

Deliverable for:
General NWD/SEP Structure
2.1 Design system (initial overview)

New Hampshire
Balancing Incentive Program

Workplan Submission
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Description of the system

NH DHHS will integrate current networks to improve electronic collection and sharing of basic applicant data to improve eligibility determination processes through a No Wrong Door approach and coordinate the referral to and assessment of the need for LTC services, along with access to appropriate services through a Single Entry Process (rather than a Single Entry Point). A diagram of NH's working outline for the NWD system is included.

Current System's Strengths and Challenges

1) Information and referral: In NH, the ADRCs, known as the ServiceLink Resource Center (SLRC) network, serve as a statewide system that enables consumers to access LTSS. The population served by ServiceLink includes adults age 60 and older, younger adults with a chronic illness or disability who are between the ages of 18 and 60, and their families/caregivers. Many individuals who have used ServiceLink live alone or have cognitive and/or accessibility challenges.

The ServiceLink network consists of thirteen community based "one-stop centers," which are geographically dispersed throughout the State, that provide information regarding the availability of LTSS (Medicaid or Non-Medicaid), how to apply for such services, referral for services and supports otherwise available in the community, and determinations of financial and functional eligibility for such services and supports, or assistance with assessment processes for financial and functional eligibility.

Over time, the SLRC network has become a well known, trusted and readily accessible point of entry for long-term care services. In SFY 2011, the SLRC network reported over 92,682 unique contacts statewide. These included phone calls, walk-ins, faxes, office and community appointments, and e-mails. SLRCs provide information and assistance about LTSS, decision support and assistance in exploring and evaluating future care options, including LTC options. ServiceLink staff members discuss with an individual the pros and cons of specific choices now and for the future, and provide guidance and support on developing an action plan based on individual preferences, needs, and goals.

By providing a single entry point for people to obtain information about, and supported referrals to, available services, the SLRC network has helped to reduce the stress, confusion and additional time that consumers may otherwise experience when trying to obtain help. By providing information about and referrals to home and community-based services, the SLRC network has also contributed significantly toward decreasing the utilization of more costly nursing home care.

In order to receive Medicaid-funded services, an individual must be determined to be financially and clinically eligible as described in RSA 151–E:3. The NH Department of Health and Human Services (DHHS) Division of Family Services (DFA) makes the financial eligibility determination and the Bureau of Elderly and Adult Services (BEAS) makes the clinical eligibility determination for individuals applying for nursing facility or CFI services. A single application, the Form 800 DFA Application for Assistance, is used to initiate eligibility for all Medicaid services including long term care. In this process, the SLRC often serves as a SEP agency to facilitate and guide the individual through the eligibility determination steps. Many individuals who are eligible for BBH or BDS long term services and supports receive case assistance with the Form 800 and Medicaid application process from their designated case managers within the community-based provider agency.

Individuals may also apply for Medicaid-funded LTC services at any of the Department’s district offices, its Central Office in Concord, and online.

- 2) **No Wrong Door – Single Entry Point (NWD/SEP):** New Hampshire’s current eligibility and assessment system is regionally based, with several networks, each targeted towards different populations.

The Bureau of Elderly and Adult Services’ (BEAS) has fully functioning and award winning statewide ADRCs known as the ServiceLink Resource Center network (SLRC). SLRCs are a one-stop location for consumers and families to access all long term services and supports. Within this fully functioning ADRC model, NH will work to strengthen the NWD/SEP system so that a single eligibility coordinator, “case management system,” or otherwise coordinated process guides the individual through the entire assessment and eligibility determination process.

New Hampshire’s Behavioral Health and Developmental Services systems have regional infrastructures, where several agencies, geographically dispersed throughout the State, are designated by the State as lead agencies to coordinate all regional activities on behalf of individuals with disabilities. As systemic entry-points, the agencies are responsible for all functional intake and eligibility determinations for behavioral health, developmental and acquired brain disorder services and coordinate service planning for each eligible individual. These agencies have the potential to operate directly as a NWD level 1 screening site, or provide space to the contracted NWD/SEP provider, increasing access to “service sheds” within a given geographic area.

NWD/SEP Person Flow:

- The current eligibility determination process for applicants seeking multiple LTSS benefits can be challenging for clients, particularly for those in rural settings. If an individual is applying for multiple benefits from various funding sources or programs, the process can be even more difficult. NH’s planned enhancement of the NWD/SEP System will remove these barriers by unifying the application process for LTC, NHCP, Medicaid, and Supplemental Nutrition Assistance Program (SNAP) benefits. It will also provide extra online web-based

tools to complete preliminary access to medical eligibility screening. This will complement the financial eligibility screening currently available for SNAP, and the screening procedures planned for Medicaid and the NHCP.

Currently, the SLRC network performs a preliminary screening and completes the Level 1 – DFA Form 800 Application for Assistance for individuals applying for LTC services. Individuals also apply for services at regional Area Agencies or CMHCs. Individuals seeking services through a ServiceLink site are referred to the local Area Agency or CMHC serving their area. With the BIP grant, the NH DHHS is reviewing the possibility of expanding the SLRC – NWD/SEP role so that individuals begin utilizing the SLRC network for the preliminary screening and Level 1 assessment for all LTSS.

Individuals who elect to apply for benefits are able to complete the Medicaid financial application online, and can do this independently or with assistance from family, ServiceLink, Area Agencies, Community Mental Health Centers, or with other community partners. While an individual is currently able to apply for Medicaid State Plan and BEAS services using the on-line consolidated Medicaid application through NH EASY (New Hampshire Electronic Application System), BDS and BBH service access are handled separately. Coordination of these processes through this BIP project will provide greater accessibility to benefits and a simplified process for clients. The future changes will also reduce bottlenecks associated with the coordination complexities among the various branches of DHHS. This will improve timeliness and the probability of individuals accessing all benefits for which they are eligible. The impact will be both significant and sustainable long term, and will address a critical barrier to access in rural communities.

- 1) **OASIS/MDS Integration:** As part of the medical determination process for LTC, DCBCS is exploring the feasibility and development of interfaces to use data from the Minimum Data Set (MDS) and Outcome and Assessment Information Set (OASIS) applications in the medical determination process for LTC services for Medicaid. The MDS is part of the federally mandated process for clinical assessment of all residents in Medicare or Medicaid certified nursing homes. This process provides a comprehensive assessment of each resident’s functional capabilities and helps nursing home staff identify health problems. The OASIS is a key component of Medicare’s partnership with the home care industry to foster and monitor improved home health care outcomes and is proposed to be an integral part of the revised Conditions of Participation for Medicare-certified home health agencies.
- 2) **Long Term Care (LTC) Client Application and Screening:** Includes expansion of the on-line application system to allow clients to screen for LTC program eligibility, which includes nursing facility and HCBC services.
- 3) **Tools to Solicit Provider Information for LTC Medical Determination:** Automating the LTC Medical Determination assessment has been identified as a future project. This would enable trained community partners to complete and submit assessments through a secure, web-enabled tool.

The NWD/SEP solution NH is considering includes improved access by the Community Mental Health Centers, Area Agencies and SLRC services to NH EASY, the DHHS web-based tool for Medicaid screening and on-line application submission. This tool can be enhanced to include long-term care services. Area Agencies and the counselors located at SLRC sites can then use this efficient, web-based screening and application tool during their face-to-face meetings with clients in the field or during telephone discussions. New software enhancements to NH EASY would include preliminary screening to see if program applicants meet state and federal requirements for income, assets, medical need and other requirements. This would improve the productivity of Area Agencies and SLRCs in all settings including office interviews, phone assistance and support provided by staff at remote locations. Providing a combined online application for LTSS along with the NHCP, Medicaid and SNAP will enable clients and their support networks to apply for multiple benefits from any location in the State that has Internet access.

In addition, an online financial and functional screening is proposed that would provide information on service options a person would likely be eligible to receive for themselves, family members, caregivers and community partners. This would serve as an outreach tool to enable applicants and stakeholders to learn about beneficial assistance programs and their various eligibility requirements. They could do this in the privacy and convenience of their own homes and other natural community settings used by potential program participants.

Although older adults and persons with disabilities are not traditionally viewed as power users of Web applications, the number of older adults and persons using the Internet for social interaction and business transactions is increasing dramatically. Based on United States Census Bureau reporting, the percentage of adults nationwide who are over 65 and using the Internet increased from 15% in 2000 to 42% in 2009 nationally. NH residents are particularly well equipped to take advantage of new Internet benefit outreach, screening and application features due to NH's first in the nation ranking for Internet access at home, with 75% of households having Internet access. This access extends to NH's rural communities, which have a slightly higher home Internet access percentage (77%) than the State average. Based on these statistics, NH has the most potential in the nation for adoption and usage of an Internet-based application and pre-screening option for clients. Those assisting the elderly are even more apt to use the Internet (parents of disabled children or children of the elderly, etc). In addition to at-home access, almost all of NH community support settings have Internet access and all Area Agency and SLRC facilities have Internet access including public access to a computer at the SLRC Medicare Learning Centers.

The process for determining an individual's waiver program eligibility varies between the DHHS Bureaus. Within BDS, the client's medical eligibility determination is made by trained providers at the community based area agency through assessment of the applicant's physical, intellectual, cognitive and behavioral status and an age-appropriate functional assessment.

For BEAS, the client's eligibility determination is made after trained community based providers have completed the standardized Medical Eligibility Determination (MED)

assessment. A BEAS LTC nurse then reviews the medical information, reviews the MED submitted, follows up with any questions, and determines the client's eligibility.

Eligibility for LTSS within New Hampshire's Community Mental Health System is determined by providers at each contracted community mental health centers, utilizing an agency-developed functional assessment tool that includes core data elements defined in state administrative rules.

New Hampshire prides itself on its advanced SLRC network, and there are several pathways to gain knowledge regarding the information and services available through this network. All individuals, potential eligible clients, and their families can access information and services through:

- 1) Calling the SLRC network toll-free number (1-866-634-9412). By calling ServiceLink's national toll-free number, an individual's call will be automatically routed to the ServiceLink site nearest them and answered by a team member prepared to help with questions about a variety of needs or interests. The individual might be looking for respite care for a loved one, an opportunity to learn more about financial planning, or a connection to a volunteer experience. ServiceLink's team will talk with the individual about their questions and then provide accurate information about available resources and options in their area.
- 2) The same information and resources are provided to those who visit their local ServiceLink Resource Center.
- 3) Referral from a medical office or hospital to a SLRC.

Other DHHS community pathways include:

- 1) Calling the NH DHHS toll-free number (1-800-351-1888) or visiting a DHHS District Office. Trained services and support workers will help the client apply for services and/or direct them to the appropriate place to obtain the information they are looking for.
- 2) Visiting the following websites:
 - State of New Hampshire (www.nh.gov)
 - NH DHHS (www.dhhs.nh.gov)
 - NH DHHS on-line Medicaid application (<https://nheasy.nh.gov>)
 - ServiceLink (www.servicelink.org)All of these websites contain links to forms, tools, eligibility information, supports, and educational opportunities. The SLRC website also contains a publicly accessible and searchable database of community resources.
- 3) Financial Eligibility Determination: In addition, an individual's financial eligibility is determined at a DHHS district office or at the state administrative office, or may be determined through a SLRC.
- 4) A DHHS adult protection services worker, who will direct the client to the appropriate place to obtain services or the worker can also arrange for services.

- 5) Calling 2-1-1, the NH Community Resource Directory and call center, which directs individuals to ServiceLink.

NWD/SEP Data Flow:

- The current core standardized assessment instruments for medical eligibility are not automated and are processed manually. Automation of these assessments is a future goal and will help to significantly streamline the process.

Currently within DHHS, data is tracked through multiple systems and includes many manual processes. Medicaid applications are accepted through a variety of avenues and means, including paper, electronic and web-based versions. New Heights, the Medicaid eligibility system, manages the Medicaid financial eligibility process for all programs as well as the medical eligibility process for BEAS LTC services. The medical eligibility determination process for BDS and BBH services are tracked in separate systems. Once the client has been determined medically eligible for those services, the client's eligibility information is updated in New Heights to include those programs. The eligibility information from New Heights is fed to the Medicaid Management Information System (MMIS) daily to govern claims payment.

NOTE: A draft of New Hampshire's model No Wrong Door system is included on the following page.