



Coalition Of Provider Associations

Representing More Than 250 Provider Agencies in New York State

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Provider Association Meeting Minutes – August 20, 2018

1. **CCO Update.** Voluntary enrollment in Medicaid managed care will be available early next year, but will exclude OPWDD services. Three CCOs have indicated that they will be "early adopters" and offer this option. OPWDD will be releasing a draft proposal this month for OPWDD provider-led managed care plans. A CCO implementation issue has arisen regarding the number of individuals who are eligible for Tier 4 (with a ratio of 1 to 20). While all Willowbrook class members are automatically in Tier 4, there are about 7,000 individuals who meet Tier 4 eligibility and there are questions regarding movement to and from Tier 4 and how to meet ratio requirements. The deadline for converting individuals to the Life Plan has been extended to October 31, 2018. The CHOICES website is now able to accept CCO enrollments.
2. **Staff Action Plans.** Trainings will be offered shortly on development of the Staff Action Plan in conjunction with the Life Plan. Preliminary dates of training to be announced by OPWDD are 8/30 and 9/10. CMS has approved the Medicaid State Plan Amendment (SPA) that permits the start of Health Homes for individuals with I/DD as part of the implementation of care coordination. This amendment also included final approval of the transition to 1115 Waiver, changes advancing NYC base year for rate setting and changes for transportation reimbursement for agencies that contract for transportation. OPWDD also recognized difficulties with the MediSked portal; they are still in the "building mode."
3. **Time Spent in CAS Assessment.** OPWDD has clarified that time spent by a program participant in a CAS assessment while the individual is attending a day program or other time-based program would count for time spent in the day program or other time-based activity.
4. **Workgroup Recommendations.** OPWDD is still reviewing recommendations of the Workgroups, but has made permanent the Article 16 Clinic workgroup to address reimbursement and other issues. The Commissioner has promised a report on the recommendations from the Workgroups including financial impacts at the September Provider Association meeting.
5. **EVV and Telehealth.** A federal amendment was signed into law postponing EVV implementation until January 1, 2020. OPWDD has removed regulatory barriers to providing telehealth services in Article 16 clinics.
6. **Employment.** 2018 Workforce DSP Comparative Survey was released last week. OPWDD is looking to reengage NYS DOL to create a DSP occupational code, providing an opportunity for NYS to have access to information/data about DSPs in a Standard Occupational Code (SOC) format.

7. **Certified Residential Opportunities (CRO)**. OPWDD, under Abiba Kindo, will be forming a workgroup to explore efficiencies and suggest improvements. Evidently, problems have arisen in the downstate regions with addressing waiting lists.
8. **Community First Choice Option**. Beginning January 1, 2019, second phase of CFCO will start and OPWDD-type services will be included. Community Habilitation, assistive technology, and vehicle and environmental modifications will now become State Plan services and will no longer be included under the waiver. However, this change will not affect individuals in self-direction with budget authority. To be eligible for CFCO, individuals must reside in their own or a family home and must be eligible for fee-for-service Medicaid without any exceptions (e.g., children whose parental income is excluded from eligibility calculations are not eligible for CFCO). Waiver enrollment will not be required provided the person is eligible for ICF level of care. Current Community Habilitation providers will be eligible to provide these services. Effective January 1, 2019, these same services will be carved into mainstream Medicaid managed care. There are currently about 3,800 individuals who are enrolled in the waiver, enrolled in mainstream Medicaid managed care and receiving Community Habilitation who will be affected by this change. Effective 1/1/19, these services will be paid for by the managed care plan and providers will have to enter into a provider agreement. 200 agencies are currently serving at least one person enrolled in Medicaid managed care. We will monitor the change as reimbursement rates, especially for Community Habilitation, must support the current levels providers receive. More to come here.
9. **Children's Waiver Update**. Effective April 1, 2018, there will be one comprehensive waiver for children. Their services will move from the existing waiver to provide a broader array of services with choices of Managed Care Plans. Currently, there are under 400 children who have I/DD and are medically frail under the current Care-At-Home Waiver.
10. **Provider Performance Update**. OPWDD is developing Provider Survey and Certification Profiles to be posted on the OPWDD website. A workgroup with provider and family participation has been working for over three years. See attached slides. Primary activity is collecting data on 242 data points. The goal is to build workforce champions in each region and have engaged 81% of all OPWDD voluntary providers. First stage is posting of provider's overall compliance trends in 2019 and then in 2020 full profiles of provider regulatory compliance.
11. **Rates Update**. DOH is still reviewing July 1, 2018 rates and budget neutrality factors with DOB. Rate summaries were posted on OPA on August 6, 2018, and providers should review. For fiscal year filers, the turn-around window for OPWDD to base the new rates for 2019/2020 will be tight. Timely submission of CFRs is essential. Donna Cater at DOH also stated she will review the requests for property back up information providers have been asking for and as we requested.