

## **DEPARTMENT OF SOCIAL SERVICES**

### **Notice of Proposed Medicaid State Plan Amendment (SPA) to Amend the Alternative Benefit Plan (ABP) for the Medicaid Coverage Group for Low-Income Adults**

#### **Behavioral Health Homes Pursuant to Section 1945 of the Social Security Act (SPA 15-024)**

The State of Connecticut Department of Social Services (DSS) proposes to submit the following Medicaid State Plan Amendments to the Centers for Medicare & Medicaid Services (CMS) within the U.S. Department of Health and Human Services (HHS), which will amend the Alternative Benefit Plan (ABP) at Attachment 3.1-L of the Medicaid State Plan.

The ABP is the benefit package that, effective January 1, 2014, is being provided to the Medicaid low-income adult population under section 1902(a)(10)(A)(i)(VIII) of the Social Security Act (also known as the HUSKY D coverage groups). Pursuant to section 2001 of the Affordable Care Act, effective January 1, 2014, Connecticut expanded Medicaid eligibility to low-income adults with incomes up to and including 133% of the federal poverty level. The expanded coverage group is referred to as Medicaid Coverage for the Lowest-Income Populations.

#### **Changes to Alternative Benefit Plan**

Effective on or after October 1, 2015, SPA 15-024 amends the ABP (Attachment 3.1-L of the Medicaid State Plan) in order to reflect the same coverage in the ABP for HUSKY D Medicaid members as described in proposed SPA 15-014, which will amend the Medicaid State Plan by establishing a new Behavioral Health Home Medicaid State Plan Amendment (SPA) Option pursuant to section 1945 of the Social Security Act, which is a collaboration led by three partner state agencies: DSS, the Department of Mental Health and Addiction Services, and the Department of Children and Families. Services available under Behavioral Health Homes include a variety of care management, care coordination, transitional care activities, individual and family support services, referrals to community and social support services, and other services as specified in the SPA. Designated providers are local mental health authorities (LMHAs) and LMHA affiliate providers.

SPA 15-024 will not make any other changes to the ABP than as described above. Accordingly, the ABP will continue to provide full access to Early and Periodic Screening, Diagnostic and Treatment (EPSDT) services to beneficiaries under age twenty-one. This includes informing them that EPSDT services are available and of the need for age-appropriate immunizations. The ABP also provides or arranges for the provision of screening services for all children and for corrective treatment as determined by child health screenings. These EPSDT services are

provided by the DSS fee-for-service provider network. EPSDT clients are also able to receive any additional health care services that are coverable under the Medicaid program and found to be medically necessary to treat, correct or reduce illnesses and conditions discovered regardless of whether the service is covered in Connecticut's state plan.

Likewise, SPA 15-024 will not make any changes to cost sharing for the services provided under the ABP. Connecticut does not currently impose cost sharing on Medicaid beneficiaries. Because there are no Medicaid cost sharing requirements for Connecticut beneficiaries, no exemptions are necessary in order to comply with the cost sharing protections for Native Americans found in section 5006(e) of the American Recovery and Reinvestment Act of 2009.

### **Fiscal Information**

Based on the information that is available at this time, DSS does not anticipate any fiscal impact from this SPA because the fiscal impact for these changes is already included in the estimates set forth for the underlying behavioral health home SPA 15-014.

### **Information on Obtaining SPA Language and Submitting Comments**

In accordance with federal Medicaid requirements, upon request, DSS will provide copies of the proposed SPA. Copies of the proposed SPA may also be obtained at any DSS regional office and on the DSS website: <http://www.ct.gov/dss>. Go to "Publications" and then "Updates".

Written, telephone, and email requests should be sent to: Ginny Mahoney, Department of Social Services, Medical Policy Unit, 55 Farmington Avenue, 9th Floor, Hartford, CT 06105, Phone: 860-424-5145, Email: [ginny.mahoney@ct.gov](mailto:ginny.mahoney@ct.gov). Please reference "SPA 15-024: Amendment to Alternative Benefit Plan Regarding Behavioral Health Homes State Plan Option". Written comments may be submitted in the same manner as requests no later than July 30, 2015.

# Alternative Benefit Plan

(Attachment 3.1-L of the Medicaid State Plan)

Other 1937 Benefit Provided: Behavioral Health Homes (BHH) State Plan Option Pursuant to Section 1945 of the Social Security Act

Source: Section 1937 Coverage Option Benchmark Benefit Package

Authorization: None

Provider Qualifications: Medicaid State Plan, BHH State Plan Option (added by SPA 15-014). Designated providers are local mental health authorities (LMHA) and designated LMHA affiliates, with additional requirements as set forth in SPA 15-014.

Amount Limit: None

Duration Limit: None

Scope Limit: Eligible individuals and available services, each as defined in SPA 15-014.

Other: See SPA 15-014 the Behavioral Health Home State Plan Option Pursuant to Section 1945 of the Social Security Act for details regarding this benefit, including service components, limits, and provider information.

TN: 15-024  
Supersedes: New

Connecticut  
ABP 5

Approval Date: \_\_\_\_\_  
Effective Date 7/01/2015