

# Front Porch Chat: CAP Services

October 16, 2025



# Housekeeping

Who This Is For: CAP Medicaid Beneficiaries and their families

### Today's Presentation:

- The presentation will last 30 minutes.
- After that, we'll have 15 minutes for questions.
  - This is your time to ask anything you want to know about today's topics.
  - -You can type your questions in the Q&A chat at any time.

#### At the End:

- There will be a short survey for you to fill out.
- A recording of this presentation and the slides will be shared on the NCLIFTSS website, which is run by Acentra Health.

# **Today's Discussion Topics**

- Federal government shutdown and its impact on CAP
- DHHS provider rate cuts and its impact on CAP
- DHB's goals and timeline of addressing the concerns surrounding a legally responsible person becoming a paid caregiver
- DHB is aware of concerns of how extraordinary circumstances are being reviewed and determined and plans are underway to ensure consistency in the review of extraordinary circumstances
- DHB is also planning to develop training tools including standard operating procedures and a checklist to ensure validation and consistency of determination of qualification of extraordinary circumstances

#### **Today's Presenter:**

Dr. Shenita Ross, NCLIFTSS CAP/C Program Manager

## Federal Government Shutdown

### How this impacts CAP:

- Federal governmental offices shutdown
- CAP waivers are not directly impacted

CAP programs will continue to operate per the approval from the Centers for Medicare and Medicaid Services (CMS):

- ➤ CAP/C waiver was approved in 2023 for 5 years
- > CAP/D waiver was approved in 2024 for 5 years.

## **Current Funding for NC Medicaid – Budget Shortfall**

	Requested Funding	Funding in SL 2025-89 (H125)	Shortfall
Medicaid Rebase	\$819 million	\$600 million	\$319 million (=819-500)
Medicaid Managed Care Oversight Fund	\$115 million	\$500 million for Rebase \$82 million for Oversight \$18 million for missing LME/MCO transfer	\$33 million (=115-82)
Technology for NC Medicaid	\$13 million	\$0	\$13 million

# Considerations for Making Reductions

- Minimize impact to services for vulnerable populations like children and people with disabilities
- Minimize impact to critical behavioral health services so the state can continue making progress in addressing the current behavioral health crisis
- Minimize impact to providers who have not had rate increases for over a decade
- Minimize impact to home and community-based services since the alternative is higher cost care in institutional settings
- Make reductions that are more easily reversible (for example: rate cuts versus eliminating whole services) in case additional funding becomes available or utilization trends show a more favorable long-term forecast

## Establishing Consistency of LRP to Qualify as a Paid Caregiver

Routinely missed support to receive personal care



Unexpected events (extraordinary circumstances)



Meeting the hiring requirements to be a paid worker



# What are Extraordinary Circumstances?

- No available workers: Documented notes show that local agencies do not have certified nursing assistants or trained workers available in or near the CAP beneficiary's home.
- **Medical Isolation**: Medical files show a documented health condition or special care routine that requires 90 days or less of isolation. The CAP beneficiary's healthcare condition requires them to remain at home, away from people who are not family.
- **24-hour care order**: Due to the beneficiary's health condition, a doctor has ordered 24-hour ongoing continuous care. The legally responsible person cannot work inside and outside of the home or has been fired from their job because of excess absences, being late to work or leaving early to provide care to their child.
- Specialized care needs: Documented medical files show the beneficiary has special health care needs, and the legally responsible person is the only person who can give the care that is needed.
- **Other risks**: Documented medical files show there are other extraordinary circumstances that put the CAP beneficiary's health, safety, and well-being at risk. Without care, the person might need to go to a nursing home or stay in the hospital for a long time.

# Goals for Establishing Consistency

#### Thorough analysis of current processes

- Identification of gaps in the determination process
- Updating standard procedure to provide step-by-step processes of the determination of qualification of routinely missed care that can be proved by a legally responsible person
- Ensuring the understanding that only individuals under the age of 17 and those over 18 who are appointed a guardian must abide by this process

#### An extraordinary circumstance checklist

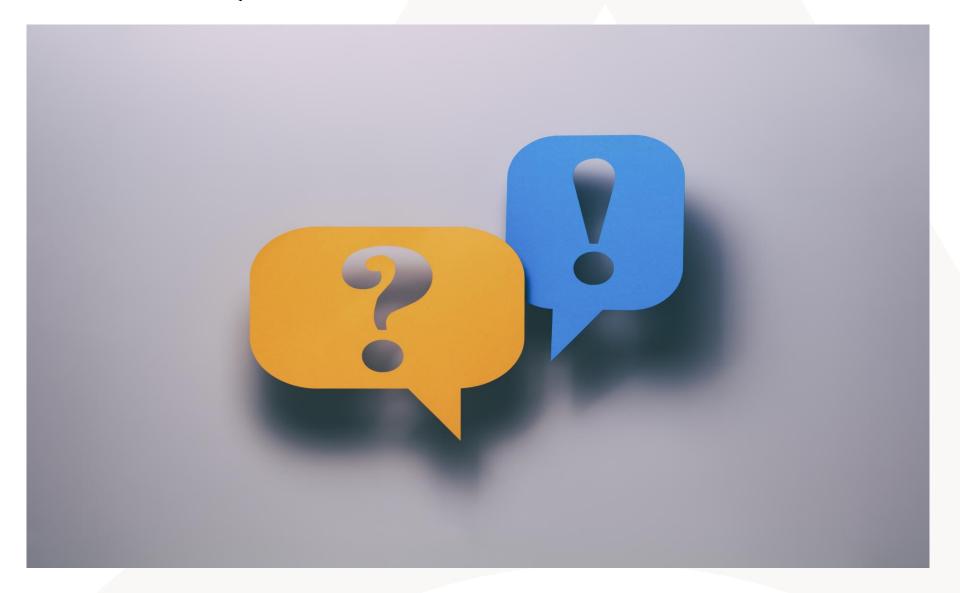
- Clearly identify qualifying and non-qualifying requirements
- Ensures the LRP is collaboratively engaging with the case manager about eligibility and provided proof of qualifying and non-qualifying requirements
- Ensures all extraordinary circumstances (EC) are reviewed, if the primary EC results in non-qualifying
- Evidence the LRP was granted consultation and the ability to grieve if not in agreement with the determination decision
- Technical support to the case management entity



## **Timeline to Meet Goals**

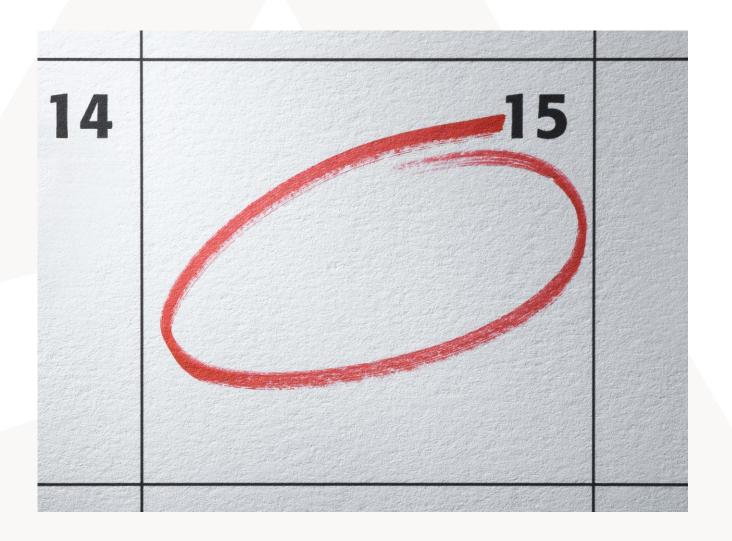
September 2025	October 2025	November 2025
Thorough analysis of concerns Identification of gaps in the determination process Consultation with LRP and case managers on efficient ways to make determination decisions	Updating standard operating procedures Implementation of Paid Caregiver as a Legally Responsible Person Checklist Technical support to case managers on determination decisions as requested	Distribution of updated standard operating procedures  Training on how to complete the Paid Caregiver as a Legally Responsible Person Checklist  Distribution of training tools

# **Question & Answer**



## Next Front Porch Chat

 Our next Front Porch Chat for **CAP Services will** be January 15, 2026 at 11:30am



## **CAP Contact Information**

For questions, contact NCLIFTSS at: 833-522-5429 (toll free) or 919-568-1717 Call Center Hours: Monday - Friday 8:00am to 5:00pm

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CAP Program Referral Request Form: CAP Program Referral Request Form

