LME-MCO Communication Bulletin #J274

Date: January 19, 2018

To: Local Management Entities-Managed Care Organizations (LME-MCOs)
Providers of Group Homes with 10A NCAC 27G .5601 (c)(1) and 10A NCAC 27G .5601 (c)(3)
designations

From: Mya Lewis, I/DD & TBI Section Chief, Division of Mental Health, Developmental Disabilities
and Substance Abuse Services
Kenneth Bausell, IDD Manager, Division of Medical Assistance

Subject: SFY 17-18 Supplemental Short-term Assistance for Group Homes (10A NCAC 27G .5601 (c)(1) and
10A NCAC 27G .5601 (c)(3))

Per Session law 2017-57 Section 11F.18 A, the General Assembly has appropriated five million dollars ($5,000,000) in
nonrecurring supplemental short-term assistance funds for individuals living in group homes for each year of the 2017 –
2019 fiscal biennium. The Division of Mental Health, Developmental Disabilities, and Substance Abuse Services
(DMH/DD/SAS) is the division responsible for determining the process to disburse these funds. These funds will be
distributed through the LME-MCOs to the group homes with 10A NCAC 27G .5601 (c)(1) and 10A NCAC 27G .5601
(c)(3) designations that house individuals with a primary diagnosis of mental illness or a developmental disability and
meet the criteria described below in the operational instructions.

Operational Instructions for the LME/MCO Supplemental Short-term Assistance for Group Homes

The following process shall be used for group home providers and LME-MCOs to request use of short-term supplemental
funds for a(n) individual(s) who meet the identified criteria for fund use stated in Session Law 2017-57 Section 11F.18
A.(b):

1. The resident was eligible for Medicaid-covered Personal Care Services prior to January 1, 2013.

2. The resident was determined to be ineligible for Personal Care Services on or after January 1, 2013 due to
Medicaid State Plan changes in PCS eligibility criteria.
3. The resident has been a continuous resident in a group home since December 31, 2012. If the bed was held due to a temporary leave of absence (i.e. hospitalization), the resident is still eligible. However, if the individual was discharged (not a result of a change in providers), the resident is NOT eligible.

NOTE: **ALL criteria MUST be met in order for a person to be eligible for short-term assistance.** The recipient may not receive this funding if a Medicaid appeal has been filed and Maintenance of Service (MOS) has been granted for PCS.

1. DMH/DD/SAS has sent an allocation letter to each LME-MCO based upon previous use of short-term supplemental funds. Funding allocated to the LME-MCO will be used as one-time short-term assistance, is $464.30 per month per resident of a 10A NCAC 27G .5601 (c)(1) or 10A NCAC 27G .5601 (c)(3) designated group home who meets the identified criteria.
   a. It is expected that $464.30 per beneficiary per month will be dispersed until funds are exhausted or the end of the fiscal year.
   b. Providers may only request short-term assistance for months that services were provided to the beneficiary from July 1, 2017- June 30, 2018.
      i. For example, if a beneficiary moved into the group home August 1, 2017, the provider would not be eligible for July payments.
      1. Providers should include a cover letter if such exclusions apply.
   c. The LME-MCO may request an additional allocation for funding based on the number of short-term assistance requests received. New allocation needs will be reviewed quarterly and any additional allocations will be based on the availability of remaining funds in the appropriation.
   d. Short-term assistance funding is only available until funds are exhausted.

2. Individuals currently receiving Innovations waiver funding are not eligible for this funding.

3. Individuals who reside in Intermediate Care Facilities - Individuals with Intellectual Disabilities (ICF-IID) receiving Medicaid ICF-IID payments are not eligible for this group home short-term assistance funding.

4. Individuals that have transitioned from group home funding to an in-lieu of ICF service definition on or after January 1, 2013 are not eligible to receive this assistance.

5. LME-MCOs are NOT required to have a contract with the group home in order to issue payment. LME-MCOs are responsible for ensuring systems are in place for end of year reconciliation. LME-MCOs will receive updated allocation letter to update the Special Conditions section #7.

6. LME-MCOs: For-profit group homes are eligible for this funding. LME-MCOs have received updated allocation letters that update the Special Conditions section #11.

7. It is the provider’s responsibility to determine eligibility, maintain documentation to support eligibility and notify the LME-MCO of any potential errors. In the event the LME-MCO requests repayment from a provider, those funds may go towards additional persons that are to receive this short-term assistance.
   a. In the past, a list was created with individuals who received funding. We are unable to release the document at this time due to PHI contents. However, if you would like to verify if a beneficiary name is listed, please contact LaToya Chancey or Mya Lewis. If a list is created that can be shared per LME-MCO, that information will be sent out accordingly.
8. Providers should submit short-term assistance Invoice Requests Forms directly to the LME-MCO from which the beneficiary’s Medicaid originates (resident’s Medicaid county). Please note this form contains PHI and must be sent via secure method.

9. LME-MCOs are responsible for paying each group home for funding starting from July 1, 2017 forward unless the individual was later determined to be ineligible or otherwise noted by the provider. Therefore, LME-MCOs will track submitted invoices and continue payments to the listed providers each month until the end of the fiscal year or all funds are exhausted, whichever is first. This should reduce administrative burden on all parties.
   a. The Short-term Assistance Invoice Request Form has been updated to reflect the start date and the LME-MCO. If the beneficiary was denied PCS on or after January 1, 2013, you will note a start date of July 1, 2017. In the event that the denial took place after July 1, 2017, you will note that day.
   b. While these forms do NOT require DMH/DD/SAS approval, copies of all Short-term Group Home Assistance Invoice Request Forms must be submitted by the LME-MCO to Mya Lewis, IDD & TBI Section Chief, monthly with a copy of the LME-MCOs Financial Status Report (FSR). DMH/DD/SAS will track submitted invoices during SFY18. During SFY 19, LME-MCOs will be provided a spreadsheet to continue tracking.
   c. LME-MCO Points of Contact are as follows:
      i. Alliance: Kelly Goodfellow-kgoodfellow@alliancebhc.org
      ii. Cardinal: Emma Morris-Emma.Morris@cardinalinnovations.org
      iii. Eastpointe: Karen Salacki-ksalacki@eastpointe.net
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      v. Sandhills: Yolanda Nealy-yolandan@sandhillscenter.org
      vi. Trillium: Michelle Martin-Michelle.Martin@trilliumnc.org
      vii. Vaya: Sarah Lancaster-Sarah.Lancaster@vayahealth.com

10. Group home providers must also submit a list of all funding sources for the operating cost of the group home for the preceding two years. (Refer to Funding Sources Notification.) The list of all funding sources should be submitted to Mya Lewis, IDD & TBI Section Chief, by January 31, 2018 at mya.lewis@dhhs.nc.gov. A revision has been made to this document to include the LME-MCO for tracking purposes. One form per group home is required. If multiple persons reside in the same group home, only one form is required.

Should you have any questions regarding the implementation of this process, please contact Mya Lewis at mya.lewis@dhhs.nc.gov or LaToya Chancey at latoya.chancey@dhhs.nc.gov.

Previous bulletins can be accessed at: https://www.ncdhhs.gov/divisions/mhddsas/joint-communication-bulletins

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