

Assisted Living Payment Reform: Introduction to the Tiered Program

January 2022

**RHODE
ISLAND**

Agenda

Goal: To Expand Assisted Living access and utilization for Medicaid Beneficiaries by instituting a three-tiered payment program.

- Background: Program Goals, RI Performance vs. national benchmarks on Assisted Living utilization
- Tiered Rate Program effective November 1, 2021 for Tier A and B and February 1, 2022 for Tier C
- Implementation: Member acuity/level of need standards and Provider certification standards for a three-tiered program
- How to become a Certified Medicaid provider

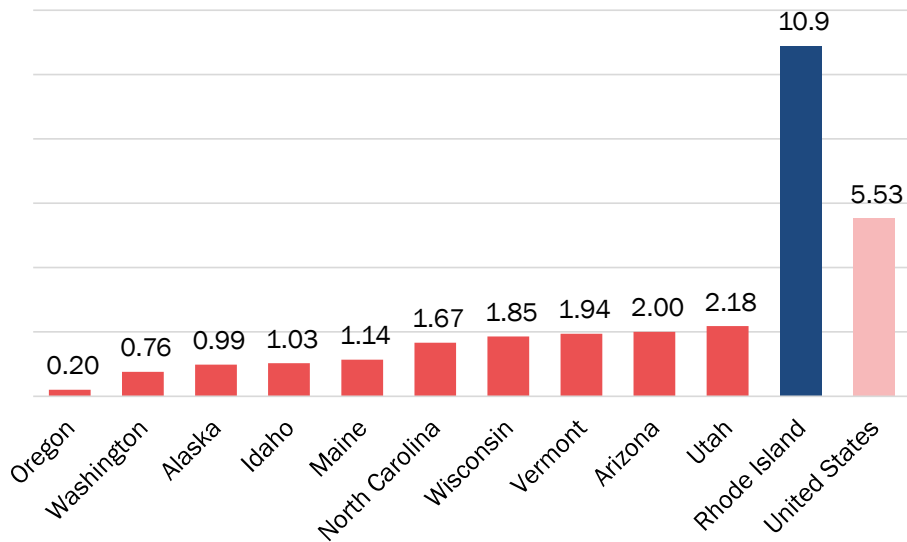
Open Discussion Topics:

- Feedback on becoming a provider
- Resources

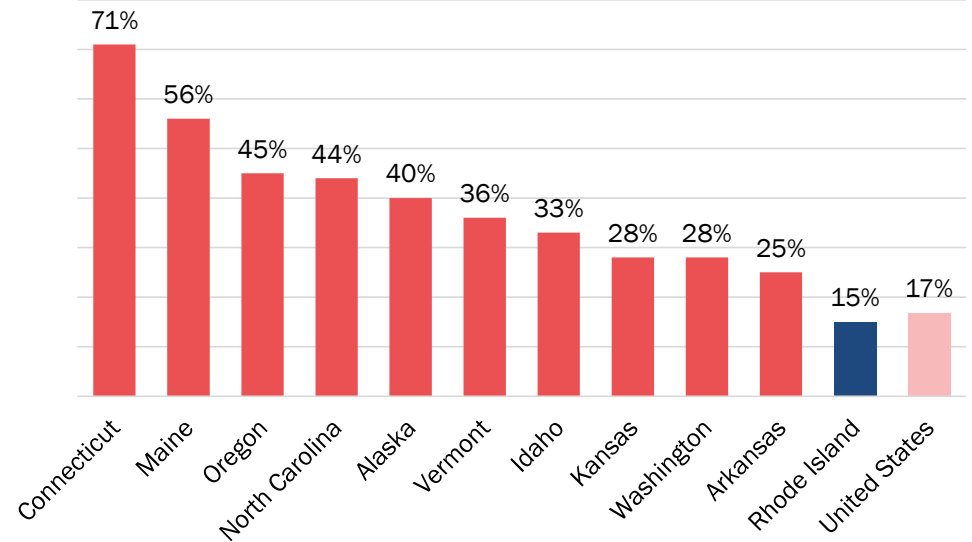
Underutilization of Assisted Living in RI Medicaid

Rhode Island significantly lags national benchmarks in Medicaid Assisted Living utilization. Achieving our targeted rebalancing goals will require a substantial increase in utilization of Assisted Living residences.

Ratio of Medicaid Nursing Facility Residents to Medicaid Assisted Living Residents



Percent of Assisted Living Residents on Medicaid

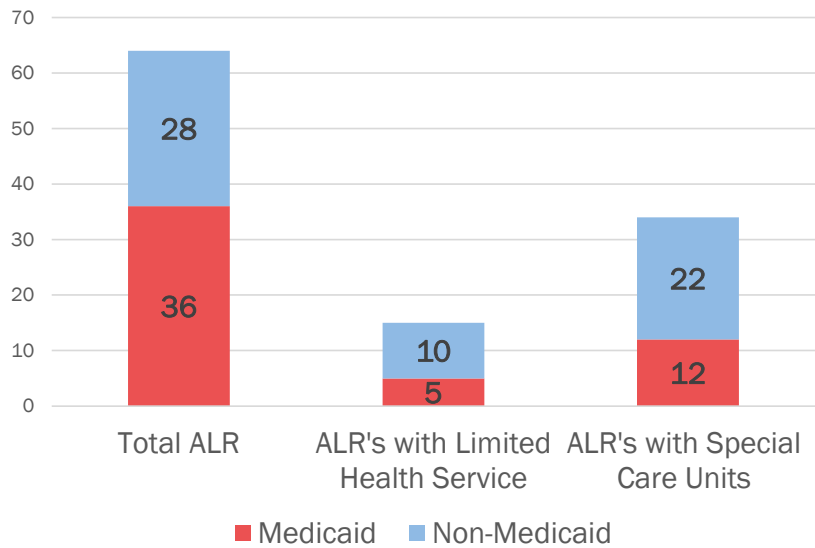


Source: www.ahcancal.org/Assisted-Living/Facts-and-Figures/Pages/default.aspx, www.kff.org/other/state-indicator/number-of-nursing-facility-residents.

Assisted Living Tiered Rate Policy Will Increase Medicaid Utilization in ALRs

- Since the Tiered Rate payment policy was implemented on Nov. 1, two additional ALRs became Medicaid certified, bringing the total to 36 or 57% of all ALRs in the state
- Tier C Certification Standards are effective Feb. 1, 2022

RI Assisted Living Residences



Medicaid ALR Tier Certifications Effective Nov. 1 2021



Phased Implementation Approach

- November 1, 2022 Tiers A and B became effective with Tier B replacing the Category F cohort.
- February 1, 2023 Tier C became effective.

Phase I: Tiers A and B (former Cat F)		Phase II: Tier C
November 1, 2021	Between November 1, 2021 and January 31, 2022	Feb 1, 2022
<ul style="list-style-type: none"> • Implement Tier A & B reimbursement • All Category F beneficiaries designated as Beneficiary Tier B • All non-Category F beneficiaries designated as Beneficiary Tier A • All Category F ALRs designated as Facility Tier B Certification • Publish Advisory Notice with grandfathering provisions and guidance for Phase I and Interim Period 	<ul style="list-style-type: none"> • All grandfathered beneficiaries re-assessed at their next annual re-assessment • All NEW beneficiaries/new residents assessed for Beneficiary Tier A and B need at time of eligibility determination • Existing residents who have emerging need may lead to a request for a redetermination of their Beneficiary Tier • No change to the provider ALR certification process (refer to existing process) 	<ul style="list-style-type: none"> • Beneficiary Tier Standards finalized inclusive of Tiers A, B, C • Provider Certification Standards published to include the third level of certification/Tier C • Certify qualifying ALRs for Tier C, resulting in a higher Medicaid daily rate for eligible residents

Payment Determined by Facility Tiers Combined with Client Acuity Tier

- Assisted Livings will need to meet a specific certification standards to determine maximum tier. Facility Tier A is basic Medicaid enrollment.
- Facility Tier B conforms with the phased-out Category F criteria. You can meet Tier B requirements by having a SCU or LHS licensure
- Facility Tier C requires a SCU or LHS license in addition to specific resident centered criteria
- Individuals will be assigned a Beneficiary Tier through the assessment process

		Facility Licensure and Certification		
		Tier A (Basic)	Tier B (Enhanced/former Cat F Nov 1. 2021)	Tier C (Feb 1, 2022)
Individual Level of Need	Tier A Basic	Tier A (\$78)	Tier A (\$78)	Tier A (\$78)
	Tier B Enhanced (former Cat F)	Tier A (\$78)	Tier B (\$113)	Tier B (\$113)
	Tier C SCU/LHCL	Tier A (\$78)	Tier B (\$113) with a potential to move to Tier C	Tier C (\$136)

Provider Certification Standards/Tier A

- RI Licensure for an ALR in Good Standing
- Compliance with HCBS final rule
 - ✓ Daily assistance with at least 2 ADLs
 - ✓ Personal care and attendant services performed by a CNA. Hours of service must be at least 1 hour per person per week. The hours of the CNA must be adequate to meet the needs as determined by the ALR assessment and person-centered Service Plan.
 - ✓ Housekeeping
 - ✓ Chore services (washing rugs or any heavy maintenance chores)
 - ✓ Companion services
 - ✓ Meal preparation
 - ✓ Medication administration and /or oversight
 - ✓ A program of social and recreational programming that reflects a resident's interests and needs. These activities should promote integration in the ALR and the greater community. The programming may include therapeutic type activities based on the needs of the residents which may include access to, but not limited to, counseling, AA meetings, or activities which focus on maintaining /promoting life skills.
 - ✓ Transportation or coordination of transportation services as specified in the person-centered service plan
 - ✓ Provision of 24-hour on-site response staff to meet scheduled or unpredictable needs in a way that promotes maximum dignity and independence and provides for supervision and safety of the residents.
 - ✓ Minimum of 2 hours of staff orientation and on-going training

Provider Certification Standards/Tier B

- ✓ All requirements for Tier A AND/ OR
- ✓ Provision of Limited Health Services and/ or an Alzheimer's/ Dementia Special Care Unit as defined in Department of Health Licensing Assisted Living Residences (216-RICR-40-10-2 section 2.5 and 2.6).

AND/ OR

- ✓ Proven ability to support additional hours of personal care beyond the Tier A services which may include:
 - ✓ Either extensive assistance with at least 2 ADLs or
 - ✓ 7 hours or more of ADL care as documented in the ALR's assessment and person-centered Service Plan and complex medication management comprising enhanced numbers of meds, more complex delivery of meds, and/ or increased time spent delivering meds.

AND/OR a combination of

- ✓ Ability to support coordination of behavioral and/or dementia care including cuing, redirection, and management of behaviors, for an individual who has been diagnosed with Alzheimer's disease or other related dementia, or a behavioral health diagnosis as determined by a physician.
- ✓ Proven ability to provide support and education to the resident about managing specific health conditions as documented in the resident's person-centered service plan.
- ✓ Demonstrated ability to manage elopement risk or other challenging behaviors that adversely affect the resident or others.

Provider Certification Standards/Tier C

- ✓ All Requirements of Tier A and B

AND

- ✓ Provision of Limited Health Services and/ or an Alzheimer's/ Dementia Special Care Unit as defined in Department of Health Licensing Assisted Living Residences (216-RICR-40-10-2 section 2.5 and 2.6)

AND two of the following:

- ✓ Proven ability to provide Extensive assistance with at least 3 ADLs. And 16 hours or more of ADL care as documented in the ALR's assessment and person-centered Service Plan
- ✓ Single rooms or apartment-like settings
- ✓ Special trained staff such as licensed, certified in BH, dementia, or other specialty area available 24/7.
- ✓ Intermittent skilled care or stabilization services upon transition

Certification process to become a Medicaid Provider

- Have a Rhode Island ALR Licensure in Good Standing
- Review available Assisted Living resources list on the EOHHS website: [Certification Standards | Executive Office of Health and Human Services \(ri.gov\)](#)
- Review Instructions and apply to enroll as a Medicaid Provider on the EOHHS website [Provider Enrollment | Executive Office of Health and Human Services \(ri.gov\)](#)
- Demonstrate Compliance with HCBS final rule: [copy-of-assisted-living-residence-questionnaire-attachment-5-final-1-2020-copy.xls \(live.com\)](#)
- Apply for providing Assisted Living services, including specifying the Tier of service delivery, with The Office of Community Programs (OCP) at: OHHS.ocp@ohhs.ri.gov
- Post acceptance as a Medicaid provider, including Tier approval from OCP, identify appropriate residents: Either new ALR residents who are not yet Medicaid LTSS eligible and who have not previously resided in a ALR but are now seeking to do so; or existing ALR residents who are not yet Medicaid LTSS eligible. Both cohorts require a detailed assessment process.
- Resources on caring for the newly identified, potentially Medicaid eligible resident will be provided.

Additional Resources on Medicaid Assisted Living

- The EOHHS website contains the most current information on Assisted Living Payment Reform

<http://eohhs.ri.gov/providers-partners/certification-standards>

The screenshot shows the website of the Executive Office of Health and Human Services (EOHHS) for the State of Rhode Island. The page is titled "Certification Standards" and is part of the "Providers & Partners" section. The left sidebar contains a menu with the following items: "Providers & Partners", "Billing And Claims", "Certification Standards" (which is highlighted), "Early Intervention Providers", "Electronic Visit Verification (EVV)", and "Electronic Health Records (EHR) Incentive Program". The main content area is titled "Certification Standards" and lists several links: "Application Process for Category D", "Assisted Living Certification Standards", "Assisted Living FAQ", "Assisted Living Reform Training FAQs", "Attachment 5 - Assisted Living Residence Questionnaire", and "Changes to Category F as a Result of Article 12 of the FY 2020 Appropriations Act, House Bill 5151Aaa".

Providers & Partners

Billing And Claims +

Certification Standards

Early Intervention Providers +

Electronic Visit Verification (EVV)

Electronic Health Records (EHR) Incentive Program +

Certification Standards

- [Application Process for Category D](#)
- [Assisted Living Certification Standards](#)
- [Assisted Living FAQ](#)
- [Assisted Living Reform Training FAQs](#)
- [Attachment 5 - Assisted Living Residence Questionnaire](#)
- [Changes to Category F as a Result of Article 12 of the FY 2020 Appropriations Act, House Bill 5151Aaa](#)

Discussion Topics

Provider Feedback

1. Feedback on becoming a provider
2. Future improvements planned for the program: Gainwell Updates
3. Open Discussion
4. Resident Re-Assessment tracking tool (Post Medicaid Provider Approval)

Resident Re-Assessment Process

- Residents will be annually reassessed by the Case Management agency.
- Assisted Livings may request a resident be reassessed when the person's needs change and their needs are anticipated to stay at an increased level for 3 months or more.
- Please utilize The Resident Re-Assessment Tracking Tool/spreadsheet when requesting a resident re-assessment.

Resident Re-Assessment Process Cont.

- The Resident Re-Assessment Tracking Tool/spreadsheet with instructions was emailed to participating ALR's on Jan 14th 2022

AL Community Name	Resident's First Name	Resident's Last Name	DOB	Medicaid ID #	Date of Assessment Request	Caseworker Assigned	Assessment Date	Recommended Tier	Is a New LOC Needed? *	State Agency Responsible for Review	Date of Approval

Instructions

The Assisted Living Community completes the green columns. Upon completion, the AL uses secure email to send this document to the assigned Case Management agency and copy Dianna.Shaw.CTR@ohhs.ri.gov

The Case Management agency completes the yellow column and securely emails this form to Melody.Rodrigues@oha.ri.gov and Dianna.Shaw.CTR@ohhs.ri.gov

* The beneficiary's reassessment must happen at least annually, but a new Level of Care is only required every 3 years. If the beneficiary's Level of Care was completed more than 3 years ago, a new one must be initiated.