Employment and Community First

CHOICES

JD Hickey, MD
President & CEO

of Tennessee
About us

BlueCross BlueShield of Tennessee

- Not-for-profit company established more than 70 years ago
- Serving 3.4 million members and 11,000 companies
- Paying 85 million claims per year
- Partnering with 20,000+ health care providers
- Giving $14 million each year in charitable investments
- Employing 6,000 to fulfill this mission: Peace of Mind through Better Health

BlueCare Tennessee

- BCBST subsidiary
- Medicaid MCO since 1994
- Providing health coverage for 1.5 million low-income children, pregnant women and disabled Tennesseans
- Using an integrated population health approach to coordinate physical, behavioral and long-term health care needs
Helping Tennesseans with intellectual and developmental disabilities set and achieve their own goals for employment, independent living and community integration.
Comparative health spending

Average Annual Medicaid Spending per Member in Tennessee

- Institutionalized I/DD: $106,000
- Institutionalized Seniors: $58,000
- Seniors: $11,700
- Social Security Disabled: $8,600
- Adults: $4,700
- Children: $2,500

*Data sources: Bureau of TennCare; BCBST
Long-term care in Tennessee before CHOICES

2006 Spending
- HCBS ($11M)
- Institutional ($943M)

99%

Inefficiencies:
- Misaligned incentives prioritizing institutionalized care
- Inadequate workforce, especially in rural areas
- Byzantine regulatory and programmatic requirements

TN ranked among the top 5 states for highest per capita LTC spending

*Data source: Bureau of TennCare; Kaiser Family Foundation
Typical CHOICES member

Demographics
• Over 65
• Living at or below the federal poverty level
• Complex health needs, often with multiple chronic conditions

CHOICES members are:
• Remaining connected to their communities
• Grateful for the services and supports that keep them living at home
Solutions:

- Fully capitated managed care responsible for coordination, integration
- New HCBS infrastructure with robust caregiver supports
- Uniform, comprehensive package of services available statewide

2014 Spending

- HCBS ($684M)
- Institutional ($258M)

TN now ranked 5th in the nation for HCBS as a share of LTC spending

Data source: Bureau of TennCare; Kaiser Family Foundation
Employment and Community First (ECF) in context

Tennessee has over 6,000 individuals with ID on the waitlist for home and community based services, many of whom have been waiting for over a decade.

Sources: TN Department of Intellectual & Developmental Disabilities
Everyone on the waitlist meets the eligibility criteria, with a diagnosis of intellectual disability and total assets of under $2,000.

Sources: TN Department of Intellectual & Developmental Disabilities
The majority of those currently waitlisted:
• live at home with a caregiver over the age of 60
• receive little or no support services

Sources: University of Massachusetts; Gallup; TN Department of Intellectual & Developmental Disabilities
Most people with an intellectual or developmental disability report a desire to work, but nearly 70% are currently unemployed – a statistic that has not improved in the last 30 years.

Sources: University of Massachusetts; Gallup; TN Department of Intellectual & Developmental Disabilities
Yet over 60% of those intellectually disabled who work in a competitive environment have been there three or more years.

Sources: University of Massachusetts; Gallup; TN Department of Intellectual & Developmental Disabilities
Inefficiencies in the system:
- Crisis-driven system ensures highest possible cost model
- Independent living but too often without meaningful social inclusion
- Few formal opportunities to learn job skills and build career experience

Solutions:
- Person-centered planning to serve members based on their own needs
- Focus on building social capital to improve each member’s sense of value, belonging
- 14 categories of specialized employment support, e.g., to move beyond the “3 F’s”
Three tiers of ECF support

**Comprehensive Supports for Employment and Community Living**
- Require an institutional level of care and specialized supports
- Plan for and achieve as much independence as possible

**Essential Supports for Employment and Independent Living**
- Age 21 or older with I/DD and at risk of institutionalization without HCBS
- Transition from school into competitive employment and community integration

**Essential Family Supports**
- Under age 21 and living at home, with needs beyond scope of Medicaid benefits for children
- Adults living at home, to help them gain employment and integrated, independent living
ECF member: Ryan

- 30 years old
- Working in a grocery store
- Living with his grandmother
- Diagnosed with mild ID, Apraxia and seizure disorder
- Competed in the national Special Olympics as a bocce player

Ryan’s Goals
- Get a promotion at work
- Learn how to drive
- Live on his own
These are goals we’ve had for a long time – goals any parent would want for their children. I want him to have a good life as an adult. –Kim, Ryan’s mom
ECF coordinator: Kristen

“ECF is not about saying ‘no.’ It’s about saying ‘yes’ and then asking ‘How can we make this happen?’

– Kristen, support coordinator

- LPNs, RNs or Licensed Social Workers
- Have years of experience with I/DD patients
- Develop “person-centered support plans” with families