

Front Porch Chat: CAP Services

January 16, 2025



Today's Discussion Topics

- Options Counseling for CAP Waitlisted Applicants
- Upcoming Consumer Direction Initial Trainings
- CAP/DA Renewed Waiver Services
- Question & Answer

Today's Presenters:
Sarah Kelly, CAP/DA Program Manager
Patricia Hill, CAP/DA Lead, NC Medicaid, LTSS



Housekeeping

- Today's Presentation will be 30 minutes
- Q&A 15 minutes at the end of the presentation
 - This portion of the webinar is for beneficiary questions
 - Questions can be entered in the Q&A chat
- There will be a post-presentation survey directly following this presentation
- A recording of today's presentation and the PowerPoint will be posted on NCLIFTSS Website hosted by Acentra Health.



CAP/DA Options Counseling

CAP/DA Options Counseling provided by the NCLIFTSS consists of:

- 1. Support and information on Medicaid and other service for individuals on the CAP/DA waitlist.
- 2. Counseling on Medicaid eligibility and alternative service such as PCS, PACE, and managed care.
- 3. Referring and linking individuals to other available services.
 - -The objective of CAP Options Counseling is to help individuals, and their families understand available services and supports, connect them with resources in their communities, and assist them in making informed choices about their care.



CAP/DA Options Counseling

How waitlist applicants are kept informed:

- Letters are mailed.
 - Letter 1: Initial informs the applicant their service request was received and approved, but they must wait until a slot in their area is available.
 - ➤ Letter 2, is sent 90 days after Letter 1 to inform the applicant of the ongoing wait time and provide information about Options Counseling.
 - > Each 90 days the applicant is on waitlist; a letter is mailed to inform of the ongoing wait time.
- Each letter will provide contact numbers on community resources.
- Letter 2 will offer Option Counseling services to the waitlist applicant.
 - ➤ NCLIFTSS will call the applicant by telephone to have a one-on-one chat on their needs to assist the applicant with choices of other Medicaid or community services.
 - > NCLIFTSS will refer an applicant to services of their choice when referral requirements are met.



Goals of CAP/DA Options Counseling

- Help applicants learn about available services that can meet their needs
- Connect applicants to services to reduce increased health risks
- Provide person-centered one-on-one support
- Act as advocates to ensure the health and well-being of applicants
- Assist in maintaining community placements for applicants



CAP/DA Options Counseling

Types of referrals that may be offered during one-on-one person-centered counseling:

- Program for All-Inclusive Care for the Elderly (PACE)
- Personal Care Services (PCS)
- Care management or other supportive services for those enrolled in Managed Care
- Other Medicaid, non-Medicaid services, and Home and Community Base Services to address health-related conditions.
 - ➤ Department of Social Services
 - Division of Aging
 - > NCCARE360
 - Food Resources
 - Transportation Resources
 - ➤ Housing Resources



Consumer Direction

- Each year, a refresher consumer direction training is required.
- The training can be completed anytime by the CAP/C and CAP/DA participant or their legally responsible party and EOR.
- The refresher training must be completed within each CNR period. A timeline for completion is not told, but best planning is at least 3-6 months before your CNR is due or 3 months after your CNR is completed.
- To learn more about the first-time training, please visit NCLIFTSS.Acentra.com and search Consumer Direction to see the full list of monthly training courses.
- Information about refresher training can be found on the NCLIFTSS and NC Medicaid CAP/C and CAP/DA webpages. (The refresher training is in progress and not currently on those websites.
 Training schedule will be available by February.)



CAP/DA Renewal Waiver

The Centers for Medicare & Medicaid Services (CMS) has approved the CAP/DA renewal waiver. The approval period is Nov. 1, 2024, through Oct. 31, 2029.

New services and expanded service utilization limits:

- CAP In-home Aide II Service (new)
- Modification, equipment, and technology (home/vehicle modification and assistive technology): Increased budget limit from \$13,000 to \$28,000 over the approved waiver period. (expanded utilization limit)
- Personal emergency response services (PERS): Increased monthly budget limit from \$30.77 to \$41.66 (expanded utilization limit)

Key Changes in the Renewed Waiver:

- Expansion of Level II critical Incidents: Now includes falls and missed services.
- Annual Service Plan Evaluation: Waiver participants and their teams will evaluate service plan suitability during the annual assessment to see if changes are needed. (effective date November 1, 2025)

Plan of Care Guidance

Plans of Care (POCs) created on or after Nov. 1, 2024, are entitled to the new services and budget limits and must comply
with the updated processes and procedures outlined in the renewed CAP/DA waiver. The approved waiver application.

Implementation Timeline

Jan. 1, 2025 – Mar. 31, 2025



Questions & Answers





