



MMAC Provider Meeting

DSDS Updates Fall 2023

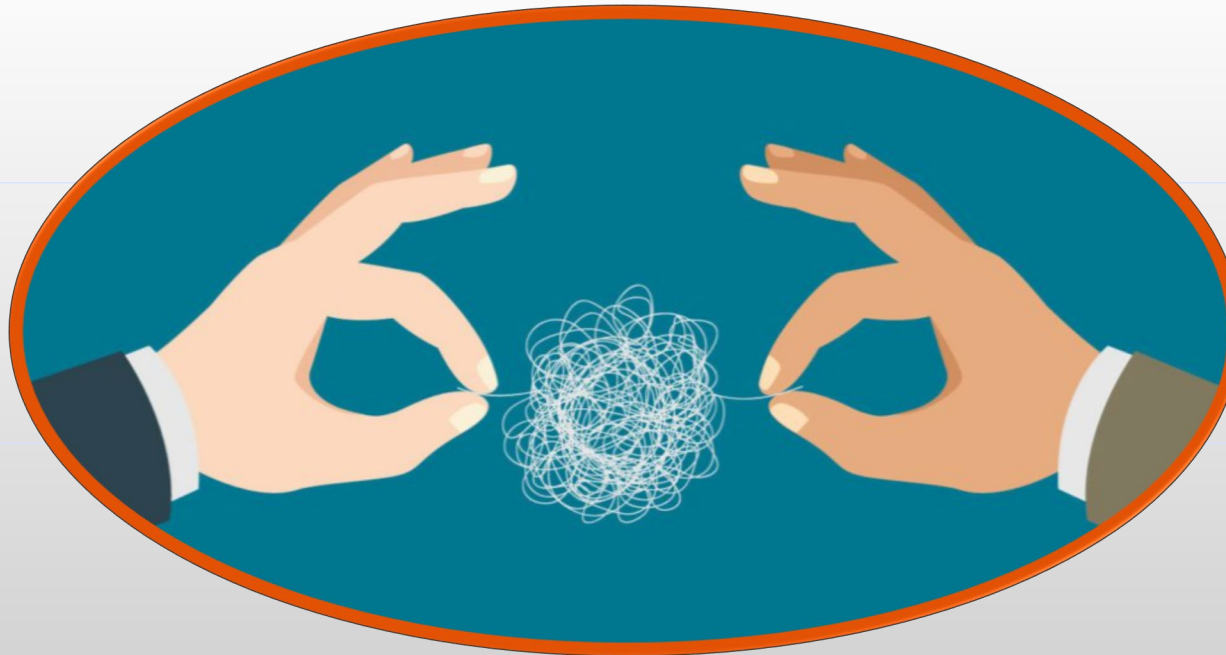
COVID – 19 Flexibilities Unwinding

May 11, 2023

Federal Public Health Emergency
Ended

November 11, 2023

Appendix K Flexibilities End



ADMINISTRATIVE RULES



Code of State Regulations

Regulation Updates

- In-Home Service Standards
 - Published Aug 30th
- Personal Care
 - Published Aug 30th
- Consumer Directed
 - Open for comment

In-Home Service Standards and Personal Care

General Updates

- Changes to AAA language to reflect updates to their regulations
- Language updated throughout regulations for appropriateness and clarification.
- Removed obsolete language.
- Corrected departments/division names and updated to accommodate changes in oversight and responsibilities
- Referencing EVV
- Additional information required by MMAC of changes impacting business
- Added “stepchild” as a child by marriage as an immediate family member for clarification for current practice
- Added “pandemic” in the definitions of types of emergencies

In-Home Service Standards and Personal Care

Nurse, APC, GHE Updates

- Allow Graduate Nurse (GN) functions
- Loosened APC requirements
- Allow LPN or GN to observe task check off however they must be trained and observed by RN supervisor
- Clarifying GHE requirement language

In-Home Service Standards and Personal Care

In-Home Aides Training

- Reduced orientation training for in-home service workers from 20 to 12 hours
- Reduced minimum hours of training prior to first day of participant contact from 8 to 6 hours
- Reduced in-service training from 10 to 5 hours
- Training that can be waived after the aide has been employed 3 years and has 15 hours of in-service training.



In-Home Service Standards and Personal Care

More Updates

- No longer require 2 credible references
- Added: A signed statement verifying the employee is not a participant if the employee will be delivering direct care to participants;



Consumer-Directed Services

Passing of bills by the state legislature and federal audit led to revisions of the CDS regulations

- HB 1682
- SB 710
- OIG Audit

Consumer-Directed Services

HB 1682

- Designated Manager and Responsibilities
- Implement a Quality Assurance Program
- Training
- Monitoring



Consumer-Directed Services

HB 1682



- No services should be authorized or reimbursement if the attendant is the same person that provides the face-to-face home visit of a consumer.
 - Unless such person provides services solely on a temporary basis on no more than three (3) days in a thirty-day (30) period.

Consumer-Directed Services

HB 1682

Proof of Business Location

Vendors shall provide proof of maintaining a business location complying with any and all applicable city, county, state and federal requirements upon request of MMAC.

Consumer-Directed Services

SB 710

Payroll, Employment or Other Taxes

- Liable to the consumer for any garnishments
- Notification to consumer of any overdue or unpaid tax obligation
- Subject to \$1000 penalty



Consumer-Directed Services

OIG Audit

Pandemic Preparedness Policy

Have a written pandemic preparedness policy and train all consumers annually



Preparedness & Planning | CDC
Emergency Preparedness & Response

Business | Ready.gov

Consumer-Directed Services

Additional General Updates & Clarifications

1

Mandatory
Use of EVV

2

Reporting
Care Plan
Changes

3

Eligible
Attendants

4

Employer
Identification
Number &
Missouri Tax
ID



National Core Indicator for Aging and Disabilities (NCI-AD) Consumer Survey

Begins Mid-October 2023

**To learn more see [INFO 09-23-03](#) and the corresponding attachments.
Please partner with us share these materials with participants!**

Medicaid Renewals



- Medicaid renewals are completed by Dept. of Social Services (DSS) Family Support Division (FSD)
- DSDS completes HCBS eligibility assessments only
- All participants must have an appropriate active Medicaid code to be considered for HCBS
- Ensure participants are responsive to DSS, FSD renewal requests
- Failure to renew will result in closure of Medicaid and HCBS

Provider Reassessments Reminders

Completion of Remediations

Utilizing Provider Reassessor Notification Portal

Check out the [memo](#) for more info!

Bulletin/Quick Guides

Check out the [Provider Reassessor Page](#) for
much more!



Value Based Payment (VBP) Updates

VBPP



**Sept
2023**

Now

**Jan
2024**

**Mid
2024**

Report Released

NCI-AD State of the Workforce Survey (SoTW-AD) is open until October 31st

CDS survey will open

Second report will be released

A one-time payment of \$2,000 will be issued to eligible providers that complete the surveys fully and accurately.

Comprehensive Rate Study Timeline

Purpose: To determine whether the fee schedule rates being paid to providers are reasonable and appropriate given market conditions

CMS requires states to formally review rates for all waiver services at least once every five years. Previous rate study was completed in 2019.

Cost Components include wages & overtime; employee-related expenses; productivity; other service-related expenses; and admin/overhead

**Due to differences in the CDS delivery model, CDS providers will not incur some of these costs.*

Mercer holds the statewide Medicaid actuarial contract and will be completing the next rate study in conjunction with DSDS.

- Project Kickoff: May 2024
- Stakeholder Engagement: Fall 2024
- Intended Publication: January 2025 (potential for FY 2026 budget)

Next Steps: We Need Your Help

Participate in second round of workforce surveys AND encourage your peers to participate too!

[STATE]

National Core Indicators®-Aging and Disabilities (NCI®-AD)
State of the Workforce in 2022 Survey

**Do not reply to this email. For questions or comments,
please contact your state contact:** [contact] at [email address]

Survey for [agency name]

You are receiving this survey because your agency provides direct care and support to older adults and individuals with physical disabilities in **Missouri**.

Please forward this email to the employee within your organization who is most familiar with Human Resources and Payroll Information.

Please do not forward outside of your organization

Data are due [due date]

For more information see INFO 08-23-01 and INFO 09-23-01.

SAMPLE INVITE sent to business e-mail address on file with Missouri Medicaid Audit and Compliance (MMAC).



If you did not receive an invitation and believe you should have, check your spam folder then notify DSDS via e-mail at

DSDS.surveys@health.mo.gov



Electronic Visit Verification VBP

Connection Payment:

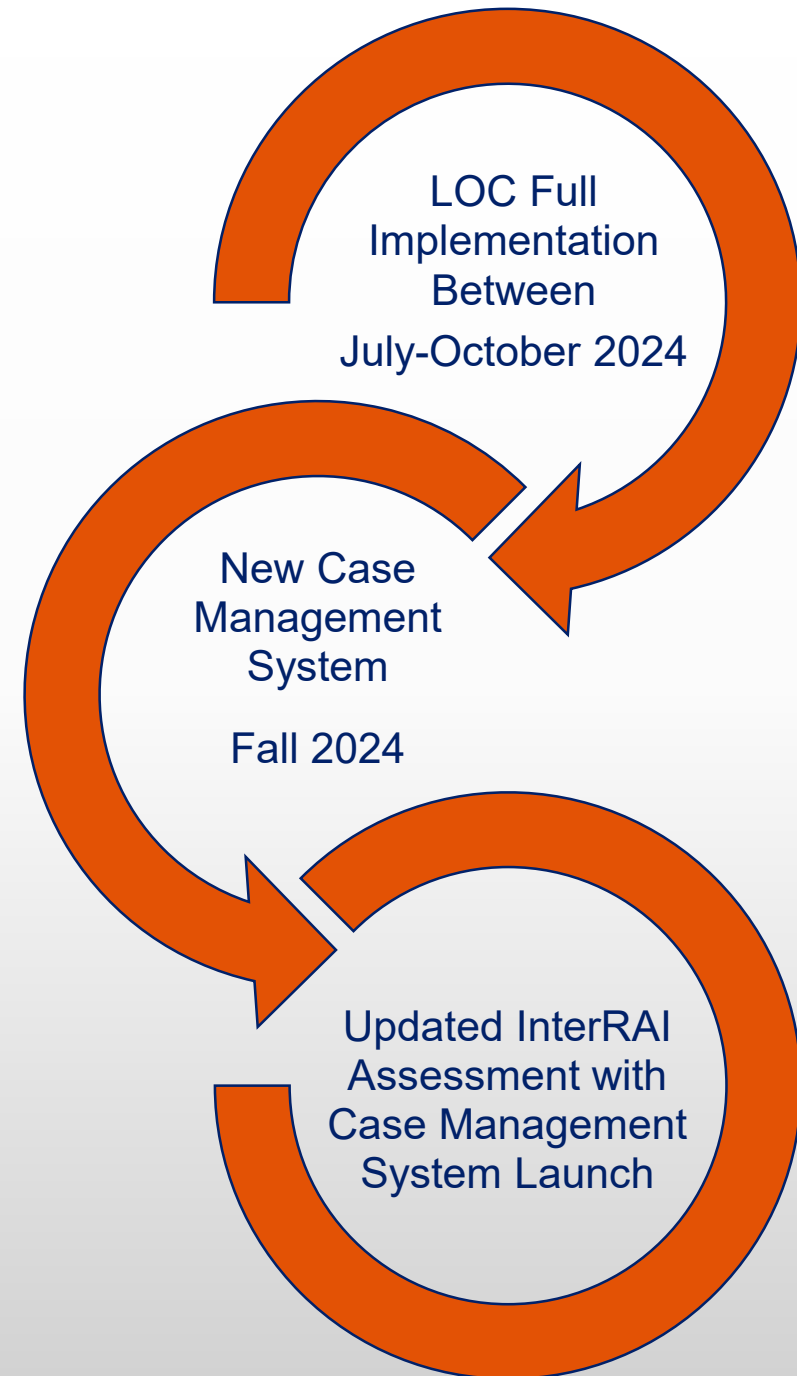
- Issued Spring 202

Minimal Manual Edits:

- Round 1 completed spring 2023
- Round 2 in progress (July – October 2023)
- Round 3 will be January – April 2024

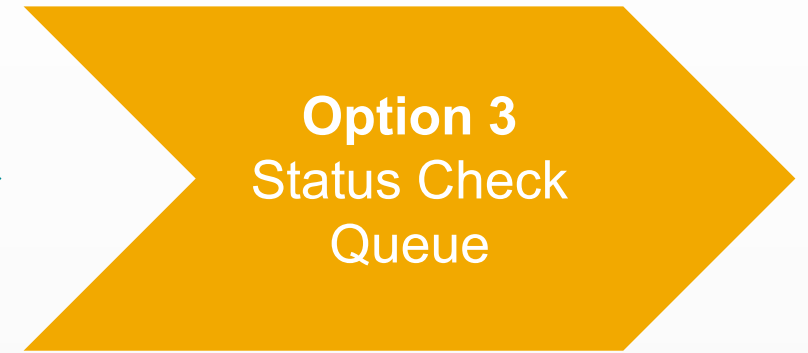
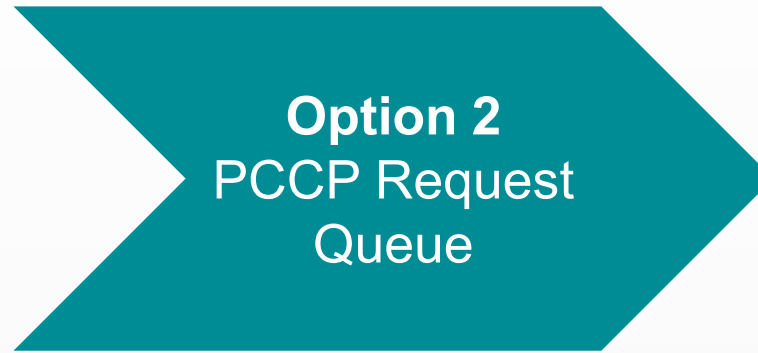
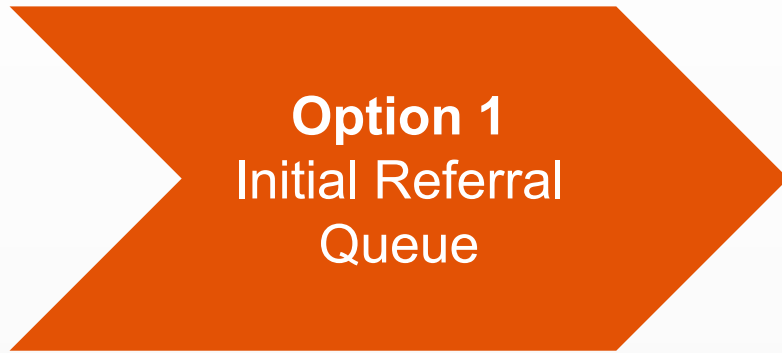
LOC Transformation and System Updates

Ensure the right person, receives the right services, at the right time, in the right setting.



Call Menu

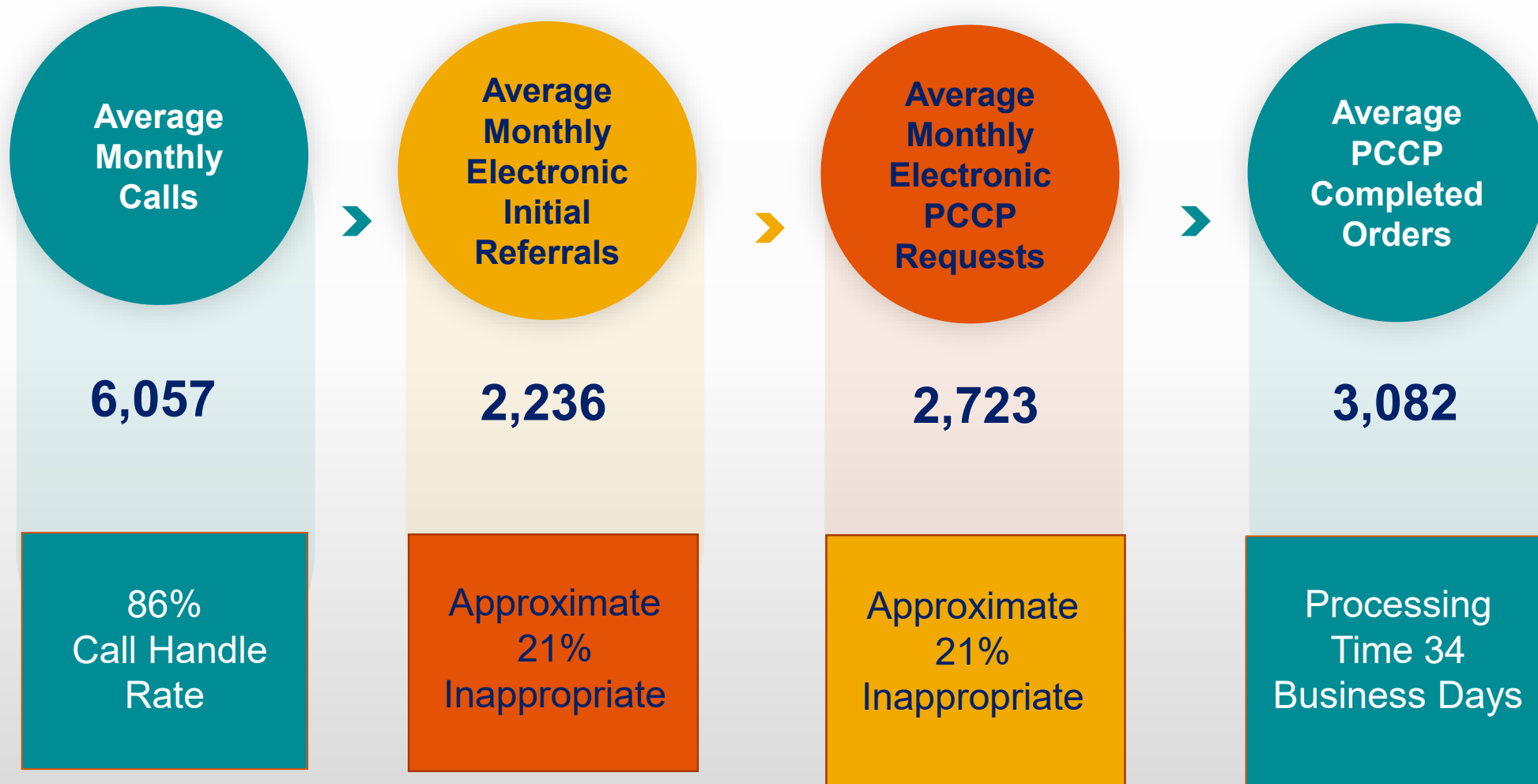
866-835-3505



- Customer Service Center remains reserved for Participants and their families only

- Five hold queues for each queue type from 8:30 AM – 2:30 PM (Three hold queues from 2:30-3:00 PM)

Intake & PCCP by Numbers January – August 2023



Reminders and Considerations

- Utilize Cyber Access Web Tool to verify eligibility prior to submitting any new referrals/requests.

- **One route** (online submission or email) is used per referral/request. Submitting duplicate or multiple referrals/requests result in a processing delays.

- When submitting multiple referrals/requests in one email, each referral/requests needs to be uploaded or scanned into separate attachments. Multiple referrals/requests scanned into one running document cannot be processed.

- All electronic communication should be sent to the Department via “encrypted email” in compliance with HIPAA privacy regulations. 45 CFR Section 164.312(a)(2)(iv) and (e)(2)(ii).

- Each email account is reserved for its stated purpose only. Submitting questions to the incorrect referral or request accounts will result in a processing delay.

- Please notify DSDS if there is a change in the participants phone number or address.

Prioritizing:

Please help us prioritize our most vulnerable participants! You can help by providing details on the referral/request form about



Recent hospitalization or facility stays

New serious, life altering health conditions or deteriorating health conditions

Formal supports

- Home Health, Hospice, etc.

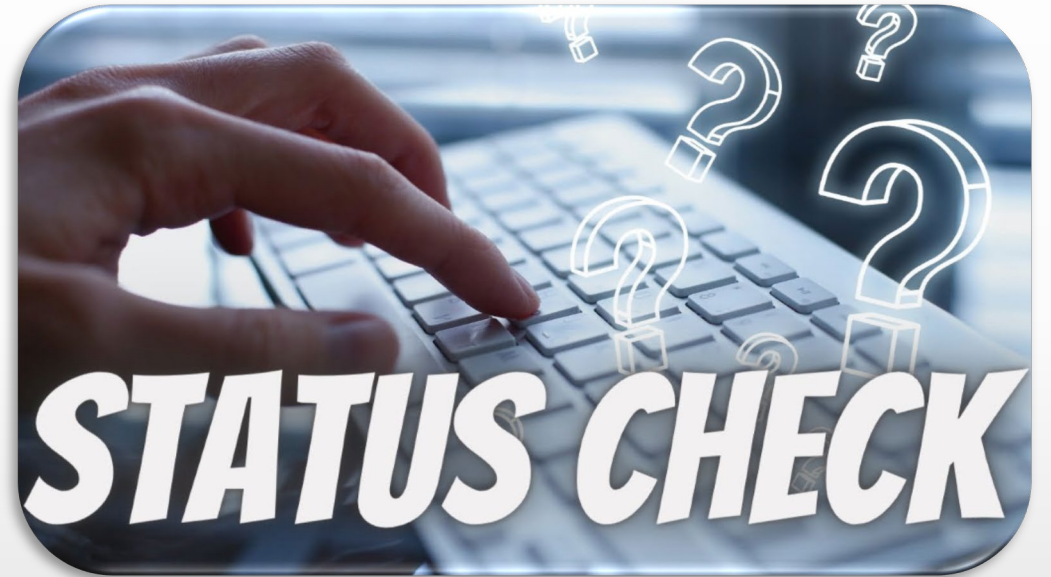
Informal supports

- Back-up plan, family, friends, etc.

Health, safety, welfare risks

Status Checks

- Did you know that we could have completed an additional 125 care plan change requests last month?
- Status check calls and inquiries take DSDS away from processing the work and creates further processing delays.
- Please discourage participants and colleagues from contacting DSDS to check on the status of requests, unless there is a new significant change in health, safety, or wellbeing.



Preparing for Assessments and Care Plan Changes

- Ensure the individual knows a referral or request was made by you.
- Explain purpose of program and LOC
- Do not refer someone without speaking with them first.

“What to Expect” items

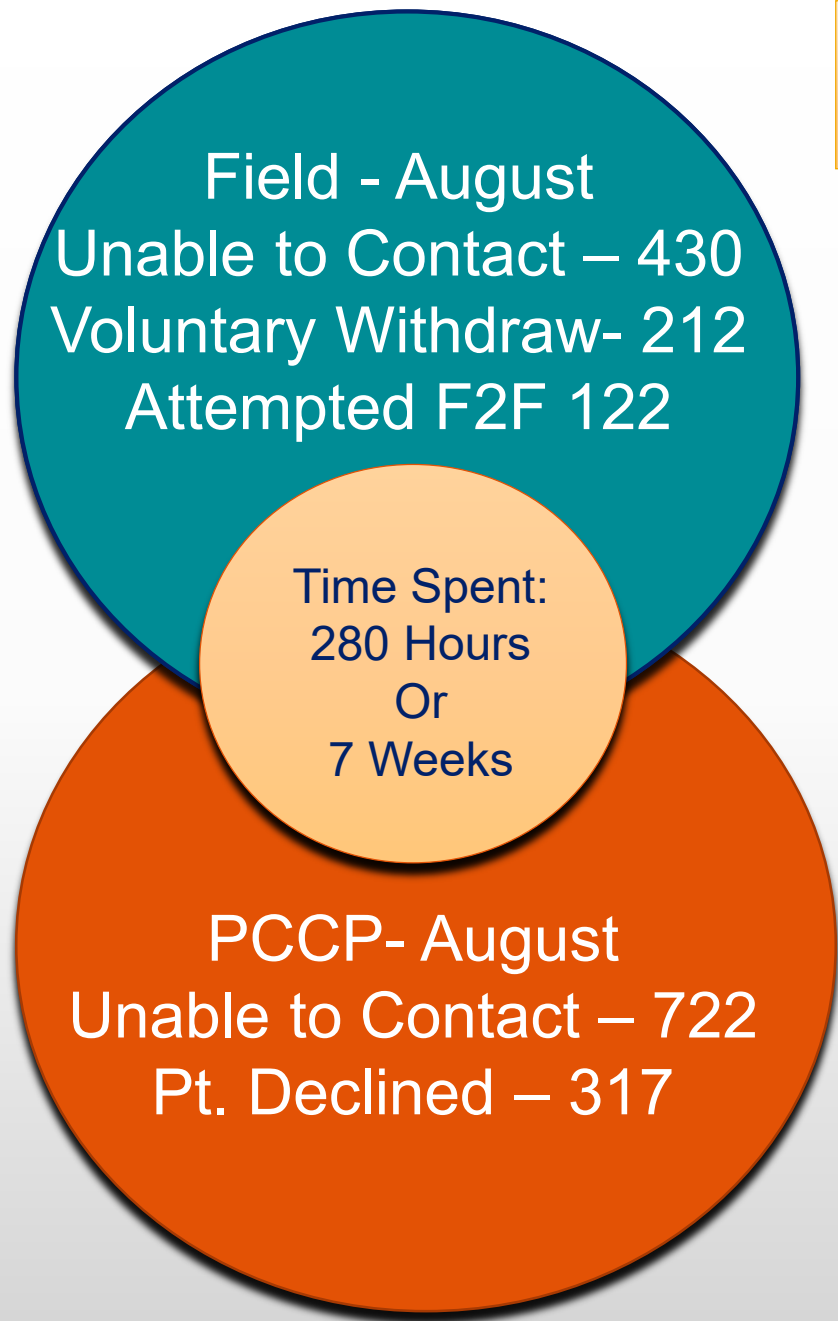
- Will be available at the end of the initial referral and PCCP request.
- Available to access at the provider page anytime.
- Share this with all individuals being referred or a request is being made on their behalf.

DSDS will be monitoring providers who make referrals to individuals who aren't prepared, who aren't in need of services, or who do not respond to DSDS.



Updated Online Referral

HCBS – Inefficient Use of Resources



How you can help us prioritize our productivity?.

- Ensure that the participant is aware of the referral or request.
- That they truly want the services/changes that are being requested.
- Educate participants on next steps, provide the flyer if needed.
- Provide a current phone number & alternate number if possible for the participant.
- Verify that the Pt. address on file is correct.
- If you have stopped serving a Pt. due to them moving or you cannot locate them, then notify DSDS.
- If contact information for the participant changes- notify DSDS immediately.



MISSOURI DEPARTMENT OF
**HEALTH &
SENIOR SERVICES**

Division of Senior & Disability Services

Questions?

Thank You