



# **PNMI Statewide Stakeholder Forum**

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**October 18, 2011**

**<http://maine.gov/dhhs/oms/provider/pnmi.html>**

# Agenda

- Welcome – Bonnie Smith 9:00 – 9:05
- Overview – Pam Easton 9:05 – 9:10
- Options, Issues and Intersection with Olmstead – Robin Cooper 9:10 – 10:30
- Maine PNMI Services – Patty Dushuttle 10:30 – 10:50
- Federal Authority – Patty Dushuttle 10:50 – 10:55
- State Plan Amendments – Patty Dushuttle 10:55 – 11:05
- CMS Communications and Concerns – Patty Dushuttle 11:05 – 11:20

# Agenda, Cont.

- IMD Survey – Patty Dushuttle 11:20-11:30
- Maine’s Limitations / Things to Consider – Pam Easton 11:30-11:40
- Questions & Answers / Next Steps – Pam Easton 11:40-12:00



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# Welcome



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# Overview



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# **Options, Issues and Intersection with Olmstead**

**Private Non-Medical Institution (PNMI) Services are residential treatment services funded by MaineCare. They:**

- Are operated by agencies or facilities
- Are licensed by Maine DHHS
- Provide rehabilitative treatment to four or more residents
- Provide food, shelter, and personal care services
- Require Prior Authorization or assessment
- Render treatment that is medically necessary

# Where are PNMI Services Described?

- MaineCare Benefits Manual, Section 97, Chapter II (Coverage)
- Chapter III (Reimbursement)
  - Appendix B: Substance Abuse Facilities
  - Appendix C: Case Mix Facilities
  - Appendix D: Child Care Facilities
  - Appendix E: Community Residences for Persons With Mental Illness
  - Appendix F: Non-Case Mixed Medical and Remedial Facilities

# Appendix B: Substance Abuse Facilities

- Programs Overseen by DHHS OSA
- Provide varying levels of substance abuse treatment in residential setting
- Clinical treatment overseen by a treatment team
- Residents must be assessed using American Society of Addiction Medicine, ASAM, Patient Criteria
- Also provide personal care services, supervision, monitoring of health and safety
- Services are reimbursed with a standardized per diem rate

# (Cont.) Appendix B: Substance Abuse Facilities

## Number of members served in these facilities?

• Adolescent Residential	26
• Consumer Run Residential	14
• Detox	18
• Extended Care	52
• Halfway House	97
• Residential Rehab	57
• Shelter	<u>38</u>

TOTAL: 302

*Approximate Numbers as of August, 2011*

# Appendix C: Case Mix Facilities

- Overseen by DHHS Office of Elder Services
- Services Provided Include:
  - Personal Care Services
  - Supervision
  - Medication Administration
  - Nursing
  - Rehabilitation
  - Coordination of other medical services
  - Room and Board (not MaineCare funds)
- Services are reimbursed with a per diem capitated rate adjusted for case mix (acuity) of residents

# (Cont.) Appendix C: Case Mix Facilities

- Residents must be assessed with the Medical Eligibility Determination (MED) tool
- Must meet specific medical eligibility
- Number of members served in these facilities?  
4,291 individuals

# Appendix D: Child Care Facilities

- Overseen by DHHS Office of Child and Family Services
- Licensed by DHHS
- Provides:
  - Behavioral Health services
  - Medication Administration
  - Rehabilitation
  - Crisis Intervention
  - Personal Care Services
  - Supervision
- Require Prior Authorization and Assessment
- Services reimbursed through a standardized per diem rate

# (Cont.) Appendix D: Child Care Facilities

## Number of members served in these facilities?

General Residential	299
Infant Mental Health	47
Treatment Foster Care	<u>350</u>
TOTAL: 696	

*Numbers Approximate as of August 2011*

# Appendix E

## Community Residences for Adults with Mental Illness



- Overseen by DHHS Office of Adult Mental Health Services
- Licensed by DHHS
- Services must be Prior Authorized
- Assessment with LOCUS tool required
- Must show Severe and Persistent Mental Illness and a need for residential care
- Services reimbursed through a standardized per diem rate

# Appendix E

## Community Residences for Adults with Mental Illness

### What services are provided?

- Counseling
- Medication Administration, monitoring
- Rehabilitation Services
- Personal Care Services
- Monitoring of Safety

### Number of members served in these facilities?

608 Members

*Numbers Approximate as of August, 2011*

# Appendix F: Non-Case Mixed Medical and Remedial Services



- Overseen by DHHS- Office of Elder Services and Office of Adults with Cognitive and Physical Disabilities
- Licensed by DHHS
- Require Prior Authorization
- Require Assessment
- Services reimbursed through a per diem rate

# Appendix F: Non-Case Mixed Medical and Remedial

## What services are delivered?

- Habilitation
- Personal Care Services
- Monitoring for Safety
- Medication Administration

## Number of members served in these facilities?

– Brain Injury	125
– Elder Services	44
– Intellectual Disability	<u>210</u>

TOTAL: 379

*Numbers Approximate as of August 2011*

- Maine's State Plan
  - » Coverage of PNMI
    - Personal Care Services
    - Rehabilitative Services
  - » Reimbursement of PNMI
    - Payment is made under contracts based on capitation rates

- Preparation for MIHMS- Necessitated approximately 10 State Plan Amendments. PNMI services were included on several of those pages.
- State plans submitted September 2010
- Informal Requests for Additional Information Issued – December 2010
- Formal Requests for Additional Information Issued - April 2011
- Conference calls with CMS - Ongoing

## Reimbursement Concerns

- Bundled Rates/Documentation of Services
- Excessive Rates (Not based on the cost of providing services)
- Payments to Non-Qualified Providers
- Reimbursement to IMDs
- Potential Room and Board Costs
- Non-Risk Contract Provisions Required (Managed Care Waiver)
- Reimbursement for supervision or monitoring for safety are not reimbursable in this setting.

- **Service Concerns:**

- Consumer Choice of Providers (for each component, and not tied to housing)
- Comparability of Services to those in the community (Based on functional need, not residential setting)
  - Rehabilitative Services
  - Personal Care Services
- Comparability of Qualified Providers (to those in community)
- Duplication of services (ie, Personal Care, Targeted Case Management)

## Residential Setting Concerns

- Services intended to be community based provided in “institutional or facility based settings
- IMD setting?
- Olmstead provisions

- IMD letter\* (*CMS letter dated August 9, 2011*)
- DHHS staff had several calls with CMS to get more clarification on IMD letter, and was directed to CMS State Medicaid Manual, Section 4390\* for more detail.

\* Posted on OMS website: <http://maine.gov/dhhs/oms/provider/pnmi.html>

- **Communications to PNMI Providers Sent on September 1, 2011**
  - Reimbursement Changes Letter\*
  - IMD Summary\*
  - Copy of CMS Letter\*
- \* Posted on OMS website: <http://maine.gov/dhhs/oms/provider/pnmi.html>

# DHHS Response to IMD letter

- DHHS Staff Developed Survey from Medicaid Manual Questions
- Assessment Worksheet\*

\* Posted on OMS website: <http://maine.gov/dhhs/oms/provider/pnmi.html>

# IMD Telephone Calls

- DHHS staff made calls starting September 7, 2011 to all MaineCare enrolled PNMI providers to complete the Assessment Worksheet
- DHHS Staff spoke with a total of 155 agencies about 472 separate PNMI sites/programs
- Analysis Continues- Summary of Details will be posted on website soon

# IMD Assessment

## 152 Agencies Contacted at 472 Sites

<u>Agencies</u>	<u>Sites</u>		
89	221 Sites	-	<50% mental illness
38	135 Sites	-	Adults 50% or more with mental illness
25	116 Sites	-	Children 50% or more with mental illness

# Maine's Limitations and Things to Consider

- Need to keep within current state resources
- Must comply with Federal and Maine regulations

# Next Steps – Regional Forums

In November, DHHS will host six PNMI Provider “Work Sessions” which will provide the opportunity for more interactive discussions and brainstorming which will help guide this initiative.

November 7	Augusta
November 8	Presque Isle
November 9	Bangor
November 10	Rockland
November 17	Lewiston
November 18	Biddeford

Times and locations, including a registration page, will be available on our PNMI web page this week.

# Guiding Principles

The following are our Guiding Principles throughout this initiative:

- Consumer focused
- Recognition that the current model is not sustainable
- No additional State dollars
- Compliance with all State Federal statutes
- Assurance of quality services (value based purchasing)
- Commitment to serve the most vulnerable/neediest of the eligible population
- Least restrictive setting (Olmstead)
- Minimized disruption to people's lives and essential services
- Recognition of the importance and value of collaboration with this transition

# Questions and Answers



Any questions?

# Thank you!

***Please visit our PNMI website for materials from today and to keep up to date:***

**<http://maine.gov/dhhs/oms/provider/pnmi.html>**

**Additional questions or comments?**

**Contact Pamela Easton at [pamela.easton@maine.gov](mailto:pamela.easton@maine.gov)**