

**Questions from Rehab Option Provider Meeting – 12/20/05**

- *Where do our Rehab services/activities take place?*  
The Rehab Services/Activities take place all over the service system, through the case management programs and many other Levels of Care.
- *Could meetings be held in other parts of the state?*  
Yes, the trainings will be in both New Haven and Middletown, we tried for Bridgeport for the Feb meeting and couldn't get a room.
- *What is the feedback from group homes when sitting with their clients and asking them what their goals are? (Will check with the group homes)*
- *Could ACT and CSS be integrated into one team?*  
No, the ACT Team must be a cohesive unit that services a select group of clients using a defined set of services.
- *Can individuals who are in treatment be billed under the Rehab Option?*  
Yes, if they are in the Community Support program, they can receive group and/or individual therapy, because a CSP program is support and not therapy.  
No, if they are a part of an ACT Team, all services should be received from the team under this model.
- *What tool should we use for assessing clients for LOC?*  
This hasn't been decided yet. Currently we are using the LOCUS Assessment Tool for evaluating clients for ACT Programs, but this is only for this initiative.
- *How do we fund the administrative structure?*  
We don't know yet, but we do know funding will be needed.
- *Was it the consultant's sense that the 10% was a documentation issue or medical necessity for the LOC?*  
Both areas were considered problematic for the consultants who did the ACT team evaluations.

- *Where does the program that provides services 24/7 fit into the Rehab Option?*  
The 24/7 program will have to differentiate what activities are being done to promote recovery/rehab within the guidelines of the client's treatment plan. These services will be billable under the CSP component as long as they are promoting skill building etc. This does not apply to the licensed MH group homes who currently have their own set of guidelines.
- *How will new resources be deployed?*  
This will become clearer as we train and build this program.
- *Is there a mechanism in place to review and negotiate new services under the Rehab Option?*  
Not yet, this is the beginning of a process and we will be monitoring the changes to insure that nothing is lost or that the services become differentiated.
- *Will vocational services be considered under the Rehab Option?*  
Not the actual vocational programming but the skill building prior to the actual work is reimbursable.
- *Do all definitions include staff/client ratio?*  
No, they will have productivity figures and face-to-face times.
- *What is the liability issue in using peers for transportation?*  
There are some agencies currently using peer-to-peer transportation services, it would be helpful for them to comment rather than DMHAS.
- *What programs/services will fit under CSS?*  
The CSP or CSS definition is now on the DMHAS Webpage.
- *How will Club Houses bill for their services?*  
Clubhouses are still under a grant-based system, as of today.
- *Are you saying that CT is going to stick with the true ACT model more than other states?*  
Connecticut is going to have to maintain a fidelity to the ACT model in order to receive funding under the Medicaid Rehab Option, all states must do this or else they are subject to problems with the Federal Government.
- *What's been the experience capturing federal \$'s so far?*  
DMHAS is capturing Federal dollars through TCM or Targeted Case Management, through Medicaid Administrative Cost Allowances and through the licensed MH Group Homes Rehab Option. All Federal dollars through the match go to the CT General Fund.

- *Will we be looking at a “Threshold” for rates? As with group homes – YAS ACT teams?*  
DMHAS will be working with consultants to build a rate structure, some of this is from evaluating historical costs, cost modeling and reviewing what Medicaid is paying for comparable services here and in other states. This work is just beginning.
- *Will there be a 40-hr/week requirement as there is in group homes?*  
NO
- *Will ACT services be bundled or billed per service?*  
There are only two ways to build for ACT Services: a 15 minute unit or a per diem. CT will most likely be using a 15 minute unit.