

State of California—Health and Human Services Agency Department of Health Care Services



JENNIFER KENT DIRECTOR EDMUND G. BROWN JR. GOVERNOR

June 14, 2018

# To: ALL HOME AND COMMUNITY-BASED ALTERNATIVES (HCBA) WAIVER SERVICE PROVIDERS

# **Second Letter**

# Important Information about Changes to the Nursing Facility/Acute Hospital (NF/AH) Waiver, now known as the HCBA Waiver

You are receiving this letter because you billed Medi-Cal for providing services to a Medi-Cal beneficiary enrolled in the HCBA Waiver in the last twelve months.

The Department of Health Care Services (DHCS) is sending you this notice to let you know that the administration of the HCBA Waiver is shifting from DHCS clinical staff to Waiver Agencies in July 2018. As a result, the way in which you will receive authorization to provide services, and the way in which you will submit claims under the Waiver will change. This is the second letter from the State informing you about changes to the HCBA Waiver.

In areas of the state served by a Waiver Agency, Waiver service providers will work with Waiver Agencies to obtain authorization to provide HCBA Waiver services to enrolled participants. Please see the enclosure at the end of this letter for more information on the local Waiver Agencies in each area. In areas where a Waiver Agency is not available, providers will work with DHCS to obtain authorization to provide HCBA Waiver services to enrolled participants.

The intent of this notice is to provide you an overview on how to submit a treatment authorization request to a Waiver Agency. This notice also identifies information that is required to be included with a claim being submitted to the Fiscal Intermediary (FI) for reimbursement of provided Waiver services.

### **Treatment Authorization Requests (TAR)**

In areas of the state served by a Waiver Agency, Waiver service providers must submit paper TARs, by mail (form 50-1) or by FAX (form 50-2), to the geographically appropriate Waiver Agency serving each Waiver participant.<sup>1</sup> For service providers serving participants in Los Angeles and Orange Counties, please refer to the HCBA Waiver webpage: <u>http://www.dhcs.ca.gov/services/ltc/Pages/Home-and-Community-Based-(HCB)-Alternatives-Waiver.aspx</u> for a break out of Waiver Agency coverage by zip code.<sup>2</sup> To request additional TAR forms, you may work with the Waiver Agency in your service area, but it is not a requirement. You may also continue to order these forms through the FI.

All other general requirements related to submitting TARs for adjudication remain in place. For example, service providers must submit a TAR prior to providing services, service periods are required "from date of service – through date of service", etc. Waiver Agencies shall adjudicate TARs based on medical necessity (as defined in WIC § 149059.5) and in accordance with the participant's current, physician-signed, Plan of Treatment (POT).

Each Waiver Agency has a mailing address, FAX line, and point of contact dedicated to provider TAR submissions, please refer to the HCBA Waiver webpage for this listing: <a href="http://www.dhcs.ca.gov/services/ltc/Pages/Home-and-Community-Based-(HCB)-Alternatives-Waiver.aspx">http://www.dhcs.ca.gov/services/ltc/Pages/Home-and-Community-Based-(HCB)-Alternatives-Waiver.aspx</a>. Submitted TARs must be touched by a Waiver Agency within five days of submission, and undisputed service authorization requests must be processed within 30 days of submission. To check the status of a TAR, please contact the Waiver Agency's identified point of contact during normal business hours.

### **Claim Submission**

Waiver service providers will submit claims to the FI for reimbursement as they do currently. However, claims for providing Waiver services in areas served by a Waiver Agency will now require a Waiver Agency-approved TAR to be attached to the claim for payment.

### **TAR and Claiming Process**

<u>Step 1:</u> POT developed for participant is signed by his or her physician, and service providers are contacted to set up services.

Step 2: Service provider submits TAR to the Waiver Agency for adjudication.

<sup>&</sup>lt;sup>1</sup> This is only applicable in areas of the state served by Waiver Agencies. In the few areas that are not served by a Waiver Agency, Waiver service providers shall continue to follow the existing TAR and claiming process.

<u>Step 3:</u> Waiver Agency adjudicates TAR based on medical necessity (as defined in WIC § 149059.5) and in accordance with the participant's current, physician-signed, POT.

<u>Step 4:</u> Waiver Agency issues TAR adjudication response to service provider and sends the TAR to the FI to enter into the claiming system.

<u>Step 5:</u> FI will notify service provider that they can claim.

<u>Step 6:</u> Service provider submits claim to the FI with a copy of the authorized TAR attached.

<u>Step 7:</u> FI reimburses service provider and sends a verification of payment to the Waiver Agency for tracking and oversight.

#### How to submit claims

Once a TAR has been authorized by the Waiver Agency and approval has been received, providers can submit claims to the Conduent TAR Processing Center at:

Conduent TAR Processing Center 820 Stillwater Road West Sacramento, CA 95605-1630

### How to contact the Fiscal Intermediary

To check the status of a claim, providers may contact the Telephone Service Center (TSC) at 1-800-541-5555 from 8 a.m. to 5 p.m., Monday through Friday, except holidays.

### What is a Waiver Agency?

A Waiver Agency is an organization in your area that applied to take on the responsibility of administering the HCBA Waiver at the local level, and to provide comprehensive care management services that were formerly provided by DHCS Nurse Evaluators. The organizations were selected as HCBA Waiver Agencies because of their experience and organizational capacity. DHCS will enter into contracts with the HCBA Waiver Agencies effective July 2018.

<sup>2</sup> For service providers serving participants in Los Angeles and Orange Counties, please refer to the HCBA Waiver webpage for a break out of Waiver Agency coverage by zip code at: <u>http://www.dhcs.ca.gov/services/ltc/Pages/Home-and-Community-Based-(HCB)-Alternatives-Waiver.aspx</u>

#### Why was the Waiver Changed?

The benefits of shifting the administration of the Waiver from DHCS at the state to an experienced organization at the local level include, but are not limited to:

- Authorization to increase the number of slots under the Waiver (and the elimination of the enrollment waitlist)
- Better access to services through local network development and community
  awareness
- Timely service authorizations
- Availability of a local Care Management Team, made up of a nurse and social worker, that will work with you and the participant to support continuity of care

All of the changes made to the Waiver are intended to improve administrative responsiveness and eligible Medi-Cal beneficiaries' access to Waiver services.

### Do I have to work with a Waiver Agency?

Yes. You must work with a Waiver Agency to provide HCBA Waiver services to enrolled Waiver participants. HCBA Waiver Agencies will be responsible for reviewing and adjudicating TARs that were formerly adjudicated by DHCS Nurse Evaluators, based on participants' medical needs and POT. Because you provide Waiver services to a Waiver participant in an area of the state that will be covered by a Waiver Agency, the only way to receive authorization to provide future Waiver services will be through the Waiver Agency. Previously authorized TARs shall remain in place through the assigned end date, unless modified because of a reassessment performed by the Waiver Agency's Care Management Team. If there is a change to a participant's POT, a new TAR must be submitted to the Waiver Agency for approval.

Waiver Agencies are required to work with any willing and qualified Medi-Cal service provider and will ensure provider compliance and provide orversight within the waiver requirements.

### Will I still be able to work with my current Waiver Participants?

Yes. Under the HCBA Waiver, participants have the right to choose the services they receive and the individuals and organizations that provide the services to them. Existing care plans and current service authorizations will transfer from DHCS to the Waiver Agencies on the date the Waiver administration and comprehensive care management

responsibilities shift to the Waiver Agency. Service providers must receive authorization to provide services from the Waiver Agency through the TAR adjudication process.

#### What should I do now?

You do not need to do anything at this time. If you have any questions regarding the TAR approval process, please contact the Waiver Agency in your service area.

### Additional Information about the HCBA Waiver

For more information about the HCBA Waiver, visit DHCS' website at: <u>http://www.dhcs.ca.gov/services/ltc/Pages/Home-and-Community-Based-(HCB)-</u><u>Alternatives-Waiver.aspx</u>.

Waiver Agency	Website	Service Area(s)
Ventura County	www.vcaaa.org	Ventura County
Sonoma County	www.sonomacounty.ca.gov/Huma n-Services/Adult-and-Aging- Division/	Sonoma County
Access TLC	www.accesstlc.com	Santa Barbara County, and sections of Los Angeles* and Orange Counties*
San Ysidro Health	www.syhc.org	San Diego County
Partners in Care Foundation	www.picf.org	Sections of Los Angeles County*
Institute on Aging	www.ioaging.org	San Mateo, San Bernardino, Riverside, and San Francisco Counties
Libertana	www.libertana.com	Kern, Fresno, Kings, Tulare, Madera, Mariposa, Merced, Stanislaus, Tuolumne, San Luis Obispo, Amador, Calaveras, Santa Clara, Santa Cruz, San Benito, Monterey, and sections of Los Angeles and Orange Counties*
Center for Elders Independence	www.cei.elders.org	Alameda & Contra Costa County
Home Health Care Management	www.homeandhealthcaremanage ment.com	Butte, Glenn, Sacramento, San Joaquin, Shasta, Solano, Sutter, Tehama, Yolo, Yuba, Colusa, Del Norte, El Dorado, Humboldt, Lake, Lassen, Modoc, Nevada, Placer, Plumas, Sierra, Siskiyou, and Trinity Counties

\* For service providers serving participants in Los Angeles and Orange Counties, please refer to the HCBA Waiver webpage for a break out of Waiver Agency coverage by zip code at: <u>http://www.dhcs.ca.gov/services/ltc/Pages/Home-and-Community-Based-(HCB)-Alternatives-Waiver.aspx</u>

#### Non-Discrimination Policy and Language Access

Department of Health Care Services (DHCS) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. DHCS does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

DHCS:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, contact Michele Villados, Deputy Director of the Office of Civil Rights, at (916) 440-7370, 711 (California State Relay), Email: <u>CivilRights@dhcs.ca.gov</u>.

If you believe that DHCS has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Michele Villados, Deputy Director of the Office of Civil Rights Department of Health Care Services, Office of Civil Rights PO Box 997413, MS 0009

Sacramento, CA 95899-7413

(916) 440-7370, 711 (California State Relay) Email: <u>CivilRights@dhcs.ca.gov</u>. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Michele Villados, Deputy Director of the Office of Civil Rights, is available to help you.

You can also <u>file a civil rights complaint</u> with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through <u>the Office for Civil Rights</u> <u>Complaint Portal</u> or by mail or phone at:

U.S. Department of Health and Human Services 200 Independence Avenue SW. Room 509F, HHH Building Washington, DC 20201 1-800-868-1019, 800-537-7697 (TDD).

Complaint forms are available.

#### Language Access

If you would like assistance with translation, call 833-388-4551. (TTY 1-800-430-7077.)

833-388-4551 إذا كنت ترغب في المساعدة في الترجمة، اتصل برقم

Եթե թարգմանության հարցում օգնության կարիք ունեք, զանգահարեք 833-388-4551

្របសិនេបើអ កចង់ នងំនួយ មួយ របក្រែប ទូរស័ព េ េលខ 833-388-4551

如果您想要獲得外語翻譯協助, 請撥打 833-388-4551

تماس بگیرید 833-388-4551 اگر در ارتباط با ترجمه نیاز به کمک دارید، با شماره

यिद आप अनुवाद संबंधी सहायता चाहते ह, तो 833-388-4551 पर कॉल कर

Yog tias koj xav tau kev pab txhais lus, hu rau 833-388-4551

通訳をご希望の場合は、833-388-4551 までお掛けください

통번역 도움이 필요하실 경우 833-388-4551 (으)로 연락하십시오

ਜੇ ਤੁਹਾਨੰ ੂ ਅਨੁਵਾਦ ਬਾਰੇ ਸਹਾਇਤਾ ਦੀ ਲੋੜ ਹੈ, ਤਾਂ 833-388-4551' ਤੇ ਕਾਲ ਕਰੋ

Если Вы хотели бы получить помощь с переводом, звоните по телефону 833-388-4551 Si desea obtener ayuda con la traducción, llame al 833-388-4551

Kung inyong kailangan ng pagtulong sa pag-translate, tawagan ang 833-388-4551

งการความชวยเหล ในการแปลภาษาจากลาม ห**าโหตุฒเตอ**อหมายเลข อ กรณ ด 833-388-4551

Nếu quý vị muốn trợ giúp thông dịch, gọi số 833-388-4551