

OPS Referral Tracking Log

<i>Referral#</i>	<i>Date Submitted</i>	<i>Date Added In Meeting</i>	<i>Submitted By</i>	<i>Issue</i>
OPS030	04/01/2009		Rodney Schroeder	Requesting that OPS discuss centralizing public disclosure files for facilities and place them on the internet for public use/viewing. This would provide a workload savings to the field, as well as a higher level of customer service and support to the public who wish to view these files.
		03/15/2012		Updated Donna Keddy will review this issue.
		04/12/2012		Updated No update at this time.
		05/10/2012		Updated No update at this time.
		06/14/2012		Updated No update at this time.
OPS058	08/06/2010		Naomi Sacks	Simplifying RAFH plans. With the waiver being renewed this year, could the RAFH providers (essentially live-in family providers) become part of the In-Home services rather than licensed settings? This would expedite opening cases and reduce workload since there would be no need for licensing or inspections. It would also stop some of the struggles we see around applying the program scope rule, OAR 411-030-0033, especially when settings cannot be licensed and cannot be in-home. In some areas, case managers are already monitoring for fire extinguishers and exiting/safety issues rather than the licensor so they are familiar with the issues. Also, we already do the same safety planning for RAFH as for in-home situations. This would help expedite service plan implementation, simplify service program eligibility and cut down on staff time as only one staff person would be involved with the provider.
		02/09/2012		Updated No update at this time. This issue is part of a legislative concept.
		03/15/2012		Updated This is part of the larger legislative concept. Angela will ask Karen Meinzer to attend the next meeting to discuss this topic.
		04/12/2012		Updated No update at this time.
		05/10/2012		Updated It was recommended to transfer this issue to the team that is working on the Long Term Care 3.0. Jane-Ellen is going to review this issue over the next 30 days and report back to the committee.
		06/14/2012		Updated No update at this time.

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OPS059	08/10/2010		John Filar	<p>For the LIS applications, SLIQ screen shows all by zip code, but not by branch, and in date order. A lot of workload is involved weekly managing this list and doing the outreach, especially due to the backlog (older) of LIS applications. If the MOBIUS report could be sorted by branch, it would reduce the workload considerably.</p> <p>Updated 03/15/2012 Action A request has gone to Christina Jaramillo and ISM is to begin in April and this topic is on the list.</p> <p>Updated 04/12/2012 Action No update at this time.</p> <p>Updated 05/10/2012 Action No update at this time.</p> <p>Updated 06/14/2012 Action ISM will be meeting in July and this issue is being re-prioritized. Karen reported the goal is to have the MOBIUS reports transferred to ORACLE within a year the first project goes out.. This will give the ability to sort, pull and query reports.</p>
OPS073	01/24/2011		John Filar	<p>Section 8, Effects of SSA Decisions on Active PM Cases, of the Worker Guide appears outdated and requires a lot of work by staff to monitor regularly. The negative impact: with increased workloads, tracking such items so frequently is unlike to occur and is made more difficult due to the lack of access to the necessary screens.</p> <p>Updated 02/09/2012 Action Per Lauren, with the new system coming it, it will be obsolete. She will remove it from the Worker Guide.</p> <p>Updated 03/15/2012 Action Angela will check with Lauren to see if this has been removed from the Worker Guide.</p> <p>Updated 04/12/2012 Action Lauren distributed 'Options-Local Office Monitoring of SSA decisions' at the meeting.</p> <p>Updated 05/10/2012 Action The Collaborative Disability Determination Unit is currently running a pilot with 2 APD branches studying the savings and workload involved with tracking SSA decisions/appeals. It was agreed at the meeting while the data is being gathered, the field needs to track at least every 6 months.</p> <p>Updated 06/14/2012 Action Jessie and Jenny have established a pilot group to study the savings and workload involved with tracking SSA decisions/appeals. It was agreed while the data is being gathered, the field needs to track at least every 6 months.</p>

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OPS077	03/21/2011		Phil Deas	DHS has been unable to release the new real time SSA TPQY information system to the field as it keeps crashing. It has been shelved for the time being. SSA is telling out field offices that they are too busy to provide us with information that the State should have access to. The field needs this real time access to do their work.
				Updated 02/09/2012 Action Because the system won't allow it to work, there this might not be a priority. Angela will find out if the project is still in existence.
				Updated 03/15/2012 Action Angela will confirm if this is going to be acted on. Waiting for the modernization to happen.
				Updated 04/12/2012 Action No update at this time.
				Updated 05/10/2012 Action Jennifer reported this is part of the Modernization program. The committee recommended moving this issue to the 'parking lot'.
OPS079	04/07/2011		Gene Sundet	SNAP notice regarding the end of a client's certification period.
				Updated 02/09/2012 Action Cheryl Wells and Gene Sundet will be attending the SNAP steering committee meeting. They will provide an update at the next meeting.
				Updated 03/15/2012 Action No update at this time. (Gene and Cheryl were accidently dropped of the meeting schedule.)
				Updated 04/12/2012 Action Anglea asked Belit to put Gene and Cheryl back on the list for meetings.
				Updated 05/10/2012 Action No update at this time. Gene will follow up on this issue.
				Updated 06/14/2012 Action No update. Charlene will find out who the rep is for NWSDS on the steering committee.

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OPS090	04/18/2011		Marci Howard	<p>PMDDT referrals from 5503; we receive the referral without income/resource, etc screening and we send a letter requesting client call us to apply for PMDDT. If we do not hear from them, we have to send a denial notice. This has created a lot of tracking and extra work. 5503 will not do this piece, however possibly there is a way we can set up the system that a case can be pending and a pending notice sent (to contact local office, what items we need) and then it can auto deny the case vs. staff having to track all of this work. Many of these referrals do not follow through (out of 17 referrals in Oct, 12 were denied for not following through.)</p> <p>Updated 03/15/2012 Action The transfers workgroup is actively addressing the issue.</p> <p>Updated 04/12/2012 Action No update at this time.</p> <p>Updated 05/10/2012 Action Karen reported they are now screening the referrals. They are looking to see if it has enough language that we can put on a pending case for PMDDT and let the system do its thing if we don't hear back. There is a lot of language on there that makes it look like we can.</p> <p>Updated 06/14/2012 Action No update at this time.</p> <p>Updated 07/12/2012 Action CAF Medicaid owns the AP notice and they are willing to work with us to alter the language on it so it can be used for PMDDT. Transfers work group, along with Chris Ellis, are looking into it. working with Vonda Daniels for changes to the notice.</p>
OPS093	07/18/2011		Brooke Emery (Elizabeth Willis)	<p>There are a few cases that are getting R&B and PIF payments issued through 437's on a monthly basis. Few of them are PMDDT cases in which they have no income (until SSA determines disability and issues payments to them) and they have been placed in CBC facilities. They meet criteria in 461-155-0700. Is it possible to have these payments go out automatically through the CMS system? This is becoming an additional workload issue since not only the CM's have to routinely create the 437's, then the clerk has to process them.</p> <p>Updated 04/12/2012 Action No update at thist time. The report was distributed at the Prog Mgrs meeting on Wednesday.</p> <p>Updated 05/10/2012 Action Last month all the payments were distributed and determined they were appropriate payments. It was suggested to add this to the 'parking lot' and recommend it be transferred to the Modernization program.</p>

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OPS098	10/05/2011		Terry Ford & Multnomah County Supervisors	<p>There are not a lot of teeth to the RAFH rules and corrective plans. From my research with other AAA's, everyone handles them differently. I would like the Worker Guide to be updated with a clear process of RAFH corrective plans to ensure that I am doing it according to rule.</p> <p>Updated 02/09/2012 Action No update at this time. (This may possibly be a legislative concept for the '13-15 biennium.)</p> <p>Updated 03/15/2012 Action A new licensing team has been created. Angela will ask Donna Keddy to attend the next meeting.</p> <p>Updated 04/12/2012 Action No update at this time.</p> <p>Updated 05/10/2012 Action No update at this time. Jane-Ellen will follow up on this issue.</p> <p>Updated 06/14/2012 Action No update at this time.</p>
OPS099	10/10/2011		Gene Sundet (Melodie Kozol)	<p>Case coding and eligibility determination for DD Waiver clients. There is multiple touching of case - forms, coding, data entry, etc. Multiple databases that don't communicate, multiple agencies (SPD field office, county/community DD, Central Office DD/SPD) involved that each do separate miniscule steps for actions on case. There's lots of waste for time and waiting for client.</p> <p>Updated 03/15/2012 Action Angela asked Leatha and Jeff to attend the meeting in April to discuss this issue.</p> <p>Updated 04/12/2012 Action Jeff, Leatha and Christina will attend the May meeting to discuss this referral.</p> <p>Updated 05/10/2012 Action Angela was unable to meet with Jeff, Leatha, and Christina. Therefore, there is no update at this time.</p> <p>Updated 06/14/2012 Action Angela met with Jeff, Leatha, and Christina to discuss the DD coding process. On the APD Staff Tools page, there are directions on how to code foster care cases for which issue. The website has been updated. Angela will forward the link to the committee members via Janet. The committee agreed this issue needs to be moved to a CI sheet.</p>

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OPS100	12/02/2011		Vicki Davis	OHP training is now included in a nine day (three week) training. The training covers all SSP medical programs. SPD does not determine eligibility for all of the programs. In order for new staff to receive formal training on OHP programs they would have to attend all three weeks of the training. The negative impact is 1) Staff are attending training that does not apply to the programs we administer, 2) there is a travel cost for an additional six days of training, and 3) it results in staff time away from the office which impacts delivery of service. It was suggested a specific OHP training could be a computer module or NetLink session.
				Updated 03/15/2012 Action There is a group meeting with the training unit, PCU and APD to propose changes. No decisions at this time. This issue is still with Tricia.
				Updated 04/12/2012 Action No update at this time.
				Updated 05/10/2012 Action Angela reported regular meetings to review trainings have been scheduled. Hopefully, she will be able to provide an update next month.
				Updated 06/14/2012 Action No update at this time.

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OPS106	02/02/2012		Cheryl Wells	<p>New DHS 3971-Oregon DHS Prior Authorization Request Form. Although SPD IM 12-001 appears to be only a minor update to what we do now, the change has a bigger impact. The reason for this is that the DHS 3971 mentioned in the IM is to be filled out by the CM (per Kelsey Weigel). This is a Prior Authorization form, which is something CM's did not complete in the past. This form is designed for providers to request services that require a prior authorization. The previous procedure had the provider complete the form and send it to us for authorization (which consists of a worker approving and entering information into MMIS for a PA number). When we asked why we could not have the provider complete this new form, we were informed that completing this form by the provider is not a prior authorization, and that this is an internal form to SPD/AAA.</p> <p>Also, the previous procedure had the provider sending us the form for service renewal. If we are filling out the form, then it is not clear how we will be contacted for renewal, or if we are expected to track that now.</p> <p>Updated 02/09/2012 Action The Federal law update that took place on January 1, 2012, prompting this change now requires for a diagnosis code to be part of the provider's billing process. It was suggested that modifying the old form to include the diagnosis code information would be enough, particularly since the only diagnosis code in use is 799.9. A workgroup will be formed to pursue this issue further.</p> <p>Updated 03/12/2012 Action Per Kelsey, she is still waiting for staff to volunteer to be a part of a workgroup to determine what can be done to change the process.</p> <p>Updated 04/12/2012 Action No update at this time.</p> <p>Updated 05/10/2012 Action No update at this time. Jane-Ellen will follow up with Kelsey for an update.</p> <p>Updated 06/14/2012 Action No update at this time.</p>

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OPS109	03/12/2012		Caryn Whatley	<p>Offer a new payment option, recurring debit/credit card payments, to EPD clients and In-home clients with a stable pay-in. The pilot was implemented to determine if the ability to make monthly liability payments by credit/debit card is of interest to clients, cost effective, and a workload reduction to field staff. Results were mixed. Attached procedure documents for each program include appendices with examples of forms which may be received or used by staff and clients.</p> <p>Updated 03/15/2012 Action This was piloted in Josephine, Jackson and Klamath. Getting feedback re: the pilot by April 1. More data is needed.</p> <p>Updated 04/12/2012 Action Caryn received feedback re: this issue. She will write a new procedure.</p> <p>Updated 05/10/2012 Action Caryn reported the IM has not been distributed yet. She is still gathering comments/revisions.</p> <p>Updated 06/14/2012 Action Caryn is continuing to gather more info re: the cards. The IM has not been released yet.</p>
OPS110	03/08/2012		Angela Munkers/Karen Gulliver	<p>SDS 3401, Resource Assessment, was in three versions: the PDF and OA versions were incorrect and could result in incorrect calculations and decisions. The Word version on the web is correct. The APD forms committee removed the PDF until it is corrected. The OA form will be hidden because it cannot be updated. Systems is working with Publications to get a version of the on the web which will fill from OA; until then the worker will have to complete the form manually.</p> <p>Updated 03/15/2012 Action The form was misused and Bill Brautigam will send an IM on the correct use of this form.</p> <p>Updated 04/12/2012 Action The IM has not yet been distributed. Angela will check on this.</p> <p>Updated 05/10/2012 Action No IM has been distributed yet. Therefore, no update at this time.</p> <p>Updated 06/14/2012 Action The first version of the IM was distributed. Not everyone received it. Therefore, Angela will forward it to the committee members for review via Janet.</p>

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OPS111	03/09/2012		Carol Mauser	<p>There is not a written procedure for what needs to be done and in what order and coding issues when a DD person is admitted to NFC and needs to be opened in APD office for service payments.</p> <p>Updated 03/15/2012 Action Angela asked Leatha and Jeff to attend the meeting in April to discuss this issue.</p> <p>Updated 04/12/2012 Action Angela is meeting with Jeff, Leatha and Christina re: this issue and will report back to the committee.</p> <p>Updated 05/10/2012 Action No update at this time.</p> <p>Updated 06/14/2012 Action No update at this time.</p>
OPS112	03/01/2012		Terry Ford	<p>Service cases that are currently coded with CBI coding and then go to a skilled nursing facility have to be coded with ACS coding so that the nursing homes can be paid correctly. In order to add this coding the CBI coding must be taken off and SBI coding added. This then starts the whole process of the clients Medicare being paid for by the State. Then once they are not skilled the SBI coding comes off and they are put back to CBI. It is not only confusing for the client but the worker, the state buy in unit and the worker. It may negatively impact the client as Social Security may take out more for premiums once they are back on CBI.</p> <p>Updated 03/15/2012 Action This is just a systems issue. Systems group is looking at coding to be changed to make this work and should have more info for the committee in April.</p> <p>Updated 04/12/2012 Action No update at this time.</p> <p>Updated 05/10/2012 Action It was agreed that Dale needs to come discuss this issue with the committee.</p> <p>Updated 06/14/2012 Action The committee thought an IM was distributed re: this issue.</p>

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OPS114	03/28/2012		Terry Ford	<p>Clarification is needed regarding the parameters of 24 hour availability in RFH settings. Reports from managers and staff suggest that communication from state policy analysts about 24 hour care and provider availability has been inconsistent and as a result the application of the policy varies between case managers and across branch offices. The needs of RFH clients vary from minimal to substantial; so, for some clients, a safe care plan can be developed, even while allowing the provider to leave the client for brief periods during the day.</p> <p>Updated 04/12/2012 Action Dennett Taber and Hazel Lefler attend the meeting. They asked the committee to send them any useful ideas and tools for development.</p> <p>Updated 05/10/2012 Action No update at this time. Jane-Ellen will follow up with Dennett, Hazel, and Sylvia Rieger re: the white paper done last year and report back to the committee.</p> <p>Updated 06/14/2012 Action No update at this time.</p>
OPS115	03/30/2012		Carol Mauser	<p>SPD had a workgroup that completed the SPD/AAA case transfer procedures but it never was finalized and put out on the web. This tool would clearly line out when and who should be responsible on case transfers when clients leave there home branch and go to a new location.</p> <p>Updated 04/12/2012 Action Angela will try to locate the 'statement of understanding' from this workgroup.</p> <p>Updated 05/10/2012 Action Angela was unable to locate the 'statement of understanding' from this workgroup. Carol or Angela will follow up on this issue and report back to the committee.</p> <p>Updated 06/14/2012 Action Angela located the 'statement of understanding' and will have Janet forward it to the committee for review.</p>

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OPS116	04/02/2012		Phil Deas	<p>There was a time when policy was changed you could read it and the changes were marked. Recently there have been policy changes and when you go to staff tools and look them up the changes are not marked so it is unclear as to what has changed. Example, updates to WG agreement between 5503 and APD/AAA offices give no indication what was changed. There is nothing highlighted in the text of the manual. Additionally, in the past Manual Letters contained a brief synopsis of the changes and that no longer occurs.</p> <p>Updated 04/12/2012 Action The committee agreed a CI sheet needs to be created for this issue. Angela will discuss the issue with Tricia.</p> <p>Updated 05/10/2012 Action Angela had a discussion with Tricia. No progress has been made. This needs to be discussed with communications.</p> <p>Updated 06/14/2012 Action After discussion, it was decided Karen will create a new referral that expands on this issue.</p>
OPS119	04/05/2012		Cheryl Wells/Cathy Clay-Eckton	<p>At a recent O4AD quarterly meeting, the AAA Program Mangers discussed some shared concerns regarding the SPD MED Team. During the past year or so Branch offices have observed changes in the MED Team process that have impacted the use of the team by the field, and its effectiveness in assisting staff with complex and difficult cases. Care planning and outcomes have also been affected. Specific areas of concern are around: Respectful Interactions, Timeliness of Scheduling, MED Team Decision Rationale, Unclear Problem Resolution Process and Lack of Appropriate Placement Options.</p> <p>Updated 04/12/2012 Action Due to the unavailability of subject experts for the discussion, it is the goal to have them attend the May meeting.</p> <p>Updated 05/10/2012 Action Jane-Ellen is in the process of developing additional training for MED members and giving clearer expectations.</p> <p>Updated 06/14/2012 Action The committee agreed this needs to remain on the tracking log. More feedback needs to be gathered. Jane-ellen will report back at a future meeting.</p>
OPS125	06/11/2012		Karen Gulliver	<p>The Targeted review team has identified an inconsistency in how APD and AAA offices verify identification/authorization before discussing protected information; how identity is verified when processing a CAPI application and how identity verification is stored at the branch.</p> <p>Updated 06/14/2012 Action Karen reported she surveyed the field offices and asked how they verify a need whether in person or over the phone and how the need is distributed to staff.</p>

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OPS126	06/11/2012		Catherine Seminary	<p>David Imeson, who was on the Interagency Case Transfer RPI, created an Excel tool to simplify the case transfer process. This Income Calculation tool helps staff calculate income and medical deductions much more efficiently. The reason for presenting this to the committee is to see if this adds value to the field staff and how to use it if needed.</p> <p>Updated 06/14/2012 Action David will be attending the July meeting to demo the Income Calculation tool.</p>