

## **DEPARTMENT OF SOCIAL SERVICES**

### **Notice of Proposed Medicaid State Plan Amendment (SPA)**

#### **SPA 20-L: Updates to Alternative Benefit Plan (ABP) for the Medicaid Coverage Group for Low-Income Adults Regarding Connecticut Housing Engagement and Support Services (CHESS) Initiative State Plan Home and Community-Based Services (HCBS) Pursuant to Section 1915(i) of the Social Security Act**

The State of Connecticut Department of Social Services (DSS) proposes to submit the following Medicaid State Plan Amendment (SPA) to the Centers for Medicare & Medicaid Services (CMS) within the U.S. Department of Health and Human Services (HHS), which will amend the Alternative Benefit Plan (ABP) at Attachment 3.1-L of the Medicaid State Plan.

The ABP is the benefit package that, effective January 1, 2014, is provided to the Medicaid low-income adult population under section 1902(a)(10)(A)(i)(VIII) of the Social Security Act (also known as HUSKY D). Pursuant to section 2001 of the Affordable Care Act, effective January 1, 2014, Connecticut expanded Medicaid eligibility to low-income adults with incomes up to and including 133% of the federal poverty level. The expanded coverage group is referred to as Medicaid Coverage for the Lowest-Income Populations.

#### **Changes to Medicaid State Plan**

Effective on or after June 1, 2020, SPA 20-L will amend the ABP (Attachment 3.1-L of the Medicaid State Plan) in order to add CHESS through Medicaid State Plan HCBS services pursuant to section 1915(i) of the Social Security Act. The purpose of the CHESS Initiative is to improve housing stability and health outcomes for a targeted set of Medicaid members who have complex health conditions, have experienced homelessness, and have been determined to be likely to benefit from targeted tenancy sustaining services. All details regarding the CHESS Initiative, which are being incorporated by reference into the ABP are described in SPA 20-K.

This SPA will not make any other changes to the ABP than as described above, which will continue to reflect the same coverage in the ABP for HUSKY D Medicaid members as in the underlying Medicaid State Plan. Accordingly, the ABP will continue to provide full access to Early and Periodic Screening, Diagnostic and Treatment (EPSDT) services to beneficiaries under age twenty-one. This includes informing them that EPSDT services are available and of the need for age-appropriate immunizations. The ABP also provides or arranges for the provision of screening services for all children and for corrective treatment as determined by child health screenings. These EPSDT services are provided by the DSS fee-for-service provider network.

EPSDT clients are also able to receive any additional health care services that are coverable under the Medicaid program and found to be medically necessary to treat, correct or reduce illnesses and conditions discovered regardless of whether the service is covered in Connecticut's Medicaid State Plan.

Likewise, this SPA will not make any changes to cost sharing for the services provided under the ABP. Connecticut does not currently impose cost sharing on Medicaid beneficiaries. Because there are no Medicaid cost sharing requirements for Connecticut beneficiaries, no exemptions are necessary in order to comply with the cost sharing protections for Native Americans found in section 5006(e) of the American Recovery and Reinvestment Act of 2009.

### **Fiscal Impact**

This SPA will not change annual aggregate expenditures.

### **Obtaining SPA Language and Submitting Comments**

The proposed SPA is posted on the DSS website at this link: <http://portal.ct.gov/dss>. Scroll down to the bottom of the webpage and click on "Publications" and then click on "Updates." Then click on "Medicaid State Plan Amendments". The proposed SPA may also be obtained at any DSS field office, at the Town of Vernon Social Services Department, or upon request from DSS (see below).

To request a copy of the SPA from DSS or to send comments about the SPA, please email: [Public.Comment.DSS@ct.gov](mailto:Public.Comment.DSS@ct.gov) or write to: Department of Social Services, Medical Policy Unit, 55 Farmington Avenue, 9th Floor, Hartford, CT 06105 (Phone: 860-424-5067). Please reference "SPA 20-L: Update to Alternative Benefit Plan (ABP) for the Medicaid Coverage Group for Low-Income Adults to Add CHESS Initiative Section 1915(i) State Plan HCBS".

Anyone may send DSS written comments about this SPA. Written comments must be received by DSS at the above contact information no later than January 30, 2020.

**"SPECIAL NOTICE: The public comment deadline has been extended until February 7, 2020".**



# Alternative Benefit Plan

Other: <input type="text" value="See Attachment 3.1-K for details regarding this benefit (created through approved SPA 15-012), including service components, limits, and provider information."/>		<input type="button" value="Remove"/>
Other 1937 Benefit Provided: <input type="text" value="Behavioral Health Homes Pursuant to Section 1945"/>	Source: <input type="text" value="Section 1937 Coverage Option Benchmark Benefit Package"/>	<input type="button" value="Remove"/>
Authorization: <input type="text"/>	Provider Qualifications: <input type="text" value="Medicaid State Plan"/>	
Amount Limit: <input type="text" value="See Attachment 3.1-H"/>	Duration Limit: <input type="text" value="None"/>	
Scope Limit: <input type="text" value="See Attachment 3.1-H"/>		
Other: <input type="text" value="See Attachment 3.1-H for details regarding this benefit (created through SPA 15-014), including service components, limits, and provider information."/>		
Other 1937 Benefit Provided: <input type="text" value="Other Medical Care: Integrated Care Models - PCMH+"/>	Source: <input type="text" value="Section 1937 Coverage Option Benchmark Benefit Package"/>	<input type="button" value="Remove"/>
Authorization: <input type="text"/>	Provider Qualifications: <input type="text" value="Medicaid State Plan"/>	
Amount Limit: <input type="text" value="None"/>	Duration Limit: <input type="text" value="None"/>	
Scope Limit: <input type="text" value="See Attachment 3.1-A."/>		
Other: <input type="text" value="As described in Attachment 3.1-A, the Person-Centered Medical Home Plus (PCMH+) is an integrated care model within the Other Medical Care benefit category in section 1905(a)(29) of the Social Security Act and includes the provision of primary care case management services as defined in section 1905(t) of the Social Security Act."/> <input type="text" value="See Attachment 3.1-A for details regarding this benefit (created through SPA 17-0002), including service components, limits, and provider information."/>		
Other 1937 Benefit Provided: <input type="text" value="CT Housing Engagement and Support Services (CHES+)"/>	Source: <input type="text" value="Section 1937 Coverage Option Benchmark Benefit Package"/>	
Authorization: <input type="text" value="Prior Authorization"/>	Provider Qualifications: <input type="text" value="Medicaid State Plan"/>	



# Alternative Benefit Plan

Amount Limit:

See Attachment 3.1-i

Duration Limit:

Remove

Scope Limit:

See Attachment 3.1-i

Other:

As described in Attachment 3.1-i, the Connecticut Housing Engagement and Support Services (CHESS) program is an optional state plan home and community-based services benefit pursuant to section 1915(i) of the Social Security Act. The purpose of the CHESS Initiative is to improve housing stability and health outcomes for a targeted set of Medicaid members who have complex health conditions, have experienced homelessness, and have been determined to be likely to benefit from targeted tenancy sustaining services.

See Attachment 3.1-i for details regarding this benefit (initially created through SPA 20-K), including needs-based criteria, targeting criteria, service components, limits, and provider qualifications.

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