





The W.I.S.E. Program

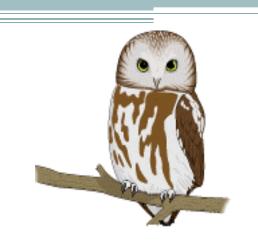
Connecticut's 1915(c) Waiver for Individuals with Mental Illness

Dan Gerwien

Advanced Behavioral Health, Inc

Kevin Kunak Wendy Ulaszek

University of Connecticut and CT Dept. of Mental Health & Addiction Services



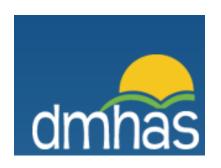
Learning Objectives

- 1. Services offered through the CT Mental Health Waiver ("W.I.S.E.")
- 2. How research data has been used to show that MH Waiver services benefit the recipients
- Identify how a Waiver for individuals with SMI can work for your state
- 4. Identify ways that a Mental Health Waiver can help control the cost of long term care services

What is the Mental Health Waiver?

- 1915 (c) Waiver
- Started in April 2009
- 420 currently enrolled
 - 619 served to date
- Projected to serve up to 811 clients through March 2017
- Based on the principles of recovery, psychiatric rehabilitation and freedom of choice

DMHAS Mission



- "We endorse a broad vision of recovery that involves a process of restoring or developing a positive and meaningful sense of identity apart from one's condition (Who am I?)
- and a meaningful sense of belonging while rebuilding a life despite or within the limitations imposed by that condition."
- (& Where do I fit in the world around me?)

Person- Centered Approach

- Considers the person FIRST, <u>NOT the illness</u>.
- A way of thinking about an individual as a person in regards to their personal strengths and unique individuality.
- Takes into consideration individuals' personal goals, dreams, hopes and aspirations.
- Allows individuals to make their own informed choices.
- Involves the individual in all aspects of care
- It sees deficits as opportunities for improvement through education and learning
- It empowers the individuals who have historically been viewed as powerless

Eligibility

What does "serious mental illness" mean?

- Schizophrenia
- •Bipolar Disorder
- Major Depression
- •Delusional/Paranoid Disorder
- •Psychotic Disorders, NOS (Brief Reactive Psychosis, Schizoaffective Disorder, and Psychotic Disorders NOS)
- -OR-

Another mental illness that may lead to a chronic disability, requires assistance or supervision, and have limitations in at least one area of functioning due to the mental illness

Additional Considerations

- •Health and safety needs must be reasonably assured
- •Cost of waiver services must remain within the cost limit established by the state

Are these 5 criteria met?

- 1) 22 years of age or older;
- 2) Has a diagnosis of serious mental illness
- 3) HasMedicaid("Husky C");
- 4) Meets criteria for nursing home level of care
- 5) Voluntarily chooses to participate in the waiver

What does
"nursing
home level
of care"
mean?

The individual must have at least **3**Critical Needs...

OR 2 critical needs AND 4 or more Cognitive Deficits

Who does what?

DSS DMHAS UCONN

- Assesses Medicaid eligibility
- •Maintains complete oversight of the program
- •Oversees 9 Community Support Clinicians
- •Partners with UCONN School of Social Work for research projects

CSC
Community
Support
Clinicians

- ·Assesses for level of care
- •Develops Recovery plan
- •Monitors Recovery plan, cost plan and services

Providers

- •Provide the Waiver service
- •Bill for services

- •Fiscal Intermediary processes payments
- •Credentials and train s providers
- •Heads outreach and engagement efforts
- •Oversees 5 Community Support Clinicians
- •Manages the Waiver/Quality Assurances

ARH

MH Waiver Services

Rehabilitation Services

Community Support Program

Peer Support

Supported Employment

Support Services

Recovery Assistant

Transitional Case Management

> Brief Episode Stabilization

Assisted Living

Adult Day Health

Ancillary Services

Specialized Medical Equipment

Assistive Technology

Home Accessibility Adaptations

Non-Medical Transportation

Personal Emergency Response (PERS)

Home Delivered Meals

Combination of Services



Recovery Assistant

Recovery Assistant - A flexible range of supportive assistance provided face-to-face in accordance with a Waiver Recovery Plan that enables a participant to maintain a home/apartment, encourages the use of existing natural supports, and fosters involvement in social and community activities. Service activities include: performing household tasks, providing instructive assistance, or cuing to prompt the participant to carry out tasks (e.g., meal preparation; routine household chores, cleaning, laundry, shopping, and bill-paying; and participation in social and recreational activities), and; providing supportive companionship. The Recovery Assistant may also provide instruction or cuing to prompt the participant to dress appropriately and perform basic hygiene functions; and supportive assistance and supervision of the participant.

Unit of Service: 15 Minutes

Rate: \$5.65 (agency-based Recovery Assistant)

\$3.34 (individual Recovery Assistant)

Group Recovery Assistant

 Recovery Assistant service can provided by one staff with up to 4 clients. The service must be approved by CSC prior to provision and the cost is pro-rated based on the number of clients served

Service	Client:Staff Ratio	Rate Per Client	Total Billed	% of 1:1 RA
RA	1:1	\$5.65	\$5.65	100%
RA group - 2 clients	2:1	\$4.24	\$8.48	150%
RA group - 3 clients	3:1	\$3.27	\$9.81	175%
RA group - 4 clients	4:1	\$2.86	\$11.44	200%

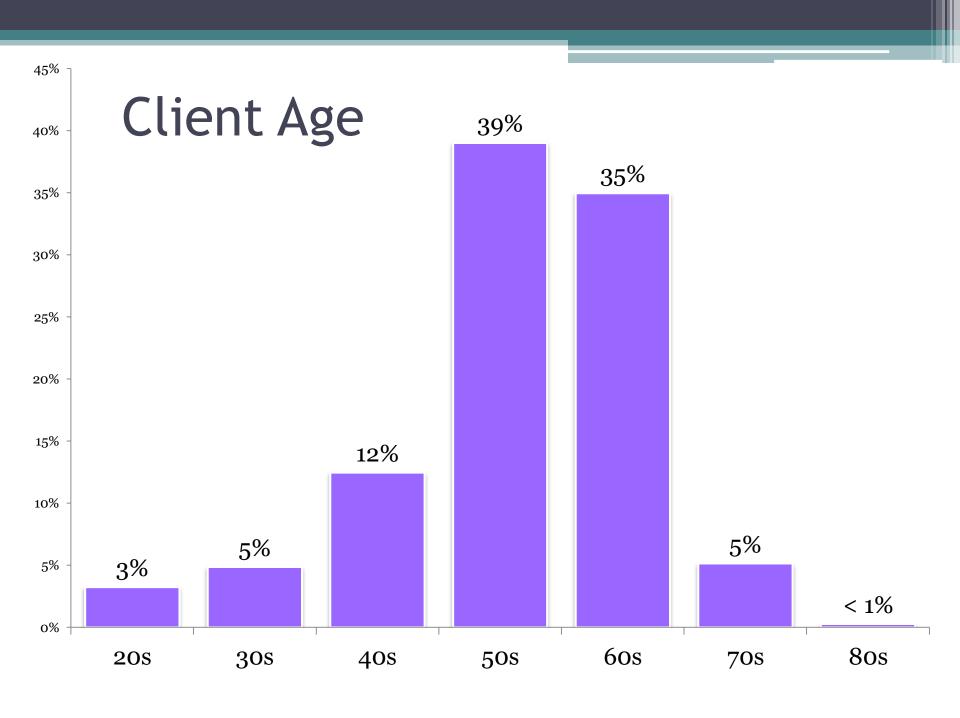
Community Support Program (CSP)

Community Support Program- Community Support

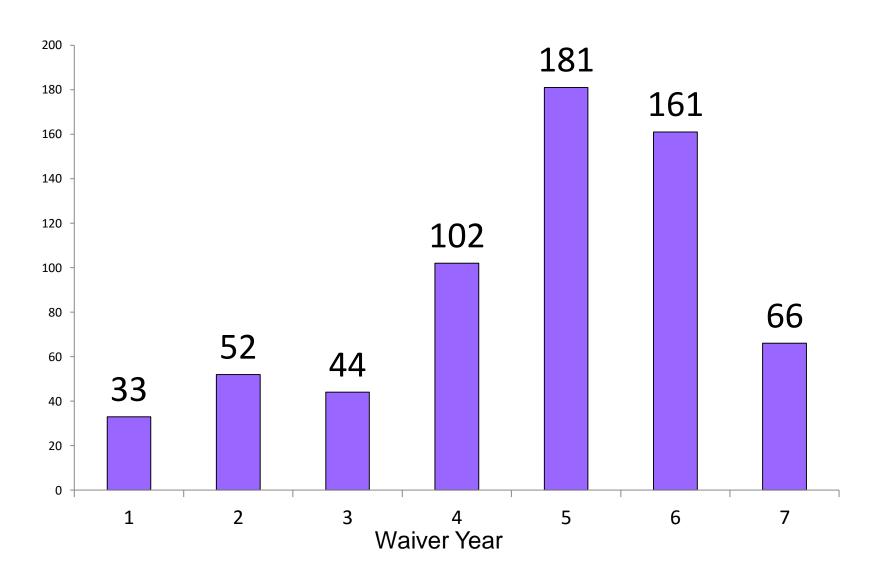
Program (CSP) consist of mental health and substance abuse rehabilitation services and supports necessary to assist the individual in achieving and maintaining the highest degree of independent functioning. The service utilizes a team approach to provide intensive, rehabilitative community support, crisis intervention, group and individual psycho-education, and skill building for activities of daily living.

Unit of Service: 15 Minutes

Rate: \$24.92



Enrolled by Year



Client feedback

- "I am very happy with my staff. My main RA has got me to a good spot and I feel healthy."
- "I love the people at WISE"
- "It's been great. I'm attending school now thanks to [CSP services] and this program. Thank you"
- "It's teaching me how to live on my own and deal with my problems. It has helped me to open up more."
- "My CSP is very helpful and talks to me, she helps me with everything."
- "My younger brother passed three months ago and my grandmother passed two weeks ago and the support I got from my worker helped me a lot."

Lessons learned

- Recovery in SMI
- Marketing and Outreach
- Added Levels of service (ALSA, overnight, etc.)
- Wellness and physical outcomes
- Transition from grant funding to Medicaid FFS billing (and its documentation)
- Transition from case management model to psychiatric rehab model
- Staff training (online RA module)
- Over-authorizing care
- Dealing with no-shows/ cancels



Actual client receiving RA services

	DMHAS MH Waiver Working for Integration Support and Empowerment
	Date of Status Reviews: 6/18/13 8/19/13
To: FROI Client	Comments: MIKE HAS DONE GREAT WITH WAIVER SUPPORT SERVICES! HE IS NOW INDEPENDENT W/ ALL ADL'S & NO LONGER MEETS NURSING HOME LOC.
EMS -	
82	t resulting in the discontinuance recommendation:
FOR DS: Discontinuance Da Comments:	Date: 1. Died 2. Hospital eds prinel 3. Beinel 4. Bit ineligi 5. Carl Socia

Level of Care (LOC) Skills Assessment

- Overview
- Walkthrough
- ☐ Findings

Level of Care (LOC) Skills Assessment

□ Purpose

- Determines the person's eligibility for the MHW based on his/her NF LOC
- Assists clinicians in identifying the person's needs and developing the person's recovery plan

☐ Implemented in 2012 to replace 2 lesser streamlined

assessment tools

☐ Includes 3 sections:

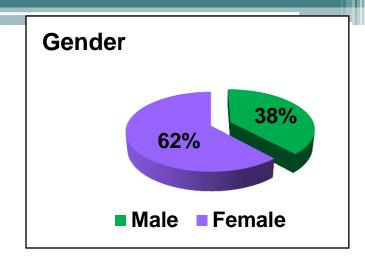
- 1. Mental Health Scores
- 2. Level of Assistance
- 3. Rating Summary

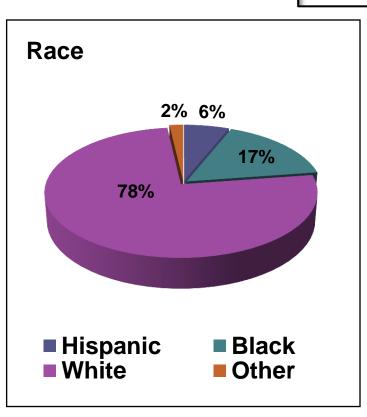


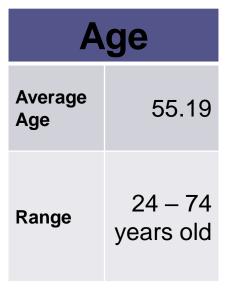
1% Employed

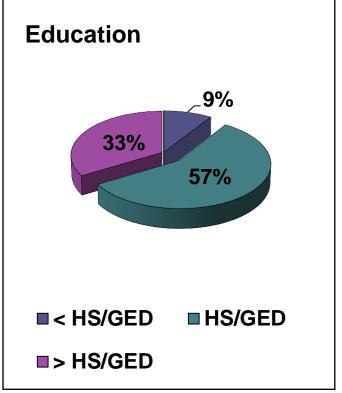


61% Never Married









Data collection & Methodology

- □ DMHAS Research Division responsible for data collection and reporting
- ☐ Data is updated quarterly and presented to W.I.S.E. staff and leadership



Paired Sample T-Test

- □ A paired sample t-test is used to determine whether or not there is a significant difference between the average values of the same measurement made under two different conditions
- □ Compared 112 match paired cases' mean MH scores, LOA Scores and Rating Summaries for individuals at Initial intake and one year later at 1st Annual

Mental Health Scores Eligibility Criteria for MHW

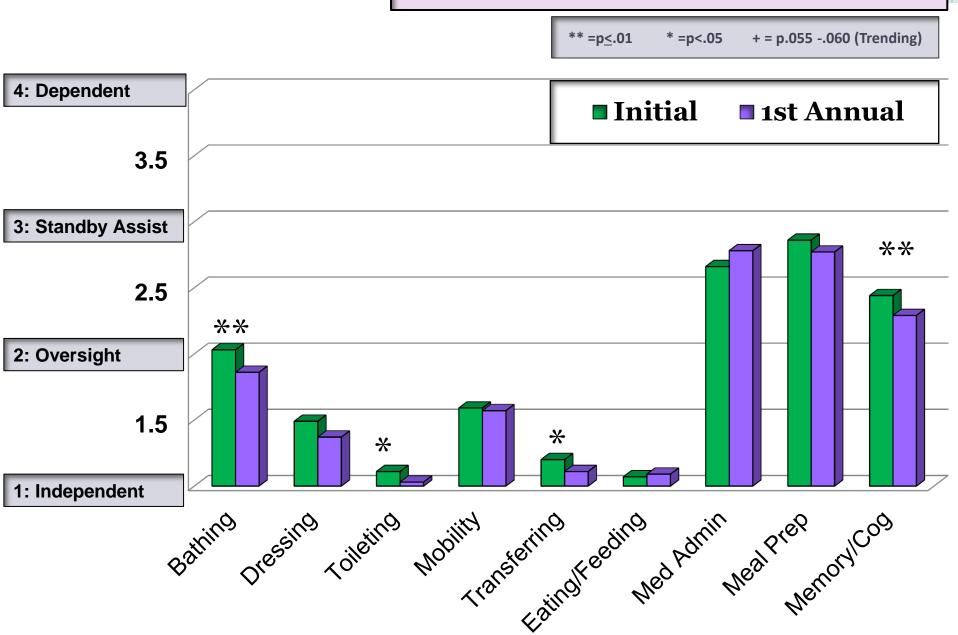
9 critical needs under MHW

- Bathing
- Dressing
- Toileting
- Mobility
- Transferring
- ✓ Eating/Feeding
- Med Admin
- ✓ Meal Prep
- ✓ Memory/Cognition

1. BATHING

Definition: The ability to shower, bathe or take sponge baths for the purpose of maintaining adequate hygiene. 1506 - MH SCORING CRITERIA 1=The client is independent in completing the activity safely. 2=The client requires oversight help or reminding; can bathe safely without assistance or supervision, but may not be able to get into and out of the tub alone. 3=The client requires hands on help or line of sight standby assistance throughout bathing activities in order to maintain safety, adequate hygiene and skin integrity. 4=The client is dependent on others to provide a complete bath. Due To: (Score must be justified through one or more of the following conditions) Physical Impairments: Neurological Impairment Lack of Awareness Pain Oxygen Use Difficulty Learning Visually Impaired Muscle Tone Seizures Limited Range of Motion Amputation Mental Health: Weakness Open Wound Lack of Motivation/Apathy Balance Problems Delusional Stoma Site Shortness of Breath Hallucinations Supervision: Decreased Endurance Cognitive Impairment Paranoia Falls Memory Impairment **Paralysis** Behavior Issues

Mental Health Scores (n=110)



Level of Assistance (LOA) How much and how often assistance is needed

16 Life Areas

- ✓ Bathing
- Dressing
- ✓ Toileting
- ✓ Mobility
- Transferring
- Eating/Feeding
- Med Admin
- ✓ Meal Prep
- Memory/Cog.
- Safety

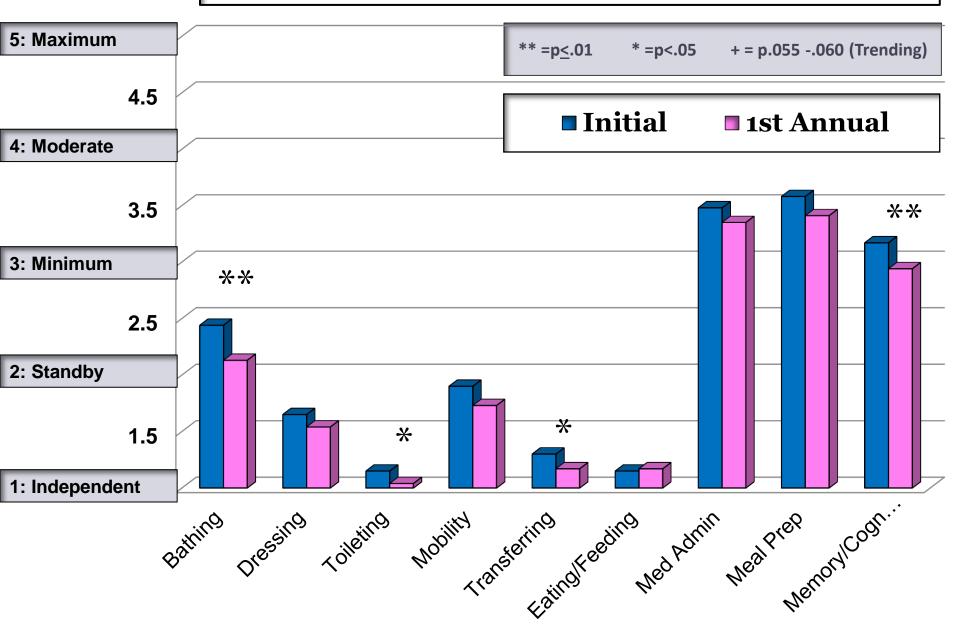
- ✓ Independent
 - Living Skills
- Interpersonal
 - Communication Skills
- ✓ Health
 - **Awareness**
- ✓ Coping/StressMgmt
 - Money Mgmt
- Transportation

Instructions: After each section, please designate a Level of Assistance (LOA) rating based on the MH scoring criteria.

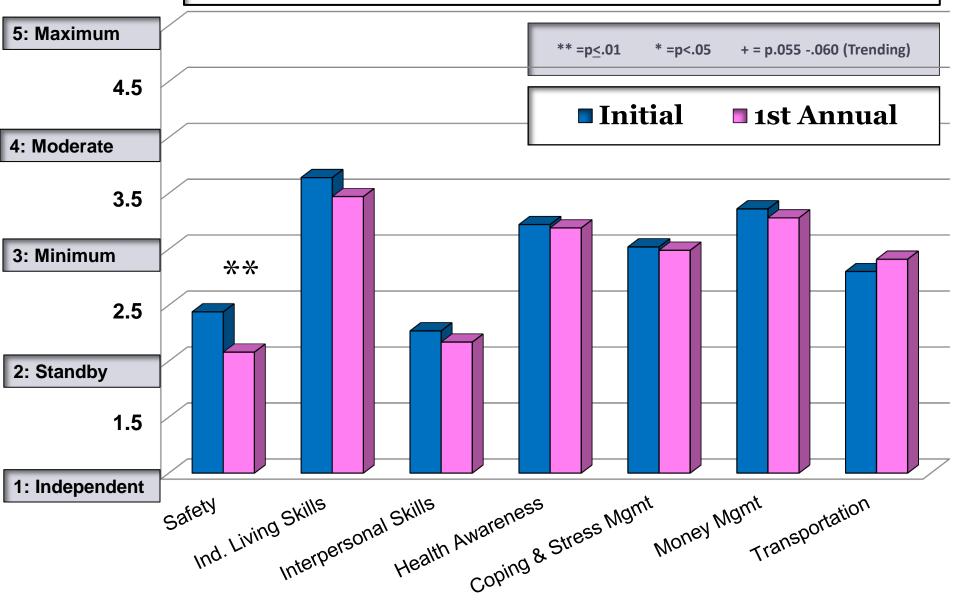
Level of Assistance (LOA) - Rating Scale

- <u>5. MAXIMUM ASSISTANCE</u> Unable to meet minimal standards of behavior or functioning in order to participate in daily living activities or performance of basic tasks approximately 75% of time. Cue Step by step physical gestures, pointing and demonstrations Prompts/Coaching Step by step physical demonstrations with visual and verbal directions that prompt the participant to perform the skills and/or tasks.
- <u>4. MODERATE ASSISTANCE</u> Needs constant cognitive assistance such as 1:1 cueing, prompting/coaching or demonstrations to sustain or complete simple, repetitive activities or tasks safely and accurately approximately 50% of time. Cues Hints to help organize thoughts. Prompts/Coaching Step by step verbal directions.
- 3. MINIMUM ASSISTANCE Needs periodic cognitive assistance (cuing and/or prompting/coaching) to correct mistakes, check for safety and/or solve problems approximately 25% of time. Cues -Hints related to the task. Prompts/Coaching Step by step written and/or verbal directions.
- <u>2. STANDBY ASSISTANCE</u> Supervision by one individual is needed to enable the individual to perform new procedures for safe and effective performance. Cues Visual demonstrations related to the task. Prompts/Coaching Visual and physical directions that prompt the participant to perform the skills and/or tasks.
- 1. INDEPENDENT No physical or cognitive assistance needed to perform activities or tasks.
- <u>0. UNABLE TO ASSESS</u> Individual refuses or has chosen to not actively participate in providing any evidence of skills and/or abilities or demonstrating any skills and/or abilities for this assessment.

Level of Assistance (LOA) Paired Ratings



Level of Assistance (LOA) Paired Ratings ..ctd

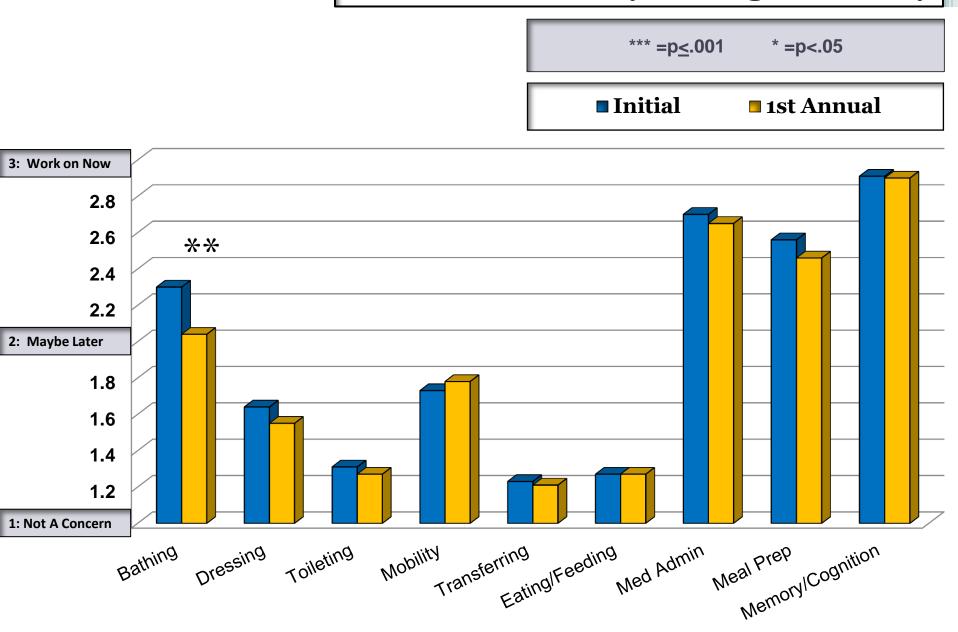


Rating Summary Identifies and prioritizes the person's goal(s)

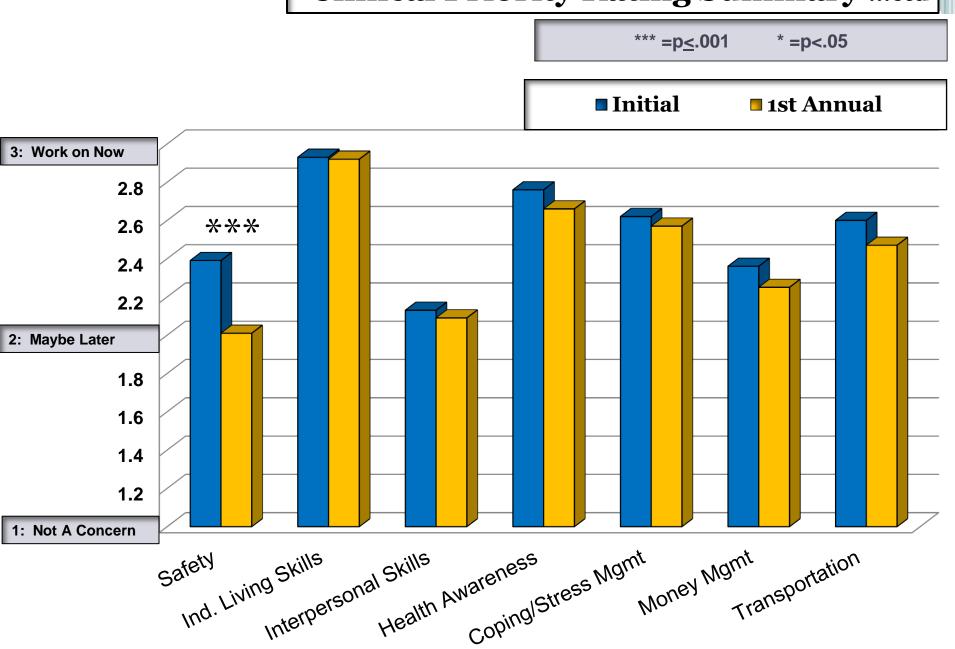
RATING SUMMARY

Major Life Area	Recorded LOA's from Assmt	Wor k on Now	Maybe Later	Not a Concern	For each "Work on Now", in person's own words, note goal/something they would like to change or improve
1. Bathing – personal care					
2. Dressing – personal care					
3. Toileting					
4. Mobility					
5. Transferring					
6. Eating					
7. Medication Administration					
8. Meal Preparation					
9. Memory/Cognition					
10 Safety					
11. Independent. Living Skills					
12. Interpersonal Skills					
13. Health Awareness					
14. Coping, Stress Management And Impulse Control Skills					
15. Money Management					
16. Transportation					

Clinical Priority Rating Summary



Clinical Priority Rating Summary ...ctd



Findings Summary

Mental Health	Level of	Rating
Scores	Assistance	Summary
BathingMemory/CognitionTransferringToileting	BathingSafetyMemory/CognitionToiletingTransferring	BathingSafety

Going Foward....

☐ Addition of 2nd annual assessments

Mental Health Waiver in your state

- What services does your mental health agency currently provide?
- Are any of these services provided in HCBS setting?
- Waiver services can help to...
 - Reduce the number of high ED utilizers
 - Bridge the gap between community and institutional levels of care
 - Offer freedom of choice to population to whom it was historically not given
 - Rebalance setting of LTSS and reduce cost

Cost savings

- Average cost of Nursing Facility in CT
 - □ ~\$7,250 a month
 - \$87,000 a year
- Typical plan for W.I.S.E. services
 - 20 hours a week of RA (\$24K/yr)
 - 2 hours a week of CSP (\$10K/yr)
 - Daily nursing (\$22K/yr)
 - TOTAL COST ~\$56,000 (35% cost savings)

Contact Information

Dan Gerwien 860-704-6213

dgerwien@abhct.com

Quality Assurance Supervisor Advanced Behavioral Health, Inc

> Kevin Kunak 860.418.6731

Kevin.Kunak@ct.gov

Data Manager

UCONN School of Social Work/ CT Dept. of Mental Health and Addiction Services