

Supportive Housing Provider Executive Leadership Meeting

Division of Mental Health & Addiction Services

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Valerie L Mielke, DMHAS Assistant Director

Susanne Rainier, DMHAS Chief of Contracts

Meeting Agenda

- **Historical context for Community Support Services program development**
- **Centralization of Housing and Services**
- **Financing Community Support Services**
- **System's Preparation for Change**
- **Questions/Comments**

Pathways to Service Development and Implementation

- Governor's Mental Health Task Force – 2005
- Wellness and Recovery – 2006
 - Wellness and Recovery Transformation Action Plan - 2008
- NJ Olmstead Agreement – 2009
- Strategic Planning – 2013
- Readiness Assessment – 2013

Pathways – Governor's Mental Health Taskforce

- Governor's Task Force on Mental Health (2005)¹
 - Recommendation 1: Promote a System Based on Wellness and Recovery
 - Recommendation 2: Adopt the Medicaid Rehabilitation Option
 - Recommendation 6: Psychiatric Advanced Directives and Consumer-Centered Treatment Planning
 - Supportive Services for Permanent Supportive Housing

¹www.state.nj.us/humanservices/dmhas/initiatives/wellness/Governor_TF_final_report_2005.pdf

Pathways – Wellness and Recovery, Olmstead

- Olmstead Settlement Agreement
 - Secure Medicaid funding to implement Olmstead, aligned with Olmstead principles

Federal Framework – Olmstead

- US Department of Justice
- US Centers for Medicaid and Medicare Services
- US Department of Housing and Urban Development

Federal Framework - Olmstead, Community Integration

- Community Integration is: The USDOJ defines an integrated setting as “a setting that enables individuals with disabilities to interact with non-disabled persons to the fullest extent possible.” It is more than discharging individuals from a state psychiatric hospital or preventing hospitalization, it includes how individuals live in mainstream society. USDOJ http://www.ada.gov/olmstead/q&a_olmstead.htm.
- Choice: Individuals have the opportunity to make meaningful and informed choices in all aspects of their lives including where they live, what services they receive, who they live with, where they work, recreational activities they participate in, etc... In order to have meaningful choice individuals must have access to accurate information about resources and services available.
<http://www.bazelon.org/portals/o/ADA/7.30.13%20Key%20Principles%20-%20Community%20Integration%20for%20People%20with%20Disabilities.pdf>

Federal Framework - Department of Justice

- Olmstead Enforcement includes violations of the ADA in the following areas across the US (not all inclusive list):
 - Sheltered workshops and facility-based day programs
 - State's failure to provide services that foster independence and enable individuals to live full lives in the community
 - Unnecessary institutionalization in psychiatric hospitals
 - Segregation of individuals in large adult care homes
 - Unnecessary confinement in nursing homes

Federal Framework - Centers for Medicaid and Medicare Services

- Home and Community-Based Services rule (CSS is currently not subject to the provisions of rule however principles in rule may expand into other FFP opportunities). Requirements in rule:
 - ❖ Must be provided in integrated setting
 - ❖ Consumer choice in setting
 - ❖ Consumer choice in provider
 - ❖ Consumer's right to privacy, dignity and respect
 - ❖ Consumer must have autonomy and choice in making life choices
 - ❖ Lease-based housing

<http://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/home-and-community-based-services/downloads/hcbs-setting-fact-sheet.pdf>

Federal Framework – Housing and Urban Development

- Frank Melville Supportive Housing Investment Act of 2010 represents HUD reform of the Section 811 program. Characteristics of Section 811 includes:
 - ❖ Application must be submitted by state housing finance agency in partnership with state's Medicaid office and health and human services office
 - ❖ It is a project-based rental assistance program
 - ❖ Requires the following characteristics in the program – demonstration of consumers living fully integrated lives in the community, consumers have choice of service and housing is not contingent of services, there's an emphasis on personal autonomy and choice for consumers, housing is lease-based.

Centralization of Housing

- DHS Office of Housing (OOH)
 - DHS has centralized the management and oversight of DDD housing and DMHAS supportive housing
 - OOH is led by Janel Winter. Cathy Boland and Alisa Robinson moved from DMHAS to OOH
- Funding for and management of the DMHAS Housing subsidies will move to housing clearinghouse known as Supportive Housing Connection (SHC) operated by the NJ Housing Mortgage and Finance Agency
- Funding for and management of subsidies of subsidies will move from provider contract to SHC in a phased fashion
- Template to be distributed to providers that will provide SHC with information necessary to administer subsidies
- More specific information about how information will flow between SHC, OOH and provider agency is forthcoming.

NJ Housing Mortgage and Finance Agency - Supportive Housing Connection

Presentation by Katherine Nosker and
Robert Huether



Funding – Medicaid & DMHAS

State Contracts

- Prior authorization of services (every six months) based on submission of Individualized Recovery Plan (IRP)
 - First 60 days post enrollment does not require prior authorization
 - State dollars will need to remain within contract ceiling
 - Specifics pertaining to prior authorization will be provided in future meeting specific to billing
- Medicaid billing based on face-to-face contact

Funding – Medicaid & DMHAS

State Contracts

- Medicaid Funding
 - Individuals enrolled in the following cannot receive CSS
 - PACT
 - Residential Services (10:37A)
 - ICMS
 - Can't bill CSS while individual is in partial care program (during the day)

Funding – Medicaid & DMHAS

State Contracts

- National Provider Identifier # - all staff will complete by September 1
- Time Study
 - Will identify volume of services each consumer receives
 - Will identify activity level by type of activity provided by each staff person
- Following rule promulgation
 - Agency licensure
 - Non-Medicaid provider applies to become Medicaid Provider
 - Assignment of Specialty Provider Code
 - Phase-in of prior authorizations for consumers already living in supportive housing



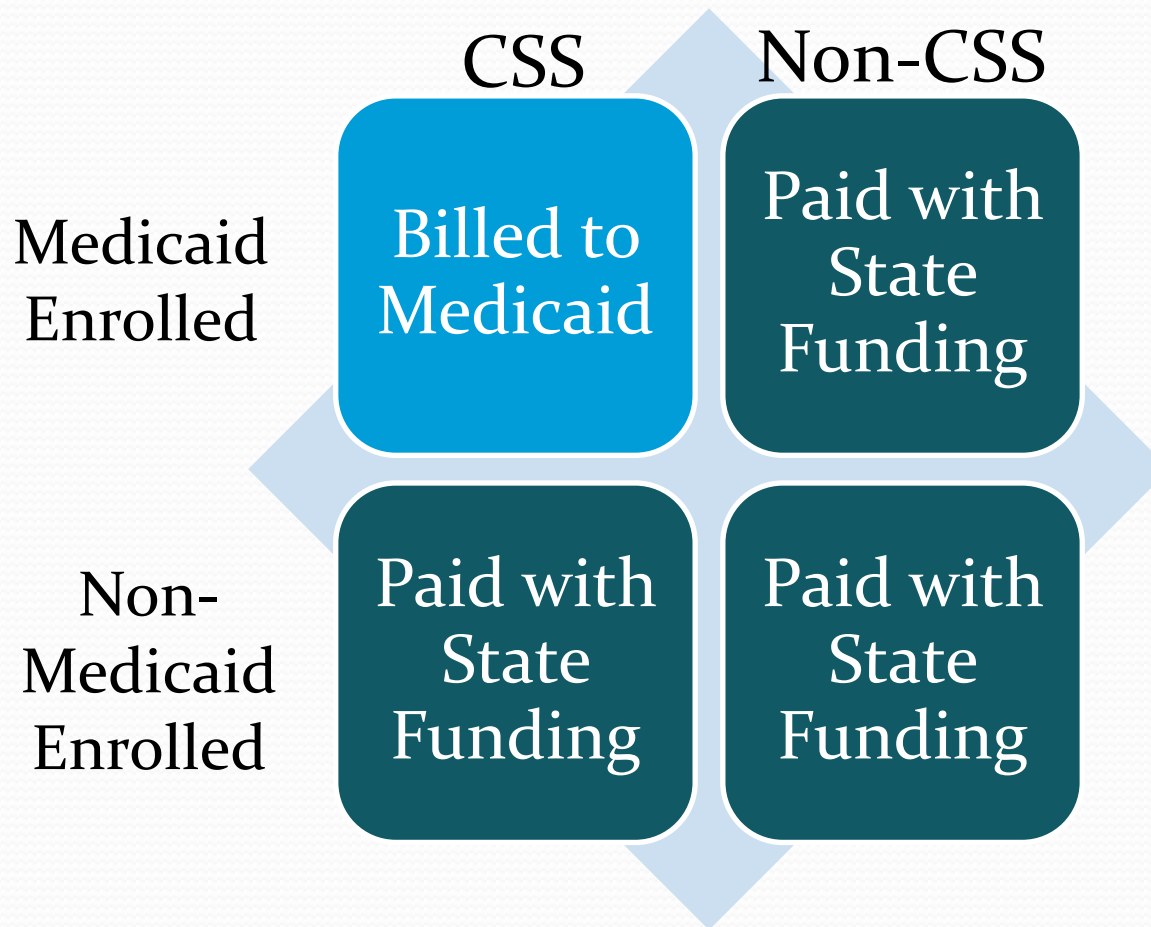
Funding – Medicaid & DMHAS

State Contracts

- DMHAS contract for state funding (of services provided to individuals living in SH) will continue to be deficit funded
- Reduce contract ceiling based on anticipated revenue
- Contracts will be clustered until revenues stabilize
- Annex A will need to be revised to a CSS Annex A

Funding – Medicaid & DMHAS

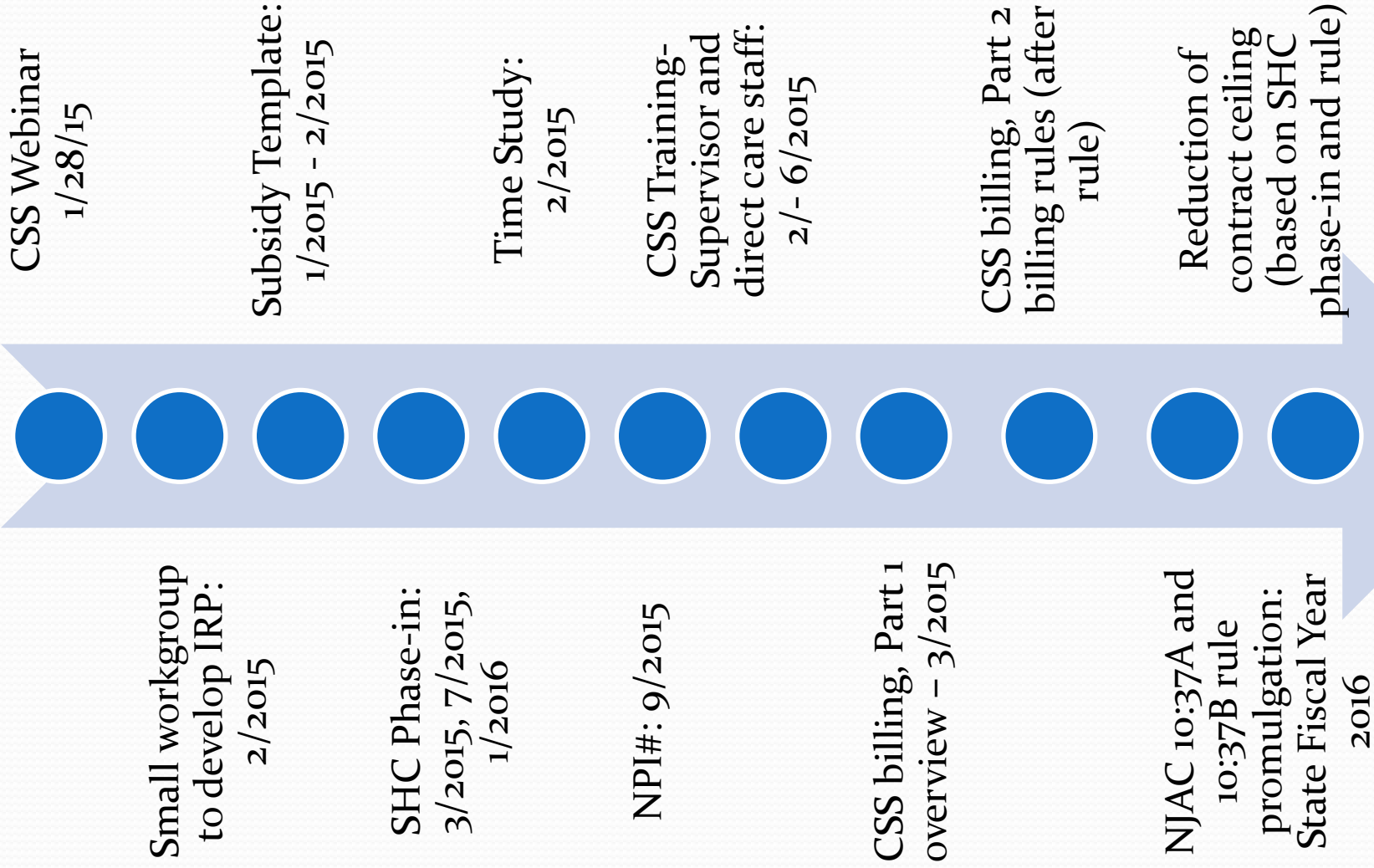
State Contracts



System Preparation for Change

- Training
 - Current workforce – services, documentation and supervision
 - Medicaid billing
- Agency assessment and analysis
- Rate study/determination
- Town hall on regulations
- CSS Webinar
- Development of IRP for prior authorization

Timelines





State Plan Amendment

- What is the State Plan?
 - Agreement between State and Federal government describing the State's administration of the Medicaid program. It ensures that the state will comply with federal rules.
 - Identifies persons to be served, services to be provided, individuals eligible to provide the service, methodologies for providers to be reimbursed.
- What is a State Plan Amendment (SPA)?
 - Describes changes to program policies, operational approaches, corrections, or updates to the State's Plan
 - Process – states submit proposed change to CMS for review and approval

State Plan Amendments

- There are three primary categories of SPAs
 - Clinic (mandatory for states and includes office based treatment)
 - Targeted Case Management – Limited in scope, primarily a referral and linkage service
 - Rehabilitation – Includes PACT, mobile and site-based services, peer support and illness management. Work is often completed in teams with a wide range of individuals working under the supervision of a licensed professional

Community Support Services (CSS) SPA

- Consistent with recommendations of the GMHTF, W&R Transformation Action Plan, NJ Olmstead Agreement, Recommendations from Strategic Planning Sessions, US Americans with Disabilities Act – Olmstead Decision
- Consistent with Federal Guidance, laws, decisions and policy
- Basis of NJAC 10:37B
 - Initial roll-out limited to SH
- Identifies the services reimbursed, staffing roles and responsibilities by credential

SPA may be viewed at:

www.state.nj.us/humanservices/dmahs/info/state_plan/Attachment3_Services_including_Scope_and_Limitations.pdf Page 151



Questions?