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PBH Administration Communication Bulletin

FY-0708-AA-07

To: PBH Consumers, Stakeholders and Network Providers

**From: Andrea Misenheimer
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Date: December 7, 2007

**RE: Response to General Feedback to Innovations Renewal
Draft 1915(c) Innovations Waiver**

PBH would like to thank stakeholders throughout the PBH area and state that have reviewed the Innovations Renewal draft document and shared their feedback. A general summary of the feedback and responses to this feedback is contained within this communication. A detailed Q&A document will follow this communication to respond to specific questions raised on both the Innovations web forum and during stakeholder groups.

The Innovations waiver is designed to provide a comprehensive system of supports for people within the PBH area who have significant developmental disabilities. Through the system of waivers (Piedmont Cardinal Health Plan 1915(b) (c) that PBH operates, waivers can be designed to meet the unique needs of individuals in the five counties served by PBH.

The waiver is under final review by the Division of Medical Assistance (the state Medicaid agency). Following this review, DMA will submit the waiver to the Centers for Medicare and Medicaid Services, (Federal Medicaid). CMS has 90 days to complete their review of the document. A schedule of educational opportunities for all stakeholders regarding implementation activities will be posted to the Innovations website in early January, 2008 www.pbhcare.org.

**Summary of Innovations Waiver Renewal
Summary of Feedback and PBH Response
12-7-07**

Waiver Feedback	PBH Response
<p>Request from stakeholders to expand the bed size in the proposed Residential Supports definition to include larger facilities.</p>	<ul style="list-style-type: none"> • <i>Newly enrolled</i> facilities with the implementation of this renewal will be 3 beds or less • <i>New participants</i> to the waiver must live in private homes or facilities with 3 or fewer beds • Participants who live in facilities 4 to 8 beds who currently receive Innovations Residential Supports will continue to be eligible to receive Residential Supports • We have requested that adults who live in licensed facilities designed to support people with developmental disabilities that are larger than 3 beds, be allowed to receive additional habilitation services based on individual needs through expansion of the 1915(b)(3) services. The proposed expansion of B-3 services to adults living in such facilities would make the following services available without their enrollment in the Innovations waiver: <ul style="list-style-type: none"> Residential Supports Day Supports Supported Employment Community Networking Community Guide Financial Supports Individual Goods and Services Specialized Consultative Crisis Services

	<p>Communication Devices Assistive Technology: Equipment and Supplies Natural Supports Education</p> <ul style="list-style-type: none"> • Individuals currently funded through Innovations that choose to live in facilities larger than three beds may opt to use the newly proposed B-3 Residential service option to receive funding to meet their needs in lieu of remaining on the Innovations Waiver.
Many questions regarding service definitions and flexibility in usage	Q&A document is under development and will be found on the website to address specific issues
Music Therapy and related therapies	<ul style="list-style-type: none"> • PBH removed the Music Therapy definition from the renewal service array because we were unable to identify sufficient numbers of potential providers. PBH will continue to consider the inclusion of this and other similar therapies in future waiver amendments. • There was a mixed response to this definition from stakeholders. • Several families expressed interest in music being part of their family members programming. Strategies that address goals in existing service definitions can include the use of music. • Individuals who choose to Self Direct their services may elect to request funding for Music Therapy through Individual Goods and Services.
Expansion of self-direction options to include a co-employer model of Self Direction resulted in feedback that indicated that this term was confusing.	<ul style="list-style-type: none"> • The Co-Employer has been re-named Managing Employer.
Use of waiver services during school hours	<ul style="list-style-type: none"> • Per federal regulations, waiver services cannot replace services funded under the Individuals with Disabilities Education Act. • This issue will be clarified in the revised Innovations Manual.

	<ul style="list-style-type: none"> • Children may receive Innovations Services outside their school schedule (public, private, home, homebound) as long as they adhere to the maximum service hours allowed in the Limits on Sets of Services and their Individual Budgets.
Concern about lack of easy access to 24 hours of support for participants who need this level of support and live in private homes	<ul style="list-style-type: none"> • 24 hours of services can be accessed if the participant demonstrates need for this level of support. • For individuals living in private homes, intensive night support was added to the Home Supports definition to allow participants in that setting to access 24 hours of service. This level of support requires the approval of the PBH Medical Director or Assistant Medical Director.
Feedback on weekly limits was positive but some families suggested monthly limits instead	<ul style="list-style-type: none"> • The majority of the feedback was positive about weekly limits rather than the previous daily utilization review benchmark. • Limits were established as weekly limits as it was felt that monthly limits would be complicated to implement. • The needs of participants can be met within weekly limits.
Request to add specific types of technology	<ul style="list-style-type: none"> • All requests were considered and many new items have been added to the waiver. • For participants who self-direct their services, items not included in the renewed waiver may be requested under Individual Goods and Services, subject to the limitations of that definition. • Community Guides may be able to help participants access other funding resources to pay for items not included in the waiver.
Concern about removal of Personal Assistance from the waiver	<ul style="list-style-type: none"> • Because Innovations Home Supports service definition includes

<p>Concern about transition from Personal Assistance to Home Supports over staff qualifications</p>	<p>habilitation, personal care, and supervision, the needs of participants living in private homes can be met under the Home Supports definition.</p> <ul style="list-style-type: none"> • State Plan Personal Care Service is still available to participants who need only Personal Care. However, participants funded under the Innovations Waiver must be in need of “Active Treatment” (habilitation). The participant’s need for active treatment must be met. Habilitation can take many forms including basic communication and stimulation and response. • The State of North Carolina determines minimum provider qualifications for State Plan Personal Care. • Almost all of the staff providing Personal Assistance under the Innovations Waiver appear to be qualified to provide Home Supports. If new staff are needed, provider agencies will locate qualified staff to meet the staffing qualifications of Home Supports. • PBH will work with providers and families impacted by the transition from Personal Assistance to Home Supports to assure that qualified staff are in place at the time of waiver renewal. • Participants have the option to begin the transition prior to waiver renewal by requesting this change through their Support Coordinator. • Staff who do not meet the educational requirements for Home Supports may be able to provide Respite Services, subject to the limits of that definition, the provider agency’s hiring policies, and any future change in qualifications as determined by
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	State Rule.
Concern that proposed use of waiver service policy was only required quarterly. Comments from public forums were in favor of waiver services being required monthly. Stakeholders were concerned that Innovations waiver participant's active used service made available to them.	<ul style="list-style-type: none"> • The use of waiver service policy has been revised to reflect a required monthly use of a waiver service. • Prioritization Criteria has been refined to assess the service needs of any new applicants in a manner that supports their need for this intensity of service.
Waiting List concerns	<ul style="list-style-type: none"> • We have been informed by the Division of Medical Assistance that the cost over-runs in the Medicaid Budget prevent expansion of the Innovations waiver. • PBH is very concerned about the Wait List and continues to address the need for more waiver funding ("slots") with the State Agencies. • If participants in residential facilities greater than three beds, elect to receive funding through the newly proposed B-3 Option, those slots will be available to participants on the Wait List.
Concerned about availability of Day options in Davidson county	<ul style="list-style-type: none"> • The waiver service array proposed in the renewal presents a range of options for funding for day programming. • The PBH Provider Network Department is following up on the concerns of Davidson County families.