

Division of Disability and Rehabilitative Services: Home and Community-Based Service (HCBS) SFY 2024 Rate Updates

Indiana Family and Social Services Administration May 31, 2023

Welcome & opening remarks



- Paul Bowling
- Chief Financial Officer, FFSA Office of the Secretary
- Kathleen Leonard
- Director of Reimbursement and Actuarial Services
- Kelly Mitchell

Director, Division of Disability and Rehabilitative Services (DDRS)

Agenda



- Review of where we are today
- Changes since last update
- Examples of detailed rate build-up
- Updated fiscal impact
- Timeline of next steps

Review of where we are today Updates from early March



- Funding for proposed rate increases
 - FSSA's request was fully appropriated
 - Approved annual rate increases (targeting 2%) to be effective each July
- Pathways MCEs will be directed to pay at the fee schedule
- Effective date: targeting July 1, 2023
 - Contingent on CMS approval
 - Submission: targeting July 1, 2023
 - Rate increases will not be paid until CMS approval in late September/early October
 - Providers should start billing new rates on July 1, 2023 and they will be reprocessed after the waivers are approved by CMS

Changes since last update



- Reviewed stakeholder feedback
- Funding request updated, mainly to reflect recent utilization growth
- Updated BLS data released in late April
- CMS feedback

Planning for future rate updates:

Proposed rate matrix process

SI = Strategic Investment **HIP** = HIP Rate Equalization

Medicaid Services*	Last Rate	Year of Rate Review / Rate Rebasing						Rating Approach			
	Review	2022	2023	2024	2025	2026	2027	2028	2029		
Home Health Services	2021		RR	i	i	i	RR	i	i	Rate Review every four years,	
DA/DDRS Waivers	Various		RR	i	i	i	RR	i	i	Inflationary Adjustments Between Reviews	
Dental Services	2015		RR	i	i	j	RR	į	i		
NEMT	1999		RR	i	i	i	RR	i	i		
Physician Services	2015			RR	i	j	i	RR	i		
Inpatient Hospital	2003			RR		RB		RR		Rate Review every four years, Rate Rebasing every two years	
Outpatient Hospital	2003			RR		RB		RR			
Hospice	2021	100% Medicare				Rates set at 100% of Medicare					
DME & Medical Supplies	1994	100% Medicare									
Emergency Transportation	2023	100% Medicare									
Nursing Facility	2021	Quarterly		RR	RR	RR	RR	RB	RB	Annual Rate Review	
ICF/IID	2021	į	RR	į	RR	j	RR	i	RR	Biennial Rate Review	

^{*}Listed Medicaid services are illustrative, not comprehensive.

Rate matrix is located at https://www.in.gov/fssa/files/Rate-Review-Medicaid-Matrix.pdf

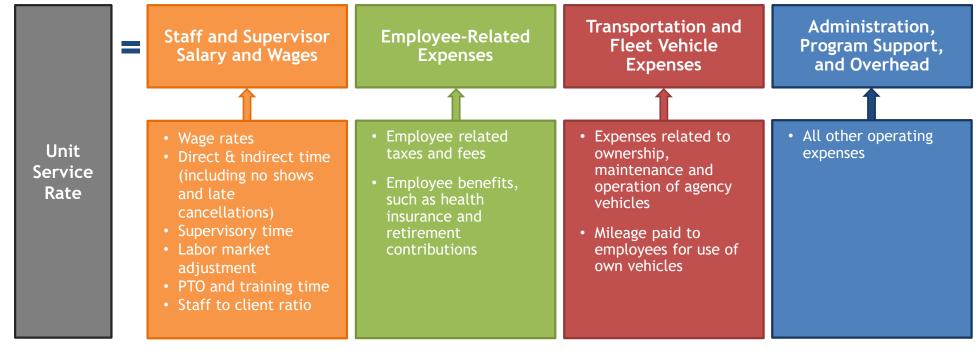


Rate Build-Up Samples

Independent rate model summary

Draft rates reflect the sum of independent rate inputs and components, identified using national/state data sources, provider survey data and other stakeholder feedback





Some rates will be negotiated (i.e., market rates) and not use the independent rate model.

Rate Framework - Behavior Management

Sample exhibit for Behavior Management, Basic (15 minutes) calculated using the IRM; assumptions within the IRM will vary based upon the service requirements

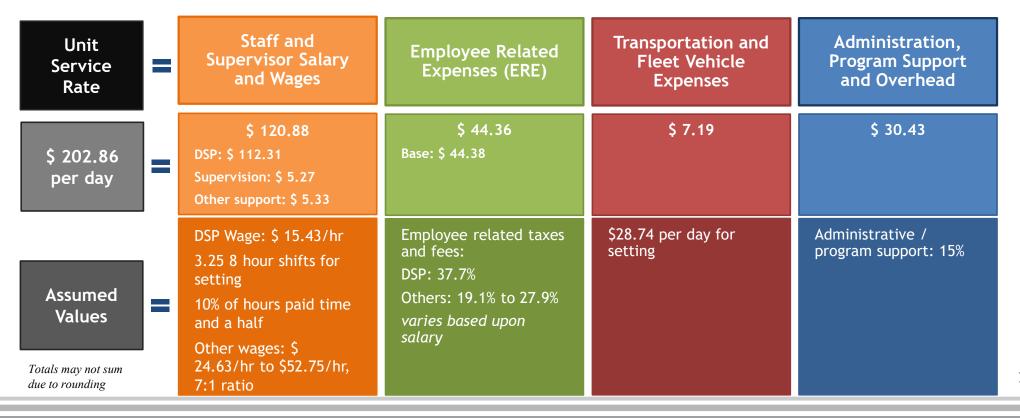


Unit Service Rate	Staff and Supervisor Salary and Wages	Employee Related Expenses (ERE)	Transportation and Fleet Vehicle Expenses	Administration, Program Support and Overhead
\$18.56 per 15 minutes	\$ 11.16 Therapist: \$ 8.93 Supervision: \$ 0.53 Transportation: \$ 1.69	\$ 2.71 Base: \$ 2.30 Transportation: \$ 0.41	\$ 0.77	\$ 3.93
Assumed Values Totals may not sum due to rounding	DSP Wage: \$ 31.60/hr Direct time: 15 min Indirect time: 1.5 min Transportation: 3.1 min Supervisor wage: \$ 31.60/hr Supervisory ratio: 20	Employee related taxes and fees: Therapist: 24.2% Supervisor: 24.2% varies based upon salary	MPH: 30 2022 mileage reimbursement: \$ 0.49	Administrative / program support: 15% On call Expense: \$1.15

Rate Framework - RHS Daily

Sample exhibit for agency provided RHS Daily (4-person setting, Algo Level 3)

Calculated using the IRM; assumptions within the IRM will vary based upon the service requirements



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Rate Framework - Case Management

Sample exhibit for care management (monthly) calculated using the IRM; assumptions within the IRM will vary based upon the service requirements

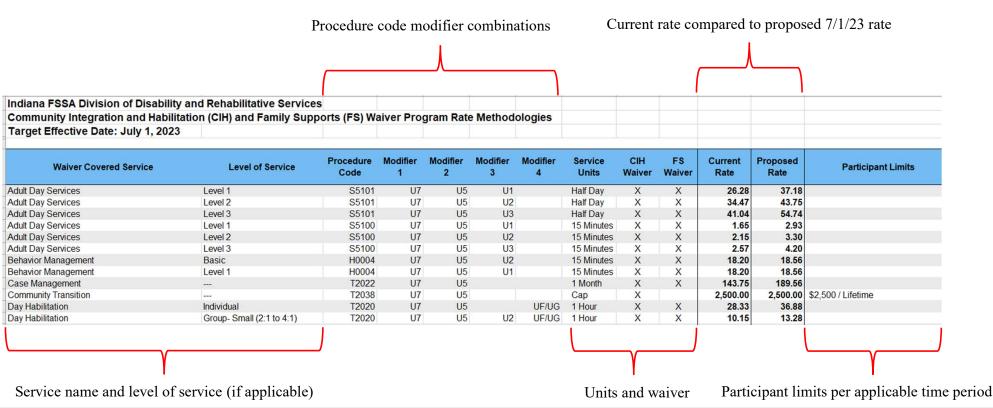


Unit Service — Rate	Staff and Supervisor Salary and Wages	Employee Related Expenses (ERE)	Transportation and Fleet Vehicle Expenses	Administration, Program Support and Overhead
\$ 189.56 per month	\$ 116.47 Care manager: \$ 104.65 Supervision: \$ 11.82	\$ 30.87 Care manager: \$ 27.92 Supervisor: \$ 2.95	\$ 13.78	\$ 28.43
Assumed Values Totals may not sum due to rounding	Care manager wage: \$ 26.57/hr Supervisor wage: \$ 30.00/hr Caseload: 44	Employee related taxes and fees: Care manager: 26.7% Supervisor 24.9% varies based upon salary	MPH: 45 Approximately 28 miles driven 2022 mileage reimbursement: \$ 0.49	Administrative / program support: 15%

Overview of Rate Worksheets



Below is a sample fiscal analysis and rate comparison to support stakeholder review of the public comment materials; all materials will be in Excel.



Variation by Service Level Sample exhibit for Adult Day Services

Service	Reporting Units	Current Unit Rate	Proposed Unit Rate	Percentage Increase
Adult Day Services, Level 1	Per 1/2 Day	\$ 26.28	\$ 37.18	41.5%
Adult Day Services, Level 2	Per 1/2 Day	34.47	43.75	26.9%
Adult Day Services, Level 3	Per 1/2 Day	41.04	54.74	33.4%
Adult Day Services, ¼ Hour, Level 1	15 Minutes	1.65	2.93	77.6%
Adult Day Services, ¼ Hour, Level 2	15 Minutes	2.15	3.30	53.5%
Adult Day Services, ¼ Hour, Level 3	15 Minutes	2.57	4.20	63.4%



Rates for tiers were developed individually with reference to service standards and input from the state and providers, most notably via the provider survey.

Relationships that were adjusted compared with the prior rate study:

- Wage costs for DSPs increased more than for higher wage workers
- Additional staffing reflects a full-time LPN and full-time qualified psychosocial staff at Level 3
- Alignment of staffing ratios between half day and quarter hour rates



Service Plans

Individual Budget Adjustments

• Objective-based allocations and the Family Supports Waiver cap will be adjusted to allow members to continue to receiving the current level of services

Community Habilitation and Integration Waiver

- 30% Increase to Behavior Management Component
- 40% Increase to Days Component
- 40% Increase to Other/Residential-based habilitation Component

Family Supports Waiver

- 35% Overall cap increase
- New annual cap will be \$26,482



Fiscal Impact

Proposed Rate Increases

Rate calculations reflect a 23.3% change for DDRS waiver services

Estimated Percentage Increases

Service Group	Impact %
Adult Day Service	33.5%
Behavior Management	2.0%
Case Management	31.9%
Day Habilitation	27.9%
Home/Other Modifications	42.5%
Residential Habilitation	20.5%
Respite Care	46.4%
Structured Family Care	30.3%
Transportation	134.6%
All Other	30.5%
Total Estimated DDRS Fiscal Impact	23.3%



Estimated Fiscal Impact

The biennium budget added \$73.0 M state dollars for SFY 2024 and \$83.1M for SFY 2025.



Estimated Fiscal Impact for DDRS HCBS (\$ millions)

	State and l	Federal	State Share		
	SFY 2024	SFY 2025	SFY 2024	SFY 2025	
Paid Basis	\$218.0	\$239.2	\$73.0	\$83.1	
Incurred Basis	\$236.0	\$239.9	\$79.5	\$83.3	

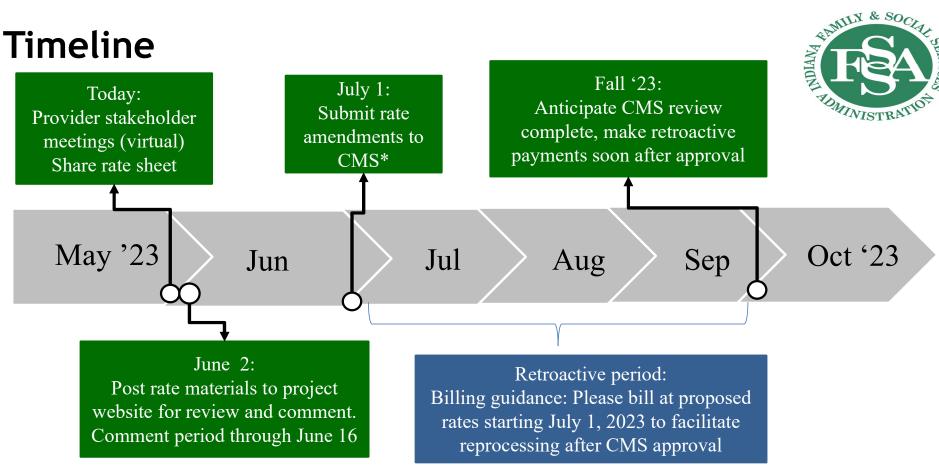


Timeline and Next Steps

Timeline



- Meeting with Stakeholders Today
- Detailed documents posted to website
- Public Comment Period Early June
- Presentation of SPA/Waiver amendments June Budget Committee
- Submission of information to CMS early July
- Rates will be implemented with a rate effective date of 07/01/2023, subject to CMS approval
- Rate adjustments will likely be implemented retroactively
 - Providers should bill at updated rates for service dates starting July 1, 2023 to facilitate mass retroactive adjustment



^{*}Discussions under way with CMS regarding optimum method to implement rate changes. Targeting July 1, 2023 effective date, subject to CMS approvals. Rate-only waiver changes help ensure the most expeditious path.

Accessing Rate Public Notice Materials



- This presentation and summary rate comparisons will be published to the project website and available for a two-week public comment period
 - Website: https://www.in.gov/fssa/ompp/health-coverage/medicaid-hcbs-programs/2019-2020-hcbs-rate-methodology-project/
 - Materials will be posted by June 2, 2023 and comments are due by June 16, 2023
- Public comments should be sent to the FSSA inbox (HCBS.Ratemethodology@fssa.IN.gov)

Limitations



This presentation is intended to facilitate external stakeholder discussions related to home and community-based payment rate development and is not considered complete without oral comment. The information contained in this presentation has been prepared solely for the business use of FSSA, related Divisions, and their advisors. To the extent that the information contained in this correspondence is provided to any approved third parties, the correspondence should be distributed in its entirety. Any user of the data must possess a certain level of expertise in health care modeling that will allow appropriate use of the data presented.

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