

CHANGE NOTICE FOR MANUAL NO. 11-05, CAP

DATE: DECEMBER 10, 2004

Manual: Family and Children's Medicaid

Change No: 11-05

To: County Directors of Social Services

Effective: January 1, 2005

I. BACKGROUND

During the past few years Division of Medical Assistance (DMA) staff participated on a committee called the Consumer Directed Care Workgroup. Staff from the Divisions of Aging, Mental Health, and consumers and other stakeholders also participated. The committee discussed a new initiative, "consumer-directed care". As a result of this committee's work and Department request, the Division of Medical Assistance submitted a waiver, known as CAP/Choice, to the Centers for Medicare and Medicaid Services (CMS). DMA received approval for the CAP/Choice waiver last winter.

Request For Proposals (RFPs) were sent out and lead agencies in Duplin and Cabarrus counties were selected to pilot this waiver for the next six to nine months. These two counties will not receive additional CAP slots or monies for CAP/Choice. The county's slots and monies for CAP/DA are to be used for CAP/Choice also.

II. CONTENT OF CHANGE

A. MA-3260, Community Alternatives Program, has been updated to include the CAP/CHOICE PROGRAM.

1. CAP/Choice is a new program that allows Medicaid recipients flexibility to arrange for their care and the purchase of non-traditional goods and services that will increase their independence. The recipients are not required to go through a Home Care Agency for personal care services. They can choose to hire whomever they desire, including a family member.
 - a. Use the same eligibility requirements for CAP/Choice as for CAP/DA. Refer to MA-2280, Community Alternatives Programs Medicaid Eligibility
 - b. No services can be provided under CAP/Choice until January.

- c. Two new CAP Choice EIS indicator codes have been established. These codes are applicable only for Duplin and Cabarrus counties and have been added to the EIS Manual Sections 3101 and 4000. The new codes will not be able to be keyed until January 3, 2005.

ID, Intermediate Directed Care (CAP/Choice ICF Level of care).

SD, Skilled Directed Care (CAP/Choice SNF Level of care).

- d. For current CAP/DA program participants moving into the CAP/Choice program, change the current CAP/DA code to the new CAP/Choice code per EIS instructions in EIS Manual Section 3101.

- 2. Use the DSS-8108, Notice of Benefits, to notify the a/r of CAP eligibility for approval and open/shut cases. Use the DSS-8109, Your Application for Benefits is being Denied or Withdrawn, for denied or withdrawn CAP cases.

3. CAP hearings

- a. For appeals (FL-2/MR-2 issues) on level of care, the client first appeals to the DMA Hearing Office at 2501 Mail Service Center (MSC), Raleigh, North Carolina 27699-2501. Further appeal will go to the Office of Administrative Hearings (OAH).
- b. For appeals regarding denial of CAP services, termination of CAP services, or reduction in CAP services, hold a local hearing at the county dss. If further appeal is required, hold a state appeal through the Division of Social Services Hearing and Appeals. See MA-3430, Notice and Hearings Process.
- c. For appeals on CAP/AIDS request any appeals to the AIDS Care Unit.

B. MA-3230, Eligibility of Individuals Under 21, has been updated to reference MA-3425, Certification and Authorization, for the correct certification and authorization periods for a Title IV-E child.

C. MA-3425, Certification and Authorization, has been changed to reflect the correct certification periods for Non-SSI and SSI CAP cases.

II. EFFECTIVE DATE AND IMPLEMENTATION

This change is effective January 1, 2005. Apply this change to re-determinations started and applications taken on or after January 1, 2005.

III. MAINTENANCE OF THE MANUAL

A. MA-3260, Community Alternatives Program

Remove: Pages 1-6

Insert: Pages 1-7, effective January 1, 2005.

B. MA-3230, Eligibility of Individuals Under 21

Remove: Pages 17 and 18

Insert: Pages 17 and 18, effective January 1, 2005.

C. MA-3425, Certification and Authorization

Remove: Pages 1-7

Insert: Pages 1-7, effective January 1, 2005.

If you have any questions, please contact your Medicaid Program Representative.

Gary H. Fuquay
Director

(This material was researched and prepared by Renee Carlton-Pettiford and Susan Ryan, Policy Consultants, Medicaid Eligibility Unit).