the participants on the call it's exciting and impressive to see the volume of individuals who are interested in the managed long term services and supports and have taken the time to participate on this call.

Today is a historic moment for Pennsylvania, as the State moves towards designing a new managed long term services and support system,

[2:30-4:00 Webinar for Office of Longterm Living](#) Transcript

to improve quality, health outcomes, service delivery and the lives of people who are receiving these services.

Developing a coordinated service delivery system for older adults and individuals with disabilities, that supports the preference of most Pennsylvanians to live in their homes and communities as paramount and your feedback is essential to accomplish this task.

Thank you for your interest in participating in this conference call.

DEPUTY SECRETARY BURNETT: I would like to -- um, invite, to give some housekeeping rocks on this, so we'll start by advancing to the first slide.

>>SPEAKER: Thanks Jen.

We wanted to cover the few of the technology related items -- for the system we're using what you should see on the screen now is, some thing similar to what you're seeing on your own screen. You see the slides we're going to be covering on the left side of the screen where it says Webinar housekeeping on the right-hand side, is the control panel.

And, when the control panel you will see the participants are currently muted we'll be handling questions through the online process. And, you will type the question where the arrow currently is when we get to that portion. You can actually enter a question through out the process, we will then answer all those questions at the end of the session.

The next slide you're currently seeing shows in more detail what the question section looks like. And if your control panel which is the red arrow if that is hidden or collapsed and you want to ask a question what you need to do is click on the red arrow right in this area and that will expand the control panel and then you can type your question again down in this area of the control panel.

Okay?

The webinar itself will be available until 4:00 p.m. and at that point we will loose access to the system. And as we go through again you have the opportunity to enter a question at any point in those questions will be answered at the end I'll turn it back to Jen now to begin the presentation.

DEPUTY SECRETARY BURNETT: Thank you Pat, our -- I want to talk a little bit about what we have been doing the past couple of months, just to level set with everybody on the call. We proposed a managed long term services and supports program through a discussion document that got issued on June 1st and it was open for comment until July 15th.

Last week. And that discussion document really prompted a lot of feedback and interest. It -- we received over 800 comments and we had over 800 people involved in the listen sessions we did throughout the State. I'll talk about those in a minute.

The slide really describes what we said in the discussion document.

We're very interested in furthering and improving on our -- person centered program design in our program.

And in the service plan development process and really are committed to having a person centered system.

We want to have better coordination of services and supports to the people who are participating in our programs. We want to improve access and improve the amount of qualified providers that are able to serve people in our system. I think this next one emif a says on emphasis on

home and community

services we want to expand our home and community based services delivery option and, um, we currently have a system that is still at least in what we're paying our institution tally biased we want to move towards home and community based services we are interested in exploring

and figuring out how to incent good performance and so are looking at performance based payment incentives. And we also know that we're going to have to do a lot of participant education and enrollment supports. So benefits counseling those kinds of things are going to be critical to the success of managing long term services and supports.

We want to have emphasis on preventive services. We want to, in the current fee for service system there really, it's really, we don't have a whole lot of preventative services. We want to provide opportunities for participant protections throughout all of our systems . And, this last bullet, quality and outcomes based focus is really an important aspect what we do. We really are doing this because we believe that it will help to improve Quality Inn our long term services and supports system.

What we did and I we began to talk about that, we had the discussion document opened for comment for 45 days, we did have that discussion document in -- available through our web site it's still posted on our web site. It really was an over arching high level document, trying to pro-vehicle questions and getting people to give us input that was the purpose of the document.

We will also have -- we have been doing very robust stake holder engagement through the six public input sessions listed at the bottom of the slide.

And those are held throughout June and, we also in addition to those public input sessions we did a lot of stake hold engagement with

existing advisory committees and broad array of interest stake holder groups. There's been a tremendous out pouring of interest in what we're doing with managed long term services in the State and, um and that is definitely reflected in the amount of stake holder interest and we are really working to respond to that.

Again I talked about the public notice we did have the public notice in the Pennsylvania bulletin which announced the discussion document and public comment process.

And this bullet talks about the type, the ways we were able to accept the comments. We're currently in the process of analyzing this, those comments and, we'll certainly be using that analysis to inform what we do in terms of the requirements for eventual procurement process.

The next slide is a description of what we're hearing. This really, these are -- these 3 items are really covering pretty much everything we heard out in the field. And I want to spend a little time on that.

So we had over 180 commenters, 754 comments that just came in through, that we have processed just to date. There are more, in process, we're not done, with that we still are analyzing ones that came in the last day, which was a very large influx of comments on the last day. So we're still working on those.

Again, the 6 listening sessions, attracted over 800 individuals. Way more than had registered so, we were very pleased to see the amount of interest across the State in those listening sessions and hearing from myself and secretary Osborne and secretary Dallas, what our vision is for moving the system to manage long term services and support.

Again the people who have been giving comments represent a whole variety of types of people, they represent program participants, family members, representing program participants, current providers, people who are interested in becoming providers, managed care organizations advocates, associations representing the current long term services and support systems, service professionals, all kinds of people made

comments. We're

really interested in having as much input as possible in our process and one of the questions that we were asked repeatedly was after July 15th, what happens? That's the end of the comment period, that was really just the end of the public comment period on the discussion document. Now we're going to engage stakeholders as we go through the process of realizing out long term services and supports. These 3 items are consumers told us they want.

They want a -- they want a program design, able to live in the least restrictive setting they want to maintain participant control and they want -- they are very interested in continuing to have a consumer directed model of service. People told us that they want to live in the community.

They -- we, are committed to guaranteeing continuity of care to participants and providers we feel that's a critical aspect of how we transition to manage long term services and supports and then, in our ongoing program.

We also heard that our RESPIT to family caregivers and supports for that, is something that should be considered. So that really has been a new kind of idea and we're listening to it.

We also learned that timely payment to avoid service interruptions is going to be critical for the success of the program and then, people told us they want to be involved in the process, nothing about us without us. That is across the spectrum of participants, so that was really an interesting thing I think that's a quote from several people that came to the listening sessions. What we're doing, um, what we're doing is, I wanted to just kind of walk through some of the things that electric was a press release issued by the secretary's office earlier today, that outlines some of the -- what we're doing.

But this, these slides just kind of will walk you through some more detail about how we anticipate going about this.

We are creating an advisory committee with at least 50% representation by participants and caregivers and conducting monthly -- that is, will become part of our medical assistance advisory committee process. We're creating a new sub MAC called the NLPS sub MAC you'll hear more about that, we're very eager to get that advisory committee up and running hopefully by the beginning of September is what my goal is.

I'm not absolutely sure that is what is going to happen but, that -- that is what I would like to try, that's what I'm shooting for.

We are also planning to conduct monthly Webinars like this one. I will tell you we're going to be, um, these slides and the recording of this, of the this Webinar and future ones will be post on our web site will be posted for people to look at later. One of the questions we had was, what happens if I miss the webinar I miss the whole thing? We do expect that people will be looking at it, when it's posted on our web site.

And we certainly encourage people to go on the web site once it's

posted you know, look at the slides, listen to the recording. And then submit comments, at that point we will have in addition to submitting comments as Pat mentioned at the beginning during the housekeeping. The comments can be submitted through the resource account mailbox will be posted at the end of these slides.

So we will be monitoring our RA account as well.

We are also doubling the number of department of human services staff who work on nursing home transition.

We heard a lot about nursing home transition as something that is really critical but is, um, has some challenges from the field. That's what we heard a lot of comments that it's not working like it should work. Et cetera, et cetera so we're committed to improving how we connect with nursing home transition and really broadening the scope within the office of long term living.

We also, in looking at the idea of nursing home transition are interested in -- really expanding the work on transitions to beyond nursing homes but really looking at all kinds of care setting transitions so transition from hospital to subacute, transition from subacute to nursing facility, from home and community based to hospital, et cetera, et cetera those transitions are really critical and, in managed long term services and supports we think we're going to be able to manage that better. Manage that process better.

We're also restructuring our existing contracts and we're going to talk about them a little more in detail, to provide more choice for participants. The question of the choice was really, um, --
[someone joining the conference]

DEPUTY SECRETARY BURNETT: Hello. I'm sorry.

Something weird happened. I want to talk briefly about the, um, -- could you hold on a second please.

[pause]

Sorry about that, I had a little bit of a technology question here.

I had to ask my people who know more about technology than I do.

I want to talk a little bit about the advisory committee that we're going to be putting together.

And basically, really talk about robust and interactive, I actually, asked folks here to make sure you could still hear me we did a list test on that. So we're committed to a robust and interactive stake holder engagement process, offering transparency through the process. And, as I said earlier, this is a work in progress.

We won't likely get it right the first time. But we invite

feedback how we're doing and including, um, a -- a post webinar survey you'll be getting, anyone that is registered and attending this Webinar

will be getting an email tomorrow I believe, with a brief survey on how this Webinar worked for you as well as, feedback to us on what additional webinars you like us to conduct.

The kinds of, when I talk about the monthly Webinars they are schedule for the third Thursday of every month we'll be publishing the actual Webinars themselves as well as the schedule to the DHS web site. They can attend when they want to.

The kinds of things that we're envisioning in the Webinars we welcome your feedback, are updates on our internal work groups that are working on MLTSS we want to be able to provide that out to the constituency of people who are really ain'ted in what we're doing. To really give them a feel for, the kinds of things, we are working on.

We also, um, want to make sure that we have an opportunity for upcoming opportunities for engagement, that those kinds of things are made available through the webinar process. Program inclusions things we're going to include in the program, could potentially be a webinar topic.

Outcome measure and quality measures, are another thing that we might want to talk about and get feedback on.

So any suggestions on Webinar topics are welcome and we hope that you will use either the question function here on the Webinar or the RA -- resource account mailbox that you'll see on the last slide here.

The web site, let me say something about our web site it is -- there it is the resource account mailbox is right there. The -- um, web site can be reached on the DHS department of human services home page by clicking on for adults and then following the managed long term services and supports link which is near the bottom. So that's, how you get to our web site.

Um, the other thing I want to talk about is the advisory committee -- um, we'll be looking to conduct a sub MAAC it will be developed under the Federally mandated per view of the medical assistance advisory committee.

MLTSS program participants will comprise half the membership with the remaining half representing provider community and managed

care and other interested parties. These will be sunshine meetings, so, we will have opportunities for participation by telephone for increased accessibility and convenience.

We plan to start out, with a bi-weekly schedule so much is going to be happy we need input on the process, probably moving to, a monthly schedule, as -- that becomes -- it becomes apparent that's all we need to meet, if there's not enough in between to meet the bi-weekly meetings we need a month to be -- to be able to have things to report and ask for opportunities for input.

So that's the email address right there. And then, this is actually, a link to the web site which I just described how you get to it.

Okay.

I am, we're going to start talking about the things, we heard when we were out on the road.

We heard that there are many things about our system that are not working very well.

And as a result, we came back to Harrisburg and we decided that we're going to do something about it in the near term as opposed to waiting until a managed long term services and supports. These are things we need to fix today and/or, in the near future not in the year and a half or two years from now. So, um, we, are committed to a number of things and I wanted to kind of talk through what those are. And I'm going to ask Kevin Hancock, chief of staff here at the office of long term living to walk you through some of the changes we're going to be working on.

>>SPEAKER: Good afternoon everyone, this is Kevin Hancock office of long term living. The first of these changes we're going to be describing, I believe, that -- deputy secretary Burnett talked about in detail, but we are, increasing the number of staff, we're going to be dedicated to nursing home transition, the staff will be not specifically just dedicated to the program of nursing home transition but involved in the entire process of nursing home transition.

Supporting efforts to potentially identify, candidates for the process.

And in addition to the staff augmentation we're also looking for a reengineering of the entire nursing home transition process. Since, the process itself was an area where we knew that there were a lot of opportunities for improvement, we are looking for a total assessment, of the nursing home transition process, and, the different actors in the

process to see where we can decrease any of the complications or fragmentation that exists and to develop a better flow for the participants that go through the identification and relocation. And in addition to nursing home transition I'm going to touch in each of these contracts procurement efforts in detail. But we're planning to go through procurement process for financial management services, for the independent enrollment broker and for home modifications all designed to improve the programs and also to increase choice for program participants.

Starting with financial management services, we are going through a procurement process we're going to be moving from a single statewide vendor to multiple vendors, to ensure that, participants do have choice.

The vendors will be required to maintain a regional presence.

We know we're going to have multiple zones in this procurement process, we know that the zones will most reflectly the zones for the managed long term services and supports program.

But, concern we heard raised by program participants specifically is that they felt when they were, dealing with a statewide vendor that statewide vendor was removed from their needs.

So, a key requirement in this procurement change will be that, that -- the vendors awarded the service will be required to maintain a regional presence, that regional presence will represent boots on the ground but most likely represent a regional office. In addition, we will also require the vendors to augment their services and ensure that program participants will receive training and technical assistance to help support their efforts and directing their services in the consumer directed model e so the training and technical assistance will be a requirement to the vendors where program participants will be given supports and, clear direction on the best practices in in the way to manage their personal assistance services and in the entire service system themselves.

So, um, the objective, objective of that training is technical assistance will be to support participants in maximizing their control of the services.

The schedule for the procurement will be November 2015, we're hoping to have the RFP released in November 2015.

And the as mentioned FMS will be needed in the new MLTSS environment, it will follow suit, with the MLTS system and we're expecting some direct relationship or integratetion with the program, but we know we

need this to be procured now to address the concerns that were raised. In addition to the financial management service procurement, many of you know, we are currently in the procurement process for the independent enrollment broker.

This procurement process which is an act of procurement, will follow with an award for vendors in November 2015.

Those vendors will be awarded four contracts in four regional zones the plan, the time line for this, for this roll out will be with a completed transition to the new vendors in the new regions by April 2016, and by spring 2016, with new enrollments processed by the vendors, who receive the awarded contracts.

Just to be clear, for managed long term services and supports we ensured that the language of the new contracts, allows for flexibility, and addressing the new requirements in the manage the care program, for the independent enrollment broker. We would expect that there will be some change in the role of the independent enrollment broker as we roll out the MLTSS in addition we know there's going to be added educational component for the independent enrollment broker under managed long term

services and supports.

So the existing contract, um, that will be awarded in the -- November allow for the flexibility and change to support the new -- managed long term services and supports program. A paper was released in June, 2015 with a comment period ending the beginning of July -- and, significant stake holder input was, was -- submitted in response to this, this -- this concept paper and, from that stake holder input, it was determined that, RFPs will be released -- to five different regions to supported the home modification service.

The plan -- we hope to have released August 2015, next month. The RFPs as mentioned will designed based upon the feedback from the discussion document.

RFP will follow, released in the configuration of the health choices zones and, the plan is at this point, to ensure choice to vendors will be chosen for each zone and, the these vendors are brokers, will be contracting with home modification providers to be able to provide the services. So -- these, um, these inputs largely came from stake holder engagements we decided because, the -- the feedback was, um, so thoughtfully submitted that we would want to move on quickly as possible . Expect it here, on this particular procurement, very short order, in August, 2015.

Many stakeholders suggested we would be releasing we would release -- a draft, agreement -- of the contract as part of this process, the next step and follow-up to the discussion documents.

What we will, what we are planning to release at this point to address that input is a requirements document for managed long term services and supports the plan is to release the requirements document in August 2015, mid to late August. The exact date of the release will not be set, we'll make sure that's something is communicated very publically, we'll have a 30 day comment period, um, and -- the purpose is to -- to, to provide, the more detail, of the managed long term service and supports program, for public comments and

to validate that all of the requirements as discussed are being metaphor the program itself.

We are -- as mentioned we're hoping to have that released in mid to late August and, the 30 day comment period will have very specific instructions on how the -- how those comments will be submitted to us. At this point, we have completed the informational portion of our Webinar I'm going to return the phone back to deputy secretary Burnett to close and to begin to discuss the specific questions that have been submitted. Thank you.

DEPUTY SECRETARY BURNETT: Thank you Kevin.

I -- so we have just shy of an hour left of the webinar which is something I was interested in having occur was to provide sort of a -- an update on where we are, at the state and really looking to get input from the people that are participating in today's webinar. Again you can continue to submit questions and comments via email using the resource account.

But we are right now running a report with all of the questions that have come in through the -- through the question box that is available on the webinar and I think what I will do is, read those questions to you.

And, attempt to answer them.

As I said earlier I'm not necessarily going to be able to answer all of them.

But we will commit

to, if we can't answer them, we will have a QA answer document on the web site, listed out frequently asked questions and our answers to them.

There may be questions that have more -- have detail that I'm not aware of related to other parts of government, et cetera, et cetera so

there is a, if you bare with me I'm getting that report as I'm speaking.
So, if you could just hold on for a minute.

And then we'll, um, have those questions available.

[pause]

Okay while I'm waiting for the questions, while I'm waiting for the questions to be printed out and, because I can't use my computer to pull them up, but, um, I wanted to just take a minute to talk a little bit about the sub MAAC the medical assistance advisory committee, subcommittee.

And, I -- we are going to be putting together that committee the way that the medical assistance advisory committee process is -- or the, um, the processes that they go through, I ultimately am responsible in the sub MAAC for making appointments to the sub MAAC but we do have a sort

of, some meeting guidelines that we'll be following so you'll be hearing more about that.

The questions for the -- MLTSS sub MAAC that were made available that you folks out in the field have asked us are now sitting in front of me, so I'm going to go through these.

I also wanted to point out that we have over 550 people listening on this Webinar we're getting a lot of questions coming in.

But because, it was, it's such a large group of people, it would have been very difficult to manage this in a more QA without having, just the sending in the questions is really the only way we felt we could potentially manage it.

So the MLTSS sub MACC questions I'm going to go through these the new MLTSS sub MAAC include participants advocates?

I would think that advocates are going to be an important part of the subcommittee.

And so yes. They will, include advocates. I do also anticipate that, advocates, could potentially also be MLTSS participants, so, that's also an ideal situation when we have an advocate who is also using our service we find, we get a lot of really good input that way. What is the best way for interested people to get involved in the sub MAAC? I would offer it's going to be a committee, it's not going to be a large committee.

But between I think, in the neighborhood of 20-30 people, on the sub MAAC not everybody we have a limited amount

that can be appointed to it, not everybody will be an actual

member but let me tell you how the other sub MAAC and the medical assistance advisory committee itself are run.

Which is to say they are sunshined which means they are open and, um, they're open to the public, we do them in a place, in a meeting room that has public seating in it. And, um, generally, the managed -- the regular medical assistance advisory committee meeting does have a full audience. I will also tell you that the audience is able to participate. The audience raises their hands and the chair of the sub MAAC or MAAC can call on the audience for input and feedback. So, um, the sunshine provision really allows us to, include commentary from the people that are not necessarily members of group.

The question really was nice because it was, what is the best way for interested people to get involved in the advisory committee.

The involvement, really is an open process. So, um, we look to, if you don't actually get chosen for the committee itself, you still will be able to be involved.

I will also tell you, our -- the minutes and the notes from the sub MAAC meeting get posted for the web site they're there for public view after.

After the meeting public view.

It's a very open process, that we try to get as much input as we can, be as transparent as possible.

The or thing we're going to do with this sub MAAC we do it with other sub MAACs as well as well as the medical assistance advisory committee is that we, um, we will have a conference call in line, when we were out on the road doing the listening sessions, that kind of feedback was provided to us.

So similar to this webinar we'll have the capacity to do conference calling with the sub MAAC meetings so people can participate that way and again, if they, they -- um, sometimes it's hard to raise your hand and say something when you're on the phone, using the resource account mailbox is how we'll manage questions from the field if people feel, although I've been at MAAC meetings the people on the phone speak up. So it really is possible.

The next question is MLTSS sub MAAC 50% that are not consumers family, who can be a participant, health plans the ability to participate in that subcommittee? Yes, the answer is health plans will have ability to participate. We also are very interested in getting the various types of long term services and support providers that would contractor subcontract with the managed care organization to provide

service to the field. So, we are also looking to that community as well. The provider community and, as I said there's a whole variety of providers in long term services and supports as you folks all know. How do I get on the advisory committee?

People get on the committee by an appointment by the deputy secretary. I am, if you are interested you could potentially send in your resume and a description of why you're interested in participating to us through the resource account mailbox.

I would like to hold off on doing that and get some -- put together some guidelines for how to go about doing that. And, um, we will be posting those certainly we'll be talking about it in the next Webinar since that's a month away I'll make sure it goes out as a blast email to the folks that got today's -- the information on today's webinar.

So we'll, we'll put together an application process. And just use probably the other medical assistance advisory committee processes as a, um, as a guideline for us.

Can you please address, describe how participants in the medical assistance advisory committee will be chosen, will consumers providers and others have the opportunity to apply. Or will the parentants will be appointed by whom. I a answered they will be appointed by me. The deputy secretary at the time and -- um, consumerses and providers who want the opportunity to apply, will be hearing, we'll be reaching out to a variety of people, in the this cress. Is it something you're interested again, we'll be getting out a process for making a application if you're interested in -- um, in attending. Can you scroll that for me. Okay.

Thank you.

Hold on a second I want to scroll up I'm done with those questions sorry I have a few more questions here.

Um, okay.

And, someone asked would the volunteers, email the resource account mailbox, if they, that's posted up here on the slide. If they're interested in participating, in the advisory committee and the answer to that is, yes.

There's a question, that was -- those were the advisory committee questions that we received.

Next, moving onto nursing home transition -- um, what plans are there to develop more housing resources to support more nursing home transition possibilities.

We, um, we definitely are looking at and working with the a variety

of housing entities in the State. And in the department of human services. The

secretary has put together -- appointed a housing coordinator who has been working with all of the program offices more to come on that.

There will be an announcement in the near future about that, but housing is definitely on our radar.

So the housing resources is something that we're very interested.

And Pennsylvania, you may or may not be aware of, Pennsylvania is the recipient, they were awarded two 811 grants from the department of housing and urban development, Federal dorm of housing and

urban development and, through that process 811 program is a program of housing for people d with disabilities. Through that program, we anticipate more housing stock coming in for nursing home transition.

How can we assist the, the next -- the next question is, going back to housing I also want to assure you that we're partnering with the Pennsylvania housing finance agency, the department of community and economic development, um, as well as with the over 100 housing authorities

across the State with the Department of Aging and really working across all of the departments to make sure we have a concrete plan for engaging in the discussion of housing resources.

How can we assist -- the next question,

how can we provide feedback to the nursing home assessment. That's the assessment -- yeah the assessment, okay. So going back to what Kevin was talking about with really doing a business process analysis of nursing home transition, we will be convening a focus group again, having the haven't of people to call in to that.

That will include people out in the field who are actually doing nursing home transition, at the local level.

So, we are seeing that we are getting feedback from those of you who are in the trenches doing nursing home transition and getting your feedback to help us get it, make it better.

So that is our commitment to you and you'll be hearing more about that.

General questions, um, that I have here.

There's one which is not a question but it's more of a comment, this says thank you for making the nursing home transition and fiscal management services changes.

So, um, that's a -- that's a -- I thank you for that complement.

We're excited about it, to be honest with you.

Okay.

We now have a number of questions, okay.

I'm sorry.

Okay.

There's a question on the consumer directed services.
services.

If the consumers, if the consumer is -- will the consumer still be able to choose their home health agency or home health care provider from family and friends and how?

Yes. We want to hear what is working well and to the consumer directed model and build on that. So, um, that definitely will be private. It will be done through the same process that, um, although it will be an improved process through fiscal management service, procurement that Kevin had described, so they will -- the families and friends could get paid through our future vendors who provide fiscal management services. We anticipate them to be able to get paid through them.

The next question, um, is under the independent enrollment broker procurement. Will the life or PACE program still be going through the area agency on aging for medical eligibility or through the independent enrollment broker I'm going to turn it over to Kevin to answer that.

>>SPEAKER: Okay. To answer the question about whether or not the LIFE programs will still be going through the area agencies on aging for the level of care assessments, at this point the plan is to continue the level of care assessments through the area agencies on aging independent enrollment broker does not have the level of care assessment as part of their contract.

Second question for the independent enrollment broker, does that mean they're looking for director for four different regions. The process is ongoing, we can't talk about specifics at this point.

But the object is to make sure that -- that -- that four zones will have vendors supporting them.

But we really at this point can't answer a question like that, that specifically because the procurement process is not completed.

DEPUTY SECRETARY BURNETT: Thank you Kevin.

we have other questions that have come in through the resource account.

And, um, I want to just go through these questions for the new IEB,

independent enrollment broker contract does this mean the State is looking for four vendors for the four regions sounds like Kevin just answered that question.

What happens to the existing office of long term living direct enrolled home modification providers that are not under the OHCDS but billed through promise for services rendered.

That is a question that I do not know the answer to at this point.

So we're going to put a check on that one.

And get an answer out to you, if possible, by tomorrow, in the email that you get, with the evaluation of the this Webinar if we potentially have the -- that email available. It is -- that will come in the next couple of days. We are committed to having you guys get, all the people that participated an email, follow-up, um, that has our a brief survey for how this webinar, how it was received by you. As well as recommendations for new webinars we'll try to answer questions we cannot answer in today's call, through that process.

What happens if we have home mods in the works not approved by the release date. Will we be able to use that contractor. Yes.

Those contracts, that will be honored, anything that is in flight will not be stopped. We're going to -- our transition will include the ability to continue doing the as is way of business.

Until, that -- those home mods are completed and then we'll switch over to the new process through the selected contracting.

What -- I live in Columbia county.

Which region is Columbia county part of?

Um, we're not sure which procurement that question is regarding unless it's MLTSS in which case we really didn't case, we didn't talk about the

phased roll out of the MLTSS I want

to take a moment to inform everybody of that, in case you have not read had a in the discussion document.

We are planning to phase in managed long term services and supports beginning in southwestern Pennsylvania.

And, our enrollment for southwestern Pennsylvania is anticipated to begin in January of 2017.

Our next phase of our roll out will be to move to the Philadelphia region.

Um, looking to a January -- ramp, January 1, enrollment date of 2018 for phase two.

And, you should know that the ramp up period for, phase 1 will be

the after 2017, July through December, um, we're going to be ramping up phase two in July, to December of 2017.

Phase 3, is going to be the rest of the State which Columbia county would be part of, the ramp up period, July to December of 2018 with enrollment date of January 2019, if it's regarding the other procurements we can list those out, the actual regions out, when, if we have that information available and we don't necessarily have it all available at this point.

Um, will the home modification providers have to be currently listed providers in HIXUS which is our case management system or simply general

contractors that the brokers locate?

If not providers, how will they locate home modification providers?

I'm going to turn it over to Kevin to answer that.

>>SPEAKER: Hi, it's expected at this point that new regional brokers would be looking to existing or new providers if they identify new providers to be able to be providing these services.

So -- if providers are known in HIXUS providing home modification services or some other tool including tools that are used by the Department of Aging, they would certainly be looked to as potential contractors for the home modification services but that does not mean we'll be necessarily limited to that list if the broker is able to find and contract with new providers and able to provide those services as well.

So I'm going to turn it back over to Jen, to answer questions about the State budget.

DEPUTY SECRETARY BURNETT: Okay.

The question how is the non-state budget impacting all of this wonderful work you're attempting to do.

Well, I heard on the news this morning that there is good news there's actually discussions happening between the Pennsylvania -- the house of representative leadership and the governor's, the actual governor in his office, so that's -- very exciting news.

To be honest with you, the fact that there's not a state budget isn't really impacting we're moving forward on this and it would not, impact because it's about -- the budget, that we're talking about, that will be impacted is, will be next year's budget.

So right now, the budget impact that is happening, impasse is happening right now, is not not effecting our work, on MLTSS.

We have not heard anything about behavioral health services yet. What

is your thinking on this after reviewing the comments?

Um, we have not done the full analysis of all of the comments so we're still looking at the comments. I actually have not even seen the document that it closed last week and there were over 800 comments. So, I have not had a chance to look at the analysis which is ongoing right now.

I will tell you that it will be a heavy focus in the requirements document, that Kevin mentioned that should be going out later this summer.

One of the common comments made at the input sessions was speed at which the process is moving and the need to slow the process. I don't think that was addressed on the Webinar was there consideration given to the timing complements, to the timing of the process comments?

Um, again we have not looked at all the comments yet. I will tell you though that we heard comments that it's not going fast enough and you should just do it statewide in the first phase, so the comments have come from all different angles.

So we are not addressing, it will be addressed -- we are not addressing it currently and in today's webinar mainly because we don't have all of our analysis done on the comments.

But there was certainly consideration given to the timing.

Bays we did hear it, out on the road and we heard it -- there's consideration given the answer is, I don't have one right now.

Um, hello, thank you very much for the ability to be part of the MLTSS process we would like to know if there's any information regarding what happens with the current existing service coordination agencies.

We are anticipating that the current existing service coordination agencies are likely working with and getting to know and knocking on the doors of managed care organizations to find out how they could interface in the managed care world. We're hoping that is kind of work is happening out there.

I don't know, Kevin do you have any other comments to make on that one? The existing service coordination agencies?

>>SPEAKER: Thank you.

Certainly true when we, we are framing out the program requirements that, that the need for service coordination is a key component for managed long term services and supports and we did receive comments on

how that, how the service should be framed in this type of environment and, be assured that those comments will be taken into consideration,

as we frame out the requirements, at this point, how service coordination is looking and managed long term service and supports is yet to be determined.

But, please be assured that, that -- the need for service coordination is, front and center in fact we have a specific work group dedicated to evaluating how services will be coordinated in the new environments to elevate the importance.

And it is essential rule to coordinated model for long term supports.

DEPUTY SECRETARY BURNETT: Thank you Kevin.

Okay.

What would be the effective date, what would the effective date be for the new fiscal management service choices it is complex to change fiscal management services, fiscal management service provision in middle of a tax year. We are aware it is a difficult -- process to change in the middle of a tax year. We aren't 100%, it looks like we will probably be effective date will likely be January first, 2017. Kevin also has more information on that.

>>SPEAKER: Thank you, Jen, so we know that, the procurement process, and the contract awarding will be taking place with the release of the November RFP the contract awarding will be taking place in the year 2016 and we also know we're building in a great deal of time recognizing the complexity, points -- that, um, that -- the the questioner had mentioned.

We will have -- significant ramp up period and transition period the plan for the transition, ramp up January 1, 2017, built into that time frame, will be a significant ramp up period before that time.

DEPUTY SECRETARY BURNETT: Um, this is, thank you Kevin.

The next question, is how will the transition to managed long term services and supports effect the roles of the area agencies on aging? We had a lot of feedback on the role of the area agencies on aging in the comment period both through the listening sessions and as well as in comments submitted by the area agencies on aging we don't quite know what the -- the impact and how it will effect the role of the area agencies on aging.

But as we, um, frame up our requirements document, we will welcome input from the area agencies on aging, um, to give us, ideas about where they see themselves fitting into the future system.

Question is, does the department of human services have feedback on the frequently voiced concept of consumer choice of providers preferring continuing with current providers and choice of managed care

organizations.

I'm going to give that to Kevin to answer.

>>SPEAKER: Thank you Jen, so, managed care models for these types of services many general, focus heavily on choice of managed care organizations. So we know that, the configuration for the MLTSS program, will have choices of managed care providers.

Choice of providers within managed care organizations is also something that would be expected it will also be something that will be evaluated as part of the readiness review process and, we will be expecting that, that -- as a consideration for the managed care organizations that, they will be evaluated on how they're able to provide choice of provider and given regions how they're able to develop and grow their networks in growing regions to support long term service needs and, the needs of, of -- participants that may also have physical health behavioral health. Choice is going to be part of the model and part of the readiness review process it will be an evaluation of how the managed care organizations are developing their networks.

DEPUTY SECRETARY BURNETT: Thank you Kevin.

The next question is is cost going to be a deciding factor for choosing home modification vendors?

I'm going let Kevin, do you know the answer to that I don't know that I have the answer to that.

Okay. Hold on a second.

>>SPEAKER: Thank you Jen.

For the -- this is a procurement process, in -- the focus, on the procurement process, in a competitive procurement process, cost is always a consideration in a competitive procurement process. That is just one component, we also consider the, the quality and, the completeness of the responses of any type of vendor who would be going through such a process the emphasis on the quality of the proposal and being able to provide the service.

Cost in the competitive procurement process is always a consideration but certainly, certainly, um the -- technical approach or quality, is always a major variable in the way that procurements are scored that would be across the board thank you.

DEPUTY SECRETARY BURNETT: Thanks Kevin the next question is -- with

this new initiative, how much time would this cut down for the consumer to receive services during the first initial application process? As a

service provider we have seen that many individuals had to wait almost up to four months, before they got, um, services.

Please advise thank you.

Um, this is a consideration definitely that is very much on our radar.

We are looking at all of the process for, enrolling enrolling people into our programs.

And, doing some -- major work to make improvements in our enrollment process.

So I don't know, I can't answer -- I can't answer the question how much time would this cut down for consumers to receive the services.

But, um, I -- I -- we do anticipate, that -- um, it is an area that we're going to have an expectation around.

The next question, does the DHS have feedback on the comments asking for upwards adjustment in direct care provider rates?

The plan managed care full roll out is a long way away and several areas of the State, the rates are at 2005 levels.

This is, actually a question we did hear out on the listening tour.

Listenning session tour. And, it one that is, being evaluated as we speak. So, um, more to come on that.

But we don't have specific feedback, just know that we are doing an analysis.

We're doing an analysis of it.

Okay.

How does DHS and PDA propose to have a transparent public discussion with consumers and providers regarding the conflicts within the AAA system and the lack of a fact based eligibility instrument to insure consumers are treated in a fair and objective manner across the State. We don't have a specific proposal on that, we'll be putting together in the requirements document, based upon our analysis of the -- of all the feedback we're getting. We don't have a specific proposal on that per se. But it is, a definitely -- through this process that we're going through, today and in the future Webinars as well as really taking a look at how the current process works, um, we are, and through the public comment he is that we got on the discussion document, all of those things are being taken into consideration. Changing the process for home mod vendors seems to over more bureacracy.

I'm going to give that over to Kevin. Hold on.

>>SPEAKER: So based on the stake holder comments from the

discussion documents and their suggestions, the RFP process will be designed to actually streamline the process for home modifications and also to heighten the emphasis in the service system.

So, by having a specific broker managing and engaging with the contractors for the process we believe it will have lightened emphasis and more specifically meet the needs of, of the program participants who need home modifications to be able to have support for their services.

DEPUTY SECRETARY BURNETT: Thank you.

What steps is the department taking to make sure added bureaucracy doesn't happen like Kevin just described that.

Would there be any conflicts for being on committees for providers intending

on bidding on the upcoming RFPs.

We're a little puzzled by that question.

I think we're going to table that question and try to come up with an answer likely talking to our general counsel and, possibly folks in our procurement office.

So, that's one that needs to get tabled and we'll answer that one.

Okay.

The next one is how will the MLTSS roll out phases be determined?

Is it by current OLTL Department of Aging regions and if so, which regional order? I think I just laid that out earlier. Again, southwest -- southwest PA in January 2017.

Southeast PA in January of 2018 and, the rest of the state in January of 2019. And, the zones will be the health choices, we're looking at the health choices zones at least that's what we've proposed. Will there be an application process for the MACC I think we already answered that. There will be an application process.

Why is managed long term services being moved so quickly -- services and supports being moved so quickly. Stakeholders have not seen a flushed out proposal for how MLTSS structured let alone having the opportunity to weigh in on the specifics, RFPs before the CMS approval can be obtained and the stakeholder process, can't be meaningful if the key design decisions are made, for inclusion in the RFPs the new advisory committee will also have very little time to weigh in on details of proposals before the RFPs are issued. We are -- moving, MLTSS quickly, this is -- the instructions that we have gotten. We're following what we have been asked to do.

It is, an opportunity. It has the support of the governor's office and support of the department of human services office, and Kevin

mentioned we will be opening up the, um, the requirements document for input on what goes into the RFP we'll have a comment period for that. We will also be issuing a concept paper, that will be going to CMS which is the center for Medicare and Medicaid services our Federal partner in this process as well as, issued for comment from the public. So, that constant paper will be issued sometime in late summer. We are continuing to move quickly.

But we think with your support and the input we're getting through this process and through, um, future webinars as well as the RA-MLTSS resource account for emailing comments we are getting a lot of feedback through the process.

Is the State planning to release an attendee roster for this meeting . I did not -- I wasn't -- I had not even contemplated that I don't know if anyone else has contemplated that.

To the extent --

[pause]

Yeah.

Um, I think it's, important to note that there are, we didn't ask for a release of people's names in the process of setting this webinar up so I don't think we really can legally put out the attendee list without that kind of a release from the people who are attending. Some people may not want their name out there, associated with the process. If an agency submits an RFP to be a broker for home mods could they also provide the service?

Provide the home modification service I guess is what that means.

Um, we're -- I don't, I think, they could, if I don't know if they became the broker they likely need to subcontract for the service.

With builders who do home modifications and so I don't, I think there would be a conflict if they were both, however, an agency, could submit an RFP and not become the broker and then provide, home modification services.

How will managed care differ from the services that are already in place?

Um I think our webinar really talked through a lot of the ways that we envision that -- it will, um, be different.

Um, we will really, have an -- more emphasis on choice, we'll have better care coordination, and ultimately our goal would be for better health and health outcomes as well as, better quality of life outcomes so those are all things that, we are intending to hopefully achieve through this process.

Okay.

All right.

Just going to do a quick time check here. We've got about 15 more minutes, 16 more minutes and, I have a lot more questions. So I may not get to every question that has been submitted. Again, we will answer these questions and post them on the web site in the near future if I did not get to the question you asked, that's what we intend to do.

And depend, um, I just want to remind you at 4:00, our webinar capacity stops we have a hard stop at 4:00.

Will providers who are not current nursing home transition partners be able to officially be able to participate in nursing home transition? And money follows the person in the new design?

We are open to all positive changes including making sure that we improve how we do nursing home transition. So likely that would occur.

We also have a change in our waiver that is going to enable that change to occur as well. You'll be hearing more about that, that's more on the short term. As we said in the press release that went out today as well in

the webinar we're really committed to making improvements to how our nursing home transition program and the Department of Aging nursing home transition program, operate and, also, through the whole money follows the person availability of funding. We're really looking to make improvements in the processes that we go through. And this would certainly be a consideration.

Um, how will the proposed changes affect service coordination? I think we already answered that. We talked about service coordination in an earlier question.

From the discussion document and from this webinar I still do not understand, what this means to service coordination entities and direct care service providers.

Are you just reworking fiscal management services independent enrollment brokers and home modifications? Just to remind folks that we are working in the short term on fixes to those different processes and availabilities of service.

But in the long term, um, that all will be rolled into managed long term services and supports. So in the long term we will be making changes in how service coordination is provided.

And, um, the fiscal management service would be available through more choice to pay for direct care workers. And we want to make sure

that we make that a very streamlined process.

We have not discussed the move of dual eligibles to managed care is that still your plan to do this as part of the managed lock term services and supports, that's an oversight on our part, we're still planning to move the duly eligible for Medicare and Medicaid into managed long term services and supports, knowing that, the -- the people who are in Medicare, will have the option to opt in, which is, really a Federal rule.

To participate in the program, does an individual have to be currently living in a nursing home?

To participate in the program of nursing home transition, um, which is one of the short term fixes we're going to be working on, yes. They would need to be living in a nursing home. However, in the future, we're really looking to really have a more of focus of diverting people from having to go into nursing homes in the first place to the extent that it's possible.

And, certainly, um, to participate in the program of MLTSS when it gets rolled out and anyone that is, a dual eligible can participate in the program or will be participating in the program in the phased in roll out I described earlier.

Does the State anticipate any draft RFPs or RFIs for the financial management services procurement prior to issuing the RFP?

I'm going to let Kevin answer that. Did you see that?

>>SPEAKER: So at this point I can't answer that question, it's the -- depending upon how much time we build into the time line, we're open to it, but I think at this point we can't commit to it, until we see how long it will take to develop the RFP process. But unlike MLTSS we're working with an existing program, so if we are able to accommodate the changes we know we need to make in those programs to be able to improve

the efficiency, we may have time built into the development process to be able to have an evaluation, stake holder evaluation of what the program changes would be.

So, to answer the question, we will get back to you on that.

DEPUTY SECRETARY BURNETT: The next question is how do you become

part of the nursing home transition focus group.

You'll hear, we'll be sending out an announcement inviting people to participate in the nursing home transition focus group. So, um, more to come on that. I don't have a process in place right now.

Our meeting on this is next week.

I have a concern about adults with serious and persistent mental illness and disability, the plan for procuring them to provide the full range of services which they have now available to them through choices will they still have them available to them through the change and the answer is yes. They will still have a service available to them.

Support is very sporadic for transition to the LIFE program.

Should we send problems we have encountered in Allegheny county to you?

Is there a resource account for the LIFE program?

>>SPEAKER: There are there are regional contacts?

DEPUTY SECRETARY BURNETT: You should, support -- we have regional contacts you should submit those to the regional contacts we'll be communicating with them.

Will using current service coordination personal assistance providers be required as part of MLTSS in Pennsylvania?

I don't know that will be required.

It is, that really, remains to be seen.

Likely not because, we're really trying to make sure that consumers have choice.

And, requiring people to use service provider, personal assistance providers service coordination personal assistance providers kind of working against that consumer choice.

Timely payments being affected by budget impasse, any ideas to mediate the issue?

I don't have any ideas to mediate this issue. The budget impasse is -- hold on a second.

Kevin has a comment.

>>SPEAKER: Thank you Jen, if there are any specific payment issues that you need to have brought to the attention of the office of long term living for a long term services, please bring them to the attention of your contacts or through the provider service line and we'll be sure to address them as quickly as possible. The -- if the payments are payments promised we are not expecting any interruptions for payments through promise through the Medicaid program, during this time period we'll address any specific questions or concerns that you may have about any specific issues in detail if you send them to us, directly.?

Thank you.

DEPUTY SECRETARY BURNETT: Um, does the DHS plan to maintain the contracts through PPL which is our current fiscal management service

vendor?

We -- that contract is going to -- as Kevin described we'll be going through a new procurement process and, again, procurement processes are

you know, open to other vendors coming on board.

Um, so, we don't plan to maintain the contract per se and, the contract does have an ultimate end date and Kevin described in some earlier slides kind of what the time frame is for that procurement process.

Will you need to apply for waiver amendments to broaden the choice of services? We will be applying to CMS for some kind of a waiver amendment and, it is going to -- that what that means, specifically, the type of authority we go to CMS and ask for, is still an unknown at this point.

State discuss the plans for a comprehensive assessment?

Will it be a universal automated assessment?

Um, I think that -- hold on I on a second.

>>SPEAKER: Thank you I'm making the assumption that, that the -- the questioner is asking about the level of care assessments and we are, as part of, our requirements, development for managed long term services and supports we're looking at the assessment process in general, and -- we will obviously look for any opportunity to automate the assessment process as much as we can, we understand the benefits of the automation components to the assessment process, definitely part of evaluation for the requirements. They can't make any guarantees we're looking for every opportunity for assessment, some of you are open to discussions in that regard, thank you.

DEPUTY SECRETARY BURNETT: The next question, how will continuity and integrity financial management services be honored and maintained there's been problematic in the past.?

>>SPEAKER: Thank you so, as part of the, construct of, the -- the agreement, with the vendors for money management services, the questioner make's good point we would want to make sure and, ensure that

the continuity and integrity of financial management services is, maintained and evaluated on a constant basis. It's also the responsibility of the office of long term living to make sure that, that -- continuity and integrity of the financial management services is maintained, we would continue to do that, in the contracting mechanisms for frequent reporting and also, monitoring and evaluation of the

contractor.

So we appreciate the questioner's point. Thank you.

DEPUTY SECRETARY BURNETT: Is it by county or region. The answer is by region.

Are you considering make changes to spend don't for current waivers LIFE for the future MLTSS system?

Um, we are in discussions about that.

Will the committee and any ideas you may have, want to submit, please feel free to do so.

Will the service coordinator still be able to check the work of the home modification provider?

[pause]

We're anticipating that the answer to that is yes but let us look into it a little bit further.

Hold on.

>>SPEAKER: Thank you the point I would add is the service coordinators we're expecting that the service coordination entities the service coordinators will be working with the home modification brokers on a pretty significant basis to make sure that the services are determined and assessed for the participants.

But, I would say at this point that there will be a lot of overlap, and, communication between the broker and the service coordinator for making sure that the services are validated and reviewed for the participants. So we're expecting it will be a and openly role between the two for the service coordinator would be communicating to the broker. The next question, current direct home modification providers will be forced to.

The home modification probing brokers or consumer be given choice to include the current and existing revalidated providers?

The expectation at this point is that's, that -- since we will have more than one broker in a given region, the participants will have a choice of broker in this process and, it will be a discussion between the broker, the participantant the service coordination entity on the providers for the service as well. So -- choices, that the is the object of this process.

And, choice will be assured as the new modification to the program is rolled out.

DEPUTY SECRETARY BURNETT: I missed one question I'm going to go back to.

Where is it? Will the committee set policy or function as just

advisory? The committee, it is the department's responsibility to set policies, but the committee, makes advice towards those policies and that is the way the current medical assistance advisory committee operates. We have about two minutes left.

I'm going to answer one more question, if the question was did not get answered we'll go ahead and, do a QA document that will include those questions, answers to the questions.

What counties are in each of the 3 new 3 managed long term services and support zones.

>>SPEAKER: Thank you Jen, we're anticipating that there will be five, zones.

And the five zones are the health choices zones, so if you're familiar with the health choices program, and you look to the existing health choices map, that will tell you which counties will be in the individuals zones.

What has not been firmly determined is the phased roll out for the zones we know that, we'll have 3 different phases, for the managed long term services and supports roll out, and, which zones will be included in the individual phases is still, a point of discussion. But, at this point the configuration for the roll out will be the five zo zones.

DEPUTY SECRETARY BURNETT: I'm going to take a minute to close the webina

r I want to thank the over 500 people that participated today, I invite you to continue to participate in Webinars going forward, again we're going to be sending out an email, with some of the answers to questions, that we could not answer today. As well as, um, the hand full of questions that we were not able to get to today I anticipate that, through the resource account mailbox we'll be doing a question and answer process, having it frequently asked questions, documents on being issued on occasion, with some kind of frequency given all the question wears getting which is how we want to do this.

I want to thank everybody for participating today.

Remind you that we'll be sending out an email that has an evaluation please give us feedback on how we did today.

And, um, also, please give us ideas for future webinars that you would like to see. And thank you very much and keep in touch.

[webinar concluded]