

To: Managed Care Organizations for Employment and Community First CHOICES
Department of Intellectual and Developmental Disabilities

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Subject: **Additional Guidance on Medical Necessity and Enrollment Criteria Applicable to Employment and Community First CHOICES Program**

This memo provides additional guidance and expectations on enrollment and medical necessity criteria applicable to the Employment and Community First (ECF) CHOICES program. Please direct all questions to Lisa Mills: lisa.mills@tn.gov or 629-207-1112.

Medical Necessity Criteria for ECF CHOICES Program

Per TennCare rules, all individuals with disabilities enrolled in ECF CHOICES have been assessed as either requiring a level of care and services that would otherwise make them eligible for institutional placement, or being at risk of institutional placement absent the care and services available through the program. Further consistent with TennCare rules, all enrollees in ECF CHOICES must have a need for **ongoing** Home and Community-Based Services in order to meet the medical necessity criteria for participation in ECF CHOICES. A need for **ongoing** Home and Community-Based Services (HCBS) is present if the ECF CHOICES member needs at least two (2) **ongoing** HCBS. Per TennCare rules, ongoing ECF CHOICES HCBS available in the ECF CHOICES program include specified services which are delivered on a regular and ongoing basis, generally one or more times each week, or in the case of community-based residential alternatives on a continuous basis, or which may be one component of a continuum of services intended to achieve employment, and include:

Supportive Home Care, Family Caregiver Stipend in lieu of Supportive Home Care, Independent Living Skills Training, Community Integration Support Services, Personal Assistance, Community Transportation, Community Living Supports (CLS), Community Living Supports Family Model (CLS-FM), Exploration, Discovery, Benefits Counseling, Situational Observation and Assessment, Job Development or Self-Employment Plan, Job Development or Self-Employment Start Up, Job Coaching (including Competitive, Integrated Employment and Self-Employment), Supported Employment – Small Group, Co-worker Supports, Career Advancement, and Integrated Employment Path Services (Time Limited Pre-Vocational Training).

Other services available through the ECF CHOICES program that are not considered to be **ongoing** Home and Community-Based Services are considered **one-time** Home and Community-Based Services. These include specified services other than employment services and supports which occur as a distinct

event or which may be episodic in nature (occurring at less frequent irregular intervals or on an as needed basis for a limited duration of time), as follows:

Conservatorship and Alternatives to Conservatorship Counseling and Assistance, Minor Home Modifications, Individual Education and Training Services, Specialized Consultation and Training, Adult Dental Services, Community Support Development, Organization and Navigation, Family Caregiver Education and Training, Assistive Technology, Adaptive Equipment and Supplies, Peer-to-Peer Support and Navigation for Person Centered Planning, Self-Direction, Integrated Employment/Self Employment, and Independent Community Living, Respite, Family-to-Family Support, and Health Insurance Counseling/Forms Assistance.

Therefore, a person seeking enrollment into ECF CHOICES or a member already enrolled would not meet the medical necessity criteria for the program if either of the following is true:

1. The member only needs and/or wishes to receive one type of **ongoing** Home and Community-Based Service; or
2. The member does not need and/or wish to receive any ongoing Home and Community-based Service and only needs and/or wishes to receive one or more types of **one-time** HCBS.

However, if a member has Community Living Supports (CLS) in his/her plan, the member shall be considered to meet the medical necessity requirement for the ECF CHOICES program. It is recognized that CLS services provide a range of ongoing supports within a single service category. Further, if a member has at least two ongoing Home and Community-Based Services in his/her signed and current Person-Centered Support Plan (PCSP), but may be receiving only one type of ongoing Home and Community-Based Service (e.g. because an additional employment service will commence after TN VR services are no longer available), the member shall be considered to meet the above requirement for medical necessity.

Important Next Steps for TennCare and Managed Care Organizations

At this time, Managed Care Organizations (MCOs) are instructed **not** to disenroll any ECF CHOICES members who have only one type of ongoing Home and Community-Based Services in their signed and current PCSP. TennCare is initiating a comprehensive review of members in this situation in order to understand the circumstances involved. TennCare will update this guidance accordingly once this comprehensive review has been completed. While this comprehensive review is underway, and until TennCare issues additional guidance on this topic at a future date, no member should be disenrolled because s/he has only one type of ongoing Home and Community-Based Services in their signed and

current PCSP. Additionally, until further notice, if an MCO works with a new enrollee to develop a Person-Centered Support Plan and that plan does not have at least two ongoing Home and Community-Based Services included, the MCO should contact TennCare via email to Lisa Mills (lisa.mills@tn.gov) with a summary of the situation, including securely emailing the Person Centered Support Plan.

MCOs should note that they are strongly encouraged to reengage members, who do not have more than one ongoing Home and Community-Based service in their PCSP, in the person-centered planning process. This should be done to ensure that all of the member's preferences, goals and needs are fully identified, along with the services that can address these preferences, goals and needs. MCOs must ensure the planning process addresses all domains in the PCSP and includes consideration of how ECF CHOICES services can expand the member's opportunities and experiences, including those related to community involvement, employment and increasing independence.

Enrollment Criteria for ECF CHOICES Program

Under existing TennCare rules, enrollment into—and continued enrollment in—any ECF CHOICES group requires a determination that the individual can be **both** safely and appropriately served. After a person is enrolled in the program, transitions are permitted if it is determined the person cannot be **both** safely and appropriately served in the group in which they are enrolled such that transition to a different group where the individual can be both safely and appropriately served is needed.

Per TennCare rules, with regard to the expectation that the individual can be **both** safely and appropriately served in the group in which they are enrolled, it is essential that the member's Managed Care Organization (MCO) determines and confirms that the member can be **both** safely and appropriately served. Ensuring a member can be **both** safely and appropriately served means ensuring, that in addition to all health and safety needs being met, the member is able to receive all services necessary to meet the member's needs and goals, in an adequate amount necessary to sufficiently address those needs and goals.

Per TennCare rules, a member may not be enrolled in a particular ECF CHOICES group, even if the member or his/her legal representative prefers this group, if the MCO cannot confirm and document that the member's needs can be **both** safely and appropriately met.

Where initial enrollment is done by the Department of Intellectual and Developmental Disabilities (DIDD), the MCO is responsible for determining the member can be **both** safely and appropriately

served as part of the initial comprehensive assessment done within the first thirty (30) days of enrollment. If the MCO determines that the member cannot be **both** safely and appropriately served in the ECF CHOICES group in which the member was enrolled, the MCO must prepare and submit a transition request to TennCare to facilitate the member's transition to an ECF CHOICES group where the member can be **both** safely and appropriately served.