



Provider Accessibility Initiative (PAI) and Barrier Removal Fund (BRF) Overview & Frequently Asked Questions

Overview

What is the Provider Accessibility Initiative (PAI)?

Superior HealthPlan is committed to providing equal access to quality health care and services that are physically and programmatically accessible for our members with disabilities and their companions. “Physical access,” also referred to as “architectural access,” refers to the ability of a person with a disability to access buildings, structures and the environment. “Programmatic access” refers to the ability of a person with a disability to access goods, services, activities and equipment. The goal of the PAI is to increase the percentage of Superior providers that meet minimum federal and state disability access standards by:

1. Improving the accuracy, completeness and transparency of provider self-reported disability access data in all products/all markets nationwide by integrating “minimum accessibility” standards into the provider application/credentialing and directory processes; and
2. Providing participating providers in three pilot states with shared access to grant dollars through a Barrier Removal Fund (BRF). Providers that apply and are chosen for BRF awards will receive an on-site disability accessibility review completed by a local Center for Independent Living (CIL) and funding to remediate priority disability access barriers.

Where and when will PAI and BRF be implemented?

In 2018, the BRF will be administered in three pilot States: Texas, Illinois and Ohio. The other component of the PAI (improving disability access data in provider directories) will be implemented in all Centene health plans nationwide starting in May 2018. Superior is Centene Corporation’s health plan affiliate in Texas.

Who is responsible for administering the BRF?

- Superior is proud to partner with the National Council on Independent Living (NCIL) on the administration of the BRF.
- NCIL is the longest-running national cross-disability, grassroots organization run by and for people with disabilities. Founded in 1982, NCIL represents thousands of organizations and individuals including: individuals with disabilities, Centers for Independent Living (CILs), Statewide Independent Living Councils (SILCs), and other organizations that advocate for the human and civil rights of people with disabilities throughout the United States.
- NCIL will provide technical assistance to Superior and help them coordinate a local BRF Committee that will select BRF awardees.
- NCIL will also coordinate with local Centers for Independent Living (CILs) to conduct the on-site accessibility reviews of BRF applicants, provide training, and distribute grants to BRF awardees to remediate priority disability access barriers identified by the local BRF Committee.



Why are the PAI and BRF important?

- It's the right thing to do. Studies have shown that Medicaid and Medicare beneficiaries with disabilities receive less preventive care due to inaccessible exam rooms and/or diagnostic equipment;ⁱ The PAI and BRF demonstrate Superior's position as a pioneer in partnering with our providers and disability advocates to solve a vital problem and key social determinants of health for our members with disabilities and their companions.
- In addition, federal laws and regulations require that Managed Care Organization (MCO) providers have disability access and that MCO provider directories include a complete and accurate description of provider disability access.ⁱⁱ
- Superior believes we have a responsibility and an obligation to support the participating providers in our network in becoming more accessible through a designated corporate funding source designed to address one of the primary barriers to disability compliance, namely a lack of financial resources, so that our members with disabilities and their companions will have better access and quality of care.
- The PAI, a recommendation of the Centene National Disability Advisory Council, demonstrates that Superior is actively working toward a health care delivery system that is fully usable by, and accessible to, our members with disabilities and their companions; a health care system based on the aspirational principle of "universal access for all."

ⁱ <https://www.cms.gov/About-CMS/Agency-Information/OMH/Downloads/Issue-Brief-Physical-AccessibilityBrief.pdf>

ⁱⁱ The 2016 Medicaid/CHIP Managed Care Final Rule states that: 1. MCO providers must provide physical access, accommodations, and accessible equipment for consumers with physical or mental disabilities by July 1, 2018 (42 CFR Section 438.206(c)(3)); 2. Provider directories must indicate the following for all physicians, hospitals, pharmacies, behavioral health providers, and LTSS providers: linguistic capabilities, completion of cultural competence training, and whether the provider's offices, exam rooms, and equipment accommodate individuals with physical disabilities by July 1, 2017 (42 CFR Section 438.10(1)); and 3. State network adequacy standards must consider the ability of MCO network providers to ensure physical access, reasonable accommodations, culturally competent communications, and accessible equipment for Medicaid enrollees with physical or mental disabilities by July 1, 2018 (42 CFR Section 438.68(c)(1)).



Frequently Asked Questions

1. How can a BRF RFP be submitted?

- Fill out the online application at www.ncil.org/texasbrf.

2. Who is eligible to submit a RFP for BRF?

- Participating providers that meet all of the following criteria are eligible to apply:
 - In the Bexar Service Delivery Area; and
 - Serving the STAR Kids, STAR+PLUS non-dual or STAR HEALTH Medically Dependent Children's Program (MDCP) populations; and
 - See Superior members at a physical location; and
 - Are accepting new Superior members; and
 - Are in the Superior provider directory.

Non-participating providers with single case agreements or other contracts, and providers (par and non-par) located in hospitals and institutional settings are not eligible.

3. What is the deadline to submit the BRF RFP? Can it be extended for any reason?

- August 10, 2018, 5:00 PM CST. Superior reserves the right to extend the deadline.

4. Will there be another RFP in the future?

- Superior does not have information regarding future RFPs surrounding accessibility improvements at this time.

5. What if the deadline for submitting the RFP is missed?

- Unfortunately, Superior cannot accept additional RFPs beyond the deadline.

6. Can BRF RFP responses be changed after the RFP is submitted?

- Changes/edits can be made to RFPs through the final submission date of August 10, 2018, 5:00 P.M. CST. After this deadline, no changes will be accepted.

7. How is it confirmed that an RFP submission was received?

- Providers will receive a confirmation email when a RFP is submitted. Providers may also contact Tim Fuchs at NCIL at Tim@ncil.org or call 1-202-207-0334, or toll-free at 1-844-778-7961. Providers will also be informed if they are not an award recipient.

8. Who can be contacted if there is a question about the BRF RFP?

- Contact Tim Fuchs by emailing Tim@ncil.org, or calling 1-202-207-0334 or toll-free at 1-844-778-7961.

9. How much will this award fund per RFP?

- Award amounts will vary based on the specific number of BRF RFP submissions received, the impact the requested need will have on Superior disability access network adequacy, and the number of Superior members with disabilities impacted. There is no funding cap, however Superior anticipates most awards will be in the range of \$500 - \$20,000.



10. Are there any costs that a provider's organization will be responsible for?

- Superior will cover the cost of the accessibility site review, technical assistance, and approved modification(s). Any additional costs are the responsibility of the provider's organization.

11. Can multiple pieces of equipment/modifications be included in the RFP?

- Yes, all equipment and/or modifications a provider is seeking funding for should be listed in the RFP submission.

12. If a provider has multiple sites, does a BRF RFP need to be submitted for each site?

- Yes, please submit separate RFPs for each site where members are served.

13. If awarded funding, how soon will funding arrive?

- Funding disbursement is anticipated to be distributed within 30 days after notification of the award. Provider contracts will need to be signed prior to receipt of funds.

14. Will funding outside of a provider's state be granted, given that Superior has a national presence?

- BRF funding granted by the Superior BRF Committee are for participating providers in Texas only.

15. What happens if a provider who is awarded funding chooses to term with Superior?

- Providers must remain in the network (and in good standing) for one year following grant funding or full re-payment will be required. If a provider leaves the network after 18 months, they will be required to repay 50% of the funding awarded. After two years, if fully-funded, no repayment will be due.

16. What if the accessibility improvements cannot be completed by the timeline listed in the RFP, due to reasons out of a provider's control (i.e. a piece of equipment is on backorder or a contractor is not able to start the work within the timeline)?

- Providers will need to contact Tim Fuchs to discuss any concerns with specific timelines at Tim@ncil.org.

17. What happens if the accessibility improvement costs change after the contractor begins work?

- The initial funding decisions are final. If any changes in cost occur, the provider will be responsible for any additional costs.

18. Who can providers contact for a question that is not listed in this FAQ?

- Providers may contact Tim Fuchs by emailing Tim@ncil.org, or calling 1-202-207-0334 or toll-free at 1-844-778-7961.