

AGREEMENT BETWEEN STATE OF LOUISIANA
DEPARTMENT OF HEALTH AND HOSPITALS

CFMS: 679532

DHH: 054062

Office of Aging and Adult Services

Agency # 320

AND

ACS State Healthcare, LLC

FOR

Personal Services Professional Services Consulting Services Social Services

1) Contractor (Legal Name if Corporation) ACS State Healthcare, LLC			5) Federal Employer Tax ID# or Social Security # 58247928700 (Must be 11 Digits)		
2) Street Address 9040 Roswell Road, Suite 700			6) Parish(es) Served 98, Statewide		
City Atlanta	State GA	Zip Code 30950	7) License or Certification # N/A		
3) Telephone Number 687-352-7200			8) Contractor Status		
4) Mailing Address (if different)			Subrecipient: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			Corporation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			For Profit: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			Publicly Traded: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
City	State	Zip Code	8a) CFDA#(Federal Grant #) N/A		

9) Brief Description Of Services To Be Provided:
To provide information and eligibility screening to individuals seeking services through programs administered by the Louisiana Department of Health and Hospitals Office of Aging and Adult Services (OAAS); and to provide assessment, reassessment, and care-planning to individuals seeking and receiving Long Term Care Personal Care Services, includes operation of telephone hotline, eligibility screening, assessment, annual reassessment, change assessment and determination of eligibility. Also includes dissemination of appropriate notices to recipients relative to these aforementioned services. Participation in appeal process for disputed cases, and in quality management activities, along with monthly reporting to OAAS are also included in the services to be provided.

10) Effective Date 07-01-2009	11) Termination Date 12-31-2009
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12) This contract may be terminated by either party upon giving thirty (30) days advance written notice to the other party with or without cause but in no case shall continue beyond the specified termination date

13) Maximum Contract Amount [REDACTED]

14) Terms of Payment
Contractor obligated to submit final invoices to Agency within fifteen (15) days after termination of contract.
Monthly payments of [REDACTED] beginning 07/01/2009 - 12/31/2009.

PAYMENT WILL BE MADE ONLY UPON APPROVAL OF:

First Name Karen	Last Name Dodson
Title Program Manager	Phone Number 225-342-8494

15) Special or Additional Provisions which are incorporated herein, if any (IF NECESSARY, ATTACH SEPARATE SHEET AND REFERENCE):

- | | |
|---|---------------------------------------|
| Attachment A: Statement of Work | Exhibit 1: Board of Resolution |
| Attachment B: HIPPA | Exhibit 2: Certificate of Authority |
| Attachment C: Special Provisions | Exhibit 3: Out-of-State Justification |
| Attachment D: OAAS-ADM-09-004 | |
| Attachment E: OAAS-ADM-08-015 | |
| Attachment F: OAAS-ADM-09-008 | |
| Attachment G: LA Medicaid Program Contractor Handbook | |
| Attachment H: OAAS-P-08-007 | |
| Attachment I: OAAS-ADM-08-011 | |

GOAL/PURPOSE

To provide information and eligibility screening to individuals seeking services through programs administered by the Louisiana Department of Health and Hospitals Office of Aging and Adult Services (OAAS); and to provide assessment, reassessment, and care-planning to individuals seeking and receiving Long Term Care Personal Care Services.

OUTCOME 1

Provide information and eligibility screening to individuals seeking services through programs administered by the Office of Aging and Adult Services. Deliverables under this outcome are to be performed according to policies and procedures in place for these services as of **December 1, 2009**. This does not, however, preclude OAAS from issuing new or additional policy and procedural guidance during the term of the contract, and the contractor shall be responsible for conforming to and implementing all such guidance.

Contractor will:

- A. Operate the toll-free telephone hotline, the La Options in Long Term Care Hotline, to provide access to information, eligibility screening, and service application for individuals inquiring about or seeking long-term care services administered by OAAS including, but not limited to, Elderly and Disabled Adult (EDA) Waiver, Adult Day Health Care (ADHC) Waiver, Program of All Inclusive Care for the Elderly (PACE) in New Orleans, or the Long Term Personal Care Services (LT-PCS) Program.
- B. For all DHH regions with the exception of Region 2, provide, via telephone interview, clinical eligibility and screening to individuals seeking OAAS administered long term care services using Level of Care Eligibility Tool (LOCET) and processes as described in:
LOCET User Intake Manual, Issue date 11/17/06 and all re-issue pages and subsequent revisions found at:
<http://www.dhh.louisiana.gov/offices/publications/pubs-105/8145.doc>;
and as per any and all accepted protocol changes in effect as of 6/25/09.
 - All staff (intake analysts) performing LOCET must be Registered Nurses or possess a Bachelor's Degree in Social Work or a Master's Degree in Social Work.
 - All staff performing LOCET must be LOCET trained by OAAS.
- C. For persons calling in via telephone, to request a Nursing Facility admission(statewide) provide, via telephone interview, clinical eligibility screening using Level of Care Eligibility Tool (LOCET) and processes as described in:
LOCET User intake Manual, Issue date 11/17/06 and all re-issue pages and subsequent revisions found at:
<http://www.dhh.louisiana.gov/offices/publications/pubs-105/8145.doc>;
and as per any and all accepted protocol changes in effect as of 6/25/09.
 - All staff (intake analysts) performing LOCET must be Registered Nurses or possess a Bachelor's Degree in Social Work or a Master's Degree in Social Work.
 - All staff performing LOCET must be LOCET trained by OAAS.
- D. For all DHH regions with the exception of Region 2, perform the Imminent Risk of Facility Placement review and determination process for EDA waiver, ADHC waiver, and LT-PCS applicants as described in:
OAAS Level of Care Eligibility Chapter found at:
<http://www.dhh.louisiana.gov/offices/publications/pubs-105/8627.pdf>;
pp. 16 - 22, 35 - 49 and as per any and all accepted protocol changes in effect

as of 6/25/09.

- All staff performing the Imminent Risk determination process Part I shall meet all staffing requirements in effect for contract number CFMS 613869 as of 6/25/09.
- All staff performing the imminent risk determination review must be trained by OAAS.

E. For those applicants within the population specified in items B and C above and who require the Part II of the Imminent Risk Determination, perform the Medical Deterioration review and determination process as described in:

OAAS Memorandum "OAAS-ADM-09-004, ACS Medical Deterioration Review Process," Issued 3/27/09 (attached) and as per any and all accepted protocol changes in effect as of 12/01/09..

- All staff performing the Imminent Risk Part II Medical Deterioration Review Process must hold a current license to practice as a registered nurse in Louisiana, and have at least one year of clinical RN experience.
- All staff performing the imminent risk determination review must be trained by OAAS.

F. For those applicants within the population specified in items B and C above and who require the review of a Statement of Medical Status, perform the review and determination process as described in:

LOCET User Intake Manual, Issue date 11/17/06, found at:

<http://www.dhh.louisiana.gov/offices/publications/pubs-105/8145.doc> ;

and as per any and all re-issue pages and subsequent revisions and according to any and all accepted protocol changes in effect as of 6/25/09; and per instructions described in:

"OAAS Memorandum OAAS-ADM-08-015, Criteria for Review of Pathway 3, 4, and 5," Reissued as Numbered Document 11/18/08 (attached); and as per any and all accepted protocol changes in effect as of 12/01/2009.

- All staff performing the Statement of Medical Status Review Process must hold a current license to practice as a registered nurse in Louisiana, and have at least one year of clinical RN experience.
- All staff performing the Statement of Medical Status review and determination must be trained by OAAS.

G. For all recipients to whom the contractor sent a Program Choice form because the recipient requested waiver services and passed LOCET criteria for such, the contractor will provide a waiver file data feed to the registry data services contractor (Statistical Resources, Inc.-- SRI). This file data feed includes, but is not limited to the following items:

- a. Daily feed after 5pm to SRI via transmission to the DHH FTP site
- b. Data contains:
 - i. Recipient's name, addresses (mailing and physical), phone number, recipient's personal representative's name, mailing address and phone number
 - ii. Programs requested
 - iii. Date Program Choice form received by contractor (ACS)
 - iv. Pathway Status for approved requestors to be placed on registry
 - v. Reported changes within the last fourteen (14) days
- c. Feedback via email from SRI is addressed if there is a problem

H. For all DHH regions with the exception of Region 2, ACS will be contacted by the registry data services contractor (Statistical Resources, Inc.-- SRI) regarding those recipients who are to be offered a waiver slot. ACS will provide a waiver file data feed to SRI relative to these recipients. This file data feed includes, but is not limited to the following items:

- a. Daily feed after 5pm to SRI via transmission to the DHH FTP site
- b. Data contains:
 - i. Recipient's name, addresses (mailing and physical), phone number, recipient's personal representative's name, mailing address and phone number
 - ii. Programs requested
 - iii. Date Program Choice form received by contractor (ACS)
 - iv. Pathway Status for approved requestors to be placed on registry
 - v. Pathway and Imminent Risk status
 - vi. Reported changes within the last fourteen (14) days
- c. Feedback via email from SRI is addressed if there is a problem

OUTCOME 2

Provide comprehensive assessment and care planning to individuals seeking and receiving Long Term Personal Care Services (LT-PCS). Deliverables under this outcome are to be performed according to policies and procedures in place for these services as of **December 1, 2009**. This does not, however, preclude OAAS and/or DHH from issuing new or additional policy and procedural guidance during the term of the contract, and the contractor shall be responsible for conforming to and implementing all such guidance.

Contractor will:

- I. For all DHH regions with the exception of Region 2, provide in-home assessment of new LT-PCS applicants using Minimum Data Set Home Care (MDS-HC) and according to procedures described in:
"Schematic for Initial Requests – Nursing Facility Level of Care Determination Process for HCBS Requestors," found at:
<http://www.dhh.louisiana.gov/offices/publications/pubs-105/Schematic%20for%20Initial%20Request%20-%20NF%20LOC%20Determ%20for%20OAAS%20HCBS.pdf> ;
and as per any and all accepted protocol changes in effect as of 6/25/09;
and per the instructions given in the:
MDS-HC Manual for Version 2.0; and as per any and all accepted protocol changes in effect as of 12/01/09.
 - All staff performing in-home assessment must hold a Bachelor's degree in a Social Service field
 - All staff performing in-home assessment must be MDS-HC certified by OAAS
- J. For all DHH regions with the exception of Region 2, complete initial OAAS-approved Plan of Care for new LT-PCS applicants according to:
"OAAS-ADM-09-008, OAAS Policies Governing the Assessment and Care Planning Processes for Home and Community Based Services – ACS" (attached); and per the instructions given in the:
LT-PCS Manual, Section 30.7, page 1 of 5, found at:
<http://www.dhh.louisiana.gov/offices/publications/pubs-105/141.pdf>;
and as per any and all accepted protocol changes in effect as of 12/09/09.
 - All staff completing the Plan of Care must hold a Bachelor's degree in a Social Service field
 - All staff completing the Plan of Care must be MDS-HC certified by OAAS.
- K. For all DHH regions including Region 2, perform annual in-home reassessments and care plan renewal as described in:
Revised Contractor Handbook, Personal Care Services, Re-Issue Date 6/19/09, Section: Annual Re-Assessments, pp. 1-4, (attached) with application of all subsequent accepted protocol changes adopted since 12/1/06 and in effect as of 6/25/09.
 - All staff performing annual re-assessment must hold a Bachelor's degree in a Social Service field.

- All staff performing annual re-assessment must be MDS-HC certified by OAAS.

L. For the following groups:

a. All LT-PCS recipients who are receiving or who have requested services as of **January 1, 2010**,

b. New requestors from all DHH regions whose request date is **January 1, 2010** or later with the exception of requestors Region 2,

the contractor will conduct MDS-HC assessment and revise the OAAS approved Plan of Care upon status change and according to policies and procedures described in:

"OAAS-ADM-09-008, OAAS Policies Governing the Assessment and Care Planning Processes for Home and Community Based Services – ACS" (attached).

M. For the populations specified in Items F, G, and H above, perform the review and final determination of eligibility for LT-PCS services as described in:

OAAS Memorandum **"OAAS-P-08-007, Guidelines for ACS Review and Determination of LT-PCS Cases,"** last updated 7/9/08, (attached) and as per any and all accepted protocol changes in effect as of 6/25/09;

and per instruction given in the:

OAAS Level of Care Eligibility Chapter found at:

<http://www.dhh.louisiana.gov/offices/publications/pubs-105/8627.pdf>

and as per any and all accepted protocol changes in effect as of 6/25/09.

- All staff performing the review and final determination of eligibility for LT-PCS services shall comply with staffing requirements as per any and all accepted staffing requirements in effect as of 6/25/09.

N. For all determinations made during the processes listed in Items B through J above, issue appropriate OAAS-approved notices to applicants as per any and all accepted protocols in effect as of 6/25/09.

O. For the following groups:

a. All LT-PCS recipients receiving or who have requested services as of June 30, 2009,

b. New requestors from all DHH regions whose request date is July 1, 2009 or later with the exception of requestors Region 2,

the contractor will assist recipients in changing providers when necessary and as per information contained in:

LT-PCS Provider Manual, Issue date 11/01/07 and all subsequent revisions, found at:

<http://www.dhh.louisiana.gov/offices/publications/pubs-105/141.pdf>;

and as per any and all accepted protocol changes in effect as of 12/01/09.

OUTCOME 3

Maintain staffing and organizational capacity sufficient to assure quality, timeliness, and accountability for services delivered under this contract.

P. Staffing Requirements

Sufficient staff must be hired and/or retained to meet the standards of the contract. Unless agreed to by OAAS, staffing must meet or exceed the following level and requirements:

1. Sufficient Call Center staff must be hired and/or retained to handle volume of inquiries and transfers of calls received on the La Options in Long Term Care Hotline. Contractor will retain a minimum of 8 FTE staff for this purpose.
2. Sufficient LOCET Intake staff must be hired and/or retained to handle the expected volume of inquiries and transfers of calls during the period 07/01/09 through 12/31/09. Contractor will retain a minimum of 18 FTE staff for this purpose.
3. Sufficient nurse consultants must be hired and/or retained to complete

expected volume of LOCET screenings, perform the Statement of Medical Status and Medical Deterioration Reviews, and serve as Quality Assurance reviewers for LT-PCS Plans of Care. Contractor will retain no fewer than four full-time nurse consultants for this purpose.

4. Nurse consultants must hold a current license to practice as a registered nurse in Louisiana, and have at least one year of clinical RN experience.
5. Sufficient Social Work Field Staff must be hired and/or retained to maintain sufficient coverage throughout Louisiana for the completion of home visits relative to Initial, Change, and Annual Assessments / Reassessments. Contractor will retain no fewer than 37 FTE staff for this purpose.
6. Sufficient supervisory and administrative staff must be hired and/or retained to facilitate the timely and accurate performance of duties under this contract; and to provide all necessary assistance in policy application and on-going training needs.
7. Criminal background checks must be performed for all staff providing services under this contract. No person with a felony conviction or conviction for crime against the elderly or infirm may provide services under this contract.

Q. Quality Assurance Requirements

1. Contractor will comply with the OAAS Quality Management of Medical Deterioration Review process as described in:
"OAAS Memorandum OAAS-ADM-08-011, OAAS Medical Deterioration Quality Management Review Process," - Issue Date 6/12/08, (attached), and as per any and all accepted protocol changes in effect as of 6/25/09.
2. Contractor will continue to conduct random monitoring of phone LOCET administration as trained by OAAS personnel. Written summaries of the contractor's findings must be kept for periodic review by OAAS Quality Management personnel.
3. Contractor will respond to the OAAS LT-PCS Quality Management Sample Review results as described in:
 - a. **"OAAS Memorandum OAAS-IF-08-010 OAAS Quality Management Processes, Issued 3/29/08,"** (attached) and as per any and all accepted protocol changes in effect as of 6/25/09; and as described in:
 - b. **"OAAS Memorandum OAAS-IF-08-008 OAAS QM Checklist for ACS LT-PCS Cases, Updated 3/29/08,"** (attached) and as per any and all accepted protocol changes in effect as of 6/25/09.

R. Reporting Requirements

Contractor shall provide all information contained in the **State Progress Report, Section 6** (attached) to OAAS on a monthly basis.

S. Equipment

Contractor is responsible for purchasing and/or maintaining computer software, hardware, and any additional materials that are necessary to perform requirements under this contract and to electronically access, transfer, and/or receive information from OAAS, Statistical Resources Incorporated (SRI), Capital Area Agency on Aging, and Medicaid.

T. Appeals

Appeals will be handled jointly by the contractor and the OAAS State Office staff for all cases in which the decision by ACS is being appealed. The contractor will assist in the preparation of the summary of evidence, furnish the necessary supporting documentation and be present at the appeal hearing. It may also be necessary for assessment staff to provide testimony during the appeals hearing. The contractor

will also be responsible for conducting informal reconsiderations to resolve grievances prior to the appeals hearing.

U. Conflict Resolution

Contractor will follow the DHH policy regarding abuse and neglect. Resolving other conflicts will depend on the nature of the complaint. The contractor will be responsible for the conflict resolution for all regions with the exception of Region 2 files whose request date is 07/01/09 or after. Actions that the contractor will be responsible for may include, but are not limited to the following

1. Referring complaints regarding a worker to the provider agency,
2. Resolving disputes between the recipient and the provider,
3. Referring complaints to OAAS if they cannot be internally resolved, and
4. Providing information regarding disposition of complaints to OAAS and/or DHH Health Standards Section upon request.

V. Interpreter Services

Contractor will provide foreign language, TTY and sign-language interpreter services as needed to assist callers, applicants, and recipients from all DHH regions with the exception of Region 2.

W. Transition

Contractor will develop a Transition Plan, acceptable to OAAS in its sole discretion, within 90 days of the start date for this contract. The Transition Plan and any modifications or updates must be prior approved by OAAS. The objectives of the Transition Plan are to provide for an orderly and controlled transition of contractor's responsibilities to a successor contractor at the conclusion of the contract period and to minimize disruption of services.

The Transition Plan will include the tasks and subtasks for turnover, a schedule for turnover, operational resource requirements, training to be provided and transfer of data, documentation, files and other records. The plan will also address the transfer of any inventory of training materials; current comprehensive contractor policy and procedure manual, brochures, pamphlets, and all other written materials used in support of this contract activity to OAAS. The Transition Plan shall also provide for the transfer, to the OAAS and DHH, of any software licenses, code, and supporting documentation deemed reasonably necessary by OAAS for the orderly and controlled transition of contractor's responsibilities. OAAS will designate a turnover period to start 30 to 90 days prior to the termination of this contract and will designate a staff liaison to facilitate a smooth transition. **Contractor will cease performing in-home annual assessments as of May 31, 2010. Contractor will cease performing in-home initial assessments as of June 15th. The Contractor will ensure the designated toll free telephone line is operational until June 25th in order to provide callers and recipients information and status updates. Beginning June 25th the contractor will ensure that calls to the toll free number are responded to with information and clear directions instructing callers with call back dates and information.** Contractor shall fully cooperate with any subsequent contractor during the turnover period. The turnover period may continue past the termination or expiration date of this contract if, due to the actions or inactions of contractor, the turnover process is not completed before said date. Contractor will be responsible for all **contractural** responsibilities incurred up to the date of termination.

PAYMENT

The contractor will be paid monthly on a fixed price basis, provided contractor is

meeting the objectives and scope of work for all components required by this contract.

Payment will be made by dividing the cost of the contract into six (6) monthly installments. Contractor will submit an invoice to DHH within ten (10) days following the end of the month with appropriate documentation of services rendered and reports as specified in Section O of this contract Statement of Work.

MONITORING PLAN FOR OUTCOMES 1, 2, & 3

- Contractor shall submit a monthly status report as required under Section O of this contract. The report will be reviewed by the OAAS contract monitor to ensure that all deliverables are being met.
- The contract monitor may also perform random monitoring to ensure contractor compliance.