

NOTICE OF GENERAL PUBLIC INTEREST  
DEPARTMENT OF HEALTH CARE SERVICES  
CALIFORNIA 1915(c) HOME AND COMMUNITY-BASED SERVICES WAIVER  
PARTNERS FOR CHILDREN / PEDIATRIC PALLIATIVE CARE WAIVER (PFC/PPCW)

**Background:**

The Department of Health Care Services (DHCS) is preparing to submit an amendment for the Partners for Children (PFC) Pediatric Palliative Care Waiver (PPCW) Medicaid 1915(c) waiver to the Centers for Medicare and Medicaid Services (CMS). The PPC/PPCW provides palliative and other home and community-based (HCB) services to Medi-Cal beneficiaries through the age of 20 who have a California Children's Services Program (CCS)-eligible medical condition, as identified in the California Code of Regulations, Title 22, § 41800 et seq., have full-scope Medi-Cal, live in a participating county and meet the PFC/PPCW level of care criteria. The waiver was implemented following the passage of the Nick Snow Children's Hospice and Palliative Care Act in 2006 (AB 1745) which enabled DHCS to develop a pediatric palliative care benefit as a pilot project for children eligible for full-scope Medi-Cal to be delivered concurrently with curative care, regardless of the child's life expectancy.

**Description of Waiver Amendment and Effective Date:**

**The term of the waiver amendment is expected to begin in 2015.** The proposed PFC/PPCW amendment adds Marriage and Family Therapies (MFT) as an allowable Care Coordinator provider type for the PPCW, and also will increase rates of select PFC/PPCW services, as detailed below:

- Care Coordination proposed rate increase from current rate of \$221.17 per one unit being equal to four to eight hours of service to \$356.26 per one unit;
- Pain and Symptom Management (provided by registered nurses) proposed rate increase from current rate of \$40.47 per one unit being equal to one hour of service to \$67.44 per one;
- Palliative Care Education, also referred to as "Family Training" (provided by registered nurses) proposed rate increase from current rate of \$11.36 per one unit being equal to 15 minutes of service to \$16.88 per one unit; and
- Expressive Therapies when provided by approved PFC/PPCW providers proposed rate increase from current rate of \$35.00 per one unit being equal to 45 minutes of service to \$45.00 per one unit.

The purpose of the rate change is to increase access to home-based PFC/PPC services, and reduce preventable institutionalizations. Increasing the rates will encourage qualified home health and hospice Providers to become PFC/PPCW providers and provide quality and supportive care for eligible children and their families.

Pursuant to 42 CFR 441.301, this notice serves to further inform stakeholders of the federal HCB settings requirements and the Transition Plan needed to comply with the new rules that became effective March 17, 2014. Specifically, HCB settings must:

- Be integrated in, and support full access to the greater community;
- Be selected by an individual from among varying living options;
- Ensure an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint;
- Optimize individual initiative, autonomy, and independence in making life choices; and
- Facilitate individual choice regarding services and supports.

The state requests comments from all interested persons regarding compliance with HCB settings requirements.

Services in the PFC/PPCW waiver are delivered in the home. The State presumes that the residential home meets the requirements of HCB settings. Based on this assumption, the State concludes that there is no need for a transition plan with regard to residential settings.

The Centers for Medicare & Medicaid Services (CMS) has stated that non-residential HCB settings will need to meet the same criteria as residential settings; however, states have not received guidance related to non-residential settings. On occasion, a PFC/PPCW client may receive waiver services in a non-residential setting, e.g., Congregate Living Health Facility (CLHF). Within six months of receiving additional guidance from CMS, the state will submit an amendment to the waiver with a more robust transition plan for non-residential settings to include a remedial strategy to ensure these settings have the characteristics of HCB settings.

The state seeks stakeholder input on the proposed rate increases, addition of MFT as a Care Coordinator, and to determine whether, or to what extent, non-residential HCB settings such as CLHFs conform to the HCB settings requirements (42 CFR 441.301), and what must be done to meet those requirements. Please ensure individuals who do not have access to a computer are made aware of the impending amendment/transition plan, and provide comments within thirty (30) days of receipt of this notice, and no later than April 1, 2015.

More information about the new Federal rules are available at:

<https://www.federalregister.gov/regulations/0938-AO53/home-and-community-based-state-plan-services-program-and-provider-payment-reassignments-cms-2249-f->

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