

Table of Contents

State/Territory Name: **Delaware**

State Plan Amendment (SPA) #: **22-0002**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Medicaid and CHIP Operations Group
601 E 1st Room 5
Kansas City, MO 64106



Center for Medicaid & CHIP Services

July 26, 2022

Stephen Groff
Director, DMMA
Division of Medicaid and Medical Assistance
1901 N. DuPont Highway
P O Box 906
New Castle DE 197 0

Re: Approval of State Plan Amendment DE-22-0002 Assertive Community Integration Support Team

Dear Stephen Groff:

On June 14 2022 the Centers for Medicare and Medicaid Services (CMS) received Delaware State Plan Amendment (SPA) DE-22-0002 for Assertive Community Integration Support Team to remove the Assertive Community Integration Support Team (ACI T) health home service as an option from the Delaware Medicaid State Plan.

We approve Delaware State Plan Amendment (SPA) DE-22-0002 with an effective date(s) of April 01, 2022.

If you have any questions regarding this amendment, please contact Talbatha Myatt at talbatha.myatt@cms.hhs.gov.

Sincerely,



Acting Director, Division of Program
Operations
Center for Medicaid & CHIP Services

Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | DE2022MS00040 | DE-22-0002 | Assertive Community Integration Support Team

Package Header

Package ID	DE20 M 00040	PA ID	DE 2 000
Submission Type	Official	Initial Submission Date	6/14/20
Approval Date	7/26/2022	Effective Date	N/A
Superseded SPA ID	N/A		

State Information

State/Territory Name	Delaware	Medicaid Agency Name	Division of Medicaid and Medical Assistance
-----------------------------	----------	-----------------------------	---

Submission Component

- State Plan Amendment
- Medicaid
- CHIP

DE Submission Package DE2022MS00040 (DE 22 0002) Health Homes

[Summary](#) [Reviewable Units](#) [Versions](#) [Correspondence Log](#) [Analyst Notes](#) [Approval Letter](#) [Transaction Logs](#) [News](#) [Related Actions](#)

CMS-10434 OMB 0938-1188

Package Information

Package ID	DE2022MS00040	Submission Type	Official
Program Name	Assertive Community Integration Support Team	State	DE
PA ID	DE 2 000	Region	Philadelphia PA
Version Number		Package status	Approved
Submitted By	Nicole Cunningham	Submission Date	6/14/2022
Package Disposition		Approval Date	7/26/2022 3:54 PM EDT
Priority Code	P1		

Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | DE2022MS00040 | DE-22-0002 | Assertive Community Integration Support Team

Package Header

Package ID	DE2022MS00040	SPA ID	DE-22-0002
Submission Type	Official	Initial Submission Date	6/14/2022
Approval Date	7/ 6/ 0	Effective Date	N/A
Superseded PA ID	N/A		

SPA ID and Effective Date

SPA ID DE-22-0002

Reviewable Unit	Proposed Effective Date	Superseded SPA ID
Health Homes Program Termination - Phase-Out Plan	4/1/2022	18-0006

Page Number of the Superseded Plan Section or Attachment (If Applicable):

3.1-H

Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | DE2022MS00040 | DE-22-0002 | Assertive Community Integration Support Team

Package Header

Package ID	DE2022MS00040	SPA ID	DE-22-0002
Submission Type	Official	Initial Submission Date	6/14/2022
Approval Date	7/26/2022	Effective Date	N/A
Superseded SPA ID	N/A		

Executive Summary

Summary Description Including Goals and Objectives DDDS in partnership with DMMA amended the 1915 (c) Home and Community Based Services Lifespan waiver to allow enrollees to also be enrolled in Managed Care for their acute medical care needs, where in previous years they had been carved out into Fee for Service Medicaid. This change became effective July 1, 2019. At approximately the same time, DDDS decided to do a thorough evaluation of the services and supports the MCOs were providing. As a result of that review it was determined that the ACIST program was no longer the best way to meet the service needs of those enrolled in the program, and in fact, they would receive very similar support through the MCO carve in. DDDS decided to discontinue this specialized program in order for service recipients to receive supports in the most integrated manner, which is through the MCOs. The ACIST Home Health program is currently closed and no provider is actively providing this State Plan service. The purpose of this proposed regulation is Sunsetting the Assertive Community Integration Support Team (ACIST) health home service as an option from the Medicaid State Plan.

Federal Budget Impact and Statute/Regulation Citation

Federal Budget Impact

	Federal Fiscal Year	Amount
First	2022	\$0
Second	2023	\$0

Federal Statute / Regulation Citation

1902(a)(10)(D) of the Social Security Act, Home health services

Supporting documentation of budget impact is uploaded (optional).

Name	Date Created	
Public Notice Final March 2022	6/14/2022 9:14 AM EDT	

Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | DE2022MS00040 | DE-22-0002 | Assertive Community Integration Support Team

Package Header

Package ID	DE2022MS00040	SPA ID	DE-22-0002
Submission Type	Official	Initial Submission Date	6/14/2022
Approval Date	7/26/2022	Effective Date	N/A
Superseded SPA ID	N/A		

Governor's Office Review

- No comment
- Comments received
- No response within 45 days
- Other

Health Homes Program Termination - Phase-Out Plan

MEDICAID | Medicaid State Plan | Health Homes | DE2022MS00040 | DE-22-0002 | Assertive Community Integration Support Team

CMS-10434 OMB 0938-1188

Package Header

Package ID	DE2022MS00040	SPA ID	DE-22-0002
Submission Type	Official	Initial Submission Date	6/14/2022
Approval Date	7/26/2022	Effective Date	4/1/2022
Superseded SPA ID	18-0006		
	User-Entered		

Provide a description of the phase-out or transition plan for the Health Homes Program that is being terminated

Describe the reason for termination

they would receive similar support through MCO carve in

Describe the overall approach the state will use to terminating the program

DDDS in partnership with DMMA amended the 1915 (c) Home and Community Based Services Lifespan waiver to allow enrollees to also be enrolled in Managed Care for their acute medical care needs, where they had been carved out into previous years Fee for Service Medicaid. This change became effective July 1, 2019. At approximately the same time, DDDS decided to do a thorough evaluation of the services and supports the MCOs were providing. As a result of that review it was determined that the ACIST program was no longer the best way to meet the service needs of those enrolled in the program, and in fact, they would receive very similar support through the MCO carve in. DDDS decided to discontinue this specialized program in order for service recipients to receive supports in the most integrated manner, which is through the MCOs. The ACIST Home Health program is currently closed and no provider is actively providing this State Plan service.

Letters were sent on 10/17/19 notifying members that the HH provider had given notice to terminate service delivery. A copy of the letter is attached. The letter did not include information about fair hearings. Since the only provider of this HH service had terminated their contract with DDDS, there was no other qualified provider to deliver this service. To meet the needs of the members, other care options were provided directly to service recipients via MCO Care Coordinators and DDDS Support Coordinators and other DDDS staff.

Service recipients were assisted by their MCO Care Coordinators and DDDS staff to locate alternate behavioral support providers. All chose to enroll with DDDS Authorized Providers of Behavioral Consultation, and the MCO assisted in locating psychiatric prescribing providers for those service recipients that needed that support. All service transitions were completed within one month from the date of the notification letter. All service recipients were connected to services and supports to fully address their care needs.

Indicate method of termination

- The state will terminate all participants from the Health Homes Program on the same date
- The state will phase-out the termination of participation in the Health Homes Program

Termination effective date

4/1/2022

Describe the process the state will use to transition all participants and how referrals will be made to other health care providers

Service recipients were assisted by their MCO Care Coordinators and DDDS staff to locate alternate behavioral support providers. All chose to enroll with DDDS Authorized Providers of Behavioral Consultation, and the MCO assisted in locating psychiatric prescribing providers for those service recipients that needed that support. Yes, the supports provided by psychiatric prescribing providers, Behavioral Consultation providers and MCO Care Coordinators are comparable to the services previously provided by the HH provider.

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

This view was generated on 7/27/2022 12:37 PM EDT