

North Carolina Medicaid Special Bulletin



An Information Service of the
Division of Medical Assistance

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December 2014

Attention:

**Community Alternative Programs for Children (CAP/C)
and Disabled Adults (CAP/DA) Providers**

**Provider Request for a CAP/DA Local
Lead Agency in Alleghany County**

*Providers are responsible for informing their billing agency of information in this bulletin.
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The Community Alternatives Program for Disabled Adults (CAP/DA) is a Medicaid Home and Community-Based Services (HCBS) Waiver authorized under § 1915(c) of the Social Security Act, found in 42 CFR440.180. Federal regulations for HCBS waivers may be found in 42 CFR Part 441 Subpart G.

The CAP/DA program waives certain N.C. Medicaid requirements to furnish an array of home and community-based services to **adults with disabilities 18 years of age and older** who are at risk of institutionalization. The services are designed to provide an alternative to institutionalization for beneficiaries in this target population who prefer to remain in their primary private residences, and would be at risk of institutionalization without these services.

The Division of Medical Assistance (DMA) appoints a local lead agency to be responsible for the day-to-day case management functions for eligible CAP/DA beneficiaries. Case management functions include:

- a. Assessing
- b. Care planning
- c. Referral and linkage
- d. Monitoring and follow-up

DMA is seeking a qualified lead agency for **Alleghany County**. Eligible providers may include health departments, departments of social services, home care agencies licensed by Division of Health Services Regulations (DHSR) under 10A NCAC 13J, agencies serving the aging, and private HCBS providers.

Alleghany County is approved to serve 67 CAP/DA participants per year. Currently, 49 active participants are being served.

The selected agency must be **currently enrolled as a Medicaid provider and approved to provide services under In-Home Services and Supports**. The agency must be capable of providing case management by both nursing and social work staff. The agency must also meet the below criteria:

- a. Demonstrated experience with disabled and aging populations
- b. Demonstrated experience in-home and community care case management
- c. Demonstrated capacity for web-based automation
- d. Demonstrated experienced staff to assure case mix and caseload management
- e. Demonstrated fiscal soundness, on-hand and reserve resources

The selected agency must be able to:

- a. Process a service request to determine basis eligibility criteria for waiver participation
- b. Complete comprehensive assessments to ascertain medical, psychosocial and functional needs for waiver participation
- c. Coordinate and collaborate using an interdisciplinary team approach for the provision of waiver services that prevent institutionalization
- d. Develop a person-centered service plans that identifies the amount, duration and frequency of each service and the responsible party to render the service
- e. Provide monthly monitoring of the service plan with the beneficiary, and quarterly monitoring of the service plan with all approved services providers

Provider Qualifications:

- a. Enrolled Medicaid provider
- b. Two or more years of experience in case management and HCBS
- c. Direct community connection to Alleghany County

All prospective agencies must meet all other requirements set forth in NCDHHS 1915(c) Community Alternatives Program for Disabled Adults HCBS Waiver. Information about the CAP/DA program is located on DMA's CAP/DA web page at www.ncdhhs.gov/dma/services/capda.htm.

Interested providers must send to the DMA's CAP Manager the following documents for consideration:

- a. Letter of Interest
- b. Current Operation Manual
- c. Case Management and HCBS experience
- d. Resume of all personnel

The deadline to receive the required information is December 17, 2014.

Mail the required information to:

CAP Manager
2501 Mail Service Center
Raleigh, NC 27699-2501

**Home and Community Care Section
Community Alternative Program for Disabled Adults
DMA, 919-855-4360**

Electronic claims must be transmitted and completed by 5:00 p.m. on the cut-off date to be included in the next checkwrite. Any claims transmitted after 5:00 p.m. will be processed on the second checkwrite following the transmission date.

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