

# A Review of Extended Home- and Community-Based Services (HCBS) in Section 1115 Waiver Programs SPOTLIGHT ON THE WASHINGTON MEDICARE TRANSFORMATION PROJECT (MTP): MEDICAID ALTERNATIVE CARE (MAC) AND TAILORED SUPPORT FOR OLDER ADULTS (TSOA)

This is a spotlight on Washington State's Medicare Transformation Project (MTP), an 1115 waiver program that provides limited supportive services to unpaid caregivers through its Medicaid Alternative Care (MAC) and Tailored Supports for Older Adults (TSOA) programs.

## About Washington State's Medicaid Alternative Care (MAC) and Tailored Supports for Older Adults (TSOA) Programs

Washington State acknowledges that a significant proportion of its aging population — one in five<sup>1</sup> — will need some form of assistance with Activities of Daily Living (ADLs), with most of their care to be provided by unpaid family caregivers. The aim of MAC and TSOA, created in 2017 and based upon an earlier successful caregiver program, is to provide limited supportive services to unpaid caregivers as an alternative to traditional LTSS services. Both programs were initially designed for caregiver-recipient dyads,

<sup>&</sup>lt;sup>1</sup> Medicaid Transformation Project Evaluation Interim Report. December 2020. Accessed at: <u>https://www.medicaid.gov/medicaid/section-1115-demonstrations/downloads/wa-medicaid-transf-cms-approved-interim-evaluation-report.pdf</u>.

although TSOA also opened to individual seniors (who consistently make up two-thirds of the program population).

An important caveat on TSOA is that its benefits are intended for the caregiver rather than the care recipient. Yet, as most in TSOA are without any caregiver, the reality of the program appears to be at odds with how it was initially conceived.

## **Eligibility**

Both MAC and TSOA have age, financial, and functional eligibility requirements. Care recipients must be at least 55 years old and require a Nursing Facility Level of Care. Additionally, while TSOA participants do not require a caregiver, all caregivers must be informal and at least 18 years old (though they are not required to be a family member). Unlike MAC, which serves those already eligible for Medicaid, TSOA care recipients may not be eligible for Medicaid (except under Medically Needy or other select categories).

TSOA participants are still expected to fall under specified resource and income limits as the program is intended for those at risk of impoverishment due to their LTSS needs. Currently, the resource standard for a single applicant is \$53,100 while married applicants may also have the state spousal resource standard.<sup>2</sup> The income threshold, calculated with adjustments for disregarded income, must be equal to or less than 300% of the federal benefit rate.<sup>3</sup>

A notable element of Washington's programs is a presumptive eligibility process. For TSOA, individuals or caregiver dyads only need to complete high-level prescreening questions about functionality and finances before they can begin receiving benefits. Presumptive eligibility lasts for about 60 days, although it will continue until the application is processed and receives a final determination if the applicant's full financial

<sup>&</sup>lt;sup>2</sup> Health care services and supports. Washington State Health Care Authority. Accessed at: <u>https://www.hca.wa.gov/health-care-services-supports/program-administration/wac-182-513-1640-tailored-supports-older</u>.

<sup>&</sup>lt;sup>3</sup> Health care services and supports. Washington State Health Care Authority. Accessed at: <u>https://www.hca.wa.gov/health-care-services-supports/program-administration/wac-182-513-1640-tailored-supports-older</u>.

information has been filed. Presumptive eligibility screening can even take place over the phone. In general, program eligibility is reassessed every six months.<sup>4</sup> There are no penalties for transfer of assets like in traditional Medicaid. The state estimated that there are likely 250,000 seniors who may be functionally eligible for these programs but are not served by the state (not accounting for financial eligibility).

### **Benefits**

The benefits for MAC and TSOA are nearly identical. However, since TSOA includes individuals without a caregiver, that program also offers personal care-type services in lieu of caregiver respite. Benefits are somewhat a la carte, given the program's focus on choice, but they include: PERS; caregiver training, education, consultation; housework; home-delivered meals; specialized supplies or DME; and potentially some environmental modifications.

Program participants work with specialist staff to design an individual care plan<sup>5</sup> that assesses the care recipient and caregiver's needs, preferences, and choice of services. During PE, an individual can receive Step 1 benefits after designing their care plan, which are limited to a one- time \$250. After completing the GetCare screening (or TCare for caregivers), individuals are eligible for \$500 in services annually (minus any funds spent in Step 1).<sup>6</sup> If the screening indicates they need a full GetCare assessment, the individual will receive Step 3 services — \$736 a month for individuals, or an average of \$736 a month for dyads (not to exceed \$4,416 in a six- month period).

There is no cost-sharing responsibility and no threat of estate recovery in either MAC or TSOA. While the interim evaluation submitted to CMS (as discussed below) describes high satisfaction with the two programs, the state call informed us that caregivers consistently wish that the program offered more benefits.

<sup>5</sup> Questions and Answers on the MAC and TSOA Programs. Accessed at: <u>https://www.washingtonlawhelp.org/files/C9D2EA3F-0350-D9AF-ACAE-</u> <u>BF37E9BC9FFA/attachments/D3890080-0C98-4D8D-8E53-D5D13B85FD2F/5171en\_questions-and-</u> answers-on-tsoa-and-mac-programs.pdf.

<sup>&</sup>lt;sup>4</sup> TSOA Presumptive Eligibility. Accessed at: <u>https://www.hca.wa.gov/health-care-services-and-supports/program-administration/tailored-supports-older-adults-tsoa</u>.

<sup>&</sup>lt;sup>6</sup> GetCare Screening. Accessed at: <u>https://apps.leg.wa.gov/wac/default.aspx?cite=388-106-1933&pdf=true</u>.



### **Delivery System**

MAC and TSOA are delivered by Area Agencies on Aging (AAAs). Individuals and dyads can approach local Home and Community Services offices or AAA agency offices to enroll in TSOA. A case manager authorizes plan services every month through state-contracted providers.

#### **Evaluation**

Washington State submitted its interim evaluation report for its 1115 waiver in December 2020, covering a period between 2017 and 2019. The primary takeaways include:

- Enrollment for MAC and TSOA fell short of expectations. While the state aimed for 7,500 enrolled combined by year three, by the end of 2019 only 3,364 people were enrolled in the programs. The state believes that few individuals eligible for Medicaid felt incentivized to enroll in MAC when a broader menu of LTSS were available at no cost through in-home services. Additionally, far more individuals enrolled in TSOA than had been predicted. In conversations with DSHS, they explained that they believe that there was a more dire need for the program than expected given that those in TSOA aren't eligible for alternative programs and face waiting lists. With further outreach, the state hopes to bring the individual/dyad numbers to parity, but they admit that they underestimated the need among individual seniors.
- Both programs had extremely high satisfaction rates among individuals and caregivers, and for the most part care recipients felt the program would rescue them from moving to residential or nursing facility care. However, despite satisfaction with the program, only 30% of MAC caregivers thought the program would keep the individual they cared for out of a nursing home.
- Using in-home care recipients as a proxy, the evaluation found that ED visits, hospitalizations, and readmissions tended to decrease six months in. Only small percentages of program participants moved on to use more intensive LTSS or nursing home care within six months.
- More than 50% of TSOA participants enrolled under presumptive eligibility, and TSOA participants tended to be enrolled in services for about 14 months.

• About one-third of TSOA went on to enroll in Medicaid due to spenddown after six months, though a smaller percentage did with caregivers compared to those alone.<sup>7</sup>

<sup>&</sup>lt;sup>7</sup> Medicaid Transformation Project Evaluation Interim Report. December 2020. Accessed at: <u>https://www.medicaid.gov/medicaid/section-1115-demonstrations/downloads/wa-medicaid-transf-cms-approved-interim-evaluation-report.pdf</u>.



#### **Long-Term Quality Alliance**

Long-Term Quality Alliance (LTQA) is a 501(c)3 membership organization aimed at improving outcomes and quality of life for people who need long-term services and supports (LTSS), and

their families. LTQA advances person- and family-centered, integrated LTSS through research, education, and advocacy. For more information, visit **Itqa.org.** 

#### **Acknowledgements**

This report was prepared for the State of Minnesota Department of Human Services (DHS) and is shared with the permission of the State of Minnesota.

Thank you to Drew Gerber for leading the development of this brief.