



TEXAS
Health and Human
Services

CLASS and DBMD Quarterly Webinar

**Rachel Perez, CLASS/DBMD Policy Lead
Lorenza "Mandy" Martinez, DBMD Policy Specialist, &
Pedro "Pete" Munoz, CLASS Policy Specialist
Long-Term Services and Supports (LTSS) Policy**

June 12, 2024

Agenda



Policy

- **DBMD Region 1**
- **HHSC Branding Changes**
- **Administrative Transfer of 40 TAC Chapter 49 to 26 TAC Chapter 52**

PES

- **CLASS Financial Eligibility**

UR

- **DBMD Suspension of Program Services**

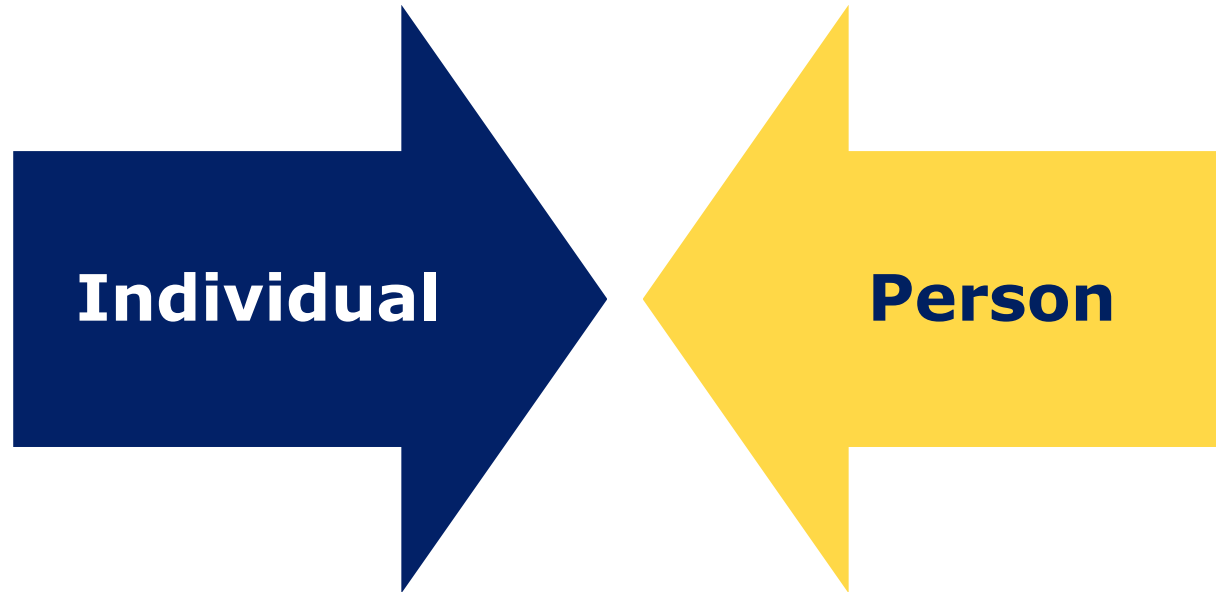
Budget & Support Services

- **Online Systems Applications**

EVV

- **Electronic Visit Verification**

HHSC Branding



- [HHS Branding Guidelines and Waiver Program Handbook and Form Updates Alert](#)
- [HHS Brand Guide Plain Language Terms and Phrases](#)

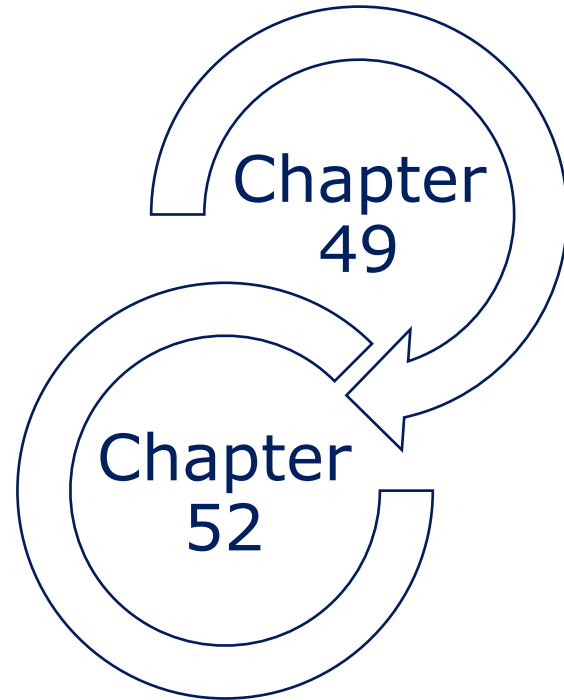


TEXAS
Health and Human
Services

Contracting For Community Services



TEXAS
Health and Human
Services



Title 26
Chapter 52
Contracting For Community Services

DBMD Region 1 Providers Needed



[DBMD Program](#)

[HHS Regional Map](#)



TEXAS
Health and Human
Services



TEXAS
Health and Human
Services

HHS Media Services 1406/108
October 2018



TEXAS
Health and Human
Services

Thank You!

CLASSPolicy@hhs.texas.gov
DBMDPolicy@hhs.texas.gov



TEXAS
Health and Human
Services

CLASS – Financial Eligibility

Eric Pena, Manager

CLASS/CFC Program Eligibility and Support (PES)

CLASS Financial Eligibility

Slide 1 of 4

Today, we'll be discussing Financial Eligibility for CLASS Waiver services.

[Title 26 Chapter §259.51](#) Eligibility Criteria for CLASS Program Services and CFC Services:

(a) An individual is eligible for CLASS Program services if:

(1) the individual meets the financial eligibility criteria described in Appendix B of the CLASS Program waiver application approved by CMS and available on the HHSC website;



TEXAS
Health and Human
Services

CLASS Financial Eligibility (cont.)

CLASS Provider Manual, Section [2200](#) – Case Management Agency (CMA)

- The CMA must verify Medicaid eligibility each month by monitoring the Medicaid Eligibility Service Authorization Verification (MESAV) system.
- The Medicaid eligibility must verify the individual is eligible in the month that is being checked.
- Documentation of this monthly verification of eligibility for Medicaid must be maintained by the CMA and available for review during contract monitoring visits.



TEXAS
Health and Human
Services

CLASS Financial Eligibility (cont.)

CLASS Provider Manual, 2200 – CMA

- If the CMA receives notice of an individual's impending loss of Medicaid eligibility, the CMA must work proactively with the individual/legally authorized representative (LAR) to ensure Medicaid eligibility is re-established as soon as possible.
- For individuals who lose Medicaid eligibility, the CMA must offer direct assistance to the individual/LAR as necessary to help the individual re-establish eligibility.



TEXAS
Health and Human
Services

CLASS Financial Eligibility (cont.)

CLASS Provider Manual, 2200 – CMA

- The CMA must follow up with the individual/LAR at least every two weeks and document progress toward completion of necessary steps until Medicaid eligibility is re-established or the individual is terminated from the CLASS program.



TEXAS
Health and Human
Services

CLASS Financial Eligibility (cont.)

CLASS Provider Manual, [3200](#) – Direct Service Agency (DSA)

- The DSA must verify Medicaid eligibility each month by monitoring the Medicaid Eligibility Service Authorization Verification (MESAV) system.
- The DSA must verify the individual is eligible in the month that is being checked. Documentation of this monthly verification of eligibility for Medicaid must be maintained by the DSA and available for review by HHSC staff.



TEXAS
Health and Human
Services

CLASS Financial Eligibility (cont.)

CLASS Provider Manual, [3200](#) – Direct Service Agency (DSA)

- If an individual is found to be ineligible for Medicaid, the DSA must notify the case manager no later than the next business day. The DSA must maintain verifiable evidence of notifying the case manager.



TEXAS
Health and Human
Services

CLASS Financial Eligibility (cont.)

MESAV Example of Continued Medicaid

	Seq Nbr	Effective Date	End Date	Cov Cd	Second Cov Cd	Pgm Type	Elig Cat	Add Date	Update D
▶	1	5/1/2015	12/31/9999	R		13	4	4/14/2015	5/21/15
	2	4/1/2015	4/30/2015	R		13	4	3/12/2015	5/21/15
	3	9/1/2012	3/31/2015	R		88	4	11/1/2012	5/21/15
	4	8/1/2012	8/31/2012	P		88	4	11/1/2012	5/21/15
	5	7/1/2012	7/31/2012	P		88	4	11/1/2012	5/21/15
	6	6/1/2012	6/30/2012	P		88	4	11/1/2012	5/21/15
	7	7/1/2012	6/30/2012	P		88	4	11/1/2012	5/21/15

Utilization

Diagnosis

Medicaid

County

Previous Reference

Service Authorization

Managed Care

Medical Necessity

Former Name

Levels



TEXAS
Health and Human
Services

CLASS Financial Eligibility (cont.)

MESAV Example of Continued Medicaid

- In the example above, in the end date column, it shows a year of 9999 showing that Medicaid coverage continues.

	Seq Nbr	Effective Date	End Date
▶	1	5/1/2015	12/31/9999

- In the PGM Type (Program Type) Column, it shows the program type of Medicaid the client is receiving.

d Cov Cd	Pgm Type
	13



TEXAS
Health and Human
Services

Medicaid Eligibility by Program Type

TOA	Medicaid Type	MESAV PT
TA02	ME-SSI Waivers	13
TA10	ME-Waivers	14
TA22	ME-Manual SSI	12
TA27	ME-Prior Medicaid Institutional – Waiver	14
TA78	PCA Medicaid-Federal Match-No Cash	78
TA79	PCA Medicaid-No Federal Match-No Cash	79
TA80	PCA Medicaid-Federal Match-With Cash	80
TA81	PCA Medicaid-No Federal Match-With Cash	81
TA82	MA-FFCC	82



TEXAS
Health and Human
Services

Medicaid Eligibility by Program Type (cont.)

TOA	Medicaid Type	MESAV PT
TP03	ME-Pickle	3
TP07	MA-Earnings Transitional	7
TP08	Parent/Caretaker Relatives	1
TP11	ME –SSI Prior	11
TP13	ME-SSI	13
TP18	ME-Disabled Adult Child	18
TP20	MA-Alimony/Spousal Support Transitional	20
TP21	ME-Disabled Widow(er)	22
TP22	ME-Early Aged Widow(er)	22



TEXAS
Health and Human
Services

Medicaid Eligibility by Program Type (cont.)

TOA	Medicaid Type	MESAV PT
TP37	MA-EID Transitional	37
TP40	MA-Pregnant Women	40
TP43	MA-Children Under 1	43
TP44	MA-Children 6-18	44
TP45	MA-Newborn Children	45
TP47	MA-Children denied TANF w/Applied Inc.	47
TP48	MA-Children 1-5	48
TP55	MA-Medically Needy	55
TP56	MA-MN w/Spend Down	55



TEXAS
Health and Human
Services

Medicaid Eligibility by Program Type (cont.)

TOA	Medicaid Type	MESAV PT
TP70	MTFCY	9
TP87	ME-Medicaid Buy-In	2
TP91	Adoption Assistance – Federal Match – No Cash	21
TP92	Adoption Assistance – Federal Match – With Cash	21
TP93	Foster Care- Federal Match – No Cash	9
TP94	Foster Care- Federal Match – With Cash	8
TP95	Adoption Assistance- No Federal Match – No Cash	15
TP96	Adoption Assistance- No Federal Match – With Cash	15
TP97	Foster Care- No Federal Match – No Cash	9
TP98	Foster Care- No Federal Match – With Cash	10



TEXAS
Health and Human
Services

Loss of Medicaid Eligibility

Slide

MESAV Example of Loss of Medicaid

	Seq Nbr	Effective Date	End Date	Cov Cd	Second Cov Cd	Pgm Type	Elig Cat	Add Date	Update C
▶	1	10/1/2011	2/29/2024	R		13	4	10/26/2023	5/21/
	2	4/1/2006	9/30/2011	R		13	4	10/26/2023	5/21/
	3	2/1/2006	3/31/2006	R		48	2	10/26/2023	5/21/
	4	8/1/2005	1/31/2006	R		48	2	10/26/2023	5/21/
	5	5/1/2005	7/31/2005	R		44	2	10/26/2023	5/21/
	6	11/1/2004	4/30/2005	R		48	2	10/26/2023	5/21/
	7	11/1/2004	4/30/2005	R		48	2	10/26/2023	5/21/

In the example above, we can see an end date of 2/29/2024



TEXAS
Health and Human
Services

Loss of Medicaid Eligibility (cont.)

[§259.161](#): Termination of CLASS Program Services and CFC Services with Advance Notice for Reasons Other Than Non-compliance with Mandatory Participation Requirements:

(a) HHSC terminates an individual's CLASS Program services and CFC services if:

(1) the individual does not meet the eligibility criteria described in [§259.51](#) of this chapter (relating to Eligibility Criteria for CLASS Program Services and CFC Services);



TEXAS
Health and Human
Services

Loss of Medicaid Eligibility (cont.)

§259.161(f) If an individual or LAR requests a fair hearing before the effective date of the termination of CLASS Program services and CFC services, as specified in the written notice, the DSA must provide services to the individual in the amounts authorized in the IPC while the appeal is pending.



TEXAS
Health and Human
Services



TEXAS
Health and Human
Services

Thank You



TEXAS
Health and Human
Services

DBMD Suspension of Program Services

Patrick Koch, Manager V

CLASS/DBMD Utilization Review

What is Suspension?

A program service suspension temporarily interrupts a Deaf Blind with Multiple Disabilities (DBMD) Program person's access to services that the DBMD Program or Community First Choice (CFC) has to offer.



TEXAS
Health and Human
Services

Why Suspend?

- The Centers for Medicare and Medicaid Services (CMS) permits a state to furnish an array of home and community-based services that assist a person receiving DBMD services to live in the community and avoid institutionalization.
- During times when the needs of a person are not met in a community setting and instead institutional services have been pursued, DBMD program services must be suspended.



TEXAS
Health and Human
Services

When to Suspend?

HHSC suspends DBMD and CFC services if the person:

- leaves the state or
- is admitted to one of the following facilities:

Intermediate care facility (ICF/IID)	Nursing facility	Non-DBMD assisted living facility
Residential child-care facility unless it is an agency foster home	Hospital	Mental health facility
Inpatient chemical dependency treatment facility	Facility operated by the Texas Workforce Commission	Residential facility operated by the Texas Juvenile Justice Department
Jail or prison		



TEXAS
Health and Human
Services

When Not to Suspend?

- A person living in a DBMD residential setting (licensed assisted living or licensed home health assisted living) may take personal leave days.
- During this leave from the residential setting the person shall not be suspended as long as the person does not otherwise meet a condition that would require program services to be suspended.



TEXAS
Health and Human
Services

When Not to Suspend? (cont.)

- DBMD Person may receive out-of-home respite in certain types of institutional settings.
- If out-of-home respite is used to fund such an activity, DBMD Program services shall not be suspended.



TEXAS
Health and Human
Services

Suspension – For How Long?

- HHSC suspends services for up to 180 consecutive calendar days.
- HHSC may approve 30-calendar-day extensions of a suspension if the person is expected to resume participation in the DBMD Program during the extension.



TEXAS
Health and Human
Services

Who Suspends?

- Suspension of DBMD Program services is considered adverse action taken by HHSC.
- As in the case of other adverse action, (e.g. denials, reductions or terminations) appeal rights are offered.
- HHSC sends a written notice to the program provider informing of suspension and appeal rights extending to the suspended DBMD person.



TEXAS
Health and Human
Services

Who Suspends?

DBMD program provider responsibilities:

- Must notify HHSC in writing within two business days after becoming aware of circumstances (institutionalization or leave from state) requiring Suspension of DBMD / CFC Program Services.
- Must send notice to DBMD Person / LAR / FMSEA (as applicable) within two business days after a HHSC issues adverse action.
- Must forward Fair Hearing Request Summary (Form 4800-D) after DBMD Person / LAR chooses to appeal adverse action taken by HHSC.



TEXAS
Health and Human
Services

Suspension – How to File?

The IDD Operations Portal supports the filing of suspension and continuation of suspension requests.

it	Close
Packet Status	--None-- ID/RC and IPC Enrollment ID/RC and IPC Renewal IPC Revision Transfer Request Request for Suspension Request for Continuation of Suspension Termination Request
Legal Name Of Business	FTF IPC Review
Program Type	SPT Denial Request Fair Hearing Request
Submitter Type	SPT Reduction Request Interest List Inquiry Rate Change
Submission Type	Request for Suspension



Suspended – What's next?

- DBMD program provider must notify HHSC in writing after becoming aware that a person suspended from service has been discharged from an institutional setting or has returned to Texas.
- The DBMD program provider must determine if a request for extension/continuation of suspension must be filed with HHSC.
- If a suspension extension is not applicable, the Service Planning Team must consider Program Termination and notify HHSC in writing.



TEXAS
Health and Human
Services



TEXAS
Health and Human
Services

Thank You



TEXAS
Health and Human
Services

Budget and Support Services Online Systems Application “Duplicate” Browser Feature

Roxann Krebs, Manager

UR IDD Waiver and Community Management

Duplicate Feature

- “Duplicate is a feature that all browsers have. (Chrome, Edge, etc.)
- When you sign into the IDD Operations Portal system application also known as the “Community Portal” the duplicate feature allows you to duplicate your system screen and does not require you to sign in a second time.
- This is because the system sees both screens as one login instance.



TEXAS
Health and Human
Services

Duplicate Feature

The screenshot shows a web browser window with a context menu open over a 'Packets' page. The 'Duplicate' option in the menu is circled in red and pointed to by a red arrow. The page content includes a navigation bar with 'Search', 'Switch to Lightning Experience', 'Roxann Krebs', 'Help & Training', and 'IDD Operation'. Below the navigation bar is a 'Packets' dropdown menu and a 'Go!' button. A 'Recent Packets' section is visible, containing a table with the following data:

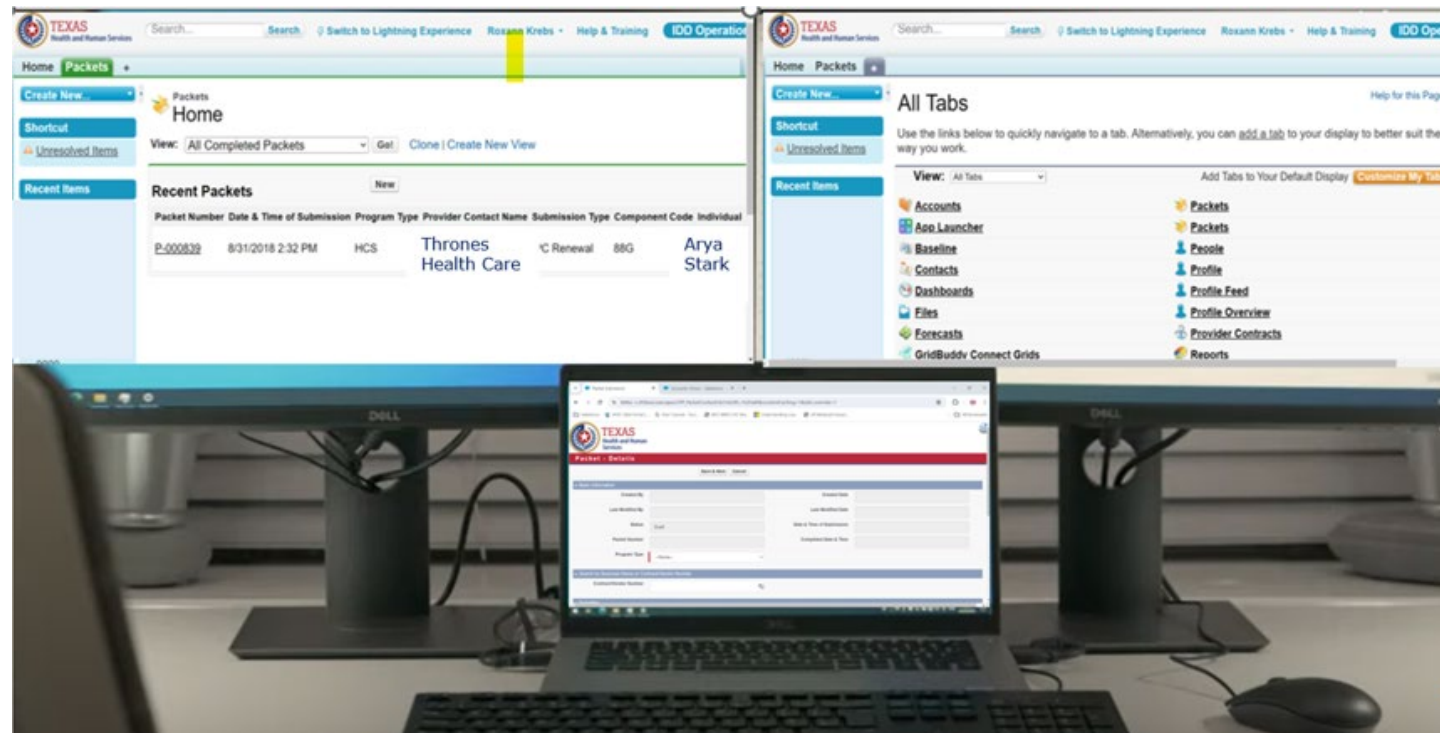
Packet Number	Date & Time of Submission	Program Type	Provider Contact Name	Submission Type	Component Code	Individual
P-000839	8/31/2018 2:32 PM	HCS	Thrones Health Care	IPC Renewal	88G	Arya Stark



TEXAS
Health and Human
Services

Application Screen

Duplicating the IDD Operations Portal system application screen allows you to enter packets and electronic forms while searching the second screen for additional information.



TEXAS
Health and Human
Services

Duplicate Submissions

- The “Duplicate” feature can be helpful, but it can also cause a duplicate submission in the IDD Operations Portal when submitting packets or electronic forms.
- This happens when data is entered into the first screen, and you click on the “Submit” button then close the first screen but leave the second screen open.
- The IDD Operations Portal is still open seeing both screens as one instance and will submit a duplicate submission with the exact date and time stamp.



TEXAS
Health and Human
Services

To avoid creating duplicate packets or electronic forms close the second screen and then click the submit button on the only IDD Operations Portal screen that should be open.

File	Form Number	Program Type	Submission Type	Submitter Type	Required	Form Type	Form Status	Revised Date Time	Needs Attention
Click to View This Form	3621	CLASS	IPC Renewal	CMA	<input checked="" type="checkbox"/>	Electronic Form	Submitted		<input type="checkbox"/>
Click to View Attachment	3621	CLASS	IPC Renewal	CMA	<input checked="" type="checkbox"/>	Attachment	Submitted		<input type="checkbox"/>
Click to View Attachment	8578	CLASS	IPC Renewal	CMA	<input checked="" type="checkbox"/>	Attachment	Submitted		<input type="checkbox"/>
Click to View This Form	3621	CLASS	IPC Renewal	CMA	<input checked="" type="checkbox"/>	Electronic Form	Submitted		<input type="checkbox"/>



TEXAS
Health and Human
Services

Contact Information

IDD Waivers: idd_ops_portal@hhs.texas.gov

IDD: idd_ops_portal@hhs.texas.gov



TEXAS
Health and Human
Services



TEXAS
Health and Human
Services

Thank You



TEXAS
Health and Human
Services

Electronic Visit Verification (EVV)

Alex Nicolas, EVV Contract Specialist

Topics



TEXAS
Health and Human
Services

- EVV PSO 2024 Onboarding Schedule and Enrollment Available on TMHP EVV Proprietary Systems Webpage
- Public Comment for EVV Alternative Device Phase-Out Schedule
- EVV Policy Updates Now Available for the Mobile Method Geo-Perimeter Expansion
- Updates to the EVV Visit Maintenance Processes Hold for Dates of Service Prior to Go-Live Date
- Program and Service Requirements Schedules Available in EVV System

EVV PSO 2024 Onboarding Schedule and Enrollment Available on TMHP EVV Proprietary Systems Webpage



TEXAS
Health and Human
Services

May 22, 2024

The Texas Medicaid & Healthcare Partnership (TMHP) has published the Proprietary System Operator (PSO) 2024 Onboarding schedule to the [EVV Proprietary Systems webpage](#).

Session	Planning Meeting Date	ORR Start Date	Session Approval Date
2024-1: Expedited	Feb. 5, 2024	Feb. 19, 2024	March 8, 2024
2024-2: Expedited	April 29, 2024	May 6, 2024	June 3, 2024
2024-3: Standard	May 20, 2024	June 3, 2024	July 18, 2024
2024-4: Expedited	Aug. 12, 2024	Aug. 19, 2024	Sept. 24, 2024
2024-5: Standard	Sept. 2, 2024	Sept. 16, 2024	Oct. 30, 2024

HHSC encourages program providers and financial management services agencies (FMSAs) who wish to become a PSO to submit a Proprietary System (PS) Request Form. The PS Request Form can be submitted at any time. Refer to the [Accessing the EVV Portal for Program Providers and FMSAs job aid](#) for more information.

If you have previously provided a PS Request Form and have confirmed with TMHP that you are still interested in becoming a PSO, you are not required to submit an additional form.

If your submitted PS Request Form is in a “Completed” status in the EVV Portal, you will be given the opportunity to onboard this calendar year (2024). Please continue to check the status of your submitted PS Request Form in the portal.

[Email the TMHP EVV PSO for questions](#).

Public Comment for EVV Alternative Device Phase-Out Schedule



TEXAS
Health and Human
Services

- HHSC EVV Operations wants to thank all who provided comments as we received over 100 comments.
- HHSC EVV Operations is finalizing the alternative device phase out schedule and policies and will route to HHSC management for review and approval.
- Tentative publish date to policy would be mid-to-late September.



EVV Policy Updates Now Available for the Mobile Method Geo-Perimeter Expansion



TEXAS
Health and Human
Services

- HHSC has posted the new and revised policies for using the mobile method, effective April 1, 2024, that will be added to the Electronic Visit Verification Policy Handbook in an upcoming revision.
- These new and revised policies are outlined in the Increase in Geo-Perimeter for Mobile Method effective April 1, 2024 (PDF), located on the EVV webpage.
- PSOs will need to work with their EVV proprietary system vendors to implement the geo-perimeter range that aligns with their business practices and complies with policy guidelines.

EVV Policy Updates Now Available for the Mobile Method Geo-Perimeter Expansion



TEXAS
Health and Human
Services

The policy includes:

- Increase of the EVV allowed geo-perimeter range of 250 feet to 1320 feet (1/4 mile).
- Full allowable expansion of the geo-perimeter from the state provided EVV system vendor, effective April 1.
- Proprietary System Operators (PSOs) to select geo-perimeter range, including effective dates.
- **Email questions to HHSC EVV Operations.**

Updates to the EVV Visit Maintenance Processes Hold for Dates of Service Prior to Go-Live Date



TEXAS
Health and Human
Services

- Effective April 22, Electronic Visit Verification (EVV) program providers, financial management services agencies (FMSAs), and consumer directed services (CDS) employers who use HHAeXchange as their EVV system may perform visit maintenance processes for dates of service prior to their go-live date with HHAeXchange.
- For Proprietary System Operators (PSOs), the visit maintenance hold for dates of service prior to go-live with their EVV proprietary system remains in place. Further details will be provided soon.

Updates to the EVV Visit Maintenance Processes Hold for Dates of Service Prior to Go-Live Date



TEXAS
Health and Human
Services

Reminders:

- At this time, only those who use HHAeXchange as their EVV system may perform visit maintenance for dates of service prior to their go-live date with HHAeXchange.
- HHAeXchange users may now send Visit Maintenance Unlock Requests (VMURs) to their payer (HHSC or Managed Care Organization) for dates of service prior to their go-live date.
- All EVV users may perform visit maintenance processes for dates of service after their go-live date with their EVV system or EVV proprietary system.

Program and Service Requirements Schedules Available in EVV System



TEXAS
Health and Human
Services

- EVV policy does not require program providers and financial management services agencies (FMSAs) to enter schedules into the EVV system, however, each program has its own requirements related to schedules. Program providers and FMSAs must follow their program requirements for schedules to determine if they are required to enter a schedule into the EVV system.
- **The EVV system allows program providers and FMSAs to select from the following three schedule types:**
 - Daily Fixed Schedules
 - Daily Variable Schedules
 - Weekly Variable Schedules

Program and Service Requirements Schedules Available in EVV System



TEXAS
Health and Human
Services

- EVV visit transaction that matches against a schedule will auto-verify if there are no exceptions or critical errors. EVV visit transactions that do not match against a schedule or have exceptions or critical errors will require visit maintenance. If a schedule is not used for an EVV visit transaction, the EVV visit transaction will auto-verify if there are no other exceptions or critical errors.
- For a description of the requirements related to using schedules in the EVV system, review the Program and Service Requirements for Schedules (PDF) found on the EVV webpage.
- Reference EVV Policy Handbook section 4600 Schedules and 4610 Schedule Types for more information.

EVV Resources Summary



TEXAS
Health and Human
Services

- [HHSC EVV webpage](#)
 - [Sign up to receive EVV email updates](#)
 - [Personal Care Services Required to Use EVV](#)
 - [Home Health Care Services Required to Use EVV](#)
 - [HHSC EVV Policy Handbook](#)
 - [HHSC EVV Training Resources webpage](#)
 - [FAQs about the EVV HHCS Implementation \(PDF\)](#)
- **HHAeXchange**
 - [Texas EVV Vendor Information Center](#)



TEXAS
Health and Human
Services

Thank You

Please submit questions to:

EVV@hhs.texas.gov