

HOME & COMMUNITY-BASED SERVICES WAIVER (1915C) ASSURANCES & PERFORMANCE MEASURES MANDATORY WEBINAR Q & A 11/12/20

Questions	Answers
Where can we find the material for this Webinar?	It is located on the Case Management Tools website. Down under Training & Events, click on Mandatory Case Manager In-Service Webinars. The link is under the Session Training Materials section titled 'Home and Community-Based Services Waiver (1915c) Assurances and Performance Measures'.
Can you repeat the 3 things we weren't in compliance for under Service Planning? goals/preferences, service options and service plan forms and ...was it correct hours and payment levels?	Under Service Planning, areas we were found to be noncompliant in include: <ul style="list-style-type: none"> - Identifying and addressing goals and preferences - Hours and payment level - Completing and electronically filing the Service Plan Agreement (SPA), which is part of the SPAN (in previous waiver years, we used the Services Option Form)
Will we be getting more training and guidance for expectations for the goals and preferences areas?	Yes, APD will be working with QA staff statewide on providing additional training and guidance.
Where can we find the updated information on goals and preferences? Has it only been updated in the training material for new case managers?	The more in-depth examples tied to goals and preferences are in the training material for new case managers. APD will work with QA staff statewide to ensure ongoing Case Managers receive more in-depth information as well.
Are you going to touch on increasing accuracy in the future? What is the plan and/or approach?	Yes, this will be worked on in several ways. Some areas will be addressed statewide. The cognition webinars are an example. Other areas will be worked on at the local level through Corrective Action Plans and training. In addition, APD is now hosting a monthly QA meeting for QA staff statewide to offer training, information, etc. to bring back to local offices.
I have a couple CMs telling me you talked about using the 914 which is now obsolete. Has that changed?	Apologies for the confusion. Noncompliance was spoken to for the waiver period, which is years long. It is true it is now obsolete. The focus should be on the Service Plan Agreement (SPA), which is a part of the SPAN.
How are we able to do an accurate risk assessment at this time?	During the COVID-19 pandemic, this will take additional time by phone speaking with the consumer, and with the consumer's permission, gathering information from others.

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<p>What if provider refuses or doesn't maintain goals and preferences? Who addresses and enforces that?</p>	<p>A Case Manager should encourage the individual receiving services to clearly indicate their goals and preferences with the provider and share it is important for the provider to follow this. If the provider still does not wish to follow this, an individual may decide it is important to hire a different provider.</p>
<p>On service planning are you saying that we need to address the reduction in hours in meal prep when the consumer is receiving Home delivered meals?</p>	<p>Yes, using the drop down in the "Reason" section of the hours segment in the service plan (in this example, select "Provided by Another Agency") and by entering narration.</p>
<p>In the Service Planning, what does preferences mean?</p>	<p>Preferences are what a consumer has communicated as preferring over something else. For example, how they receive care. Someone on the webinar mentioned the example of wanting to shower rather than bathe. QA staff statewide will soon receive additional information about why it is important to learn about an individual's preferences and pass the information on to local offices.</p>
<p>Are the risks/pref./goals now required for nursing home?</p>	<p>Nursing facilities are to be addressing these areas with consumers.</p>
<p>Please define unexpected death. We work with folks that are medically pretty fragile and though you may not expect someone to go onto hospice and pass away, it does happen quickly at times.</p>	<p>APD currently does not have a formal definition of unexpected death.</p>
<p>If staff (aka HCWs) need to be "qualified" to provide services, how are we as case managers allowed to deny a HCW? Most will go through the background check process and there is no requirement for training or proof of ability... it seems like</p>	<p>Consumers are able to hire who they want as a caregiver as long as the caregiver has passed a background check and can meet their care needs. However, a HCW must also demonstrate the skills, knowledge, and ability to perform the required work. If there are any questions regarding this requirement, please contact Traci Lerner: (541) 705-7324</p>

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<p>we are having to deal with a lot of caregivers who should not be providing the care, yet it is up to the client if they want them or not.</p>	<p>TRACI.D.LERNER@dhsosha.state.or.us</p>
<p>For SPPC program, do I also need to address goals, strengths and preferences?</p>	<p>It is not required for SPPC; however, it is a helpful and person-centered practice.</p>
<p>Since cases are being extended for a year if no payment level changes or an adverse action would most likely happen, we are extending them out a year. Will QA take into account this time of COVID?</p>	<p>The Home and Community-Based Services Waiver Review Team (QA) is aware of no adverse actions during this time. Please make sure to document when there is no payment level change or adverse action and the why.</p>
<p>How are we able to do an accurate risk assessment at this time?</p>	<p>As previously noted, during the COVID-19 pandemic, this will take additional time by phone speaking with the consumer, and with the consumer's permission, gathering information from others.</p>
<p>Will you tell us a list of all required forms for case managers please? You mentioned some but it would be nice to have every form you need.</p>	<p>The information is on the CM Tools page, under: Client Details, Treatment Form, and Misc. LTC Info. The name of the file is "APD Long Term Care Services Form Requirements".</p>
<p>Can you please state what replaced the 914?</p>	<p>Yes, the Service Plan Agreement (SPA), which is part of the SPAN.</p>
<p>Will there be additional training on Risk? I know that information came out, but it was confusing, and we are still unclear on how to assess for risk. Will there be additional training on comments what needs to be included?</p>	<p>APD is working on brief, additional resource. If questions remain in the meantime, please refer to this transmittal: http://www.dhs.state.or.us/policy/spd/transmit/pt/2019/pt19022.pdf</p>

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<p>Where can CMs find the information on APS investigation outcomes referred to on slide 17 and PMs 27-28 on slide 19?</p>	<p>Information has been sent to local management who should be able to share.</p>
<p>Are we supposed to be doing the preferences/goals for CBC and nursing facility? Thought preferences/goals fell under the same umbrella, but maybe not?</p>	<p>Preferences and goals are required for in-home and CBC settings under the 1915(c) waiver. Nursing facilities should be working with consumers on these areas.</p>
<p>Are we going to get training on these updates so that we can know what issues came up and what we can change?</p>	<p>Yes, some training will be provided statewide, like the cognition webinars, and other training at the local level.</p>
<p>QA and Policy have in the past not always matched on the directions given. What has been done to bridge the gap so local offices are receiving the same direction/message?</p>	<p>The Home and Community-Based Services Waiver Review Team (QA) and Policy meet quarterly and consult about changes as needed. QA is participating in meetings with district and program managers. The APD Medicaid State Plan and Waiver Policy Analyst is working closely with the QA team.</p>
<p>During the last QA, the person told us new direction was made regarding meal preparation. When our office showed QA the training manual new CMs had, he shows us a handwritten note regarding the new change.</p>	<p>When a situation like this occurs, please contact APD Policy so it can be looked into.</p>
<p>Are the risks, preferences and goals now required for nursing home?</p>	<p>Nursing facilities should be addressing these with consumers.</p>
<p>If the client details section is important, why can't it be better integrated into the</p>	<p>This is a want, yet not a simple change in Oregon ACCESS. It is being looked into.</p>

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assessment tool itself (like the synopsis)?	
How do CMS adjust hours (reduce) when there is no 'adverse action'?	APD policy needs more information to help answer this question.
How do you handle an assessment when the consumer gives contracting information from a previous comment?	In order to properly assess an individual, it may be appropriate to ask other individuals' additional information, as well as request medical documentation to help determine the actual need.
Not clear on relationship of CM's to previous slide 17. Please elaborate.	APD works to ensure CMs meet the qualifications of the CM position.
What are we supposed to be taking away from all of this information? How is it meant to be applied?	There is a reason for the work Case Managers (and others who do assessments) do and how they do it. It is important, for example, accurate assessments are done, assessments are person-centered, timely action is taken, risks are identified and addressed, and health and welfare is addressed.
How are we able to get an accurate risk assessment done during this time?	Similar to assessing risk accurately, during the COVID-19 pandemic, this will take additional time by phone speaking with the consumer, and with the consumer's permission, gathering information from others.
Is there a plan to meet the criteria of having "Qualified Providers" ? It is hard to find providers either through state or agency that have any type of background that would be past taking care of basic needs. We say we help to keep a loved one at home instead of a Nursing Facility, but the option of home care for that does not really support that option.	For the waiver, Qualified Providers specifically looks at Case Managers being qualified. However, APD recognizes the barriers related to successfully providing in-home services for some individuals, which includes the difficulty in finding qualified providers. The Central Office team is continually discussing ways that we can be successful in growing the in-home program.
Who was the Traci person please?	Traci Lerner (541) 705-7324

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	<p>TRACI.D.LERNER@dhsosha.state.or.us</p> <ul style="list-style-type: none"> • HCW Program • HCW Terminations • Fraud/MFcu Liaison • CBA Implementation • HCC Liaison
Are QA reviews happening during COVID?	Yes, they are happening electronically.
Back tracking to goals. Per QA we are to use the consumers words when inputting the goals, so we would have to directly ask them for a goal correct?	Yes, you will put goals into their own words, yet after a discussion helping them to identify goals.
Comment Section in Risk Tab needs to be redone to allow more info to be entered especially since this is a federal requirement and we are only allowed to enter a limited amount of info.	APD is aware of some of the challenges in utilizing the risk tab. APD plans to work on improvements as additional IT resources become available.
In facilities, how is risk compliance evaluated?	Risk compliance is generally evaluated through the licensing process.