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October 3, 2014

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## From NASUAD

### 2014 HCBS Conference Evaluation and Materials are Now Available

The online [evaluation](#) of the 2014 National HCBS Conference is now available. Please take a moment to provide your thoughts about the conference by filling out this [evaluation](#). The evaluation should take about 10 minutes. Your feedback and support will help shape future conferences.

Conference presentations are now online at [www.nasuad.org](http://www.nasuad.org). They are also available in the HCBS conference app. In the app, simply select the session you are interested in (from the agenda button) and you will find the PDF file loaded after the session description.

If you do not see a PowerPoint presentation listed, it is because a copy of that presentation was not shared with NASUAD. Staff will be working on collecting the missing presentations. Thank you for your understanding!

Make sure to save the date for the 2015 HCBS Conference from **August 31 - September 3, 2015** in Washington DC.

[Click here](#) to take the conference evaluation.

[Click here](#) to view the conference materials.

[Click here](#) to contact Byron Phillips if you see that your own presentation is missing.

### 2014 State of the States in Aging and Disability Report Released

In 2014, NASUAD surveyed state aging and disability agencies regarding significant policy, fiscal, and operational issues occurring within each state. The survey collected detailed information about the structure of agencies, the supports provided, and the populations served by aging and disability agencies. Of particular interest is the summary of services provided in Medicaid waivers across the country. All of this information is presented in the charts found in the document linked below.

Since 2008, states have struggled with staff reductions, furlough days, and increasing pressure to make programs function with fewer resources while ensuring delivery of services. These

**\*Mathematica: Webinar:  
Implementation of WIOA**  
**\*NCOA Webinar: Using SNAP  
Benefits and Recertification**  
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problems, highlighted in our 2011 and 2012 surveys, remain true today. The aging network continues to face challenges with restructuring, reductions in staffing levels, and limited funding. This survey represents a yearlong research project based on the essential contributions of state aging and disability agencies whose staff completed a lengthy survey and participated in follow up interviews.

[Click here](#) to view the complete report.

## **MIPPA Outreach Materials for Low-Income Medicare Beneficiaries with Disabilities**

In collaboration with consumers and professionals in the aging and disabilities network, NASUAD has developed outreach materials to promote Medicare low-income subsidies to beneficiaries with disabilities. NASUAD created 3 posters to educate Medicare beneficiaries with disabilities about subsidies that may help them save on Medicare costs. NASUAD also developed a Tip Sheet for MIPPA outreach professionals to use as a quick reference tool about Medicare low-income subsidies and referral resources. The posters include an editable space wherein outreach professionals may add contact information for their preferred referral source.

[Click here](#) to view or download the Posters and Tip Sheet.

## **From the Administration**

### **Administration for Community Living**

#### **International Day of Older Persons 2014: Expanding the Conversation on Domestic Violence**

The Administration for Community Living (ACL) released a statement by Administrator Kathy Greenlee regarding International Day of Older Persons on October 1, 2014. "A The theme of this year's International Day of Older Persons is Leaving No One Behind: Promoting a Society for All. In order to ensure that we do not leave older people behind, we must first expand our conversations about domestic violence to include the experiences of victims in later life. We must provide protection and support for survivors of domestic violence of all ages. And, as I have said before, we must lift up the voices of survivors and let them be our guides. Only by listening to their experiences will we educate ourselves and one another about the realities of domestic violence."

[Click here](#) to view entire blog post.

## ACL Awards States with No Wrong Door Planning Grants

ACL announced that 24 states and Guam have received funding to engage in comprehensive statewide planning related to a no wrong door (NWD) LTSS system. NWD systems are intended to provide individuals with comprehensive, easily accessible information about a wide range of public and private LTSS. They are also intended to serve as an entry point to a variety of LTSS programs, including Medicaid, OAA, and other resources. The NWD planning grants will provide states with resources to engage in a comprehensive one-year planning process that identifies key activities that the state should perform in order to implement a NWD system. The grants are also intended to facilitate a comprehensive stakeholder engagement process across the state that includes individuals who use LTSS, service providers, advocates, and other affected parties.

[Click here](#) to learn more information and a view a list of awardees.

## 2014 IACC Call for Nominations

The Interagency Autism Coordinating Committee (IACC), is seeking nominations of individuals to serve as non-federal public members on this committee. Nominations of new non-federal public members are encouraged, but current non-federal public members may also be re-nominated to continue to serve. Among other duties, the Committee will monitor autism spectrum disorder research, and to the extent practicable, services and support activities, across all relevant Federal departments and agencies, including coordination of Federal activities with respect to autism spectrum disorder. Nominations are due by midnight EST **Friday, November 14.**

[Click here](#) to learn more about the committee and nomination process.

## Centers for Medicare & Medicaid Services

### Managed Care Rate-Setting Guidance

On Tuesday, September 30, CMS released managed care rate-setting guidance for States' 2015 capitation rates. This follows on CMS' 2014 guidance, which at that time applied only to the capitation rates for States' new adult/expansion population. This guidance will be applicable to all capitated rates for health plans which take effect on or after 2015, both for historic Medicaid populations as well as new adult populations,. CMS expects that actuarial certifications will include the following information:

- General program information
- Data sources
- Projected benefit costs
- Projected non-benefit costs
- Rate range development
- Risk and contractual arrangements
- Other considerations as appropriate

The guidance is available [here](#).

## Medicare Open Enrollment Period

The Medicare program's annual open enrollment period begins October 15, 2014. During open enrollment (**October 15 through December 7**), Medicare beneficiaries can make changes to their Medicare Advantage coverage or their prescription drug plans. Beneficiaries also have the option to change from the traditional Medicare fee-for-service plan to a private Medicare Advantage plan (or vice versa) during this time period. For more information about Medicare open enrollment, please visit [www.medicare.gov](http://www.medicare.gov).

## Medicaid Innovation Accelerator Program: Virtual Meeting

The Medicaid Innovation Accelerator Program (IAP) recently held three in-person meetings states and stakeholders shared their thoughts and feedback on the new IAP. A fourth meeting will be held virtually in a webinar. In this webinar, you will learn more about the IAP and have an opportunity to share feedback on the types of technical assistance and tools that would be helpful in accelerating Medicaid innovation efforts.

### October 9, 2014

12:30-2:30 PM EDT

Conference Call: 1-877-267-1577

PIN: 991 395 924

[click here](#) to register.

For more information on the existing body of federal guidance and information related to delivery system innovation, click here for the [IAP page](#).

Click here to view new Fact Sheet called [Making the Case for IAP](#).

## Department of Labor

### National Disability Employment Awareness Month

Held each October, National Disability Employment Awareness Month (NDEAM) is a national campaign that raises awareness about disability employment issues and celebrates the many and varied contributions of America's workers with disabilities. The theme for 2014 is "Expect. Employ. Empower."

[Click here](#) for a resource toolbox, including posters, sample press releases and sample social media updates.

### Disability Employment Initiative Grants Awarded to Six States

U.S. Department of Labor (DOL) has announced \$14,837,785 in grants to six states to improve employment opportunities for adults and youth with disabilities. The grants to California, Illinois, Kansas, Massachusetts, Minnesota and South Dakota are being awarded as part of the Disability Employment Initiative (DEI), funded by DOL's Employment and Training Administration and Office of Disability Employment Policy.

These grants will help expand the capacity of local American Job Centers to improve employment outcomes for youth and adults

with disabilities by increasing their participation in existing career pathway systems and programs that build on partnerships among local educational institutions, businesses and disability advocates. This is the fifth round of funding through the DEI, which now supports 37 projects in 26 states.

[Click here](#) to the DOL news release.

## Department of Health and Human Services

### OIG Scrutinizes State MCO Access Standards

A new report from the Office of the Inspector General (OIG) of the Department of Health and Human Services examines state standards and requirements for network adequacy and access to care. The OIG report was based on surveys and interviews of state officials, CMS employees, and External Quality Review Organizations. In the report, OIG notes that state standards on access to care vary widely, and that state oversight of health plans also varies. OIG issued, and CMS agreed with, the following four recommendations to CMS:

- Strengthen its oversight of State standards and ensure that States develop standards for key providers;
- Strengthen its oversight of States' methods to assess plan compliance and ensure that States conduct direct tests of access standards;
- Improve States' efforts to identify and address violations of access standards; and
- Provide technical assistance and share effective practices.

[Click here](#) to view the full report.

## Department of Homeland Security

### A New Webinar Series: Emergency Management and Preparedness - Including People With Disabilities

The Office of Disability Integration & Coordination (ODIC) at the Federal Emergency Management Agency (FEMA) and the Americans with Disabilities Act (ADA) National Network, led by the Pacific ADA Center, will be offering monthly webinars. The first webinar of the series will explore how the effective communication provisions of the Americans with Disabilities Act apply in emergency situations. What happens when interpreters aren't available? What technologies are important to incorporate during the notification, sheltering, evacuation and recovery stages? Implementation and culturally affirmative communication strategies will also be discussed.

#### **ADA National Network Learning Session: Effective Communications for Deaf and Hard of Hearing**

October 9, 2014

Time: 2:30pm EST

[Click here](#) to register.

[Click here](#) to view all of the sessions for the coming year.

## Government Accountability Office

### **GAO Examines Potential Savings from Dual Eligible Coordination**

On September 29, the Government Accountability Office (GAO) publicly released an August report that questions whether dual eligible integration activities will lead to health care cost savings.

In the report, the GAO examined claims, expenditure, and quality data from Dual Eligible Special Needs Plans (D-SNPs) during 2009. D-SNPs are managed care entities that are designed to oversee and coordinate care between Medicare and Medicaid for individuals enrolled in both programs. The GAO notes that, based upon their research, D-SNPs with higher levels of Medicare and Medicaid integration performed better on quality outcomes but did not reduce utilization of costly Medicare services. The GAO concludes that, based on their research, CMS projected savings from the Financial Alignment Demonstration and other initiatives to integrate care for dual eligible may be overstated.

The GAO report is [available here](#).

## From Congress

### **Congress Seeks Information on Managed Care Best Practices**

On September 25, a bipartisan, bicameral group of legislators sent a letter to organizations representing managed care plans that contract with Medicaid agencies. The letter, signed by the Chairmen and Ranking Members of both the House Energy and Commerce Committee as well as the Senate Finance Committee, seeks input on a variety of program and policy issues. Notably, the lawmakers request information about best practices from around the country on topics such as:

- Capitation rate-setting processes and procedures;
- Network adequacy and provider recruitment;
- Metrics for evaluating quality of care;
- Encounter and data reporting; and
- Effective methods for care coordination.

[Click here](#) to view the full letter.

### **Report and Legislation Address Poverty among People with Disabilities**

Senator Tom Harkin (D-IA), Chairman of the Senate Health, Education, Labor, and Pensions (HELP) Committee, released a new report on barriers to economic security for people with disabilities. This report, *Fulfilling the Promise: Overcoming Persistent Barriers to Economic Self-Sufficiency for People with*

Disabilities, shares findings from an investigation with 400 people with disabilities who have experienced poverty. Their experiences identified six major factors that limit the ability of people with disabilities to gain employment and contribute to a disproportionate number living in poverty. These six themes include: (1) the increased economic and social costs of having a disability; (2) the fear that earning or saving too much money will result in termination of government benefits and the loss of needed health care, housing, and food; (3) the inability to save for emergencies and large anticipated expenses; (4) the difficulties in navigating a complex bureaucratic system in order to obtain basic needs; (5) the alienation from the economic mainstream caused by a lack of adequate transportation; and (6) difficulties finding accommodating workplaces and overcoming persistently low expectations, pay and employment discrimination.

In conjunction with the release of the report, Harkin introduced three new bills as part of his "Access for All" agenda. The bills include the Universal Home Design Act that would increase the availability of accessible housing for individuals with disabilities and would cover single family houses and townhouses (new construction); the Accessible Transportation for All Act that would expand access to accessible transportation options for individuals with disabilities; and the Exercise and Fitness for All Act that would encourage exercise and fitness service providers to provide exercise and fitness equipment that is accessible to individuals with disabilities.

To access the report and summaries of the legislation, visit <http://www.help.senate.gov/>.

## From Other Organizations

### AARP Public Policy Institute

#### **New Blog Post on Adult Day Services**

The AARP Public Policy Institute has released a new [blog post](#) on adult day services (ADS). Lynn Friss Feinberg writes that that ADS provides supportive services for both the adult with functional limitations and their family caregiver. With more consumers rejecting nursing homes in favor of home and community-based services, ADS can help build a better person- and family-centered system of long-term services and supports in the community.

[Click here](#) to read the blog post.

### Kaiser Family Foundation

## Fact Sheet Outlines the Costs and Coverage of Part D

The Kaiser Family Foundation (KFF) recently released a fact sheet providing an overview of the Medicare prescription drug benefit (Part D). Part D is outpatient prescription drug coverage for anyone with Medicare available only through private companies, and can be bought as a stand-alone plan with Original Medicare or as part of a Medicare Advantage plan, known as an MA-PD.

According to the fact sheet, 37 million people with Medicare are enrolled in a Part D plan, and in 2015, 1,001 Part D plans will be offered. Next year, the base premium for Part D plans will be \$33.13, and the standard plan in 2015 will have a \$320 deductible.

During Fall Open Enrollment, from October 15 to December 7, beneficiaries can make changes to their Medicare drug coverage.

[Click here](#) to view the full fact sheet.

## Mathematica Policy Research

### Webinar: Implementation of WIOA: Lessons from Research on Employment

On **October 7th, at 1:30PM EST**, Mathematica Policy Research will be holding a free webinar. Since WIOA has been signed into law, states need to create a comprehensive, coordinated, and performance-based plan to expand employment for people with disabilities in the state. This webinar will share proven best practices, describe policies that work, and also provide examples of practices that will lead to wastes of time and money.

[Click here](#) to register for the webinar.

## National Council on Aging

### Webinar: Using SNAP Benefits and Recertification

On **Oct. 29 at 3 p.m. EST**, the National Council on Aging and the Center on Budget and Policy Priorities will be hosting the final webinar in their 4-part series on helping older adults apply for the Supplemental Nutrition Assistance Program (SNAP). Presenters discuss strategies to help seniors use SNAP, the process for recertification of benefits, and resources to help you with outreach and enrollment.

[Click here](#) to register.

## Events

## 2014 Consumer Voice National Conference

Join the Consumer Voice in the Washington, DC on **November 15, 2014 - November 18, 2014** for a truly one-of-a-kind experience that will include the best speakers in the field, many opportunities to network with your colleagues and time to interact directly with long-term care consumers.

A block of rooms have been reserved from November 15, 2014 - November 18, 2014. The special room rate will be available until Thursday, October 16th or until the group block is sold out, whichever comes first. [Click here](#) for more accommodation information.

## Friday Update Archive

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