

# MEETING RECORD

## PERSONAL CARE SERVICES STAKEHOLDERS MEETING



November 17, 2016 | 1:00pm-3:00pm | Meeting Location: Dix Campus, Kirby Building, Conference Room 297

### AGENDA TOPICS

#### 1) Welcome/Introductions

Facilitator: Cassandra McFadden, PCS Program Manager

Round-robin of individual introductions with name and agency representation

#### 2) Program Updates

##### a) Liberty Updates

Denise Hobson, Director of Clinical Services provided the following updates.

- During Liberty's November 11<sup>th</sup> Assessor training, Liberty provided training focused on Alzheimer's/Dementia and how to assess beneficiaries, drilling down to determine their need for hands-on assistance with ADLS. Example provided: When assessing an Alzheimer's/Dementia beneficiary for mobility, if there is evidence of wandering, does it require hands on assistance from the caregiver/aide to direct the beneficiary from point A to point B or to complete another ADL. If hands on assistance is required due to wandering, the beneficiary will be scored as needing hands-on assistance to complete the task.
- Liberty held 6 successful provider trainings this month. A recorded Webinar of the Provider Trainings was held on October 28<sup>th</sup>. If you were unable to attend the in person trainings, you may view the power point and recorded webinar on Liberty Healthcare's website under "trainings"
- Liberty will host a Webinar On 11/22/16 @ 2pm webinar for assessing the eating ADL needs of PCS assessment).
- Provider Focus group December 8 from 1pm to 2:30 \* Agenda TBA\*

##### b. DMA Updates

- **Eating ADL Support and Upcoming Webinar** – Based on feedback received from the PCS Stakeholder group, DMA has reviewed the issues and concerns related to the Eating ADL impact. In reviewing those concerns, DMA took a closer look at the Eating Needs of Aged and Disabled beneficiaries and their overall nutritional wellbeing. Based on our review, DMA has identified the need to provide additional support to beneficiaries who have a physician's order for a mechanically altered diet. Liberty Healthcare will provide a webinar for PCS providers "Assessing the Eating Needs of PCS Beneficiaries" (11/22/16). Effective December 1, 2016 during the assessment, the assessor will review medical records available at the time of the assessment for physician orders related to Eating ADL needs, if there is a physician's order that indicates their diet is required to be mechanically altered, the assessor will document medical record findings in the comment section of the assessment and score the Eating ADL as needing Assistance.

Beneficiaries who have recently received an adverse notice, are in the appeal process, and have a physician order for a mechanically altered diet may submit the physician's order to DMA via the PCS email at [PCS\\_Program\\_Questions@dhhs.nc.gov](mailto:PCS_Program_Questions@dhhs.nc.gov). Physician's orders received will be reviewed by DMA nurse consultants and the beneficiary's previous assessment will be updated to reflect the need for assistance with eating.

DMA will be utilizing new functionality created by VieBridge (Derivative Assessment) that will allow the DMA nurse to amend the previous assessment during the appeal process. This functionality will be used to address incoming physician orders for mechanically altered diets as well as during the appeal process once a beneficiary has completed mediation and is in impasse. If an agreement has been made between parties involved, the assessment may be amended to reflect the

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settlement reached. Example, the beneficiary was scored as "verbal cueing and supervision" for mobility, during the appeal medical records were provided that indicated there was a "limited" hands on assist need for mobility. The derivative assessment functionality will be utilized to amend the assessment to indicate a "limited" need for mobility and reissue the authorization and notifications of new hours to the beneficiary and the provider. The provider would be required to accept the new referral with new hours within 2 business days and complete the new service plan. The derivative assessment functionality will reduce the need for providers submitting manual Service Plans based on appeal settlements.

DMA is in the process of training DMA nurses on how to complete the derivative assessment and will begin utilizing this functionality in December. DMA will post a Special Medicaid Bulletin in December discussing the additional ADL support and the webinar that was provided by Liberty.

- **DMA required forms—**
  - ICD-10 forms – there are approximately 16,000 ICD-10 forms that have not been submitted. All ICD-10 forms are due by 1-31-2017.
  - DMA 3136 – Quality Improvement Attestation form is due by December 31, 2017 each year.
  - DMA 3085 Training Attestation forms are due prior to servicing beneficiaries receiving PCS hours mandated by Session Law 2013-306 (over 80 hours of PCS)

\*DMA will begin auditing providers in 2017 for the required PCS forms. Providers determined out of compliant will be referred to DMA Program Integrity.

- **Assessment joint visits-** DMA staff are joining Liberty assessors for In-home and facility assessment visits. Joint visits offer DMA staff the ability to oversee the assessment process and provide necessary feedback to Liberty Healthcare.
- **Desk reviews-** DMA has completed 50 desk reviews of beneficiaries who received adverse decisions but did not appeal. DMA will continue to conduct desk reviews as an additional avenue of monitoring of the IAE.
- **Internal Audits-** coming soon via letters instead of fax/phone calls, letters will be trackable by mail and the anticipated mailing date will be in December

### 3. OPR Updates

Staff from DMA Provider Enrollment were available to share updates related to Federal Regulations 42 CFR 455.410 Attending, Rendering, Ordering, Prescribing, or Referring Providers and 42 CFR 455.440 National Provider Identifier effective **November 1, 2016**.

- February new editing set as pay & report effective November 1<sup>st</sup> for the providers claim types. Editing is not currently in place. The NPI needs to be the individual NPI # that is enrolled on dates of service or leave it blank on the form.
- CCNC – Providers are still expected to adhere to coordination of care practices associated with CCNC/CA. Although the payment authorization is no longer on the claim the care plan information is required. **Questions? Will the PCP assignment stay the say?** Yes, it has not changed.
- Patients are still assigned to the PCP providers and the OPR is independent when it comes to CCNC.
- Questions regarding OPR updates may be directed to DMA Provider Enrollment

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### 3) Announcements

Bulletin for CCNC payment authorization updates

Provider trainings: 11/29/16 @ 10-11:30, 12/9/16 @ 10-11:30, 12/18/16 @ 10-11:30. Check the Liberty Healthcare Website for recorded trainings.

Check the DMA website for the PCS Special Medicaid Bulletin – December.

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### 4) Reports from Other Divisions

#### a) DAAS

No Updates at this Time

#### b) DMA/DD/SAS

No updates at this time

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### 5) Meeting Adjourned

Next meeting - January 19, 2017