

Information on how to continue accessing I/DD Services with the Merger and 1915 B/C Waiver Individuals without CAP IDD Waiver in Johnston County

August, 2012

Why are we changing?

• House Bill 916 is a mandate that supports the statewide expansion of the 1915 (b)/(c) Medicaid Waiver

 LME's were encouraged to apply to operate the 1915 (b)/(c)
Waiver or choose to merge with an LME that has been approved

• Durham and Wake LME's merged effective 7/1/12. There is an inter-local agreement with Johnston and Cumberland LMEs effective 1/1/2013

• The alliance of these four counties will encompass a population of almost 1.7 million residents, with about 186,000 Medicaid-eligible citizens

What is a MCO?

- MCO means Managed Care Organization. An MCO is a HMOlike health plan that has its own network of providers. Recipients that are in an MCO get all of their services from the providers that are in the MCO network.
- All publicly funded MH/DD/SA services are managed by the MCO.
- Managed Care includes ensuring access to services, monitoring for quality of care, authorization of medically necessary services, and a choice of providers to effectively implement services. Waiver services and supports are available to individuals who, for the purposes of Medicaid eligibility, are residents of counties served by the Prepaid Inpatient Health Plan (PIHP) that is implemented by the MCO.

What will stay the same?

- Eligibility criteria and waiting list for state funded services
- State funded services, other than Targeted Case Management, remain in place
- Current Providers are automatically enrolled with the MCO for the first year

Will current services continue?

- Yes, with the exception of Targeted Case Management which is no longer a service after January 1, 2013
- The MCO will have a benefit plan that includes the same services available now (Developmental Therapy, Respite, ADVP, Long Term Vocational Support, etc.)
- Some services not previously covered by Medicaid will be available (called B3)

Respite - periodic support and relief for primary caregivers **Community Guide** – assistance locating and coordinating community resources and activities, fading in and out as needed

• I/DD Access Coordinators will be available to assist when questions or needs for additional/change in services arise

In all cases, Natural Supports should be explored and utilized

What will change and when?

July 1, 2012

- The Durham Center and Wake LME merged to become Alliance Behavioral Healthcare
- Corporate office in RTP and local offices in Wake and Durham

January 1, 2013

- For Johnston, I/DD Access Coordinators will be part of Access & Information and can assist when service needs change or questions arise
- Service array for both Medicaid and non Medicaid
- Everyone on CAPMRDD transitions to NC Innovations
- How the waiting list for NC Innovations is prioritized
- Responsibilities currently carried out by Targeted Case Management will transfer to MCO Care Coordination and UM Care Management, Service Providers, and/or Natural Supports
- New Medicaid funded services for people with I/DD (Respite and Community Guide)

What will happen to the current waiting list?

For CAP I/DD (NC Innovations)

- Referred to as Registry of Unmet Needs
- Those currently on the Waiting List for CAP I/DD are automatically on the Registry of Unmet Needs for NC Innovations <u>as long as ICF Level</u> of Care criteria is met
- Prioritized by date and time of referral, no longer by severity of need
- The MCO starts out with over 1,000 people waiting for NC Innovations funding and the state will not be allocating additional slots for at least the first year

For State Funded Services

- Prioritized by severity of need, not by date and time of referral
- Cost savings in year two and the addition of B3 services, may get services to people who have been without any and waiting a long time

**Financial eligibility may be considered.

What is ICF Level of Care?

To be Medicaid certified at the ICF-MR level-of-care, the individual must:

Require active treatment necessitating the ICF-MR level of care. (Active treatment refers to aggressive, consistent implementation of a program of specialized and generic training, treatment and health services. Active treatment does not include service to maintain generally independent clients who are able to function with little supervision or in the absence of a continuous active treatment program)

<u>AND</u>

Have a diagnosis of **Intellectual Disability**, or a **condition that is closely related to IDD**:

Intellectual Disability is a disability characterized by significant limitations both in intellectual functioning and adaptive behavior as expressed in conceptual, practical and social skills. The condition originates before age of 22.

What is ICF Level of Care? (Cont'd.)

Persons with **closely related conditions** refer to individuals who have a severe, chronic disability that meets <u>ALL</u> of the following conditions:

- 1. Is attributable to:
 - a) cerebral palsy or epilepsy or
 - any other condition, other than mental illness, that is closely related to intellectual disability because this condition results in impairment of general intellectual functioning <u>or</u> adaptive behavior similar to intellectually disabled persons;
- 2. It is manifested before the person reaches age 22;
- 3. Is likely to continue indefinitely: and
- 4. It results in a **substantial functional limitation** in <u>3 or more</u> of the following areas of major life activity: self-care; understanding and use of language; learning; mobility; self-direction; capacity for independent living

Care Coordination

- Care Coordinators and Supervisors work for the MCO and will be located at each county's local office
- The Care Coordination will be involved with the following tasks:
 - Educating participant/family/providers about services, waiver requirements, options
 - Assessment of support needs (completing, arranging for, obtaining)
 - Linkage to needed MH/DD/SA resources (includes ensuring provider choice)
 - Facilitation of Planning / Plan Development
 - o Monitoring plan implementation, including health and safety
 - Medicaid eligibility coordination

Community Guide

- All current Targeted Case Management agencies can provide Community Guide effective 1/1/2013 if they are in good standing and choose to provide that service
- Community Guide Provides the following supports:
 - Advocacy Support
 - Linkage to community resources
 - Assistance obtaining medical care
 - Supporting Managing Employers in Individual and Family Directed Services option

Care Coordinators do not perform functions of Community Guide

• Community Guide is both an NC Innovations Waiver Service and B3 Service which is available to individuals receiving NC Innovations and those with I/DD who have Medicaid

Who will help me advocate for myself/family member?

Advocacy Organizations

- ARC of NC and Wake
- Autism Society
- Triangle Down Syndrome Network
- Family Support Network
- Other

Community Guide can

- Advocate and collaborate with other individuals to support the life goals of the person with I/DD
- Provide first-hand information about providers
- Assist in locating and accessing social, educational, natural and community resources

After January 1, 2013; how will new people apply for services?

By calling Alliance Behavioral Healthcare's Access and Information line at

1-800-510-9132

An I/DD Access Coordinator will complete a screening, secure documentation regarding the diagnosis, skills and current functioning

The MCO's I/DD Eligibility Review Committee, chaired by the I/DD Clinical Director, will determine eligibility and refer to Care Coordination, Community Guide, Services, and/or place on wait list or Registry of Unmet Needs

Questions

If your questions do not get answered today or you think of a new question, you can email them to:

TITLE	NAME	PHONE	EMAIL
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