Medicaid Alternative Care and Tailored Supports for Older Adults

Tribal Frequently Asked Questions

1. Can tribes or tribal providers contract to provide services to clients and caregivers in the Medicaid Alternative Care (MAC) and Tailored Supports for Older Adults (TSOA) programs?
   Yes. Tribes or tribal providers should contact the local Area Agency on Aging (AAA) for available contracting opportunities under the demonstration. The state and AAAs will accept tribal attestation of compliance with state provider requirements in accordance with the Medicaid Transformation Demonstration Tribal Protocol. For questions about the attestation process or for concerns about this process contact your ALTSA tribal representatives. In the event a contract through the AAA is not an option, ALTSA will work with the tribe to explore alternatives.

2. Are there contract templates available for MAC and TSOA?
   Yes, contract templates for MAC and TSOA services are available. Tribes or tribal providers interested in contracting should contact the AAA contracts manager.

3. What services can tribal providers contract for under the MAC and TSOA programs?
   Please reference the services listed in the Dear Tribal Leader letter dated August 4, 2017.

4. How long can we expect the contracting process to take through the AAAs?
   Contracting can take up to 90 days. This does not include time required under tribal policies and procedures. Your AAA contract manager can provide more specific detail.

5. What is Presumptive Eligibility (PE) and who can determine it?
   In the Demonstration Special Terms and Conditions, a qualified entity can determine someone presumptively eligible for services under MAC or TSOA. This means a presumptively eligible individual or their caregiver can receive services before the full eligibility determination is completed.

6. Are tribes considered qualified entities?
   Yes, tribes are listed as qualified entities in the Demonstration Special Terms and Conditions. Tribes that have the capacity and desire can perform presumptive eligibility assessments under MAC and TSOA.


7. Can tribes determine full financial or functional eligibility under MAC and TSOA?
   No. Eligibility for MAC and TSOA must be determined through the local DSHS Home and Community Services office.

8. How do tribes bill for services?
   MAC and TSOA services are claimed through the ProviderOne system. Most tribes are set up to bill through ProviderOne.

9. Can Tribes bill encounter rates for the services?
   No. Currently long-term services and supports (including MAC and TSOA) are not eligible under the encounter rate.

10. How do tribes and tribal organizations refer people for MAC and TSOA services?
    Please refer individuals and their caregivers to the local AAA or HCS office, unless you are set up to do PE determinations. For assistance with practical caregiving information and help finding local resources/services by calling your local Community Living Connections/Area Agency on Aging or Home and Community Services Office.

11. How is information about MAC and TSOA shared with tribes?
    Initial information was shared in the Dear Tribal Leader letter through the monthly ALTSA/DDA/BHSIA Subcommittee, and other leadership presentations. General information about MAC and TSOA is also available online through HCA and DSHS. New information and resources will be added as they are developed.

12. Where can I find more information?
    Information is available on ALTSA’s Medicaid Transformation Demonstration website. You can also find more information online at www.hca.wa.gov/about-hca/healthier-washington/medicaid-transformation.