Community First Choice/Personal Assistance Services

Tribal monthly Medicaid teleconference
September 2018

Abby Holm, CFC program manager
Programs Managed by the Community Services Bureau

- Personal Assistance Services (State Plan)
  - Self-Directed and Agency Based
- Community First Choice (State Plan)
  - Self-Directed and Agency Based
- Home Health (State Plan)
- Hospice (State Plan)
- Big Sky Waiver (Waiver)
Personal Assistance Services (PAS) and Community First Choice (CFC)

Medically necessary in-home services provided to consumers whose acute or chronic health problems cause them to have functional limitations in performing activities of daily living.
Community First Choice (CFC)

- Program start date July 2014
- Personal Assistance Services PLUS+
  - Expanded service options
  - Person Centered Planning Framework
  - Coordinated care with Home and Community Based (HCBS) waiver
- 95% of consumers receive CFC
Service Delivery Options

- **Agency Based Model**
  - Traditional model
  - Nurse Supervision
  - Agency trains and schedules attendants

- **Self-direct model**
  - Agency provides oversight and pays attendants
  - Consumer responsible for hiring, training and scheduling attendants
PAS/CFC: FY 17

- Program Expenditures: Over 45 million dollars
- Over 3,000 consumers served every year
- Average of 12-17 hours of service authorized per week
- 55% of members select self-direct option
| **Activities of Daily Living (ADLs)** | **Bathing, dressing, grooming, toileting, transferring, positioning, mobility, meal preparation, eating, exercise, medication assistance. Medicaid member must have ADL needs to qualify for the program.** |
|**Incidental Activities of Daily Living (IADLs)** | **Light housekeeping, laundry, shopping. IADL services are limited, depending on the ADL needs.** |
| **Medical Escort** | **For Medicaid members who need assistance en route or at the destination of medical appointments** |
Self Directed Health Maintenance Activities

- Self-Directed Service Options
  - Four skilled activities exempt from nurse practice act
  - Consumer trains and directs services; with health care approval
    - Wound Care
    - Bowel Care
    - Urinary System Management
    - Medication Administration
Members who meet **level of care (LOC) criteria** qualify for CFC and may be eligible for additional services if medically appropriate:

- Personal Emergency Response System (PERS)
- Community integration
- Yard hazard removal
- Correspondence assistance

Everyone **approved for PAS** is automatically reviewed for CFC.
<table>
<thead>
<tr>
<th>State Plan</th>
<th>Restrictions</th>
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<td>PAS/CFC is a “State Plan,” entitlement Medicaid Program.</td>
<td>Because it is a state plan program, there are a number of restrictions as to what can be authorized/provided.</td>
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**Hands-On Care**

Hands-on care is the focus.

**Medicaid Member**

Current Medicaid eligibility is required before a referral can be taken.
PAS/CFC Referral

Make a referral

Call a local agency or call Mountain-Pacific toll-free at 1-800-268-1145.

Member home visit

Mountain-Pacific nurse travels to Medicaid member’s home for onsite assessment of member’s needs and authorize medically necessary care.

Nurse sends authorization

The nurse’s authorization is sent to agency of member’s choice.

Questions?

If questions or concerns, please call Mountain-Pacific Medicaid Services Navigator at (406) 457-5849.
Service Limits

- Bathing limit – 3 times a week

- Total Time:
  - 84 total hours for two weeks – PAS
  - Medical Escort may exceed this limit

- IADL tasks-
  - Cannot exceed 1/3 of total time or exceed the following for a two week time period or six (6) hours, whichever is greater
CFC/PAS Service Setting

- Person who lives in assisted living, nursing home, hospital and group home not eligible for CFC/PAS
- Services must be delivered in the member’s home
  - Exceptions:
    - Shopping
    - Medical Appointments
    - Walking outside around the home for exercise
    - Community Integration
CFC/PAS Medicaid Providers

- There are 40+ CFC/PAS providers in the state
  - Provider agency may provide only agency-based or self-direct option
  - Provider agency may provide both options
  - Providers select county/reservation to cover or statewide
  - Many CFC/PAS providers also provide Big Sky and SDMI waiver services
Who is excluded from being paid under the CFC/PAS program?

- Parent of a minor child (less than 18 years of age)
- Legally involved representatives, including husband and wife
- Personal Representative (PR) acting on behalf of member in the self-directed program

Note: A guardian can be paid
PAS and CFC Provider Enrollment

- Provider must complete Medicaid application
  - Montana Medicaid Website - https://medicaidprovider.mt.gov/
- Provide verification of worker’s compensation coverage, unemployment insurance, liability insurance and automobile insurance to the CFC program manager
- Attend certification training
  - CFC 101 and Person Centered Planning
- On-Site Verification
CFC/PAS Billing and Reimbursement

- Fees published on the Medicaid Provider website and noticed through the administrative rule process
  - https://medicaidprovider.mt.gov/12#186732869-fee-schedules--community-first-choice

- PAS and CFC providers bill for direct service in 15 minute increments
  - I unit=15 minutes

- Service rate includes all agency costs; including administrative costs, staffing, planning and coordination
CFC/PAS and Big Sky Waiver Billing

- Paula Soll
- 406-444-4142
- psoll@mt.gov
CFC Council

- CFC Council comprised of advocates for people with disabilities and the elderly and CFC members
- Advise the Department of Public Health and Human Services
- Open Positions
  - Contact Abby Holm
  - Contact info on last slide
Medicaid Home Health

Intermittent and part-time skilled nursing or therapy services:
- Skilled nursing
- Physical, Speech and Occupational therapy
- Home Health Aides
- Specialized Equipment
- Prior authorization required, conducted by MPQH
  1-800-219-7035 or fax (800) 413-3890
Medicaid Hospice

Palliative care program for recipients with terminal illness;

- Must be certified by a physician to have a life expectancy of less than 6 months
- A member selects hospice and waives all Medicaid benefits related to curative care
- May be concurrently enrolled in other programs (PAS, Waiver, etc)
- May receive hospice in a nursing facility
Questions

CFC/PAS:
Email: abholm@mt.gov
Phone: 406-444-4564

Hospice and Home Health:
Email: mbrown2@mt.gov
Phone: 406-444-6064