

Assembly Bill No. 664

CHAPTER 367

An act to amend Section 14186.36 of the Welfare and Institutions Code, relating to Medi-Cal.

[Approved by Governor September 30, 2015. Filed with
Secretary of State September 30, 2015.]

LEGISLATIVE COUNSEL'S DIGEST

AB 664, Dodd. Medi-Cal: universal assessment tool report.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services, including, among other services, home- and community-based services. The Medi-Cal program is, in part, governed and funded by federal Medicaid Program provisions.

Existing law, until July 1, 2017, requires the State Department of Health Care Services, the State Department of Social Services, and the California Department of Aging to establish a stakeholder workgroup, as prescribed, to develop a universal assessment process, including a universal assessment tool, to be used for home- and community-based services. No later than March 1, 2014, existing law requires the State Department of Health Care Services, the State Department of Social Services, and the California Department of Aging to report to the Legislature on the stakeholder workgroup's progress in developing the universal assessment process and to identify the counties and beneficiary categories for which the universal assessment process may be implemented. No sooner than January 1, 2015, upon completion of the design and development of that universal assessment tool, existing law authorizes managed care health plans, counties, and other home- and community-based services providers to test the use of the tool for certain beneficiaries in no fewer than 2, and no more than 4, specified counties if certain conditions have been met. No later than 9 months after the implementation of the universal assessment process, existing law requires the State Department of Health Care Services, the State Department of Social Services, and the California Department of Aging, to report to the Legislature on the results of the initial use of the universal assessment process.

This bill would extend the operation of these provisions until September 1, 2018. The bill would instead require the State Department of Health Care Services, the State Department of Social Services, and the California Department of Aging to report to the Legislature on the stakeholder workgroup's progress no later than December 1, 2016. The bill would instead require the State Department of Health Care Services, the State Department of Social Services, and the California Department of Aging to report to the

Legislature on the results of the initial use of the universal assessment process no later than 15 months after the implementation of the universal assessment process. The bill would require this report to include, among other things, findings from consumers assessed using the universal assessment tool regarding their satisfaction of the universal assessment process.

The people of the State of California do enact as follows:

SECTION 1. Section 14186.36 of the Welfare and Institutions Code is amended to read:

14186.36. (a) It is the intent of the Legislature that a universal assessment process for LTSS be developed and tested. The initial uses of this tool may inform future decisions about whether to amend existing law regarding the assessment processes that currently apply to LTSS programs, including IHSS.

(b) (1) In addition to the activities set forth in paragraph (9) of subdivision (a) of Section 14186.35, county agencies shall continue IHSS assessment and authorization processes, including making final determinations of IHSS hours pursuant to Article 7 (commencing with Section 12300) of Chapter 3 and regulations promulgated by the State Department of Social Services.

(2) No sooner than January 1, 2015, for the counties and beneficiary categories specified in subdivision (e), counties shall also utilize the universal assessment tool, as described in subdivision (c), if one is available and upon completion of the stakeholder process, system design and testing, and county training described in subdivisions (c) and (e), for the provision of IHSS services. This paragraph shall only apply to beneficiaries who consent to the use of the universal assessment process. The managed care health plans shall be required to cover IHSS services based on the results of the universal assessment process specified in this section.

(c) (1) No later than June 1, 2013, the department, the State Department of Social Services, and the California Department of Aging shall establish a stakeholder workgroup to develop the universal assessment process, including a universal assessment tool, for home- and community-based services, as defined in subdivision (b) of Section 14186.1. The stakeholder workgroup shall include, but not be limited to, consumers of IHSS and other home- and community-based services and their authorized representatives, managed care health plans, counties, IHSS, MSSP, and CBAS providers, area agencies on aging, independent living centers, and legislative staff. The universal assessment process shall be used for all home- and community-based services, including IHSS. In developing the process, the workgroup shall build upon the IHSS uniform assessment process and hourly task guidelines, the MSSP assessment process, and other appropriate home- and community-based assessment tools.

(2) (A) In developing the universal assessment process, the departments described in paragraph (1) shall develop a universal assessment tool that will inform the universal assessment process and facilitate the development of plans of care based on the individual needs of the consumer. The workgroup shall consider issues including, but not limited to, the following:

- (i) The roles and responsibilities of the health plans, counties, and home- and community-based services providers administering the assessment.
- (ii) The criteria for reassessment.
- (iii) How the results of new assessments would be used for the oversight and quality monitoring of home- and community-based services providers.
- (iv) How the appeals process would be affected by the assessment.
- (v) The ability to automate and exchange data and information between home- and community-based services providers.
- (vi) How the universal assessment process would incorporate person-centered principles and protections.
- (vii) How the universal assessment process would meet the legislative intent of this article and the goals of the demonstration project pursuant to Section 14132.275.
- (viii) The qualifications for, and how to provide guidance to, the individuals conducting the assessments.

(B) The workgroup shall also consider how this assessment may be used to assess the need for nursing facility care and divert individuals from nursing facility care to home- and community-based services.

(d) No later than December 1, 2016, the department, the State Department of Social Services, and the California Department of Aging shall report to the Legislature on the stakeholder workgroup’s progress in developing the universal assessment process, and shall identify the counties and beneficiary categories for which the universal assessment process may be implemented pursuant to subdivision (e).

(e) (1) No sooner than January 1, 2015, upon completion of the design and development of a new universal assessment tool, managed care health plans, counties, and other home- and community-based services providers may test the use of the tool for a specific and limited number of beneficiaries who receive or are potentially eligible to receive home- and community-based services pursuant to this article in no fewer than two, and no more than four, of the counties where the provisions of this article are implemented, if the following conditions have been met:

(A) The department has obtained any federal approvals through necessary federal waivers or amendments, or state plan amendments, whichever occurs later.

(B) The system used to calculate the results of the tool has been tested.

(C) Any entity responsible for using the tool has been trained in its usage.

(2) To the extent the universal assessment tool or universal assessment process results in changes to the authorization process and provision of IHSS services, those changes shall be automated in the Case Management Information and Payroll System.

(3) The department shall develop materials to inform consumers of the option to participate in the universal assessment tool testing phase pursuant to this paragraph.

(f) The department, the State Department of Social Services, and the California Department of Aging shall implement a rapid-cycle quality improvement system to monitor the implementation of the universal assessment process, identify significant changes in assessment results, and make modifications to the universal assessment process to more closely meet the legislative intent of this article and the goals of the demonstration project pursuant to Section 14132.275.

(g) Until existing law relating to the IHSS assessment process pursuant to Article 7 (commencing with Section 12300) of Chapter 3 is amended, beneficiaries shall have the option to request an additional assessment using the previous assessment process for those home- and community-based services and to receive services according to the results of the additional assessment.

(h) (1) No later than 15 months after the implementation of the universal assessment process, the department, the State Department of Social Services, and the California Department of Aging, in consultation with stakeholders, shall report to the Legislature on the results of the initial use of the universal assessment process, and may identify proposed additional beneficiary categories or counties for expanded use of this process and any necessary changes to provide statutory authority for the continued use of the universal assessment process. These departments shall report annually thereafter to the Legislature on the status and results of the universal assessment process. At a minimum, the report shall include, but not be limited to, all of the following:

(A) Findings from consumers assessed using the universal assessment tool regarding their satisfaction with both the universal assessment process and the assessor.

(B) Analysis of the consumers' ability to follow and accurately respond to all assessment items.

(C) Data collected from the universal assessment process that is compared to previous assessment tool data and this information shall be reported to distinguish the impact of the universal assessment process through the new data collection process.

(2) A report submitted pursuant to this subdivision shall be submitted in compliance with Section 9795 of the Government Code.

(i) This section shall remain operative only until September 1, 2018.