

To: All Providers

From: Khristine Brewington, MS, LCMHCS, LCAS, CCS, CCJP
VP of Network Management

Date: November 16, 2022

Subject: Clarification on the use of 1915 (b)(3) Respite (JCB#437), Tailored Care Management Implements Temporary Flexibilities and Program Changes

CLARIFICATION ON THE USE OF 1915 (B)(3) RESPITE (JCB#437)

This bulletin provides guidance on the use of 1915 (b)(3) Respite. 1915 (b)(3) Respite is provided consistent with the NC Innovations waiver definition.

The NC Innovations waiver defines respite as follows:

Respite services provide periodic or scheduled support and relief to the primary caregiver(s) from the responsibility and stress of caring for the individual. NC Innovations respite may also be used to provide temporary relief to individuals who reside in Licensed and Unlicensed AFLs, but it may not be billed on the same day as Residential Supports. This service enables the primary caregiver to meet or participate in planned or emergency events, and to have planned time for him/her and/or family members. This service also enables the individual to receive periodic support and relief from the primary caregiver(s) at his/her choice. Respite may be utilized during school hours for sickness or injury. Respite may include in and out-of-home services, inclusive of overnight, weekend care, or emergency care (family emergency based, not to include out of home crisis). The primary caregiver(s) is the person principally responsible for the care and supervision of the beneficiary and must maintain his/her primary residence at the same address as the beneficiary.

The waiver also notes that for provider agencies who operate private Respite Homes:

Private home respite services serving individuals outside their private homes are subject to licensure under NC G.S. 122C Article 2 when: more than two individuals are served concurrently, or either one or two children, two adults, or any combination thereof are served for a cumulative period of time exceeding 240 hours per calendar month.

If you have any questions, please contact Kenneth Bausell at Kenneth.Bausell@ddhs.nc.gov.

 [Joint Communication Bulletin #J437](#)

TAILORED CARE MANAGEMENT IMPLEMENTS TEMPORARY FLEXIBILITIES AND PROGRAM CHANGES

Recognizing this is a time of substantial change for NC Medicaid enrollees, providers and health plans, NCDHHS will implement [temporary flexibilities and program changes](#) for the four-month period between the Dec. 1, 2022, Tailored Care Management launch and March 31, 2023, the day before the start of Behavioral Health and Intellectual/Developmental Disabilities (I/DD) Tailored Plans.

These flexibilities and program changes give organizations providing Tailored Care Management (e.g., Advanced Medical Home + (AMH+s), Care Management Agencies (CMAs), Tailored Plans) time to gain experience with the model, engage as many eligible members as possible and identify and address unexpected challenges.

Members will continue to receive behavioral health services, I/DD and traumatic brain injury (TBI) supports through their LME/MCO and physical health and pharmacy services through NC Medicaid Direct, just as they do today. Nothing will change for members as of Dec. 1, 2022—except they'll have access to Tailored Care Management through AMH+s, CMAs and LME/MCOs.

Additionally, the State is working with the Centers for Medicare and Medicaid Services (CMS) to obtain approval for 1915(i) services (start date to be determined).

As a **reminder**, LME/MCOs will be expected to share the following data in a machine-readable format with AMH+ practices and CMAs, or their designated Clinically Integrated Networks (CINs) or other partners, for their attributed members to support Tailored Care Management:

- 1. Beneficiary assignment information**, including demographic data and any clinically relevant and available eligibility info.

2. Pharmacy Lock-in data

- 3. Member claims/encounter data**
- , including historical physical (physical health), behavioral health, and pharmacy (Rx) claims/encounter data with new data delivered monthly (physical health/behavioral health) or weekly (Rx).

The Department has published a [Deployment Schedule for Tailored Care Management Interfaces for Tailored Plan](#) and Prepaid Inpatient Health Plan to provide initial dates for the Tailored Care Management deployment of these interfaces.

For more information, please visit the [Tailored Care Management webpage](#)

 [Download the Final Flexibilities and Deployment schedule here](#)

Any questions about this Communication Bulletin *that does not already have an email listed for questions from that specific section*, may be sent to the following email: NetworkManagement@TrilliumNC.org. These questions will be answered in a Q&A format and published on Trillium's website.