

Coordinating Medicaid Long-Term Services and Supports for Adults with Physical Disabilities

Given the significant role that Medicaid plays in the financing and delivery of long-term services and supports (LTSS), states are focused on improving the delivery of LTSS in ways that help Medicaid beneficiaries remain in their homes, live independently, and engage meaningfully in their communities. Managed care organizations (MCOs) are valuable partners to states as they seek to achieve these goals. More and more, states are moving to managed LTSS (MLTSS) arrangements in Medicaid.

MLTSS Can Help Address Barriers in the Fee-for-Service System

Under Medicaid fee-for-service (FFS), LTSS are often delivered in a “silo”—separate from physical and behavioral health services—which can result in a fragmented and uncoordinated system of care rather than a person-centered model of care delivery. The fragmentation in the FFS system also limits beneficiaries’ ability to access the full array of services needed to support community inclusion (e.g., employment, housing, food security). Insufficient access to these services is sometimes due to a lack of coordination and the inflexible nature of services that can be delivered under FFS. Additionally, adults with physical disabilities who are dually eligible for Medicare and Medicaid, as well as their families, must navigate not one but two delivery systems, with two different sets of rules that are sometimes misaligned, further increasing the risk of poor outcomes.

MLTSS can improve access to home and community-based services for adults with physical disabilities as well as help them and their families navigate across delivery systems. MLTSS coordinates social supports that promote community inclusion for the individual. MLTSS also helps providers coordinate across physical health, behavioral health and LTSS systems and supports states’ goals to serve Medicaid beneficiaries with high-quality care under budgetary constraints.

Managed Care Improves the Experience of Individuals Using LTSS

Through a well-designed managed care approach, MCOs are able to enhance the delivery of coordinated, high-quality services and supports that help adults with physical disabilities achieve their goals. MLTSS adds value in a variety of ways.

Integrates LTSS with the Broader Array of Physical and Behavioral Health Services. MCOs employ a holistic approach that addresses an individual’s multifaceted needs—crossing the traditional “silos” of physical health, behavioral health, and LTSS. MLTSS is flexible; through a high-touch individualized approach, service coordinators can ensure that the services and supports provided adapt to and evolve with members’ changing needs. Addressing the needs of adults with physical disabilities in a comprehensive manner can improve quality of care, enhance health outcomes, and promote community engagement and inclusion.

Enhances Community Integration for Adults with Physical Disabilities. By coordinating all benefits through a single entry point, MCOs are well-positioned to reduce fragmentation and inappropriate utilization of institutional settings of care. Facilitating true community inclusion for individuals needing LTSS requires coordinating with community supports that may not be directly covered by Medicaid. In particular, adults with physical disabilities who need LTSS often require access to housing, employment, or non-medical transportation to achieve community engagement and live independently. MCOs have the flexibility to go beyond certain FFS limitations to coordinate critical resources like employment training and housing supports, build collaborative relationships with community organizations, and execute the most effective approach to achieving each individual’s person-centered plan goals.



Working-age adults (aged 21 to 64)

may need LTSS if they have a disability resulting from illness or accident, acquired either as an adult or as a child. This can include spinal cord injury, traumatic brain injury, and other conditions that impact an individual’s ability to work or perform activities of daily living (e.g., bathing, dressing, running errands). More than one-quarter (28 percent) of all working-age adults with a disability are living below the poverty line.¹

Finding Comprehensive Solutions

Supporting Community Living

Managed care plans, through MLTSS, promote integrated community living opportunities by coordinating and connecting individuals to housing resources. Adults with physical disabilities are more likely to reside with unrelated individuals and are 4.5 times more likely than others of a similar age without disabilities to live in public or subsidized housing.² Housing arrangements may be tenuous and there is significant need for assistance in identifying accessible and affordable housing options. Because room and board is not a covered benefit under Medicaid, there may be little help with navigating housing services for Medicaid beneficiaries in FFS arrangements. Service coordinators within MCOs are well suited to monitor a member's housing status and provide support to identify viable housing options when needed, since housing instability can increase the risk for institutionalization.

Achieves Better Outcomes for Members. MCOs promote consumer choice, self-direction, community integration, and independent living. In doing so, MCOs can bring best and most promising practices to MLTSS programs, including assistive technologies that support work productivity or other technologies (e.g., medication reminders, personal emergency response systems) that support independence and safety in the home. Further, the capacity of MCOs to offer enhanced supports that address concerns such as food insecurity and housing instability can reduce members' feelings of isolation and segregation, encourage member engagement, and improve quality of life.

Provides an Accountable Structure for the Delivery of High-Value LTSS.

MCOs are valuable partners to states as they seek to improve the delivery of LTSS. MCOs have the ability to reach beyond Medicaid-covered services to better address social determinants of health and support community integration. MCOs can also facilitate innovation and accountability in LTSS provider networks through flexible approaches to reimbursement and value-based purchasing. Overall, MCOs create a point of accountability for both members and states seeking improvements in service quality and consumer satisfaction.

Delivering on the Promise of MLTSS for Adults with Physical Disabilities

As more states move in the direction of fully integrated managed care for all health care, services and supports, including LTSS, several recommendations can guide their efforts:

- Create flexibility in program design to meet individual needs and preferences: MCOs must meet members where they are, understand their goals, and work with them to achieve those goals.
- Engage the broad range of stakeholders: A successful MLTSS program depends on the development of strong and trusted relationships with advocates, providers, and others.
- Provide administrative and program value to the states: MCOs should support individuals, families and caregivers, and states' goals.

The comprehensive and integrated approach of MLTSS allows coordination across the full array of services and supports that an individual needs, promotes access to HCBS, and enhances the quality of care and services delivered. MCOs are well-positioned to support states and their Medicaid beneficiaries in achieving the vision of a person-centered LTSS delivery system that emphasizes independence, choice, and overall well-being of the member.

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For more information, please see our complete paper on managed LTSS at <http://antheppublicpolicyinstitute.com>

¹ W. Erickson, C. Lee, and S. von Schrader (2016). Disability Statistics from the 2014 American Community Survey (ACS). Ithaca, NY: Cornell University Yang Tan Institute (YTI). Available at: www.disabilitystatistics.org (Accessed October 4, 2016).

² S. Zerul and C. Blakeway (2004). Long Term Support for Individuals with Disabilities, Part 1: Supporting Adults with Physical Disabilities. Aging & Disability Resource Center Technical Assistance Exchange. Available at: www.adrc-tae.acl.gov/tiki-download_file.php?fileId=2823 (Accessed February 3, 2016).