

CHANGE NOTICE FOR MANUAL NO. 23-08, COMMUNITY ALTERNATIVE PROGRAM (CAP) MEDICAID ELIGIBILITY

DATE: OCTOBER 30, 2008

Manual: Aged, Blind, and Disabled Medicaid

Change No: 23-08

To: County Directors of Social Services

Effective: November 1, 2008

I. BACKGROUND

A. CAP MR/DD

The existing CAP MR/DD program waiver for persons with mental retardation and/or developmental disabilities expires October 31, 2008. The 2007 General Assembly enacted legislation requiring the Department of Health and Human Services, Division of Medical Assistance, to develop a tiered waiver system. The state legislature has directed that a series of tiered waivers be implemented with a set cost per tier. The Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMH-DD-SAS) plans to implement two new waivers with a set cost per waiver on November 1, 2008 to replace the existing CAP MR/DD waiver.

The CAP MR/DD tiered waivers are utilized statewide with the exception of counties participating in the Piedmont Innovations Waiver. The counties are Cabarrus, Davidson, Rowan, Stanley and Union.

The decision on which waiver an individual is assigned will be based on the cost of care for an individual per year. Services will be limited, per individual, to a set maximum dollar amount.

The two waivers are the Supports Waiver and the Comprehensive Waiver. **The Supports waiver indicator code is C2. The Comprehensive Waiver code is CM**, which is presently used for all CAP MR/DD cases.

B. Money Follows the Person

The Division of Medical Assistance received a demonstration grant to institute the Money Follows the Person Program (MFP). MFP is intended to transition individuals from institutions who want to live in the community, and provide quality programs and services that are person-centered, appropriate and needs based in both home and community-based settings.

In order to be eligible, MFP applicants must meet all the eligibility criteria for enrollment in CAP/Choice, CAP/DA, CAP-MR/DD or the Program for All-Inclusive Care for the Elderly (PACE) in addition to criteria unique to the MFP Program. Potential MFP recipients will be identified by a regional Transition Coordinator, who will work closely with the facilities, the recipient, the families and the county dss. The Transition Coordinator coordinates with the county dss to ensure that the individual will remain Medicaid eligible when transitioned into MFP. MFP includes coverage of all CAP services plus some additional services. MFP is available statewide with the exception that those who reside in the five counties served by the Piedmont Innovations Waiver will not be eligible.

II. CONTENT OF CHANGE

MA-2280.I.B.4.b. - CAP-MR/DD- explains the Supports Waiver and the Comprehensive Waiver are tiered waivers utilized by the CAP-MR/DD program. The assigned waiver is based on an a/r's yearly cost of care. Removed was the reference that all 100 counties participate. The Piedmont Innovations Waiver counties do not participate.

MA-2280.II.A.3. - General Policy Rules states that recipients who have Medicaid suspended for being incarcerated or in an Institute of Mental Disease are not eligible for CAP.

MA-2280.II.A.10.d.-Deductible Cases states for a medical expense to be considered toward a deductible, it must be included in the Medicaid column of the CAP Plan of Care Cost Summary and the Summary must be maintained in the eligibility record.

MA-2280.VII.A.3.,4.,and 5.-CAP-MR/DD Policy states that Line 11 of the MR-2 will indicate from which waiver, the Supports (C2) or the Comprehensive (CM) an a/r will be receiving services. The list of services for both waivers is included in this section.

MA-2280.VIII. Money Follow the Person has been included.

Figures 4a (FL-2) and **4b** (MR-2) have been added to the online manual.

III. EFFECTIVE DATE AND IMPLEMENTATION

This policy is effective November 1, 2008. Apply this change to applications taken and redeterminations started on or after November 1, 2008 as well as those presently in process.

IV. MAINTENANCE OF MANUAL

A. Remove: MA-2280, Community Alternative Program (CAP) pages 5- 26

B. Insert: [MA-2280](#), Community Alternative Program (CAP) pages 5-29

For information regarding Medicaid, please contact your Medicaid Program Representative. For any Medicaid issues that are not able to be handled through that venue, Angela Floyd, Assistant Director for Recipient and Provider Services, will be your point of contact and can be reached at (919) 855-4000.

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Acting Director

(This material was researched and written by Susan Castle, and William Appel, Policy Consultants, Medicaid Eligibility Unit).