



DEPARTMENT OF ECONOMIC SECURITY

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**Division of Developmental Disabilities**

**October 5, 2023**

# Agenda

- Parents as Paid Caregivers
- Positive Behavior Support Training, Leah Gibbs, OIFA Administrator
- Enhancing Knowledge of Behavioral Health Providers to Support Individuals with IDD, Cindy Leon, Program Manager
- Changes in Health Plan Coverage When a Member Turns 21, Dr. Vicki D. Copeland, DDD Medical Director

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# Parents as Paid Caregivers (PPCG)

## **AHCCCS extended this flexibility until November 11, 2023 with no changes**

- Began at start of COVID-19 to ensure families had support during the emergency
- AHCCCS worked with CMS - allowed parents to become Direct Care Workers (DCW) for their children receiving DDD benefits
- Allowed Qualified Vendors to hire parents to provide services for their minor children

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# Parents as Paid Caregivers (PPCG)

## AHCCCS plans to amend the 1115 waiver to

- Address shortage of Direct Care Workers/caregivers by allowing payments to parents who are paid caregivers for their minor children
- Increase satisfaction and promote positive health and well-being outcomes for children
- Extend a support service to preserve effective care for the member in the home and community
- Ensure members receive high-quality care while increasing timely accessibility to care providers

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# Parents as Paid Caregivers (PPCG)

## AHCCCS Opened and Closed Public Comment Period

- AHCCCS completed two (2) virtual public forums
- Public comments closed on August 21, 2023
- Posted [Data](#) about the PPCG program
- Posted [Final Draft](#) August 24, 2023
- AHCCCS had a Post Public Comment Forum September 6, 2023
- Will submit draft to Centers for Medicare & Medicaid Services (CMS)

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# Parents as Paid Caregivers (PPCG)

## Included in the Proposed Draft to be Submitted to CMS

- Support Coordinators will use a decision tree to help make an informed decision regarding the model that will best meet the member's needs, including decisions about using:
  - DCWs recruited by the agency and/or member/family,
  - Non-parental family members, and/or
  - Parents as a last resort when other options have been exhausted and when the parent is willing and able to provide the paid care.
- Habilitation was included: The PCSP shall include an individualized habilitation goal to address interaction with peers in community settings.

# Parents as Paid Caregivers (PPCG)

## Included in the Proposed Draft to be Submitted to CMS

- Parents must participate in quarterly in-person case management and supervisory visits
- Parents will be limited to 40 hours of paid care, per child, in a given week where paid care by a parent caregiver.
- Care by a parent cannot exceed more than 16 hours in a single day (16 hours in a 24 hour period).
- If two children are receiving direct care services (habilitation & attendant care services), the parent(s) may provide up to a combined 80 hours of paid care per week (40 hours for each child).
- The exact number of authorized hours (up to 40 per child) will be determined through the person-centered planning process. Members can still receive more than 40 hours of authorized paid care in a given week through the use of an alternate caregiver.

# Parents as Paid Caregivers (PPCG)

## Included in the Proposed Draft to be Submitted to CMS

Phased in Approach for families already enrolled in the program and currently providing care over the 40 hour limit:

- From the time of approval until January 31, 2024: There will be no hourly limitations in place.
- From February 1, 2024, until May 31, 2024: There will be an 80 hour per week limitation.
- From June 1, 2024, to September 30, 2024: The hourly limitation will drop to 60 hours a week.
- Beginning October 1, 2024, and thereafter: The 40 hour per week limitation will be in effect.



# Parents as Paid Caregivers (PPCG)

## **Included in the Proposed Draft to be submitted to CMS:**

- Providers (Qualified Vendors) must ensure they have active and implementable workforce development plans that are reflective of their entire current membership, not just parents
- AHCCCS is developing a new services called family support



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# Positive Behavior Support (PBS) Training

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# Positive Behavior Support (PBS) Training

- New Division project called Positive Behavioral Support (PBS) training
- Training for families/caregivers and Direct Support Professionals (DSPs) to support people who the Division serves
- Offers new skills, tools, and resources
- Helps people who may have challenging behaviors by teaching them new skills
- Teaches caregivers how to improve the person's environment
- Improves relationships between members and their caregivers

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# Positive Behavior Support (PBS) Training

## PBS is Person-Centered

### Who will be able to receive PBS training?

- All Direct Support Professionals (DSPs) employed by the Division
- Qualified Vendors who employ DSPs – vendors offered incentives
- Families/Caregivers who are interested in PBS – families/caregivers can receive training at no cost

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# Positive Behavior Support (PBS) Training

## Timeframe

- Training is planned to start in 2024
- Division will keep you posted on the project as it progresses

## Where to Leave Feedback

- Submit questions or feedback using this [Google Form](#)

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**Questions?**



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**Enhancing Knowledge of Behavioral Health  
Providers to Support Individuals with IDD**

# ARPA Dual Diagnosis Training Plan



- In July 2022, the Arizona Health Care Cost Containment System (AHCCCS) submitted received federal approval on its spending plan related to the American Rescue Plan Act (ARPA). Part of that spending plan included using one-time funding to expand access to care from a well-trained, highly-skilled workforce.
- The Division of Developmental has collaborated with its sub-contracted health plans, UnitedHealthcare Community Plan and Mercy Care, to utilize ARPA funding to enhance training available to behavioral health agency clinical staff. The training focuses on best practices for working with individuals who have a dual diagnosis, both a developmental disability and a behavioral health diagnosis.
- The goal of this initiative is to enhance provider competency, offer opportunities for professional development, improve member outcomes, and bridge gaps in knowledge for the professionals who serve individuals with developmental disabilities and their families.



# ARPA Dual Diagnosis Training Plan

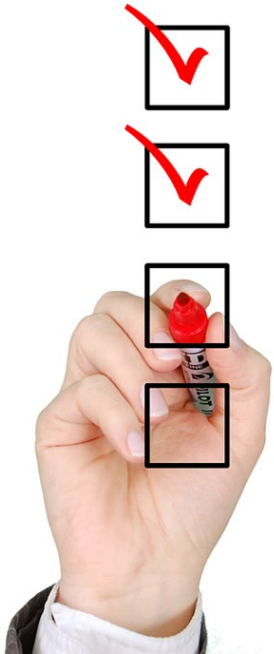
- As of August 1, 2023, the **Intellectual and Developmental Disability (I/DD) Course Library** is available through the Relias training platform to all AHCCCS registered behavioral health providers who have access to Relias. The full course library includes 100+ I/DD related courses that learners have access to, including many that are CEU eligible.
- In addition, the Division will offer an incentive to behavioral health agencies for the completion by eligible staff a training plan. The training plan includes 12 Computer Based Training courses from the I/DD library and a Virtual Instructor Led Course with information specific to Arizona that will be taught by DDD staff.



# Training Plan Courses: DDD- Intellectual & Developmental Disabilities Essential Knowledge for BH Providers

Live Event – Virtual Instructor Led Course: Introduction to the Arizona Division of Developmental Disabilities for Behavioral Health Providers
A Day in the Life: An IDD Perspective
Assessments in IDD
Common Health Problems and Interventions for Persons with IDD
Informed Decision Making
Integrated Care in IDD
Intellectual Disabilities: Interventions, Supports and Outcomes
Introduction to Autism Spectrum Disorders
Providing Cognitive Behavioral Therapy to Persons with IDD
Reducing Readmissions and Unnecessary Hospitalization
Rights of Individuals with IDD
Trauma-Informed Service Programs
Understanding Intellectual Disability

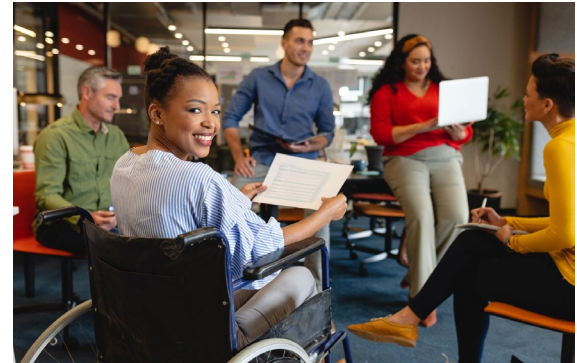
# Virtual Instructor Led Course Topics: Introduction to the Arizona Division of Developmental Disabilities for BH Providers



1. Intro: DES and DDD
2. Dual Diagnosis
3. Eligibility Requirements
4. Health Plans
5. Role of Support Coordinators
6. DDD Functional Areas
7. Home and Community Based Services
8. DDD Residential Services
9. Vendor Call
10. Article 9, Behavior Plans, & the Program Review Committee
11. BH Provider and DDD Support Coordinator Collaboration
12. Escalation Path
13. Training Opportunities
14. Closing: Questions

# DDD Sponsored Conferences Planned for 2024

In addition to the Relias Computer Based Training and Virtual Instructor led course, in 2024 DDD will be hosting a conference in Phoenix and in Tucson for Behavioral Health Provider Agency clinical staff. There will be presentations by locally and nationally recognized experts covering best practices in serving members with a dual diagnosis. Continuing education credits will be available to attendees.





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**Questions?**

Presented by  
Vicki D. Copeland, MD, FAAFP



# What Changes In Your Health Benefits When You Are 21?

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# Early and Periodic Screening, Diagnostic, and Treatment

- Several months ago, we discussed **Early and Periodic Screening, Diagnostic, and Treatment (EPSDT)** services.



# Early and Periodic Screening, Diagnostic, and Treatment Definition

- EPSDT services provide comprehensive health care through primary prevention, early intervention, diagnosis, medically necessary treatment, and follow-up care of physical and behavioral health conditions for AHCCCS members under the age of 21 years.
  - Medically Necessary
  - Cost-effective

For more information about EPSDT Services, refer to the [AHCCCS Medical Policy Manual 43, Chapter 400 – Medical Policy For Maternal And Child Health — Early and Periodic Screening, Diagnostic, and Treatment Services.](#)



# Early and Periodic Screening, Diagnostic, and Treatment Definition

- Under EPSDT, federal law requires that Title XIX cover all Medicaid-covered services listed in 42 USC 1396d(a) for members under the age of 21 when medically necessary and cost-effective and even when the services are not listed as covered services in the AHCCCS State Plan, AHCCCS statutes, rules, or policies.
- This means that Contractors shall cover all physical and behavioral health services described within Medicaid-covered services listed in 42 USC 1396d(a) if the treatment or service is necessary to “*correct or ameliorate*” defects or physical and behavioral illnesses or conditions.
- Medical necessity is determined on a case-by-case basis.

# Early and Periodic Screening, Diagnostic, and Treatment Definition

- These comprehensive services shall be made available for the treatment of all physical and behavioral health conditions and illnesses discovered by screening and diagnostic procedures.
- As part of EPSDT, the Contractor shall inform all Medicaid-eligible individuals under the age of 21 that EPSDT services are available, to provide or arrange for the provision of screening services for these individuals, to arrange (directly or through referral) for corrective treatment as determined by child health screenings EPSDT, and to report EPSDT performance information.

# DDD Health Plan Coverage Service Changes When a Member Turns 21

- DDD contracts with health plans to provide physical and behavioral health services to eligible DDD members who are enrolled in **Arizona Long Term Care (ALTCS)**:
  - Mercy Care Plan
  - UnitedHealthcare Community Plan
  - Eligible tribal members may choose the DDD Tribal Health Program.

- Annual Dental Benefits
  - Available from October 1st to September 30th each year
  - Maxes out at \$1000\*/plan year for emergent dental needs
  - ALTCS members over 21 have an additional annual \$1000\* for comprehensive preventive care
  - Exceptions for transplant cases, cancer, and other related medical conditions

# Hearing Services

- Hearing exams are covered
- Hearing aids and cochlear implants are not covered



# Vision Services

- Medically-related eye exams are covered
- Checking eyesight for vision correction/acuity is not covered
- Eyeglasses, contact lenses, and eyeglass repair are not covered
- Medical conditions of the eye are covered; however, they have to meet medical necessity, and cataract removal has specific requirements



# Chiropractic Services

- The Primary Care Provider may initially order up to 20 visits annually that include treatment and may request authorization for additional chiropractic services in that same year if additional chiropractic services are medically necessary.



# Allergy Testing

- Allergy testing is not covered unless a member has either sustained an anaphylactic reaction to an unknown allergen or has exhibited such a severe allergic reaction where it is reasonable to assume further exposure to the unknown allergen may result in life-threatening situation.





# Occupational Therapy, Physical Therapy, and Speech-Language Pathology Services

- The **Division** and the **Division's Health Plans** cover medically necessary **habilitative/developmental** and **rehabilitative/restorative**
  - Occupational Therapy,
  - Physical Therapy, and
  - Speech-Language Pathology Services
- All Therapy Services must be ordered by a member's primary care provider or attending physician, including a medical doctor, doctor of osteopathy, physician assistant, or nurse practitioner, approved by the Division or a Division Health Plan, and provided by or under the direct supervision of a licensed therapist, as a covered benefit through Medicaid managed care.
- The Division administers **habilitative/developmental** therapy services and has agreements (contracts) with Qualified Vendors to provide medically necessary therapy services. Therapy services include occupational therapy, physical therapy, and speech-language pathology.
- The Division's Health Plans administer **all rehabilitative/restorative** therapy services and **habilitative/developmental occupational and physical** therapy services for members **aged 21 and older**.

# Physical Therapy

- The AHCCCS Contractor (e.g., The Division) and AHCCCS Fee-for-Service Programs cover Physical Therapy services for members in an **inpatient** or **outpatient** setting, when services are ordered by the member's Primary Care Provider/attending physician as follows:
  - Inpatient Physical Therapy services are covered for all members who are receiving inpatient care at a hospital, nursing facility or custodial care facility.
  - Outpatient Physical Therapy services are covered for members under the age of 21.
  - Outpatient Physical Therapy services are covered for **adult members, 21 years of age and older (Acute and Long term Care)** as specified in A.A.C. R9-22-215 and A.A.C. R9-28-206 as follows:
    - **15 Physical Therapy visits** per benefit year for the purpose of restoring (**rehabilitative/restorative**) a skill or level of function and maintaining that skill or level of function once restored, and
    - **15 Physical Therapy visits** per benefit year for the purpose of acquiring a new skill (**developmental/habilitative**) or a new level of function and maintaining that level of function once acquired.
- All Physical Therapy services must be provided by a qualified Physical Therapist or by a qualified individual under the supervision of Physical Therapist within their scope of practice, and consistent with A.R.S. Title 32, Chapter 19 and ADHS administrative rules, A.A.C., Title 4, Chapter 24.

# Occupational Therapy

- The AHCCCS Contractor (e.g., The Division) and AHCCCS Fee-for-Service Programs cover **Occupational Therapy** services for members in an **inpatient** or **outpatient** setting, when services are ordered by the member's Primary Care Provider/attending physician as follows:
  - Inpatient Occupational Therapy services are covered for all members who are receiving inpatient care at a hospital, nursing facility or custodial care facility.
  - Outpatient Occupational Therapy services are covered for members under the age of 21.
  - Outpatient Occupational Therapy services are covered for adult members, **21 years of age and older** as follows:
    - **15 Occupational Therapy visits** per benefit year for the purpose of restoring (**rehabilitative/restorative**) a skill or level of function and maintaining that skill or level of function once restored, and
    - **15 Occupational Therapy visits** per benefit year for the purpose of acquiring a new skill (**developmental/habilitative**) or a new level of function and maintaining that level of function once acquired.
- All Occupational Therapy services shall be provided by a qualified Occupational Therapist or by a qualified individual under the supervision of an Occupational Therapist within their scope of practice, and consistent with A.R.S. Title 32, Chapter 34 and ADHS administrative rules, A.A.C., Title 4, Chapter 43.

# Speech-Language Pathology

- The AHCCCS Contractor (e.g., The Division) and AHCCCS Fee-for-Service Programs covers **Speech-Language Pathology** services provided to all members receiving **inpatient** care at a hospital, nursing facility, or custodial care facility when services are ordered by the member's Primary Care Provider/attending physician.
  - Speech-Language Pathology provided on an **outpatient** basis is only covered for members under 21 and Arizona Long Term Care System members of any age.
- Speech-Language Pathology shall be provided by a qualified Speech Language Pathologist or by a qualified individual under the supervision of an Speech-Language Pathologist within their scope of practice and consistent with A.R.S. Title 36, Chapter 17 and ADHS administrative rules, A.A.C., Title 9, Chapter 16.

For more information about Therapy Services, refer to [the AHCCCS Medical Policy Manual Chapter 310-X – Occupational, Physical, and Speech-Language Pathology Services](#).

**Serious Emotional Disturbance (SED)** - is a designation used in Arizona for qualifying children who have a diagnosed behavioral health condition which limits the child's role in family, school or community activities. Youth under the age of 18 who qualify for the SED designation and AHCCCS are eligible for additional behavioral health services through their AHCCCS health plan. Youth who qualify for the SED designation but do not financially qualify for AHCCCS receive behavioral health services through the Regional Behavioral Health Authority (RBHA).

**Serious Mental Illness (SMI)** – is a designation used in Arizona for adults who have a diagnosed chronic and long term mental health condition which impacts a person's ability to perform day-to-day activities or interactions. Adults age 18 and over who qualify for the SMI designation and ALTCS are eligible for additional behavioral health services through their DDD health plan. Adults who qualify for the SMI designation but not ALTCS receive behavioral health services through the RBHA.

**The purpose of the SED and SMI designation** is to ensure supports and services are made available to those who need them the most

**To qualify for SED or SMI Designation, an individual must:**

- Have been diagnosed with a qualifying behavioral health condition
- Experience a functional impairment as a result of the behavioral health diagnosis.

## Changes at age 18

- The SED designation will not automatically qualify a person for an SMI designation once they turn 18. SED youth transitioning to adulthood are eligible for SMI evaluation at 17.5 year olds. The goal is to have the evaluation completed by the time the individual turns 18 to ensure that, if approved, the treatment team can have a plan in place to transition from children's SED to adult SMI services without interruption of services.
- **Solari** is the agency identified by AHCCCS to review SED and SMI evaluations and make the eligibility determinations.
- For more information, please visit <https://community.solari-inc.org/eligibility-and-care-services>.



## Members aged 21 and older:

- Heart;
  - Single lung and double lung;
  - Heart-Lung;
  - Liver;
  - Cadaveric kidney and living donor kidney;
  - Simultaneous liver and kidney;
  - Simultaneous pancreas and kidney;
  - Pancreas after kidney; and
- Hematopoietic Stem Cell Transplants:
    - Allogeneic related;
    - Allogeneic unrelated;
    - Autologous; and
    - Tandem Hematopoietic Stem Cell Transplant

# Children's Rehabilitative Services

- The DDD Health Plan shall establish a process to ensure coordination of care for members that includes allowing members with a **Children's Rehabilitative Services** (CRS) designation turning 21 the choice to continue being served by an **Multi-Specialty Interdisciplinary Clinic** (MSIC) that is able to provide services and coordinate care for adults with special healthcare needs.

# Hospice and Palliative Services

- As specified in Section 2302 of the Affordable Care Act, EPSDT-aged members may continue to receive curative treatment for a terminal illness while receiving hospice services.
- Adult members aged 21 and older who elect hospice services shall forgo curative care related to the terminal diagnosis but may continue to receive services unrelated to the hospice diagnosis.

# Nutritional Supplements

- The Contractor and Fee-for-Service Programs cover nutritional therapy on an enteral, parenteral, or oral basis when determined medically necessary to provide either complete daily dietary requirements, or to supplement a member's daily nutritional and caloric intake.
- DDD and AHCCCS adhere to Medicare requirements for the provision of **Total Parenteral Nutrition (TPN)** services.
- Soy formula is covered only for members receiving EPSDT services and KidsCare members diagnosed with galactosemia and only until members are able to eat solid lactose-free foods.

- Based on a personal and expressed preference to not have children, sterilization can be performed, including:
  - Vasectomy
  - Tubal ligation
  - Not a hysterectomy for the purpose of sterilization
- Requires informed consent
- Requires second level review

# School-Based Services

- The AHCCCS **Medicaid School-Based Claiming** (MSBC) Program, specifically, the **Direct Service Claiming** (DSC) Program that provides direct Medicaid reimbursement for certain Medicaid services provided by a participating **Local Education Agency** (LEA).
- Medicaid 1905(a) covered services are reimbursable when provided by DSC qualified providers to EPSDT aged students that require physical and/or behavioral health services identified as medically necessary in an IEP, IFSP, or other medical plan of care. Members ages 21 to 22 who are enrolled in AHCCCS Title XIX services are covered within the same service limitations that apply to all eligible AHCCCS members age 21 and older.

The Division shall cover immunizations for adults that include, but are not limited to:

- Diphtheria-tetanus,
- Influenza,
- Coronavirus Disease 2019 (COVID-19),
- Pneumococcus,
- Rubella,
- Measles,
- Hepatitis A,
- Hepatitis B,
- Pertussis,
- Zoster vaccine, for members 50 years of age and older,
- Human Papillomavirus (HPV) vaccine.

# Supported Decision Making

- **"Supported Decision-Making"** means a process of supporting and accommodating an adult to enable the adult to make life decisions, including decisions related to where the adult wants to live, the services, support, and medical care the adult wants to receive, whom the adult wants to live with and where the adult wants to work, without impeding the adult's self-determination.
- **"Supported Decision-Making Agreement"** means an agreement between an adult and a supporter that is entered into.
- **"Supporter"** means a person who is at least eighteen years of age and who enters into a supported decision-making agreement with an adult.



- Under Arizona law, a person with a developmental disability is presumed legally competent in guardianship proceedings until the court makes a determination to the contrary.
- Only a court can determine that someone needs a guardian.
- Neither the family nor a Support Coordinator can unilaterally or jointly make that determination.
- The individual, a family member, or any person interested in his/her welfare may petition the court (file a request for a hearing in a State court).
- The court will appoint an attorney to represent the allegedly incapacitated person in the hearing unless the individual has their own attorney.
- To encourage the self-reliance and independence of the individual (the ward), the court may grant them the right to handle part of their money or property without the consent or supervision of a conservator.
- Before a guardian can be appointed, the court must be satisfied "by clear and convincing evidence" that the appointment of a guardian or conservator is necessary to provide for the demonstrated needs of the individual.

**Thank you!**

Vicki D. Copeland, MD, FAAFP



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**Questions?**



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**Thank You**