

NC Department of Health and Human Services



Joint DMH/DD/SUS & DHB (NC Medicaid) Update Call BH/IDD Consumers, Family Members and Community Stakeholders

NC TBI Waiver renewal and 1915(i)

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TBI Program Components

➤TBI Waiver Renewal

➤What are the changes

>Upcoming changes to the waiver

>1915(i) Services

NC Traumatic Brain Injury Waiver

GREAT NEWS

- The NC TBI Waiver was approved for renewal by CMS effective 4/1/22 for a 5 year period
- Alliance Health is in process of implementing the new changes to the TBI Waiver

NC Traumatic Brain Injury Waiver

- The NC TBI Waiver serves individuals who have sustained a Traumatic Brain Injury on or after their **18th** Birthday who have ongoing support needs
- Individuals must be Medicaid eligible
- Individuals must meet one of the two levels of Care included in the TBI Waiver
 - Skilled Nursing Facility
 - Neurobehavioral

- The initial TBI Waiver serves individuals in Alliance's Four County Area which includes:
 - Wake County
 Durham County
 Johnston County
 Cumberland County
- As a Model Waiver; the goal of the initial TBI Waiver has been to operationalize a new waiver; serving a new population and to learn from the Pilot
- Implementation continues with collaboration between NC Medicaid, DMH/DD/SAS, Alliance Health, DSS, BIAC, BIANC, & Other Stakeholders

It has been important for the NC TBI Waiver to:

- Share the word about the Waiver to TBI Survivors & their families and providers serving individuals who have experienced TBIs
- Alliance had to build a Provider Network for the TBI Waiver Beneficiaries and ensure the providers in that network are well trained.
- Like many waiver populations, the needs of individuals who have experienced a TBI often have some similarities, but needs can also vary widely. Learning what is working is key.

Implement all aspects of the waiver and review how the tools are working including:

- Health and Risk Assessments
- Waiver Eligibility Processes
- Level of Care Tool
- Waiver Definitions
- Provider Network Development and Training
- Utilization of Services
- Unique needs of the TBI Waiver Population including need for services to address Mental Health and/or Substance Use Needs

- Lower age of Date of Traumatic Brain Injury down from 22 to 18
 - Beneficiaries at age 18 often have needs that are more similar to the Adult TBI population than the Innovations population
 - Innovations Waitlist
 - CAP DA Waitlist (only applicable to some counties)

- Change the eligibility requirement to 300% Federal Poverty Line
 - Working age adults and resources
 - Worked closely with our eligibility team to get this change in place
 - This will allow individuals who meet criteria for the waiver but have income between 101-300% of the Federal Poverty Level to access the waiver

Supported Living was added as service definition for the TBI Waiver

- This service is available through the NC Innovations Waiver
- Allows individuals to live in their own home and receive supports
- Promotes Community Inclusion

Remote Supports was added as service definition for the TBI Waiver

- This services utilizes technology that can be obtained through the Assistive Technology, Equipment and Supplies service definition to provide remote monitoring of the individual
- Beneficiary must consent/want to utilize technology
- An assessment will be required to ensure the use of technology is safe and the right fit for the individuals needs.

Some examples of Services included in the NC TBI Waiver:

- Cognitive Rehabilitation
- Life Skills Training
- Extended State Plan Allied Health Services
- Personal Care
- Residential Supports
- Supported Employment
- Community Networking
- Day Supports
- Resource Facilitation
- Specialized Consultative Services

GOAL: Statewide Rollout

The goal is to go statewide (all regions) within 5 years

- We are working in the next few months to get approval to expand the TBI Waiver to Mecklenburg County and Orange County
- Work will be done to determine the most appropriate process for statewide roll out
 - This expansion does not have to be one LME/MCO at a time

1915(i)

1915(i) Benefit	Description of Benefit	Current 1915(b)(3) Benefit(s) to be Incorporated into New 1915(i) Benefit	New Elements of 1915(i) Benefit
Supported Employment	 Includes initial job development, job training, and job support services Will be offered to beneficiaries ages 16 and over with a serious mental illness 	Supported employment	 Benefit will be newly available to beneficiaries with severe SUD and TBI
	(SMI), serious emotional disturbance (SED), severe substance use disorder (SUD), I/DD or TBI		 There will be separate service definitions for different disability groups
Individual and Transitional Supports	 Support in acquiring, retaining and improving self-help, socialization and adaptive skills necessary to be successful in employment, housing, education and community life and to reside successfully in the community Will be available to beneficiaries ages 16 and over with SMI 	Individual support and transitional living skills	 Combines existing Individual Support and Transitional Living Skills services NCDHHS is in the process of determining whether Transition Management Services, currently funded through State funds for many Medicaid beneficiaries in the Transitions to Community Living Initiative, can be incorporated into the 1915(i) Individual Support policy

1915(i)

1915(i) Benefit	Description of Benefit	Current 1915(b)(3) Benefit(s) to be Incorporated into New 1915(i) Benefit	New Elements of 1915(i) Benefit
Respite	 Provides periodic or scheduled support and relief to the primary caregiver(s) 	Respite	Benefit will be newly available to:
Community Living and Supports	 from the responsibility and stress of caring for beneficiaries Will be offered for beneficiaries who are any age and have an I/DD; ages 3 to 20 and have an SED; ages 3 to 20 and have a severe SUD; meeting diagnostic criteria and reside in therapeutic foster care or another residential placement and are at risk of losing their placement; or have a TBI Focuses on skill practice and acquisition and provides supervision and assistance so that beneficiaries can complete an activity to their level of independence Will be offered for beneficiaries ages 3 and older who have an I/DD or TBI 	In-home skill building	 Children ages 3 to 20 who have a severe SUD; Children meeting diagnostic criteria who reside in therapeutic foster care or another residential placement and are at risk of losing their placement; and Adults with TBI Service definition will be aligned with the Innovations and State- funded community living and supports benefit Benefit will be newly available to beneficiaries with a TBI



1915(i) Benefit	Description of Benefit	Current 1915(b)(3) Benefit(s) to be Incorporated into New 1915(i) Benefit	New Elements of 1915(i) Benefit
Community Transition	 Provides funding for beneficiaries to move from an institutional setting into their own private residence in the community or to divert a beneficiary from entering an adult care home Qualifying institutional settings include adult care homes, institutions for mental diseases (IMDs), State psychiatric hospitals, intermediate care facilities for individuals with intellectual disabilities (ICF-IIDs), nursing facilities, psychiatric residential treatment facilities, and alternative family living arrangements Will be offered for beneficiaries ages 18 and older who have an SMI 	One-time transitional costs	No substantive changes



Quality and Population Health Care Management Overview

June 27, 2022

Agenda



O TCM Provider Readiness

Tailored Care Management is North Carolina's specialized care management model targeted toward individuals with a significant behavioral health condition (including both mental health and severe substance use disorders), I/DD or TBI.

Tailored Care Management is the primary care management model for Tailored Plans. *

- All Tailored Plan Members are eligible for Tailored Care Management, including individuals enrolled in the 1915(c) Innovations and TBI waivers.
- Individuals enrolled in Medicaid fee-for-service (NC Medicaid Direct) (e.g., dual eligibles) will also have access to Tailored Care Management, if they otherwise would be eligible for a Tailored Plan if not for belonging to a group delayed or excluded from managed care.

*<u>Note:</u> Tailored Care Management was designed to align with the Medicaid Health Home State Plan Option, created by the Affordable Care Act, which is intended to help states improve care coordination and care management for Medicaid beneficiaries with complex needs.

NCQA Provider Certification

- The National Committee for Quality Assurance (NCQA) is supporting the Department with administering the NC Care Management Agency Certification Program (AMH+/CMA Program).
- Certification assesses whether organizations are credibly on track to deliver Tailored Care Management across key domains and state-defined criteria.

To date, there have been **34 providers certified** and **74 site visits completed**. All Round 1 and Round 2 providers will complete the certification process by **July 29th**.



TCM Provider Readiness

The Department recognizes that Tailored Care Management providers have key activities that need to be completed for them to be successful starting on 12/1. We are working with NCQA and our Tailored Plan partners to verify that each certified AMH+ and CMA is ready to perform the required Tailored Care Management functions ahead of launch.

NCQA Review

- NCQA is supporting the Department to implement a Readiness Review for entities that have been certified as AMH+/CMA TCM providers.
- NCQA is responsible for:
 - Developing a standardized readiness review scoring tool.
 - Training Tailored Plans on the readiness review materials and the certification process to date.
 - Facilitating coordinated readiness reviews across multiple TPs.
 - Leading scoring with Tailored Plans as participants.

Pre-Launch Activities

- In addition to completing the NCQA Review, TCM providers must demonstrate their completion of the following activities to be considered "ready" to successfully begin caring for members on 12/1:
 - Integration Testing with Tailored Plans
 - Contracting with Tailored Plans
 - Staffing

NCQA's TCM Readiness Milestones

- TP Workgroup Sessions June 9th 30th
- Readiness Review Tool Due July 1st
- Readiness Review Protocol Due July 8th
- Readiness Reviews Begin July 15th
- Readiness Review Decisions and Scorecards Due (Rounds 1 and 2) – September 30th

Note: Providers that do not pass initial readiness or complete necessary activities prior to 12/1 will be supported to launch on a rolling basis once they are ready.

Capacity Building

To help ensure successful implementation of Tailored Care Management, The Department launched the TCM Capacity Building program, under which ~ \$90 million in funding will be distributed across the state starting in 2022.

• Providers Certified as AMH+ practices and CMAs are eligible to receive capacity building funding for investments in:

Care Management-related health information technology (HIT) infrastructure

Hiring and Training Care Managers

Activities related to operational readiness (developing policies/procedures/workflows)

- To date, Distribution Plans reflect \$35,400,000 in funding; 40% of total funding has been distributed, with the remainder to be distributed throughout 2022 and 2023.
- If the initial \$90 million is not fully spent, Tailored Plans have the flexibility to submit a revised Distribution Plan to the Department requesting to redistribute unspent funds towards the achievement of an identified milestone.

Resources for Beneficiaries



Check to see what health plan you are enrolled in

Beneficiaries were mailed a health plan welcome kit that includes their Medicaid ID card If you have questions or didn't receive the welcome kit, call the Enrollment Broker at **833-870-5500**

2

Call your health plan if you have questions about benefits and coverage

The number is listed on your Medicaid ID card, or you can find contact information at <u>health-plan-contacts-and-resources</u>

3

If you still have questions, reach out to the NC Medicaid Ombudsman Call 877-201-3750 or visit <u>ncmedicaidombudsman.org</u>

Resources

- Medicaid Managed Care website <u>medicaid.ncdhhs.gov</u>
- NC Medicaid Help Center
 <u>medicaid.ncdhhs.gov/helpcenter</u>
- Provider Ombudsman <u>Medicaid.ProviderOmbudsman@dhhs.nc.gov</u> 866-304-7062
- Practice Support
 <u>ncahec.net/medicaid-managed-care</u>
 - NC Managed Care Hot Topics Webinar Series
 Hosted by Dr. Dowler on the first and third Thursday of the month
- Regular Medicaid Bulletins

medicaid.ncdhhs.gov/providers/medicaid-bulletin



Questions and Answers



Have a question, send it to us. The Division of Mental Health, Developmental Disabilities and Substance Abuse Services is working to centralize questions so we can ensure your questions are answered in a timely manner by the appropriate subject matter experts.

Comments, questions and feedback are welcome at:

BHIDD.HelpCenter@dhhs.nc.gov

Medicaid.Transformation@dhhs.nc.gov

Requests for presentations or to provide feedback

Medicaid.NCEngagement@dhhs.nc.gov