Welcome Providers!

LTCR IDD Quarterly Webinar

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Agenda

1. Ending Continuous Medicaid Coverage Presentation
2. ICF Updates
3. HCS/TxHmL Updates
4. Individualized Skills and Socialization Services Updates
5. Q & A
Ending Continuous Medicaid Coverage Presentation

Molly Lester, Policy Director, CPSO
Overview

1. Background
2. Federal Guidance
3. Current Landscape
4. HHSC Plan to End Continuous Coverage
5. Timeline for Ending Continuous Coverage
6. Communication Plan and Ambassador Program
7. Next Steps
The Families First Coronavirus Response Act (FFCRA) was passed by U.S. Congress in March 2020.

- Allowed states to qualify for a temporary 6.2 percentage point Federal Medical Assistance Percentage (FMAP) increase, provided states maintain Medicaid coverage for most people enrolled in Medicaid as of or after March 18, 2020, until the end of the month in which the federal public health emergency (PHE) ends.

- HHSC implemented the federal directive effective March 18, 2020.
Medicaid Full Benefit Caseload, September 2019 - May 2022

Notes: December 2021 - May 2022 data is not yet final and subject to change. Source: PFS. HHSC Forecasting, July 2022.
Federal Guidance

Based on the most recent guidance from the Centers for Medicare and Medicaid Services (CMS), major parameters for unwinding include:

- **States have up to 12 months** to complete pending eligibility actions, which can begin **up to 60 days** before the first disenrollments will begin.

- Disenrollments cannot be effective before **the first of the month after the PHE ends**.

- **States must conduct a full redetermination** (as outlined in 42 Code of Federal Regulations 435.916) and allow members a minimum of 30 days to respond to renewal packets or requests for information.
Current Landscape

HHSC is preparing for the large volume of work expected with unwinding continuous coverage. This plan is subject to change based on new guidance and the changing landscape.

Estimated PHE End Date

• The PHE is currently slated to end on October 13, 2022; it can be extended in increments up to 90 days.

• The federal government has committed to giving states at least 60 days notice before the end of the PHE.

• The federal government should have informed states of the end of the PHE by August 14, 2022, if the PHE will end as assumed. States did not receive notification.

Redetermination Population

• HHSC has extended Medicaid coverage for as many as 2.7 million members due to the continuous Medicaid coverage requirement in the FFCRA.

• All these members will need to have their Medicaid eligibility redetermined when continuous coverage ends.
HHSC Plan to End Continuous Coverage

- HHSC’s unwinding approach **stagger**s Medicaid redeterminations for continuous coverage over multiple months.

- The continuous coverage population will be distributed into **three cohorts** to best accomplish the goals of:
  - Maintaining coverage for eligible individuals; reducing churn
  - Prioritizing redeterminations for those most likely to be ineligible or to be eligible for another program
  - Reducing the risk of overwhelming the eligibility system or workforce during the unwinding period
  - Establishing a sustainable renewal schedule for subsequent years
HHSC Plan to End Continuous Coverage

First Cohort

Includes individuals most likely to be ineligible or transitioned to CHIP.
- Pregnant women who may transition to Healthy Texas Women Program
- Members who aged out of Medicaid
- Adult recipients who no longer have an eligible dependent child in their household
Approximately 1.4M members (as of April 2022)

Second Cohort

- Includes individuals likely to transition to a different Medicaid eligibility group
- Medicaid children, parent/caretaker and waiver groups pending information
- Certain MAGI population groups (e.g., children, people under Transitional Medical Assistance).
Approximately 500K members (as of April 2022)

Third Cohort

Includes everyone remaining from the previous groups, including those most likely to remain eligible (i.e., Children in Medicaid).
Approximately 640K members (as of April 2022)
Timeline for Ending Continuous Coverage

- **October 2022**: Identify Population and Staggered Groups
- **October 2022**: Implement unwinding period by running electronic data sources on first cohort
- **November 2022**: First cohort receives renewal packets or requests for information
- **May 1, 2023**: Estimated completion of pending eligibility actions

- **September 2022**: Members receive notice continuous coverage is ending
- **October 13, 2022**: End of current federal PHE declaration
- **November 1, 2022**: First disenrollments can be effective
- **December 31, 2022**: Estimated end date for enhanced FMAP

*Timeline assumes the Public Health Emergency will end on October 13, 2022. Awaiting federal confirmation of this date.*
HHSC Communications Plan for End of Continuous Coverage

- HHSC’s unwinding approach includes a proactive multi-pronged communications campaign to help members, providers, health plans, and advocates prepare for the end of continuous coverage.
- There is a lot of confusion on what actions members need to take now and in the future.
  - Members have not had to take action for two years to maintain Medicaid coverage.
  - High rate of returned mail.

**First Phase – Pre-Continuous Coverage Ending**

**Second Phase – Continuous Coverage End Confirmed**

**Third Phase – Post-Continuous Coverage End**
HHSC created the **Ambassador Program** for external partners, providers, health plans, and advocates to support members and prepare for the end of continuous Medicaid coverage.

**Key Messages – Actions Members Can Take Now**
- Sign up for the YourTexasBenefits account and mobile app.
- Report any changes in contact information to ensure members receive important notices when needed.
- Return renewal packets or requests for information as soon as possible after they are received by the member.

These key messages aim to **reduce member confusion**, increase likelihood of **eligible members maintaining coverage** and **minimize call center volume**.
Ambassador Program Toolkit

Actions Ambassadors Can Take Now

- Download Ambassador Toolkit from https://www.hhs.texas.gov/services/health/coronavirus-covid-19/end-continuous-medicaid-coverage-ambassador-toolkit
- Share toolkit items with members in offices or electronically.
- Share toolkit items with other stakeholders to ensure consistent messaging.
Ambassador Toolkit Graphics
Next Steps

• Continue working with CMS to keep aligned with the latest federal guidance and requirements.

• Continue activities to increase workforce capacity and ensure the eligibility system is prepared for ending continuous coverage.

• Continue engaging with contract partners and external stakeholders to build awareness for HHSC plans to end continuous coverage and expectations for members when action is needed.
ICF Updates
The following documents are available on the ICF Provider Portal:

HHSC Long-term Care Regulation updated the COVID-19 Response Plan and FAQ documents on Aug. 16 for Intermediate Care Facilities for Individuals with an Intellectual Disability or Related Conditions program.

- [ICF/IID COVID-19 Response Plan (PDF)](#) – revised August 16, 2022
- [Frequently Asked Questions for ICF/IIDs about COVID-19 (PDF)](#) – revised August 16, 2022
ICF COVID-19 Provider Response to COVID-19 — Mitigation Rules Expired Aug. 3

Emergency rules for Intermediate Care Facilities for Individuals with an Intellectual Disability or Related Conditions that contain the COVID-19 requirements for mitigation expired Aug. 3.

26 Texas Administrative Code, Section 551.46, ICF/IID Provider Response to COVID-19 — Mitigation
ICF COVID-19 Provider Response to COVID-19 — Mitigation Rules Expired Aug. 3

- As a reminder, facilities must set up, carry out, enforce and maintain an infection prevention and control policy and procedure designated to provide a safe, sanitary and comfortable environment. This must be done to help prevent the development and transmission of disease and infection per 26 TAC Chapter 551, Subchapter 42.

- A facility may use guidance from Centers for Medicare and Medicaid Services, Centers for Disease Control and Prevention, and DSHS to inform their infection control policies.

- ICFs no longer have to report positive COVID-19 cases to HHSC. A facility must immediately report the name of any resident of a facility with a reportable disease, as specified in 25 TAC Chapter 97, Subchapter A (relating to Control of Communicable Diseases), to the city health officer, county health officer or health unit director having jurisdiction.

- Facilities also must carry out appropriate infection control procedures as directed by the local health authority.
HHSC Publishes Updated Guidance on the Amelioration of Administrative Penalties for ICF/IID Providers


• The letter provides guidelines to intermediate care facilities for individuals with an intellectual disability or related conditions about the amelioration of administrative penalties assessed for state licensure violations.

Read the provider letter details.
Registration for the “Moving Forward Together” 2022 ICF Conference is open!

Please register for each of the conference sessions you plan to attend. Please note that some sessions occur at the same time.

Recordings will be made available for all sessions, so participants will have the opportunity to review them.

The Provider Sessions and Agenda are now available.

For questions, email Joint Training.
HHSC Publishes Revised Incident Reporting Requirements for LTC Providers (PL 18-20)

HHSC Long-term Care Regulation has published revised Provider Letter 18-20, Incident Reporting Requirements (PDF), for long-term care providers. This revised version updates the Texas Administrative Code references of the current programs.
HCS and TxEHnL Updates

- Emergency rules for Home and Community-based Services (HCS) waiver program providers that contain the HCS Program Provider Response to COVID-19 Emergency Rule expired October 14.

- 40 TAC §9.198 - Program Provider Response to COVID-19 Emergency Rule

- HCS program providers must continue to comply with visitation requirements for essential caregivers and clergy located in Texas Administrative Code Chapter 570.

- HCS program providers must implement and maintain personnel practices that safeguard individuals against infectious and communicable diseases per 40 TAC §9.177(e)
HHSC Alerts

TxHmL COVID-19 Program Provider Response to COVID-19 Emergency Rules Expired July 15

• Program Provider Response to COVID-19 emergency rules for Texas Home Living expired July 15. This means that effective July 16, TxHmL providers no longer have to report COVID-19 positive cases to HHSC.

• The following rules expired July 15:

• 40 Texas Administrative Code Section 9.597 - Program Provider Response to COVID-19 Emergency Rule.
HHSC Alerts

HHSC publishes revised PL 20-55

HHSC Long-term Care Regulation updated Provider Letter 20-55 to include an updated link to the new amelioration form for HCS and TxHmL program providers. The form is entitled 3708-A HCS and TxHmL Amelioration Request.
HHSC Alerts

TMHP LTC Portal for HCS/TxHmL Providers and FMSAs Webinar

Medicaid and CHIP Services (MCS) will begin hosting monthly meetings for Providers and Financial Management Services Agencies (FMSAs) who use the Long-Term Care (LTC) Online Portal for the Home and Community-based Services (HCS) and Texas Home Living (TxHmL) waiver programs.

Texas Medicaid & Healthcare Partnership (TMHP) and Health and Human Services Commission (HHSC) staff from the following departments will be available to provide information and answer questions:

- Program Eligibility and Support (PES).
- Utilization Review (UR).
- Provider Claims Services (PCS).
- Contract Administration & Provider Monitoring (CAPM).
- Local Procedure Development and Support (LPDS).
HHSC Alerts

TMHP LTC Portal for HCS/TxHmL Providers and FMSAs Webinar cont.

Save the Dates
The webinars will be held on the following dates. We encourage Providers and FMSAs to invite staff who use the LTC Online Portal for HCS and TxHmL programs.

**November 2022:** Wednesday, Nov. 9, 10–11 a.m. [Register for the webinar.]

**December 2022:** Thursday, Dec. 8, 1–2 p.m. [Register for the webinar.]

Standing Meeting Agenda

- **Trending issues** – discuss trending issues and solutions to increase successful processing of forms.
- **Updates on LTC Online Portal for HCS and TxHmL** – provide relevant updates.
- **Questions and Answers** – HCS and TxHmL Providers and FMSAs will have the opportunity to ask questions* regarding LTC Online Portal for HCS and TxHmL.

*To comply with HIPAA requirements, questions that include any identifying information for a specific individual will not be allowed during the monthly meetings.*

Email Questions to [TxHmL Policy.](#)
HCS Rule Projects

HCS Certification Principle Rule Project
• Progress to formal comment period.
• HHSC will review comments received.

Next steps
• HHSC alerts will be published to inform providers of effective dates for rules.
HHSC Alerts

HHSC to Discontinue Waiver Survey & Certification Mailbox

• As part of the on-going transformation efforts, HHSC will no longer use the following mailbox, effective Oct. 31, 2022:
  WaiverSurvey.Certification@hhsc.state.tx.us

• For a complete list of current contact information, program providers should refer to PL 2021-26 or e-mail Survey Operations at LTCRSurveyOperation@hhs.texas.gov.

• For policy questions related to HCS and TxHmL, providers should e-mail LTCRPolicy@hhs.texas.gov.
Individualized Skills and Socialization Updates
HHSC Alerts

HHSC Moved Individualized Skills and Socialization Webpage

The Individualized Skills and Socialization webpage moved from the Resources webpage to the main Long-term Care Providers webpage. This was done so its location is consistent with other Long-term Care Regulation programs and is easier to find.

Individualized Skills and Socialization can be found under the "Community-based Programs" heading.
HHSC Alerts

Individualized Skills and Socialization Provider Portal Trainings

Individualized Skills and Socialization Provider applicants are required to complete HHSC Individualized Skills and Socialization Provider Trainings. Below are two computer-based trainings, which will assist Individualized Skills and Socialization Providers with applying for a license and preparing for an inspection.

- **Prelicensure Training for Individualized Skills and Socialization Providers**
  This training was designed for providers who wish to offer individualized skills and socialization services. Prior to surveys or inspection, an entity must submit an application for a Day Activity and Health Services license. Information about the requirements to obtain a license will be shared. [Register for the training.](#)

- **Preparing for an Inspection**
  This training was designed to assist Individualized Skills and Socialization Providers to prepare for an inspection. In this course, information about the inspection process and licensure rules will be shared. [Register for the training.](#)
Individualized Skills and Socialization

Rule Project

• Formal comment period ended on September 12, 2022.

Next steps

• HHSC alerts will be published to inform providers of effective dates for rules.
All Program type
HHSC Alerts
HHSC Alerts

LTC Providers Encouraged to Get Ready for Flu Season

• CDC recommends everyone be vaccinated against the flu by the end of October to avoid peak flu season. Long-term care providers should review their program requirements for guidance related to vaccination requirements and infection control.

Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States

Managing a Flu Outbreak - U.S. Centers for Disease Control and Prevention (CDC)

Interim Guidance for Routine and Influenza Immunization Services During the COVID-19 Pandemic
HHSC Urges Providers to be Vigilant for Monkeypox in LTC Communities

Attention provider types: ALF, DAHS, HCS, HCSSA, ICF/IID, NF, PPECC and TxEHmL.

- HHSC is reminding long-term care providers to be alert for people who have rashes and other symptoms consistent with monkeypox. Providers should follow CDC guidance on monkeypox.

Monkeypox is immediately reportable to the Department of State Health Services upon suspicion of infection.

- For testing:
  - Commercial testing is available and prior permission is not required.
  - If there is the need for state agency or Laboratory Response Network testing, LTC providers should contact either their local health department or DSHS.

If monkeypox is suspected by a clinician or local health department, LTC providers should contact DSHS at (512) 776-7676 for testing approval.
HHSC Issues New Regional Boundaries for Long-term Care Providers (PL 2022-18)

• HHSC has published Provider Letter 2022-18 - New Regional Boundaries for Long-term Care Providers (PDF).
• The letter indicates that HHSC Long-term Care Regulation has redrawn regional boundaries for survey and investigation purposes effective August 1, 2022.
• All LTC providers are affected by the new regional boundaries. Please see the map for the new regional boundaries that go into effect on August 1, 2022. The new boundaries separate former Region 7 into two new regions: Region 8 and 11.
• Read the PL details.
Most Frequently Cited Deficiencies Annual Reports
These courses cover the 10 most frequently cited deficiencies based on the agency’s annual report for fiscal year 2021.

Home and Community-based Services
- **10 Most Frequently Cited Deficiencies in HCS and Texas Home Living — Fiscal Year 2021**

Intermediate Care Facilities
- **10 Most Frequently Cited Deficiencies in ICFs/IID — Fiscal Year 2021**
- **10 Most Frequently Cited Deficiencies in ICFs: Life Safety Code — Fiscal Year 2021**

Texas Home Living
- **10 Most Frequently Cited Deficiencies in HCS and TxHmL — Fiscal Year 2021**

Email Curriculum and Training for more information.
HHSC Alerts

HHSC Approved Diagnostic Codes

HHSC has updated the Approved Diagnostic Codes for Persons with Related Conditions effective Oct. 1, 2022 to Sept. 30, 2023.

The list of diagnostic codes has not changed for this year and can be viewed at HHSC Approved Diagnostic Codes for Persons with Related Conditions.
*Reminder: Sign-up for GovDelivery to receive alerts*

Go to:  
https://service.govdelivery.com/accounts/TXHHSC/subscriber/new

- Enter your email address.
- Confirm your email address, select your delivery preference, and submit a password if you want one.
- Select your topics.
- When done click “Submit.”
Training Opportunities
Training Initiatives

For All Program Types

Positive Behavior Management and Support Workshops

This 10-hour training teaches participants how and why attention can be a powerful tool for behavior change, how to use reinforcement to tip the scales toward adaptive, positive and successful behaviors, and how to safely and effectively redirect potentially harmful behaviors as a last resort.

Nov. 9 – Nov. 10 (via Zoom)

https://www.hhs.texas.gov/providers/training/training-initiatives
Training Initiatives

For All Program Types

Mental Health Wellness for Individuals with IDD

The mental health wellness for individuals with IDD is a six-part e-learning course that teaches direct service workers and other caregivers about the behavioral health needs of people with IDD who also have a mental health condition. The course will help you understand the biological, psychological and social influences on people with IDD who have challenging behaviors, and will provide tools to help you support the person and promote positive behavior and outcomes.

https://www.hhs.texas.gov/providers/training/training-initiatives
Training Initiatives

For ICF providers

- 10 Most Frequently Cited Deficiencies in ICFs/IID
- Complaint and Incident Intake (CII): Provider Incident Self-Reporting
- Plan of Removal (for all program types)
- Writing Acceptable Plans of Correction for ICFs/IDD
- Individual Emergency Preparedness Guidance to Support People with Disabilities
LTCR Q&A
LTCR Q&A

Question:
In ICF, when reporting a positive COVID result for staff, do providers have to report each staff member that is positive, or just the first positive case if it has been more than 14 days?

Answer:
Providers no longer need to report positive COVID-19 cases for neither staff nor individuals to CII. Providers should continue to report COVID-19 cases to the local health authority.
Question:
Do HCS and TxHmL program providers have to report COVID-19 cases to HHSC?

Answer:
HCS and TxHmL Program providers no longer have to report COVID-19 positive cases to HHSC. Providers must still follow local reporting requirements.
Questions?

For more information:

Email: LTCRPolicy@hhs.texas.gov
Phone: 512-438-3161
LTCR IDD Quarterly Webinar

Webinar Schedule

Next Webinar: January 2023

Email: LTCRPolicy@hhs.texas.gov
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Gov.Delivery Sign up
Texas Health and Human Services Commission (govdelivery.com)

Also, as a reminder, the PowerPoint slides will be available on the provider portals shortly after the webinar is completed, typically within 48-72 hours.
Send your ideas for our upcoming quarterly webinars.

LTCRPolicy@hhs.Texas.gov

Subject: LTCR IDD Quarterly Webinar Idea
Thank you!

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