

# Molina Healthcare Community First Choice

Provider Training for CFC services

January 2016



Your Extended Family.

MHTCFCPROV012016

# Community First Choice: Background

Senate Bill 7, 83rd Texas Legislature, Regular Session, 2013, requires HHSC to "implement the most cost-effective option for the delivery of basic attendant and habilitation services for individuals with disabilities under the STAR+PLUS Medicaid managed care program that maximizes federal funding for the delivery of services for that program and other similar programs."

# Who is Eligible for CFC?

To be eligible for CFC services an individual must:

- Be a child or an adult who is eligible for Medicaid
- Require an institutional level of care, e.g.:
  - A nursing facility
  - An institution of mental disease
  - An intermediate care facility for individuals with an intellectual disability or related condition

# Community First Choice: Services Include

- Personal assistance services (PAS/PCS)
- Emergency Response Services (ERS)
- Habilitation (HAB)
- Support Management

# Personal Assistance Services

- Assistance with activities of daily living (ADLs) and instrumental activities of daily living (IADLs) through hands-on assistance, supervision or cueing.
- CFC Personal Assistance Services provide assistance to a member in performing ADLs and IADLs based on the person-centered service plan.

# Personal Assistance Services

- Non-skilled assistance with ADLs and IADLs
- Household chores
- Daily living assistance (dressing, bathing, eating)
- Assistance with health-related tasks, including:
  - Delegated nursing
  - Health maintenance activities
  - Extension of therapy

# Habilitation

- Helps members acquire, maintain, and enhance skills to accomplish ADLs, IADLs and health-related tasks.
- May also include components of personal assistance services.

# Habilitation

- Habilitation
- Self-care
- Personal hygiene
- Household tasks
- Mobility
- Money management
- Community integration
- Use of adaptive equipment
- Restoring or compensating for reduced cognitive skills
- Personal decision-making
- Interpersonal communication
- Socialization
- Leisure activity participation
- Self-administration of medication
- Use of natural supports/community services



# Emergency Response Service

- A service for members who would otherwise require extensive routine supervision and who:
  - Live alone
  - Are alone for significant parts of the day
  - Do not have regular caregivers for extended periods of time

# Support Management

- Provides voluntary training on selecting, managing and dismissing attendants.
- Offered to all members regardless of service delivery model.
- Not a billable service.

# CFC: Assessments

- A functional, person-centered assessment will be performed to determine the level of need for CFC services.
- For STAR+PLUS members with IDD, the Local Intellectual and Developmental Disability Authority (LIDDA ) will complete the assessment.
- For STAR+PLUS members with physical disabilities, the MCO will complete the assessment.
- Assessments will result in a plan of care to reflect the member's needs and goals.
- Assessments will be done annually, at minimum.

# CFC: LIDDA

- Collaborate with Molina Healthcare in agreeing to and jointly presenting a service plan to adult members.
- Conduct a Determination of Intellectual Disability (DID), if needed.
- Conduct the ID/RC assessment for ICF/IID LOC.
- Develop recommended service plans for adult members who receive a DID and approved LOC.
- Transmit DID and ID/RC information to DADS.

# CFC: DADS/TMHP

- DADs will determine whether members meet ICF/IID LOC criteria based on ID/RC submitted by LIDDA and coordinating with the Molina Healthcare and LIDDA as needed for LOC determinations.
- DADs will facilitate the fair hearing process when DADs staff denies LOC.
- TMHP will continue to determine Nursing Facility LOC based upon the MN/LOC assessment submitted by Molina Healthcare.

# CFC: Molina Healthcare

- Assess or refer members who request services or have been identified as benefiting from CFC Services.
- Authorize all CFC services for eligible members.
- Conduct the MN/LOC assessment and submit it to TMHP for a LOC decision.
- Consider, develop, collaborate and agree upon recommended service plans.
- Meet regularly with the LIDDA.
- Provide ongoing service coordination and annually assessments to qualified members.

# Community First Choice Referrals

## Internal:

- Adults and Children enrolled with Molina
  - STAR+PLUS Waiver Members
  - Non-waiver members
  - Self /professional referral

## External:

- IDD Wait List managed by the Local Authority (LA)
- Self /professional referral

# CFC: Eligibility



# CFC Eligibility Determination: MNLOC

- Used to establish nursing facility level of care
- Completed by Molina RN
- Completed on Molina enrolled adults and children
- Submitted to TMHP for Medical Necessity determination
- Completed annually once MNLOC approved

# CFC Eligibility Determination: Level of Care

- Used to establish eligibility for Intermediate Care facility(ICF/IDD)
- Assessment managed/completed by the Local Authority (LA)
- Used for individuals on IDD Waitlist and Molina non-waiver members who are adult
- Level of Care (LOC)
  - Determination of Intellectual Disability(DID)
  - Intellectual Development/Related Condition (ID/RC)
- Eligibility determined by DADs
- Assessment completed by the LA annually

# CFC Eligibility Determination: ANSA/CANS

- Used to determine need for level of care that is required in an institution for mental disease
- Completed by the Local Mental Health Authority (LMHA)
- Adult Needs and Strengths Assessment/Child and Adolescent Needs and Strengths (ANSA/CANS)
  - Completed by the Local Mental Health Authority
  - Level 4 or higher qualifies
- CANS may be completed every 90 days
- ANSA may be completed every 180 days

# CFC: Authorizations

# CFC Authorizations

- Once assessments are completed a plan of care will be created for the Member.
- The approved plan of care will be discussed and accepted by the member and/or their medical consenter/LAR.
- Members will select Molina providers/provider agencies for their CFC services.
- Authorizations will be created by Molina Healthcare and be valid for one year.

# CFC Authorizations

- PAS Only:
  - Members with identified PAS needed will select a Molina contracted PAS provider.
  - Authorization will utilize the CFC PAS-only codes/modifiers and rate
- PAS with HAB
  - Members with identified Habilitation service needed and PAS need will select a Molina contracted HAB/PAS provider.
  - Must use a single provider for HAB and PAS services
  - Single authorization will utilize the CFC blended HAB codes/ modifiers and rate

# CFC Authorizations

- HAB Only:
  - Members with Habilitation service needed but no PAS need will select a Molina contracted HAB provider.
  - Authorization will utilized the CFC blended HAB codes/modifiers and rate
- Non-CFC PAS and ERS:
  - Continue to use existing LTSS codes/modifiers and rates

# CFC: Billing Requirements



# Billing Requirements: HAB

- Place of Service Codes: 12
- Procedure Codes: T2021 (STAR+PLUS)
- Taxonomy Codes: 251C00000X
- Units: 1 unit = 1 hour
- EVV timesheets submitted through EVV Vendor System
- Appropriate CFC modifiers

# Billing Requirements: PAS

- Place of Service Codes: 12
- Procedure Codes: S5125 (STAR+PLUS)
- Units: 1 unit = 1 hour
- EVV timesheets submitted through EVV Vendor System
- Appropriate CFC modifiers

# Billing Requirement: ERS

- Place of Service Codes: 12
- Procedure Codes: S5161 (Installation/Testing: S5160)
- Taxonomy Codes: 333300000XX
- Units: 1 unit = 1 month
  - (1 unit per service for installation/testing)
- Appropriate CFC modifiers

# Billing Requirements: Rates

- If a provider bills less than the contracted amount, the claim will pay the lesser of.

- For a copy of the CFC rate packet, visit:

<https://www.hhsc.state.tx.us/Rad/rate-packets.shtml>

# CFC- Questions

