

# The Role of Clinical Guidelines in a Managed Long Term Services & Supports Framework

Presented by:

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Webinar Presentation for:



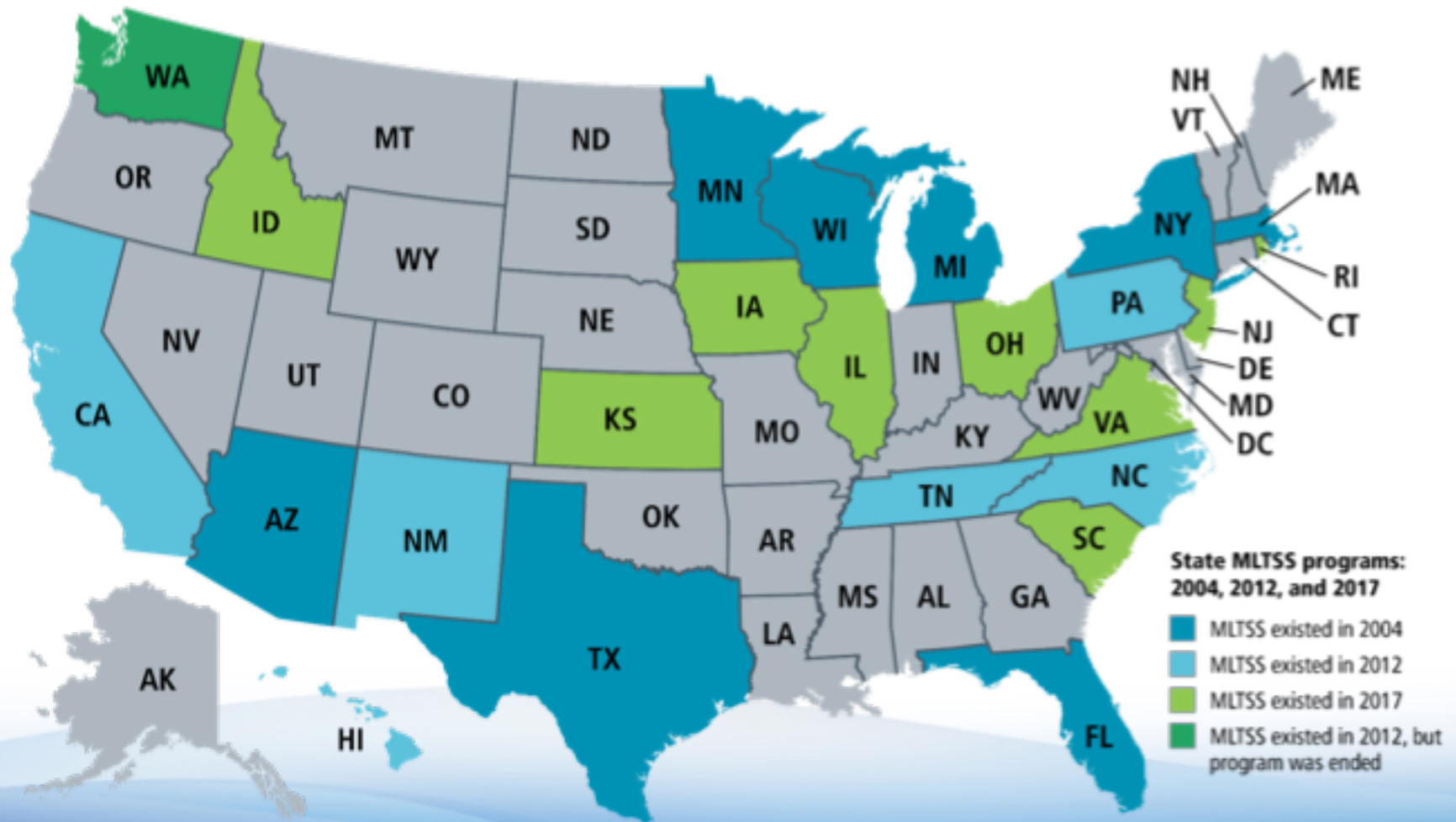
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# Overview

- Introductions
- MLTSS National Landscape
- MLTSS Best Practice Framework
- MLTSS Clinical Guidelines
- MLTSS Clinical Guidelines in Practice
- Questions

# MLTSS National Landscape

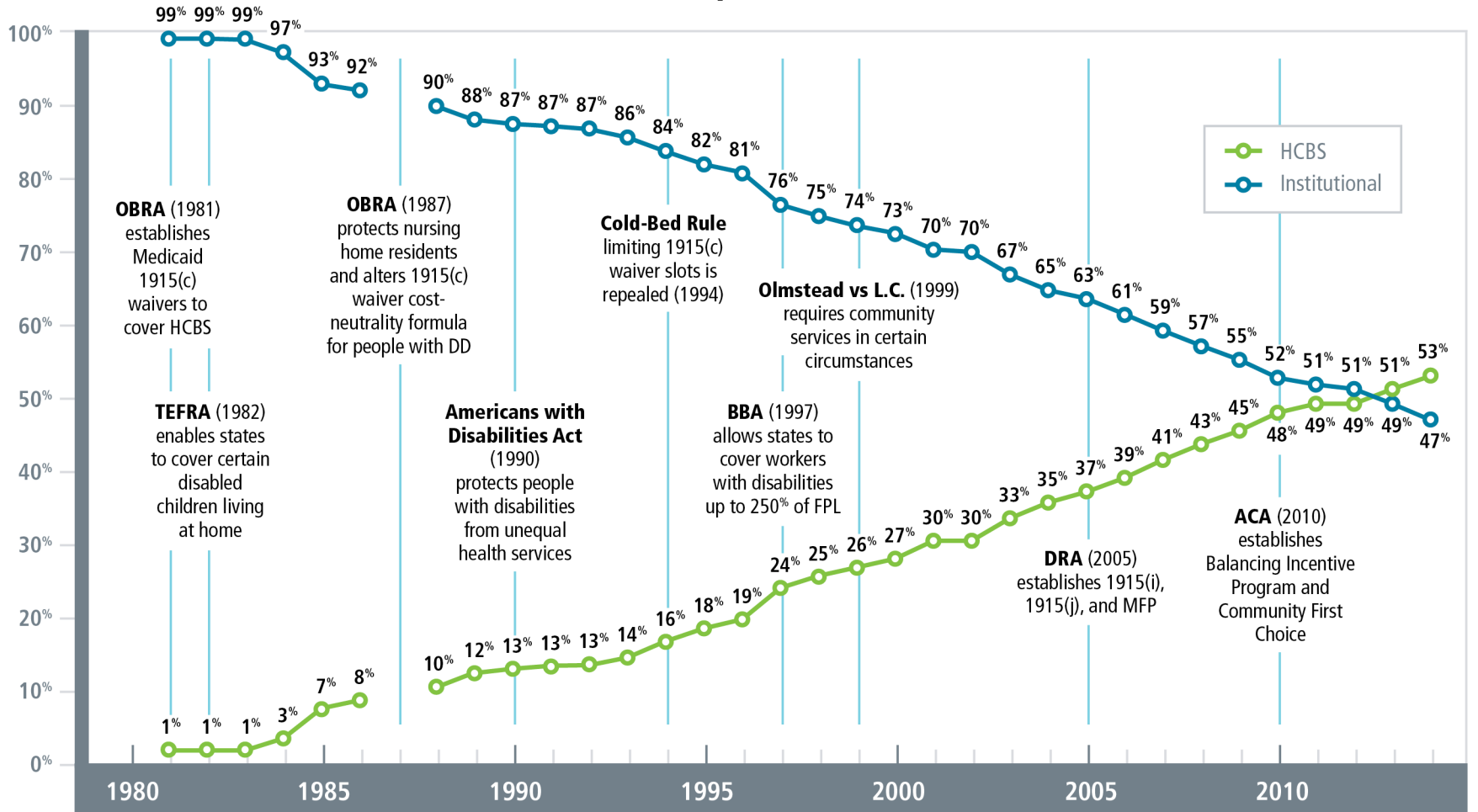
# MLTSS Growth Through 2017



Truven Health Analytics. *The Growth of Managed Long-Term Services & Supports Programs: 2017 Update*. January 29, 2018

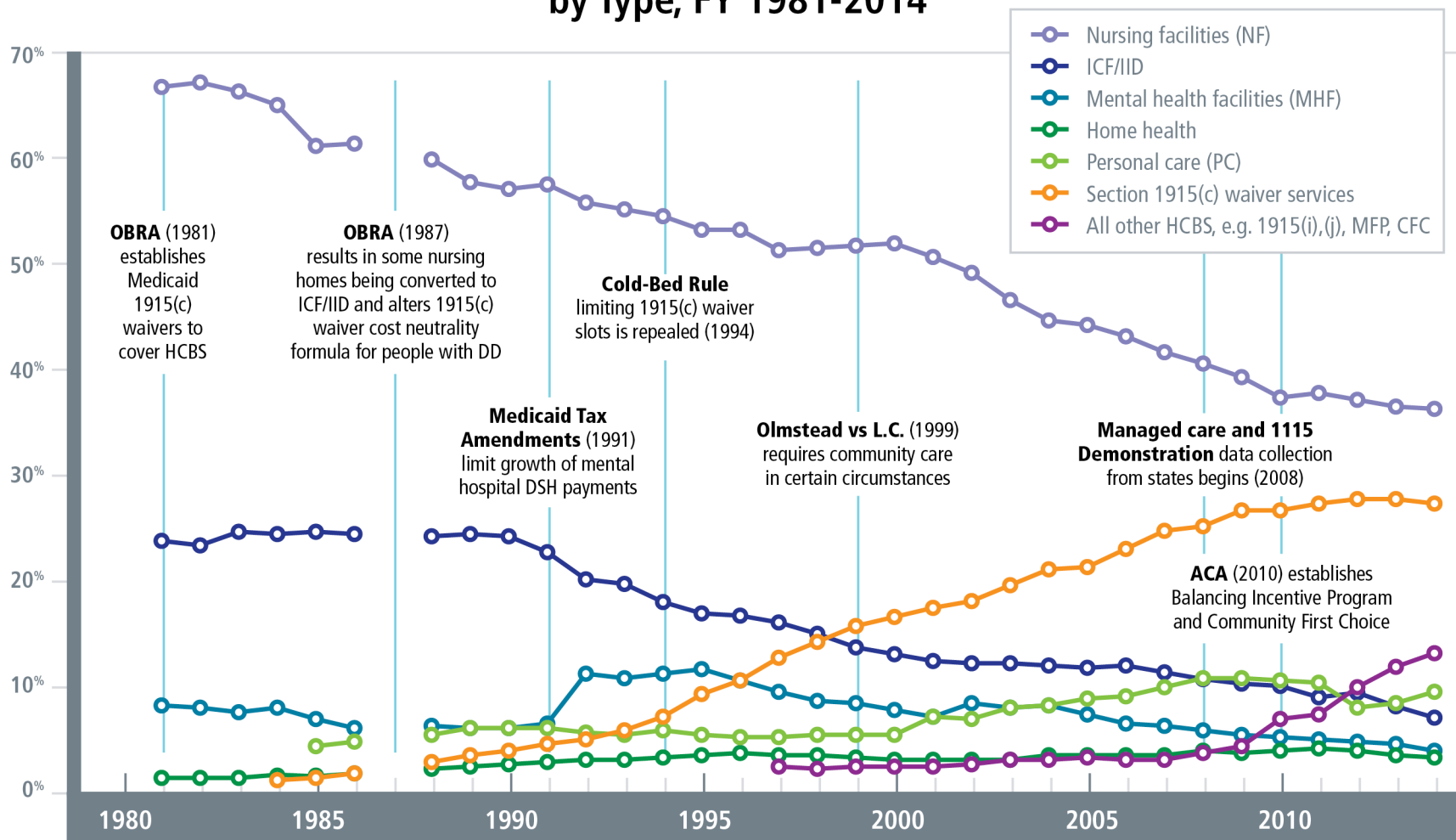
# LTSS Utilization Trends

## Medicaid HCBS and Institutional Expenditures as a Percentage of Total Medicaid LTSS Expenditures, FY 1981-2014



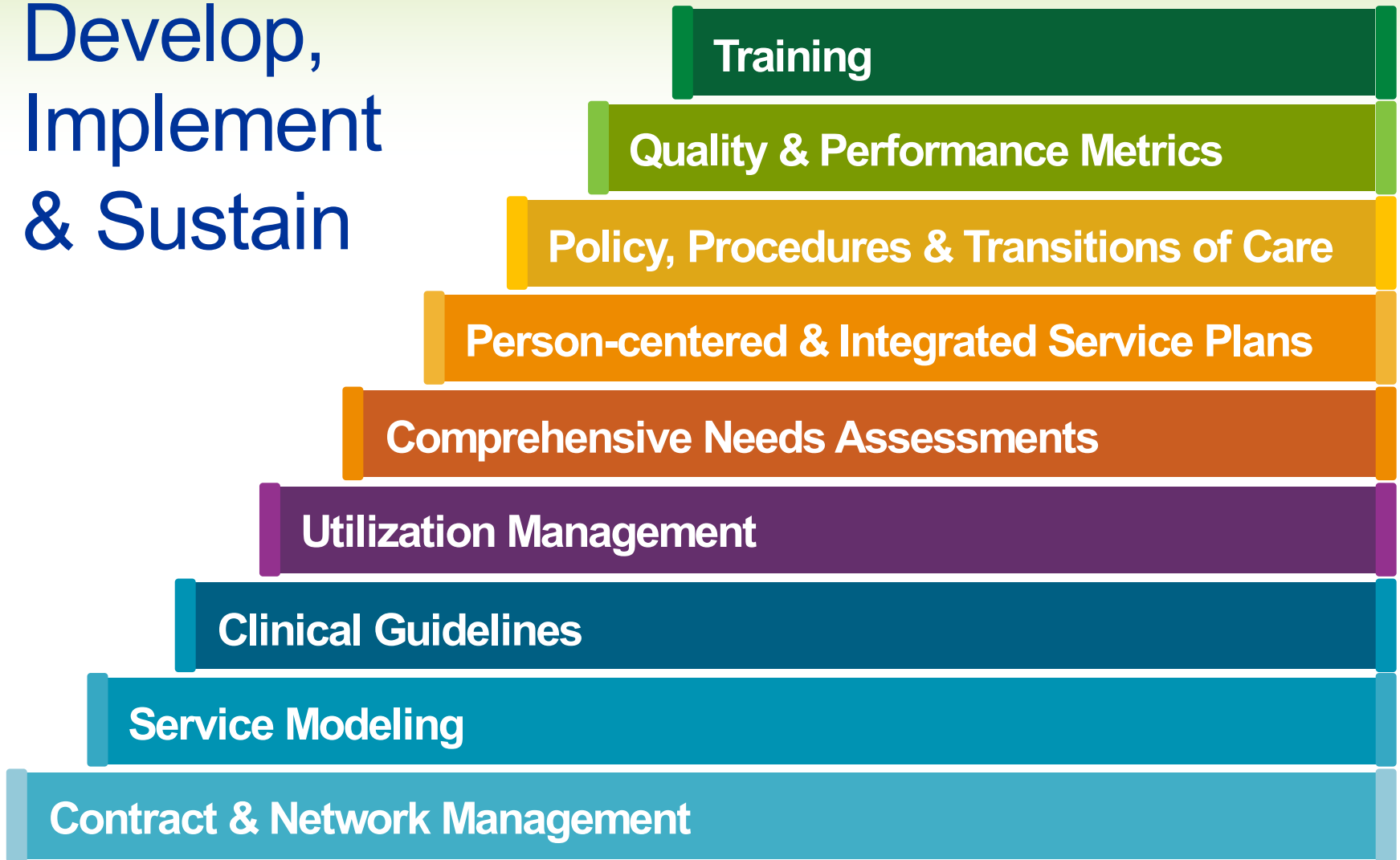
# LTSS Utilization Trends

## Medicaid Service Expenditures as a Percentage of Total Medicaid LTSS Expenditures, by Type, FY 1981-2014



# MLTSS Best Practice Framework

# Develop, Implement & Sustain

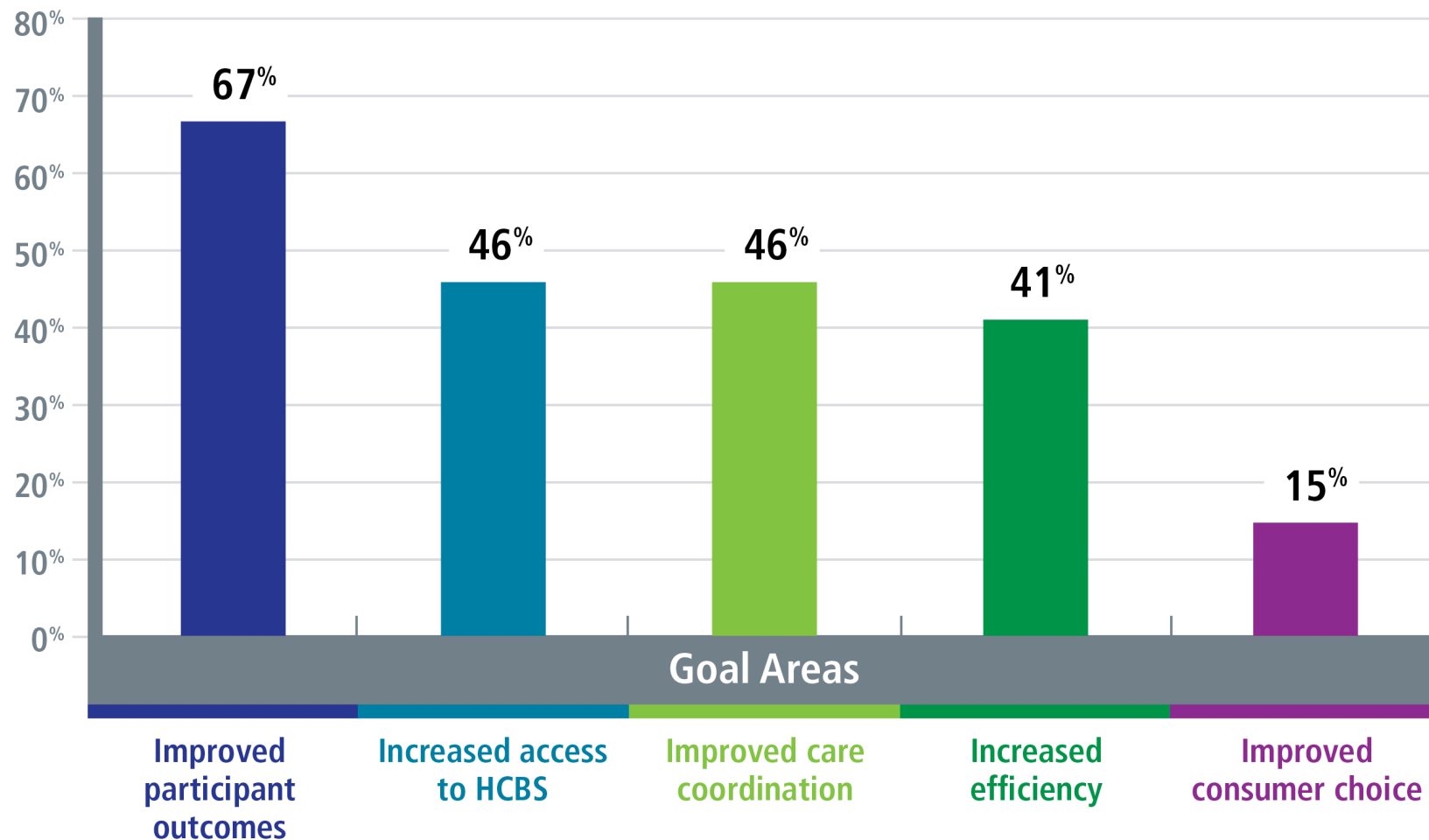




# MLTSS Program Goals: 2017 Snapshot

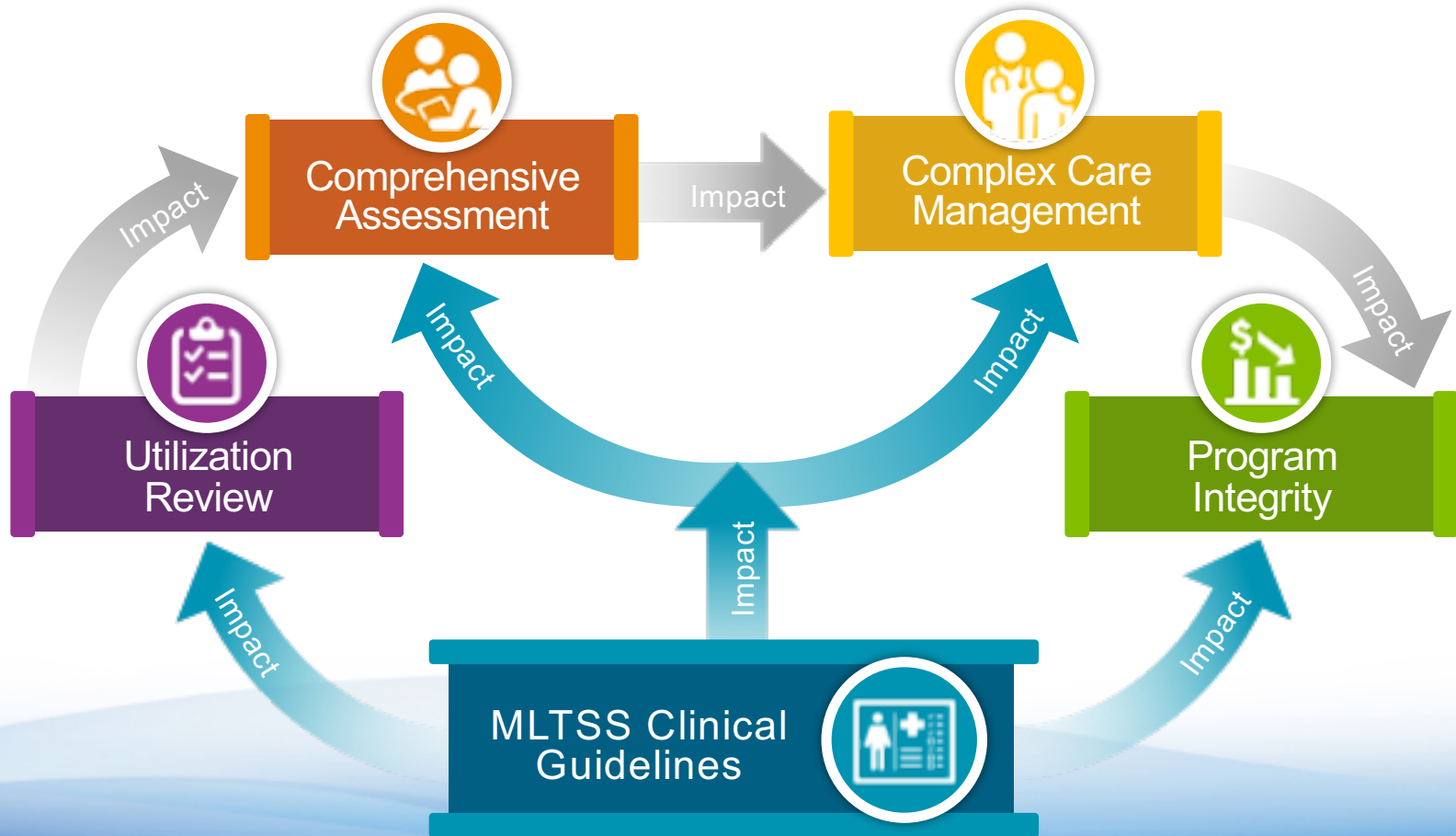
Percentage of programs

## Goal Areas Identified for MLTSS Programs, 2017



# MLTSS Clinical Guidelines

# The Foundation of MLTSS Cost Containment and Quality Improvement



# Purpose of Clinical Guidelines



- **Provides the base for the service**  
(clinical evidence, regulatory, etc.)
- **Details what program will cover**
  - Limits in quantity, frequency or duration
  - Criteria to be met (diagnosis, functional need, etc.)
  - Exclusions may be clinical characteristics or duplications in services
- **Clinical documentation and other information needed to determine medical necessity**

# Clinical Guideline Development and Implementation



LTSS Clinical Guidelines

## Research & Development



## Training & Implementation



## Post-Implementation Quality Assessment



# Research & Development:

## *Topic Research*



- **Identify topic for prior authorization and guideline development**
- **Subject matter review**
  - Literature search
  - Environmental scan
  - Internal subject matter experts
  - Review covered services, policy and regulatory requirements

# Research & Development: *Guideline Development*



## Draft creation

- Using the researched information
  - Synthesize clinical details & criteria
  - Align clinical criteria with regulatory language
- Develop support materials, including:
  - Required forms
  - Tools to determine eligibility (e.g., time for task)



# Research & Development: *Guideline Audience*



## Consider audience when developing drafts

### Guidelines are generally written for providers, however...

Advocates and  
patients/members  
read them



Can be used to  
support PA decisions  
in appeals



If published, can provide  
guidance for clinical criteria  
and documentation  
submission





# Research & Development: *Review Processes*



## ▪ **Internal review**

- Identify internal review team and role
- Executive review

## ▪ **External review**

- Stakeholder engagement, as appropriate
  - Providers
  - Advocates and members



# Research & Development: *Guideline Completion*



## **Process:**

- Final clinical review – executive level medical director
- Editing and formatting
- Cycle set to review and update (e.g., 1 or 2 year mark)
- Executive signoff
- Online publication, if desired

# Research & Development: *Parallel Activities*



## **Prior authorization:**

- Identifying appropriate codes
- Setting up PA flags in claims system so that service claims will not pay unless PA is approved
- Electronic forms and documentation submission preferred
- Assessing clinical capacity for completing reviews (how many members receiving the service, etc.)
  - In-house or outsourced operations
- Cost benefit/savings from PA – i.e., what is the likely denial rate?

# Training & Implementation:

## *Training*



- **Internal staff**
  - Clinical reviewers
  - Administrative staff
- **MLTSS provider trainings**



# Training & Implementation: *Implementation*



## Integration into UM program

- Internal escalation development for:
  - Denials and reconsiderations
  - Unusual situations
  - Appeals

## Program monitoring

- Peer review process
- Inter-rater reliability testing



## Implement when all pieces are ready



# Post-Implementation Quality Assessment



- Evaluation of outcomes
- Continuous quality reviews
- Change management, if appropriate



# MLTSS Clinical Guidelines In Practice



## Inform development and implementation of MLTSS Utilization Management activities

**Utilization review,**  
including prior  
authorization



**Comprehensive  
assessment and  
person-centered  
planning**



**Care coordination/  
complex case  
management**





# Case Study

# Mrs. Martin



- Utilizing in-person **Assessment** to comprehensively evaluate her MLTSS needs and develop person-centered plan



# Mrs. Martin



- Integration of **Care Management** supports to further facilitate independent living



# Mrs. Martin



Prior  
Authorization

- Evaluating a **Prior Authorization** request for home health services
- No skilled nursing need identified by nurse reviewer
- To meet ADL needs consider personal care and adult day program

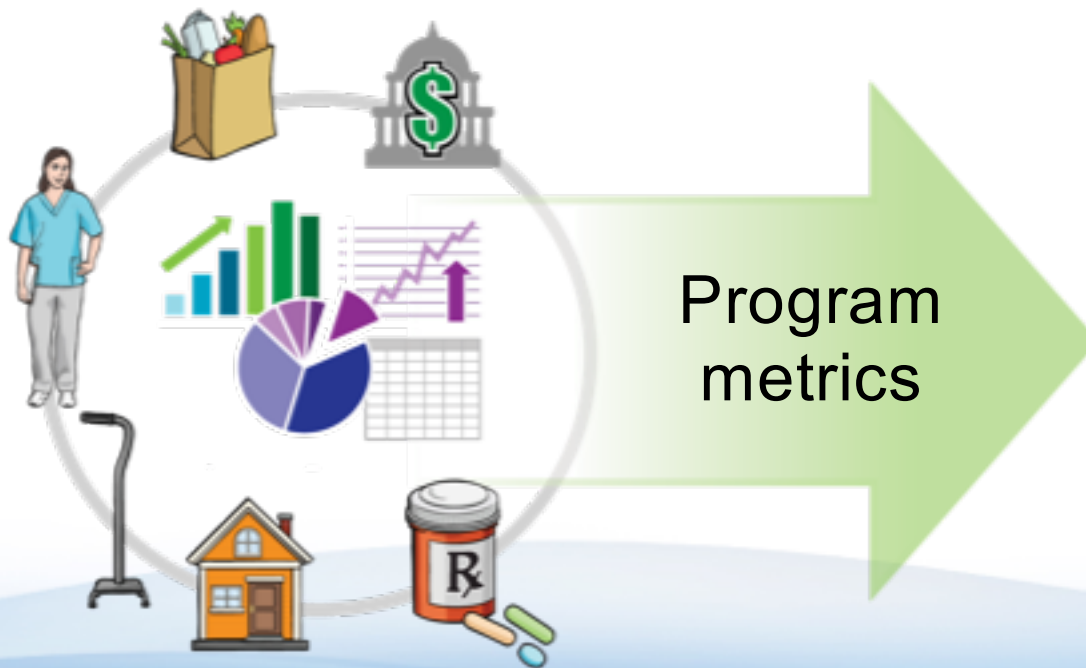


# Mrs. Martin



Program  
Integrity

- Using data gathered to inform **Program Integrity** activities and evaluate home health provider quality



+ Evaluations  
+ Informed data  
= **Improved Quality**

# Questions

# Contacts

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