



# **Division of Developmental Disabilities (DDD)**

## **Supports Program Provider Overview**

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# Today's Speakers

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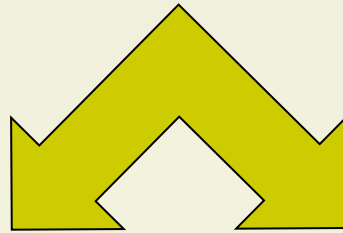
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# DDD's New Vision

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- ❑ Children's Services – Realignment
- ❑ Transition Planning Services (16-21)
- ❑ Medicaid Services



Community Care  
Waiver (CCW)

Supports  
Program



# Supports Program Background

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- ❑ Major DDD initiative included in the Comprehensive Medicaid Waiver (CMW)
- ❑ CMW approved by CMS on October 1st
  - ❑ Statewide reform – strategic plan for change
  - ❑ Community-based vs. institutional services
  - ❑ Allows NJ to draw down increased federal funds



# Supports Program Background

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- ❑ Basic Waiver Assurances
  - ❑ Administrative Authority
  - ❑ Level of Care
  - ❑ Qualified Providers
  - ❑ Service Plan
  - ❑ Health & Welfare
  - ❑ Financial Accountability



# Supports Program Highlights

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- ❑ Services/supports for individuals living in their own homes or with their families
- ❑ Provides Individualized Budgets (based on assessed level of need)
  - ❑ Employment/Day services
  - ❑ Individual & family support services (\$5,000, \$10,000, \$15,000)
  - ❑ Administrative



# Supports Program Benefits

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## CURRENT

- ❑ State-Only Funding
- ❑ Contract Reimbursement
- ❑ Limited Service Options
- ❑ Limited Support Budgets
- ❑ Limited Flexibility
- ❑ Slots/Referrals
- ❑ Waiting Lists

## THE SUPPORTS PROGRAM

- ❑ Federal Match – Medicaid Eligible
- ❑ Fee-For-Service
- ❑ Expanded Service Options
- ❑ Expanded Support Budgets
- ❑ Increased Flexibility
- ❑ Individual Choice
- ❑ Access to Services



# Supports Program Benefits

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## CURRENT

- ❑ Multiple Assessments
- ❑ Multiple Service Plans
- ❑ Inconsistent Policies
- ❑ Multiple Rates
- ❑ Case Manager

## THE SUPPORTS PROGRAM

- ❑ Single Assessment Tool
- ❑ Single Service Plan
- ❑ Consistent Policies
- ❑ Consistent Rates
- ❑ Support Coordinator & Waiver Assurance Coordinator (WAC)





# Supports Program Eligibility

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- ❑ 21 years old & completed educational entitlement
- ❑ DDD eligible
  - ❑ Resident of New Jersey
  - ❑ Functional criteria – DD
- ❑ Medicaid eligibility (continually maintained)
- ❑ Live in an unlicensed setting
- ❑ Cannot be enrolled on both CCW & SP



# Enrollment Process

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- ❑ Determination of Eligibility
- ❑ Completed Assessment
- ❑ Assigned Budget Level
- ❑ Signed Participation Agreement



# Accessing Services

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- ❑ Assigned a Support Coordinator (SC)
- ❑ Develop Individualized Service Plan (ISP)
  - ❑ Based on person-centered planning process
  - ❑ Written by SC
  - ❑ Services must be based on assessed needs
- ❑ Waiver Assurance Coordinator approves the ISP and authorizes services
- ❑ Provider Selection and Delivery of Services



# Services - Available

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- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Assistive Technology         | <input type="checkbox"/> Financial Management Services (FI) | <input type="checkbox"/> Respite                              |
| <input type="checkbox"/> Behavioral Management        | <input type="checkbox"/> Goods & Services                   | <input type="checkbox"/> Speech, Language and Hearing Therapy |
| <input type="checkbox"/> Career Planning              | <input type="checkbox"/> Interpreter Services               | <input type="checkbox"/> Support Coordination                 |
| <input type="checkbox"/> Cognitive Rehabilitation     | <input type="checkbox"/> Natural Supports Training          | <input type="checkbox"/> Supported Employment – Individual    |
| <input type="checkbox"/> Community Based Supports     | <input type="checkbox"/> Occupational Therapy               | <input type="checkbox"/> Supported Employment – Small Group   |
| <input type="checkbox"/> Community Inclusion Services | <input type="checkbox"/> Personal Emergency Response System | <input type="checkbox"/> Supports Brokerage                   |
| <input type="checkbox"/> Day Habilitation             | <input type="checkbox"/> Physical Therapy                   | <input type="checkbox"/> Transportation                       |
| <input type="checkbox"/> Environmental Modifications  | <input type="checkbox"/> Prevocational Training             | <input type="checkbox"/> Vehicle Modifications                |



# Services – Highlights

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- ❑ Expanded employment service options
- ❑ Focus on “Employment First”
  - ❑ Raises expectations
  - ❑ Presumes that all people with disabilities can and should work in their communities
  - ❑ Benefits & day services supplement employment



# Employment Services

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- ❑ Supported Employment – Individual
- ❑ Supported Employment – Small Group
- ❑ Career Planning
- ❑ Prevocational Training



# Other Services - Highlights

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- ❑ Day Habilitation
- ❑ Community Based Supports
- ❑ Community Inclusion
- ❑ Goods & Services
- ❑ Transportation
- ❑ Fiscal Intermediary



# Provider Qualifications

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- ❑ Providers will need to meet qualifications and be approved to provide each service they plan to offer
- ❑ Qualifications include but are not limited to meeting standards/regulations, staff training, licensing/certification, education & experience
- ❑ Provider/stakeholder input needed - 12/5





# Approved Providers

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- ❑ All providers must meet the qualifications for each service as defined by DDD
- ❑ Providers must also be approved Medicaid providers with the following exceptions:
  - ❑ “Non-Traditional” providers (YMCA, DCA Licensed Employment Agencies, etc.),
  - ❑ “Self-Hires”
  - ❑ Certain services (environmental modifications, vehicle modifications, etc.)



# Fee For Service (FFS)

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- ❑ FFS is a complete transformation of DDD's current contracting and payment model (cost reimbursement)
- ❑ Contract shift:
  - ❑ Current – contract between DDD and Provider for “slots” or level of service
  - ❑ Future – agreement between Provider and Medicaid to be paid for services authorized and delivered with DDD providing quality assurance and oversight



# Fee for Service (FFS)

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- ❑ Payment shift:
  - ❑ Current – payment during last week of the month for anticipated upcoming month of service, cost reconciliation after
  - ❑ Future – service authorized, service delivered, service claimed, claim paid at a standard, statewide rate (eliminates the vacancy issue)



# Fee for Service – Rate Study

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- ❑ National rate setting firm
- ❑ Uniform rates will be established across the Department
- ❑ Will include the following:
  - ❑ Provider workgroup
  - ❑ Multiple opportunities for provider input
  - ❑ A readiness study of both the Division and the provider community
  - ❑ Assistance with implementation - tools, training, formal guidance



# Medicaid Claims Processing

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- ❑ For claims to be processed by Medicaid (through Molina):
  - ❑ Claim must be submitted by an approved Medicaid provider
  - ❑ The participant must be Medicaid eligible
  - ❑ The participant must be enrolled in the Supports Program
  - ❑ The authorized service must be identified within the approved ISP
  - ❑ A prior authorization must be in place for the specific service to be delivered and claimed
  - ❑ Eligible and authorized services will be paid at a statewide, standard rates established by a formal rate study



# Medicaid Processing Timelines

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- ❑ Accurate claims submitted electronically are typically processed within 7-10 business days
- ❑ In select instances, paper claims are allowed but take up to 3 times longer to process
- ❑ All payments to providers are made by electronic funds transfer (except in the case of a bank routing or account number change)



# Provider Deliverables

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- ❑ Fiscal/Administrative
  - ❑ Documentation that each unit of service has been provided
  - ❑ Cost data
  - ❑ Proof of fiscal stability
- ❑ Program
  - ❑ Ongoing documentation that DDD standards/requirements are being met
  - ❑ Outcomes/progress data (linked to ISP)



# Preparation – Things to Do Now

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- ❑ Apply for National Provider Identification (NPI) #
- ❑ Assist individuals in becoming Medicaid eligible
- ❑ Assess business model (staffing, overhead, G&A, office space, vehicles, collaboration with other providers, etc.) and adapt as needed
- ❑ Assess fiscal model (internal service/program cost analysis, cash flow, working capital, fiscal staffing, etc.) and adapt as needed





# Preparation – Things to Do Now

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- ❑ Develop marketing tools
- ❑ Investigate electronic claims software that interfaces with Medicaid/Molina
  - ❑ [www.njmmis.com](http://www.njmmis.com) – on the left menu, go to “Approved Vendors” for billing vendors, software vendors, combined vendors
- ❑ Arrange/Attend training provided by Medicaid/Molina
- ❑ Review services to identify those that you are interested in and areas of your current business that won't be covered – and plan accordingly



# Supports Program Roll Out

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- ❑ Initial provider enrollment
  - ❑ “Traditional” providers – 1/13–4/13
  - ❑ “Non-Traditional” providers – 3/13–5/13
- ❑ Support Coordinator training – 2/13–6/13
- ❑ Target - grads Medicaid eligibility – 2/1/13
- ❑ Fiscal Intermediary established – 3/1/13
- ❑ Support Coordination begins – 4/13



# Supports Program Roll Out

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- ❑ Priority rates set – 4/13
- ❑ Rates implemented – 6/13
- ❑ Enrollment begins with 2013 grads – 6/13
- ❑ FFS conversion begins
  - ❑ Phase 1 – Employment/Day & Individual/Family Support – 6/13
  - ❑ Phase 2 – Residential – TBD



# Additional Info Sessions

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- ❑ Support Coordination – 11/27 & 12/4
- ❑ Supports Program Provider Overview-TBD
- ❑ Medicaid and Molina will provide individual or group training



# We need your input!

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- ❑ Provider Qualifications (Deadline 12/5)
- ❑ Individualized Service Plan (Deadline 12/21)
- ❑ Quality Plan (Deadline TBD)
- ❑ Rate Study (Between 11/12-3/13 tentatively)
- ❑ Supports Program Policy Manual (1/13)
- ❑ Development of Provider Training, TA, & Related Materials (Spring 2013)



# Don't Forget!

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- ❑ Information is continuously updated
  - ❑ Visit the SP page of the DDD website at [www.state.nj.us/humanservices/ddd/programs/supportsprgm.html](http://www.state.nj.us/humanservices/ddd/programs/supportsprgm.html)
  - ❑ Watch for updates and new information
- ❑ Deadlines for input
- ❑ Questions?  
[DDD.SuppProgHelpDesk@dhs.state.nj.us](mailto:DDD.SuppProgHelpDesk@dhs.state.nj.us)



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# QUESTIONS???