

Steve Sisolak
Governor



Richard Whitley
Director

State of Nevada Department of Health and Human Services

Home and Community Based Services (HCBS) Waivers for
Physically Disabled (PD) and Frail Elderly (FE)

Division of Health Care Financing and Policy

Presenter: Richard McFeely, SSPS II, LTSS



9/22/2022

Helping people. It's who we are and what we do.

Agenda

1. HCBS PD and FE Waivers overview.
2. Addition of Private Case Management Services
3. Addition of Legally Responsible Individual (LRI)
4. Restoration of 6% rate reduction
5. Additions from American Rescue Plan Act (ARPA)
6. Additional proposed changes to waivers
7. Additional information for public comments
8. Contacts
9. Questions/ Public Comment



HCBS PD and FE Waivers

- Waivers are Federally authorized by the Centers for Medicare and Medicaid Services (CMS) under 1915 (c) of the Social Security Act
- Waivers are an optional expansion of Medicaid coverage to help keep recipients in the community
- The State receives federal match
- Waivers must demonstrate cost-neutrality
- Waiver applications are reauthorized every 5 years by CMS
- Amendments to Waivers must be approved by CMS



Proposed Addition of Private Case Management Provider

1. Public Case Management

- a. Provider – Aging and Disability Services Division (ADSD)

2. Private Case Management (PCM)

- a. Providers – Open to interested private parties
 - Must enroll as a Provider Type (PT) 48, 58, 57 & 59
 - Requirements to enroll go can be found on the Medicaid website www.Medicaid.nv.gov

NOTE: If interested in becoming a PCM provider – you will be unable to provide direct waiver services.

3. Waiver applicants/recipients will be given the choice of PCM or Public Case Management provider during the intake process which is completed by an ADSD Intake Specialist.

- a. The Statement of Choice (SOC) form has been updated to reflect the choice of Public or Private Case Management.

4. Throughout the waiver application, ADSD Case Management was replaced with “Case Management Providers” to reflect both public and private providers.

- a. PCM has a limit of 12 units authorized per service month.



Proposed Addition of LRI to Provide Waiver Services

- Addition Of Legally Responsible Individual (LRI) to be able to provide direct waiver services.
 - 1.) LRI's can now provide assistance to PD waiver recipients for the following waiver services: Attendant Care, Homemaker, Respite and Chore.
 - 2.) LRI's can provide assistance to FE Waiver recipients for the following services: Homemaker, Respite and Chore.
 - 3.) LRIs have the same requirements as non-LRI/non-relative caregivers, where they are subject to criminal background check, must be enrolled through an Intermediary Service Organization (ISO) or Personal Care Agency. Services must be prior authorized by ADSD. Must adhere to 21st Century Cures Act, Electronic Visit Verification (EVV).





Restoration of 6% Rate Reduction

- Restoration of 6% rate reduction for all PD and FE waiver services.

1.) During the 2021 Nevada Legislative Session, restoration of the six percent rate reduction was approved effective July 1, 2021. The restored rate is reflected on PD and FE Waivers.

2.) Services that were restored: Case management, Homemaker, Respite, Attendant Care, Assisted Living, Chore, Environmental Accessibility Adaptions, Home Delivered Meals, Personal Emergency Response System, Specialized Medical Equipment, Adult Daycare (FE) Adult Companion (FE) Augmented Personal Care (FE).

NOTE: Reminder - Per Medicaid Services Manual Chapter 100, Section 105.1, it is the provider's responsibility to bill the usual and customary rate, and reimbursement by Medicaid is the maximum allowable amount or billed charge, whichever is less.



Additions from American Rescue Plan Act (ARPA)

- 1) For the PD waiver the Environmental Accessibility Adaptation (EAA) service has been enhanced to include:
 - Allowable assessment and travel fees. This is in addition to the current limit of \$3230.
 - All sub-contractors must be licensed or certified if applicable. Must have a contractor's license if completing installation.

- 2) For the FE waiver the provision of Home Delivered Meals (HDM) has been added.
 - There is a limit of two meals per day
 - Meals must be prior authorized by the case manager.
 - HDM providers must be enrolled as Provider Type 58 with specialty code 204, an exception to the provider requirement.

- 3) Both additional services are funded by ARPA which was effective July 1, 2022, and run through March 31, 2024, or until funds are exhausted.
 - These services were added into FE MSM Chapter 2200 and PD MSM Chapter 2300 from the public hearing that was held June 28, 2022.



Additional Proposed Changes

- The State will update the intake process to improve the applicants wait time to begin receiving services including how referrals/ applications can be sent to appropriate ADSD Community Based Care (CBC) District office. For referrals, please contact ADSD at <https://adsd.nv.gov/> (PD)
- The State will revise the waiver wait list process and add language to indicate that ADSD is responsible for the management. Addition of priority three to the wait list - “who need services due to a crisis or significant change in support system.”
- The State will include a process on how the applicant/ recipient can request an expedited Fair Hearing. This may be done if a recipient/ applicant feels a standard hearing could jeopardize their life, health, or ability to attain or maintain maximum function. Documentation to support this request from your medical provider must be included in the request.
- Provider qualifications updated to align with current enrollment requirements for all services, and updated time frames for provider revalidation from 3 years to 5 years. (PD)



Proposed changes continued

- The State revised case management provider qualifications and licensure approval and ongoing review for both public and private case management providers.
- The State will update several performance measures (responsible party for data collection, frequency of data collection, sampling approach and responsible party for data aggregation and analysis) to ensure that assurances set forth by the waiver are met.
- The state revised the service plan (aka Plan of Care) development, updates and reviews process to include both private and public case management entities.
- Prior authorizations can be entered by DHCFP LTSS or ADSD.
 - Direct waiver services authorized by PCM will be entered by DHCFP LTSS.
 - Direct waiver services authorized by ADSD will be entered by ADSD.





Contacts

- For all inquiries, please contact our general inbox below
 - hcbs@dhcfp.nv.gov
- LTSS Waiver Unit
- Social Services Chief III – Kirsten Coulombe
- SSPS III – Ellen Frias-Wilcox
- SSPS II – Richard McFeely (ID Waiver)
- SSPS II – Megan Quintana (FE/PD Waiver)





Public Comments

- The FE (first link) and PD documents can be viewed in their entirety at the following links:

<http://dhcfp.nv.gov/uploadedFiles/dhcfpnavgov/content/Pgms/LTC/FEWaiverAmendment-Final.ADA8.26.22pdf.pdf>

<http://dhcfp.nv.gov/uploadedFiles/dhcfpnavgov/content/Pgms/LTC/FinalPDWaiverRenewal8.2022-ADA.pdf>

- To post additional public comments please see the following:
- HCBS inbox: hcbs@dhcfp.nv.gov
- Mail 1050 E William Street, Suite 435 Carson City, NV 89701
- Fax 775-687-8724 Attn: LTSS Unit
- Public comment will be accepted until September 29, 2022
- For additional information please see the below link:
 - <https://dhcfp.nv.gov/Pgms/LTSS/LTSSHome/>





Questions/ Public Comment

Questions?

