

Home and Community-Based Medicaid Waiver Services

Traumatic Brain Injury Waiver Amendment
March 2020

NEBRASKA

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DEPT. OF HEALTH AND HUMAN SERVICES

Helping People Live Better Lives.

Governor Pete Ricketts

Vision:

Grow Nebraska

Mission:

Create opportunity through more effective, more efficient, and customer focused state government

Priorities:

- Efficiency and Effectiveness
- Customer Service
- Growth
- Public Safety
- Reduced Regulatory Burden

We Value:

- The Taxpayer
- Our Team
- Simplicity
- Transparency
- Accountability
- Integrity
- Respect

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Welcome!

Nebraska Medicaid is seeking stakeholder feedback on its Medicaid Waiver amendment being submitted to Center for Medicare and Medicaid Services (CMS).

- Today, we will share the proposed changes to the Traumatic Brain Injury Waiver amendment.
- Summaries of all proposed changes are included in the presentation.

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Traumatic Brain Injury Waiver Application

Overview

Location of Proposed Changes

- Participant Access and Eligibility (Appendix B)
- Financial Accountability (Appendix I)

Discussion- no impact identified

- Cost – Neutrality Demonstration (Appendix J)

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Participant Access and Eligibility

Proposed

- The new Medicaid eligibility group covered by Medicaid expansion, referred to as Heritage Health Adult, will be listed as a group that will qualify for the TBI waiver provided they meet all other eligibility criteria for the TBI waiver.
 - The definition of this group is described in 42 CFR 435.119

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Financial Accountability

Remove a duplicative performance measure that reviews claims compared to eligible participants.

Performance measure to be removed

- Number and percent of paid claims which were for participants enrolled in the waiver and eligible for such services. Numerator = Number of paid claims which were for participants enrolled in the waiver and eligible for such services. Denominator=Number of paid claims for the waiver.

Performance measure that will remain

- Number and percent of paid claims which were for services rendered for participants enrolled in the waiver and eligible for such services. Numerator=Number of paid claims which were for services rendered for participants enrolled in the waiver and eligible for such services. Denominator=Number of paid claims for the waiver.

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Financial Accountability

Rate rebasing

- CMS required the state to complete the process to rebase and revise the rate methodology and rates for the services provided under this waiver. This includes a review of the rate allowed for room and board, as well to separately identify medical transportation, and provider retainer payments.

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Financial Accountability

Review summary

- The state received the SFY 2019 cost report from the specialized assisted living facility provider. This informed the rebasing, as well as the analysis of the adequacy and reasonableness of the rate.

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Financial Accountability

Room and board

- The cost report from the provider listed a breakdown of the operating costs by line item which room and board funds.
- The analysis of the cost looked at the total cost of room and board divided by the number of inpatient days.
- The analysis determined the funds received per day covers the costs of the provider.

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Financial Accountability

Medical Transportation

- The cost report from the provider listed a breakdown of all the transportation costs.
- The analysis of the cost looked at the total cost of non-emergency medical transportation divided by the number of inpatient days.
- The analysis identified the cost per day per consumer as requested by CMS.

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Financial Accountability

Retainer Payments

- The Specialized Assisted Living Facility provider rate does not include amounts for provider retainer payments.
- Current billing rules allow for Assisted Living providers to bill Medicaid for up to 30 days while an individual is out of the Assisted Living facility.

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Cost – Neutrality Demonstration

Discussion

- The analysis of the rate methodology will allow the state to provide CMS with more details on the adequacy and reasonableness of the rate paid to the Specialized Assisted Living Facility provider.
- No significant changes were identified to the daily rate. The daily rate paid by Medicaid may slightly increase effective July 1, 2020 based on Legislative Appropriations.
- No changes to cost neutrality will be needed in this waiver amendment.

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Stakeholder Comments

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Medicaid and Long-Term Care

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Mail Comments

Attention HCBS Public Comments
DHHS Medicaid and Long-Term Care
P.O. Box 95026
Lincoln, NE 68509

View the Traumatic Brain Injury Waiver
<http://dhhs.ne.gov/Pages/Medicaid-Home-and-Community-Based-Programs.aspx>

Copies of the proposed TBI Waiver application
are available upon request.



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