Community Based Adult Services (CBAS) Program Stakeholder Update

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Update Outline

• Welcome & Opening Remarks
• ADHC to CBAS... Settlement Overview
• What does this mean to you?
  – Participants
  – Providers
  – Other Californians
• Questions
Opening Remarks

- **Serving Vulnerable Californians** - We are centered on serving the Health Care needs of Californians who are most in need… including more than 34,000 ADHC participants

- **We are Achieving Savings** – The elimination of ADHC and implementation of the new CBAS program will generate millions in savings, as set forth in the budget

- **Quality of Life & Reduced Costs** - The new CBAS program continues our focus on keeping vulnerable poor and elderly residents out of institutions, improving the quality of their lives while reducing service costs

- **Communication & Transparency** - We recognize the importance of communication and transparency as we continue our focus on service, accountability, and innovation
The Path to Settlement

January 2011 - Elimination of the ADHC program as an optional Medi-Cal benefit included in the Governor’s Budget proposal

March 2011 - State Legislature voted to eliminate ADHC as a optional Medi-Cal benefit

June 2011 - A lawsuit challenging the elimination of the Adult Day Health Care (ADHC) benefit was filed (Darling v. Douglas)

July 2011 – DHCS Director extended the ADHC date of elimination from September 1\textsuperscript{st} to December 1\textsuperscript{st}

November 2011 – During hearing preparations DHCS and the Plaintiffs reached a settlement agreement… extending ADHC end date to Feb 29

December 1, 2011 - DHCS and plaintiffs jointly filed a signed settlement agreement with the U.S. District Court to resolve the lawsuit
The Path To Settlement

December 13, 2011 - The parties will be seeking preliminary approval of the settlement in a hearing. Objections are due January 10th

January 24, 2012 - Final approval from the court is set to be heard if granted

February 29, 2012 - The ADHC benefit ends

March 1, 2012 – The new program called Community-Based Adult Services (CBAS) begins.

Starting July 1, 2012 – CBAS participants will be enrolled in local Managed Care Plans for CBAS services, if available in their region. Others in regions/counties without a Managed Care Plan will receive CBAS services through Fee-for-Service providers.

For 30 months - Following “Final Approval” the CBAS program will be monitored for compliance with the settlement.
Other Attributes

- **Collaborative Approach** - The formation of Settlement and its Implementation are highly collaborative processes… with DHCS and consumer advocacy organizations working closely to ensure an effective and appropriate end of ADHC and beginning of CBAS benefits.

- **Amendment to “Bridge to Reform” Waiver** - CBAS Services will be provided under an Amendment to the “Bridge to Reform” 1115 Waiver, provided the waiver amendment is approved by the Centers for Medicare and Medicaid Services (CMS).

- **ADHC Elimination Extension** - The deadline for elimination of ADHC as an optional Medi-Cal benefit is extended by three months from December 1 to March 1.
What does this mean to you?
- Participants -

ADHC Participants will be assessed for CBAS Eligibility**

- **Categorical Eligibles** – Identified largely through administrative data… Completed Nov 30th

- **Presumptive Eligibles** - Identified largely through Individualized Plan of Care (IPC) Reviews… analysis currently underway

- **“Diagnostic” Eligibles** - Identified by DHCS IPC Review, Medical Record Review, and Face-to-Face Assessments… Starting Dec 19th. Initial ADHC Center “Screening… scheduled for Dec 15th – 23rd … but CBAS eligibility is determined by DHCS RNs

** See ADHC/CBAS web site for details on qualifications for eligibility
What does this mean to you?  
- Participants -

If you are Eligible for CBAS

- Services will be essentially the same services provided today for ADHC participants

- Your CBAS Services will start March 1st at qualified CBAS Centers (likely to be your existing ADHC Center)… as a Fee-for-Service program until July 1st

- Starting July 1st 2012 – CBAS services will be provided by existing Managed Care Plans. If you choose to not enroll in an Managed Care Plan when one is available… you will be eligible for enhanced case management services via APS Healthcare

- Services will be provided by FFS providers if no Managed Care Plan is in your region/county

- You will be provided with information and assistance in enrolling in CBAS
What does this mean to you?
- Participants -

If you are **NOT** Eligible for CBAS

- Due Process*** options remain as an option if you feel you have been unfairly disqualified
- The ADHC Center will prepare a Discharge Plan for you
- Enhanced Case Management Services*** are provided for you

*** See ADHC/CBAS web site for settlement details regarding due process requirements and options as well as details regarding Enhanced Case Management qualifications and service descriptions
What does this mean to you?
- Providers -

- CBAS Provider Applications - forms are scheduled to be ready towards the end of December

- Costs Not Capped - CBAS Program is not capped at an upper limit for the program cost and is available for those who qualify for it

- CBAS Reimbursement Rate – The rate is equivalent to the all-inclusive adult day health care payment per day of attendance in effect on June 1, 2011 (which is $76.27 minus 10%, except in exempted Medical Service Study Areas which receive $76.27)**

- Managed Care Preparation - For qualified CBAS Providers… Managed Care contracting is just around the corner… Engage sooner than later

** See web site for additional rate details
What does this mean to you?
- Other Californians -

- Fiscally responsible settlement… the state will begin to immediately achieve General Fund savings, which will be approximately $28M in 2011-12, increasing to $92M in 2012-13
- CBAS is budgeted to cost $85M this year
- CBAS will provide necessary medical and social services to people with intensive health care needs
- CBAS helps avoid expensive institutional care while significantly improving the quality of life for participants
We will continue our communication outreach to stakeholders via a broad range of channels (e.g., web posts, mailed notices, meetings)… throughout the process of eliminating ADHC benefits and implementing the new CBAS program.

Monitor the following web sites for more

California Dept. of Health Care Services CBAS / ADHC Web Site
http://www.dhcs.ca.gov/services/medi-cal/Pages/ADHC/ADHC.aspx

California Dept. of Aging CBAS / ADHC Web Site
http://www.aging.ca.gov/programs/adhc/default.asp
Thank You!

Questions?