TBI Waiver Provider Listening Session Questions and Answers

Hosted by Alliance 12.15.17

Q: If someone is TBI and needs support, but lives in the community (i.e. not in a nursing home), can they still apply?
A: Yes. Applicants can be in the community, they can apply for the waiver at that level of care. They do not need to be in a nursing home setting.

Q: Do families need to put people on the list for the waiver, or will screening automatically place them on the list?
A: They would need to call to submit a name for the list. The screening will not place them on the list. There will be announcements about submitting for qualification, and a process that treats all applicants equally.

Q: There’s a 49-slot threshold and a dollar cap. If one is reached before the other – if there is still money available after 49 slots are filled – will more slots be added? Or, if the money is exhausted before 49 slots are filled, will the remaining slots be withheld?
A: The money allotted is per individual. The cap is on any individual’s services.

Q: How many slots are there per year?
A: The current plan is 49 in the first year, 99 in the second year, and 107 in the third year. In the first year, 5 slots are for specialty and 44 are not. There are no specific numbers yet for the second or third year, but it will remain a 2-tier waive with some similar distribution.

Q: Are there going to be specified numbers of applicants among the four counties in the catchment area?
A: There has been discussion about this – it may depend upon application numbers, but there will be a consideration of distribution among the population areas.

Q: Are there services that are not subject to an RFA/RFP process? Will there be services that have that process?
A: Yes. The proposed service array is available on the website; when it’s approved, it may look different. We may RFP some specific services, depending upon what decisions are made. We will be asking providers what services they are interested in via SurveyMonkey.

Q: Will there be different criteria for TBI waiver vs. other waivers in terms of provider requirements?
A: No. We will have to follow CMS’s criteria. these are found in the waiver application under Service Requirements. We will provide support through learning collaboratives, and regular meetings for providers.
Q: At what point will rates be available to providers?
A: We hope to have this once the waiver is approved.

Q: Typically, Alliance can adjust rates. Would they be able to do that here?
A: More likely not, since this is a pilot program, and Alliance has had some cuts in state funding. It is difficult to say how rates need to be adjusted, especially in the program’s first year.

Q: This is a 3-year pilot?
A: Yes. Currently, it will just be in our catchment area, but there is hope to go state-wide after the pilot is completed.

Q: Are you looking for providers to provide services in their own counties, or across counties?
A: We will be asking providers what areas they are currently in and what areas they would be interested in.

Q: How will you get word out about the waitlist, and how will you handle the volume of calls?
A: We will be asking for your thoughts/suggestions on how to get the communication out. There is also a subcommittee working on that right now, how to get information out to the widest audience. The eligibility criteria for the waitlist will be part of the information distributed. People will be encouraged to call, so that they will be eligible once the tailored plans come into effect. Outreach groups may assist with getting word out about the lists. There will be two, since it is a two-tier waiver.

Q: What is the timeline with approval from CMS?
A: It has been a hurry-up-and-wait situation with them. We will have at least 90 days after CMS approval to have a dialogue with DMA to determine the best course of action once we go live. We won’t make people wait the 90 days to call – we would likely start taking calls and possibly doing RFPs once we receive the approval. We will work with the Access center to make sure they’re ready to take those calls.