Core Medical Services Waivers: The New York EMA’s Experience

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Need for Core Services Waiver

• Expanded access to Medicaid and other insurance programs that ensure the availability of core medical services to PLWH in the NY EMA
• A combination of federal (including other Ryan White parts), state, and local funding sources available for Core Medical Services
• Flexibility of allocations to address identified need and service utilization trends
• The following was identified as a significant need:
  • Assistance needed navigating a new system of care and accessing benefits
  • Assistance with accessing critical support services, including housing, food and nutrition services, and emergency financial assistance
Approach to Waiver Submission

- Waiver has been successfully submitted/approved annually since 2013
- Request is responsive to the provisions of the Affordable Care Act (ACA) and changes in the NYS Medicaid program
  - Changes made aimed to meet the core medical service needs of the population
- Based on the result of the Priority Setting and Resource Allocation (PSRA) funding allocation and community planning process
  - Systematic, evidence-driven, representative, and inclusive community planning process to prioritize services and allocate resources
  - Scoring tool to apply budget cuts or increases to service categories as part of scenario and resource allocation
Benefits and Outcomes

• Ground prioritization and allocation process in need and utilization
• Catalyst to reexamine historical allocations to core services
  • Supported decision-making to add and remove service categories
  • Reallocate based on service utilization without needing to consider core v. non-core service
• Services are delivered in accordance with service utilization trends
• Increase commitment to highly needed support services such as housing, food and nutrition, and emergency financial assistance
PSRA Process Changes

Prior Priority Setting Tool: Scoring System

- **Payer of Last Resort**
  - Are there any other funding sources that provide the same or an equivalent service to Ryan White eligible PLWHA?

- **Access/Maintenance in Care**
  - Does the category promote access to OR maintenance in primary medical care?

- **Specific Gaps/Emerging Needs**
  - To what extent does Part A funded service address a specific service gap or service need? Does this service address a newly identified or projected future need?

- **Consumer Priority**
  - Has the category been specifically identified as a priority by PLWH through needs assessment data and/or other data as important and/or in need of additional funding?

- **Score either 1, 3, 5, 8**
  - Zero only used for Core/Non-Core designation
PSRA Process Changes

CURRENT Priority Setting Tool: Scoring System

• Payer of Last Resort
  o Are there any other funding sources that provide the same or an equivalent service to Ryan White eligible PLWHA?

• Access/Maintenance in Care
  o Does the category promote access to OR maintenance in primary medical care?

• Specific Gaps/Emerging Needs
  o To what extent does Part A funded service address a specific service gap or service need? Does this service address a newly identified or projected future need?

• Consumer Priority
  o Has the category been specifically identified as a priority by PLWH through needs assessment data and/or other data as important and/or in need of additional funding?

• Score either 1, 3, 5, 8
  o Zero only used for Core/Non-Core designation
### PSRA Tool Change

#### Snapshot of Previous Tool

<table>
<thead>
<tr>
<th>Service Category</th>
<th>Criteria Factors (see definitions below)</th>
<th>Payer of Last Resort</th>
<th>Access to Care and/or Maintenance in Care</th>
<th>Consumer Priority</th>
<th>Specific Gap/Emerging Need</th>
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Trends in Allocations

FY’19, 59.1%

FY’19, 40.9%
Overall Impact

- Modernized and strengthened the portfolio of services including increasing allocations to address social determinants of health

- Bridges service gaps and continues to meet clients’ needs through funding social support services

- Supports the EMA’s overall HIV Care Continuum
  - Record high rates of viral load suppression among PLWH engaged in care and record low new infections and diagnoses, including impacting rates among gay, bisexual, and other MSM

- Maximizes funding to best address the needs of PLWH in the NY EMA
  - Record Underspending (generally less than 1% unspent)
Lessons Learned

• Make sure your waiver is grounded in data
• Make everything very clear
  • The people reviewing the waiver applications don’t know the intricacies of your jurisdiction so you need to make the connections for them
• Learn from each year’s waiver to make the next one stronger
• Start your waiver early – it takes longer to gather up all the loose ends than you think
• If you are unsure of how strong your waiver application is, consider creating two allocations