HCS, TxHmL, CLASS, DBMD Quarterly Webinar

January 31, 2020

Attendant Trainings

Lauren Chenoweth, LMSW

HHSC Policy Advisor, Medicaid/CHIP

January 2020

Agenda

- Why training?
- Available trainings
- Resources and Contacts

Why training?

- A 2014 DADS survey of community attendants found that attendants wanted additional training.

- Training in general increases employee job satisfaction, motivation, and morale.
  - Workers who aren't properly trained may become frustrated at their inability to perform at a high level, leading them to look elsewhere for a job or simply settle for mediocre performance.

Why training?

- Employee training and development provides you with a pool of skilled and knowledgeable people who can move up in the organization and fill critical jobs and perform critical functions.

- Training helps the employees to recognize safety hazards and correct them.
  - It enables them to understand best safety practices and expectations.

Available Training Topics

- Mental Health
- Direct Service Worker specific
- Person Centered Thinking
- Abuse, neglect and exploitation
- Children
- Aging

- Employment
- Benefits
- Diagnosis specific
- Positive Behavior Management Support
- Trauma Informed Care
- Program Specific

TEXAS
Health and Human Services

Mental Health Training

- The **Mental Health Wellness for Individuals with Intellectual and Developmental Disabilities (MHW-IDD)** e-learning training series teaches about integrated approaches for working with people who have IDD and co-occurring behavioral health needs.

- Intended for direct service workers and healthcare providers (HCPs) who provide support for individuals with IDD and co-occurring behavioral health challenges.

Mental Health Training

Modules

- Co-occurring Disorders: IDD and Mental Illness
- Trauma-informed Care for Individuals with IDD
- Functional Behavior Assessment and Behavior Support
- Overview of Genetic Syndromes Associated with IDD
- Overview of Medical Diagnoses Associated with IDD

TEXAS
Health and Human
Services

Mental Health Training

Modules (cont.):

- Putting It All Together: Supports and Strategies for Direct Service Workers
- Integrated Healthcare for Individuals with IDD – for HCPs
- Communicating with Individuals with IDD – for HCPs
- Trauma-informed Care for Clinical Providers – for HCPs

Mental Health Training

Training videos:

- Stigma and Mental Health
  https://www.youtube.com/watch?v=0UF6FumfxR8&list=PLJE6pz0haTBoJG8vDhDD7d67CleK6xMx3&index=3&t=0s

- Behavioral Health Support in the Community
  https://www.youtube.com/watch?v=rbLD50TePAE&list=PLJE6pz0haTBoJG8vDhDD7d67CleK6xMx3&index=4&t=0s

- Behavioral Health Treatment for Mothers
  https://www.youtube.com/watch?v=Dkpu1smVXuA&list=PLJE6pz0haTBoJG8vDhDD7d67CleK6xMx3&index=5&t=0s

- The PASRR Process
  https://www.youtube.com/watch?v=8wv30d9UysE&t=0s&list=PLJE6pz0haTBoJG8vDhDD7d67CleK6xMx3&index=2

Mental Health Training

Training Videos (cont.):

- The PASRR Benefit
  https://www.youtube.com/watch?v=YInfCr3p6-4&list=PLJE6pz0haTBoJG8vDhDD7d67CIeK6xMx3&index=6&t=0s

- Hiring People With Disabilities
  https://www.youtube.com/watch?v=L95vBId5CI0

- Assistance in the Community for Complex Medical Needs
  https://www.youtube.com/watch?v=9VYT-WnO8qM&feature=youtu.be

- Transitioning from a State Supported Living Center into the Community
  https://www.youtube.com/watch?v=VK7Bjhq1yUQ

Mental Health Training

- Services Available in the Community for Veterans https://www.youtube.com/watch?v=NVIphMdgJuY

- YouTube playlist related to behavioral health: https://www.youtube.com/playlist?list=PLJE6pz0haTBpkSlOzQiuEab-taYRFSNX5.

TEXAS
Health and Human Services

Direct Service Worker Training Modules

- 6-part eLearning series designed for direct service workers (DSW) and others who provide quality personal assistance to individuals with disabilities, older individuals, or anyone who receives direct care services.

- Each module, focuses on various aspects of care for the individual, including mental wellness, positive supports, and prevention.

- Each module is approximately 20-30 minutes in length and the series takes 2-3 hours to complete.

TEXAS
Health and Human Services

Direct Service Worker Training Modules

Understanding Dementia and Alzheimer's Disease.

- How to approach and deescalate confrontational behavior
- How to recognize illness or injury in an individual who has difficulty communicating
- Effective means of communication
- How to support connections with family, friends, and others.

Direct Service Worker Training Modules (cont.)

The Art of effective Communication and Conflict Resolution.

- How to identify, understand and approach typical behavioral repertoire

- Understand the difference between a challenging behavior as a form of communication versus a sign of mental illness

- Understanding how to assess and get necessary information regardless of a person's style of communication, or lack of ability to communicate.

TEXAS
Health and Human Services

Direct Service Worker Training Modules (cont.)

Rendering Personal Care, Prevention and Containment of Communicable Disease.

- How to decrease the probability of contracting infectious diseases

- Help contain an active communicable disease when providing personal assistance or care

- The importance of active participation on the individual's treatment team.

Direct Service Worker Training Modules (cont.)

Managing and Preventing Challenging or Aggressive Behaviors.

- Evidence based and best practices regarding appropriate interventions to approach and deescalate confrontational behavior including:
  - Recognizing the signs that signal when a behavior may be a form or communication and
  - When it may be a sign of serious mental illness
- The importance of active participation on the individual's treatment team.

Direct Service Worker Training Modules (cont.)

Mental Health and Substance Use.

- How to provide personal assistance and care to individuals:
  - Actively experiencing behavioral health issues
  - Are in the recovery process through education on basic mental health diagnoses and substance abuse disorders
- Some universally appropriate evidence informed interventions
- The importance of active participation on the individual's treatment team.

Direct Service Worker Training Modules (cont.)

Teaching some Caring for the Caregiver

- The importance of, and ways to ensure, personal physical and mental well-being when providing personal assistance and care to others, including:
  - Recognizing signs of emotional, mental, and physical exhaustion
  - Action steps that can be taken to ameliorate symptoms.

Found at:
https://learningportal.dfps.state.tx.us/course/index.php?categoryid=31

Person Centered Thinking

- Online
  https://learningportal.dfps.state.tx.us/course/index.php?categoryid=7

- Other PCT training opportunities
  https://hhs.texas.gov/services/disability/person-centered-planning/waiver-program-providers/person-centered-planning-pcp-training-providers

- PCT resources
  PersonCenteredPlanning@hhsc.state.tx.us

* If you are seeking this training to meet program requirements please see your program specific guidance or reach out to the policy specialist for that program to ensure compliance.

Children

- Texas A&M Agrilife Extension offers many trainings relevant to children with special needs.
  - Some have small costs but many on this topic are free.

  https://agrilifelearn.tamu.edu/catalog?pagename=Including-Children-with-Special-Needs

- The ECI resources page offers links to many reliable sources of information applicable to children

  https://hhs.texas.gov/services/disability/early-childhood-intervention-services/eci-resource-guidecentral-directory

Children

Texas Health Steps Training

Free online training on topics applicable to children such as:

- Childhood depression
- Anxiety
- ADHD
- Trauma
- Substance abuse
- Dental care
- Fetal alcohol spectrum
- Congenital heart disease
- Diabetes.

https://www.txhealthsteps.com/courses

Aging

Center for Excellence in Aging Services and Long Term Care - modules designed for direct care workers are in Phase I, Phase IV, and Phase V:

- **Phase 1:** Anti-Psychotic Drug Reduction Issues
- **Phase 2:** Advanced Geriatric Practice
- **Phase 3:** Transition To Practice
- **Phase 4:** Intellectual and Developmental Disabilities
- **Phase 5:** Infection Control and Prevention
- **Phase 6:** Social Determinants of Health with Age

http://www.utlongtermcarenurse.com/

Aging

HHSC Quality Monitoring Program Training

- The trainings here are focused on aging and nursing facilities.
  - However, many are applicable to other settings.

  https://hhs.texas.gov/doing-business-hhs/provider-portals/long-term-care-providers/nursing-facilities/quality-monitoring-program/evidence-based-best-practices/alzheimers-disease-dementia-care

Aging

- Advanced Online Certified Nurse Aide Academy
- Annual LTC Quality Provider Outreach Conference TX
- OASIS for HCBS Dementia Online Academy

- Email TQM@dads.state.tx.us for more information or
- Visit the Quality Monitoring Program home page: https://hhs.texas.gov/doing-business-hhs/provider-portals/long-term-care-providers/nursing-facilities/quality-monitoring-program-qmp

Abuse, Neglect and Exploitation

- HHSC general training on ANE which can be applied to multiple settings and populations

https://learningportal.dfps.state.tx.us/course/index.php?categoryid=22

Employment

- Employment First: A path to community life
  https://hhs.texas.gov/services/disability/employment/employment-first/employment-first-training

- Here is a helpful publication.
  - It is a few years old but the information is still very relevant.

  https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/providers/long-term-care/mdcp/employmentguide.pdf

Employment

- The Direct Service Workers web-based training provides information about employment services and how direct service workers can support people achieve their employment goals.

  https://dars.adobeconnect.com/_a1090406635/p2bdf27lhqz/?launcher=false&fcsContent=true&pbMode=normal

Employment

- Texas Workforce Solutions-Vocational Rehabilitation Services overview web-based training provides a foundation for understanding TWS-VRS and how it relates to home and community-based waiver services.

  https://dars.adobeconnect.com/_a1090406635/p3hwqb1tmiw/?launcher=false&fcsContent=true&pbMode=normal

SSI/SSDI Benefits Overview

- The SSI/SSDI Benefits Overview web-based training provides a basic foundation for understanding Supplemental Security Income and Supplemental Security Disability Insurance and provides contact information for people who can help you further understand these programs.

https://dars.adobeconnect.com/_a1090406635/p8mxxqlzdsc/?launcher=false&fcsContent=true&pbMode=normal

Diagnosis Specific

- Many foundations and nonprofits offer free trainings on specific topics such as epilepsy such as the Epilepsy Foundation https://www.epilepsy.com/learn

- The Centers for Disease Control and Prevention provides links to training on topics such as traumatic brain injury, autism, and epilepsy.

  https://www.cdc.gov/

- The HHS Office of Acquired Brain Injury provides training to anyone interested in learning more about what they can do to help prevent brain injuries and how to work with people who have them.

  - To schedule training contact oabi@hhsc.state.tx.us

Other ways to find trainings

- Sign Up to Get Email Updates - https://service.govdelivery.com/accounts/TXHHSC/subscriber/new?topic_id=TXHHSC_176

- Sign up for the learning portal and browse available trainings https://learningportal.dfps.state.tx.us/

- Talk to your provider agency

- Reach out to other service recipients with similar needs

- Search our website https://hhs.texas.gov/

Resources

Policy Webpages

- **DBMD**

  https://hhs.texas.gov/doing-business-hhs/provider-portals/long-term-care-providers/deaf-blind-multiple-disabilities-dbmd

- **MDCP**

  https://hhs.texas.gov/doing-business-hhs/provider-portals/long-term-care-providers/medically-dependent-children-program-mdcp

- **YES Waiver**

  https://www.dshs.texas.gov/mhsa/yes/

Resources

Policy Webpages

- **STAR+PLUS**
  https://hhs.texas.gov/services/health/medicaid-chip/programs/starplus

- **STAR KidS**
  https://hhs.texas.gov/services/health/medicaid-chip/programs/star-kids

Questions/ Discussion

Employment First and Benefits

Matthew Lum

HHSC Policy Specialist

January 2020

The SSI Formula: Your New Best Friend

SSI CALCULATION SHEET 2020	
STEPS	**CALCULATIONS**
Unearned Income	
(MINUS) General Income Exclusion (GIE: $20)	
Total Countable Unearned Income	
Gross Earned Income	
(MINUS) Student Earned Income Exclusion (SEIE)	
Remainder	
(MINUS) GIE (if not used above; $20)	
Remainder	
(MINUS) Earned Income Exclusion (EIE)	65
Remainder	
(MINUS) Impairment Related Work Expense (IRWE)	
Remainder	
(DIVIDE) by 2	
(MINUS) Blind Work Expense (BWE)	
Total Countable Earned Income	
Total Countable Unearned Income	
(PLUS) Total Countable Earned Income	
(MINUS) Plan to Achieve Self Support (PASS)	
Total Countable Income	
Base SSI Rate (*in 2020 put $783, $522 or $1,175 ONLY*)	
(MINUS) Total Countable Income	
TOTAL ADJUSTED SSI PAYMENT	

TEXAS
Health and Human Services

How the SSI Formula Works

- The monthly SSI cash benefit is gradually reduced by any other income, starting with unearned income.
  - Unearned income is any money a person gets that he/she does not work for.
  - Just a few examples of unearned income are Title II disability cash benefits, cash gifts, money found or won, insurance settlements, child support, workers compensation or alimony.
  - **Unearned income is NEVER the SSI AMOUNT!**

How the SSI Formula Works

- The monthly SSI cash benefit is gradually reduced by any other income, starting with unearned income.
  - All SSI recipients with unearned income have an automatic $20 deduction in this first section called the "General Income Exclusion" or GIE.
    - The first section results in "Total Countable Unearned Income" for the SSI formula.

How the SSI Formula Works

- There are three automatic deductions for all SSI recipients who are working in the second section of the SSI formula.
  - General Income Exclusion (GIE) of $20 if not used in the Unearned Income section;
  - Earned Income Exclusion (EIE) of $65; and
  - Division of remainder of countable earned income after GIE, EIE and any work incentives have been used by 2.

Example

STEPS	CALCULATIONS
Unearned Income	0
(MINUS) General Income Exclusion (GIE: $20)	0
Total Countable Unearned Income	0
Gross Earned Income	$1,260
(MINUS) Student Earned Income Exclusion (SEIE)	0
Remainder	1,260
(MINUS) GIE (if not used above; $20)	20
Remainder	1,240
(MINUS) Earned Income Exclusion (EIE)	65
Remainder	1,175
(MINUS) Impairment Related Work Expense (IRWE)	0
Remainder	1,175
(DIVIDE) by 2	587.50
(MINUS) Blind Work Expense (BWE)	0
Total Countable Earned Income	$587.50
Total Countable Unearned Income	$0
(PLUS) Total Countable Earned Income	587.50
(MINUS) Plan to Achieve Self Support (PASS)	0
Total Countable Income	$587.50
Base SSI Rate (*in 2020 put $783, $522 or $1,175 ONLY*)	$783
(MINUS) Total Countable Income	587.50
TOTAL ADJUSTED SSI PAYMENT	**$195.50**

B&P Webinar Q4-2019

How the SSI Formula Works

- The fourth section of the SSI formula is where the person can see what his/her approximate adjusted monthly cash benefit will be as a result of unearned and earned income and any work incentive programs that are used.

- In the "Base SSI Rate" in calendar year 2020, you will always put $783 or $1,157.
  - The person may actually be receiving one of those three amounts, or may be receiving another amount due to a variety of reasons.
  - But, even if the person gets $1.00 in SSI, you will still put one of those three figures-unless the person is in an ICF/IID.

How the SSI Formula Works

- Take the total countable income from the third section away from the Base SSI Rate to get the adjusted SSI cash benefit for the month.

Is there ever a time the SSI cash benefit goes to $0?

- Yes! That's called the "Break-Even Point" or BEP.

- The BEP happens when the person earns enough that, even with the GIE, EIE and dividing by 2 and using any work incentive programs still results in Total Countable Income of $783 or $1,157.

- In calendar year 2020, the BEP for someone receiving $783 who has only the GIE of $20, EIE of $65 and dividing by 2 is $1,651 gross a month.

TEXAS
Health and Human
Services

HCS 300% SSI

- The 300% means 300% of the Federal Benefit Rate for the year.
  - FBR is the SSI maximum rate for an individual.
- In 2020 300% is $783 x 3, or $2,349.
- Home and Community Based Services Waivers that have the 300% rule allow individuals to have total combined monthly gross income (earned and unearned) of $2,349 (2020) without incurring a co-payment for waiver services.
- If combined monthly gross income exceeds 300% there may be a co-payment for waiver services.

Financial Limitations - Resources

- Individuals on an HCBS waiver must keep monthly resources under $2,000.

- Even though the individual could be earning a living wage, resources have to be kept to $2,000 a month.

- Up to $100,000 in an ABLE account will not counted toward the HHSC $2,000 resource limit.

Employment First

- Employment first is the concept that employment in the general workforce should be the first and preferred option for people with disabilities receiving assistance from publicly-funded systems.

- If employment is requested by the individual, the individual and the program provider must go the Texas Workforce Solutions Vocational Rehabilitation Services first.
  - While the individual is waiting for their appointment, Employment Assistance can provided through the waiver.

- It is important that the program provider, service coordinator communicate with the Vocational Rehabilitation Counselor (VRC).

Employment First

- It is imperative that the program provider is available to begin services when Vocational Rehabilitation Services end.
  - This helps increase the support that the individual may need to be successful in their new job.
- Once an individual signs a Individualized Plan for Employment (IPE) Vocational Rehabilitations Services begin.
- Employment Assistance for transportation is allowable after the individual begins Vocational Rehabilitation Services
- Transportation is the only billable activity for Employment Assistance that is allowable while the individual is receiving Vocational Rehabilitation Services

Employment First

- Transportation is a major barrier to employment for individuals in the waivers.
  - Transportation is a billable activity for supported employment.
- Assisting the individual to report earned income to the Social Security Administration and assisting the individual to develop a method for ongoing income reporting are billable activities for Supported Employment and Employment Assistance.
- Individuals can obtain a free benefits analysis from a Community Work Incentive Coordinator (CWIC) to determine how working would affect their benefits.

Additional Information

CWIC's can be contacted at any of the locations below:

- Imagine Enterprises in Abilene, Texas

- Crockett Resource Center for Independent Living in Crockett, Texas

- Easter Seals North Texas in Fort Worth, Texas

- Houston Center for Independent Living in Houston, Texas

- ARCIL Incorporated in Austin, Texas

TEXAS
Health and Human Services

Additional Information

- HHSC Employment First
  https://hhs.texas.gov/services/disability/employment/employment-first

- PDF Version of Employment First Guide
  https://hhs.texas.gov/sites/default/files/documents/services/disability/employmentfirst/employment-people-disabilities.pdf

- HHSC Employment Mailbox:
  SE.Questions@hhsc.state.tx.us

Overview of Rate Increases Effective September 1, 2019

**HHSC Rate Analysis,
Long-Term Services and Support**

Rate Setting and 2020-21 Appropriations

- Overview of rate increases through Rider 44 and 45
  - Effective September 1, 2019, and January 8, 2020.
- Upcoming proposed Rule Amendments

Rider 44

Rider 44 appropriates funds to:

- Increase the factor for HCS providers from 4.4 percent to 7.0 percent for facility-based services and to provide a rate increase with the intent that the additional funds be spent for the benefit of direct care staff, including direct care staff wages;

- To fully fund all rates for DBMD providers; and,

- To create separate categories in the rate enhancement programs serving individuals with intellectual and developmental disabilities based on the number of attendant hours included in the billing unit

Rider 45

Rider 45 appropriates funds to:

- Increase in the base wage of personal attendants to $8.11 per hour in fiscal years 2020 and 2021; and,

- Fully fund the rate enhancement programs for community care and intellectual and developmental disabilities providers.

Waiver Programs

- Deaf-Blind with Multiple Disabilities (DBMD) Waiver Program

- Community Living Assistance and Support Services (CLASS)

- Home and Community-Based Services (HCS) Waiver Program

- Texas Home Living (TxHmL)

9/1/2019 Rate Increases

CLASS

- In-Home Respite (+1.11%)
- CDS In-Home Respite (+1.23%)

DBMD Waiver Program: 9/1/2019 Rate Increases

- Case Management Services (+54.09%)
- Pre-Enrollment Assessment (+7.47%)
- Residential Habilitation (Transportation) and CFC PAS/Hab (+10.47%)
- Day Habilitation (DH) (+10.47%)
- In-Home Respite (+9.45%)
- Out-of-Home Respite (+9.45%)

- Licensed Home Health Assisted Living Services (+9.45%)
- Licensed Assisted Living Services (+9.45%)
- Assisted Living Services (+9.45%)
- Behavioral Support (+7.72%)
- Chore Services (+29.88%)
- Intervener (I-III) (avg. of +14.45%)
- Registered Nurse (RN) (+9.45%)

DBMD Waiver Program: 9/1/2019 Rate Increases (cont.)

- Specialized RN (+9.44%)

- Licensed Vocational Nurse (LVN) (+5.93%)

- Specialized LVN (+5.95%)

- Orientation and Mobility Services (+94.18%)

- Physical Therapy (+9.45%)

- Occupational Therapy (+9.44%)

- Speech & Language Therapy (+9.45%)

- Audiology Services (+9.44%)

- Dietary Services (+11.74%)

- Transition Assistance Services (+9.45%)

- Financial Management Services (FMS) Fee (+9.45%)

- Support Consultation (+9.43%)

DBMD CDS: 9/1/2019 Rate Increases

- FMS Fee (+9.45%)
- Residential Habilitation Transportation and CFC PAS/HAB (+17.24%)
- Intervener (+25.68%)
- Intervener I (+17.73%)
- Intervener II (+10.97%)

- Intervener III (+6.13%)
- In-Home Respite (+10.51%)
- Out-of-Home Respite (+9.96%)
- Support Consultation (+9.43%)

9/1/2019 Rate Increases

HCS

- Supported Home Living (SHL) Transportation and CFC PAS/Hab (+2.82%)
- DH Level of Need (LON)
  - LON 1 (+9.8%)
  - LON 5 (+8.94%)
  - LON 8 (+6.99%)
- SL/RSS LON
  - LON 6 (+0.19%)
  - LON 9 (+0.99%)

On average, the affected waiver program services received a rate increase of +11.86% in 2019.

1/8/2020 Rate Increases

HCS SL/RSS Add-On Payment Rates

- HHSC approved temporary add-on payments to the direct care portion of the payment rates for HCS SL/RSS.

- The temporary add-on will enable providers to pay higher wages for their direct care staff while HHSC continues to meet with stakeholders to determine a permanent solution.

  - These add-on payments are necessary to comply with Rider 44.

- HHSC will implement a mandatory spending requirement for the SL/RSS add-on to ensure that providers spend these funds on direct care staff.

HHSC Rate Analysis

1/8/2020 Rate Increases

HCS SL/RSS Add-On Payment Rates

LON 1

- Add-on increase: $4.06
- Percentage increase: +3.04%

LON 5

- Add-on increase: $4.53
- Percentage increase: +3.19%

LON 6

- Add-on increase: $6.04
- Percentage increase: +3.45%

HHSC Rate Analysis

1/8/2020 Rate Increases (cont.)

HCS SL/RSS Add-On Payment Rates

LON 8

- Add-on increase: $5.22
- Percentage increase: +3.38%

LON 9

- Add-on increase: $8.45
- Percentage increase: +3.25%

On average, the affected services received a rate increase of +3.26% in 2020.

Texas Home Living (TxHmL)

- Due to the lack of additional appropriations, there were no rate increases for the TxHmL program.

- However, HHSC implemented a methodological change to the factor for TxHmL Day Habilitation services, increasing it from 4.4% to 7%.

Upcoming Rule Amendments

Personal Attendant Minimum Wage Increase

- Rider 45 appropriates funds to HHSC to increase the minimum base wage paid to personal attendants from $8.00 to $8.11 per hour.

- HHSC will be proposing to consolidate these minimum wage requirements in new rule 1 TAC §355.7051.

Upcoming Rule Amendments

Rate Enhancement

- Rider 44(a)(4) appropriates funds for the creation of separate categories in rate enhancement programs which services individuals with intellectual and developmental disabilities.

- HHSC will be proposing amendments to 1 TAC §355.112.

Thank you!

For more information, please contact:

RAD-LTSS@hhsc.state.tx.us

HHSC Electronic Visit Verification

Cures Act EVV Expansion: Medicaid Personal Care Services

January 2020

21st Century Cures Act

- The 21st Century Cures Act Section 12006 (Cures Act) is a federal law requiring Electronic Visit Verification for all Medicaid personal care services and home health care services.

- HHSC must implement EVV for Medicaid personal care services, including services delivered under the Consumer Directed Services (CDS) Option and the Service Responsibility Option (SRO) by Jan. 1, 2021 or risk the loss of federal Medicaid funding.

Cures Act EVV Expansion

The Cures Act EVV Expansion:

- Will implement the Jan. 1, 2021 federal Cures Act EVV requirement for Medicaid personal care services not currently required to use EVV per state law.

- Will take place throughout the 2020 calendar year.

- Applies to program providers and FMSAs affected by the Cures Act.
  - See pages 1-2 for Cures Act affected programs, services, and service delivery options.
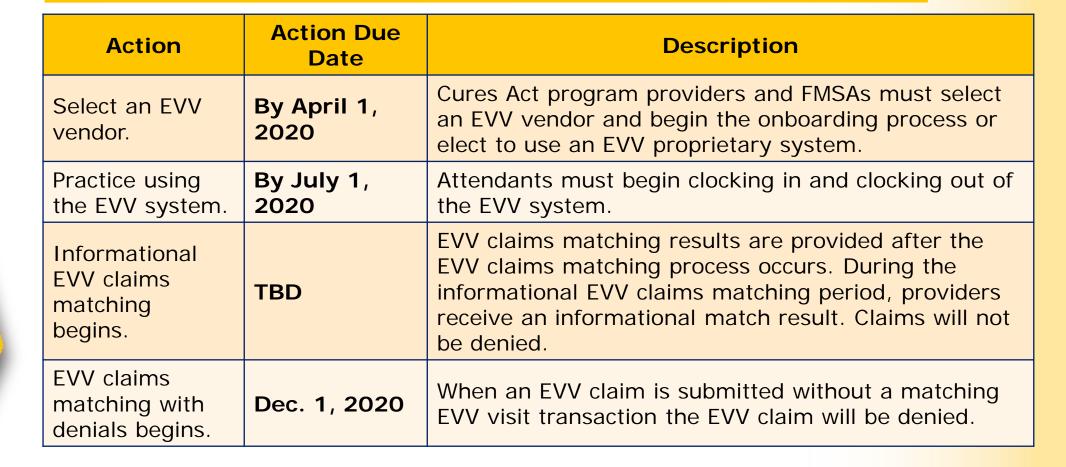
Cures Act EVV Expansion (cont.)

To be ready to meet the Jan. 1, 2021 EVV start date, Cures Act program providers and FMSAs must take action during the Cures Act EVV Expansion and:

- Select an EVV vendor by April

- Complete required training

- Practice using the EVV system

Cures Act EVV Expansion Timeline

Action	Action Due Date	Description
Select an EVV vendor.	**By April 1, 2020**	Cures Act program providers and FMSAs must select an EVV vendor and begin the onboarding process or elect to use an EVV proprietary system.
Practice using the EVV system.	**By July 1, 2020**	Attendants must begin clocking in and clocking out of the EVV system.
Informational EVV claims matching begins.	**TBD**	EVV claims matching results are provided after the EVV claims matching process occurs. During the informational EVV claims matching period, providers receive an informational match result. Claims will not be denied.
EVV claims matching with denials begins.	**Dec. 1, 2020**	When an EVV claim is submitted without a matching EVV visit transaction the EVV claim will be denied.

Note: Dates subject to change.

EVV Vendor Selection

TMHP has selected two EVV vendors on behalf of HHSC:

EVV Vendor	Website	Telephone Number	Email Address
DataLogic Software Inc.	Vesta EVV	844-880-2400	info@vestaevv.com
First Data Government Solutions	AuthentiCare EVV	877-829-2002	AuthentiCareTXSupport@firstdata.com

Select an EVV Vendor

By April 1, 2020:

- Cures Act program providers and FMSAs must select an EVV vendor and begin the onboarding process or elect to use an EVV proprietary system.

- Cures Act program providers and FMSAs who do not select an EVV vendor system or elect to use an EVV proprietary system by April 1, 2020 will have an EVV vendor assigned by HHSC.

Practice Using the EVV System

By July 1, 2020:

- Cures Act program providers and FMSAs should begin practicing using the EVV system.

- The practice period can begin sooner, once onboarding with the EVV vendor is complete.

- Practicing gives time to become familiar with the EVV system without negative impact.

EVV Informational Claims Matching

- HHSC is still finalizing the start date for the informational claims matching period.

- Informational claims matching is when EVV claims are matched to EVV visit transactions but claims are not denied for a mismatch.

- Cures Act program providers and FMSAs will see claim match result codes in the EVV Portal.

- Claim match result codes indicate if an EVV claim line item matched or did not match an accepted EVV visit transaction.

EVV Claims Matching with Denials

Beginning Dec. 1, 2020:

- EVV claims submitted without matching EVV visit transactions will be denied.

- To avoid denials Cures Act program providers and FMSAs should be reviewing informational claims matching results on a regular basis.

- The state is starting EVV claim denials before the Jan. 1, 2021 federal deadline to allow time to address any potential issues and to ensure Texas programs and services maintain federal funding.

EVV Resources

For more information about:

- The Cures Act EVV Expansion, visit the [HHSC Cures Act](#) webpage.

- EVV vendors, visit the [TMHP EVV Vendors](#) webpage.

- EVV proprietary systems, visit the [HHSC EVV Proprietary Systems](#) webpage.

Thank you

For questions, email:

Electronic_Visit_Verification@hhsc.state.tx.us

Value Added Services (VAS)

- **New Appendices**
  - HCS Appendix XIII
  - TxHmL Appendix X
  - CLASS Appendix XVI
  - DBMD Appendix XII

- VAS is an added benefit available to individuals from the Managed Care Organization (MCO) providing their acute care services

- Waiver program providers do not consider VAS offered by the MCO when considering third-party resources

Home and Community-Based Services Settings

Lauren Chenoweth, *Policy Advisor*

HHSC

January 31, 2020

Agenda

- HCBS Regulations Overview
- Impacted programs
- Statewide Transition Plan
- Public Input
- Heightened Scrutiny
- Remediation
- Next steps
- Resources

Community Access

The home and community-based services (HCBS) rules speak to the importance of individuals being able to participate in their community to the greatest extent possible.

Individual Choice

- The Health and Human Services Commission (HHSC) recognizes that choice is vital in all aspects of day-to-day life.

- For purposes of this project, the questions of choice are limited to choice of residential setting and choice of day activities.

Rights and Dignity

- Individuals receiving HCBS are, through various approaches, made aware of their rights when receiving program services.

- These rights address privacy and confidentiality, service delivery, and financial matters, among other topics.

Individual Autonomy

Self-determination and autonomy are the foundation of independence, and are integral to service delivery in home and community-based settings.

Impacted Texas Programs

1915(c) waivers

- Community Living Assistance and Support Services (CLASS)
- Deaf-Blind with Multiple Disabilities (DBMD)
- Home and Community-based Services (HCS)
- Medically Dependent Children Program (MDCP)
- Texas Home Living (TxHmL)
- Youth Empowerment Services (YES)

Impacted Texas Programs

- HCBS-Adult Mental Health*

- Community First Choice*

- STAR+PLUS HCBS 1115 Waiver

*Because these programs were implemented after March 2014 they had to be compliant at time of implementation.

Impacted Services

	Residential Services	Employment Services	Day Habilitation	Other
HCS Waiver	Yes	Yes	Yes	
CLASS		Yes		Yes
MDCP		Yes		Yes
TxHmL		Yes	Yes	
YES				Yes
DBMD	Yes	Yes	Yes	
STAR+PLUS	Yes			

Statewide Transition Plan

- Each state is required to file a statewide transition plan (STP) with the Centers for Medicare and Medicaid Services (CMS) outlining the state's plan for compliance.

- The Texas STP includes high-level timeframes and milestones for State actions, including assessment of the State's current compliance and planned steps for remediation.

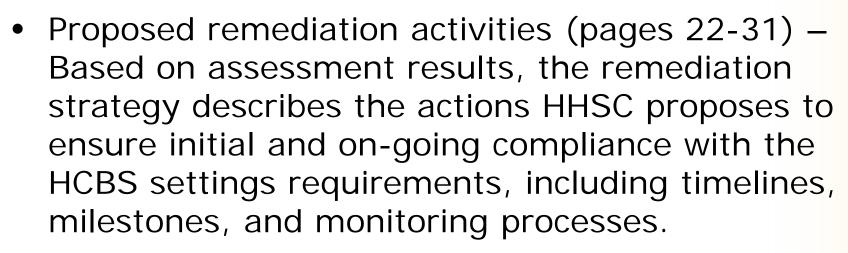- HHSC sent an informal submission of the STP (our 5th) to CMS on 11/5/2019

* Texas does not currently have an approved STP

Statewide Transition Plan - Revisions
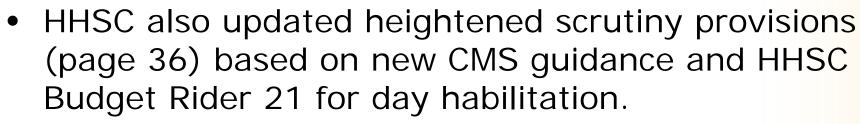
Revisions include:

- External assessment results (page 19 and Appendix II) – HHSC conducted external assessment activities for the 1915(c) waivers and the STAR+PLUS HCBS services. External assessments included surveys for provider self-assessment, service coordinators/case managers and participants to determine compliance.
  - The surveys identified as primary issues transportation, daily choices, control of personal resources, employment, privacy and communication.

Statewide Transition Plan - Revisions

- Proposed remediation activities (pages 22-31) – Based on assessment results, the remediation strategy describes the actions HHSC proposes to ensure initial and on-going compliance with the HCBS settings requirements, including timelines, milestones, and monitoring processes.
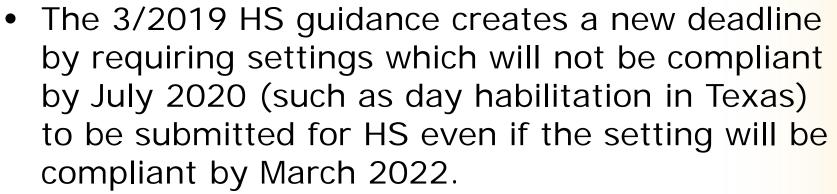 - Remedial actions may include
    - New requirements promulgated in statute, rules, licensing standards, or provider qualifications;
    - Revised service definitions and standards, training requirements or programs; or
    - Plans to relocate individuals when necessary

Statewide Transition Plan - Revisions

- HHSC also updated heightened scrutiny provisions (page 36) based on new CMS guidance and HHSC Budget Rider 21 for day habilitation.
  - The 3/2019 HS guidance creates a new deadline by requiring settings which will not be compliant by July 2020 (such as day habilitation in Texas) to be submitted for HS even if the setting will be compliant by March 2022.

Statewide Transition Plan – Revisions

HHSC is currently engaged in discussions with CMS around the content of the Texas STP.

Some general topics of discussion include:

- Level of detail in the systemic internal assessment and compliance determinations
- Assessment of settings which are not paid by Medicaid but where HCBS services may be provided
- Remediation strategies and policy revisions

Public Input

Public input is an integral part of the path to HCBS compliance and CMS has included requirements for states to ensure sufficient public comment is received.

HHS relies on the following mechanisms to obtain public input:

- Stakeholder education webinars
- Stakeholder meetings and conference calls
- Electronic notices via email and state agency websites
- Presentations at advisory committees, stakeholder meetings and agency workgroups
- Tribal stakeholder conference call meetings
- Presentations at stakeholder-sponsored conferences

Remediation

- The STP provides a high level remediation strategy, but HHSC plans to complete a much more detailed remediation plan once the STP is approved.

- HHS has identified a number of strategies to address potential non-compliance:
  - Rule and policy revisions
  - Contract changes
  - Revisions to processes used for provider oversight
  - Personal rights
  - Provider education

Heightened Scrutiny

Heightened scrutiny is a process by which the State provides additional information to CMS on sites which are presumed to have the qualities of an institution, but that the State believes can still meet the HCBS settings regulations.

These qualities are divided into three "prongs."

Heightened Scrutiny

The three "prongs" are:

- Located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment

- In a building located on the grounds of, or immediately adjacent to, a public institution

- Have the effect of isolating individuals receiving Medicaid home and community-based services (HCBS) from the broader community of individuals not receiving Medicaid HCBS

Heightened Scrutiny

New guidance released 3/22/19 further explained the third "prong" as:

- Individuals have limited, if any, opportunities for interaction in and with the broader community

- The setting restricts beneficiary choice to receive services or to engage in activities outside of the setting; or

- The setting is physically located separate and apart from the broader community and does not facilitate beneficiary opportunity to access the broader community.

TEXAS
Health and Human
Services

Next Steps

- Prepare to conduct heightened scrutiny.

- Work with CMS for initial approval of the STP

- Prepare funding requests for next session

- Formal submission of the STP

- Stakeholder meetings to educate about the STP and solicit feedback

- Once the STP is approved, revisit the remediation plan

HCBS Resources

- CMS HCBS webpage

  https://www.medicaid.gov/medicaid/hcbs/index.html

- HHS HCBS webpage

  https://hhs.texas.gov/services/health/medicaid-chip/about-medicaid-chip/homecommunity-based-services

- New Heightened Scrutiny guidance

  https://www.medicaid.gov/federal-policy-guidance/downloads/smd19001.pdf

Thank You

Questions can be sent to:

Medicaid_HCBS_Rule@hhsc.state.tx.us

Thank you

Further Questions can be sent to HCSpolicy@hhsc.state.tx.us or TxHmLpolicy@hhsc.state.tx.us