

Mark Kissinger, Director, Division of Long Term Care Karen Ambros, Project Director, BIP April 8, 2014



Overview

- ☐ The following informational presentation addresses the Innovation Fund RFA under the NYS Balancing Incentive Program (BIP).
- A brief overview of BIP will be followed by a summary description of the Innovation Fund RFA.
- □ The RFA is subject to NYS procurement rules and therefore responses to questions about its content received during the webinar will be posted by April 15, 2014, at the same time responses to questions received in the BML will be posted.

Balancing Incentive Program Background

- BIP, authorized by Section 10202 of the Patient Protection and Affordable Care Act of 2010 (Pub. L. 111-148), provides enhanced Federal Medical Assistance Percentages to qualifying states.
- NYS' BIP application was approved in March 2013, and the State was awarded \$598.7 million.
- The State must implement three structural changes:
 - Establish a No Wrong Door/Single Entry Point eligibility determination and enrollment system;
 - Develop Core Standardized Assessment Instruments for determining eligibility for non-institutionally-based long term supports and services (LTSS); and
 - Develop a Conflict-Free Case Management System.
- In addition, states must implement a plan designed to rebalance spending on LTSS from institutions to the community.

- ☐ The BIP Innovation Fund RFA was released on March 21, 2014.
- □ The purpose of the RFA is to engage New York's broad network of providers, advocates, and community leaders in developing systemic improvements that address barriers to providing community-based LTSS across all populations and ages of Medicaid beneficiaries.
- □ Up to \$45 million in Innovation Fund grants will be awarded on a competitive basis.

- The establishment of the BIP Innovation Fund is intended to support programs offering service solutions that increase the ratio of expenditures on community-based LTSS versus institutional care and foster community inclusion.
- □ All Innovation Fund proposals must be submitted by <u>5:00 p.m. on</u> May 7, 2014.
- The period for the BIP Innovation Fund demonstration project is June 1, 2014, through September 30, 2015.
- All funds must be expended by September 30, 2015.
- There will be no contract renewals.

- The BIP Innovation Fund will support projects that help mitigate barriers to community-based LTSS in all regions of the State for Medicaid beneficiaries across all ages. The focus of the Innovation Fund is to:
 - Increase the number of individuals served in non-institutional settings;
 - Improve access to community-based LTSS services;
 - Provide stakeholders a role in creating service solutions that have a lasting impact on the LTSS delivery system; and
 - Promote provider expertise by offering opportunities for providers to address barriers in transitioning from institutional to communitybased settings, or assisting individuals to remain living within their communities.

Who May Apply:

- Entities eligible to apply include:
 - Not-for-profit agencies and organizations; and
 - Local government agencies.
- All applicants must be registered as a qualified vendor and have a confirmed NYS vendor identification number at the time of submission. If not enrolled, contact http://www.osc.state.ny.us/vendor management/issues guidance.htm
- Sub-contracting and collaborating organizations may include public (government) and not-for-profit entities within NYS.
- Collaborations require Letters of Agreement specifying services, fees, and responsibilities of the proposed partnership in completing the project which are due at the time of submission. All agreements are subject to review and approval by NYS Department of Health Bureau of Contracting.

Use of Funds:

- Innovation Fund Grant proposals <u>must</u> meet the following BIP requirements:
 - □ Service recipients <u>must be</u> Medicaid beneficiaries;
 - □ Funds <u>must be</u> spent on community-based care that increases offerings, choice or access to non-institutional LTSS; and
 - □ Funds <u>must support</u> an allowable Medicaid expense.
 - The State is exploring adding additional resources that would support innovative proposals that include non-Medicaid beneficiaries.

Use of Funds:

- Innovation Fund grants <u>may not</u> be used for the following:
 - Brick and mortar capital projects;
 - To duplicate existing LTSS;
 - To increase institutional capacity;
 - To match any other Federal funds;
 - To provide services, equipment, or supports that are the legal responsibility of another party under Federal or State law (e.g., vocational rehabilitation or education services) or under any civil rights laws; or
 - To supplant existing Federal, State, local, or private funding of infrastructure or services.

The application should:

- Define the scope of the project and the specific issue(s) to be addressed;
- Specify the significance and impact of the change to the LTSS delivery system;
- Provide a proposed budget, and delineate cost savings over traditional institutionalized care;
- Provide a work plan;
- Explain how the project will be sustained post award, if desired. Up to three extra points will be added to the final score of any application that includes a sustainability plan.
- Include an explanation of how the applicant will identify, track, and maintain a record of Medicaid beneficiaries served through the project.

- Applicants must demonstrate how the proposed innovation will impact rebalancing through one or more of the following BIP related goals:
 - □ Increase in the number of services and/or improvement in access to community-based LTSS;
 - Identify and mitigate barriers to home and community-based LTSS;
 - Increase capacity and/or service utilization of existing programs;and
 - Increase opportunities that make it possible for Medicaid eligible individuals in need of LTSS to remain in their homes and communities or transition out of institutional settings.

Deliverables:

- Specify the measurable desired outcome(s) for the project;
- Submit a project work plan that specifies the timeframe for each milestone from the design phase through the funding end date;
- Specify the methodology for how the project will be evaluated;
- Define how the project will be managed and funded post award;
- Provide an organizational overview or schematic of the key project team members;
- Submit required financial and progress outcome reports within required timeframes; and
- Submit a final project evaluation report three months post project.

Other Clarifications

- The proposals may include home and community-based long term supports and services for all Medicaid populations.
- Medicaid eligible population groups include individuals with physical disabilities, developmental disabilities, mental illness, and other conditions that warrant LTSS regardless of age.
- For purposes of BIP eligibility, CMS defines institutionally based Medicaid LTSS as services provided in nursing facilities, intermediate care facilities, institutions for mental disease (IMD), and psychiatric hospitals that are not IMD.
- No BIP Innovation Funds can be used for institutionally based long term services and supports.
- For BIP purposes, allowable Medicaid expenses means LTSS covered by Medicaid in either the State Plan or waivers.

Other Clarifications

- Applicants must be able to demonstrate that proposed services are Medicaid allowable costs, benefit Medicaid recipients, and are able to verify the Medicaid status of program participants.
- There is no MATCH requirement in the BIP Innovation Fund RFA.
- A range of funding amounts will be considered. Program design rests within the creative boundaries of applicants.
- Organizations may submit more than one proposal.
- Applicants may apply to serve more than 1 region.

Other Clarifications

- The deadline for expending BIP funds is September 30, 2015. The nature of the innovation proposals are unpredictable by definition. In order to allow applicants maximum flexibility the RFA was designed with a contract start date of June 1, 2014. However, applicants' work plans and budgets are not required to span the entire potential 15 month contract term, but they need to fall within the term.
- Page 14 of the RFA will be modified to make it clear that 2 Letters of Support are required.
- Marketing, education and outreach materials are considered allowable communication costs.

- □ All written questions were due last Friday, April 4, 2014.
- ☐ Answers will be posted by April 15, 2014, on the DOH website. http://www.health.ny.gov/funding/rfa/1402140135/index.htm
- □ Applications must be received by 5:00 p.m. on May 7, 2014.
- □ Late applications will not be accepted.

- Applicants must submit 2 original signed applications, 4 copies and an electronic PDF copy of the application with all attachments on a CD or USB flash drive.
- Application packages should be clearly labeled with the RFA name (BIP Innovation Fund) and RFA Number 1402140135.
- Applications will not be accepted via fax or e-mail.

Applications must be submitted to:

KAREN M. AMBROS

OHIP/DLTC

NYS DEPARTMENT OF HEALTH

CORNING TOWER – ROOM 1913

ALBANY, NEW YORK 12237

Payment & Reporting Requirements:

- ☐ The Department may make an advance payment to awardees in an amount not to exceed 25 percent. Page 9 of the RFA will be modified to address this change.
- Awardees will be required to submit monthly invoices and monthly projects reports.
- A final Project Evaluation Report is also required.

Application Content and Format:

Applications must use the format included in the RFA.

http://www.health.ny.gov/funding/rfa/1402140135/index.htm

- Cover Page
- Applicant Organization
- Program Summary/Overview
- Statement of Need
- Project Components/Work Plan
- Project Budget

Application Format:

- ☐ The following materials are provided as attachments:
 - □ Templates for the cover page and for the work plan.
 - Budget instructions and budget format.
 - Vendor responsibility attestation.

Scoring:

- All applications must score an overall minimum of 60 out of 100 points to be considered for funding.
- Applications receiving a score of less than 60 will be removed from consideration.
- Applications should not exceed 20 single-spaced pages, not including the cover page, work plan, budget, and attachments.

Scoring:

Content	Page Count	Maximum Score
Cover Page	1 page or less	Not scored
Applicant Organization	1 page or less	10
Program Summary / Overview	1 page or less	12
Statement of Need	2 pages or less	15
Project Components / Work Plan	10 pages or less	40
Project Budget	Use budget format, plus 2 pages	23

- ☐ The identification and explanation of project goals, objectives and outcomes in quantifiable and measurable terms;
- The evidence and degree to which the need for the project is demonstrated with documented data;
- The degree to which the project develops structural reforms to long term care by assisting Medicaid beneficiaries to transition to noninstitutional care or remain in community-based settings;
- ☐ The evidence to which a specific barrier(s) to the least restrictive community-based LTSS is removed;
- The evidence and degree to which capacity and utilization of community-based services are increased and the specific number of individuals to be reached by the project;

- The evidence and degree to which the project improve system performance, efficiency, and lower costs;
- □ The degree to which the project demonstrates:
 - The stakeholder role in executing a lasting impact on rebalancing Medicaid in NYS;
 - The quality of life, supports and health outcomes for individuals in need of long-term care services;
 - The qualifications, competence and ability of the proposal to achieve project goals.

- Demonstration of the applicant's ability to ensure that funds provide services to Medicaid beneficiaries and that all proposed services are Medicaid allowable costs;
- Outreach efforts to involve appropriate stakeholders in the implementation of the project and to market new or expanded services to the community at large;
- Evidence of an established and viable timeline for implementation;
- Methodology for evaluation of each phase of implementation;
- The degree to which the applicant describes responsibilities and duties of key staff and identifies necessary qualifications;

- A summary of the applicant's past effort(s) to impact the long term care delivery system;
- A description of the ability of the applicant to sustain the project post award, if desired. **Up to three extra points will be added** to the final score of any application that includes a sustainability plan.
- Completeness of the budget;
- Reasonableness of the cost/benefit analysis of the project's budget;
- Effectiveness of the project in reducing long term care costs; and
- Applicant has indicated a financial commitment to cover related project costs not covered by BIP funding.

Review Process:

- The Department will evaluate applications on the merits of proposed activities in their entirety.
- Each application will be reviewed for completeness.
- Applications missing required elements or failing to use the required format may be eliminated or receive deductions.
- □ Page 16 of the RFA will be modified to allow the Department to make partial awards, if warranted.
- Once an award has been made, unsuccessful applicants may request a debriefing of their application.
 - Requests must be received no later than ten (10) business days from date of award or non-award announcement.

Next Steps:

- □ DOH to post questions and answers by April 15, 2014, to http://www.health.ny.gov/funding/rfa/1402140135/index.htm
- □ Applications are due by <u>5:00 p.m. on May 7, 2014</u>.
- Review of applications.
- Announcement of Awards.
- Contracts signed.

- Again, the RFA is subject to NYS procurement rules and therefore any questions submitted during this presentation will not be answered at this time but the responses will be answered by April 15, 2014, at the same time responses to questions received in the BML will be posted.
- ☐ This informational power point will be posted to the MRT web site.

http://www.health.ny.gov/health_care/medicaid/redesign/balancing_incentive_program.htm