



BDS Provider & Case Manager Bi-monthly Webinar

February 7, 2024



- Waiver Transition - Public Comment
- New Provider Application Policy
- Innovation Pilot Project
- Reminders
- Provider Webinar Topic Invitation



Overview of Waiver Transition

What?

- Create a new waiver and administration of the A&D waiver (ages 60+) for the IN PathWays for Aging program with OMPP oversight
- Transition oversight of the current A&D (ages 59 and under) and TBI to DDRS

Why?

- Enhance waiver administration across FSSA divisions while ensuring a positive and smooth transition for HCBS waiver recipients and providers
- Goals: increase person-centered planning, improve coordination of care, increase community engagement, enhance member experience, maintain qualified providers, comply with HCBS Rule, and promote efficiency

How?

- Strong collaboration with DA, DDRS, OMPP, and CMS
- Stakeholder engagement with consumer groups, providers, AAAs and case management entities, Commission on Aging, and CHOICE board

Home and Community Based Services (HCBS) Waiver Transition

What is happening?

Individuals aged 60 and above enrolled in the Aged & Disabled Waiver will transition to the Indiana PathWays for Aging waiver program as announced in 2022. The Aged & Disabled waiver for ages 59 and under will become the Health & Wellness waiver. Waiver services will remain aligned for both of these waivers. Individuals who are identified to move to the PathWays for Aging program will be notified in writing.

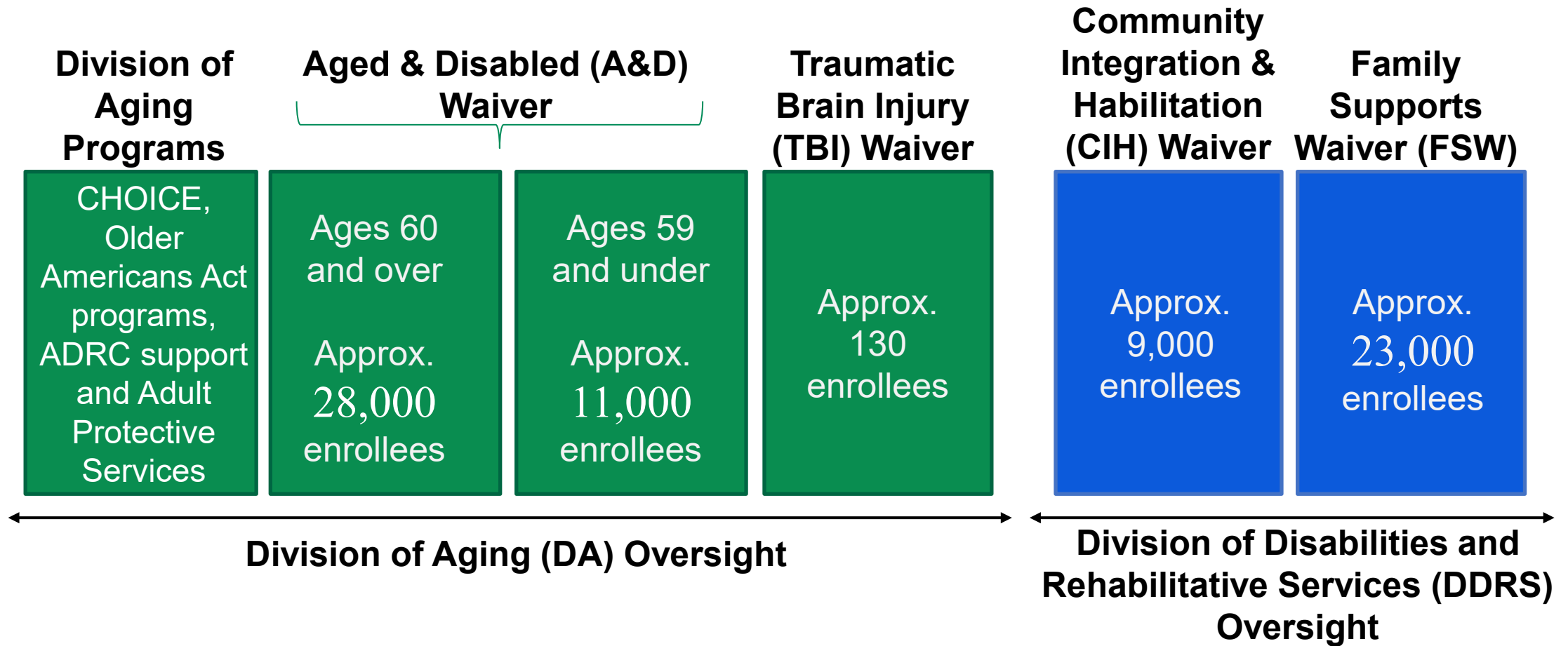
What is the overall objective?

To foster a positive and smooth experience for waiver recipients and providers by enhancing A&D and TBI waiver structure through the transition across divisions; by March 2024, submit final waiver amendments.

What changes will happen to non-HCBS waivers related to this transition?

The population of HCC waiver will also be modified to reflect that members will be ages 59 and under, as those 60 and over will be served under PathWays.

Waiver Transition: Current FSSA HCBS Programs*



*Excluding DMHA waivers



Where Do You Find H&W, CIH, TBI, and FSW Waiver Documents

Public notice will be made available via the following methods:

1. Electronic copies posted on the FSSA webpages at <http://www.in.gov/fssa/ddrs/4205.htm> and <https://www.in.gov/fssa/public-notices/>
2. Electronic copy posted in the Indiana Register at <http://iac.iga.in.gov/iac/irtoc.htm>
3. Paper copy available upon request at local Division of Family Resources offices and local Bureau of Disabilities Services (BDS) (previously known as the Bureau of Developmental Disabilities Services or BDDS) offices.

Where Do You Find PathWays and HCC Waiver Documents

Public notice will be made available via the following methods:

1. Electronic copy posted on the FSSA webpage at <https://www.in.gov/fssa/public-notices/>
2. Electronic copy posted in the Indiana Register at <http://iac.iga.in.gov/iac/irtoc.htm>
3. Paper copy available upon request at local Division of Family Resources offices and a local Area Agency on Aging Office

Where Are the Changes Within the Waiver Documents?

Each waiver is posted separately for review. Within the **A&D, H&W, CIH, TBI, and FSW** waiver amendments, there are introductory sections (Section 2) referred to as 'Purpose of Amendment.' This section reflects the primary reasons for the proposed amendments at a summary level, and generally reflect the most substantive or significant changes being proposed.

In the new **PathWays** 1915(c) waiver and all the other waivers, there are narrative or language changes within various sections and appendices of the waiver. Within the **HCC** 1915(b) waiver, there is an Amendment Request Overview section that lists where changes are found. These language changes do not necessarily mean policies and procedures within a waiver are changing.

As previously shared, many areas have language updates to reflect existing processes that are already in place as part of the waiver administration. These changes were made in recognition that FSSA is operationally following the same procedures in several major areas of waiver operations. However, in the past these existing procedures have been described differently across waivers because they were written by different Divisions.

For this webinar, we will highlight the significant changes to the waivers following the 1st public comment period. The slides also relist the waiver updates previously shared during the 1st public comment webinar series. We will not focus on areas of language edits or minor alignments made across waiver documents.

FSW Waiver Amendment Overview

Who is served by FSW:

- The FSW provides supports to children and adults with intellectual and developmental disabilities.

Updates in the January waiver amendment draft:

- Maintains provider rates as approved by CMS and effective July 1, 2023. Includes permissive authority to index rates in the future as fiscal situation allows
- Adds priority category for individuals on A&D waiver who are subsequently found to not meet NFLOC but who do meet ICF/ID LOC
- Clarifies the \$15,000 vehicle modification cap is for every 10 years, not per lifetime
- Clarifies the policies surrounding the allowance of services provided by legally responsible individuals to sustainably provide services with appropriate checks and balances

Items shared during Nov-Dec public comment period:

- Added new employment array service, Career Exploration, to implement employment transformation plan and provide additional service and support options for individuals with intellectual and developmental disabilities pursuing competitive, integrated employment opportunities. (Goal for 38% of individuals in services reporting competitive integrated employment outcomes by 2027.)
- Added the Home Modifications Assessment services
- Made changes to behavior support services and case management services in recognition of the employment services transformation plan
- Made minimal changes to service definitions to clarify service outcomes and potential ways the services could be used, and to align descriptions across multiple waivers for consistency

CIH Waiver Amendment Overview

Who is served by CIH:

- The CIH provides supports to children and adults with intellectual and developmental disabilities.

Updates in the January waiver amendment draft:

- Maintains provider rates as approved by CMS and effective July 1, 2023. Includes permissive authority to index rates in the future as fiscal situation allows.
- Revises count of expected participants due to MFP
- Clarifies the \$15,000 vehicle modification cap is for every 10 years, not per lifetime

Items shared during Nov-Dec public comment period:

- Added new employment array service, Career Exploration, to implement employment transformation plan and provide additional service and support options for individuals with intellectual and developmental disabilities pursuing competitive, integrated employment opportunities. (Goal for 38% of individuals in services reporting competitive integrated employment outcomes by 2027)
- Added the Home Modifications Assessment service
- Made changes to behavior support services and case management services definitions to clarify the role of these services in competitive integrated employment
- Made minimal changes to service definitions to clarify service outcomes and potential ways the services could be used, and to align descriptions across multiple waivers for consistency

Health & Wellness Waiver Amendment Overview (formerly A&D Waiver)

Who is served:

- The H&W will provide support to children and adults ages 59 and under who meet nursing facility level of care.

Updates in the January waiver amendment draft:

- Adjusts the timeframe for continuity of care for existing service plans to a minimum 90-day period to match timeframes in existing managed care programs. Following this period, services may not be reduced or terminated in the absence of an up-to-date assessment of needs that supports reduction or termination.
- Clarifies the policies surrounding the allowance of services provided by legally responsible individuals to sustainably provide services with appropriate checks and balances; will permit for structured Family Caregiving and will not permit for attendant care.
- Maintains provider rates as approved by CMS and effective July 1, 2023. Includes permissive authority to index rates in the future as fiscal situation allows.
- Keeps the number of waiver slots consistent with previously approved A&D slots
- Adds explanation of potential waitlist procedures
- Clarifies language on selection of entrants to the waiver

Health & Wellness Waiver Amendment Overview (formerly A&D Waiver)- Cont'd

Updates in the January waiver amendment draft (continued):

- Updates cost neutrality information
- Revises language regarding when auto-assignments occur for those who do not select a PathWays MCE (applies to those transitioning from H&W to PathWays waiver at 60th birthday)
- Removes reference to exclusion for the family ownership of an agency
- Clarifies the \$15,000 vehicle modification cap is for every 10 years, not per lifetime

Items shared during Nov-Dec public comment period:

- Made minimal changes to service definitions to clarify service outcomes and potential ways the services could be used
- Made minor changes to language in the waiver to align all 1915(c) waivers with matching language
- Switched waiver oversight from Division of Aging to Division of Disability and Rehabilitative Services
- Changed name to Health and Wellness (H&W) waiver
- Changed waiver target population to serve individuals aged 0-59 [note: age 60 and above will be served in PathWays]

TBI Waiver Amendment Overview

Who is served by TBI:

- The TBI waiver provides support for people who have experienced a traumatic brain injury.

Updates in the January waiver amendment draft:

- Maintains provider rates as approved by CMS and effective July 1, 2023. Includes permissive authority to index rates in the future as fiscal situation allows.
- Adds transfers to allowable activities under Attendant Care definition
- Removes reference to exclusion for the family ownership of an agency
- Clarifies the \$15,000 vehicle modification cap is for every 10 years, not per lifetime
- Clarifies the policies surrounding the allowance of services provided by legally responsible individuals to sustainably provide services with appropriate checks and balances; will permit for structured Family Caregiving and will not permit for attendant care.

Items shared during Nov-Dec public comment period:

- Made minor changes to language in the waiver to align all 1915(c) waivers with matching language.
- Switched waiver oversight from Division of Aging to Division of Disability and Rehabilitative Services
- Added the Structured Family Caregiving service and the Home Modifications Assessment service
- Made minimal changes to service definitions to clarify service outcomes and potential ways the services could be used, and to align descriptions across multiple waivers for consistency

Indiana PathWays for Aging - New Waivers

Who is served:

- Individuals who are 60 and over who are aged, blind and disabled and qualify for Medicaid services, or including those age 60 and over currently enrolled in Hoosier Care Connect, or qualify for both Medicare and Medicaid, or receive services on the Aged and Disabled Waiver, or receive services in a nursing facility

Updates in the January waiver draft (continued):

- Adjusts the timeframe for continuity of care for existing service plans to a minimum 90-day period to match timeframes in existing managed care programs. Following this period, services may not be reduced or terminated in the absence of an up-to-date assessment of needs that supports reduction or termination.
- Clarifies the policies surrounding the allowance of services provided by legally responsible individuals to sustainably provide services with appropriate checks and balances; will permit for Structured Family Caregiving and will not permit for Attendant Care.
- Maintains provider rates as approved by CMS and effective July 1, 2023. Includes permissive authority to index rates in the future as fiscal situation allows.
- Keeps the number of waiver slots consistent with previously approved slots

Indiana PathWays for Aging - New Waivers

Updates in the January waiver drafts (continued):

- Adds explanation of potential waitlist procedures and reserved capacity for individuals aging out of the Health & Wellness Waiver to ensure continuity of care
- Clarifies language on selection of entrants to the waiver
- Revises language regarding when auto-assignments occur for those who do not select an MCE
- Removes reference to exclusion for the family ownership of an agency
- Clarifies the \$15,000 vehicle modification cap is for every 10 years, not per lifetime

Things to note that were previously shared in the PathWays drafts:

- This waiver is a 1915 (b)/(c) combination. The 1915(b) waiver authorizes the managed care program. The 1915(c) waiver provides the HCBS currently available on the A&D waiver for ages 60+
- Those receiving hospice services when they become eligible for PathWays and American Indians/Alaska Natives can opt-in to managed care
- Maintenance of Effort – Any changes around service definitions are minimal and do not affect services.
- All enrollees are eligible to receive care coordination. Enrollees who have a "nursing facility level of care" will also be offered service coordination.
- Service definitions remain aligned with the current Aged and Disabled waiver
- More information about the new PathWays program can be found at in.gov/pathways

Hoosier Care Connect Waiver Amendment Overview

Who is served:

- The HCC provides support to individuals ages 59 and under who are blind, disabled, or a ward of the state through child welfare system. Individuals excluded from HCC include individuals ages 60 and older, individuals who receive services through a 1915(c) waiver, individuals who live in a facility or institution, and individuals who also are on Medicare.

Updates in the January waiver amendment draft:

- Changes waiver target population to serve individuals ages 59 and under [note: age 60 and above will be served in PathWays]

This posting is in addition to what was posted in Nov-Dec.

Purpose of Public Comment?

- Required by Federal Law (42 CFR §441.304(e) and (f))
- Federal law mandates 30-day notice to ensure timeliness
- Your comments are **VALUABLE** in developing and implementing waiver changes!
- The state will consider each comment submitted for review
- Gives us an opportunity to change areas of the proposed amendments prior to submitting for approval
 - Updates in the new waiver drafts include edits based on the 1st public comment period
- Allows community to see what we are planning and share BOTH support or concern

What is Currently Out for Public Comment?

The following waivers were previously out for public comment November 8, 2023, through December 14, 2023. Slides later in this deck will provide a high-level overview of the changes since the last public comment period and a summary of previously shared updates.

- The Family Supports (FSW) waiver
- The Community Integration and Habilitation (CIH) waiver
- The Traumatic Brain Injury (TBI) waiver
- The Health and Wellness (H&W), formerly known as the A&D waiver (for those under age 60)
- The PathWays 1915(b)/(c) waivers (including those served by A&D waiver for those aged 60+)

The following waiver is now out for public comment but had not been out for comment last November.

- The Hoosier Care Connect (HCC) waiver

How To Submit a Public Comment

Comments on the **H&W, TBI, FSW, and CIH Waivers** can be emailed to DDRSwaivernoticecomment@fssa.IN.gov

or mailed to:

FSSA Division of Disabilities and
Rehabilitative Services
RE: [Insert Amendment Name] Public
Comment
402 West Washington Street, Room W453
P.O. Box 7083
Indianapolis, IN 46027

Comments on the **PathWays & HCC Waivers** can be emailed to backhome.indiana@fssa.in.gov or comments can be mailed to:

Family and Social Services Administration
Office of Medicaid Policy and Planning
Attention: Holly Cunningham-Piggott
402 W. Washington St., W374
Indianapolis, IN 46027

Timeline

Public Comment Period	01/17/24 – 02/16/24
Waiver Effective Date	07/01/24



Public Comment Resources

Short how-to video on giving public comment:

[Webinar: Waiver Notice and Public Comment Process](#)



Medicaid Strategies

For more information on Medicaid strategies:

<https://www.in.gov/fssa/medicaid-strategies/>

Paid Family Caregivers resource:

<https://www.in.gov/fssa/files/ATTCandSFRelationshipGuidance.pdf>



New Provider Application Policy As of January 1, 2024

On January 1, 2024, BDS updated the New Provider Application policy. Key updates include:

- BDS has discontinued the "Letter of Intent" requirement for organizations applying to become a BDS Provider.
- BDS will accept provider applications throughout the year
- BDS Provider applicants successfully completing documentation requirements will receive provisional approval. Applicants have one year from the date of provisional approval to complete the initial session of the BDS Leadership Training Series.
- Upon successful completion of this session, BDS Provider applicants will then seek approval to be a Medicaid provider. Upon successfully becoming a Medicaid provider, BDS will issue a final approval once confirming that all statutory and regulatory requirements are met.
- The BDS New Provider Application policy is available on the BDS website at: [FSSA: DDRS: Current DDRS Policies \(in.gov\)](https://www.in.gov/fssa/ddrs/current-ddrs-policies)



Innovation Pilot Projects

Visit website to find more information on awarded pilot projects and to view webinars related to the IPPs!

<https://www.in.gov/fssa/home-and-community-based-services-spending-plan/bdds-innovative-pilot-projects/>

Check out the BDS Facebook page for opportunities to get involved and video highlights on each project. We will be hosting a public webinar this spring to highlight some of the great work the grantees are doing and the possible impact to home and community-based services! Please contact Jessica Harlan-York at jessica.harlan-york@fssa.in.gov if you have questions or thoughts!





HCBS Settings Rule Lease Requirements

- An individual living in a POCOs setting must have a lease or other legally enforceable agreement which has the same responsibilities and protections from eviction that tenants have under landlord-tenant laws.
- Leases/legal agreements **MUST** be signed by all parties, including the legal guardian of the individual if applicable.





DFR Follow-Up

We wanted to remind all providers and case managers to be responsive to contacts from the Division of Family Resources (DFR) regarding Medicaid Redeterminations, etc.

It's vital for us to make sure that the individuals we support do not experience any interruptions or disruptions in the supports and resources they receive.



Provider Attestations



A provider system administrator **MUST** log into the BDS Portal and confirm the Provider Profile information at a minimum of every **90 days**.

The Provider Profile information should always be updated anytime there is a change in the Provider Profile.

For assistance with completing the Provider Attestation, please refer to the BDS Portal User Guide for Providers located in the Resource Section of the BDS Portal under the "User Guides" tab.



Provider Contact Updates



In addition to the required completing of Provider Attestation on a quarterly basis, please note that all providers are expected to ensure that provider contact information in BDS Portal is accurate. All providers have access to update this information and should be doing so. This includes changes in:

- Leadership/Agency Contacts
- Addresses
- E-mails
- Telephone Contacts

Provider representatives having access to the BDS Portal are expected to ensure the ongoing accuracy of agency information. BDS Provider Services is not required to update this information. If you are having a technical issue, please submit a Jira ticket. If you are unsure how to complete this update, please refer to the Provider Resources Tab in the BDS Portal at <https://bddportal.fssa.in.gov/Resource>



Provider Referrals



Please check your provider referrals grid and respond to referrals within **30 days**. You may view the referral then accept, reject or request additional information by selecting the record.

For assistance with completing the Provider Referrals, please refer to the BDS Portal User Guide for Providers located in the Resource Section of the BDS Portal under the "User Guides" tab.

EVV Live Webinar



- Federal law requires personal care service and home health service providers to use an electronic visit verification (EVV) system to document services rendered. **The final EVV edits will be activated in April 2024, consistent with federal requirements.** In the coming months, the FSSA will host multiple opportunities to answer questions related to EVV and support providers successfully integrating this technology into their practice. The first such opportunity is:
- There will be an IHCP Live EVV Townhall webinar on February 26 at 10 AM. Information on how to register will be available on the Indiana Medicaid provider website. This webinar will be an opportunity to go through reminders and continued best practices around EVV.



EVV Compliance Resources for Additional Support



- [Electronic Visit Verification Training](#)
- Virginia Hudson at inxixevv@gainwelltechnologies.com
- FSSA at evv@fssa.in.gov



Incident Reporting



We are continuing to get incident reports for positive COVID tests.

As a reminder: effective November 11, 2023, an incident report is no longer be required for an individual who tests positive for COVID.





Providers Requesting Retro Units

- Providers should request modifications to units in a timely manner.
- Case managers are only able to update units for the prior month.
- Timely requests will eliminate the necessity for an STBR submission.





Future Provider Webinar Topic Ideas?

The BDS Provider Webinar primarily offers an opportunity for BDS to share current news, updates, and to offer brief training opportunities. We want to hear your ideas about additional webinar topics that would be helpful to you.

Share your topic ideas at:
BDSProviderServices@fssa.in.gov

