

DEPARTMENT OF HEALTH AND SOCIAL SERVICES
DIVISION OF MEDICAID AND MEDICAL ASSISTANCE
Statutory Authority: 31 Delaware Code, Section 512 (31 Del.C. §512)

FINAL

ORDER

Health Home Services

NATURE OF THE PROCEEDINGS:

Delaware Health and Social Services ("Department") / Division of Medicaid and Medical Assistance initiated proceedings to amend Title XIX Medicaid State Plan regarding Health Home Services, specifically, to expand Delaware's Assertive Community Integration Support Team (ACIST) program which supports individuals with Severe and Persistent Mental Illness (SPMI) and intellectual and developmental disabilities (I/DD). The Department's proceedings to amend its regulations were initiated pursuant to 29 Delaware Code Section 10114 and its authority as prescribed by 31 Delaware Code Section 512.

The Department published its notice of proposed regulation changes pursuant to 29 Delaware Code Section 10115 in the October 2018 Delaware *Register of Regulations*, requiring written materials and suggestions from the public concerning the proposed regulations to be produced by October 31, 2018 at which time the Department would receive information, factual evidence and public comment to the said proposed changes to the regulations.

SUMMARY OF PROPOSAL

Effective for services provided on and after October 1, 2018 Delaware Health and Social Services/ Division of Medicaid and Medical Assistance proposes to amend section 3.1-H and 4.19 B Page 28 of Title XIX Medicaid State Plan regarding Health Home Services.

Background

Delaware's ACIST (Assertive Community Integration Support Team) program supports individuals with Severe and Persistent Mental Illness (SPMI) and intellectual and developmental disabilities (I/DD) or Autism to receive a comprehensive, holistic team-based approach to crisis intervention, intensive case management, behavior analysis, psychiatric supports and monitoring of medical conditions in a multi-disciplinary model. The ACIST Health Home program is designed to provide a whole-person approach to supports and services to individuals with dual diagnosis and to ensure strong integration across behavioral health, somatic health and long-term supports and services. The ACIST program is tailored to individuals with chronic conditions of SPMI and I/DD who may require additional and/or different services or modalities to ensure effective intervention. The goals of the ACIST Health Home are:

- a) To lessen or eliminate critical health and safety issues that each member might experience, working toward preventing or mitigating these signs, symptoms, and/or social issues that could lead to crisis situations and the need for hospitalization or re-hospitalization
- b) To provide transitional support and post psychiatric hospitalization follow along that will assist the individual in ameliorating the effects of their mental health condition and dual diagnosis and prevent avoidable readmissions
- c) To improve the overall medical and physical health of the individual
- d) To meet basic human needs and enhance quality of life
- e) To improve the person's opportunity to be successful in social and employment roles and activities
- f) To increase active participation in the person's community
- g) To partner with families, support systems and/or significant other in supporting the individual's recovery

Statutory Authority

- Section 1902(a) of the Social Security Act and 42 CFR 447

Purpose

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The purpose of this proposed regulation is to expand Delaware's Assertive Community Integration Support Team (ACIST) program which supports individuals with Severe and Persistent Mental Illness (SPMI) and intellectual and developmental disabilities (I/DD).

Summary of Proposed Changes

Effective for services provided on and after October 1, 2018 Delaware Health and Social Services/Division of Medicaid and Medical Assistance (DHSS/DMMA) proposes to amend section 3.1-H and 4.19 B Page 28 of Title XIX Medicaid State Plan regarding Health Home Services.

Public Notice

In accordance with the *federal* public notice requirements established at Section 1902(a)(13)(A) of the Social Security Act and 42 CFR 447.205 and the state public notice requirements of Title 29, Chapter 101 of the Delaware Code, Delaware Health and Social Services (DHSS)/Division of Medicaid and Medical Assistance (DMMA) gives public notice and provides an open comment period for thirty (30) days to allow all stakeholders an opportunity to provide input on the proposed regulation. Comments were to have been received by 4:30 p.m. on October 31, 2018.

Centers for Medicare and Medicaid Services Review and Approval

The provisions of this state plan amendment (SPA) are subject to approval by the Centers for Medicare and Medicaid Services (CMS). The draft SPA page(s) may undergo further revisions before and after submittal to CMS based upon public comment and/or CMS feedback. The final version may be subject to significant change.

Provider Manuals and Communications Update

Also, there may be additional provider manuals that may require updates as a result of these changes. The applicable Delaware Medical Assistance Program (DMAP) Provider Policy Specific Manuals and/or Delaware Medical Assistance Portal will be updated. Manual updates, revised pages or additions to the provider manual are issued, as required, for new policy, policy clarification, and/or revisions to the DMAP program. Provider billing guidelines or instructions to incorporate any new requirement may also be issued. A newsletter system is utilized to distribute new or revised manual material and to provide any other pertinent information regarding DMAP updates. DMAP updates are available on the Delaware Medical Assistance Portal website: <https://medicaid.dhss.delaware.gov/provider>

Fiscal Impact Statement

The following fiscal impact is projected:

	State Fiscal Year 2019	State Fiscal Year 2020
General (State) funds	\$36,338	\$48,450
Federal funds	\$327,038	\$436,050

Summary of Comments Received with Agency Response and Explanation of Changes

Two commenters offered the following summarized observations:

Comment: One commenter questioned whether health home funding would pay for direct services or only the six services outlined in the program description:

1. Comprehensive care management
2. Care coordination
3. Health promotion
4. Comprehensive transitional care/ follow up
5. Patient and family support; and
6. Referral to community and social support services.

Agency Response: The six services listed above are designated aspects of the Health Home Model and do not replace direct services currently available within the existing Medicaid State Plan. The Health Home will not pay for services already offered within the State Plan and will ensure non-duplication between Health Home benefits and State Plan and Medicaid HCBS services

Comment: Two commenters stated that it was unclear if children were included.

Agency Response: DMMA agrees that services to Delaware children with serious emotional disturbance (SED) and intellectual and developmental disabilities (ID/DD) is vital to their and their family's success. The proposed regulation does not exclude children, however, Delaware expects that children's utilization of the Health Home benefit to be minimal since the benefits cannot replace services already available to children through the Medicaid State Plan. Title XIX of the Social Security Act requires states to provide Early and Periodic Screening, Diagnostic and Treatment (EPSDT), which includes comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid. As such, Delaware offers a full array of behavioral and physical health services designed to meet the needs of children.

Comment: Two commenters suggested that although the primary focus of the Health Home program is care coordination, there was limited information about how the program will coordinate with the MCO's.

Agency Response: The ACIST program will be implementing a person centered treatment plan which will include necessary linkages to supports and services for its effective implementation to include coordination with MCO's.

DMMA is pleased to provide the opportunity to receive public comments and greatly appreciates the thoughtful input given.

FINDINGS OF FACT:

The Department finds that the proposed changes as set forth in the October 2018 *Register of Regulations* should be adopted.

THEREFORE, IT IS ORDERED, that the proposed regulation to amend Title XIX Medicaid State Plan regarding Health Home Services, specifically, *to expand Delaware's Assertive Community Integration Support Team (ACIST) program which supports individuals with Severe and Persistent Mental Illness (SPMI) and intellectual and developmental disabilities (I/DD)* is adopted and shall be final effective December 11, 2018.

11/16/18

Date of Signature

Kara Odom Walker, MD, MPH, MSHS
Secretary, DHSS

***Please Note: Due to the size of the regulation, it is not being published here. A copy of the regulation is available at:**

**<http://regulations.delaware.gov/register/december2018/final/Health Home Services.pdf>
Health Home Services**

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