

Kentucky Cabinet for Health and Family Services

Medicaid 1915(c) Waiver Assessment Project: Frequently Asked Questions (FAQs)



Last Updated: May 31, 2018

Kentucky 1915(c) Waiver Assessment FAQs

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The questions included in the Frequently Asked Questions (FAQs) document are a combination of submitted questions from stakeholders and questions developed by the Cabinet to clearly communicate the 1915(c) waiver assessment process and project status. Some questions submitted by stakeholders have been modified for clarity.

Please Note: This FAQ will be updated as additional information is available and as the Cabinet makes additional decisions. Questions posed specific to Navigant's recommendations and how they would be implemented will not be answered until Navigant has released its full, detailed recommendations report in July 2018, and the Cabinet makes decisions on which recommendations to move forward with.

We thank you for your patience as we fully consider Navigant's assessment findings and recommendations.

Stakeholder Engagement

Q1. What opportunities will there be for stakeholder engagement and input?

Prior activities:

To date, stakeholders of all kinds have provided their thoughts and ideas through several avenues, including focus groups held in the Fall of 2017, town halls held in the Spring of 2018, different advocacy group presentations, and through the Department for Medicaid Services (DMS) public comment email box.

Current and future activities:

- The **DMS public comment email box** (MedicaidPublicComment@ky.gov) will remain open so the public has an ongoing way to share thoughts and ideas. The public comment period to provide feedback specifically on Navigant's preliminary recommendations ends **June 15th, 2018**. The email box will remain open, but June 15th is the deadline for submitting any comments to be considered before Navigant finalizes its recommendations.
- Stakeholders will have the opportunity to participate in **stakeholder advisory panels** which will advise certain recommendations. The Cabinet expects to form panels this summer. If you are interested in being an advisory panel member, please let us know by sending your interest to MedicaidPublicComment@ky.gov.
- The Advisory Council for Medical Assistance (MAC), and its Technical Advisory Committees (TACs) will also be engaged. We also anticipate working with other existing state committees – including the H.B. 144 Commission, etc.

There will also be a mandatory 30-day formal public comment period when updated waiver applications or substantive amendments to the waiver applications are released, and another 30-day formal public comment period when state waiver regulations are released.

Q2: How has the Cabinet informed legislators of the project?

Briefings and updates on the 1915(c) waiver assessment are available to legislators upon request. DMS and Navigant provided a formal update to the Medicaid Advisory and Oversight Committee regarding our progress. The Cabinet welcomes future engagement of legislators and their staff, and is actively seeking ways to better educate and inform them on this project.

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Q3: What role does stakeholder input really have in the 1915(c) waiver assessment?

The Cabinet takes stakeholder input very seriously and has used all comments and input received to inform decision-making and design throughout the assessment process. The Cabinet made changes to its goals following focus group feedback, and has already made changes because of stakeholder input, including: revision of cumbersome processes within the FMAs who assist with PDS, expanded stakeholder engagement modalities, modified language in outgoing correspondences, and updated antiquated language on forms.

Q4: I testified during town halls – how will my testimony be used?

We thank everyone who gave public testimony during the town halls. The Cabinet has taken your testimony into consideration and will use it to inform our review of Navigant's preliminary recommendations and make decisions on any future changes. If you gave input specifically responding to the recommendations report, we have considered your suggestions and comments as part of our review of the report.

Q5: I emailed my comments to the public comment email box – who is reviewing them and how are they used?

The Cabinet welcomes public comment. The public comment email box is available 24/7, for those who may not be able to or comfortable sharing their thoughts in a public meeting. You can provide comments about any 1915(c) waiver related topic. All submissions to the public comment inbox are forwarded to Navigant, who reviews feedback, and catalogues the comment for tracking purposes.

DMS also reviews all comments and utilizes the input to help guide the decisions made within this process.

If your submission to the inbox is in specific response to Navigant's preliminary recommendations report and is received before June 15, 2018, the Cabinet will review your input as a part of decision-making. We thank you in advance for your thoughts and ideas and encourage stakeholders to share them with us.

Q6: I am a stakeholder. Who do I contact if I want to be more involved?

The Cabinet expects to form stakeholder advisory panels in the summer, and will be looking for different types of stakeholders, from all waivers, who live throughout the Commonwealth. If you are interested in being an advisory panel member, please let us know by sending your interest to MedicaidPublicComment@ky.gov. You are welcome to note which recommendations you are most interested in advising on.

Q7: How do I join a Technical Advisory Committee (TAC)?

Each TAC is governed by regulations that designate appointment positions for each TAC. To determine if there is an opening on a TAC, an individual would need to reach out to the chairperson of the TAC to discuss if they can be nominated. For information on the TACs, please visit <https://chfs.ky.gov/agencies/dms/tac/Pages/default.aspx>.

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Q8: How can I receive further updates and/or notification about any future meetings related to the 1915(c) assessment or waiver changes?

Please send your request to MedicaidPublicComment@ky.gov to be added to a list-serve. You do not have to attend a meeting to have your name added to this list.

Navigator's Phase One Assessment

Q9: What are the 1915(c) waiver assessment areas?

There are three (3) assessment areas:

- (1) **Stakeholder engagement** – which focused on obtaining stakeholders' thoughts, opinions and experiences with 1915(c) waivers
- (2) **Operational redesign** – which focused on assessing the way in which the Cabinet is organized and conducts waiver administration and oversight activities
- (3) **Waiver redesign** – which focused on reviewing existing 1915(c) waiver applications, regulations and other policies to understand how current programs are designed, and what strengths and weaknesses exist due to design.

Q10: How did the Cabinet and Navigator choose the assessment areas?

The Cabinet selected Navigator following a competitive procurement completed in April 2017 to assess the 1915(c) HCBS waiver programs. The procurement Navigator responded to required them to review program oversight and administration, quality of care and service delivery, and to improve provider and participant experience. Assessment areas were developed to obtain the necessary level of information to respond to the requests within the procurement.

Q11: Is the assessment being done in phases?

Navigator has recommended two phases:

- **Phase One** – started in April, 2017 would occur through the end of 2019. Navigator's preliminary recommendations following ***Phase One*** are included in Navigator's summary report of preliminary recommendations 1.1 through 1.10. Navigator and the Cabinet will need to assess the impact and improvements achieved as changes are implemented in 2019.
- **Phase Two** – Is anticipated to begin in 2020. During ***Phase Two***, Navigator will assist the Cabinet in assessing what waiver configuration is the best fit for the Commonwealth.

Q12: Will other assessment areas for waiver redesign be addressed?

If the Cabinet accepts Recommendation 1.11 of Navigator's final report, an additional assessment will be conducted regarding waiver configuration (i.e. the number of waivers, covered populations and service delivery).

Q13: What documents have been released regarding this process to date and where can I get a copy?

Documents that have released have been posted on the DMS website:

<https://chfs.ky.gov/agencies/dms/Pages/default.aspx>. On March 19th, 2018, the Cabinet

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released Navigant's Focus Group Report. This report notes the overarching themes heard at the focus groups that were completed in the fall of 2017. On April 20th, 2018, the Cabinet released Navigant's preliminary recommendations report. This report reviews the preliminary recommendations that Navigant suggests for improving Kentucky's 1915 (c) waivers. This FAQ and a recording of the presentation given at the town halls across the Commonwealth are posted as well.

Documents are also available in an alternative format by contacting the Cabinet at MedicaidPublicComment@ky.gov or by calling (502) 564-7540.

Q14: When is Navigant releasing their final recommendations?

Navigant is anticipated to release their final recommendations in July 2018. Navigant's preliminary recommendations can be found at <https://chfs.ky.gov/agencies/dms/Pages/default.aspx>.

Q15: Who makes the final decision about which recommendations to move forward with?

The Cabinet has a governance structure in place which includes 1915(c) waiver program management, the Medicaid Commissioner, executive leadership from the Cabinet, and the Governor's office. All members of the governance team will review and consider Navigant's recommendations before decisions are made on which recommendations the Cabinet will choose to implement. The Cabinet anticipates announcing their decision in the summer of 2018.

Operational Redesign

Q16: Who are the sister agencies referred to in the recommendations report?

DMS works in partnership with two (2) sister agencies:

- (1) Department for Aging and Independent Living (DAIL)
- (2) Department for Behavioral Health, Development and Intellectual Disabilities (DBHDID)

Q17: Are DBHDID and DAIL involved in the 1915(c) assessment?

DMS and Navigant have worked with multiple parts of the Cabinet, especially with sister agencies, throughout the assessment activities completed to date. Some of the ways that Sister Agencies have been involved include:

- Navigant interviewed over 20 staff from sister agencies
- Sister agency operations were reviewed when analyzing certain workflows
- Sister agency staff have attended and participated with DMS in stakeholder engagement activities
- Sister agencies reviewed and provided input to the project goals
- Deputy Commissioners and management from both sister agencies are included in the project governance structure

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Waiver Redesign

Q18: What 1915(c) waivers have been reviewed?

All the existing 1915(c) waivers are being reviewed, including:

- Acquired Brain Injury (ABI) Waiver
- Acquired Brain Injury – Long Term Care (ABI-LTC) Waiver
- Home and Community Based (HCB) Waiver
- Michelle P. Waiver (MPW)
- Model II (MWII) Waiver
- Supports for Community Living (SCL) Waiver

Q19: How did the Cabinet and Navigant review the waiver language?

The Cabinet and Navigant are conducting a full appendix by appendix review of all waiver language across the six current HCBS waivers. The project team and Navigant subject matter experts review language, comparing each waiver to identify areas that can be strengthened, standardizing or re-structuring to better clarify processes, expectations, and to meet Federal requirements. These revisions are drafts and are not considered final.

Q20: Does the Cabinet expect to change 1915(c) waiver regulations within the Kentucky Administrative Regulation (KAR)?

This decision will be made once the Cabinet identifies what waiver changes might be necessary. State regulations will need to be aligned with any CMS-approved waivers, and any changes to regulations will be made using the legally defined process outlined in <http://www.lrc.ky.gov/Statutes/chapter.aspx?id=37084>.

Covered Services

Q21: Some of the service definitions are confusing and do not accurately portray what they offer or cover. Will service definitions be addressed through waiver redesign?

All waiver service definitions are being considered for revisions that would improve and clarify the terms of that service. The Cabinet has not finalized decisions on what recommended changes it will move forward with.

HCBS Rate Setting Methodology Study

Q22: What information will be requested from providers if a rate setting study is conducted?

To assist providers in preparing for a potential study of Kentucky's HCBS rate setting methodology, the Cabinet released a provider notification in April 2018. This notification provided information from Navigant on the types of information they anticipate requesting, should the Cabinet choose to complete the recommended study. This was done to allow providers time to organize their information and documents in advance. The notification can be

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found at <https://chfs.ky.gov/agencies/dms/dmps/psb/Pages/prov-letters.aspx>, and questions about the information provided may be submitted to MedicaidPublicComment@ky.gov.

Waiver Configuration

Q23: Will there be a ‘super-waiver’?

The Cabinet understands there has been past discussion of creating a super-waiver, meaning that all waivers would roll into one single 1915(c) waiver that includes all services and waiver populations.

As part of Navigant’s recommended two-phase assessment approach, the Cabinet would not assess the need for waiver reconfiguration until after completing approved changes recommended in Phase One, which is not expected to be completed until the end of 2019.

At this time the Cabinet anticipates maintaining the six waivers through at least the end of 2019.

Q24: How will the work requirement affect participants in the waiver program?

The work requirement applies to the Kentucky HEALTH 1115 waiver program. Participants in a 1915(c) waivers are excluded from the Kentucky HEALTH 1115 waiver program, and are not subject to the rules and requirements of that program, including work requirements.

Other Medicaid Topics

Stakeholders have submitted questions to the Medicaid public comment email box that are not related to the 1915(c) waiver assessment project or Navigant’s recommendations. These questions will not be incorporated in this FAQ.

Cabinet staff are available to assist stakeholders in resolving questions or concerns not related to the 1915(c) waiver assessment project. The table below provides contact people by topic area, who can assist you as needed.

Table 1. Cabinet for Health and Family Services Contact List by Topic

Topic	Name	Phone Number	Email
Michelle P Waiver	Mary Dee Boemker	(502) 564-7540	Mary.Boemker@ky.gov
SCL Waiver	Ricky May	(502) 564-7540	Ricky.May@ky.gov
Model II Waiver	April Lowery	(502) 564-7540	April.Lowery2@ky.gov
HCB Waiver	April Lowery	(502) 564-7540	April.Lowery2@ky.gov
ABI and ABI-LTC Waivers	Randy Compton	(502) 564-7540	Randy.Compton@ky.gov
Medicaid Eligibility	Member Services	(800) 635-2570	MS.Services@ky.gov
State Plan Benefits Information	Member Services	(800) 635-2570	MS.Services@ky.gov
MWMA	MWMA Contact Center	1-800-635-2570	MedicaidPartnerPortal.info@ky.gov