

MEETING RECORD

PERSONAL CARE SERVICES STAKEHOLDERS MEETING



October 15, 2015 | 1:00pm-2:30pm | Meeting Location: Dix Campus, Kirby Building, Conference Room 297

AGENDA TOPICS

1) Welcome/Introductions

Facilitator: Cassandra McFadden, PCS Policy Analyst, DMA

Round-robin of individual introductions with name and agency representation

2) Program Updates

a) DMA Internal Audit (Cassandra McFadden, DMA)

In February 2015, a representative for the office of internal auditors (OIA) join the stakeholder group meeting to discuss with stakeholders the DMA Internal Audit. PCS providers were selected to be reviewed during the internal audit, of those reviewed, 7 high level issues were discovered during the audit. While the Audit reports are still being completed, the 7 areas of concern identified to DMA are the following:

1. Liberty
2. Service Plans
3. Supervisory Visits
4. Quality Improvement
5. Aide Training
6. Plan of Care
7. Background Checks

The review of each of these areas led to several recommendations made to the PCS program. Over the course of the last year, DMA has implemented some of these recommendations, such as the Service Plan Functionality.

The Stakeholder group will be provided additional information in the coming months on how DMA will further manage the PCS program internally based on recommendations made by OIA.

b) Special Assistance and Medicaid Eligibility (Chris Urso, DAAS)

DAAS is experiencing, and has identified, several issues with both Special Assistance (SA) and Eligibility. These issues are being primarily reported by Home Care Providers although the issues can affect Adult Care Home providers as well. The issues are pending resolution and DAAS has already worked to resolve the defect identified several weeks ago.

Once a month, NCFAS produces an SA report outlining SA cases with incomplete Medicaid Eligibility. The results of the September SA report indicated a load of 208 unduplicated cases showing incomplete Medicaid Eligibility. NCFAS has updated instructions for workers to limit confusion.

DAAS is also experiencing some payment issues. Numerous payments are being identified as rejected due to bad information, where accounts no longer exist or never existed or when payments are specifically rejected. To combat this issue DAAS would like to remind providers that the lack of immediate notification of beneficiary provider change or unexpected closure are the primary cause behind these issues and cause undue hardship to both providers and beneficiaries and can easily result in temporary loss of funds.

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The division would also like providers to have available the DSS contact list for reporting issues available at <http://www2.ncdhhs.gov/dss/local/>. Providers may select appropriate county for a listing of key staff contacts.

DAAS will assist in expediting requests and issue resolution. The DMA, QiRePort, and Liberty webpages will each help spread information concerning these issues.

c) PCS Quarterly Update (Emonique Whitfield, VieBridge)

VieBridge provided their Quarterly update on the working of the QiRePort system, reporting on the numbers of beneficiaries, notices, ADL needs, and assessment types in the system. They provided a handout with the September numbers as well that has been posted along with these minutes. VieBridge also reported specifically on the completion of Service Plans using the new functionality and included reports on the timeliness of the service plan submissions.

Service plans should be completed and submitted within 7 business days of provider acceptance of the referral. After that providers have 14 business days to upload a record of the beneficiary's, or their legal guardian's, consent to the submitted service plan.

d) 1% Rate Reduction Update (Provider Reimbursement Representative, DMA)

CMS has not approved

3) Announcements

The November stakeholder group meeting may be held in a different format such as a webinar. Announcements concerning this will be provided as they are decided.

4) Reports from Other Divisions

a) DAAS and DHSR

See Special Assistance and Medicaid Eligibility under Program Updates.

b) DMH/DD/SAS

No updates at this time.

c) DHSR

DHSR will be reviewing Chapter 25 rules. Public input will be requested. Announcements concerning the review will be distributed and potentially announced at the following Stakeholder Group Meeting.

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5) Stakeholder Feedback

Question: Concerning the internal audit: What are they finding about aide training?

DMA Response: The audit indicated that within the sample size a substantial amount of documentation that is expected to be completed was not available, indicating the need for more emphasis on completing required documentation. Greater than 50% of the audited providers did not have the required information readily available for review.

Question: What should a provider do when a beneficiary refuses to sign the [Service Plan] consent form?

DMA Response: Providers should document all their efforts to get the paperwork signed. Include the names of family/caregivers they asked to sign, and reasons why they refused. They should date and upload all their documentation.

6) Meeting Adjourned at 2:00 pm