LTSS Recommendations from Stakeholders' Feedback and Small Workgroup Engagement

Recommendations from stakeholder engagements and small workgroups	LTSS Recommendations	CAP/C Waiver Renewal Proposed Changes
Adding a permanent option for parents to be the paid caregiver	Add a new HCBS called Coordinated Caregiving to CAP/C. Include in the definition the coverage of children with skilled needs. Adding this new service will address caregiver shortage and permit parents to be the paid caregiver.	Definition for Coordinated Caregiving: Supportive services assist with the acquisition, retention or improvement of skills related to living in the community or the oversight of skilled interventions. This includes such supports as adaptive skill development, assistance with activities of daily living (ADLs), instrumental activities of daily living (IADLs) and skilled interventions when those services can be delegated. Coordinated Caregiving is provided by a caregiver who resides in the home of the CAP/C beneficiary or in the caregiver's home. The caregiver receives a stipend for caring for the CAP/C beneficiary. The full definition of Coordinated Caregiving will be included in the renewed waiver application that will be available for public comments in December 2021.
Adding private duty nurse as a coverable waiver service	Update the consumer direction definition to allow children with skill needs the opportunity to direct care. Allowing waiver participant who receives nurse care to direct their care will address the caregiver shortage.	 Update the consumer direction definition to include: able to have his or her health, safety and well-being maintained at their primary private residence or approved location of service for CAP/C with the use of an informal support professional who has: An RN/LPN license A current CPR certification At least two years of experience working providing HCBS and able to show competencies in the areas of the care needs of the CAP/C beneficiary Passed a registry and statewide criminal background check The RN/LPN who is hired must comply with NC Practice Act.
Allowing the coverage of carpet replacement	The current definition permits the replacement of flooring for various reasons. (Floor coverings, when existing floor coverings contributed to	There will be no changes made to the current definition.

	documented falls, resulting in injury as evidenced by the hospital and emergency room visits, or when those floor coverings are contributing to asthma exacerbations, documented in the health record, requiring repeated emergency room or hospital treatment.)	
Adding permanent installation of a generator	The division will study this recommendation further.	The limits for generators will remain as written in the CAP/C Clinical Coverage Policy while NC Medicaid conducts the study of this request.
Allowing more flexibility for modifications such as replacing a closet if dismantled for a room widening or permitting electrical and plumbing installation during a bathroom modification	The current definition allows for replacing a fixture, items and minor plumbing and electrical work to ensure the waiver participant's room is restored for use.	The bedroom modification definition will be updated to state: Bedroom modifications to widen turnaround space to accommodate hospital beds, larger or bulky equipment and wheelchairs (ex. removing a closet to add space for the bed or wheelchair and restoring the closet when additional square footage is not added)
Increasing the personal care services rate	NC Medicaid has proposed a rate increase for personal care types of services.	Upon the rate approval, the updated rates will be included in the waiver application.
Goods and Services rate increases	The current rates will remain the same. The policy allows for exceptions to expand the limit when necessity is determined.	There will be no changes made to the current rates
Allowing individualized planning for multiple children receiving CAP/C services in one home	Congregate planning is in place to meet the needs of the family. The current definition allows for planning individual needs for a child of a family with multiple CAP/C participants.	 There will be no changes made to the current definition. Congregate rates will be established for nurse respite.
Increasing the slots	A recommendation has been made to increase slots by 2,000.	Upon the approval of the slots, 2,000 slots will be gradually added to the CAP/C waiver over the five-year waiver approval cycle. By waiver year five (2027), the slot capacity will be a total of 6,000.