

Appendix A: Exhibit 2

RI Medicaid – Additional State Standards for MMP Dually-eligible Members

(Excerpts from the Neighborhood Contract)

Network Adequacy

2.7.1.3 The Contractor must demonstrate quarterly that its Provider Network meet the following standards:

2.7.1.3.1. For services in which Medicaid is the traditional primary payor, including behavioral health and substance abuse services, the Contractor must establish a Provider Network that meets the existing requirements of the Medicaid Managed Care program, as dictated by the Medicaid Managed Care Contract, and Policy and Procedures Guide, available on the RI EOHHS website.

2.7.1.3.2. For behavioral health providers, the Contractor must contract with providers whose office is located within 20 minutes or less driving distance from the Enrollee’s home, unless the Contractor has an RI EOHHS-approved alternative time standard.

2.7.1.3.3. The Contractor agrees to provide RI EOHHS with

2.7.1.3.3.1. A list of all its participating Health Care Professionals for services in which Medicaid is the traditional primary payor, including behavioral health and substance abuse services. This list must include information on the language capability of the Health Care Professional, Health Care Professional addresses and telephone numbers, and ADA compliance.

2.7.1.3.3.2. A list of PCPs who have adequate capacity to accept Enrollees.

2.7.1.4 The Contractor's network must also meet the following access to care requirements:

2.7.1.4.1. In correlation with the LTSS transition, the Contractor must extend contracts to every willing LTSS provider that accepts the Contractor’s contract provisions and meets all applicable licensing, credentialing and other requirements by Medicaid.

2.7.1.5.6. The Contractor shall have a network of PCPs who provide services in Enrollees’ homes.

2.7.1.8 Long Term Services and Supports (LTSS)

2.7.1.8.1. The Contractor shall provide three hundred and sixty-five (365) days of nursing facility care as medically and/or functionally necessary for the Enrollee, in accordance with Section 2.4.

2.7.1.8.2. The Contractor shall demonstrate that sufficient capacity exists to provide timely access to quality institutional care (e.g., nursing facility) and home and community-based services and supports that meet the needs where the Enrollee population resides and is accessible to the Enrollee’s primary caregiver.

2.7.1.8.3. The Contractor shall monitor the availability of long-term care providers and shall make the appropriate adjustments to maintain timely access to quality long-term care.

2.7.1.8.4. The Contractor must abide by RI EOHHS guidance for the Community-Based Supportive Living Program (CSLP). The Contractor is responsible for reporting on CSLP to RI EOHHS. The Contractor is also responsible for tracking savings to this program and preparing financial reporting to RI EOHHS.

2.7.1.8.5. The Contractor shall ensure that Medicaid home and community-based services are available twenty-four (24) hours a Day, seven (7) Days a week. The required services must be in place within five (5) Days of an Enrollee's need being determined.

2.7.1.8.6. Assisted Living Facilities, Adult Day Centers, and other community-based LTSS agencies shall be located within twenty (20) minutes driving time of the Enrollee's residence, unless the Enrollee selects a provider located more than twenty (20) minutes driving time of the residence.

2.7.1.8.7. The Contractor must include Adult Day Care providers in its Provider Network that:

2.7.1.8.7.1. Are licensed by the DOH as an Adult Day Care Program;

2.7.1.8.7.2. Agree to comply with all of the provisions in the DOH Regulations; and

2.7.1.8.7.3. Comply with RI EOHHS guidelines.

2.7.1.10 Essential Community Providers

2.7.1.10.1. The Contractor shall include in its network current fee-for-service providers as "essential community" providers, unless the Contractor demonstrates a valid reason for not including them. If the Contractor declines to include individual or groups of providers in its network, the Contractor agrees to give the affected providers written notice of the reason for its decision. These essential community providers include but are not limited to: RIt@Home agencies and providers; Tri-Town Community Action; OSCIL; NeuroRestorative RI group homes; Rocky Knoll Group Home in Tiverton; Spurwink habilitation program; Sargent Rehabilitation; United Cerebral Palsy; To LIFE Incorp habilitation program; community mental health organizations; and other essential providers determined by RI EOHHS.