

# **Statewide Waiver Individual Cost Neutrality Cap**

## Frequently Asked Questions

### Persons Supported and Families

#### **What is an individual cost neutrality cap?**

The individual cost neutrality cap means that for each individual person enrolled in the Statewide waiver, the total cost of that person's services cannot be more than the average annual cost of services in a private Intermediate Care Facility for Individuals with Intellectual and Developmental Disabilities (ICF/IID) in Tennessee. Each person's services in the Statewide waiver will be "capped" (or limited) to that amount.

#### **Does the cap apply to everyone enrolled in the Statewide waiver?**

DIDD will identify people currently enrolled in the Statewide waiver who are receiving services in excess of the new individual cost cap. These people will move to the new Comprehensive Aggregate Cap or CAC waiver (formerly called the Arlington waiver). This will allow those people to continue receiving the same services that they received in the Statewide waiver.

Their services will not be reduced.

The new cap will apply to everyone who remains enrolled in the Statewide waiver. It will also apply to all new people who enroll in the Statewide waiver.

#### **When does the cap start?**

For people already enrolled in the Statewide waiver who remain enrolled in the Statewide waiver, the individual cost neutrality cap will go into effect 30 days after the State sends a notice to each person, advising them of the new cap. We expect those notices to be mailed around mid-April.

For new people enrolling in the Statewide waiver, the cap is effective immediately.

#### **Why is there an individual cost neutrality cap?**

The cap is being implemented in order to serve more people in a more cost-effective manner.

#### **How much is the cap and how was the amount determined?**

The cap for 2015 is \$153,416.80 and is based on the average annual cost of services in private Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs/IID). This amount is determined by the State Comptroller's Office.

#### **Is the cap based on waiver year or Individual Support Plan (ISP) year?**

The cap will be applied on both the waiver (or calendar) year and ISP year. The total paid waiver services cannot go over the cap in either year for a person supported.

### **Is the amount of the individual cost neutrality cap the same every year?**

No. The cap amount will change every year based on the new average cost of private ICF/IID services in Tennessee. That amount is set by the State Comptroller's Office. Your Independent Support Coordinator (ISC) will tell you the new amount every year.

### **How much do my services cost?**

Your Independent Support Coordinator (ISC) can provide information about how much the services in your ISP cost.

### **Will my services change with a cap?**

The cap has been thoughtfully planned to cause no disruption in the services people are currently receiving. Your current services should not be impacted by the cap.

### **What happens if my needs change?**

Your ISC will help you look at other ways to meet your needs. We expect we can work together with people to find creative solutions that will continue to meet your needs in the community with the services available within the cap.

### **Can I go over my cap for any reason?**

No. There are no exceptions to the cap.

### **If my services exceed the cap, how do I appeal the decision?**

If you are currently enrolled in the Statewide waiver and your services already exceed the cap prior to 3/27/15, you will be transitioned to the CAC waiver so you can continue to receive your current services. If you remain in the Statewide waiver and your circumstances change, your ISC will help you look at other ways to meet your needs within the cap.

Plans submitted with costs that go over the cap will not be accepted. If an ISP (or services in the ISP) is denied because services would result in the cap being exceeded, a notice will be issued to the person. The notice will explain the reason for the denial and the right to file an appeal.

A fair hearing will be granted if there is a dispute regarding whether the cost of services in the ISP has been accurately calculated. A fair hearing will not be granted just because someone wants or believes they need services which exceed the cap. Under the terms of the approved waiver, services that exceed the individual cost cap are not covered.

### **What are my alternatives if I can't safely be supported under the cap?**

We believe most people can be safely supported under the cap. However, if your needs can not be safely met in the community, you won't be able to stay in the Statewide waiver anymore. We will help you look for other programs and services that might work better for you. You will not be able to transition to the CAC waiver.

## **Will medical residential services and intensive behavioral residential services (IBRS) be available to people in the Statewide waiver?**

Yes, these benefits continue to be covered in the Statewide waiver. We will be working with providers to make them available within the cost cap.

Medical residential services in a 4-person home can be reimbursed within the cap.

Intensive behavioral residential services can also be provided within the cap in a manner consistent with the intent of the service, i.e., a short-term treatment model with the goal of helping the person transition to a more integrated setting. IBRS is not an indefinite, long term, residential support service. A person in the Statewide waiver could receive IBRS as needed to help address facilitate transition to a more integrated setting. With the implementation of the new TennCare Behavioral Crisis Prevention, Intervention and Stabilization Service for individuals with intellectual or developmental disabilities, we believe we will be able to put together a package of supports that will allow individuals enrolled in the Statewide waiver who have significant behavioral challenges to be safely supported in the community.

## **Will the person supported need a new ISP?**

No. Persons will not need a new ISP. This includes people transferring from the Statewide Waiver into the CAC Waiver.

## **Who do I call for more information?**

The TennCare Solutions line can assist at 1-800-878-3192. In addition, the DIDD Regional Offices are also available to help answer questions.

## **Why is vision being eliminated in the Arlington/CAC waiver?**

This will help to align benefits in the CAC and Statewide waivers. Very few people have used the adult vision benefit that has been covered in the Arlington waiver. Since very few people have used the vision benefit in the Arlington waiver, we do not anticipate significant impact.

## **Can a person private pay a portion of their services to stay under the cost neutrality cap?**

Yes. Services above the cap are not covered under the waiver. If a person and/or their family members choose to purchase these non-covered services privately from a provider, this has no impact on the individual cost neutrality cap. Waiver services paid for by TennCare are the only services that will impact the individual cost neutrality cap.