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

November 18, 2021

Membership Roll Call Gathered through Attendee List in WebEx

Agenda

- Online Meeting Reminders
- Public Feedback & Engagement
- Approval of Last Meeting's Minutes
- Medicaid Transformation Corner-1915i
- State Budget
- DPI Presentation Response
- Proposed DD Eligibility Criteria Language
- Member Presentation Response
- 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

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

Medicaid Transformation Corner

Tailored Plan Launch

- NCDHHS has announced that Behavioral Health and Intellectual/Developmental Disabilities (I/DD) Tailored Plans will launch Dec. 1, 2022, instead of July 1, 2022. Individuals who need certain services to address a serious mental illness, serious emotional disturbance, severe substance use disorder, I/DD or TBI, may be eligible to enroll in a Behavioral Health I/DD Tailored Plan. This updated implementation schedule will provide NCDHHS and the Local Management Entities/Managed Care Organizations (LME/MCOs) with the additional time necessary to address the complexities of a high-quality system to care for and treat individuals with mental health and substance use disorders, I/DD and traumatic brain injuries (TBI).
- For more information, please see the Behavioral Health I/DD Tailored Plans: Updated Launch Fact Sheet.

1915(i) - Requirements

	1915(i)
Approval	✓ SPA application ✓ 90-day timeframe for CMS approval ✗ Renewal after 5 years if SPA targets eligibility; otherwise, no renewal process required
Eligibility	✓ Populations do not need to meet institutional LOC ✓ Can target based on defined criteria ✗ Cannot cap enrollment
Financing	✓ No cost/budget neutrality requirements

https://www.medicaid.gov/medicaid/home-community-based-services/home-community-based-services-authorities/home-community-based-services-1915i/index.html

1915(i) – Proposed Services

Community Transition

- Current (b)(3) Service
- Individuals transitioning from institutional settings to community living
- Must be transitioning to a living arrangement where the individual is directly responsible for his or her own living expenses
- Eligible populations are individuals with MH, SUD, IDD or TBI diagnosis

1915(i) – Proposed Services

Covered Community Transition services are:

- Security deposits that are required to obtain a lease on an apartment or a home;
- Essential furnishings, including furniture, window coverings, food preparation items, bed/bath linens;
- Moving expenses required to occupy and use a community domicile;
- Set-up fees or deposits for utility or service access, including telephone, electricity, heating and water; and
- Services necessary for the beneficiary's health and safety, such as pest eradication and one-time cleaning prior to occupancy.

1915(i) – Proposed Services

Respite

- For Individuals who live with a primary caregiver
- Available under (b)(3) now
- Community Based or Facility Based
- There will be limits to the number of hours per month or year; potential exceptions to those limits for extenuating circumstances
- Planned or Unplanned

1915 (i) – Proposed Services

- **Beneficiaries that have an I/DD or TBI, at any age**
- **Children ages 3-20 that have a SED**
- **Children ages 3-20 that have a severe SUD**
- **Children meeting diagnostic criteria who reside in therapeutic foster care, traditional foster care, or group home and are at risk of losing their placement**

1915(i) – Proposed Services

Community Living and Supports

- Under (b)(3) the similar service is currently called In Home Skill Building
- Proposed to expand to Adults with TBI
- Goal for individuals who utilize this service to live successfully in his/her own home, the home of his/her family or natural supports and be an active member of his/her community.
- Mirrors Innovations and State Funded Service Definitions

1915(i) – Proposed Services

Community Living and Supports

Community Living and Support may include the following services and supports:

- Learn and practice new skills and improve existing skills related to the following: interpersonal, independent living, community living, self-care, and self-determination.

- Provides supervision and assistance for the individual to complete an activity to his/her level of independence; assistance in monitoring a health condition, nutrition or physical condition, incidental supervision, and daily living skills.

- IHSB Definition included 10-12 hours a week and the requirement to have a fade Out Plan; goal is for CLS to allow more hours a week and no Fade Out Plan Requirement

1915(i) – Proposed Services

Supported Employment for IDD and TBI

- Available under (b)(3) and updated definition will align with Innovations and State Funded IDD Definition
- Adults with TBI eligibility added
- Individuals who are eligible for SE through Vocational Rehabilitation should still access through VR
- Updated definition aligns with Community Integration/Supported Employment Best Practices

1915(i) – Proposed Services

Supported Employment for IDD and TBI

- Phases
  - Pre-Employment
  - Employment
  - Long-Term Supported Employment

- Typical limits per phase but also ability to request additional authorized hours if appropriate justification

State Budget Update

State Budget I/DD Related Items

- **Transfer Medicaid HCBS Savings to HCBS Special Fund-$274,800,000**
  - **Additional Innovations Waiver Slots (1000)**
    - **$3.9 million FY 21; $25.9 million FY 23**
  - **Additional 114 CAP-DA Slots**
    - **$500k FY 22, $1 million FY 23**
  - **Additional HCBS Slots (Innovations, TBI or CAP)**
    - **$4.3 million FY 22; $6.5 million FY23**
  - **HCBS Direct Care Worker Wages**
    - **$33.9 million FY 22; $68 million FY 23**

Updated 11.17.21

State Budget I/DD Related Items

- **Supplemental Short-Term Assistance for Group Homes ($1.8 million)**
- **Group Home Stabilization & Transition Initiative ($10 million)**
- **Temporary Additional Funding Assistance for ICF-IIDs ($12.6 million)**
- **Wage Increase for Direct Care Workers in ICFs**
  - **80% of increase towards staff**

Updated 11/17/21

State Budget I/DD Related Items

- **Aces for Autism (Pitt County)-$100,000**
- **GiGi's Playhouse (Raleigh & Charlotte)-$500,000**
- **Reality Ministries (Durham)-$50,000**
- **The Enrichment Center (Winston-Salem)-$250,000**
- **Programs for Students with I/DD (for college advising staff) 2-year pilot-$250,000**
- **Comprehensive Transition Post Secondary Scholarship (UNC institution)-$303,574**

Updated 11/17/21

DPI Presentation Response

DHHS/DPI Collaboration

- **Staff from DHB & DMH/DD/SAS will continue to collaborate with DPI regarding strategies to improve coordination of care for individuals supported by both systems.**

PROPOSED DD Eligibility Criteria Language

Proposed DD Eligibility Criteria Language

A comprehensive medical examination that includes a comprehensive medical assessment which denotes the individual's developmental disability diagnosis and accompanying functional limitations as defined by G.S. 122C-3(12a) may be utilized for individuals with developmental disabilities without accompanying intellectual disabilities.

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.

Proposed Language Continued…

In accordance with G.S. 122C-3(12a) or Clinical Coverage Policy 8P, results in functional limitations in three or more of the following areas of major life activity:

- **Self-Care** (ability to take care of basic life needs for food, hygiene, and appearance
- **Receptive and Expressive Language/Understanding & Use of Language** (ability to both understand others and to express ideas or information to others either verbally or non-verbally)
- **Learning** (ability to acquire new behaviors, perceptions and information, and to apply experiences to new situations)
- **Mobility** (ambulatory, semi-ambulatory, non-ambulatory)
- **Self-direction** (managing one's social and personal life and ability to make decisions necessary to protect one's life)
- **Capacity for independent living** (age-appropriate ability to live without extraordinary assistance.
- **Economic self-sufficiency** (ability of individual to maintain sufficient income to consistently meet their basic needs)

Member Presentation Response

Status of Requested Policy Considerations

- **Increase Access to Innovations Waiver:**
  - **No-Prior Authorization: DHB is in active consideration of how to operationalize processes around only requiring services that exceed the budget amount to require authorization**
  - **ISP Frequency: Under Ongoing Consideration**
  - **Eliminate Cost Summaries: Unable to Proceed**
- **Relatives as Providers for Children**
  - **DHB I/DD Staff are in active consideration and coordinating with CAP-C with an emphasis of looking at SIS Level EFG**

Status of Requested Policy Considerations

- **Staff Support with Processing AT & Home Modification Request**
  - **Under active consideration and currently coordination with key Medicaid Transformation staff to discuss further**
- **Exclude Home-delivered Meals and AT from Budget; Allow Home Modifications to Exceed $50k**
  - **Under active consideration; DHB is seeking to allow allowance to exceed $135k for HDM/HM/VMs**

Status of Requested Policy Considerations

- **Care Coordination Monitoring (Virtual/Frequency)**
  - **Under Ongoing Consideration-Reviewing LME/MCO reports and assessing for Health & Safety**
- **Futures**
  - **Active Consideration to add to Innovations Waiver and 1915(i) service array**

Competitive Integrated Employment Update

JCB J403 Competitive Integrated Employment and Meaningful Day Options

- *The NC Department of Health and Human Services (DHHS) is committed to transforming its services and systems to support individuals with disabilities as fully included members of their communities. To achieve this vision, the Department intends to maximize opportunities for individuals with disabilities to explore, seek, and maintain Competitive Integrated Employment and benefit from other meaningful day options.*

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