

Waivered Case Management

Changes starting July 2013

K State Plan Option

- * K state plan option allows states to receive an additional 6% federal match to provide supports for:
 - * ADL
 - * IADL
 - * Health Related Tasks
- * Allows APD to slowly expand some supports to individuals

Why So Fast

- * DHS began discussions with CMS in June 2012
- * Filed the initial State Plan Amendment in September 2012
- * Began intensive negotiations with CMS in November 2012
- * CMS instructions changed repeatedly from December through May

Why So Fast

- * Final instruction from CMS in Mid-May about:
 - * Case management
 - * RAFH
 - * State Plan Personal Care
- * Must implement in July because the additional revenue is included in APD & DD budgets.

What is the new change?

- * Consumers must receive a Waivered Case Management (CM) Service every month.
- * CM services will need to be documented.
- * Most work you are doing counts towards this new requirement.

Why are we doing this?

- * All Home and Community-based Care Services are moving to the K State Plan.
- * To maintain Medicaid **eligibility**, individuals must receive one waived service each month.
- * Without the case management service individuals will lose service eligibility

Why are we doing this?

- * We will be able to reinvest additional federal funding into more case managers and new services for our clients.
- * It helps ensure that individuals are receiving quality services and that their safety and well-being is being protected.

What is the expectation?

- * There are two types of CM Services:
 - * Direct Case management; and
 - * Indirect Case management.

Case Management

- * Direct Case Management is contact with the consumer (or designated decision-maker) through:
 - * Phone calls
 - * In-person
 - * Emails
- * Indirect Case Management includes
 - * Contact with “collateral” contacts (i.e., family or provider)
 - * Reviewing service plans and provision of services


What is the expectation?

- * Direct CM must occur at least every **quarter**.
- * Indirect CM must occur at least **monthly**:
 - * Direct CM counts as Indirect CM, but
 - * Indirect CM does not count as Direct CM.

OACCESS Alerts: Services Due and Coming Due

- * **When logging into OACCESS:**
 - * A pop-up message displays for clients with Services Due and Coming Due
- * **Once logged into OACCESS:**
 - * Services Due and Coming Due are viewed by selecting the [CM Alerts] button on the OACCESS Main Menu screen – see example on following slide
- * **Alerts will continue to display until service is completed and documented**

Main Menu



Oregon ACCESS

Select Worker :

Case
 RA
 Screening

Caseload

Branch
 All Access

Last Name Search:

Person Search	Last Name	First Name	MI	SSN	Prime Nbr	Release
Case Search	ABS	FLABBY		541-09-9111	RG400N1T	Training
Call Search	ALLISON	SAVANNAH	P	554-87-5698	BV800J7K	Survey
Resource Dir	AM	SAM	I	554-72-1970	TR600N1J	
Reports	ANDERSON	KRISTINA	E	544-07-2100	TU800J9K	
Ticklers	APTEKAR	ROBERT		544-69-1920	IA700N1V	
Print Forms	BARKLEY	CHARLES		541-46-9874	XV300N8N	
Narrative	BEAVER	BASEBALL	B	522-39-8211	TV300N2W	
	BILL	MARY	W	544-04-3456	KP800J3H	El Time
	BLUE	BONNIEE			Y200N6X	Proy Search
	BORROW	GRANT			45X	CM Alerts
	CUNNINGHAM	JOHN				

Click "CM Alerts" button from Main Menu

Benefit types for Alerts & Reports

CAPS Benefit/Category Types

- * APD-Residential
- * APD-In Home
- * ICP
- * APD-SPH

Service types, such as:

- * AFH, RCF, ALF & other residential services
- * In-home services
- * Independent Choices Program
- * Spousal Pay

When will CM Alerts appear?

- * **Direct CM Services:**

- * Begin the 20th day of the 3rd month of the quarter

- * **Indirect CM Services:**

- * Begin the 20th day of each month and will display until the services has been completed & documented
 - * For example: 1st month alert will be July 20th. Clients name will display if services have not been completed & documented

Case Management Example

P e r s o n	July	Aug	Sep	<i>Oct</i>	<i>Nov</i>	<i>Dec</i>	Jan	Feb	Mar	<i>Apr</i>	<i>May</i>	<i>Jun</i>
# 1	D CM	ID CM	ID CM	ID CM	ID CM	D CM	ID CM	D CM	ID CM	D CM	ID CM	ID CM
# 2	ID CM	ID CM	D CM	D CM	D CM	ID CM	ID CM	D CM	ID CM	D CM	ID CM	ID CM

Tier 2 & 3

OACCESS Monthly Reports

- * 1st OACCESS report will be available August 5th
 - * Will display July past due Indirect CM services and coming due for August
- * Following months will display services past due in previous months if still not recorded

Direct Case Management

- * Assessments and Reassessments
 - * All annual assessments
- * Service Plan Development
- * Service Plan Review and Revisions

Direct Case Management

- * **Service Choice Counseling**
 - * Assisting the individual to understand all available LTC service options.
- * **Risk Assessment and Risk Monitoring**
 - * These are the same services as already required.

Direct Case Management

- * **Diversion Activities**

- * Diverting an individual from NF.
- * Transition from a NF does not count.

Direct Case Management

- * **APS Activities**

- * All protective service activity directly provided to/with the individual

- * **Other Program Coordination**

- * Assisting individuals navigate or coordinate with other programs (i.e., SNAP, LIHEAP, or housing).

Direct Case Management

- * Crisis Response & Intervention
 - * Calls from consumer
 - * Addressing concerns/problems
- * Service Provision Issues - Helping individuals problem solve issues with:
 - * their long term care providers,
 - * services, or
 - * hours that don't meet the individual's needs.

Direct Case Management is not

- * Does **not** include contact with family members, providers or people other than the individual receiving services.
- * Does **not** include transition services provide to individuals from NF.

Indirect Case Management

- * Indirect Case management includes contact with Collateral Contacts
 - * to ensure safety, health and independence of the individual
 - * To resolve issues.
- * “Collateral contacts”
 - * family members,
 - * care providers,
 - * medical providers,
 - * friends and neighbors,
 - * pharmacy staff,
 - * and other professionals working with the individual

Indirect Case Management

- * **Monitoring Service Plan Implementation**
 - * Reviewing and analyzing service plan
 - * i.e., Authorized vs. services being received.
 - * why an individual may not be receiving all of the services authorized or working with exception requests.
- * **APS Referrals**
 - * Investigative work with collateral contacts and other witnesses.

Indirect Case Management

- * Case monitoring services
 - * Are ensuring that the individual is receiving adequate LTC services to meet their specific needs.
 - * Monitoring activities include:
 - * Reviewing services that were received
 - * Comparing services to the service plan for discrepancies

Indirect Case Management

- * Risk Monitoring
 - * Review of the Risk Plan with a “collateral contact”.
 - * Risk monitoring activities with collateral contacts
 - * Remember risk monitoring directly with the consumer counts as a Direct CM service

Who can provide these services?

- * Case Management Services can be provided by:
 - * Case managers
 - * Diversion/Transition workers
 - * Licensors
 - * APS investigators, or
 - * Management staff communicating directly with the individual who is receiving services
- * Case Aids/Assistant activities cannot count as CM activities but they may do the service entry.
- * All services must be documented in ORACCESS.

What do APS and Other Staff Need To Do

- * APS workers and licensing can provide details to Aids and Assistants who can enter the CM data, or enter directly themselves.

Oregon Access [Office : DCWCOG Linn/Benton County Senior Services (2211) Profile Type :- Branch DB : access_uat]

File Edit Select Status Transfer View Mainframe Windows Help

Case for CASE MANAGEMENT (Case Branch : DCWCOG Linn/Benton County Senior Services)

Person Address Vet/Nat Amer Contacts Prev Asst Education CM Service(s)

Person List

	Last Name	First Name	Verified
1	MANAGEMENT	CASE	No

Person Detail

SSN: 541-12-4598 DOB: 07/18/1941 Prime Nbr: PLA00L0M

Citizenship: US Citizen (selected), Legal Alien, Other

Sex: Male, Female (selected)

Disabled: Blind:

Live in: Apartment Death Date: 00/00/0000 Stay in Oregon:

Marital: Widowed Lang Spoken: English Spouse is or was a vet:

Race: Lang Read: English Unpaid medical bills:

Ethnicity: Alt Format: Initial Inq MMA? Yes No

1. Tele Nbr: (503) 555-1212 Ext: Type: Home

2. Tele Nbr: (503) 121-2222 Ext: Type: Cell

3. Tele Nbr: () - Ext: Type:

4. Tele Nbr: () - Ext: Type:

454D Comments

Verified:

The Social Security Number of the person. |hsint03 (1517) |06/23/2013 09:46 am

New Tab:
Case Management Services

Person
 Address
 Vet / Nat Amer
 Contacts
 Prev Asst.
 Education
 CM Service(s)

Service(s) List

#	Service(s)	Date	Cr

Service(s) Summary
Service(s) Date: Invalidate Service(s):
Performed By:
Created By:

Service(s) Activity
 Direct CM Indirect CM

APS Investigation
 Crisis Response & Intervention
 Diversion Activities
 LOC/Assessment/Reassessment
 Other Program Coordination
 Risk Assessment/Monitoring
 Svc Options Choice Counseling

Selected Service(s)

Service(s)	Type

Minimal Req: Direct=Qrtly contact w/client; Indirect=Monthly activity w/out client contact

1. Enter Service Date & the "Direct CM" services will appear below.

1a. "Indirect CM" services will appear by clicking on the radio button after entering date.

2. Highlight services provided & click >> to select service(s)

How to select Direct CM

Person Address Vet / Nat Amer Contacts Prev Asst Education **CM Service(s)**

Service(s) List

#	Service(s)	Date	Created Date and Time	Created By
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Service(s) Summary

Service(s) Date: 06/15/2013 Invalidate Service(s):

Performed By: Tester3, Tester3

Created By: Created Date and Time:

Service(s) Activity

Direct CM Indirect CM

Service(s)	Type
APS Investigation	
Crisis Response & Intervention	
Diversion Activities	
LOC/Assessment/Reassessment	
Other Program Coordination	
Risk Assessment/Monitoring	
Svc Options Choice Counseling	

Minimal Req: Direct=Qrtly contact w/client; Indirect=Monthly activity w/out client contact **Services Summary**

3. Select from list of "Direct" services

4. Click >> to select service(s)

Person
 Address
Vet/Nat Amer
Contacts
Prev Asst.
Education
CM Service(s)

Service(s) List

#	Service(s)	Date	Created Date and Time	Created By

Service(s) Summary

Service(s) Date:
Invalidate Service(s):

Performed By:

Created By:
Created Date and Time:

Service(s) Activity

Direct CM
 Indirect CM

Service(s)	Type
APS Investigation	
Diversion Activities	
LOC/Assessment/Reassessment	
Other Program Coordination	
Svc Options Choice Counseling	
Svc Plan Development & Review	
Service Plan Monitoring	

Selected Services

5. Click to unselect service(s)

Minimal Req: Direct=Qrtly contact w/client; Indirect=Monthly activity w/out client contact

Screen print of "Indirect CM" services (continued from previous slide)

○ Person ○ Address Vet/Nat Amer Contacts Prev Asst. Education **CM Service(s)**

Service(s) List

#	Service(s) Date	Created Date and Time	Created By
1	06/15/2013	06/23/2013 11:34:26	hsint03

Service(s) Summary

Service(s) Date: 06/15/2013 Invalidate Service(s):

Performed By: **Tester3, Tester3** ▼

Created By: _____ Created Date and Time: _____

Service(s) Activity

Direct CM Indirect CM

- APS Referral
- Diversion Activities-Indirect
- Monitoring Svc Plan Implemen
- Other Case Management
- Other Program Coord-Indirect
- Risk Monitoring-Indirect
- Svc. Opt. Choice Counsel-Ind

>> <<

Selected Service(s)

Service(s)	Type
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Minimal Req: Direct=Qrtly contact w/client; Indirect=Monthly activity w/out client contact **Services Summary**

1a. Screen print of "Indirect" CM services

Oregon Access [Office : OCWCOG Linn/Benton County Senior Services (2211) Profile Type :- Branch DB : access_uat]

File Edit Select Status Transfer View Mainframe Windows Help

Case for CASE MANAGEMENT (Case Branch : OCWCOG Linn/Benton County Senior Services)

Person Nat Amer Contacts Prev Asst Education CM Service(s)

6. Click to save

Service(s) List

#	Service(s) Date	Created Date and Time	Created By
1	06/15/2013	06/23/2013 11:34:26	hsint03

Saved Services List

Service(s) Summary

Service(s) Date: 06/15/2013 Invalidate Service(s):

Performed By: Tester3, Tester3

Created By: hsint03 Created Date and Time: 06/23/2013 11:34:26

Service(s) Activity

Direct CM Indirect CM

Service(s)	Type
Crisis Response & Intervention	Dir CM
Risk Assessment/Monitoring	Dir CM

7. Summary of Saved Services

Minimal Req: Direct=Qrtly contact w/client; Indirect=Monthly activity w/out client contact

Services Summary

34 | hsint03 (1517) | 06/23/2013 11:34 am

“Services Summary” screen print

Services Summary

Include Invalid Services **From:** 06/23/2012 **To:** 06/23/2013

Retrieve

Service(s) for: CASE MANAGEMENT Prime#: PLA00L0M Print date: 06/23/2013
Report period: 06/23/2012 To 06/23/2013

Created by: hsint03 Created on: 06/23/2013 11:34:26
Service(s) on: 06/15/2013 Performed by: Tester3, Tester3 Branch: 2211
Service(s) Invalidated: **No** Invalidated by: Invalidated on:

Direct CM Indirect CM

Crisis Response & Intervention
Risk Assessment/Monitoring

35 **Print** **Close**

Narration requirement

The screenshot displays a software interface with a table of services and a warning dialog box. The table lists two services created on 06/23/2013. A warning dialog box titled 'WARNING 2082' is open, containing a yellow warning icon and text: 'Please enter at least 10 characters for the Direct or Indirect CM Service(s) narration. Case for CASE MANAGEMENT (Case Branch : OCWCOG Linn/Benton County Senior Services)'. An 'OK' button is highlighted with a red circle. A red callout bubble points to the 'OK' button with the text: '8. Click [OK] button to automatically be brought to the Narration screen'. Another red callout bubble points to the warning dialog with the text: 'Receive a warning message when attempting to leave screen to narrate'. The interface also includes sections for 'Service(s) Summary', 'Service(s) Activity', and 'Service Provisioning'.

#	Service(s) Date	Created Date and Time	Created By
1	06/15/2013	06/23/2013 12:00:23	hsint03
2	06/15/2013	06/23/2013 11:34:26	hsint03

WARNING 2082

Please enter at least 10 characters for the Direct or Indirect CM Service(s) narration.
Case for CASE MANAGEMENT (Case Branch : OCWCOG Linn/Benton County Senior Services)

OK

8. Click [OK] button to automatically be brought to the Narration screen

Receive a warning message when attempting to leave screen to narrate

Minimal Req: Direct=Qrtly contact w/client; Indirect=Monthly activity w/out client contact

Services Summary

Case Narrative for CASE MANAGEMENT

File Edit Search Tools Help

Existing Narrative / Last Modified : _____

Case

Show : From Date : To Date :

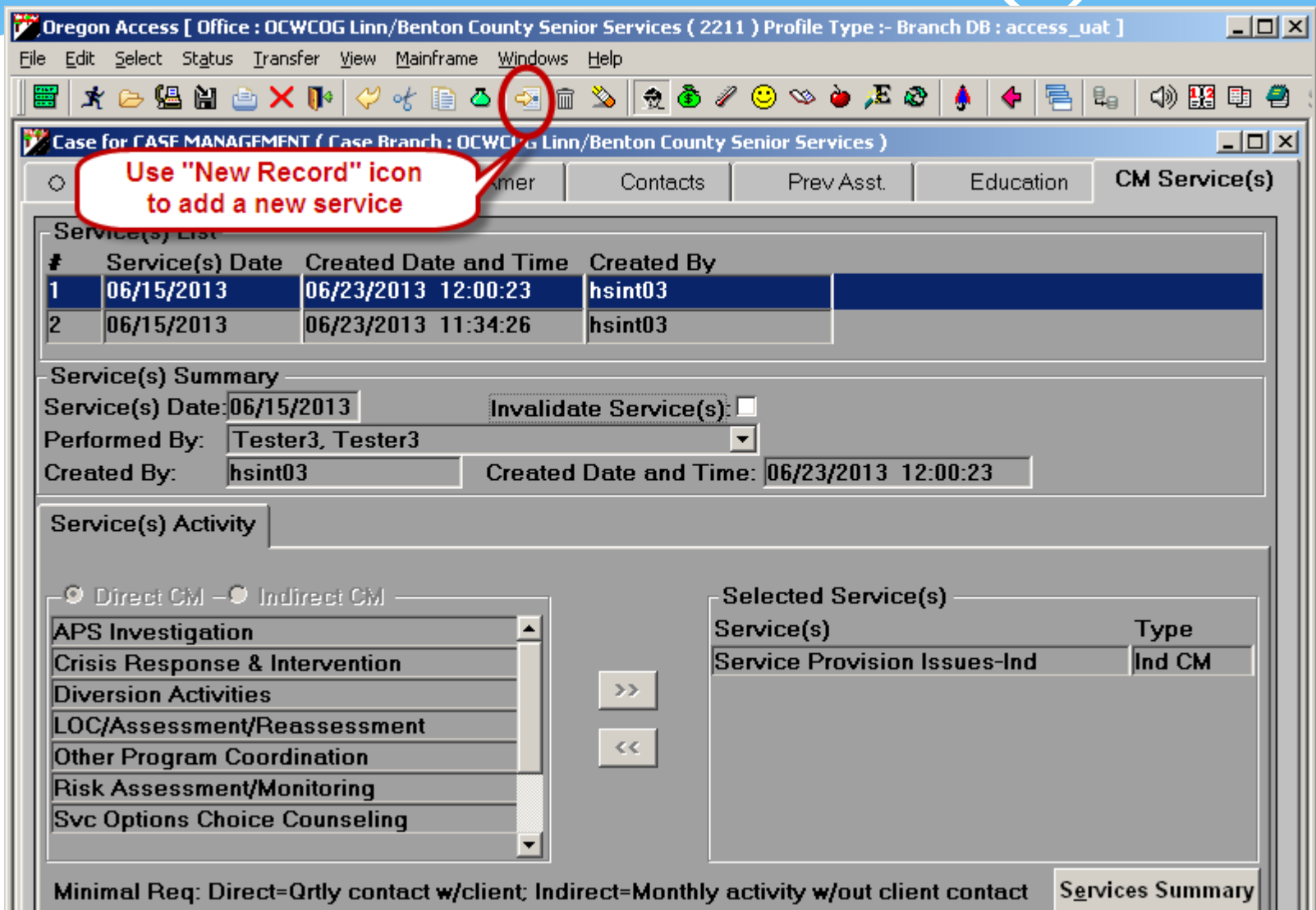
Narrative Type :

Direct Case Management Contact: Risk Assessment Monitoring completed at the client's home. Service plan continues to fully meet the needs of the client. No additional assistance needed at this time.

9. Complete a narration and you are now done :)

Only Narrative entered in the past 365 days is displayed.

Use the “new record” icon to add new service(s)



Use "New Record" icon to add a new service

Case for CASE MANAGEMENT (Case Branch : OCWCOG Linn/Benton County Senior Services)

Services Summary

Service(s) Date: 06/15/2013 Invalidate Service(s):

Performed By: Tester3, Tester3

Created By: hsint03 Created Date and Time: 06/23/2013 12:00:23

Service(s) Activity

Direct CM Indirect CM

Service(s)	Type
Service Provision Issues-Ind	Ind CM

Minimal Req: Direct=Qrtly contact w/client; Indirect=Monthly activity w/out client contact Services Summary

Revised 914 Service Options form

Service Options

By federal regulations, if you need services that may be offered in a nursing facility, we must inform you of other available services and give you a choice of community-based care services or nursing facility services.

**SENIORS AND
PEOPLE WITH
DISABILITIES**

I have reviewed my service needs and options with a representative of the Seniors and People with Disabilities. Yes No

SDS 914

I select the following services

- Home or community-based care
- Nursing facility care
- State Plan Personal Care

File name
MANAGEMENT,
CASE

Signature

1

Client
MANAGEMENT,
CASE

I have been informed of the choices available to me and have asked for the services as listed above.

Date sent
06/24/2013

Client Signature

Date

Case number

Revised 001N Service Plan form

STATE OF OREGON
DEPARTMENT OF HUMAN SERVICES
SENIORS AND PEOPLE WITH DISABILITIES

SERVICE PLAN

Page 1 of 4
Jun 24 2013

Client Information

Name:

Address:

City and State:

Zipcode:

Prime #

Assessment Date:

Service Review Date:

Print Date:

Worker:

Worker Phone:

Added: Agrees to have monthly CM services and assistance

*

met with [] on 05/07/12. Care needs and options were fully discussed.
agrees to have monthly Case Management Services and assistance in the following areas:

Service Plan Results

Service Priority Level = 3

Need	Need Level	Provider Type
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Important Reminders

- * To retain eligibility, consumers must have:
 - * An indirect CM service every month.
 - * A direct CM service every quarter.
- * Services are set on calendar months and quarters. These are not “rolling.”
- * CM services must be documented in ORACCESS.
- * CM services must be narrated.

Upcoming changes

- * Availability of new or enhanced services
 - * Chore services
 - * Covered transition cost, such as:
 - * 1st/last months rent
 - * furnishings
 - * Technology, such as expanded ERS services
 - * Consumer skills training
 - * Allowing health related tasks
 - * Expanding special needs

Contacts

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