Community First Choice

Program Management
Medicaid and CHIP Division
Health and Human Services Commission
Background

- S.B. 7, 83rd Session, requires the most cost-effective approach to basic attendant and habilitation service delivery.
- Health and Human Services Commission (HHSC) is meeting this requirement by implementing Community First Choice (CFC) services.
- CFC benefits are state plan benefits and available to all Medicaid enrolled individuals who meet criteria.
CFC Program Impact

• CFC begins on June 1, 2015.
• CFC services will be available to eligible individuals receiving services through managed care, fee for service, and DADS for individuals enrolled in 1915(c) IDD waivers.
What is Managed Care?

• Healthcare provided through a network of doctors, hospitals, and other healthcare providers responsible for managing and delivering quality, cost-effective care.

• The State pays a managed care organization (MCO) a capped rate for each member enrolled, rather than paying for each unit of service provided.
STAR+PLUS

- Designed to integrate the delivery of acute care and long-term services and supports (LTSS) through a managed care system.
- Serves people with disabilities who receive SSI Medicaid and those who are eligible for Medicaid because they qualify for STAR+PLUS home and community based waiver services.
- Main feature - service coordination:
  - Specialized care management service that is available to all members and provided by an MCO service coordinator.
- Operates statewide as of September 1, 2014.
STAR Health

• STAR Health is a statewide managed care program that provides comprehensive and coordinated health services to children and young adults in state conservatorship.

• HHSC administers the program under a contract with a single MCO, Superior HealthPlan Network, to provide an array of health services.
Community First Choice Eligibility

• To be eligible for CFC services delivered in managed care, a member must:
  • Be enrolled in managed care through STAR+PLUS or STAR Health.
  • Meet the institutional level of care for a hospital, an Intermediate Care Facility for Individuals with an Intellectual Disability or Related Conditions (ICF/IID), nursing facility (NF), or Institution for Mental Disease (IMD).
  • Due to a federal limitation, STAR+PLUS HCBS waiver members whose financial eligibility is established as Medical Assistance Only are excluded from CFC.
Hospital and Nursing Facility Level of Care

- Uses the Medical Necessity/Level of Care (MN/LOC) assessment.
- Used to assess members who require the services offered in a hospital or NF.
- The MN/LOC must be completed by a registered nurse.
ICF/IID Level of Care

• Uses an Intellectual Disability/Related Condition (ID/RC) assessment.
• Used to assess members with an intellectual disability or a related condition.
IMD Level of Care

- Uses the psychiatric inpatient LOC for members age 20 and younger, or institution for mental disease (IMD) LOC for members age 65 or older.
  - For members age 20 and younger, a licensed practitioner completes the Child and Adolescent Needs and Strengths assessment (CANS).
  - For member age 65 or older, a licensed practitioner completes the Adult Needs and Strengths assessment (ANSA).
Community First Choice Services

- Personal assistance services
- Habilitation
- Emergency response services
- Support management
Personal Assistance Services

• Assistance with activities of daily living (ADLs) and instrumental activities of daily living (IADLs) through hands-on assistance, supervision or cueing.

• CFC personal assistance services provide assistance to a member in performing the ADLs and IADLs based on the person-centered service plan.
Personal Assistance Services

• Personal assistance services (PAS) include:
  • Non-skilled assistance with ADLs and IADLs
  • Household chores
  • Escort services
  • Assistance with health-related tasks, including:
    • Delegated nursing
    • Heath maintenance activities
    • Extension of therapy
Habilitation

• Helps members acquire, maintain, and enhance skills to accomplish ADLs, IADLs and health-related tasks.

• May also include components of personal assistance services.
Habilitation

- Self-care
- Personal hygiene
- Household tasks
- Mobility
- Money management
- Community integration
- Use of adaptive equipment
- Restoring or compensating for reduced cognitive skills
- Personal decision-making
- Interpersonal communication
- Socialization
- Leisure activity participation
- Self-administration of medication
- Use of natural supports/community services
Emergency Response Service

- A service for members who would otherwise require extensive routine supervision and who:
  - Live alone
  - Are alone for significant parts of the day
  - Do not have regular caregivers for extended periods of time
Support Management

- Provides voluntary training on selecting, managing and dismissing attendants.
- Offered to all members regardless of service delivery model.
Community First Choice Settings

- All CFC services are provided in a community-based setting.
- Community-based settings do not include:
  - Nursing facilities
  - Hospitals
  - Institutions for mental disease (IMD)
  - Intermediate care facilities for individuals with an intellectual disability or related condition (ICF-IID)
  - Any setting with the characteristics of an institution
Functional Assessment

• A functional assessment will be performed to determine the level of need for CFC services.
• This will be completed by various entities, depending on the member’s situation:
  • For STAR+PLUS members with IDD, the Local Authority will complete the assessment.
  • For STAR+PLUS members with physical disabilities, the MCO will complete the assessment.
  • For STAR Health members with IDD or physical disabilities, the MCO will complete the assessment.
• Assessments will be person-centered.
Person-Centered Plan

• The person-centered service planning process results in a plan reflecting the member’s needs and goals.

• The plan includes the member’s:
  • Chosen service setting
  • Strengths and preferences
  • Support needs
  • Goals and desired outcomes
Service Delivery Model

- Agency Model or Service Responsibility Option - Services provided by entities contracted with the MCO.
- Consumer Directed Services - Member has a service budget based on need.
Provider Base

- CFC services will be provided by providers determined to be qualified by the State of Texas in a program already approved by CMS.
- Providers include:
  - Licensed home and community support services agencies
  - Certified Home and Community-based Services and Texas Home Living providers
  - Licensed emergency response services agencies
  - Qualified financial management services agencies
  - CDS providers hired by the employer
Local Authority Activities

• Local Authorities are responsible for the following:
  • Conducting a Determination of Intellectual Disability (DID), if needed.
  • Conducting the ID/RC assessment for ICF/IID Level of Care (LOC).
  • Transmitting DID and ID/RC information to DADS.
  • Developing recommended service plans for adult members who receive a DID and approved LOC.
  • Collaborating with MCOs in agreeing to and jointly presenting a service plan to members.
  • Provide ongoing service coordination to members as needed.

• Local authorities may not provide CFC services and perform service coordination.
DADS Activities for IDD LOC Determination

• DADS is responsible for:
  • Determining whether members meet ICF/IID Level of Care (LOC) criteria based on DID and ID/RC submitted by LAs.
  • Coordinating with the MCOs and LAs as needed for LOC determinations.
  • Communicating decisions to LAs and MCOs.
  • Facilitating the fair hearing process when DADS staff denies LOC.
MCO Activities for Members with IDD

• MCO is responsible for:
  • Referring members with IDD or who potentially could have IDD to the LA for assessment.
  • Considering the recommended service plan for adults the LAs submit or developing service plans for children.
  • Collaborating with the LA for agreement on the service plan for STAR+PLUS members.
  • Meeting jointly with the LA and the member to review the service plan for STAR+PLUS members.
  • Authorizing services.
  • Providing ongoing service coordination to member.
The MCO is responsible for the following:

- Conducting the MN/LOC assessment and submitting it to the Texas Medicaid and Healthcare Partnership for a LOC decision.
- Developing the service plans.
- Authorizing services.
- Providing ongoing service coordination or service management to members.
Implementation Plan in Managed Care

- Assess Medicaid members on an IDD interest list.
- Assess members at least annually if receiving state plan PAS, Personal Care Services or STAR+PLUS Waiver.
- Assess members who request services or who MCO identifies as benefiting from CFC services.
Implementation Plan in DADS Waivers

• CFC services for people in the 1915(c) waiver programs will be provided through DADS comprehensive waiver providers in a similar manner to waiver services that are “CFC-like.”

• This includes:
  o Home and Community-based Services (HCS)
  o Texas Home Living (TxHmL)
  o Community Living Assistance and Support Services (CLASS)
  o Deaf Blind with Multiple Disabilities (DBMD)
Implementation Plan in FFS

• CFC services for children delivered through FFS will be accessed through the current Personal Care Services (PCS) structure, which are state-plan attendant care services administered in conjunction with HHSC and the Department of State Health Services (DSHS).

• A level of care determination will be completed by the appropriate entity (nurse, local authority, etc.), and the DSHS caseworker will then perform the functional assessment to determine member need for habilitation and/or other CFC benefits.

• Current PCS providers will provide the CFC attendant and habilitation services post June 1, 2015.
Provider Helplines

• Amerigroup
  • 1-855-817-5790

• Cigna HealthSpring
  • 1-877-653-0331

• Molina
  • 1-866-449-6849

• Superior
  • 1-877-391-5921

• United
  • 1-888-887-9003
Questions

Email general questions to:
MCD_CFC@hhsc.state.tx.us

CFC Website
http://www.hhsc.state.tx.us/medicaid/managed-care/community-first-choice/