

Shared Vision Statement

- The overarching goal is to achieve a *Good Life* as defined by the individual.
- Identify, research and recommend innovative, stable and sustainable solutions to address increasing community inclusion for individuals with I/DD as it relates to independent community living, employment, self-advocacy, relationships and beyond.
- Recommend workforce development & reimbursement strategies to support and strengthen our Direct Support Professionals.



NC Department of Health and Human Services

DHHS I/DD Stakeholder Workgroup Meeting

Kenneth Bausell, I/DD Manager, NC Medicaid
LaToya Chancey, I/DD Team Lead, DMHDDSAS

January 27, 2022

Membership Roll Call
Gathered through
Attendee List in
WebEx

Agenda

- Online Meeting Reminders
- Public Feedback & Engagement
- Approval of Last Meeting's Minutes
- Special Presentation: Dental Services
- Last Meeting Follow Up
- Medicaid Transformation Corner-1915i
- Competitive Integrated Employment Update
- Next Meeting Planning
- Questions & Feedback

Online Meeting Reminders

- Please Mute Yourself When Not Speaking
- Raise Hand Feature
- Chat Host for Technical Support
- Solution Focused Objective
- *For meetings in excess of an hour, we will provide a planned 5-minute break at or near the beginning of each hour.*

Review & Approval of Meeting Minutes (Electronic)

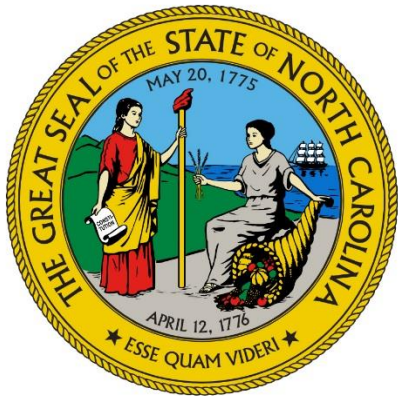
Public Feedback & Engagement

- We Encourage the Use of the Chat/Question Feature for Members of the Public
 - Feedback will be synthesized, and an overview will be provided to workgroup members.
- We will attempt to answer as many questions as possible during the meeting.
- Link Provided via Chat to Sign-up to Speak During Public Comment Period of Meeting

Public Feedback Received

- No Public Comment Received Before Meeting

Special Presentation:
Supporting People
through Dental Services



NC Department of Health and Human Services
Access Dental Care

Innovations Waiver: Expansion of Adult Dental Benefits for the I/DD Population

Mark W. Casey, DDS, MPH
DHB Dental Officer

Darlene Baker, RDH
DHB Lead Dental Policy Analyst

Bill Milner, DDS, MPH
President, Access Dental Care

Betsy White, RDH, BS, FSCDH
**Chief Operating Officer, Access
Dental Care**

January 27, 2022

The Problem: Poor Access to Care for Medicaid Beneficiaries with I/DD Diagnoses

- Private practice dentists lack the equipment, knowledge and skill set to treat most patients with I/DD
- Dental professionals with adequate training in special care dentistry are few and far between
- The families of Medicaid beneficiaries with I/DD diagnoses who reside at home face enormous barriers to finding care for their loved ones

Inadequate Resources for Delivery of HCBS Care to I/DD

- State facilities in Butner (Murdoch), Morganton (Riddle), Black Mountain and elsewhere have lost positions and funding—no longer able to accept I/DD patients from the community for dental care on an outpatient basis
- Needs of most institutionalized beneficiaries in group homes and developmental centers are being met
- How do we plan to improve the delivery of care to I/DD patients residing in the community?

Challenges for NC Medicaid

- Identifying the population
 - Dental claims do not require the use of diagnostic codes
 - No universal definition of patients with special health care needs
 - Populations defined by waivers or eligibility programs are easily identifiable in the MMIS-- need commitment from leadership, “the keepers” of the waiver and other stakeholders.
 -

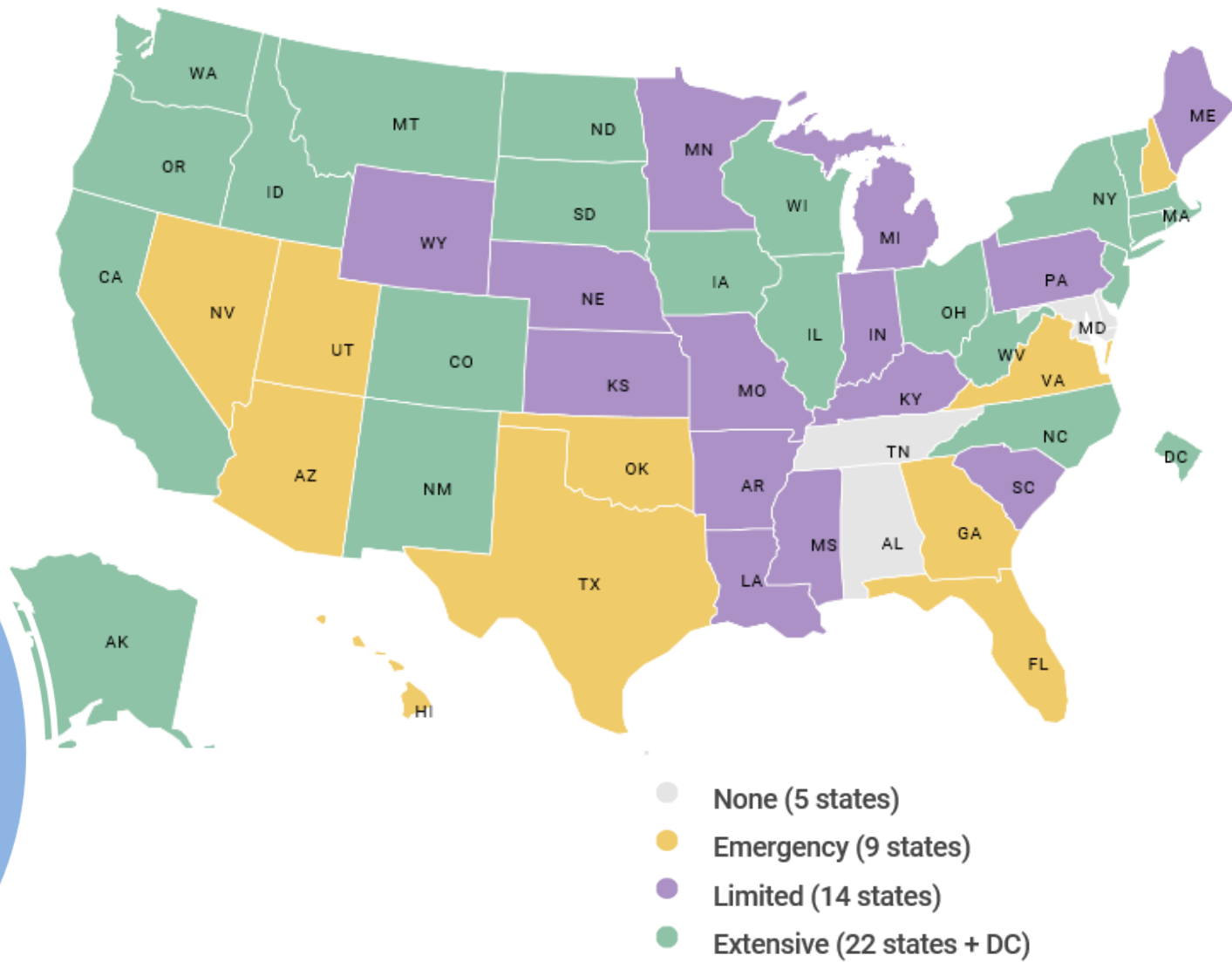
Challenges for NC Medicaid

- Provider network with limited capacity to treat I/DD population
 - Innovative strategies to wisely use available resources
 - CE and training opportunities
 - Workshops across the state—clinical care demos
 - Involve dental educators—rotations of predoctoral students and postdoctoral residents
 - Will have UNC ASoD, ECU SoDM and High Point Univ. SoDM&OH

Adult Dental Coverage



Children's services are mandatory under the State Plan; Adult services are optional



<https://www.nashp.org/state-medicaid-coverage-of-dental-services-for-general-adult-and-pregnant-populations/>

Covered Adult Dental Services

- Diagnostic/Preventive: evaluation, radiographs, and prophylaxis
- Restorative: amalgam and composite
- Endodontics: root canal therapy (anterior teeth)
- Periodontics: Full mouth debridement and scaling and root planing per quadrant
- Prosthodontics: dentures, partial dentures, and relines
- Oral Surgery: extractions, alveoloplasty, removal of cysts and tumors, etc.
- Anesthesia: general, intravenous conscious sedation, and nitrous oxide

Dental Ambulatory Surgical Centers

- Four dental specific Ambulatory Surgical Centers (ASCs) in NC
- Approved by the State Health Coordinating Council, the State's Certificate of Need (CON) regulatory body, as a CON demonstration project
- First of these facilities opened in March of 2018 after receiving Medicare certification
- Locations in Raleigh, Fayetteville, Greensboro, and Charlotte after Medicare certification of each facility

Proposed Solution to Access Problem

- Regional outpatient dental centers for I/DD patients—eastern, central and western
- Innovative payment strategies—e.g., D9920—behavior management code to reimburse provider for the extra time and resources needed to render services on I/DD patient
 - Current use of D9410 for mobile dentistry
 - New Mexico Medicaid has a program that requires enrolled dentists to complete training before they can use D9410

Last Meeting Check-In

Follow Up from Previous Meeting

- Care Coordination Visits
- Translating Materials
- Service Delivery for Individuals that are Not Citizens
- Autism Diagnosis for Service Definition
 - Medicaid Vs State-Funded

Eligibility Criteria

A Psychological, Neuropsychological, or Psychiatric evaluation, supported by appropriate psychological/neuropsychological testing, that denotes a DD as defined by G.S. 122C-3(12a) must be completed by a qualified licensed professional prior to the provision of this service. **Scientifically validated tool(s), supported by appropriate testing, that denotes a diagnosis of Autism Spectrum Disorder and meets G.S. 122C-3(12a) must be completed by a licensed clinician, within their scope, prior to the provision of services.** For individuals with a TBI, a clinical exam completed by a qualified licensed professional is required noting a diagnosis as defined by G.S. 122C-3(38a).

A definitive diagnosis of a developmental disability with accompanying functional limitations as defined by G.S. 122C-3(12a) completed by a qualified physician operating within their scope of practice may be utilized for individuals with developmental disabilities without accompanying intellectual disabilities.

Medicaid Transformation Corner



Competitive
Integrated
Employment Update

Release of Joint Communication Bulletin

- NCDHHS Enhancing Support for Individuals with Disabilities Choosing to Seek & Maintain Competitive, Integrated Employment and Other Meaningful Day Options
- Released: January 20, 2022
- Link: <https://www.ncdhhs.gov/joint-communication-bulletin-competitive-integrated-employment-01202022/download?attachment>

Competitive Integrated Employment Initiative

- Competitive Integrated Employment
 - Working in the Community
 - Earning Minimum Wage or Above
 - Access to Similar Benefits as those Without Disabilities
 - Same Opportunity for Advancement
- DHHS Believes Everyone Can Work!

SOURCE:

Department's Strategic Plan

- Department's Strategic Plan to Maximize Competitive Integrated Employment
 - Streamline Supported Employment Service Definition Across Funding
 - Continual Stakeholder Engagement
 - Informed Choice
 - Trainings for Individuals, Families & Providers
 - Publish Comprehensive Guide to Competitive Integrated Employment
 - Enhanced Provider Training & Provider Transformation Activities

Informed Choice is KEY!

- Informed Choice
 - Everyone is Able to Make Choices
 - People Make Decisions Based on Complete & Accurate Information
 - Understanding Risks & Benefits of Decisions
 - Ongoing Process

Public Comment Period

DMHIDDContact@dhhs.nc.gov

Member Questions & Feedback



Next Meeting Planning

- Review of Public Feedback Received
- Workgroup Members-What Would You Like to Suggest for Agenda Items?
 - Unpack the Rate
 - Staff Training Requirements

2022 Meeting Schedule

Date	Time
Thursday, January 27, 2022	3:00-5:00 PM
Thursday, March 24, 2022	3:00-5:00 PM
Thursday, May 19, 2022	3:00-5:00 PM
Thursday, July 28, 2022	3:00-5:00 PM
Thursday, September 22, 2022	3:00-5:00 PM
Thursday, November 17, 2022	3:00-5:00 PM