## MEETING RECORD

## PERSONAL CARE SERVICES STAKEHOLDERS MEETING



March 15, 2018 | 1:00pm-3:00pm | Meeting Location: Dix Campus, Kirby Building, Conference Room 297

#### **AGENDA TOPICS**

### 1) Welcome/Introductions

Facilitator: Shannon Spence, Program Manager Round-robin of individual introductions with name and agency representation

### 2) Program Updates

#### a) Liberty Updates (Denise Hobson, Liberty Healthcare)

Liberty Healthcare provided updates regarding Spring PCS Regional Provider Trainings, which will be held April 30<sup>th</sup> - May 16<sup>th</sup>. The training dates and locations are available on Liberty Healthcare's website. There is no cost to attend training, but registration is required and will be open in April. Liberty requested suggestions for the regional training agenda and asked that suggestions for training topics be emailed to PCS Program Questions@dhhs.nc.gov.

#### b) Electronic Visit Verification (Shannon Spence, DMA)

DMA shared with stakeholders that effective January 1, 2019, the 21st Century CURES Act (Public Law No: 114-255) requires the use of an Electronic Visit Verification (EVV) system for personal care services requiring an in-home visit by a provider that is delivered under a state plan or waiver. EVV is required for all providers and, with automated technology, will track and monitor service date, location, the individual providing services, the individual receiving services, the type of service performed, service begin time, and service end time. Stakeholders were asked to complete a short survey on EVV utilization, available on the NCTracks website until March 16, 2018. This survey will help DMA understand which Electronic Visit Verification systems may already be implemented in our state.

Stakeholders shared their concerns regarding EVV and were informed that DMA is first giving providers the chance to respond to the EVV system utilization survey and will use that information to help us guide our decisions as we move forward with planning. Stakeholders were informed of an EVV webpage expected to go live in June of 2018, this webpage will provide EVV updates and FAQs.

DMA welcomes provider feedback and concerns. Stakeholders were asked to submit questions related to EVV to <a href="Medicaid.EVV@dhhs.nc.gov">Medicaid.EVV@dhhs.nc.gov</a>.

#### c) NC HIEA/NC Healthconnex Guidance (Shannon Spence, DMA)

DMA shared information about NCGS 90-414.7 that passed in 2015 and created the North Carolina Health Information Exchange Authority (NC HIEA). The NC HIEA was created to oversee and administer the NC Health Information Exchange Network. The NC HIEA operates North Carolina's statewide health information exchange—NC HealthConnex. NC HealthConnex is a tool that links disparate health systems and existing HIE networks together to deliver a holistic view of the patient record through a secure, standardized electronic system so that providers can share important patient health information. The use of this system promotes the access, exchange, and analysis of health information.

To meet the state's mandate, all providers must "be connected" and submitting data to the HIE by June 1, 2019 to continue receiving payments for Medicaid services provided. To meet the state's mandate, a Medicaid provider is "connected" when its' clinical and demographic information pertaining to services paid for by Medicaid and other State funded health care funds are being sent to NC HealthConnex, at least twice daily, either through a direct connection or via a hub.

Stakeholders were advised to go to <a href="https://hiea.nc.gov">https://hiea.nc.gov</a> for additional information on how they can connect to NC HealthConnex. Questions may be emailed to <a href="https://hiea.nc.gov">hiea@nc.gov</a>.

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### d) Updated DMA 3051 Training (Shannon Spence, DMA)

In January of 2018, Liberty HealthCare and DMA hosted a webinar for Community Care of North Carolina physicians focused on providing a better understanding of PCS as well as the proper completion of The Request for Independent Assessment for Personal Care Services (PCS) Attestation of Medical Need Form (DMA 3051). This training can be found at <a href="http://nc-pcs.com/physician-pcs-training/">http://nc-pcs.com/physician-pcs-training/</a>. Also, an updated version of this training has been made available for beneficiaries and providers; this training can be found at <a href="http://nc-pcs.com/Medicaid-PCS-forms/">http://nc-pcs.com/Medicaid-PCS-forms/</a>.

### e) Quality Assurance (Rhonda Sutton, DMA)

#### Internal Audit Results

DMA discussed results of their December 2017 internal audits of Supervisory Visits and Aide Training Documentation. Records were requested via certified letter for the internal audit from a random selection of beneficiaries. DMA Nurse Reviewers evaluated a total of 15 files for Supervisory Visits and 15 files for Aide Training/Competency Documentation. Out of 15, three providers were cited for non-compliance for Supervisory Visits (20%). Out of 15, eight providers were cited for non-compliance for Aide Training/Competency Documentation. A significant number of non-compliance was due to no response to the audit request as 23% of the providers audited were non-responsive. Those found to be non-compliant with policy requirements were referred to the Office of Compliance and Program Integrity. Providers who would like the results of their audit may contact DMA directly. DMA stressed the importance of ensuring that provider information in NCTracks is updated as there was returned mail from several providers during this audit process.

#### Desktop Reviews

DMA shared that DMA Nurse Consultants are currently conducting desk reviews from a random sample of 50 Liberty assessments completed in February of this year. DMA Nurse consultants review the assessments to ensure that they are appropriately scored based on Clinical Coverage Policy 3L and DMA guidance. 2017 and 2018 assessments are also compared to determine if changes in hours are the result from a change in condition/caregiver status, updates to Clinical Policy 3L Guidance, or due to other reasons. This initiative creates an additional avenue of monitoring of Liberty's performance and allows DMA to define plans for quality assurance and improvement activities where they are most needed.

#### f) Medicaid Bulletins

DMA shared the most recent Medicaid Bulletins relative to PCS that have posted on DMA's webpage. The December 2017 Medicaid Special Bulletin featured information regarding the Personal Care Service Rate Increase, submitting claims adjustments, and the systematic reprocessing of claims. Stakeholders with questions regarding the rate increase were encouraged to contact DMA Provider Reimbursement at 919-814-0060.

In addition to the December Medicaid Special Bulletin, the March 2018 Medicaid Bulletin featured articles regarding Spring PCS Regional Provider Trainings and Non-Compliance with Personal Care Service Plan Requirements. Providers were encouraged to visit DMA's website to read these articles and were advised that if they have any questions, to please contact PCS Staff at PCS Program Questions@dhhs.nc.gov.

#### g) Spring Regional Training

DMA reiterated the importance of providers attending Spring PCS Regional Training and again encouraged stakeholders to submit agenda topics of interest to <a href="mailto:PCS\_Program\_Questions@dhhs.nc.gov">PCS\_Program\_Questions@dhhs.nc.gov</a>.

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## 3) Reports from Other Divisions

- a) DAAS
- No reports
- b) DMH/DD/SAS
  - No reports
- c) DHSR
  - No reports

### 4) Stakeholder Feedback

## 5) Meeting Adjourned

Next meeting is June 21, 2018