

Community First Choice

**Update for Implementation of CFC in
CLASS and DBMD Programs**

June 29, 2015

Introduction

Welcome, and thank you for joining us today!

This PowerPoint presentation and a recording of this webinar will be posted online at the conclusion of this session. A GovDelivery email alert will be sent to announce the posting.

Questions may be typed in during the presentation and we will answer them at the end of this session, as time permits

Topics of Discussion

- Non-waiver/Managed Care
CFC vs DADS 1915(c) CFC
- Provision of Services
 - Transportation
 - ERS - basic guidelines
 - Support Management
 - EVV- who does it apply to
- Eligibility
 - Monthly Monitoring/MAO requirements
 - Provider qualifications
- Individual Plan of Care (IPC)
 - When to update an IPC
 - Units for the DSA
 - 63V vs. 63CFV
- Rules
- Person-centered planning training
- Additional Information

Non-waiver/Managed Care CFC vs CLASS and DBMD

- Community First Choice (CFC) provides certain services and supports to individuals living in the community who are enrolled in the Medicaid program and meet CFC eligibility requirements.
- There are three main tracks for receiving CFC services
 - Managed Care Organizations (MCO)
 - Through a 1915(c) waiver program
 - State Plan Fee for Service (ex. PCS, PHC)

Non-waiver/Managed Care CFC vs CLASS and DBMD

- This presentation only applies to individuals receiving CFC services through the CLASS or DBMD waiver programs

Important facts about CFC in CLASS and DBMD

- No additional contracting is required
- The MCO is not involved in the provision of CFC services for CLASS and DBMD
- The reimbursement rate for CFC PAS/HAB is the same as the waiver rate for habilitation (CLASS) or residential habilitation (DBMD).

Important facts about CFC in CLASS and DBMD

- Program providers and FMSAs continue to bill for services, including CFC, through their usual billing methods and reimbursement continues through DADS
- EVV applies to CLASS but not DBMD
- All forms currently required for the waiver program continue to be required. These forms are used to justify CFC services as well as all other services an individual may need.

Provision of Services

Habilitation Transportation

CLASS and DBMD program providers deliver CFC Personal Assistance Services/Habilitation (CFC PAS/HAB) in the same manner as habilitation and residential habilitation were previously provided, this includes transportation

Habilitation Transportation

It is not the long-term intention for transportation to be billed as part of the combined CFC PAS/HAB state plan service. DADS is working on a solution for billing the transportation activities associated with habilitation and residential habilitation through the CLASS and DBMD waiver programs to be effective September 1, 2015.

CFC-Emergency Response Services

- Emergency Response Services (ERS) is available through CFC for individuals who are eligible.
- To provide CFC ERS, a CLASS or DBMD Program provider must:
 - be licensed as a personal ERS provider in accordance with 25 TAC Chapter 140, Subchapter B (relating to Personal ERS Providers); or
 - contract with a personal emergency response system provider licensed in accordance with 25 TAC Chapter 140, Subchapter B.

CFC Emergency Response Services (cont'd)

- ERS will no longer be covered as an adaptive aid in the waiver for individuals after June 1, 2015, but will now be known as a CFC ERS.
- If an individual is residing in his/her own home or a family member's home and currently receiving ERS as an adaptive aid, the IPC may continue to include this service as an adaptive aid until the next IPC renewal.

CFC Emergency Response Services (cont'd)

- The CFC ERS rate has a ceiling of \$29.76 per month.
- If the comprehensive provider is going to provide ERS, the comprehensive provider must establish an ERS rate of not more than \$29.76 per month.
- If the comprehensive provider is going contract with an ERS provider(s), then the comprehensive provider must negotiate a rate of not more than \$29.76 per month with the ERS provider.
- CLASS and DBMD providers must bill the exact amount of the contracted rate or the established rate.

Entering ERS on the IPC

- Under CFC services, both the number of units and the unit rate for ERS must be entered.
- The unit is one per month and the rate is variable.
- For the CLASS Program: the DSA must identify the contracted rate and communicate that rate with the CMA.
- For the DBMD Program: the DBMD Program provider must identify the contracted rate for ERS.
- CLASS and DBMD Program providers must bill the authorized amount as identified on the IPC and IPP.

ERS Billing Documentation

- Before billing ERS, the CLASS or DBMD provider must have documentation from the ERS contractor indicating:
 - The ERS provider successfully installed system (if billing for the first month of service); or
 - The ERS provider conducted the monthly monitoring to ensure the system works properly.

CFC Support Management

- If an individual in the CLASS or DBMD Program is receiving CFC PAS/HAB and would like training on how to select, manage and dismiss service providers, the program provider or FMSEA must provide CFC support management to the individual by providing written information developed by DADS and HHSC and available on the DADS website.

CFC Support Management (cont'd)

- During the enrollment service planning team (SPT) meeting the case manager must explain the CLASS or DBMD program services, including support management.
- Support Management is indicated as a check box on the IPC. (See item 28, below TAS and above the IPC totals.)
- Then every 90 days the services on the IPC must be reviewed and any service needs identified must be added to the IPC.

Electronic Visit Verification

Electronic Visit Verification

The HHSC Electronic Visit Verification (EVV) initiative affects Medicaid STAR+PLUS, STAR Health, acute care fee-for-service, and DADS service providers that seek reimbursement from Texas Medicaid for services provided in the home and in the community. All agencies providing reimbursable services subject to EVV to an individual or health plan member must use an HHSC-approved EVV system to record visit arrival and departure times. The provider agency will request payment using only the time recorded in the EVV system to determine billable units/hours. The following services are subject to EVV requirements:

Electronic Visit Verification

- **Managed Care**
 - Personal assistance services (PAS), personal care services (PCS), in-home respite services, and CFC services (basic attendant and habilitation) provided in the home and in the community in the managed care STAR+PLUS and STAR Health programs
- **HHSC acute care fee-for-service**
 - PCS services provided in the home and in the community

Electronic Visit Verification (EVV)

- DADS fee-for-service
 - Attendant-like services provided in the home and in the community for the following programs:
 - Community Attendant Services (CAS)
 - Community Living Assistance and Support Services (CLASS)
 - Habilitation services to transition to CFC on June 1, 2015
 - In-Home Respite
 - Family Care (FC)
 - Medically Dependent Children Program (MDCP)
 - In-home respite and flexible family support
 - Primary Home Care (PHC)
- EVV is optional for individuals who have selected the Consumer Directed Services (CDS) option.

Electronic Visit Verification (EVV)

LIST OF HHSC APPROVED EVV VENDORS

Care Monitoring 2000, LLC (CM2000)		
Website: http://www.cm2000.com/texas.aspx		
Contact:	Email:	Phone:
Alan Morris Sales Account Manager	alan.morris@cm2000.com	Cell: (214) 771-6316 Office: (855) 209-2345
Greg Lotz Sales Account Manager	greg.lotz@cm2000.com	Cell: (727) 433-3636 Office: (855) 209-2345
DataLogic (Vesta) Software, Inc.		
Website: www.vestaevv.com		
Contact:	Email:	Phone:
Gloria Garza, Ph.D. Business Development Director	Gloria@vesta.net	(956) 412-1424
Angela Byrd, Vesta EVV Specialist	angela@vesta.net	(956) 412-1424
MEDsys Software Solutions, LLC		
Website: www.medsyshcs.com		
Contact:	Email:	Phone:
Texas Dedicated Support and Sales Number		(877) 698-9392 Option 2 for sales
Jeff Calcaterra	jcalcaterra@medsyshcs.com	(419) 491-3335 Ext. 722
Hank Hernly	hhernly@medsyshcs.com	(419) 491-3335 Ext. 702

Temporarily Closed to New Provider

CFC Eligibility

Monthly Monitoring/MAO Requirements

- Individuals who receive Supplemental Security Income (SSI) benefits are categorically eligible for SSI Medicaid.
- Waiver recipients certified for Medicaid who are not categorically eligible for SSI Medicaid would be categorized under MAO (Medical Assistance Only) Medicaid. This CFC eligibility requirement applies to MAO recipients.
- In accordance with CFC regulations, an individual with MAO Medicaid must receive a monthly CLASS or DBMD service to be eligible for CFC.
 - Case management is a waiver service and meets the requirement for a monthly waiver service.

Monthly Monitoring/MAO Requirements

- DADS has developed an information letter to explain how a provider can determine if an individual is considered as an MAO recipient or not.
- The letter will be posted using GovDelivery

CFC PAS/HAB Service Provider Qualifications

- be 18 years or older;
- have a high school degree, GED, or pass a competency test with three references;
- not be the parent of an individual who is under 18 years of age or the spouse of an individual;
- meet any other qualifications requested by the individual or legally authorized representative (LAR) based on the individual's needs and preferences.

CFC PAS/HAB Service Provider Qualifications

- In addition to meeting the personnel requirements outlined in the CLASS and DBMD rules, the program provider must, if requested:
 - allow the individual to train a CFC PAS/HAB service provider in the specific assistance needed by the individual and to have the service provider perform CFC PAS/HAB in a manner that comports with the individual's personal, cultural, or religious preferences; and
 - ensure a CFC PAS/HAB service provider attends training provided by or through HHSC or DADS so that the service provider can meet any additional qualifications desired by the individual.

CFC PAS/HAB Service Provider Qualifications

- A qualified service provider of habilitation in the CLASS Program who was hired before June 1, 2015 may be a service provider of CFC PAS/HAB.
- A qualified service provider of habilitation in the CLASS Program who is hired on or after June 1, 2015 must meet the CFC PAS/HAB qualifications.
- The service provider must meet any other qualifications requested by the individual or LAR based on the individual's needs and preferences.

Individual Plan of Care

Individual Plan of Care

- A DBMD provider, CLASS DSA or CMA must ensure that CFC services are on an individual's IPC if the individual received residential habilitation in DBMD, habilitation in CLASS, or ERS as an adaptive aid as follows:
- For an individual whose SPT met before June 1, 2015 to develop an initial IPC, to renew or to revise an existing IPC:
 - The IPC may continue to include ERS as an adaptive aid, residential habilitation or habilitation on the IPC until the next IPC renewal.

IPC

- For an individual whose SPT met on or meets after June 1, 2015 to renew the IPC:
 - the DBMD provider, CLASS DSA and CMA must ensure the renewal IPC includes CFC PAS/HAB or CFC ERS and does not include ERS as an adaptive aid, residential habilitation or habilitation on the IPC.
- For an applicant enrolling in the CLASS or DBMD program whose SPT met on or meets after June 1, 2015, to develop the initial IPC:
 - the DBMD provider, CLASS DSA or CMA must ensure that the initial IPC includes CFC PAS/HAB or CFC ERS and does not include ERS as an adaptive aid, residential habilitation or habilitation on the IPC

IPC Revision

- When revising an IPC that at renewal included non-CFC services (SVC 10, 10V, ERS as Adaptive Aid), the SPT should only increase or reduce the services units/amounts for these services. A transition from non-CFC to CFC services is generally not taking place during a IPC revision. A transition of non-CFC to CFC services will take place at the next renewal of that IPC.
- When revising an IPC by adding ERS to an IPC that at renewal did not include ERS as an Adaptive Aid (SVC15), the SPT must use CFC ERS (SVC 20CFC).

Services Units for DSA Representation

- When revising an IPC that at renewal included Habilitation Services units (SVC 10) for the purpose of DSA representation at SPT meetings, these service units will remain under Habilitation Services (SVC 10).
- When renewing or revising an IPC that has a CFC PAS/HAB service authorization under SVC10CFC or 10CFV the service units for the purpose of DSA representation at SPT meetings must be authorized under CFC PAS/HAB (SVC10CFC).

When to use FMS (63V) vs. CFC FMS (63CFV)

- Include CFC FMS (63CFV) on an IPC when CFC CDS PAS/HAB is the **only** service being self-directed.
- Include FMS (63V) on an IPC if CFC CDS PAS/HAB and at least one other service is being self-directed (such as respite or supported employment)
- FMS (63V) and CFC FMS (63CFV) cannot be authorized at the same time.
- These guidelines also apply to Support Consultation.

Billing

Billing and Rates

- Effective June 1, 2015, a CLASS program provider must follow Section 7000 of the Provider manual as if CFC PAS/HAB is a CLASS Program service.
- Effective June 1, 2015, a DBMD program provider must follow 40 TAC §42.626 billable residential habilitation activities based on the service description and §42.641, which lists non-billable activities as if CFC PAS/HAB is a DBMD program service.

Rule Revisions

Rule Revisions

- DADS is currently finalizing the rule changes for the CLASS and DBMD waiver programs.
- The rules contain more detailed information about the expectations for ERS, how the new transportation service will look and incorporates the guidance from the CFC implementation information letters into the rules.
- The rules are expected to be effective March 2016.

Person-centered Planning

Training for Person-centered Planning

- Providers can elect to send staff required to complete person-centered training to:
 - 2-day training delivered by the Institute for Person Centered Practices (<http://www.person-centered-practices.org/>); or
 - other person-centered training developed and delivered in a manner approved by the Health and Human Services Commission.

Person-centered training (CLASS)

A CLASS-CMA must ensure that:

1. CMA employees **responsible for completion of the person-centered service plan**, hired **on or before** June 1, 2015, must complete person-centered service planning training **within two years after** June 1, 2015.
2. For CMA employees responsible for completion of the person-centered service plan hired **after** June 1, 2015, the training must be **completed within two years after the hire date**.

Person-centered training (CLASS)

A CLASS-DSA must ensure that:

1. DSA employees or contractors who are **responsible for completing the functional needs assessment or the person-centered service plan**, hired **on or before June 1, 2015, within two years after June 1, 2015**.
2. For DSA employees or contractors hired **after June 1, 2015**, the training **must be completed within two years after the hire date**.

Person-centered training (DBMD)

A DBMD program provider must ensure that:

Employees or contractors responsible for completion of the **person-centered service plan or the functional needs assessment**;

- **hired on or before June 1, 2015, receive training within two years after the hire date.**
- **hired after June 1, 2015, receive training within two years after the hire date.**

Person-centered Planning

Resources:

www.dads.state.tx.us/providers/LA/PersonDirectedPlanningGuidelines.pdf

www.learningcommunity.us/

www.person-centered-practices.org/home.html

www.texasprojectfirst.org/PersonCentPlanning.html

www.dads.state.tx.us/providers/HCBS/transitionplans/index.html

Additional Information

Consumer Rights and Services

- For individuals in a waiver program, complaints regarding their CFC services, program provider, or FMSA are handled in the same manner as complaints are today.
- DADS Consumer Rights and Services:
1-800-458-9858

GovDelivery Alerts

- As part of your contract to provide services you are required to sign up for GovDelivery alerts.

<http://www.govdelivery.com/>

- Anyone can sign up and we recommend having all staff sign up so they can stay informed about changes in our programs.

CFC Resources

- Information letters are available online:
<http://www.dads.state.tx.us/providers/CFC/index.cfm>
- Case managers are required to provide individuals currently receiving habilitation or residential habilitation with individual letters from DADS that are included as an attachment to IL 2015-30 and provide an oral explanation of the letter by July 1, 2015.
- Case managers can do this in person or over the phone if the letter is mailed to the individual or LAR.
- DADS has developed an FAQ document that is available on the DADS CFC provider resources page.

<http://www.dads.state.tx.us/providers/CFC/cfcfaqs.pdf>

DADS Online Information

- For more information, please visit:
<http://www.dads.state.tx.us/providers/CFC/index.cfm>
- Please email policy questions, with “CFC” in the subject line, to: **CfcPolicy@dads.state.tx.us**
- For questions about a specific individual’s CFC services, email PE/UR at: **cfcoperations@dads.state.tx.us**

HHSC Online Information

- HHSC CFC website:
<http://www.hhsc.state.tx.us/medicaid/managed-care/community-first-choice/>
- HHSC CFC Mailbox
MCD_CFC@hhsc.state.tx.us

Community First Choice

Thank You!