

Preliminary Unified Long-Term Services and Supports Budget Workplan

September

1. September 6 – first meeting of stakeholder group. Agenda:
 - Ground rules
 - Purpose and outcomes
 - Roadmap of decisions that will be made and by when they must be made.
2. September 25 – second meeting of workgroup. Agenda: Who will be served by the long-term services and supports budget?

October

3. Tuesday October 9 – third meeting of workgroup. Agenda: What does long-term care include? The key decision is whether to include other Medicaid services received by those who are NF eligible or being served thru a Medicaid waiver, or state plan. In addition, should the definition include non-Medicaid funded services?
4. Thursday October 25 – fourth meeting of workgroup. Agenda: establish the following subcommittees:
 - “Front door” design. Suggestion is to use the Money Follows the Person balancing committee due to the overlap between the two projects and overlapping membership of the group.
 - “Unmet needs/additional services.” Likewise, the suggestion here is to use the balancing committee from the MFP project. If so, then there would be only 6 subcommittees instead of seven (as discussed during the regional forums).
 - Care management workgroup. What is the role of care management? Is the role to get consumers back to the community? Is it to control and manage cost (or some combination of these)? Who gets care management? How do we interface with Medicare Special Needs Plans and other forms of managed care? Should we do small regional demonstrations?
 - Quality assurance. How do we incorporate CMS “quality framework” into all aspects of long-term services and supports (including NFs)? What can we do now v. future plans (e.g. how are NFs regulated?)

- Consumer direction. How to incorporate key principles and lessons learned from the Cash and Counseling demonstration and similar consumer direction efforts? Should the state have a single contract for a fiscal intermediary?
- IT design of a system. Needs to integrate with MITS and BEN.
- Budget construction and modeling.

November

5. Thursday November 15 – fifth workgroup meeting. Agenda: Decisionmaking authority for long-term care budget and policy – how should that be structured? Are subcommittees on-track and functioning?

December

6. Thursday, December 6 – sixth workgroup meeting. Agenda: Subcommittee reports.

January

7. Thursday, January 10 – seventh workgroup meeting. Agenda: Subcommittee reports. (which groups are stuck and how can roadblocks be removed?)

February

8. Thursday February 7 – eighth workgroup meeting. Final reports from “front door” and “unmet needs” subcommittee (MFP balancing committee).
9. Thursday February 21 – ninth workgroup meeting. Final reports from care management, quality assurance, and consumer direction subcommittees.

March

10. Thursday March 13 – 10th workgroup meeting. Final reports from IT and budget modeling subcommittees.

April

11. Thursday April 3 – 11th workgroup meeting. Draft of recommendations presented to entire workgroup.
12. Recommendations forwarded to Governor’s office for input.

May

13. Thursday May 8. Final report submitted to workgroup for final approval.