

NJ FamilyCare Medical Assistance Advisory Council Meeting

October 21, 2021

Agenda

- **Welcome and Call to Order** – Dr. Deborah Spitalnik
- **Approval of Minutes** – MAAC Members
- **NJ Program of All-Inclusive Care for the Elderly (PACE)**
 - Presentation from Michael DiBiase, President, NJ PACE Association
- **NJ FamilyCare Updates** – Jennifer Jacobs, Greg Woods
 - Enrollment and the Maintenance of Effort during the federal Public Health Emergency
 - Redeterminations and Eligibility processing
- **Policy Implementation** – Greg Woods
 - 1115 Comprehensive Medicaid Waiver Demonstration Renewal
 - American Rescue Plan Enhanced Federal Match for Home and Community Based Services
 - Provider Relief Funds
- **Social Drivers of Health** – Jennifer Jacobs
 - Lifeline Free Smartphone & Emergency Broadband Benefit
- **Planning for the Next Meeting** – Dr. Deborah Spitalnik

NJ PACE Presentation



PACE IN NEW JERSEY

Michael DiBiase
President
NJ PACE Association
Executive Director
AtlantiCare LIFE Connection

What is PACE?

- PACE: Program of All-Inclusive Care for the Elderly
- LIFE: in NJ Living Independently For Elders
- Integrated system of managed care
 - Insurer and provider of care
 - Network of community specialists
 - Not restricted by traditional insurance limitations
 - Interdisciplinary team of professionals

What is PACE?

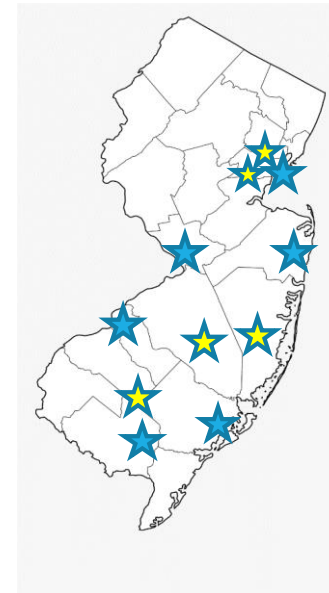
- 130 PACE organizations nationally with 275 centers in total
- 33+ states serving 51,000 PACE Enrollees
- 6 operational programs in New Jersey serving 1200 participants and growing
- 3 PACE organizations slated for development in Union, Essex and Ocean
- RFA Issued April 19, 2021 for uncovered areas of Burlington County

NJ PACE Geography

COUNTIES COVERED BY PACE

- Atlantic – AtlantiCare LIFE Connection
- parts of Burlington – Trinity LIFE & LIFE St. Francis
- Camden – Trinity LIFE
- Cape May – AtlantiCare LIFE Connection
- Cumberland – Inspira LIFE
- Essex – Eastern PACE
- Hudson – Lutheran LIFE
- Ocean – Beacon of LIFE
- Mercer – LIFE St. Francis
- Monmouth – Beacon of LIFE
- Gloucester – Inspira LIFE
- Salem – Inspira LIFE
- Union – Lutheran LIFE

CURRENT & FUTURE PACE CENTERS



- ★ Current Center
- ★ Future Center

PACE Philosophy & Approach

- Care coordination across all settings 24/7/365
- Keep participants living independently & safely within the community
- Prevent or delay facility placement
- Provide the right care, in the right setting, at the right time, by the right provider
- Reduce unnecessary ED and hospitalizations
- Address participant's goals of Care
- Provide care through end of life

PACE Team & Services



PACE Services Highlights

Medication Management & Administration

- Variety of settings (Center, community, facility)
- Medication reconciliation and error tracking
- Specialized Personnel
 - Nursing
 - Pharmacy
 - Behavioral Health
 - Physicians



Transportation

- Provide transport to outside appointments, PACE center, community services
- Driver & Escort/Aide
- Door through door transport
- GPS tracking



PACE Services Highlights

Medicare & Medicaid standards plus!

- Interdisciplinary team authorizes services
- Disease process specific



Behavioral health integration with medical care

- Psychiatric clinics on site
- Employed LCSWs for therapy
- Methadone management



PACE Services

- **Adult Day Care Center**

- Recreational Programs including outings
- 2 Meals a day
- Personal care (Showers, Laundry Etc.)

- **Primary Care Clinic**

- Physician, NPs and Nurses on-site
- On-site Labs and X-rays
- On-site specialist (Dental, Vision, podiatry Etc.)
- Coordination of specialist visits
- Medication management
- Wound Care
- End-of-life care

- **Transportation**

- To and from Center, outside appointments and outings

- **Home Care**

- Home health care/personal care, Food prep, housekeeping and laundry services

- **Therapy**

- On-site gym with full-time PT/OT/ST
- In-Home Therapy
- DMEs
- Home modifications

- **On-Call 24/7**

- **Nutritional Services**

- Full-time dietician
- Specialty Diets
- Weight and diet management
- Home Delivered Meals

- **Social Services**

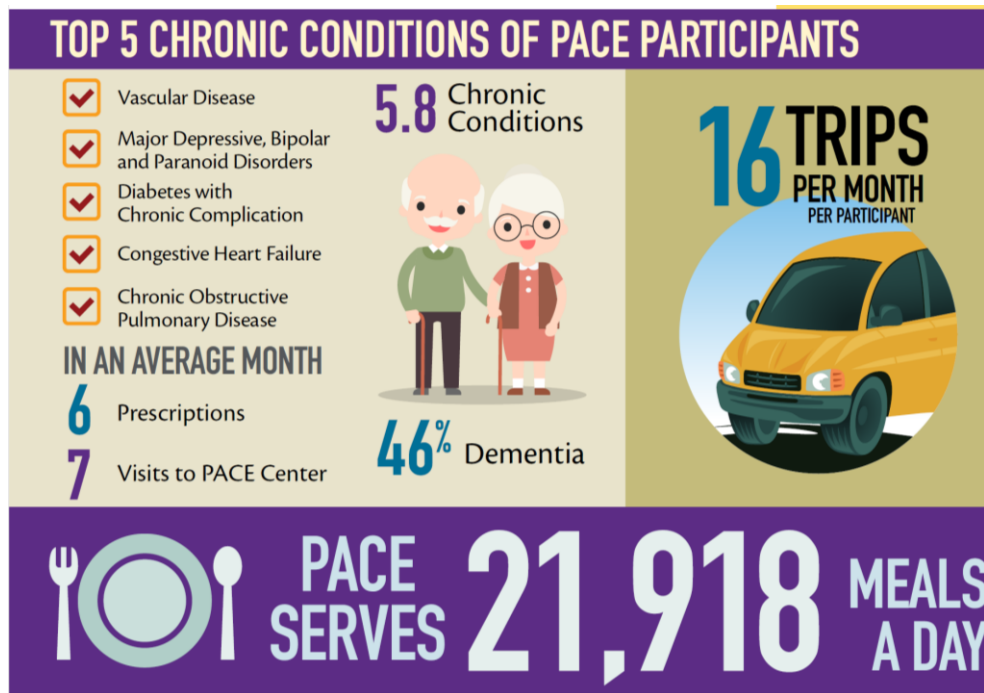
- 2 F/T Social Workers
- Psychology Services
- Case Management
- Housing Assistance

- **Other Services That Are Covered:**

- Medicaid Application Assistance
- Nursing Home Placement
- Respite Care
- Dental Care, Including Dentures
- Vision Care, Including Glasses
- Audiology, Including Hearing Aides
- Podiatry Care
- Other medical Specialty Services
- Medications

National PACE Data Mirrors NJ PACE

Source: National PACE Association https://www.npaonline.org/sites/default/files/PDFs/5033_pace_infographic_update_july2021.pdf



PACE Enrollment

- Referral – self, physician, social service agency, MCO, AAA, etc.
- Level of Care Assessment – to determine if person meets nursing home level of care
- Federal criteria must be met
- Medicare and/or Medicaid eligibility confirmed or applied for, as needed
- Enrollment process with NJ Division of Aging Services must be concluded by the 25th of the month for enrollment to begin the 1st day of the next month

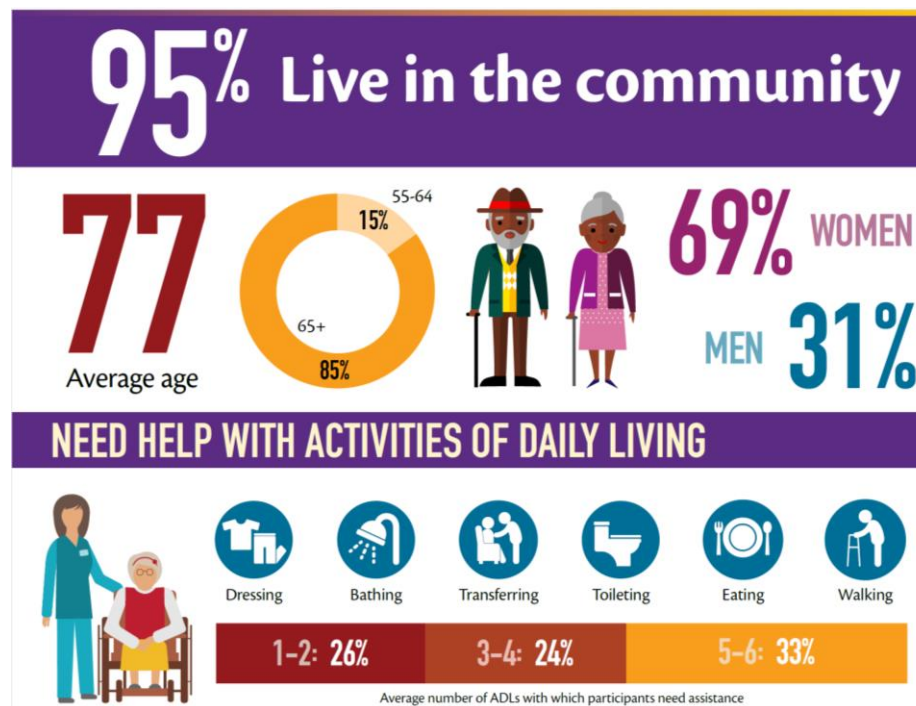
PACE Enrollment

Under federal regulations, to qualify for PACE, a person must

be 55 years of age or older,
live in a PACE service area, and
be certified to need nursing home-level care.

National PACE Data Mirrors NJ PACE

https://www.npaonline.org/sites/default/files/PDFs/5033_pace_infographic_update_july2021.pdf



PACE Quality Outcomes

https://www.npaonline.org/sites/default/files/PDFs/5033_pace_infographic_update_july2021.pdf



- Reduced Hospital Admissions: A 24 percent lower hospitalization rate than dually-eligible beneficiaries who receive Medicaid nursing home services.^{iv}
- Decreased Rehospitalizations: 16 percent less than the national rehospitalization rate of 22.9 percent for dually-eligible beneficiaries age 65 and over.^v
- Reduced ER Visits: Less than one emergency room visit per member per year.^{vi,vii}

PACE Quality Outcomes

https://www.npaonline.org/sites/default/files/PDFs/5033_pace_infographic_update_july2021.pdf

ONLY
5%

of nursing home eligible
PACE participants currently
reside in a nursing homeⁱⁱⁱ

- Fewer Nursing Home Admissions:
Despite being at nursing home level of care, PACE participants have a low risk of being admitted to a nursing home.^{viii}
- PACE participants receive better preventive care, specifically with respect to hearing and vision screenings, flu shots and pneumococcal vaccines.^{ix}



PACE
HOSPITAL
READMISSION
RATE
19.1%

30-Day All Cause Hospital Readmission Rates.
Comparable rate for all age 65 dual eligible
enrollees is 22.9% and Medicare fee-for-service
beneficiaries is 19.6%.

COVID-19 Response by PACE

On March 26, 2020, the Division of Aging Services ordered PACE Centers to not have participants gather. In response, actions taken by PACE organizations included:

- Reorienting care planning and close monitoring of enrolled participants by using telehealth technology in lieu of center-based face to face interactions.
- Shifting to PACE at Home for all participants while maintaining PACE clinic services for those who needed care that could not be provided safely and appropriately at home.
- Reassigning of vans that are normally used to transport participants to and from their homes to the PACE Center to instead deliver home-based care and services, nutrition services, durable medical equipment, medications, recreation/leisure resources and more.

COVID-19 Response by PACE

- Inventing of new programming that combats social isolation and addresses mental health needs
- Maintaining low COVID-19 case rates and deaths and low hospital/ED utilization
- Coordinating with NJDOH to do antigen testing
- Collaborating with hospitals, FQHCs and others to provide COVID-19 vaccine.

Looking Forward

*Though specifics differed, what our survey data are now revealing is that **the common denominator is consistently high-quality care steeped in humanity, focusing on the whole person, and aimed at preserving dignity.** Remarkably, around half of PACE programs repurposed their centers for all sorts of things—from organizing custom grocery bags and activity kits for participants now confined to their homes to offering overnight stays for persons with COVID-19.*

<https://altarum.org/news/pace-did-geriatric-gem-sparkle-older-adults-during-pandemic>

Looking Forward

Providing services successfully now and in the future will require thinking creatively about how to field innovative, flexible, highly coordinated care as circumstances change, emphasizing the use of existing resources and assets. Such systems must be cost-effective, integrated with medical and social supports, and readily accessible to large numbers of older adults living in the community. In short, the U.S. is being challenged to create on-ramps to comprehensive, safe community care that is scaled to handle the U.S. “age wave” —which has now arrived. PACE can be an important part of the answer.

https://altarum.org/sites/default/files/uploaded-publication-files/Altarum_Program-to-Improve-Eldercare_Rapid-PACE-Responses_report_final.pdf

Thank you!



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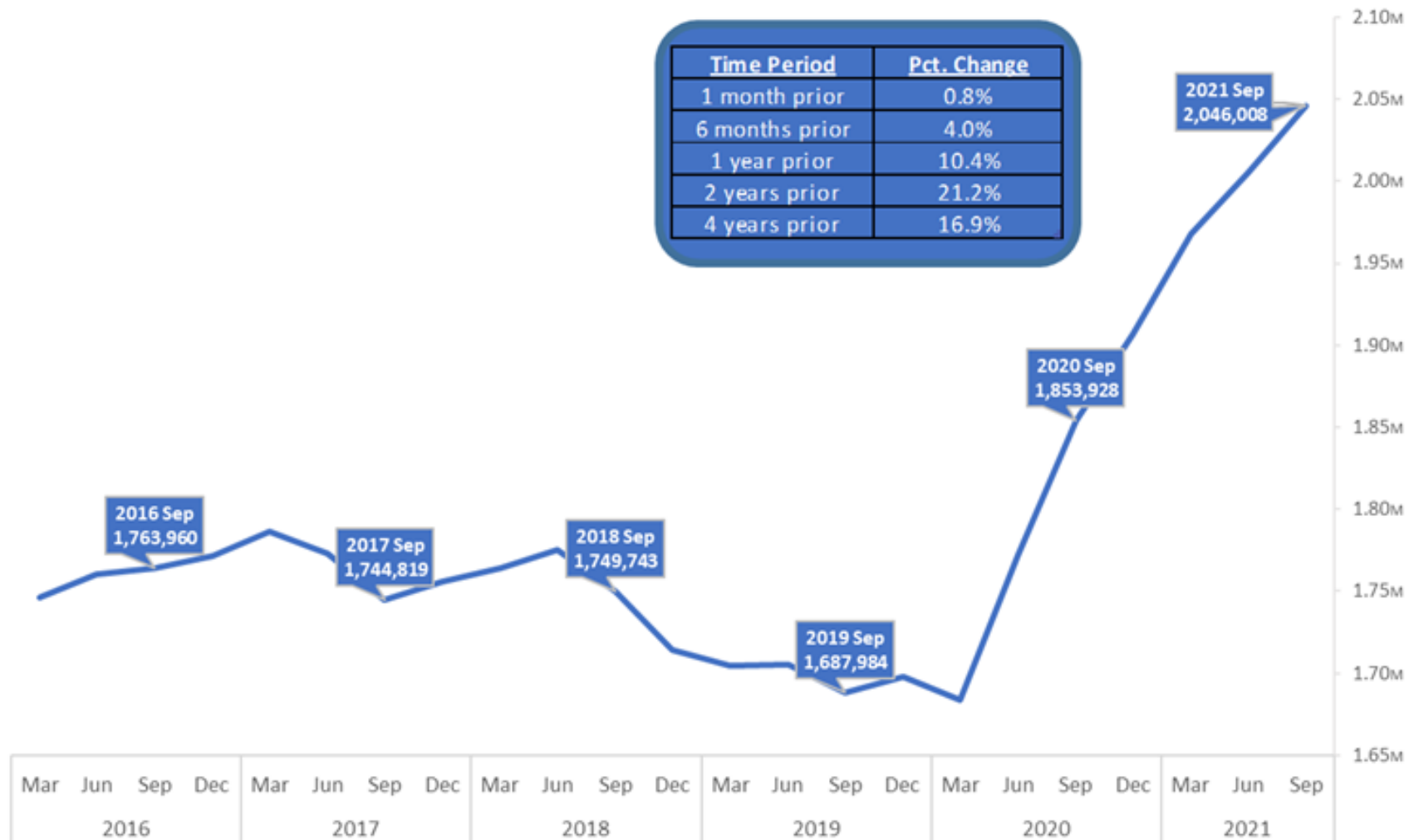


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NJ FamilyCare Enrollment

NJ FamilyCare Enrollment Update

Time Period	Pct. Change
1 month prior	0.8%
6 months prior	4.0%
1 year prior	10.4%
2 years prior	21.2%
4 years prior	16.9%



Eligibility Redetermination Update

- All Eligibility Determining Agencies (Conduent or CWA) are renewing eligibility with no terminations during the Public Health Emergency.
- Special indicators are being added to any case that is found to be ineligible (i.e. did not respond, or Over Income).
- No terminations during the PHE, except voluntary disenrollment, etc.
- **New from CMS in August 2021:**
 - For cases found to be ineligible during the PHE, states will conduct another redetermination once the PHE ends. States will have 12 months to complete redeterminations.
 - New Jersey's intention is to align to renewal dates for each case (spread over the year) as much as possible.

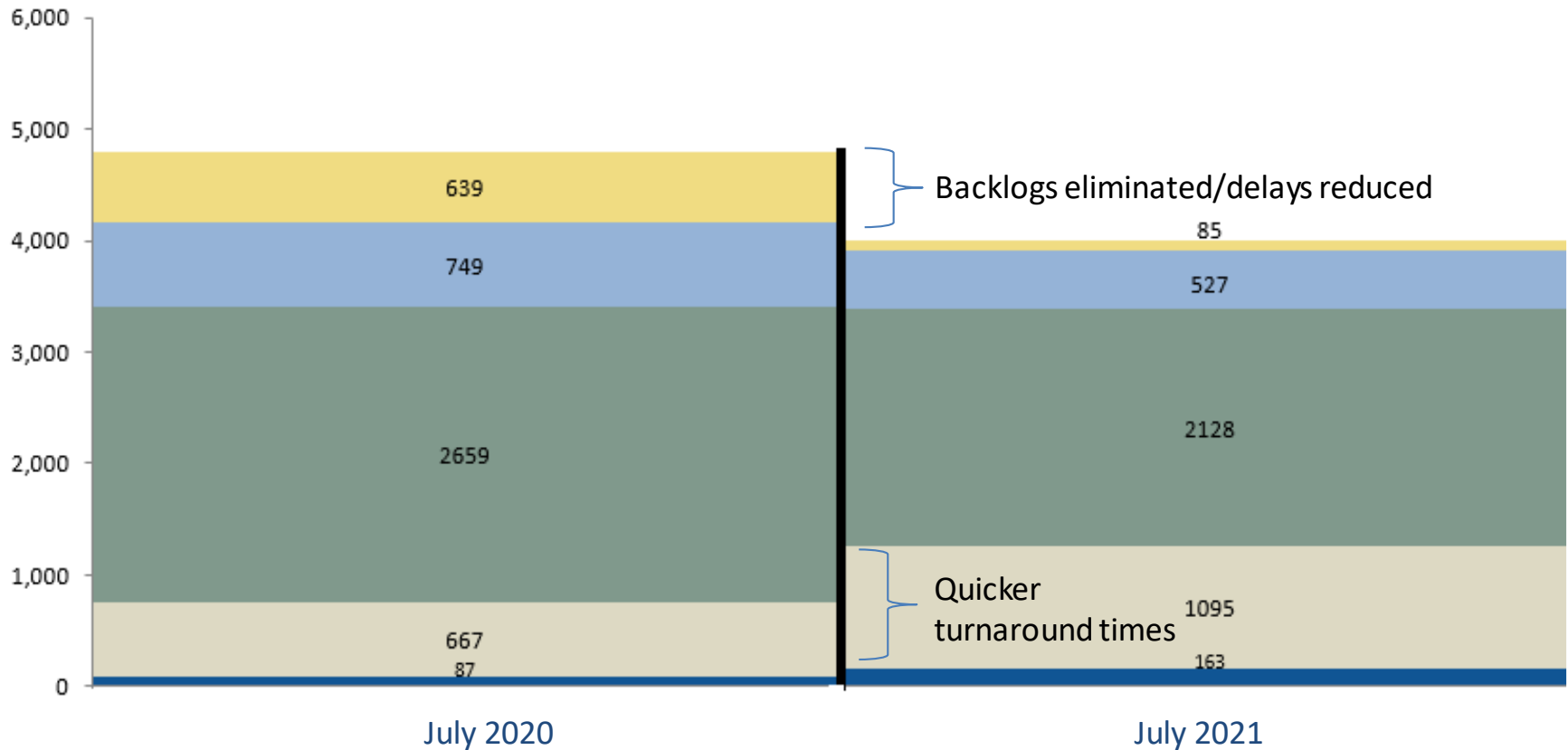
Eligibility System Improvements

- **All County Welfare Agencies (CWAs) have moved to a single shared platform for intake, processing, and tracking of NJ FamilyCare applications**
 - Systems enhancements have standardized and simplified eligibility determination; more in the works
 - A “Good Cause” indicator allows the eligibility worker to flag a case as having an extension requested by the applicant or representative
- **DMAHS has established a "cadence of accountability" with CWAs**
 - Weekly operational reports and biweekly meetings with county leaders provide a "compelling scoreboard" for managing the work
 - Candid discussion has brought shared focus and process improvement in all 21 counties and at DMAHS
 - Improved efficiency has resulted in improved turnaround times
- **We are getting coverage in place for people faster**
 - The proof is in the data: Backlogs eliminated and turnaround times improved
 - New dashboards are on the way
 - New technical updates will continue to improve performance

Energy
follows
focus

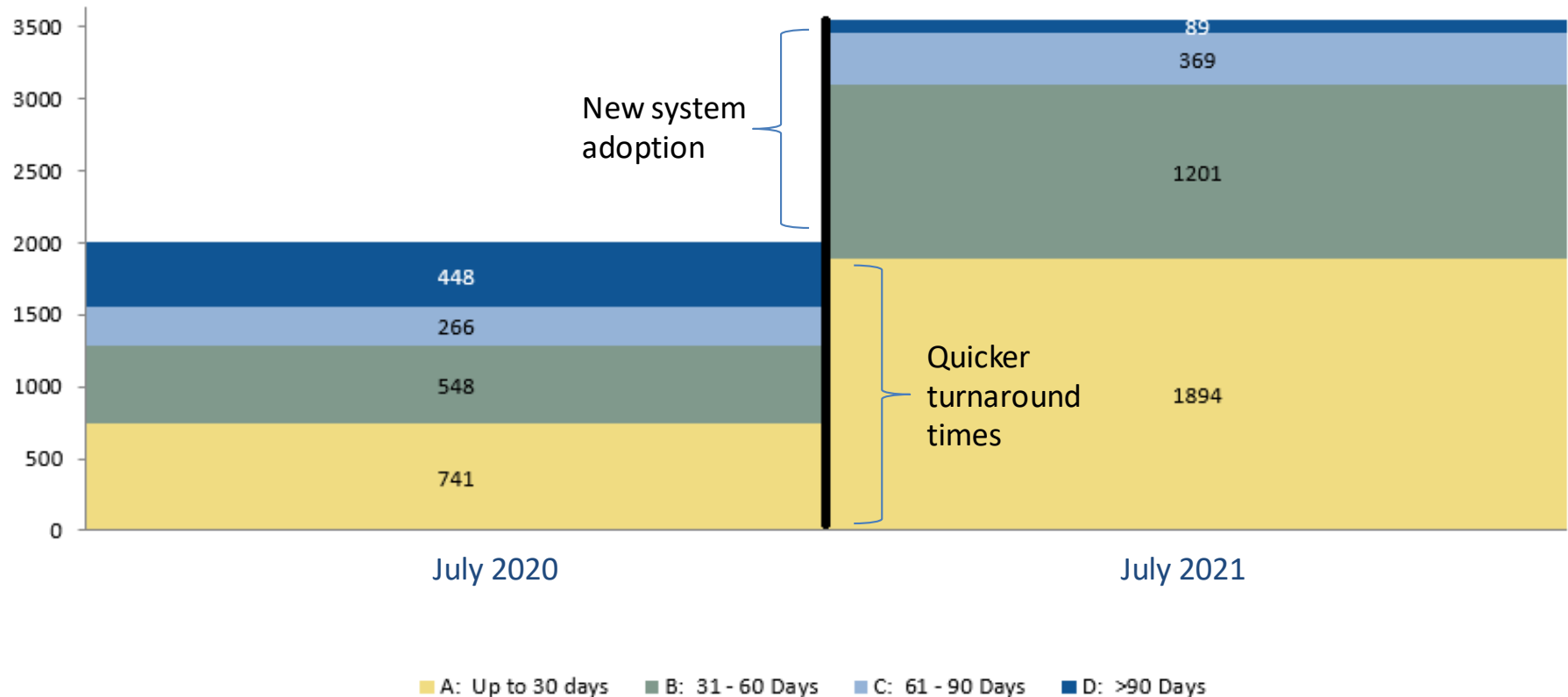
[Memorandum of Understanding](#)
in place with all counties includes
system of rewards and penalties

Processing Time for MAGI cases – All Counties Improved process times in July 2021 compared to July 2020



■ A: Up to 24 hours ■ B: 24 hours - 7 Days ■ C: 8 - 30 Days ■ D: 31-45 Days ■ E: More Than 45 Days

Processing Time for ABD Cases – All Counties System adoption and improved process times



1115 Comprehensive Waiver Demonstration Renewal

1115 Renewal Status

- DMAHS posted a draft 1115 renewal proposal for public comment September 10
 - Available at
https://www.state.nj.us/humanservices/dmahs/home/1115_NJFamilyCare_Comprehensive_Demonstration_Draft_Proposal.pdf
- DMAHS held two public hearings:
 - September 13 (special MAAC meeting)
 - September 27
- Public comment period closed October 11
- DMAHS is currently reviewing public comments, and identifying areas of draft proposal for updates / changes.
- Once this is complete, updated final proposal will be submitted to CMS for review

American Rescue Plan Enhanced Federal Match for Home & Community Based Services

Enhanced HCBS Funding Opportunity

- As part of the American Rescue Plan, Congress provided a 10% increase in the Medicaid FMAP rate on Home and Community-Based Services.
 - Eligible HCBS expenditures from April 1, 2021 to March 31, 2022 are given a 10% increase in their federal match rate.
 - The resulting funding may be spent until March 31, 2024 on eligible HCBS.
 - Spending must “supplement not supplant” state dollars and must enhance, strengthen or expand HCBS.
- New Jersey submitted a spend plan to CMS on July 12, 2021.
 - Available at:
<https://nj.gov/humanservices/assets/slices/NJ%20HCBS%20Spending%20Plan%20Submission.pdf>.
- DMAHS received “partial approval” from CMS on September 29, 2021.
 - Some activities were approved; some had outstanding CMS questions.

HCBS FMAP increase spend plan CMS partial approval summary

Activities Fully Approved by CMS

<i>Spend Plan Activity</i>	<i>Implementation</i>	<i>State Spending</i>	<i>Total Spending</i>
PCA Rate Increase – Sustain \$22/hr. rate established in SFY 22 Budget	July 1, 2021	\$78 million	\$163 million
PCA Rate Additional Increase – Increase rate to \$23/hr.	Jan. 1, 2022	\$41 million	\$85 million
PPP Rate Increase – Increase self-directed budget calculation to \$19/hr.	Jan. 1, 2022	\$112 million	\$228 million
Assisted Living Rate Increase – Sustain rates established in SFY 22 Budget	July 1, 2021	\$11 million	\$22 million
Assisted Living Tiered Rate Increase – Rate enhancement for providers serving higher % of NJ FamilyCare beneficiaries	TBD	\$7 million	\$15 million
Nursing Facility Transitions to Community Settings – Incentive program to support an increase in timely, person-centered transitions	TBD	\$7 million	\$15 million
Enhancements to “No Wrong Door” System – Strengthening the program’s educational/informational resources; improving interagency collaboration	TBD	\$1.5 million	\$3 million
TBI Provider Payment – Additional funding to support TBI providers	TBD	\$4 million	\$8 million
Support Coordinator Rate Increase – Under development	~ Nov. 1, 2021	\$37 million	\$80 million
Home Health Workforce Development – Investment, recruitment and retention initiatives	TBD	\$7 million	\$15 million
TOTAL		\$305 million	\$634 million

HCBS FMAP increase spend plan CMS partial approval summary

Activities with Outstanding CMS Questions

<i>Spend Plan Activity</i>	<i>State Spending</i>	<i>Total Spending</i>
Person-Centered Planning – Improved and sustained person-centered planning training	\$1 million	\$2 million
Healthy Homes – Dedicated Housing for NJFC Members – Dedicated affordable housing units for NJ FamilyCare members	\$53 million	\$53 million
Enhanced ABA Reimbursement – Increase the rate to \$15/15 mins.	\$39 million	\$89 million
JACC Program Rate Increase – DoAS – Additional funding to support workforce	\$5 million	\$5 million
Intensive Mobile I/DD Services – DCF – Mobile treatment team delivering intervention and support for youth with I/DD	\$7 million	\$15 million
BH Promoting Interoperability Program – Implementation or upgrade support for Electronic Health Record technology	\$2 million	\$4 million
TOTAL	\$107 million	\$168 million

Provider Relief Funding

Provider Relief Funding

- There have been 3 previous phases for provider relief funding from the federal government:
 - Phase 1 distributed \$46 billion in CARES Act funding to 320,000 providers who billed Medicare fee-for-service.
 - Phase 2 distributed \$5.98 billion to 60,832 providers in state Medicaid programs, including managed care plans, CHIP, and certain Medicare providers who did not receive relief dollars in Phase 1.
 - Phase 3 distributed \$24.5 billion to 97,433 providers who were previously eligible from earlier phases or who had already received Provider Relief Fund payments. Additional payments took into account financial losses and changes in operating expenses caused by the coronavirus. Payments they had received earlier were deducted from any Phase 3 payment. Previously ineligible providers and an expanded group of behavioral health providers were eligible for Phase 3 relief payments.
- Now the US Department of Health and Human Services (HHS) and the Health Resources Services Administration (HRSA) have announced Phase 4 of provider relief funding.
- **Deadline for Phase 4 Application: October 26, 2021.**
- <https://www.hrsa.gov/provider-relief/future-payments>

Provider Relief Funding

- Phase 4 of provider relief funding is for Medicaid, CHIP, and Medicare providers financially impacted by COVID-19.
 - \$8.5 billion from the American Rescue Plan (ARP) for rural providers.
 - \$17 billion for the Provider Relief Fund (PRF) Phase 4 for providers who can document revenue losses between July 1, 2020 and March 31, 2021 due to the pandemic.
- Phase 4 includes new elements focused on equity, including reimbursing smaller providers for their changes in operating revenues and expenses at a higher rate compared to larger providers, and bonus payments based on the amount of services providers furnish to Medicaid/CHIP and Medicare beneficiaries.
- ARP Rural is intended to help address the disproportionate impact that COVID-19 has had on rural communities and rural health care providers.

Provider Relief Funding

- Providers must show supporting documents to qualify for PRF, including:
 - A comprehensive list of all billing TINs under the filing TIN that provide patient care and are owned by the filing TIN that is applying.
 - Internally-generated financial statements that substantiate operating revenues and expenses from patient care in 2019 Q1, Q3, and Q4; 2020 Q3 and Q4; and 2021 Q1.
 - Federal income tax return, audited financial statements, or internally-generated financial statements submitted in their entirety.
- Providers will apply for both Phase 4 and ARP Rural in a single application.
- HRSA will use existing Medicaid, Children's Health Insurance Program (CHIP), and Medicare claims data in calculating portions of these payments.

Social Drivers of Health: Lifeline Free Smartphone & Emergency Broadband Benefit

Lifeline Free Smartphone Benefit

The federal Lifeline program provides eligible low-income households with a free smartphone and free wireless phone service. The program includes free data, free monthly minutes and unlimited texting. This can be important for improving access to telehealth and care coordination.

NJ FamilyCare Households qualify for this program

Members can get their free smartphone and wireless service through:

- Assurance: <https://www.assurancewireless.com/>
- Safelink: <https://safelinkwireless.com/>

During the federal Public Health Emergency, participants can receive unlimited talk, text, and data through the Emergency Broadband Benefit. Anyone with Lifeline phone service can request this through their Lifeline service provider.

Other households are eligible for the federal Lifeline program too based on income, veteran status, and tribal programs

<https://nj.gov/humanservices/home/digitalaccessforall.shtml>

NJ FamilyCare MCOs may offer extra benefits through a particular service provider:

assurance
wireless®



Aetna Better Health® of New Jersey



United
Healthcare
Community Plan

SafeLink
WIRELESS®



Horizon NJ Health



Ask for Emergency Broadband Benefit for unlimited talk, text & data during the federal Public Health Emergency.

Emergency Broadband Benefit

During the federal Public Health Emergency, the federal **Emergency Broadband Benefit (EBB)** helps households struggling to afford internet service during the COVID-19 pandemic.

NJ FamilyCare Households qualify for this program.

- Households can receive unlimited talk, text, and data on their Lifeline phone through the Emergency Broadband Benefit or
- Households can receive a discount of up to \$50 per month towards broadband service

How to access the Emergency Broadband Benefit:

- Lifeline unlimited talk, text, and data
 - Call your Lifeline phone service provider or go to their website to request EBB benefits
- Broadband discount
 - Apply online at [GetEmergencyBroadband.org](https://nj.gov/humanservices/home/digitalaccessforall.shtml)
 - Call 833-511-0311 for a mail-in application
 - Contact a participating broadband provider and ask about their application process

<https://nj.gov/humanservices/home/digitalaccessforall.shtml>

NJ FamilyCare MCOs may offer extra benefits through a particular service provider:

assurance
wireless®

♥ **aetna**™

Aetna Better Health® of New Jersey



United
Healthcare
Community Plan

SafeLink
WIRELESS®

Horizon.

Horizon NJ Health

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An Anthem Company

WellCare
of New Jersey

Ask for Emergency Broadband Benefit for unlimited talk, text & data during the federal Public Health Emergency.

Planning for the Next Meeting