



Chanda Plan Foundation

RE: Support the Renewal of Spinal Cord Injury Pilot Program for Medicaid

Please support SB15-011 concerning the Spinal Cord Injury (SCI) Pilot Program sponsored by Senator Nancy Todd. The bill will renew the SCI Waiver Pilot Program for another five years (2015 - 2020).

Background: In 2009, HB09-1047 mandated HCPF to implement a three-year pilot program (known as the SCI Waiver). This pilot program offers complementary and alternative medicine (CAM) including acupuncture, chiropractic, and massage therapy through gifts, grants and donations for certain individuals with spinal cord injuries. The purpose of this pilot program is to measure the health outcomes, quality of life, and cost expenditures and savings for eligible participants enrolled in the waiver. An independent evaluator is doing the evaluation. Based on the data collected by the independent evaluator, the legislature was to determine whether to continue the SCI Waiver and expand it to other Medicaid clients as a Medicaid Benefit. The current SCI Waiver has an end date of June 30, 2015.

Issue: The original bill was passed in 2009, and the statute gave the department until July of 2012 to implement the pilot. There was 3 years to submit a waiver approval to CMS, identify providers, develop an outreach plan to notify eligible clients, etc. However, the waiver was not submitted to CMS until July 22, 2011. As a result the first treatment was not provided until November 11, 2012, and the waiver did not hit full enrollment capacity until November 5, 2013. Attached is a more detailed list of delays. The SCI Waiver is now in its final year, but due to the significant administrative delays, the independent evaluator was not able to collect an adequate amount of data in order for the legislature to determine if the pilot program was effective in delivering outcomes that would support a decision to continue the SCI Waiver and expand it to other Medicaid clients as a Medicaid Benefit.

In summary, Senator Nancy Todd is sponsoring this bill with the support of the Chanda Plan Foundation to authorize the extension of the SCI Waiver, but for another 5 years due to administrative delays experienced. By doing so, we can collect the appropriate amount of data needed in order to analyze the cost and health benefits.

Please support SB15-001, renewal of the SCI Waiver pilot program.

Senate Sponsor: Senator Nancy Todd, (303) 866-3432

House Sponsor: Representative Dianne Primavera, 303-866-4667

Contact Information: Chanda Hinton, (303) 246-4290.

Lobbyist Team: RD Sewald, Arlene Miles, & John Knukle



COLORADO

Department of Health Care
Policy & Financing

Department of Health Care Policy and Financing
1570 Grant Street
Denver, CO 80203

Department of Health Care Policy & Financing (HCPF) Summary of the Second Annual Evaluation Report for HCBS-SCI Waiver

House Bill 09-1047 tasked the Department with creating and evaluating a Home and Community Based Services (HCBS) Waiver for Persons with Spinal Cord Injury (SCI Waiver) Pilot Program. The SCI Waiver allows participants with spinal cord injuries to receive the alternative therapies of chiropractic care, massage, and acupuncture as covered waiver services. The Department was also tasked to present to the Legislature an independent evaluation of the pilot program at the pilot's completion in August 2015. On July 15, 2014, the Department received the Second Annual Evaluation Report for the HCBS-SCI Waiver from the independent evaluator National Research Center Inc. (NRC). To satisfy the de-identification standard's Safe Harbor method for the Health Insurance Portability and Accountability Act (HIPPA) the Department cannot release the report as it is currently written. The amount of redaction needed to make the report HIPPA compliant would detract from the meaning and value of the report itself. Below the Department has summarized the initial findings of the Second Annual Evaluation Report as well as the current limitations to SCI Waiver evaluation without any protected health information.

Summary

The National Research Center Inc. (NRC) was charged with evaluating the impacts of the Home and Community Based Services (HCBS) Waiver for Persons with Spinal Cord Injury (SCI Waiver) on utilization of specific services, total cost of care, health outcomes, quality of life, and clients' employment status. Additionally, NRC was tasked with the evaluating the costs and benefits of expanding SCI Waiver services to other waivers, specific ways to improve the SCI Waiver, and whether or not accountability mechanisms are correctly safeguarding the efficient use of public funds and promoting effective service delivery.

After reviewing the report, it is clear that there is anecdotal evidence and initial signs of positive trends regarding cost-saving that can be used to evaluate the performance of the program, but without additional research, data points, larger sample size and changes to the evaluation methodology, the evidence remains anecdotal. Concrete conclusions regarding program performance and subsequent recommendations on future action are difficult to draw from the information presented in the current report.

Limitations of the Second Annual Evaluation Report

Program Savings and Impacts on Utilization

The National Research Center Inc. (NRC) utilized expenditure data to evaluate whether or not the program was effective in reducing utilization of other services and whether or not the program generated cost savings.

Our mission is to improve health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.
www.colorado.gov/hcpf



NRC adjusted costs for inflation based on national indexes, Colorado Medicaid implemented significant public policy changes to provider reimbursement that are not correlated with national inflation rates which could significantly obfuscate interpretation of the analysis. Specifically, the Department implemented a broad array of legislatively approved provider rate increases and major overhauls to reimbursement methodologies in recent years that, if not explicitly accounted for, make expenditures an unreliable measure when answering questions about utilization or program savings.

Future reports should include an analysis of not just costs (properly adjusted for public policy), but also utilization. Utilization analysis is critical because it is conceptually independent of fluctuations in unit price.

Sample Size

Because the number of participants in the evaluation is relatively small due to implementation delays, conclusions may not be reliable. Important program performance questions might not actually be answerable without additional program experience.

Trending and Variability in Health Care Costs

In several cases, the analysis evaluates program performance by looking at prior claims and claims during enrollment of a client. Because health care costs can fluctuate significantly on an individual basis from year to year (for example, a single expensive inpatient hospitalization post enrollment can drastically skew performance results and yet be completely unrelated to program performance), coupled with a small sample size, it is unclear how reliable results are in the early stages of program evaluation. It is likely that meaningful results can only be derived with additional program experience. It is also recommended that additional historical information is incorporated in setting benchmarks for program performance in future reports to ensure results are defensible.

Conclusion

The National Research Center Inc. (NRC) Second Annual Evaluation Report for the HCBS-SCI Waiver does not attempt to present final conclusions to all the questions outlined in the overview, those conclusions will be addressed in the final report. Combined with the limitations to the evaluation outlined above the Department finds that many of the results cannot be used to draw concrete conclusions.

That being said, it is important to note that several positive data points in the report show improvements in quality and outcomes and general benefit from the implementation of the program that are encouraging and anecdotally support the conclusion that the program is effective and warrants expansion of this program for an additional five years.

The Department is in support of the renewal of the Spinal Cord Injury Waiver (SCI Waiver) and believes that additional time combined with waiver modifications will significantly improve the data available. With additional program experience and some modifications to the evaluation methodology, future reports will provide more insight and actionable recommendations regarding the SCI Waiver program and benefits.



To: Colorado General Assembly
From: Micah McClellan

RE: SCI Waiver

Dear Members of the Colorado General Assembly,

My name is Micah McClellan and I am enrolled in the SCI Waiver. I have been actively receiving massage and acupuncture therapy through SCI, and it's been very helpful in assisting with my pain management. As a consumer, these therapies have been beneficial in helping physically and mentally cope with adjusting to and living with a spinal cord injury.

I was heinously shot in 2010, while leaving a park, after playing basketball, leaving me with a C3 SCI.

I constantly battle joint pain, UTIs, respiratory infection, etc. as a result of this injury, which challenges me mentally on a daily basis to try to maintain a positive perspective.

I sincerely thank God for the SCI program, not only for the physical strength that I'm gaining in my muscles, but for the awesome, caring expertise the staff consistently displays. Without this program I believe physical digression would set in, therefore placing me in more pain as well as an increased hardship on my caregivers/family members that assist with my ADLs.

As a consumer, I hope that my story and information shared above is an example of how the SCI Waiver is important to me and others. I request that you support its continuation so that I may improve and maintain wellness as a member of the Medicaid community.

Sincerely,

Micah McClellan
Medicaid Consumer

11651 E. Iowa Avenue
Aurora, CO 80012
720-327-6194
303-369-7032

To: Colorado General Assembly
From: Ashley Moser

RE: SCI Waiver

Dear Members of the Colorado General Assembly,

My name is Ashley Moser, and I am enrolled in the SCI Waiver. I have been actively receiving acupuncture and massage, and as a consumer, these therapies have been beneficial to me while living with a spinal cord injury.

As a young woman living with a C6 Spinal Cord Injury due to the Aurora Theater shooting, I am determined to regain happiness and good health in many ways. Having a spinal cord injury itself makes this goal a challenge from time to time because of the physical and mental pitfalls that are associated with it. Physically, I experience pain and resort to pain medications. Because I know the long-term side effects that pain medication will cause, it has been very beneficial for me to have another option to address my pain.

Acupuncture and massage in general feel good, but the pain relief I experience from them is invaluable and has been available to me because of the SCI Waiver. I feel that by utilizing these therapies for a longer period of time, I can reduce my pain medication and manage it in a different way.

As a consumer, I hope that my story and information shared above is an example of how the SCI Waiver is important to others and myself. I request that you support its continuation, so that I may improve and maintain wellness as a member of the Medicaid community.

Sincerely,



Ashley Moser
Medicaid Consumer

1888 S. Jackson St., #407
Denver, CO 80210
(303) 243-2365