DEPARTMENT OF SOCIAL SERVICES

Notice of Intent to Submit Emergency Preparedness and Response Amendment (Appendix K) to the Department’s 1915(c) Home and Community-Based Medicaid Waivers

In accordance with the provisions of section 17b-8 of the Connecticut General Statutes, notice is hereby given that the Commissioner of the Department of Social Services (“DSS” or the “Department”) intends to submit an Emergency Preparedness and Response Amendment (“Appendix K amendment”) related to the following 1915(c) Home and Community-Based Medicaid Waivers:

- Connecticut Home Care Program for Elders
- Personal Care Assistance Waiver
- Acquired Brain Injury Waiver
- Home & Community Supports Waiver for Persons with Autism
- Acquired Brain Injury Waiver II
- Mental Health Waiver
- Katie Beckett Waiver

The Appendix K amendments are temporary and expire six months following the expiration of the Federal Public Health Emergency related to the continued consequences of the Coronavirus Disease (COVID-19) pandemic. The following is a summary of the proposed changes, as more-fully described in the Appendix K amendment.

I. The Department is proposing the following temporary increases in provider payment rates:

- 3.5% rate increase, retroactive to July 1, 2021, in existing rates approved by CMS for all provider types and services covered under this Appendix K, other than those specifically excluded. This 3.5% increase is required for cost-of-living adjustments in order to recognize the significant cost increases experienced for service providers during the pandemic. Provider types and services specifically excluded: Assistive Technology; Environmental Accessibility Modifications; Personal Response Systems; Skilled Chore; Specialized Medical Equipment; Individual Goods and Services; and all Self-Directed Services.
• 6% minimum wage increase, retroactive to August 1, 2021, and pursuant to PA 19-4, for provider types where rates, as approved, are based on minimum wage. Service rates impacted by increase in minimum wage: Agency-based Personal Care Assistants (PCAs), Chore/Homemaker, Companion Services, Assisted Living Services, Adult Day Health, Recovery Assistance; Community Mentor; and Agency-based Respite Services.

• 1% enhanced performance-based supplemental payments, based on the requirements and methodology listed below, for all provider types covered under the waivers listed in this Appendix K as of the issuance date of the respective payment, other than those provider types and services specifically excluded. Excluded providers and services: Assistive Technology; Environmental Accessibility Modifications; Personal Response System; Skilled Chore; Specialized Medical Equipment; Individual Goods and Services; and all Self-Directed Services.

Performance requirements for the March 2022 performance payment are as follows, and are based on 1% of expenditures beginning July 1, 2021 and ending February 28, 2022:
   1) Participation in the DSS Racial Equity Training
   2) Provider has a data sharing agreement executed with Connie, the state’s Health Information Exchange (HIE).

Performance requirements for the July 2022 performance payment are as follows:
   1) Participation in the DSS Racial Equity Training
   2) Signing, at a minimum, the Empanelment Use Case
   3) Action plan detailing how the provider sends their client roster in Connie, the state’s HIE.

The payment methodology for quarterly ongoing performance payments, including the July 2022 payment, are based on 1% of expenditures for the quarter that immediately precedes the payment. For the July 2022 payment, this is 1% of expenditures beginning March 1, 2022 and ending June 30, 2022.
5% enhanced one-time supplemental payment for recruitment and retention of staff, estimated at 5% of total SFY 2021 expenditures for all providers other than those provider types and services specifically excluded. The one-time supplemental payment will be made to eligible providers within 30 days of the Centers for Medicare and Medicaid Services (“CMS”) approval of this Appendix K. Supplemental payments are based on 5% of SFY 21 expenditures. All provider types covered under the waivers applicable to this Appendix K that are enrolled upon the payment issuance date are eligible for the 5% enhanced supplemental payment, other than those provider types listed as excluded services. Excluded providers and services: Assistive Technology; Environmental Accessibility Modifications; Personal Response Systems; Skilled Chore; Specialized Medical Equipment; Individual Goods and Services; and all Self-Directed Services.

II. The Department is proposing to temporarily add the following services across all waivers referenced above:

- **COPE Caregiver Supports and Participant Training**: The state will implement the evidence-based COPE (Care of Persons with Dementia in their Environments) program. The COPE intervention is designed to optimize older adults' functional independence, and to improve caregiver dementia management skills and health-related outcomes. COPE features coordinated in-home occupational therapy visits, and skilled nursing visits.

- Caregiver Supports and Participant Training: Care for the Caregiver Program consists of an interdisciplinary team of specialized occupational therapists and nursing services for care of persons other than those with dementia. The evidence-informed program supports family members who are providing extraordinary care to persons living with serious or chronic illness.

- **CAPABLE Program**: The Department will implement the evidence-based environmental adaptation program, CAPABLE (Community Aging in Place, Advancing Better Living for Elders). The program includes a nurse, an occupational therapist, and a handy worker to address the home environment, and uses the strengths of the older adults themselves to improve safety and independence.
A complete text of the Appendix K amendment is available, at no cost, upon request to the Community Options Unit, Department of Social Services, 55 Farmington Ave., Hartford, Connecticut 06105; or via email to shirlee.stoute@ct.gov. It is also available on the Department’s website, www.ct.gov/dss, under “News and Press,” as well as the following direct link: http://portal.ct.gov/DSS/Health-And-Home-Care/Medicaid-Waiver-Applications/Medicaid-Waiver-Applications. In addition, it is also available on the Department of Mental Health and Addiction Services (DMHAS) website, www.ct.gov/dmhas, under “What’s New!” as well as the following link: https://portal.ct.gov/DMHAS/Programs-and-Services/Mental-Health-Waiver/Mental-Health-Waiver.

Any written comments must be submitted by December 30, 2021 to the Department of Social Services, Community Options Unit, 55 Farmington Ave, Hartford, CT 06105, Attention: Jennifer Cavallaro, Director; or via email to Jennifer.Cavallaro@ct.gov.