



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

What is the Provider Accessibility Initiative?

Sunshine Health is committed to providing equal access to quality healthcare 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 a person with a disability’s ability to access buildings, structures, and the environment.

Programmatic access refers to a person with a disability’s ability to access goods, services, activities and equipment.

The goal of this program is to increase the number of Sunshine Health 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 and 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.

Who administers the Barrier Removal Fund?

Sunshine Health is proud to partner with the National Council on Independent Living (NCIL) on the fund’s administration. 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 Sunshine Health and help 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 these programs so important?

We believe 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 Sunshine Health'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 MCO providers have disability access and that MCO provider directories include a complete and accurate description of provider disability access.ⁱⁱ Sunshine Health 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 Sunshine Health 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)).



Provider Accessibility Initiative Barrier Removal Fund FAQ:

- Q: How do I submit a BRF application?
 - A: Fill out the online application at www.ncil.org/floridabrf.
- Q: Who is eligible to submit an application for Barrier Removal Funds?
 - A: Participating providers that meet all of the following criteria are eligible to apply:
 - See Sunshine Health members at a physical location; and
 - Are accepting new Sunshine Health members; and
 - Are in the Sunshine Health 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.
- Q: What is the deadline to submit the BRF application? Can it be extended for any reason?
 - A: April 26, 2019, 5 P.M. ET. Sunshine Health reserves the right to extend the deadline.
- Q: Will there be another BRF application in the future?
 - A: We do not have information regarding future applications surrounding accessibility improvements at this time.
- Q: What if I miss the deadline for submitting my application?
 - A: Unfortunately, we cannot accept additional applications beyond the deadline.
- Q: Can I change my BRF application response after I have submitted it?
 - A: Changes or edits can be made through the final submission date of April 26, 2019, 5 P.M. ET.
- Q: How will I know if my application was received?
 - A: You will receive a confirmation email when you submit your application. You 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.



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- Q: How will I know if I am chosen to be awarded funds?
 - *A: You will receive an email from Tim Fuchs at NCIL at Tim@NCIL.org . You will also be informed if your application was not selected for funding.*
 - Q: If I have a question about the BRF application, who should I contact?
 - *A: Contact Tim Fuchs at NCIL at Tim@NCIL.org or call 1-202-207-0334 or toll-free at 1-844-778-7961.*
 - Q: How much will this award fund per submission?
 - *A: Award amounts will vary based on the specific number of BRF grants awarded and amount of each grant will depend on the total number of applications received, the impact applications will have on Sunshine Health disability access network adequacy, and the number of Sunshine Health members with disabilities impacted. There is no funding cap, however we anticipate most funds will be in the range of \$500 - \$20,000.*
 - Q: Are there costs for which my organization is responsible?
 - *A: Sunshine Health will cover the cost of the accessibility site review, technical assistance, and approved modification(s). Any additional costs are the responsibility of the awardee.*
 - Q: Can I include multiple pieces of equipment or modifications?
 - *A: Yes, include all items for which you are seeking funding.*
 - Q: I have multiple sites, do I need to submit a BRF application for each site?
 - *A: Yes, please submit separate applications for each site where you serve members.*
 - Q: How soon can I expect award funding to arrive?
 - *A: We anticipate fund disbursement within 30 days after notification of funding award. Provider contracts will need to be signed prior to receipt of funds.*
 - Q: Will you grant dollars outside of my state, given that you have a national presence?
 - *A: BRF dollars granted by the Sunshine Health BRF Committee are for the participating providers in Florida only.*



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- Q: What happens if I choose to term with Sunshine Health?
 - *A: You must remain in the network (and in good standing) for 1 year following grant funding or full re-payment will be required. If you leave the network after 18 months, you will repay 50%. After 2 years, fully-funded, no repayment will be due.*
 - Q: What if the accessibility improvements cannot be completed by the timeline listed in the application, due to reasons I cannot control (i.e. the part is on backorder or the contractor is not able to start the work within the timeline)?
 - *A: Contact Tim Fuchs at NCIL at Tim@ncil.org to further discuss your concerns.*
 - Q: What happens if the accessibility improvement costs change after the contractor begins work?
 - *A: The initial decisions are final. The provider is responsible for any additional costs.*
 - Q: My question isn't listed. Who can I contact?
 - *A: Contact Tim Fuchs at NCIL at tim@ncil.org or call 1-202-207-0334 or toll-free at 1-844-778-7961.*