



## Clinical Communication Bulletin 014

To: Providers of Innovations Waiver Services  
From: Cindy Ehlers, Vice President of Clinical Operations  
Date: Wednesday, October 10, 2018  
Subject: LME-MCO Communication Bulletin #J307: NC Innovations Waiver Flexibility Due to Hurricane Florence and flexibility related to other funding streams.

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This communication is intended to provide clarification regarding required provider actions and MCO actions for some of the items listed in the LME-MCO Communication Bulletin #J307: NC Innovations Waiver Flexibility Due to Hurricane Florence. Not all items in the LME-MCO Communication Bulletin are included as many are not directly related to provider requirements or actions. The effective date for all items below begins September 10, 2018 and ends on December 31, 2018 unless otherwise noted.

1. More than the maximum number of hours allowed of Innovations Waiver services may be provided by a relative of an adult who resides with the waiver beneficiary for 90 days.
  - 🌿 Providers will send an email to Tim Patterson [Tim.Patterson@TrilliumNC.org](mailto:Tim.Patterson@TrilliumNC.org), with RAP Hurricane Florence written in the subject line. **Email subject lines are not secure and should not include PHI.** Provide the following in your email to Tim Patterson:
    - Member name and date of birth.
    - Service being provided.
    - The date you implemented the option. Tim Patterson will respond to you and provide the date by which the 90 days (business) will end.
    - The number of additional hours to be provide by a relative, not to exceed the approved hours. If additional hours are required, those hours should be requested as outlined below in Number 4 below Example 2.
2. Allow for additional services to be provided by relatives who live in the home of the adult Waiver beneficiary (current Waiver only allows for Community Living and Supports) to include Community Networking and Supported Employment for 90 days.

🌱 Providers should follow the instructions in number 1 above.

3. Relatives of waiver beneficiaries who reside in the home or out of the home to provide services prior to a background check and training for 90 days. It is understood that the background check will be completed by the agency as soon as possible after the service begins and training will occur as soon as possible without leaving the beneficiary without necessary care.

🌱 Providers will document the dates training and background checks occurred for each impacted staff and provide to Trillium when requested.

4. **Services may be provided without prior approval from Sept. 14, 2018 to Dec. 29, 2018.**

🌱 During this timeframe, if the member already has an authorization providers may bill until authorizations have been claimed (billed and paid). UM will not review for Medical Necessity during this time frame but the TAR is required to pay the claims above what was previously authorized. This may look different depending on the members plan.

**Example 1-** If the provider has a block of hours authorized of 1000 CLS hours but the original plan was to use 20 h/w. Now related to the storm and members' needs they are using 60 h/w. When they run out of authorized units, the provider will need to put in a TAR for more hours to be able to continue the original hours of 20h/w. UM will not deny the additional hours/ months in the future and there will not have to be a plan revision. Providers are expected to complete a note in the TAR indicating "initial hours increased from 20 to 60 from 9-12-18- 10-12-18 due to Hurricane Florence CB J307".

**Example 2-** If the provider was ONLY authorized 20 hours/week of CLS then they will have to request additional hours. Providers are expected to complete a note in the TAR indicating "initial hours increased from 20 to 60 from 9-12-18- 10-12-18 due to Hurricane Florence CB J307". UM will approve and reference Hurricane Florence without a plan revision.

5. **Direct care may be provided in a hotel, shelter, church, or alternative facility-based setting or the home of a direct care worker when the waiver participant is displaced from the home because of the hurricane, or the provider facility is inaccessible/damaged.**

🌱 Providers should notify the Care Coordinator and Trillium Network department if this has occurred. Providers must inform the Trillium Network department where the member is currently located. Providers should also ensure their internal records reflect the reasons for this occurring and CB J307 and the temporary location. There is no need to change locations for filing claims to reflect the temporary site. Providers should continue to bill on the existing authorizations that are already in place for members of any service type and all funding sources to include state funding, Medicaid, Medicaid (b)(3).

6. Repair or replacement of home and vehicle modifications and waiver equipment, supplies, or assistive technology in excess of the waiver period limitations.
  - 🌱 Members/LRPs and providers need to inform the Care Coordinator if the member has needs in this area as a result of the effects of Hurricane Florence. The Care Coordinator will work with the member/LRP and team to secure needed items.
7. Repair or replacement of participant goods and services in excess of the waiver year limitations.
  - 🌱 Members/LRPs and providers need to inform the Care Coordinator if the member has needs in this area as a result of the effects of Hurricane Florence. The Care Coordinator will work with the member/LRP and team to secure needed items.
8. The \$135,000 waiver limit may be exceeded due to additional services, equipment, or modifications during the Hurricane.
  - 🌱 Members/LRP/providers need to inform the Care Coordinator if the member has needs **based on the effects of Hurricane Florence** that result in the member exceeding the annual maximum of \$135,000.
9. Respite may also be provided out of state for individuals who have been displaced.
  - 🌱 Providers will submit the Out of State form and submit to the members Care Coordinator. [Out of State Travel Request Form](#)
10. Providers must resume compliance with normal Medicaid rules and regulations as soon as you are able to do so, or by January 1, 2019 at the latest unless other extensions are granted.
  - 🌱 Services should be requested and provided according to members' Individual Support Plan according to established guidelines.
  - 🌱 Providers who are unable to comply with Medicaid rules and regulations by January 1, 2019 due to the impact of Hurricane Florence, should submit a Network ticket indicating further assistance requested related to Hurricane Florence, no later than December 15, 2018..

Thank you for your attention to this communication. Questions regarding this Clinical Communication Bulletin may be sent to: [UM@Trilliumnc.org](mailto:UM@Trilliumnc.org).