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# **STAR+PLUS Pilot Program Update**

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**Joint IDD SRAC and SP3W Meeting  
February 24, 2022**

# Presentation Agenda

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- Review STAR+PLUS Pilot Program (pilot) purpose
- Share information about Pilot:
  - Service Area
  - Eligibility
  - Service coordination
  - IT/Systems
  - Services
  - Consumer directed services (CDS)
- Next Steps



# Statutory Direction for Pilot

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- Texas Government Code, Chapter 534, Subchapter C requires HHSC to develop and implement a pilot program through the STAR+PLUS Medicaid managed care program to test person-centered managed care strategies and improvements under a capitated model by September 1, 2023.
- The bill requires HHSC to coordinate and collaborate with the STAR+PLUS Pilot Program Workgroup (SP3W) and Intellectual and Developmental Disability System Redesign Advisory Committee (IDD SRAC).



# STAR+PLUS Pilot Purpose

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- Test the delivery of long-term services and supports (LTSS) for adults in STAR+PLUS Medicaid managed care with:
  - Intellectual and developmental disabilities (IDD)
    - Pilot excludes people currently enrolled in an IDD 1915(c) waiver or a community-based intermediate care facility for individuals with an intellectual disability (ICF/IID)
  - Traumatic brain injury (TBI) that occurred after the age of 21
  - People with similar functional needs without regard to age of onset or diagnosis



# STAR+PLUS Pilot Purpose (cont.)

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- Evaluate the pilot and inform the plan to transition all or a portion of services provided through IDD waiver and ICF/IID programs into managed care



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# STAR+PLUS Pilot Evaluation

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## Comprehensive analysis due by Sept. 1, 2026

- Analyze the experiences and outcomes of system changes
- Include feedback on the pilot based on personal experiences of pilot participants, families, and providers
- Include recommendations on:
  - A system of programs and services for consideration by the legislature;
  - Necessary statutory changes; and
  - Whether to implement the pilot statewide under STAR+PLUS for eligible members





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# Pilot Design

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# Federal Authority

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- In response to the statutory direction for the pilot and communications with the Centers for Medicare and Medicaid Services (CMS), HHSC is pursuing an 1115 waiver amendment using the parameters similar to the 1915(i)-authority.
- Parameters of the 1915(i) authority to be included in the 1115 waiver amendment include:
  - Development of needs-based eligibility criteria and target group(s) that are less stringent than criteria to meet an institutional level of care
  - Quality measure reporting similar to 1915(c) waivers





# STAR+PLUS Pilot Operation

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- One Managed Care Service Area selected by the Health and Human Services Commission (HHSC)
- HHSC will contract with up to two STAR+PLUS Medicaid managed care organizations (MCOs)
- Pilot participants will have a choice of service delivery options including:
  - Consumer Direction Model; and
  - Comprehensive LTSS Providers:
    - 1915(c) IDD Medicaid waiver program providers
    - ICF/IID program providers



# STAR+PLUS

## Request for Proposal (RFP)

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- A draft of the STAR+PLUS Request for Proposal (RFP) is available for your review at:  
<https://www.hhs.texas.gov/business/contracting-hhs/procurement-opportunities>.
- The draft is posted prior to the actual release of the STAR+PLUS RFP in March 2022 as required by Texas Government Code, Section 533.011.
- The pilot information can be found in Exhibit G.



# STAR+PLUS RFP Contact

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Discussions regarding the active procurement are prohibited, but questions or comments can be sent to the Sole Point of Contact for the procurement:

Jason Ochoa, CTCD, CTCM  
HHSC Procurement and Contracting Services  
Office: 512-406-2572  
[jason.ochoa@hhs.texas.gov](mailto:jason.ochoa@hhs.texas.gov)





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# Service Area

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# Service Area

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HHSC selected the Bexar Managed Care Service Area as the primary service area in which to operate the pilot.

- The Bexar Managed Care Service Area includes Atascosa, Banderita, Bexar, Comal, Guadalupe, Kendall, Medina and Wilson counties.
- HHSC identified two backup Managed Care Service Areas if unforeseen circumstances prevent operation in the Bexar service area.
  - The backups are prioritized in the following order:
    - MRSA Northeast
    - Tarrant





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# Eligibility Criteria

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# Eligibility Criteria

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## Needs-based Criteria

To be eligible for STAR+PLUS Pilot Program services a person must meet all of the following requirements:

- Be a Medicaid-eligible adult 21 years of age or older enrolled in STAR+PLUS; and
- Meet criteria for Target Group A or B below; and
- Demonstrate a need for at least one STAR+PLUS Pilot Program service; and





# Eligibility Criteria (cont.)

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- Have substantial functional limitations in three or more areas of major life activity:
  - Self-care
  - Receptive and expressive language
  - Learning
  - Mobility
  - Self-direction
  - Capacity for independent living
  - Economic self-sufficiency.
- If there has not been a determination of functional limitations a SP3 Screening Tool will be used to determine eligibility.



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# Eligibility Criteria (cont.)

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## Target Groups

- **Group A**

- People who have a diagnosis of:
  - An intellectual disability (ID)
  - Autism
  - A Traumatic Brain Injury
  - An Acquired Brain Injury (ABI)
  - A condition on the Texas HHSC Approved Diagnostic Codes for Persons with Related Conditions List



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# Eligibility Criteria (cont.)

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- **Group B**

- People enrolled in STAR+PLUS HCBS who have a diagnosis listed in Group A who could benefit from Pilot services not available to them in STAR+PLUS HCBS



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# Eligibility and Enrollment

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- Texas Integrated Eligibility Redesign System (TIERS) will continue to be the source of eligibility and enrollment transactions.
- The pilot population will be contained within the existing STAR+PLUS files. Pilot will have its own plan codes and associated risk groups.
- Enrollment will be open for a limited time to ensure statistically viable and consistent population.
- Pilot participants will be automatically enrolled with the ability to opt out.





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# Service Coordination

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# Service Coordination Requirements

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- MCOs must employ or contract with service coordinators who have relevant experience meeting the needs of the pilot population;
- MCOs must meet enhanced requirements for interactions with pilot participants; and
- MCOs must ensure that service coordination is delivered in a social services model and not a medical model to meet the statutorily directed goals of the pilot.



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# Contracting with LIDDAs

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MCOs participating in the pilot will have the flexibility to contract with the LIDDAs to provide service coordination, and HHSC will give priority to those MCOs that express an intent to contract with the LIDDAs.



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# Contracting with LIDDAs (cont.)

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- Specific requirements for pilot participants receiving intellectual disability targeted case management (ID TCM) at the time of enrollment, as follows:
  - Pilot participants that decide they want to continue to receive ID TCM from the LIDDA, the pilot MCO must allow for the continuation of ID TCM to be provided by the LIDDA.
  - MCOs will be required to follow a continuity of care provision for pilot participants receiving ID TCM at the time of enrollment into the pilot.



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# Contracting with LIDDAs (cont.)

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- The pilot MCO must reimburse the LIDDA for ID TCM services and ensure the pilot participant receives all service coordination activities required by the pilot.
- HHSC approved Pilot assessment tools and person-centered service planning forms must be used for coordination of all pilot services.





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# Systems/IT

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# Long-Term Care Online Portal (LTCOP)

*Longitudinal Access + Common Platform*



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# IT/Systems Contracting

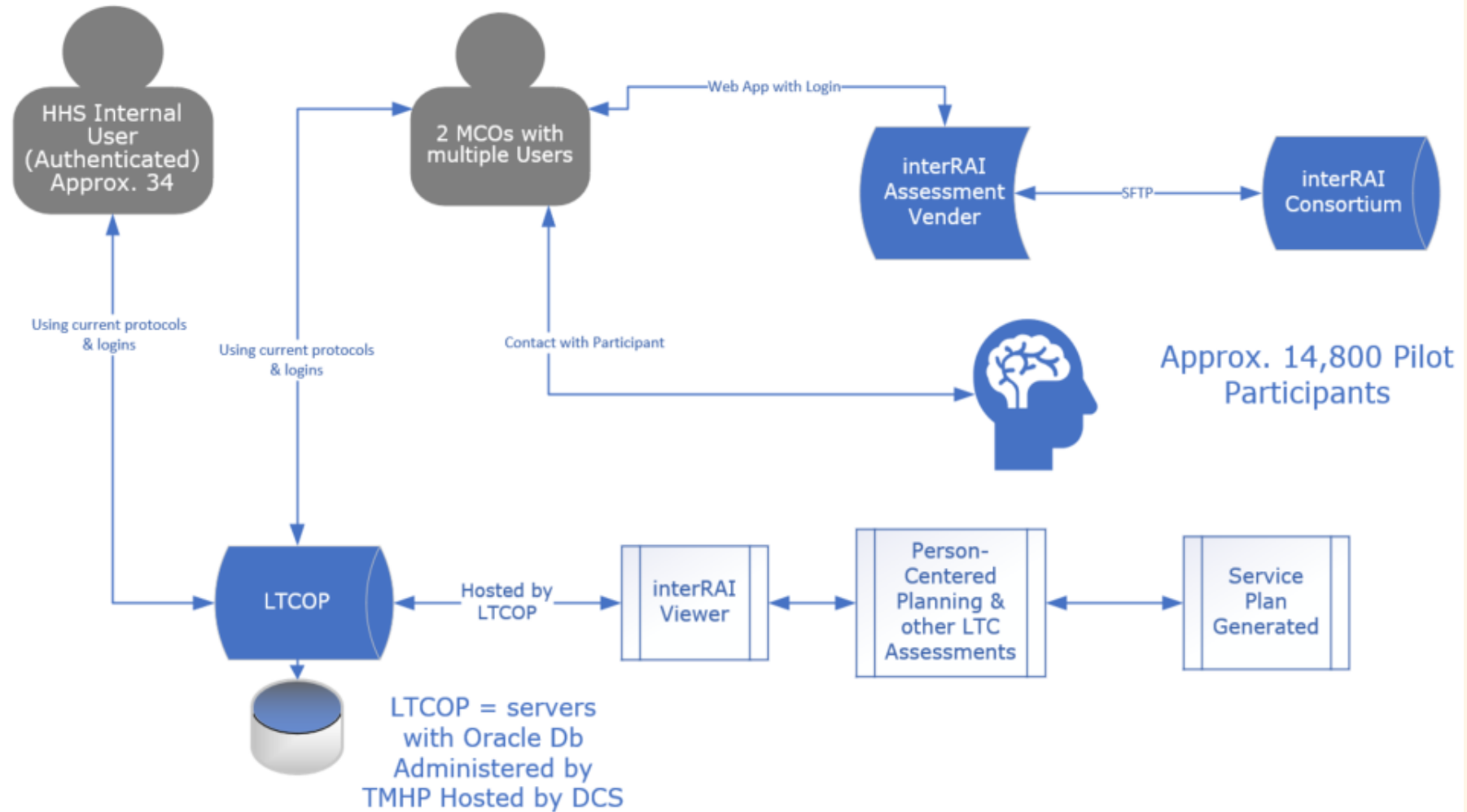
HHSC is finalizing an amendment to the Texas Medicaid & Healthcare Partnership (TMHP) contract with Accenture.

HHSC is pursuing a Request for Offer for an interRAI ID software vendor.



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# “To Be” Model



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# LTCOP Modifications Update



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## IN SCOPE



- Standard section 508 accessibility
- Direct data entry for SP3 Screener, MLP, and SP3 ISP
- Batch entry for interRAI ID assessment data
- Multi-user access with security roles
- Training on the LTCOP
- Ability to download and print
- Allowing users to mark draft versions and finalized versions

## WISH LIST



FOR FUTURE  
IMPLEMENTATION

- Enhanced accessibility functionality
- Interoperability capability (e.g., API, X12 transactions, batch processing)
- Reports for showing tracked progress on planned care and person-centered goals
- Increased automation, pre-population of data elements
- Specialized reporting to certain components
- Pilot participants having ability to access and view their assessment information



# LTCOP Modification

## Time Constraints (1 of 2)

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- End of contract term for STAR+PLUS managed care contracts with selection of pilot MCOs tied to the STAR+PLUS Procurement
  - [HHSC Business Opportunities](#)
    - <https://apps.hhs.texas.gov/documents/STARPLUS/STARPLUS-RFP-Draft.zip>
  - Start of Operations planned for Q1 FY2024



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# LTCOP Modification

## Time Constraints (2 of 2)

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- End of contract term for claims processing services with Accenture/TMHP with the selection of vendor for a new contract for claims processing adjudication and financial services
  - HHSC Business Opportunities
    - Pre-Solicitation Announcement (PDF)
    - [Claims Processing and Adjudication and Financial Services](#)
  - Contract term with Accenture ends 8/31/2023



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# Services

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# Services

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- Adaptive Aids
- Adult Foster Care
- Assisted Living
- Audiology
- Cognitive Rehabilitation Therapy
- Dental Treatment
- Emergency Response
- Employment Assistance
- Financial Management Services
- Home Delivered Meals
- Minor Home Modifications
- Nursing Services
- Occupational Therapy
- Personal Assistance Service/Habilitation
- Physical Therapy
- PAS/Protective Supervision
- Respite (in and out of home)
- Speech Therapy
- Support Consultation
- Supported Employment Services
- Transportation
  - Community Attendant
  - Mileage Reimbursement

**Note:** HHSC is exploring the listed benefits. An updated benefits list will be shared once the cost is determined.



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# Services (cont.)

- Behavior Supports
- Enhanced Behavior Support Specialty
- Enhanced Behavior Family/Caregiver Coaching Services
- Enhanced Behavioral Extended Substance Use Disorder Services
- Enhanced Behavioral Peer Supports
- Enhanced Behavioral Therapeutic In-Home Respite
- Enhanced Behavioral Therapeutic Out-of-Home Respite
- Individualized Skills and Socialization
- Housing supports
- Enhanced Medical Services
- Remote Monitoring
- Dietary Services
- Specialized Therapies
- Orientation and Mobility
- Intervener

Note: HHSC is exploring the listed benefits. An updated benefits list will be shared once the cost is determined.



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# Consumer Directed Services (CDS)

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# CDS Statutory Requirement

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- Section 534.104, Government Code, requires the pilot to be designed to increase access to, expand flexibility of, and promote the use of the consumer direction model.
- IDD SRAC and SP3W created and adopted five CDS recommendations for HHSC consideration to meet this requirement.





# Recommendation 1

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Ensure CDS is presented in a meaningful way to all the participants in the pilot program as an option to receive and manage their services.

- a. Pilot providers, including pilot service coordinators, are required to complete training to understand CDS, pilot services, and how to communicate effectively with pilot participants.
- b. All pilot managed care organizations (MCOs) are required to meet current or enhanced STAR+PLUS CDS training.

# HHSC Decision

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- Existing training will be updated specifically for the pilot.
- Training will be presented as a webinar to ensure accessibility.
- Requirements will be included in the Pilot Exhibit for training and to direct service coordinators to ensure the CDS option is presented in a way pilot participants understand.



## Recommendation 2

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- In order to expand the use of the CDS model, allow all pilot services to be managed through the consumer direction option.
- In addition, increase flexibility in the CDS model by allowing individuals to use the CDS option or a combination of both the CDS and provider options for all services.



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# HHSC Decision

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Most pilot services can be accessed under the CDS option, excluding the following:

- Assisted Living
- Adult Foster Care
- Emergency Response Services
- Home Delivered Meals
- Transportation Vouchers
- Remote Monitoring through vendor company



# HHSC Decision (cont.)

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- The below services can be accessed under the CDS option only if the service and the service provider have been identified in the pilot participant's plan in advance, and if there is a backup provider in place.
  - Behavior Support Specialty Service
  - Enhanced Behavioral Supports Therapeutic In Home Respite Services
  - Enhanced Behavioral Supports Therapeutic Out of Home Respite Services
- Pilot participants will be allowed to use a combination of the CDS and agency options.



# Recommendation 3

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- Allow participants the ability to have full budget authority under the CDS option to align the services to their service plan or My Life Plan.
- This also includes the purchase of the Centers for Medicare and Medicaid Services-approved waiver goods and services.



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# HHSC Decision

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- CDS budget authority will be expanded to include a prescribed list of allowable goods and services determined by HHSC.
- This option is similar to the current structure for employer support services purchases, in which HHSC has outlined a list of allowable and non-allowable expenditures.
- Ohio, New York, and the District of Columbia currently use this approach.





# Recommendation 4

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Rate enhancements that are applied under the pilot will also apply to participants under the CDS option to align attendant wages across both options (MCO or CDS).



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# HHSC Decision

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- Current STAR+PLUS rate methodology and rate enhancement processes will be applied to CDS services in the pilot.
- This involves setting CDS rates for applicable services to align with rates for provider agencies participating in the Attendant Compensation Rate Enhancement Program.
- In this methodology, CDS employers will not choose their rate enhancement participation level.

# Recommendation 5

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- Electronic Visit Verification (EVV) allowable funds should be available to address technology needs, internet access, and training.
- Ensure rates developed for CDS in the pilot account for funds needed to assist CDS employers to meet EVV requirements.



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# HHSC Decision

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- HHSC submitted an exceptional item request including requesting funds for a CDS rate increase to cover EVV costs.
- As a result, the Texas Legislature appropriated \$3,907,925 in General Revenue (\$11,200,000 All Funds) for the biennium in Goal A, MEDICAID CLIENT SERVICES, for identified client service strategies.
- HHSC staff expect these funds to be available to pilot participants and for HHSC leadership's directives on use of these funds to apply to the pilot as well.





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# Next Steps

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# Next Steps

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- Continue collaboration with IDD SRAC and SP3W in planning the STAR+PLUS Pilot Program
- Current and upcoming pilot topics include:
  - Outreach and education plan for potential participants and providers
  - Process to ensure pilot participants remain eligible for Medicaid for 12 consecutive months during the pilot operation
  - Alternate payment methodologies
  - Pilot evaluation
  - Regulatory approach



# Next Steps (cont.)

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- Continue contract solicitation process
- Continue meeting with CMS to address outstanding pilot questions requiring federal guidance
- Draft federal authorities
- Continue working with IT/systems for systems modifications for TMHP, TIERS, and eligibility support technologies







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# Thank You

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