



Eric Holcomb, Governor
State of Indiana

Indiana Family and Social Services Administration

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Dr. Daniel Rusyniak, Secretary

**FSSA Responses to Requests
Received from Indiana Families United for Care**

1. FSSA stop holding NOA approvals hostage for other waiver services as a way to force ATTC hours down prior to 7/1. Ex. Home modifications, specialized medical equipment & generators

Service plan approvals are not being intentionally delayed. In March, we began reviewing service plans to ensure the services requested are compliant with the CMS approved service definitions and consistent with the individual's needs. Having state staff engaged to review service plans could result in a longer review period as compared to what members experienced when receiving automatic approvals.

Members continue to receive the previously approved services during the service review process.

As a result of the service plan review, some plans will be approved while others will be denied. For those that are denied, the individual may appeal the decision and/or resubmit a modified service plan.

2. We be provided with the evaluation tool that FSSA has instructed CM's to use when evaluating SFC tiers. And if this tool has not been released yet, when is that expected release date and does the recommended tool take into account the medical complexity of the patient outside of just the ADL and IDL factors.
For pediatric members, care managers will not be using an evaluation tool to determine an appropriate tier level, at this time. Instead, for purposes of the transition, pediatric members will have their SFC tier determined based on the number of authorized attendant care hours, as of May 1:

- SFC Level One: 1-20 hours/week
- SFC Level Two: 21-40 hours/week
- SFC Level Three: 41+ hours/week

The [recently published transition update](#) provides additional details on how pediatric SFC assessments will be handled post-transition.

3. FSSA appoint a designated Ombudsman to assist with ATTC/SFC related transition issues and have said Ombudsman's contact information posted publicly on the Medicaid Strategies website and provide to us within 48 hours of being appointed.
Ombudsmen are designated in state statute. The FSSA solicits feedback on program and policy changes through individual and family advocacy groups, provider associations, and other stakeholder organizations.
4. FSSA embargo the requirement for PA hours until 7/1 due to lack of communication and notification BY FSSA to members, CM/s AND providers to allow for all party's to work through the process of getting these in place. Home Care Agencies are informing us that this is a 6-10 week process to get these written, approved and staffed.
Previously approved waiver services remain approved until PA hours are approved and in place. Per CMS guidance, waiver services are intended to complement and/or supplement the services that are available through the Medicaid State plan. In directing individuals to access PA hours, we are adhering to the requirement that waiver services are utilized only when there is a need for additional services not covered under the state plan.
5. FSSA give us a 90 day delay on implementation in order to provide clarify to families, CM's and SFC providers alike concerning the SFC evaluation process, final approval, for the over 300 new SFC provider applicants and allow families the time to interview agencies for appropriateness for their situation
We will be moving forward with the transition on July 1, 2024 without delay. To support the transition FSSA is doing the following:
 - Hosting bi-weekly training and informational webinars for care managers since March to prepare them for transition activities and engagement with waiver recipients. These will continue through the transition period.
 - Hosting bi-weekly webinars for individuals and families through July to provide regular guidance, information, and updates regarding the waiver transition.
 - Publishing a bi-weekly newsletter designed for individuals and families to provide up to date information, steps of the waiver transition to be preparing for, commonly asked questions, etc.

All information for waiver recipients and care managers is available on our Medicaid Strategies website located at <https://www.in.gov/fssa/medicaid-strategies/>.

If you have not been contacted by your care manager or if the care manager is unable to answer your questions, please contact your care management company or AAA. If after following these steps you still need support, you can email DAresponseteam@fssa.in.gov.

6. FSSA post an FAQ with responses based on the questions that families ask on the interactive webinars to be accessible on the Medicaid Strategies webpage.

All questions being received are informing FAQs that are regularly updated to the website located at <https://www.in.gov/fssa/medicaid-strategies/>.

7. When waiver services are denied, proper written notification be provided for families within 5 business days of notifying the case manager.
Care managers are required to provide notices of action to members 10 days prior to a change in services. FSSA will encourage care managers to share notices of action as soon as possible.
8. FSSA publicly post the version of the H&W, TBI, and PathWays waivers that were submitted to CMS for approval.
These documents will be posted on May 3. Please note that they have not been approved by CMS and are subject to change.
9. Respite nursing be an allowed service for families choosing SFC
In response to feedback from families during the waiver public comment period, FSSA requested approval from CMS for eligible individuals to be able to receive skilled respite while receiving structured family caregiving. This is in addition to the 15 days per calendar year of unskilled respite available within SFC. Also, foster parents will be able to provide SFC. Both changes are pending CMS approval.
10. That FSSA reconsider allowing access to ATTC with an appropriate evaluation tool, guidelines, guardrails, and a limit on LRI provided hours.
FSSA continues to allow access to Attendant Care, but it cannot be provided by a legally responsible individual. FSSA considered a number of ways to support families in a person-centered way. This specific transition strategy allows us to continue to pay and support the majority of families in providing services as an LRI in a fiscally sustainable way under Structured Family Caregiving, in compliance with our CMS approved waivers.