## South Carolina Department of Health and Human Services Medical Care Advisory Committee Item for Committee Advisement

PREPARED BY: Kara Lewis and George Maky

**PRESENTED BY:** Pete Liggett, Ph.D.

## **DATE:** August 28, 2013

**SUBJECT:** Amendments to the following Home and Community-Based Waiver programs: Intellectually Disabled/Related Disabilities (ID/RD) (formerly known as the Mental Retardation/Related Disabilities (MR/RD)); Head and Spinal Cord Injury (HASCI); Pervasive Developmental Disability (PDD), and Community Supports (CS).

The State is planning the following amendments:

- Add the waiver case management (WCM) service to the ID/RD, HASCI and CS programs, and amend the PDD program to incorporate the same service definition (PDD has a different version of case management);
- Update the quality assurance sections for the WCM service, and as needed;
- Update all applicable waiver applications to remove the term "mentally retarded" and replace with "intellectually disabled" in keeping with Federal and State law; and
- Update the Adult Day Health Care definition in the ID/RD waiver to remove the medical complexity requirement.

**OBJECTIVE:** To receive Federal approval for these waiver amendments.

**BACKGROUND:** The State has utilized the state plan Targeted Case Management service for participants in three (3) of the above waiver programs, and PDD offered a version of case management. Related to the clarification of Medicaid TCM policies, the State will implement one waiver case management service to ensure waiver requirements are addressed appropriately for all four (4) of these waivers.

**BUDGETARY IMPACT:** There is no intent to take Medicaid funding from direct service delivery, but rather to ensure it is appropriately and effectively directed to the performance of approved Medicaid case management activities.

## **EXPECTED OUTCOMES:**

- Consistent service definition across these four (4) waiver programs;
- Increased frequency of contact and monitoring of waiver services and participants who are some of Medicaid's highest cost beneficiaries. New service will require:
  - Monthly contacts; and

- Minimum of quarterly face to face visits, with a minimum of two (2) face to face visits with the participant in their residence;

## **EXTERNAL GROUPS AFFECTED:**

• Waiver participants; Rev. 8/03

- County Disability and Special Needs Boards and private providers of waiver case management services;
- SCDDSN;

**RECOMMENDATION:** Proceed with submitting waiver amendments to CMS.

**EFFECTIVE DATE:** The State anticipates requesting waiver amendments with effective dates of February 2014 or upon CMS approval.