



North Dakota Medicaid 1915(i) State Plan Amendment Benefits Planning

Medical Services Division & Behavioral Health Division nd1915i@nd.gov

1915(i) Services

- Care Coordination
- Training and Supports for Unpaid Caregivers
- Community Transition Services
- Benefits Planning
- Non-Medical Transportation
- Respite

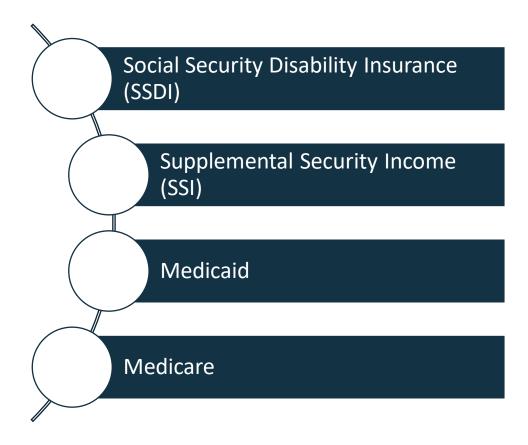
- Family Peer Support
- Peer Support
- Prevocational Training
- Supported Education
- Supported Employment
- Housing Support Services

Purpose of Benefits Planning

Assisting individuals considering employment with making informed decisions regarding public benefits and work incentives.

What is Benefits Planning?

Offers in-depth guidance to participants considering and/or seeking employment about public benefits such as:



What is Benefits Planning?

- Development of an individualized assessment and benefits analysis
- Training & Education on work incentives and income reporting requirements
- Development of a Plan to Achieve Self Support (PASS)
- Assist developing a budget
- Assistance with understanding health care coverage options
- Making referrals and providing information on community resources
- Referrals to Protection & Advocacy for Beneficiaries of Social Security
- Ongoing support and follow-up in managing changes in benefits, work incentives, etc.

Not-Duplicative of Other Services

This service cannot be provided to an individual at the same time as another service that is the same in nature and scope regardless of source, including Federal, state, local, and private entities.

Individuals eligible for multiple Medicaid funded authorities cannot access this service in more than one authority and are required to utilize the service through the alternate authority rather than the 1915(i).

Not-Duplicative of Other Services

Services furnished through Medicaid 1915(i) must not be duplicated by services funded under Section 110 of the Rehabilitation Act of 1973.

- To ensure duplication does not occur, providers must coordinate efforts with the Vocational Rehabilitation Agency.
- Justification that services are not otherwise available to the individual through these agencies under Section 110 of the Rehabilitation Act of 1973 must be documented in the individual's record and kept on file.

Remote support may be utilized for up to 25% of all services provided in a calendar month.

Remote support options are for the benefit of the member, rather than the benefit of the provider.

- Remote support includes real-time, two-way communication between the service provider and the participant.
 Remote support is limited to check-ins (e.g. reminders, verbal cues, prompts) and consultations (e.g. counseling, problem solving) within the scope of services
- Remote support options include:
 - Telephone
 - Secure Video Conferencing

Remote Support

Remote support must:

- be elected by the individual receiving services;
- not block the member's access to the community;
- not prohibit needed in-person services for the member;
- utilize a HIPAA compliant platform; and
- prioritize the integration of the member into the community.

For each utilization, providers must document that the remote support option:

- was elected by the member receiving services;
- did not block the member's access to the community;
- did not prohibit needed in-person services for the member;
- utilized a HIPAA-compliant platform; and
- prioritized the integration of the individual into the community.

Remote Support



Group Provider Requirements

A group provider agency must have a North Dakota Medicaid provider agreement and attest to the following:

- agency will conduct training in accordance with state policies and procedures
- agency will adhere to all 1915(i) standards and requirements
- agency will develop and implement policies and procedures reviewable by NDDHS
- Be knowledgeable of Home & Community Based Settings
- Ensure Individual Practitioners will:
 - Meet the required qualifications
 - Provide services within their scope of practice
 - Have the required competencies identified in the service scope

Individual Provider Requirements

The **individual** providing the service must:

- Be Age 18+
- Be a Certified Work Incentives Counselor (CWIC) and Community Partner Work Incentives Counselor (CPWIC)
- Be employed by an enrolled ND Medicaid enrolled billing group of this service

Rates and Codes

Service Rate and Limits

Code & Modifier

- \$10.49 / 15 minute
- 8 hours per day (32 daily units)
- 20 hours annually (calendar year)
- Up to 25% of total monthly service can be remote/tele-communication
 - Telephone
 - Secure Video Conferencing
- Service authorization requests for additional hours will be reviewed by NDDHS.

H2021 U3

Ongoing Communication between Provider and Care Coordinator

Provider must provide monthly update to Care Coordinator



A participant's need for initial and continued services shall be discussed at each 1915(i) person-centered plan of care meeting and formally evaluated during the WHODAS 2.0 functional needs assessment as part of the initial and annual reevaluation and service authorization/reauthorization process.

PROVIDER RESOURCES



www.behavioralhealth.nd.gov/1915i

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Home / Medicaid 1915(i) State Plan Amendment

Medicaid 1915(i) State Plan Amendment

The North Dakota Medicaid 1915(i) State Plan Amendment allows North Dakota Medicaid to pay for additional home and community-based services to support individuals with behavioral health conditions.

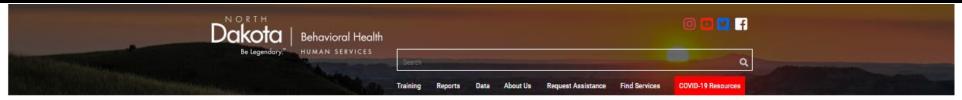








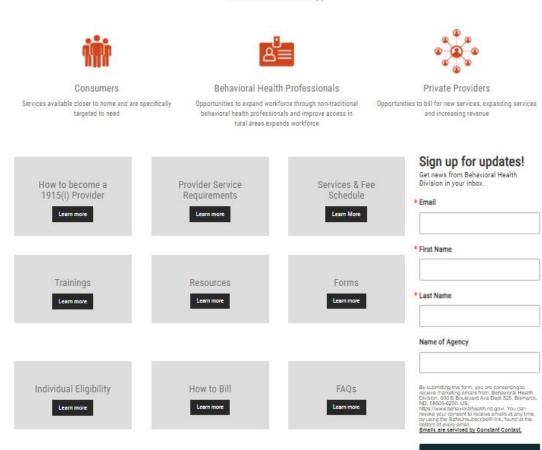
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Enrolling as a 1915(i) Provider and Providing Services

Benefits of 1915(i)



Sign Up!



Technical Assistance Calls for 1915(i) Providers

Medical Services and Behavioral Health Divisions are offering Technical Assistance for 1915(i) providers through a series of calls every Wednesday, beginning January 20, 2021, 1-2pm.

This training is offered online, every Wednesday from 1-2pm CT.

behavioralhealth.nd.gov/1915i/trainings

Submit Questions to: ND1915i@nd.gov



