

Topic	Question	Answer
Complex Care	Does this need to be a revision that is completed by support coordination?	Yes a revision is required to add the Complex Care service. The provider and SCA jointly will complete the Complex Care Screening Tool. A link to the tool is provided in the meeting notes.
Complex Care	Is the fee in addition to the IFS units?	Yes, the fee is a per diem
Complex Care	Is there a specific phone number to a corresponding department we can call with questions for complex care as well?	The link to the process is provided in the meeting notes. If you have questions, please reach out to your LGE.
Complex Care	Since this has been quite some time prior to PHE; would there be an option for a more in depth training for providers and SCA's	OCDD will develop additional training
Complex Care	How can I get a copy of Complex Care Supplemental	Link provided in the Meeting notes
Cost Reports	The agency that we submit cost reports to told us that support coordination does not do cost reports, that it is only community based providers and not support coordination. I believe ours was returned to us. If it is required for support coordination, you may need to advise the people we submit them to.	Cost reports are required for all HCBS providers per HCBS rules. The reports will be submitted to Myers and Stauffer. The link to the webpage is provided in the meeting notes.
Cost Reports	Sorry did not mean to send yet, the agency is not the one who advised us of the cost report not being required for SCA. It was Lindsey N Nizzo of LDH Medicaid Rate Setting and Audit Section. We can share the email but she was very clear that it is a community based provider requirement and not support coordination. Please advise if you need this copy. Again, this is in regard to previous topic, cost report.	OCDD will follow up with LDH Medicaid Rate Setting and Audit Section, and provide an update for SCA Cost Reports.
CIRs	Are ghost incidents being compared to entered incidents to see if they are duplicated? In the past, incidents got lost in SIMS and a new one was started not knowing what was happening.	Ghost CIRs occur when a CIR is created but not "linked" to a participant. As a provider, you should ensure CIRs are entered <u>AND</u> linked to a participant. If the person entering the data is "losing" incidents that have been entered, it may be due to not linking the participant to the CIR. If your agency is losing CIRs that have been entered, you may want to consider implementing a tracking system for all CIRs entered including the CIR number until the issue is resolved.

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CIRs	I am unlinked from my agency. I have sent an email but have not received a response	Please email Marilee.Andrews@la.gov directly to resolve this issue.
CIRs	A lot of my participants are duplicated in SIMS. When will this issue resolve. Sometimes they pop up three/four time.	Duplicate individuals appear in SIMS due to current file transfer issues which will continue. Select the last name in ALL CAPS to link the participant.
CIRs	How should we follow up on a CIR for the death of a participant if all the information is entered in the original text?	The follow up information should include all details: when, where, how, who was present (by name and title), if emergency services were called, was staff on duty at time of death, what actions did staff take if they were present, did they die at the hospital or at home, etc.
CIRs	You can link the CIR's together in SIMS just indicate "Associated"	Correct, you should indicate that two CIRs are related by typing that information into the body of the CIR (i.e., Associated with CIR ###).
CIRs	Why is deaths being denied for payment if the DSW has worked earlier that day or the client has died while servicing client?	Please reach out to OCDD Provider Relations for assistance when this occurs or you can email OCDD-HCBS@la.gov.
CIRs	I complete the documents for a new account however they connected me to my old agency clients.	Please reach out to SIMSWaiver@la.gov for assistance. It is important to complete the onboarding documents correctly and if a user is changing from one agency to another, email SIMSWaiver@la.gov to be reassigned to the new agency. Please do not submit a second application.
CIRs	We can only extend CIR's 2x, but MRC reports sometimes take 6 mos or more to come back. So, it's OK to let them go past their due date?	MRC cannot review deaths in 90 days due to the turnaround time on receiving death certificates. OCDD is aware of this problem and we are exploring options to resolve. Once a resolution has been determined, OCDD will notify providers, LGEs and SCAs.
CIRs	Is there a way for SCA to track overall agency CIRs by region? I have tried running a report to track them but I am unable to.	SC Supervisors should be able to track CIRs for the SCA for which they supervise, to my understanding. She can email me directly and we can walk through that together.
CIRs	Are CIRs able to be extended for any reason?	See extension memo issued to LGE's on 8/14/17 from Julie Foster Hagan.
CIRs	How does LGE address incidents when the due date is coming due but is missing a DSP and SC follow up. LGE has contacted both via phone and emails without a resolution	Contact Tanya Murphy at OCDD State Office.

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Office closures	Is it ok to list all of our closures in our license application renewal. (I understand emergencies). Thanks	Yes but any changes must be communicated to HSS.
Office closures	So we are not to use HSS.Mail@la.gov? For the expected closure days?	No, use HSS-HC-SC-Licensing@LA.GOV
Office closures	Is there a template that we must use for the unplanned closure email?	No
Office closures	Can we send a list for the entire year?	Yes
Office closures	Does this mean early closures due to inclement weather?	Yes
SC Timelines	What is the timeline for SC Quarterly/Annual Meetings	Timelines are provided in the meeting notes
SC Timelines	What are the timelines for submitting POC documents to SCA and Provider?	Timelines are provided in the meeting notes
SC Timelines	Can we have that time line sent out in writing? Also, can providers can be provided with the attachment power point training and be aware that blanks are not acceptable?	Timelines are provided in the meeting notes.The provider agency must submit attachments that clearly identify the preferences of the participant and the support strategies of the provider to support the activities in the plan of care. Blanks are not acceptable
SC Timelines	What if you as a provider is not invited to the meetings?	If a provider is not invited to the meeting, or if they have not received the POC, they should not sign the budget sheets nor submit the provider documents until they have received the POC and met with the SC to review the plan of care to ensure proper completion of provider documents. Additionally, they should report this noncompliance to the Regional Director of the SCA and the Local Governing Entity (LGE).
SC Timelines	Our provider agency is not being notified of Q/A meetings about 50% of the time. Who is responsible for 90L's and all signatures from the family?	The 90L is the responsibility of the SCA unless the provider also provides SIL services for the individual. Then the SIL provider is responsible for getting the 90L completed. The SCA is responsible for getting signatures from the individual/family and the provider agency.
SC Timelines	They do discuss the EPOC, but we find out when we actually get the EPOC from the SC, changes were made that was not discussed at the meeting.	If changes were made to the POC that were not discussed in the meeting, the provider agency should reach out to the SCA to determine if there are any changes needed in the provider documents due to the changes made in the POC.

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SC Timelines	Sometimes the person at the meeting doesn't do the provider's attachments.	The provider agency is responsible for sending an individual to the meeting that can provide all needed information discussed in the meeting to ensure proper completion of provider documents.
SC Timelines	It would be helpful if providers (including self-direction) would save the documents electronically so they can update as needed.	Providers should keep the "provider documents" electronically to facilitate easy update. A provider document that has been well developed will ensure the DSW understands their responsibilities, and it will reduce the amount of time and effort to keep the document current.
SC Timelines	What recourse do we have if SC does not schedule a quarterly or annual and only requests provider documents when due? I've been told by SC that they still don't have to meet in person and all information being provided by provider meeting is telling me they do.	If a provider is not invited to the meeting, or if they have not received the POC, they should not sign the budget sheets nor submit the provider documents until they have received the POC and met with the SC to review the plan of care to ensure proper completion of provider documents. Additionally, they should report this noncompliance to the Regional Director of the SCA and the Local Governing Entity (LGE).
SC Timelines	Also, why are there so many extensions/revisions? We are still waiting on a couple from January and February.	Plans of care should not be extended. CMS requires that the Plan of Care be updated on an annual basis. Extensions result in CMS non-compliance. SCA's should plan appropriately to ensure timely completion of a revised plan of care prior to the expiration of the current plan of care. If this happens, reach out to the SCA Regional Director and the LGE.
SC Timelines	If the SC email you 1 week or 2 days before the meeting but you have input that needs to be added to the poc but you are not invited then what. I have been told that the consumer did not want us there.	If the participant does not want the provider at the plan of care meeting, then the SCA should remind the participant that changes to a plan of care can result in the provider no longer being able to provide support or not providing the support desired by the individual. The provider cannot support the individual if they are not familiar with the services to be provided. If the individual has a complaint with the provider, the SCA should meet individually with this person, but not as the plan of care meeting and/or remind participant of freedom of choice."

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SC Timelines	do we have to sign the attendance page if we, as providers, were not invited to the meeting:	You should not sign an attendance sheet if you did not attend. However, once the SCA goes over the POC with you, you can sign a different attendance sheet showing you did meet with the SCA to review the plan of care with the appropriate date reflected.
SC Timelines	What are the consequences we do not get the documents to the SCA on time.	A provider who does not meet the timelines may impact the issuance of a prior authorization to provide services. SCAs should report any noncompliance to the Executive Director of the provider agency and the Local Governing Entity (LGE).
SC Timelines	Are there guidelines on timelines like this for compelling revision requests as well?	Timelines for completing revision requests are documented in the revision request instructions on the OCDD documents page. Providers should sign revisions as soon as possible and return it to the SCA. Regular revisions should be completed within 10 business days, and emergency revisions should be completed as soon as possible.
SC Timelines	What are providers to do when case coordinators are not willing to work with scheduling conflicts?	Scheduling the quarterly and annual meetings is difficult due to the schedule of the participants/families. The providers should do what is necessary to accommodate the schedule for the family. However, if the SCA is not meeting the timelines for scheduling quarterly and annual meetings, then the Provider Agency should report any noncompliance to the Regional Director of the SCA and the Local Governing Entity (LGE).
SC Timelines	And also it's important that the SC sends the final POC to the Day Programs so they can have a complete POC on file.	Final POCs must be sent to both in-home providers and day program/vocational providers.
SC Timelines	We have coordinated transportation to a family to get to the doctor to get the 90L 5 times and still no 90L because the family still have not gone to the appointment.	If a support coordinator is having difficulty getting the 90L, have the SC supervisor or SC Regional Director reach out to ensure the family understands the timelines needed to receive the 90L. Any difficulty in getting the 90L should be documented in the event the plan of care is late.
SC Timelines	Self-direction employers are complaining to SCs that they have never been trained by the agency on attachments. Is there a plan to train the providers on their attachments?	The SCA should assist the family who is using Self-Direction with completing the provider attachments. OCDD is reviewing the need to provide additional training to employers in Self-Direction.

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SC Timelines	Annual meetings should be In person and at the home or can they be conducted at the agency?	Annual meetings for the plan of care must be conducted in the home of the participant.
SC Timelines	what does the Provider do if a Sc invites us to a meeting but she arrives early; has the meeting and leaves before Provider arrives?	If the SC holds the meeting prior to the on time arrival of the provider agency, then the SC will need to hold another meeting with the provider agency before provider attachments can be prepared. The SCA will need to provide a new attendance sheet to the provider for signature.
SC Timelines	What about long term Quarterly and Annual	Please send your specific question to OCDD-HCBS@la.gov for response.
SC Timelines	Since you said annuals are in person what about quarterlies. Can they be virtual?	There is criteria for conducting virtual quarterly visits. The SC must ensure that all requirements for a virtual visit are met. The SC must also identify those individuals in LaSRS who can receive a virtual visit. Refer to Post PHE trainings available at: https://ldh.la.gov/assets/docs/OCDD/waiver/SupportCoordination/PostPHETrainingSCVersion080323.pdf