6/5/18 Provider Call Notes

Program Updates – Julie Foster Hagan

Budget Update:

The session ended without an agreement on the budget, so we still do not have a final budget. Things are constantly being added and taken away. It is anticipated that the budget will be vetoed and that there will be a second special session.

Legislation added this session:
The name of the NOW fund has been changed to the I/DD Waiver Fund. There has not been money in this fund for some time, but due to a surplus from last fiscal year, there are currently funds available. This is a statutorily dedicated fund, so what the money can be used for is determined by the legislature. It was determined that the funds would be used as follows:
1) 650 new waiver slots
2) Increase the night rate to $11.00/hour (This should be implemented by 8/1/18 since it does not require CMS approval.)
3) An enhanced rate to support individuals with complex medical and/or behavioral support needs. (This will take additional time to implement because criteria must be developed and requires CMS approval. OCDD will begin meeting with stakeholders and expedite as quickly as possible.) Any additional legislative actions will not affect these three.

Registry Update:

Approximately 10,000 individuals have been screened (SUN) to determine their urgency of need and whether or not waiver services can meet their needs.

In cases in which individuals were dissatisfied with their SUN score, as advised by legal, these individuals were informed that could request an informal appeal prior to a formal appeal. Most of these appeals have been resolved over the phone or with a re-screening. If an individual is not satisfied with the results of the informal appeal, he or she can formally appeal.

Tiered Waiver Update:

Once the waiver amendments were approved, OCDD began making offers utilizing the new tiered waiver process. These offers included the 627 slots funded last legislative session, as well as maintenance of effort slots.

Since 2/6/18, OCDD has made 1,180 offers. 743 of these have been linked and selected a Support Coordination Agency. 176 have been certified into a waiver and have begun receiving services.

Our new Tiered Waiver process has allowed OCDD to be more responsive to the needs of individuals. All individuals with a SUN score of 4 have been given offers, and we have also given offers to individuals with a SUN score of 3. We have 221 individuals remaining who have a SUN score of 3 and are waiting for services. Individuals with a SUN score of 3 and a registry date prior to 6/30/13 have a received a waiver offer. With OCDD’s 650 new waiver slots, OCDD will be able to make offers to all current individuals with a SUN score of 3. Also, individuals with a SUN score of 2 who bump to a 3 or 4 due to changes in their
needs should also be able to receive a waiver offer. OCDD is planning to move to a consolidated waiver by 2020.

**Training/SIL Code/739 Denials/Record Retention – Kim Kennedy**

Face-to-face provider training is being conducted statewide. Topics include: tiered waiver, person centered planning, new Universal Plan of Care, and standardized provider documents. New provider documents must be used for new planning meetings by 07/01/2018.

On 7/01/2018, the SIL procedure code is changing in the NOW. This must be changed in order to add a new service to the NOW. A provider memo will be sent out prior to this change.

We are working with the rate and audit group and Molina to resolve the 739 denials in the Supports Waiver.

Records Retention – Records must be kept for six years as specified by licensing regulations. The agency must retain administrative, personnel, and recipient records for whichever of the following time frames is longer: until records are audited and all audit questions are answered OR six years from the date of the last payment for service.

**ROW Provider Requests – Melissa Bayham**

Providers who have a Type 82 PCA license and wish to provide Community Living Supports and Companion Care for ROW participants are encouraged to add the ROW sub-specialty to their license. The form to add this sub-specialty can be accessed in the Provider Enrollment section of the Louisiana Medicaid website at:

[http://www.lamedicaid.com/provweb1/Provider_Enrollment/ROW_Specialty_Subspecialty.pdf](http://www.lamedicaid.com/provweb1/Provider_Enrollment/ROW_Specialty_Subspecialty.pdf)

This form must be completed and mailed to Jeannathan Anderson. The address for mailing is located on the form. When mailing this form, please also complete an OCDD Freedom of Choice form to update the Freedom of Choice. Please be sure to indicate which ROW services your agency will be providing.

**SRI Updates – Daniel Buco**

EVV: A form will be added today that must be completed to verify if you have a participant that lives in a dead zone and the internet cannot be accessed to use EVV. Implementation of EVV is going very well. EVV is being used over 80% of the time.

LAST: For payroll and billing: working on an API for the biller to connect. Once this is completed, you won’t need to use LAST. You will be able to directly connect to LaSRS for billing and payroll. LAST will stay around for a long time so that everyone will have time to transition.