CMS QUESTIONS AND ANSWERS

Demonstration Grant for Testing Experience and Functional Tools (TEFT) in Community-Based Long Term Services and Supports

1. Could you clarify the web address for the TEFT for teleconference participants to submit their questions?

The TEFT mailbox is as follows:
TEFTgrant@cms.hhs.gov

2. The funding notice states that applications must be submitted to grants.gov by 3 p.m. EST on October 22, 2012. Is it possible to create a level field by having the due time be 3 p.m. in your respective time zone?

CMS added a day to the due date at the same time it moved up the time to 3 PM…this was to be fair to all parties.

3. For the demonstration, can a state use three 1115 waiver populations? All three of the populations will have a NF level of care and an option to self-direct some or all of their community-based services.

A state with multiple populations within an 1115 Demonstration may apply. While the details related to the sampling is not totally final, we believe one approach in this situation would be to pull a separate sample for each distinct population group, to allow comparison of their experiences.

4. Will states be allowed to add additional questions to the experience survey?

No additional questions will be allowed.

5. Would you please define the intersect between a state's assessment tools used for determining eligibility for programs and service need and the CARE assessment that is being tested in the TEFT grant proposal

   What additional information is available about the functional assessment and how will it be applied to the various populations that would be involved with the grant?

The CARE tool assesses functional level. States determine their own level-of-care criteria. If the CARE tool comports with a state's criteria and they wish to use it, CMS will make the tool available once it is tested. There are no plans to make this tool mandatory.

The CARE functional assessment tool is presently used with Medicare beneficiaries. The tool is being adapted and tested for use with beneficiaries of Medicaid long term services and supports as part of the TEFT grant initiative. Our plan is to also pursue NQF endorsement for the tool.

More information on CARE may be found at the following web site: http://www.pacdemo.rti.org/meetingInfo.cfm?cid=caretool

6. Would it be possible for you to share the number of Notice of Intent to Apply were received for this opportunity?

As of September 12, 2012, CMS received five notices of intent to apply from state Medicaid agencies.

7. Can the 1915(c) LTSS program participants include Medicare and Medicaid eligible beneficiaries (Duals) in addition to Medicaid-only beneficiaries?

There is nothing preventing sample participants from being dually eligible for Medicaid and Medicare. Participating states will need to work with CMS on using the designated sampling strategy. If there are dually eligible people within the sample, a state may segregate those results.

8. What is the URL for the TEFT FAQ/Responses Website mentioned on the teleconference?

The Questions and Answers may be found on the Medicaid.gov website. The URL is as follows:
http://medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services-and-Support/Long-Term-Services-and-Support.html

9. Please explain any Maintenance of Effort requirements associated with the TEFT grant.

This is not applicable to the TEFT grant.

10. Are applicants allowed to contract for the staffing needed to implement the grant requirements?

Yes, states may use contractors.

11. Is it possible for a state to apply even though they did not send in an Intent to apply form?

Yes, a state may apply even though they did not send an intent to apply form. This is not a problem. The submission of the Intent to Apply is voluntary and does not jeopardize an applicant's proposal in any way.

12. Although the grant announcement allows for funding to be used to build a PHR, our state is not ready to implement this step without necessary infrastructure work completed to support a PHR and align it with the larger Continuity of Care documents and Electronic Health Record.

A State's readiness, or lack thereof, to implement a PHR program should not be viewed as a deterrent to applying for the TEFT grant. The TEFT solicitation asks the State to investigate and commit to exploring how a PHR is used with the grant participants within the demonstration pilot over the next five years. If a State has not yet developed a PHR, a State can commit to exploring this issue and using grant resources to further the State's efforts in this regard. The grant demonstration should be viewed by States as an opportunity to explore the barriers to implementing PHRs for a population served in LTSS, and further identify barriers to the uptake and usage of a PHRs by the grant participants selected through the random sampling process.

CMS understands the desire for a State not to commit to implementing a PHR without an infrastructure in place to support use of PHRs without alignment to CCDs and EHRs. Note that the DOD iPHEMS application will provide States a turnkey solution to implement a free off-the-shelf PHR for grant participants being served within this TEFT demonstration program. Moreover, DoD's iPHEMS application has embedded PHR functionality that can be leveraged until such time as a State has made a decision to move forward with a State proposed PHR. Finally, providers will not be entering data into an E-LTSS record with any regularity until after ONC's S&I collaborative curates that standard. The standard may not be ready until year two of the demonstration program when an individual E-LTSS record is viewable within an individual's PHR.

13. Is the personal health record used to test standards?

No, the personal health record will be used to allow individuals access to their service delivery information and the data from the functional assessment tool. Providers in participating states will enter electronic LTSS information in the DOD IPHEMs portal. Likewise, once the eLTSS standard is developed and has gone through a standards development body, software vendors can use it to develop their products. The providers who are part of the Demonstration would not be required to buy a software package, only go to the DOD iPHEMS web portal to both enter service delivery information and access it.

14. *What is the relationship between an eLTSS standards and meaningful use standards?*

Meaningful Use is an initiative that encourages health care providers to use electronic health records. While there is no direct relationship between the eLTSS standards and meaningful use at this time, the TEFT initiative will result in standards that allow the exchange individual information in long term services and supports.