South Carolina Department of Health & Human Services

HIV/AIDS 1915(c) HCBS Waiver

Peter D. Liggett, Ph.D.
Deputy Director, Behavioral Health & Long Term Living
August 15, 2018

SCDHHS Long Term Living Mission

- To provide cost-effective alternatives to institutional placement for individuals with long-term care needs, allowing them to remain in community environments.

Community Long Term Care (CLTC) Timeline

- **1984:** Elderly and Disabled waiver (2006, *Community Choices*)
- ***1988: HIV/AIDS waiver***
- **1989:** Palmetto SeniorCare *(2003, became a SC Medicaid State Plan service)*
- **1990:** Children's Personal Care Aide (CPCA)
- **1991:** Intellectually Disabled/Related Disabilities (ID/RD)
- **1994:** Mechanical Ventilator Dependent waiver
- **1995**: Head and Spinal Cord Injuries (HASCI)

South Carolina's Current Landscape

- SC's population = 5 million
- Medicaid enrollment = 1.1 million
- Approximately 20,000 residents living with HIV
  - 71% are male
  - 29% are female
  - 47% are 50 and older
  - 24% are 40-49 years of age
  - 17% are 30-39 years of age
  - 12% are 20-29 years of age
  - 171 individuals are 0-19 years of age
- African-Americans make up 70% of HIV population; 20% are white men

HIV/AIDS Waiver Criteria

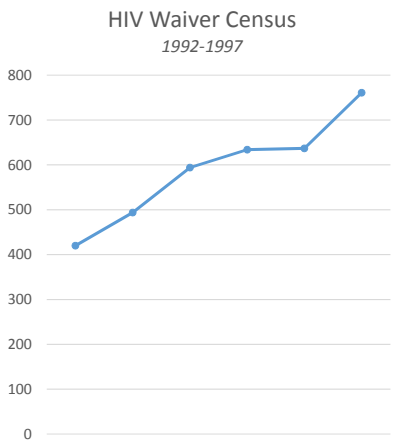
- Admission into the HIV/AIDS Waiver requires individuals to:
  - Be at-risk for hospitalization certified by the patient's physician.
  - Have a diagnosis of HIV or AIDS.
  - Have a CD4 count below 500 or a history of a CD4 count below 500.
  - Be currently located in SC or intend to locate in SC.
- Exceptions to criteria may be granted by the state with certification of risk for hospitalization by physician.
- *There is no age requirement or functional needs (i.e., activities of daily living) dependencies*.

Cluster of Differentiation 4 (CD4) Considerations

- Early in the waiver's history, CD4 counts among participants were very low (below 500) for most. It was rare to have a patient that did not meet the CD4 count requirement for the program.
- As medications were developed and widely used, applicants' CD4 values were consistently above the minimum (500) required for entry.
- Consideration was given to using viral load lab values rather than CD4 counts but no changes were made.
- Developed a process for level of care exceptions when the participant did not meet all the required criteria.
- The exception is mainly based on need and if the participant specifically needs a CLTC waiver service. This includes waiver enrollment to receive Medicaid benefits.

30 Years of the SCDHHS HIV/AIDS 1915(c) Waiver

First Decade: 1988-1997



- Waiver focused on psycho-social support.
- Enrollment increased ~19% per year.
- Six-month average length of stay.
- Agency involved in HIV/AIDS advocacy & support groups for recruitment.
- Average age at enrollment was 36, with 67 children under age 18.
- Not intended to be a disease management approach.

First Decade: 1988-1997

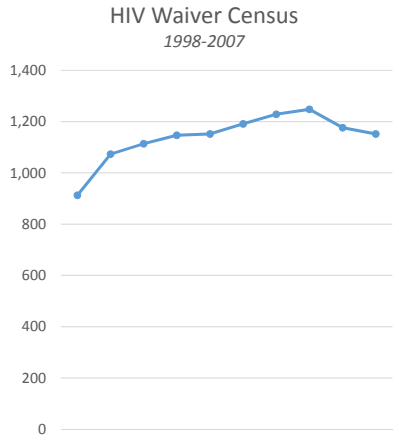
Waiver Services

- **High Utilization Services**
  - Counseling
  - Case Management
- **Low Utilization Services**
  - Adult Foster Care
  - Chore/Home Maintenance
  - Environmental Adaptations/Home Modifications
  - Home Delivered Meals
  - Mental Health Services
  - Personal Care
  - Skilled Nursing

First Decade: 1988-1997

- Average per-person per-year (PPPY) spending was $1,400 over the decade, peaking in 1995 at $1,600.
- Counseling had the lowest PPPY spending at $430 with 100% utilization.
- Personal Care PPPY spending averaged $2,315 with 8% utilization.

Second Decade: 1998-2007



- Waiver shifted to medical and in-home support.
- After initial increases, enrollment flattened and then declined.
- Length of stay increased to 10 months.
- Involvement in HIV/AIDS groups declined.
- Average age is 41 at enrollment, with 38 children under age 18.

Second Decade: 1998-2007

Waiver Services

- **High Utilization Services**
  - Case Management
  - Prescribed Drugs
  - Home Adaptation (Pest Control)
- **Low Utilization Services**
  - Adult Foster Care
  - Attendant Care
  - Chore/Home Maintenance
  - Counseling
  - Home Delivered Meals
  - Medical Equipment/Supplies (IS & Nutritional Supplements)
  - Nutritional Counseling/Assistance
  - Personal Care
  - Psychologist Services
  - Skilled Nursing

Second Decade: 1998-2007

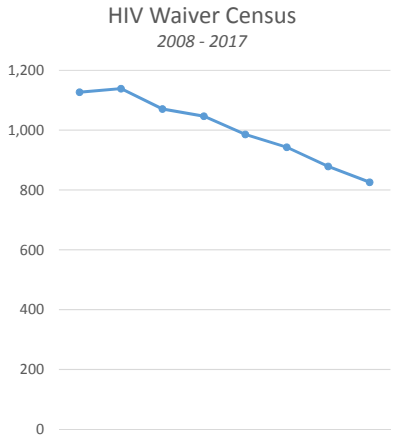
Waiver Changes

- 1998
  - Added extra prescription drug coverage
  - Removed counseling in favor of in-home services
- 2000
  - Added Attendant Care, a self-directed in-home service
- 2001-2006
  - Fine-tuned the in-home service offerings, breaking out Personal Care I & II

Second Decade: 1998-2007

- Average per-person per-year (PPPY) spending was $3,300 over the decade, peaking in 2005 at $4,200.
- *Case Management* had 100% utilization with a PPPY average of $670.
- *Prescribed drugs* had 85% utilization with a PPPY average of $1,900.
- *Personal Care* PPPY spending averaged $2,600 with 12% utilization.

Third Decade: 2008-2017



- Enrollment declined an average of 4% per year.
- Length of stay increased to 11 months.
- Average age at enrollment was 48, with only six children under the age of 18.

Third Decade: 2008-2017

Waiver Services

- **High Utilization Services**
  - Case Management
  - Prescribed Drugs
  - Personal Care
- **Low Utilization Services**
  - Attendant Care
  - Companion Services
  - Environmental Adaptations/Home Modifications
  - Home Delivered Meals
  - Private Duty Nursing
  - Specialized Medical Equipment and Supplies

Third Decade: 2008-2017

- After being fine-tuned in the previous years, the service package is virtually unchanged.
- Level of Care exceptions granted related to CD4 counts increased because of the efficacy of drugs.
- Extra prescription coverage has been moved to the SC Medicaid State Plan in 2017.
- Utilization of Personal Care services grows every year.

Third Decade: 2008-2017

- Average per-person per-year (PPPY) spending is $4,500 over the decade, peaking in 2016 at $5,500.
- *Case Management* has 100% utilization with a PPPY average of $744.
- *Prescribed drugs* has 25% utilization with a PPPY average of $4,000. There were sharp increases in PPPY in 2010, 2012 and 2016.
- *Personal Care* PPPY spending averages $4,800 with 22% utilization.

The Future?

- Enrollment expected to continue to decline for this waiver.
- Moving prescription drug coverage to the SC Medicaid State Plan may decrease participation or need for the waiver altogether.
- People with HIV are living longer and healthier lives than in previous decades; as they become older and frailer, they may become eligible for the Community Choices waiver.
- The name…if you're in this waiver, your diagnosis can be known.

