



## **Center for Medicaid and CHIP Services**

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### **CMCS Informational Bulletin**

**DATE:** August 6, 2012

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**SUBJECT: Medicaid Managed Long Term Services and Supports (MLTSS)—Two New Resources on Medicaid.gov**

The Centers for Medicare & Medicaid Services (CMS) is pleased to announce the availability of two new resources on Medicaid managed long-term services and supports (MLTSS) to support states and other partners in enhancing the quality of these services.

Increasing numbers of states are using MLTSS—which is the delivery of long-term services and supports through capitated Medicaid managed care programs – as a strategy for expanding home- and community-based services, promoting community inclusion, ensuring quality and increasing efficiency. The number of states with MLTSS doubled from 2004 to 2012, and increasingly states have been seeking technical assistance on design and implementation of these services.

MLTSS offers states a broad and flexible set of program design options, and may be used as an overarching structure to promote initiatives such as Money Follows the Person, participant-directed services, the Balancing Incentive Program, etc. States and stakeholders have expressed an interest in learning more about MLTSS, and how new long-term service and support opportunities in the Affordable Care Act may be incorporated into an MLTSS program.

#### **2012 MLTSS Environmental Scan**

Between January and June 2012, CMS conducted a national environmental scan of Medicaid MLTSS. The scan included an inventory of all MLTSS programs that had been implemented as of June 2012, and a projection of future programs through January 2014. State-by-state results are included for current and projected programs. This report synthesizes the findings across states, reporting national enrollment, characteristics of contractors and multiple program features.

Key highlights include significant growth in MLTSS from 8 states in 2004 to 16 in 2012. In addition to the number of States with MLTSS programs doubling, the number of persons receiving LTSS through managed care programs increased from 105,000 to 389,000. By 2014, the number of states projected to have MLTSS programs is 26. The report describes the varying ways in which states have designed MLTSS arrangements: states have chosen to include and exclude different sub-population groups and have chosen varying degrees of integration across services. Some states have implemented capitated payments for limited Medicaid benefits, some for comprehensive Medicaid

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benefits, and some for comprehensive Medicaid and Medicare benefits. For further information, visit <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Delivery-Systems/Medicaid-Managed-Long-Term-Services-and-Supports-MLTSS.html> for the full report.

### **Online Web Resource**

In an effort to enhance the availability and quality of MLTSS, CMS is releasing an online tool offering states guidance on program design, Medicaid authorities and other information relevant to the effective management of MLTSS. This online resource provides consistent, accessible technical assistance which will be updated as policy and practice in the growing field of MLTSS evolves. It also features links to information such as sample contracts, state examples of effective organizational structure to manage MLTSS, and other useful sources of information. For more information, please visit <http://www.medicaid.gov/mltss/>.