



CDS Manager Testing

Host: Cindy J Werdehausen -
MMAC Contracts Supervisor
mmac.ihstracts@dss.mo.gov
Virtual Testing - WebEx

Agenda

Consumer Directed Program

Proposal Overview

HIPAA/Office Space

Guidance

Break

Screenings - FCSR & EDL

Investigations

Provider Review - audits, tax reporting and EVV

Resources - materials and websites (DHSS, MMAC, MO HealthNet)

Break

Test functionality, questions, results, etc.

Launch test

Housekeeping



You MUST BE logged in/joining today from a laptop or desktop computer; phone, device, tablet, notebook or Chromebook will not accept the test.



If you have questions, please utilize the CHAT feature. Send questions to the “Panelists”; I am presenting and not looking at questions while speaking



Audio issues - please go to Audio, change connection, conference call - this will not kick you out of the training, it will just turn off your computer audio



We will take two breaks: one during the training session and second before the test



If you are joining as a “call in user” you will NOT receive credit for today - you MUST BE logged into the virtual room

The reason why we are all here!

208.918.2.3.a

The department of health and senior services shall promulgate by rule a consumer-directed services division provider certification manager course;

19 CSR 15-8.400 - effective 2/29/2024

- ▶ (D) **Designate to MMAC the manager who will be responsible for the vendor's day-to-day operation.** This manager shall be a policy maker and supervise the vendor's record keeping, service delivery verification, training, and orientation of consumers in skills needed to recruit, employ, instruct, supervise, and maintain the services of attendants; and
- ▶ (E) Implement a quality assurance and supervision process that ensures program compliance and accuracy of records, including but not limited to—
 - ▶ 1. CDS managers shall be required to successfully complete (or have completed) the **CDS certified manager orientation and test** offered (quarterly or as needed) by MMAC at no charge. Completion of the test for all new managers is required within six (6) months of hire;

A Few Things About The Test

- ▶ There are 40 questions - 3 hours
- ▶ DESKTOP/LAPTOP computers ONLY (test will not launch from a phone, tablet, Surface or Chromebook)
- ▶ 80% (96 points) to pass the test/120 possible points
- ▶ Open Book testing structure - the link to the materials were sent to you in the email to register, <https://mmac.mo.gov/providers/provider-enrollment/home-and-community-based-services/open-book-dm-testing-materials/>
- ▶ When you finish the test and click submit, you will be asked if you are sure; be sure. Once submitted, you will NOT be able to go back.
- ▶ Certificates or notice of failure will be emailed out 4-6 weeks from today (Oct 3-17)

CONSUMER PROGRAM OVERVIEW



What IS Consumer Directed Services ?

Missouri's state Medicaid program, referred to as MO HealthNet, offers a consumer directed personal care program. Consumer Directed Services (CDS), also referred to as self-directed care, allows eligible applicants to hire, train, and supervise the individual(s) they choose to provide their personal care.

Family members can be hired to provide care. An exception are spouses and legal guardians.

What IS CDS? (cont.)

This personal care program is administered by the Division of Senior and Disability Services, a division of Missouri Department of Health and Senior Services (DHSS), and is available state wide.

Missouri Medicaid Audit and Compliance (MMAC) processes the contracts and MO HealthNet enrollments for CDS providers.



What IS CDS? (cont.)



While this program is not limited to the elderly, it does assist seniors who are unable to perform routine daily activities due to illness, such as cancer or kidney failure. Assistance is provided with daily living activities including toiletry, mobility, cooking, and light housekeeping.

CDS appeals to younger disabled individuals because the services can be provided by a qualified family member, though not a spouse or legal guardian. The time of service delivery is determined by the consumer and the attendant may transport the consumer.

The attendant is NOT the employee of the CDS vendor/provider but the employee of the consumer.

Vendor/providers bear the responsibility of training the consumer.

Any issues concerning attendant screening, time keeping, taxes being paid under the consumer's EIN and repayment of funds to the state are the responsibility of the vendor/provider.

Commonly Used Acronyms

DHSS	Department of Health & Senior Services
DSDS	Division of Senior & Disability Services
DSS	Department of Social Services
MHD	MO HealthNet Division
MMAC	Missouri Medicaid Audit & Compliance
CSR	Code of State Regulations
RSMo	Revised Statutes of Missouri
FCSR	Family Care Safety Registry
EDL	Employee Disqualification List
GCW	Good Cause Waiver
EVV	Electronic Visit Verification

The DEPARTMENTS

DHSS

Department of Health &
Senior Services

DSDS

Division of Senior &
Disability Services

DSS

Department of Social
Services

MMAC

Missouri Medicaid
Audit & Compliance

MHD

MO HealthNet Division



MMAC
Proposal/Approved
Enrollment/Changes per
Provider/Provider Review/Invest.
www.mmac.mo.gov



MHD
eMOMED
Billing, Claims, and
Education
www.dss.mo.gov

DSDS
Cyber Access
Set Policies and Participant
Care
www.health.mo.gov



QUESTIONS



Proposal Submission & Process





Where do I get information on how to be a CDS Provider?

MMAC.MO.GOV - under Proposal for Contract

CDS General Information

<https://mmac.mo.gov/providers/provider-enrollment/home-and-community-based-services/contract-proposal-information/consumer-directed-services-general-information/>

Information that can be found:

- ▶ Program Requirements
- ▶ State Regulations (CSR)
- ▶ Personal Care Provider Manual
- ▶ State Statutes (RSMo)-August 2020 Updates (208.900 - 935)



REGULATIONS - CSR

As a CDS provider you are held accountable to the Missouri Code of State Regulations along with CDS Program Requirements

- ▶ 19 CSR 15-8.100 through .500 - **Ch 2 & 4 - updated 2/29/24**
- ▶ 19 CSR 30-82.060 - Hiring Restrictions
- ▶ 13 CSR 65 - Title XIX Provider Enrollment
- ▶ 13 CSR 70-3.030 - Sanctions for False & Fraudulent Claims to MO HealthNet
- ▶ 13 CSR 70-3.320 - EVV

Proposals

Make sure that you are submitting a COMPLETE proposal

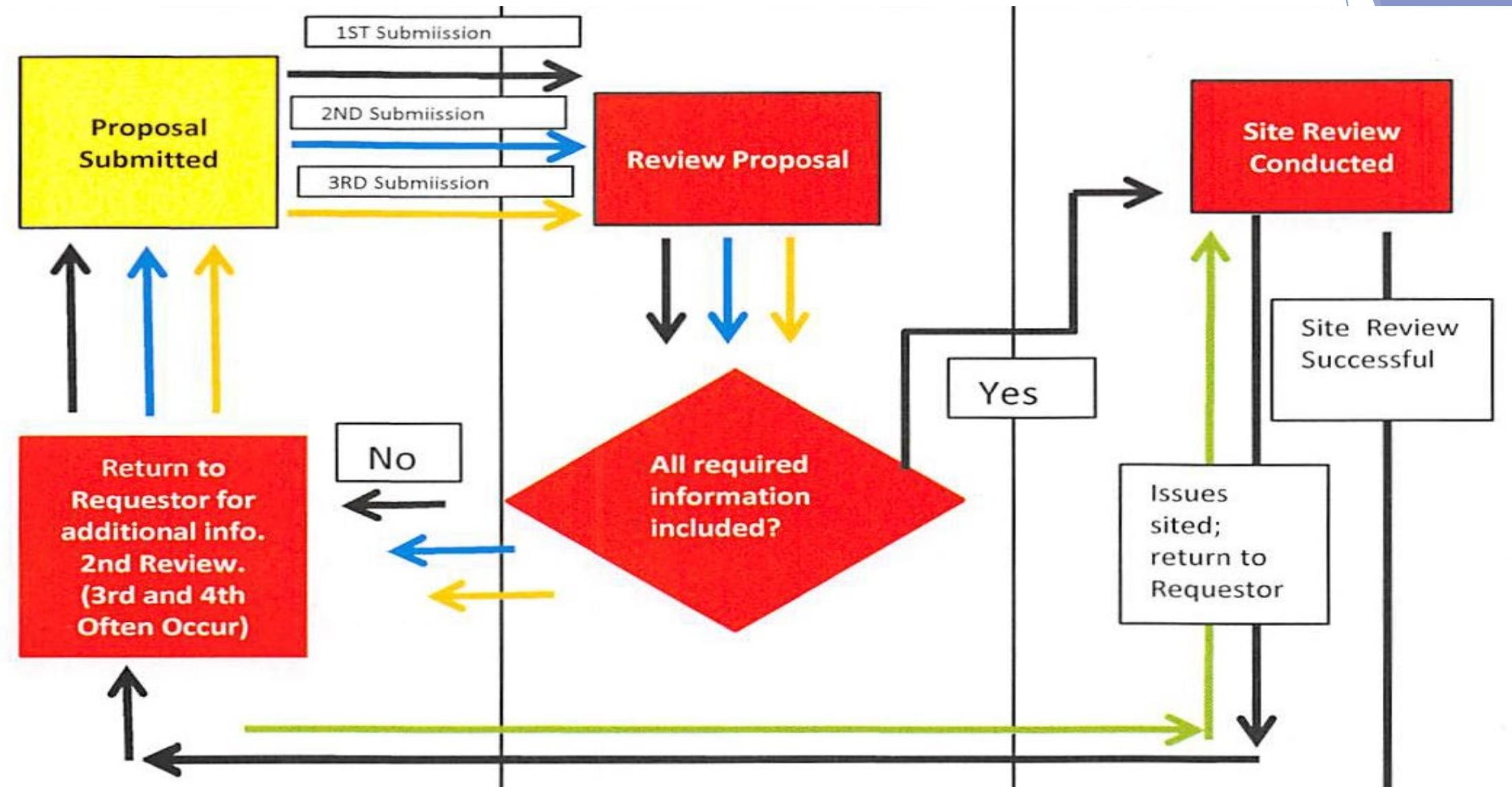
- ▶ Use the checklist on the Proposal for Contract

<https://mmac.mo.gov/wp-content/uploads/sites/11/2019/05/CDS-PROPOSAL-CHECK-LIST.pdf>

Make sure you have included everything on the checklist and that you are sending the documentation requested.

Respectfully request that first submission be sent via mail - that way YOU KNOW that everything was sent and is in the correct order

Proposal Process



Proposal is Approved

Approved Proposal

- Medicaid Enrollment forms are sent to the provider
- Notification of Site Visit
- Application fee paid

Site Visit

- MMAC representative will set a time for a virtual or in person visit and go over the checklist
- Once the site visit is completed, any additional pictures or documentation will be reviewed and processed
- Notification of any follow up needed will be sent out

Contract

- Provider Agreement emailed to the business email address
- Provider will fill out paperwork and send back the signed agreement along with the requested Box B notarized work affidavit and E-Verify Signature Page)
- MMAC will process the paperwork; finalize the enrollment
- Will email the signed contract along with a Welcome letter



Proposals

- ▶ Make sure forms are filled out Correctly and Completely
(information where asked, signed and dated)
- ▶ Policies and Procedures meet submission requirements
 - ▶ Have you followed the submission requirements listed on the website? Are your policies numbered? Are the headers there? Did you sign them? Etc.

<https://mmac.mo.gov/providers/provider-enrollment/home-and-community-based-services/contract-proposal-information/>



Purchased Proposals

Even though there isn't a rule stating that you cannot buy your proposal -

The proposal you are submitting is for YOUR business; the whole purpose of the proposal process is to see that you understand the program, its requirements, and the rules and regulations that apply to it.

(does not guarantee that the proposal will be accepted)



Proposals - Legal Business Name

- ▶ Use the Legal Business Name throughout
- ▶ When you register with the IRS; that is your legal business name and structure
- ▶ That legal name and structure must be used throughout the registration process and must all match each other.
 - ▶ IRS letter
 - ▶ Business Org. Structure
 - ▶ MO Secretary of State Office
 - ▶ MO Dept. of Revenue
 - ▶ NPI
 - ▶ Legal Business name use on all forms submitted with proposal



Example:

- ▶ ABC Home Health Care - IRS Letter
- ▶ ABC Homehealth Care LLC - MO Dept. of Rev
- ▶ A B C Home Healthcare - NPI

LLC:

ABC Home Health Care

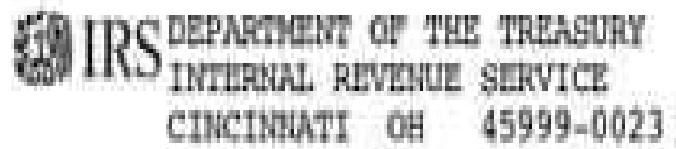
Cindy Werdehausen – Sole Member

Sole Proprietor:

Cindy Werdehausen

ABC Home Health Care

NOTE- If LLC or Inc is NOT in the name on the IRS letter do not list it when registering with other entities or on your enrollment forms.



Date of this notice: 12-06-2016

Employer Identification Number:
81- [REDACTED]

Form: SS-4

Number of this notice: CP 575 B

For assistance you may call us at:
1-800-829-4933

IF YOU WRITE, ATTACH THE
STUB AT THE END OF THIS NOTICE.

Example of Proof of Federal EIN

Proof of MO Tax ID (MO ID)



MISSOURI DEPARTMENT OF REVENUE
TAXATION DIVISION
PO BOX 357
JEFFERSON CITY, MO 65105-0357

MISSOURI BUSINESS TAX REGISTRATION

Date: December 26, 2019

Notice Number:

Telephone: (573) 751-5860
Fax: (573) 522-1722
Email: businesstaxregister@dor.mo.gov

The Department of Revenue received your Missouri tax registration application. You have been registered with the Department for the following account type(s) based on the information you provided on your application. You must report each tax or fee on the filing frequency indicated.

Account Type	ID	PIN	Begin Date:	Filing Frequency
EMPLOYER WITHHOLDING TAX				QUARTERLY

Use the Missouri Tax ID Number and PIN listed above when corresponding with the Department concerning your business and when filing any return or report. This is a Missouri Tax ID Number and does not replace your Federal Employer Identification Number or any registration number issued by the Missouri Secretary of State or Missouri Department of Labor and Industrial Relations.

The Department will provide you the applicable forms to file your return(s). If you do not receive a reporting form, download blank returns at <http://dor.mo.gov/forms/>.

For information regarding electronic filing your return(s), visit:
<https://mytax.mo.gov/rptp/portal/home/fileandpaybusinessesonline>. Electronic filing is available 24 hours a day, 7 days a week. Your tax return information is transmitted over secure lines to ensure confidentiality.

If you require additional information, contact the Taxation Division at the above address, telephone number, or e-mail.

Enclosure

Example of Unacceptable Proof of MO Tax ID

This is what I receive the
most in proposals instead of
the MO Dept. of Rev
Registration Letter

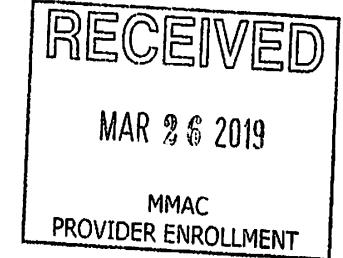
TAXATION DIVISION
P O BOX 3666
JEFFERSON CITY MO 65105-3666



Missouri
DEPARTMENT OF REVENUE
Telephone: (573) 751-9268
Fax: (573) 522-1265
E-mail: taxclearance@dor.mo.gov

FLORISSANT MO

November 26, 2018



RE: MISSOURI TAX ID NUMBER:
FEDERAL IDENTIFICATION NUMBER:

Dear Sir or Madam:

Thank you for contacting the Department of Revenue. This is in response to your request for a Vendor No Tax Due in accordance with House Bill 600, Section 34.040.7 RSMo.

Enclosed please find the requested Vendor No Tax Due.

If you require additional information, please feel free to contact us at the above address or telephone number.

TAXATION DIVISION

Currently Enrolled CDS

1300 - Currently enrolled CDS providers

90 pending CDS proposals

976 - Have consumers

324 of the 1300 - NO CONSUMERS

391/976 - have less than 10 consumers

(barely making enough to keep the doors open)



QUESTIONS



HIPAA

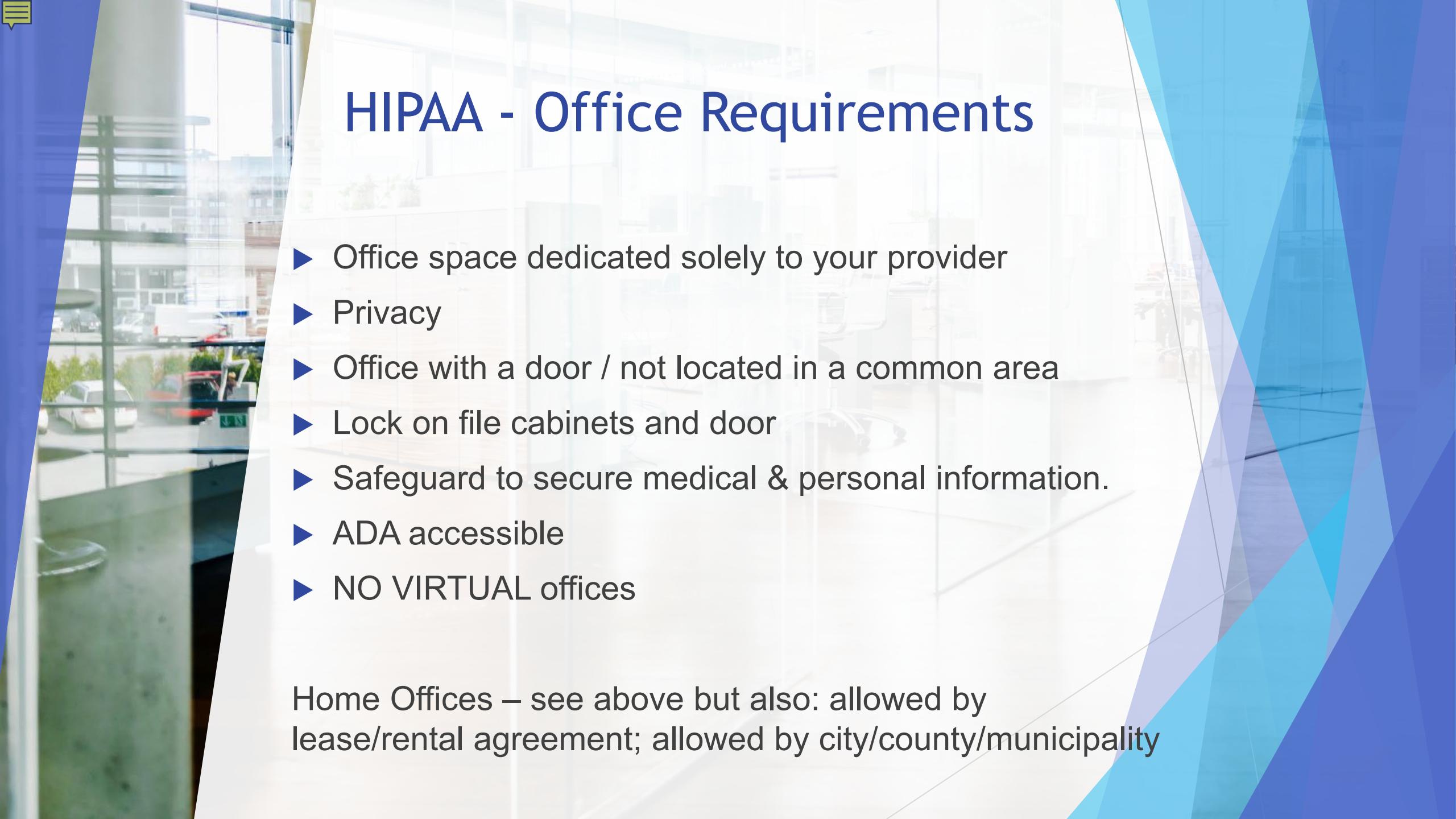


HIPAA



Health Insurance Portability and Accountability Act of 1996

Federal Legislation that provides data privacy and security provisions for safeguarding medical information.



HIPAA - Office Requirements

- ▶ Office space dedicated solely to your provider
- ▶ Privacy
- ▶ Office with a door / not located in a common area
- ▶ Lock on file cabinets and door
- ▶ Safeguard to secure medical & personal information.
- ▶ ADA accessible
- ▶ NO VIRTUAL offices

Home Offices – see above but also: allowed by lease/rental agreement; allowed by city/county/municipality

Office Days/Hours of Operation

Regulation does not state exactly the amount of time a HCBS provider is required to be open

MMAC / DHSS-DSDS use the Reasonable Standard

Reasonable standard is defined as at least three (3) days per week (between Monday – Friday) for a minimum of four (4) hours per each day (between 8:00am – 5:00pm)

Example:

Mon, Wed, Fri: Noon – 4:00 pm – ACCEPTABLE

Mon, Wed, Fri: 10:00am – Noon – NOT ACCEPTABLE

Tue, Thur, Sat: 8:00am – Noon – NOT ACCEPTABLE

Things We Are Seeing - Office Hours



Compliance visits are being done monthly throughout the state by MMAC (Provider Review, Contracts and Investigations)



MMAC allows you to tell us what your office hours will be - all we ask is that someone is there during those times

(Lately providers have not been in their office)



If you are not in your office - there must be a notification as to when someone will be back, the time they will be back and phone number to contact the provider since they are not in the office

HIPAA - Civil Penalties

Did not know; exercised diligence:

\$100-\$50,000 per violation up to \$1.5 mil per year

Violation had reasonable cause but not willful:

\$1000-\$50,000 per violation up to \$1.5 mil per year

Violation was due to willful neglect but corrected:

\$ 10,000-\$50,000 per violation up to \$1.5 mil per year

Violation was due to willful neglect and not corrected:

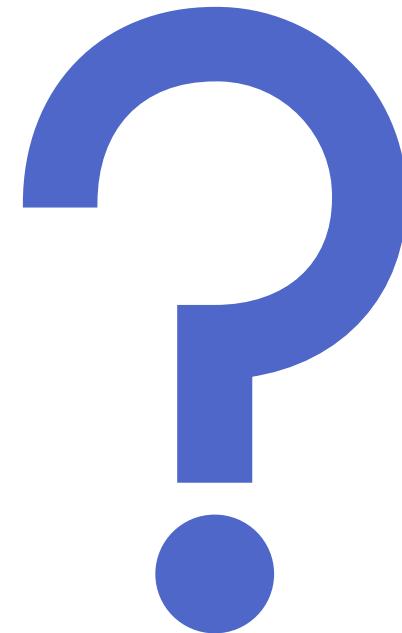
\$50,000 per violation up to \$1.5 mil per year

QUESTIONS



Guidance





Guidance

TRUE or FALSE

When you have a question about a policy, procedure, screening or billing question, it's good idea to ask your friend who is also a HCBS provider or maybe the other CDS that's just down the hall?



Guidance



If you don't know, ask someone; but don't ask just anyone.



Know which department/division you need to pose your question to.



Have your Legal Name and NPI at hand when emailing or calling with your question. Being prepared helps you and the person assisting you.



When we get something that just says "checking on the status of my proposal. Sent from my android phone" or "this is NAME call me back" we have no clue what/who we are looking for.



(Your time is valuable, we don't want to waste it)

Things We Are Seeing

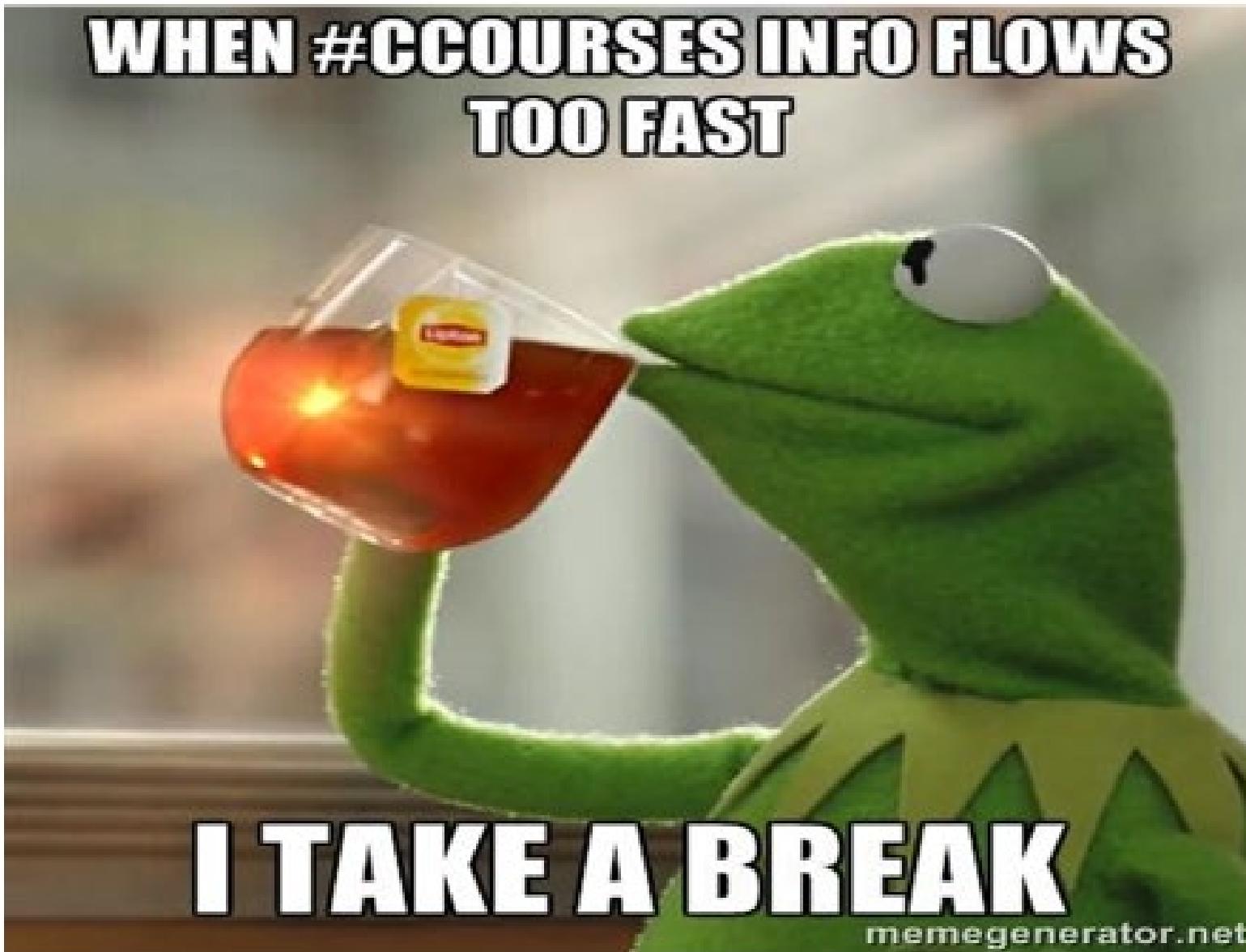
- ▶ MMAAC requires the business phone number you provide on your vendor profile for your agency will be answered with the NAME OF THE BUSINESS and have voice mail capability if you are not available to answer (the recorded message must include the name of the agency).
 - ▶ This is a Program Requirement not a request.
- ▶ Utilize the Resources you have
 - ▶ Check your own policy/procedures. 80% of the time questions being asked to MMAAC are already answered in your policy/procedures
 - ▶ Look on the program websites (MO HealthNet, MMAAC or DHSS)
 - ▶ Check the DHSS Policy Clarification Questions (PCQs)

QUESTIONS



LET'S TAKE A BREAK

**WHEN #CCOURSES INFO FLOWS
TOO FAST**



I TAKE A BREAK

memegenerator.net

Screenings





Background Screenings

FCSR

Family Care Safety Registry

EDL

Employment Disqualification List



FCSR

Must Screen all employees and attendants prior to hire (yes, even those who will work in the office)

Screen against all aliases and SSNs they disclose on their employment application

DHSS recommends that FCSR screenings of employees be done on an annual basis (PM-VM 17-31)

If there is a finding on the FCSR, it is the provider's responsibility to verify if the finding is a disqualifying factor, not MMAC's.

Information Reported in the FCSR Background Screening

Open Missouri Criminal History Records

Sex Offender Registry

Child Abuse/Neglect Records

Department of Health and Senior Services (DHSS) Employee Disqualification List

Department of Mental Health (DMH) Employee Disqualification Registry

Child Care License Revocations - findings do not apply to HCBS

Foster Parent License Denials, Revocations, Suspensions - findings do not apply to HCBS

Hiring May be Restricted

- ▶ Disqualifying criminal offenses are found in 192.2495 RSMo.
- ▶ A listing has been compiled and posted on the MMAC website

<https://mmac.mo.gov/providers/provider-enrollment/home-and-community-based-services/fcsr-for-in-home-and-consumer-directed-services/>

- ▶ To determine if a criminal offense disqualifies an in-home or consumer directed services worker from employment, compare the listing with the RAP sheet.



Hiring May be Restricted



- ▶ When comparing the listing of disqualifying offenses with the RAP sheet, refer to the COURT section of each cycle.
 - ▶ Look at the CHARGE LITERAL
 - ▶ Look at the OFFENSE TYPE
 - ▶ Look at the CLASS
 - ▶ Look at the STATE CODE or STATUTE CITATION

----- COURT -----	
COUNT:	001
COURT:	[REDACTED]
CASE NUMBER:	[REDACTED]
CHARGE LITERAL:	MURDER 2ND DEGREE
OFFENSE TYPE:	FELONY
CLASS:	A
STATE CODE:	565.021-001Y19840999.0
STATUTE CITATION:	565021
NCIC CODE:	0999
COURT ACTION:	GUILTY ON 12/09/1988
--- SENTENCE ---	
CONFINEMENT 15 YEARS	

Criminal Violations Listed Below:	Crime Class	RSMo Section
Murder in the second degree	A Felony	565.021



Hiring May be Restricted



- ▶ When comparing the listing of disqualifying offenses with the RAP sheet, refer to the COURT section of each cycle.
 - ▶ Look at the CHARGE LITERAL
 - ▶ Look at the OFFENSE TYPE
 - ▶ Look at the CLASS
 - ▶ Look at the STATE CODE or STATUTE CITATION

----- COURT -----
COUNT: 001
COURT: [REDACTED]
CASE NUMBER: [REDACTED]
CHARGE LITERAL: ASSAULT 2ND DEGREE
OFFENSE TYPE: FELONY
CLASS: C
STATE CODE: 565.060-001Y19841399.0
STATUTE CITATION: 565060
NCIC CODE: 1399
COURT ACTION: GUILTY ON 02/03/2009

Criminal Violations Listed Below:	Crime Class	RSMo Section
Assault in the second degree	B Felony	565.052



Hiring May be Restricted



- When comparing the listing of disqualifying offenses with the RAP sheet, refer to the COURT section of each cycle.

- Look at the CHARGE LITERAL
- Look at the OFFENSE TYPE
- Look at the CLASS
- Look at the STATE CODE or STATUTE CITATION

COURT	
COUNT:	001
COURT:	[REDACTED]
CASE NUMBER:	[REDACTED]
CHARGE LITERAL:	THEFT-\$500/MORE-LESS \$25000
OFFENSE TYPE:	FELONY
CLASS:	C
STATE CODE:	570.030-009Y20022399.0
STATUTE CITATION:	570030
NCIC CODE:	2399
COURT ACTION:	GUILTY ON 08/11/2008

Criminal Violations Listed Below:	Crime Class	RSMo Section
Stealing / Theft	Any Felony	570.030

- ▶ When a HP (highway patrol) finding show's up and the crime is NOT a disqualifying factor - make note on the on the screening.
 - ❖ Your name
 - ❖ Date
 - ❖ Circle or note the violation, class and citation code
 - ❖ Note that the finding is not a disqualifying factor and a GCW is not required

This will show MMAC/DSDS that further action was taken by the provider when the screening was made

Documenting a finding

You've done the screening, verified the criminal finding against the list and you're not sure or have questions

MMAC - Contracts Unit

Cindy Werdehausen

573-751-3399

mmac.ihstracts@dss.mo.gov

You will not be given a YES/NO answer – what you will be given is assistance on you using the information to make a decision

Questions
Regarding a
Finding



EDL

RSMo 192.2490

Do Not Hire anyone listed on the
EDL

Check against the EDL prior to hire
and every quarter

<https://health.mo.gov/safety/edl/index.php>



OIG LEIE

Office of Inspector General (OIG)

List of Excluded Individuals/Entities (LEIE)

<http://exclusions.oig.hhs.gov/>

CDS Program Requirements 5.2

OIG LEIE - screen all employees and attendants must be screened monthly.

QUESTIONS



Taxes



TAXES - Basic Need to Know

Obtaining Federal, State and Local Employer Identification Numbers (EIN) on new and transferring Consumers

Reporting new hires to the state of Missouri

Filing quarterly and yearly taxes

Closing a CDS Customer/Consumer

Tax forms are always changing - watch for updates



TAXES

FORMS VENDORS NEED ON EACH NEW CONSUMER

FEDERAL

SS-4 Application (Federal EIN)

Form 8821 or 2848 POA & Declaration of Rep

(IRS wants the 8821 over the 2848)

Form 2678-Appoint of Agent (also used when closing a client)

STATE

Form 2643A-MO Tax Registration (State EIN)

Form 2827-Power of Attorney

Local/City (Kansas City & St. Louis)



What Taxes Do You File?



Federal 941 - quarterly or federal 944 - annually



MO 941 - quarterly or annually



Division of Employment Security Contribution and Wage Report - all quarterly



Local Quarterly Taxes (Kansas City & St. Louis)



W3/W2 - annually



MO W3 - annually



Local Annual Reconciliation (Kansas City & St. Louis)

Reminder - Taxes



As a CDS vendor it is **YOUR** responsibility to make sure that taxes are filed and paid in a timely manner



Taxes are filed under the **Consumer's EINs and not the provider/vendor's EINs**



If a consumer decides to leave your CDS and go with another one, their EIN goes with them; it is **NOT** yours to keep.



CDS provider are required to upload consumer tax documents to CyberAccess within 90 day of initiating services - HCBS Provider Manual Append 3.45

Paying Taxes TIMELY

YES - there is a rule and NOW consequences to not paying payroll and taxes in a timely manner

SENATE BILL 710 - went into effect August 2022

“...shall ensure ALL payroll, employment, and other taxes are timely paid on behalf of the consumer AND the vendor shall be liable to the consumer for any garnishment action occurring or that has occurred as a result of the vendor’s failure to timely pay such taxes.

The vendor may be subject to a \$1000 per occurrence penalty for failure to pay such taxes.”

Employment Security



Here are some of the main items they want you to know



<https://uinteract.labor.mo.gov/benefits/home.do>



Encourage you to use the Contribution and wage reports and paying online at the link above.



If you have questions on how to upload, format or in general please email cdstax@labor.mo.gov



Remember to get all your clients reports and payments in a timely manner to stay in compliance

QUESTIONS



INVESTIGATIONS

**75% of all referrals to the
Investigations Unit
Involve CDS Vendors**

FRAUD

- ▶ This is when an individual or organization intentionally falsifies information for financial gain. One of the most common examples is a provider submitting claims to a payer for services never performed.

MEDICAID FRAUD:

- ▶ RSMo 191.905
- ▶ No health care provider shall knowingly make or cause to be made a false statement or false representation of a material fact in order to receive a health care payment.



For Providers:

- ▶ The provider should *not submit claims solely on the basis of the prior authorization, but must base claims upon documentation of actual services rendered.*

Do Not Bill Off the Care Plan

Overlapping Services

- ▶ If you bill for services while the participant is in the hospital or otherwise not receiving services, you may be guilty of stealing.
- ▶ Do not bill for services when the participant has died. (That is stealing and fraud)

Some Examples of Fraud

- ▶ **Overcharging for services provided**
- ▶ **Charging for services NOT provided**
- ▶ **Accepting bribes or kickbacks for referring clients**
- ▶ **Incentives for retain clients**
- ▶ **Rendering inappropriate or unnecessary services**

Examples of Kickbacks

Offering cash, goods or service to prospective clients to switch / to clients to stay / to attendants for referrals

(cut grass for free if they stay or to have them switch)

Falsification of Documentation

The aide/attendant is believed to have falsified time on EVV reports if they:

- ▶ Leave early, and do not adjust their Telephony/EVV
- ▶ Arrive late, and do not adjust their Telephony/EVV
- ▶ Not showing up but claiming time worked
- ▶ Being in two (or 3) places at the same time
- ▶ Using EVV while their client is in the hospital or otherwise not receiving care

Records Request - Investigations

- When you receive a records request from MMAC's Investigations Unit, please respond within the required timeframe
- If you do not have the request records, let us know
- Do Not Make Up Records, I repeat,
DO NOT MAKE UP RECORDS!

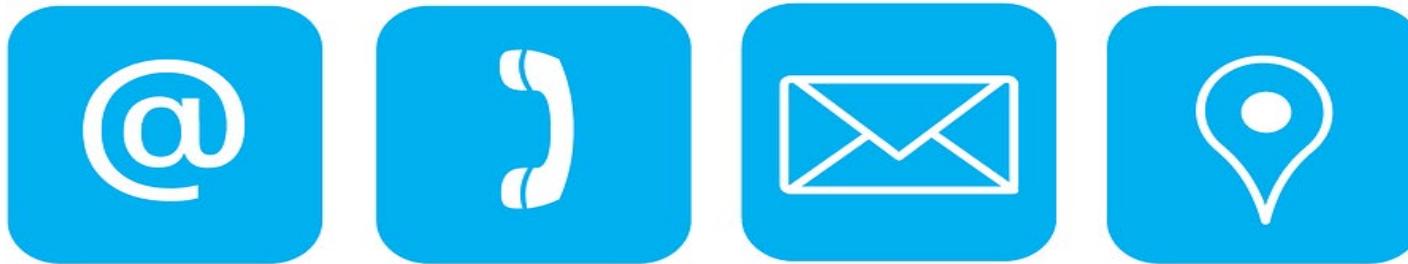
We can tell the records are forged and made up at the time of request





Records Request - Continued

- We send most of requests via fax or email
- Please make sure that your fax numbers and email addresses are updated with MMAC's Contracts/Enrollment Unit



- And when we call your listed main business phone number and get a “yeah” or “hello” or something other than your business name during your listed business hours, I will be letting our enrollment unit know that you are non-compliant with the requirements of being a provider.

Records Request - Continued

- ▶ The investigations unit will be attaching a Business Records Affidavit to each records request we send out. You must fill it out and have it notarized.
- ▶ Please mail the original to MMAC, Attn: *(Investigator who sent the request)*, 3418 Knipp Drive, Jefferson City, MO 65102.
- ▶ Please include a copy of the notarized affidavit with the return of the records to whichever investigator is requesting them.
- ▶ Should you have any questions, please feel free to call me.
- ▶ Again, this affidavit has to be signed, notarized, and the original returned to Jefferson City.

THE STATE OF _____
COUNTY OF _____

BUSINESS RECORDS AFFIDAVIT

Before me, the undersigned authority, personally appeared _____ who, being by me duly sworn, deposed as follows:

My name is _____, I am of sound mind, capable of making this affidavit, and personally acquainted with the facts herein stated:

I am the custodian of the records of _____. Attached hereto are (choose one or more)

- ____ page(s) of records ←
- ____ disc(s) containing a pdf file with ____ pages
- ____ disc(s) containing _____ (describe contents, e.g. two excel files, five audio recordings, etc.)
- ____ USB flash drive(s) containing _____ (describe contents, e.g. two excel files, five audio recordings, etc.)
- ____ other (describe) _____

from _____. These above described records are kept by _____ in the regular course of business, and it was the regular course of business of _____ for an employee or representative of _____ with knowledge of the act, event, condition, opinion, or diagnosis recorded to make the record or to transmit information thereof to be included in such record; and the record was made at or near the time of the act, event, condition, opinion or diagnosis. The records attached hereto are the original or exact duplicates of the original.

Affiant

In witness whereof I have hereunto subscribed my name and affixed my official seal this ____ day of _____, 20 ____.

Notary Public

My commission expires: _____

(Seal)

Business Record Affidavit

Make sure that you send
this back to the attention
of the Investigator who
sent the request.

CDS Providers/Vendors

For CDS, the attendant can be a family member but cannot be the spouse

Marriage Certificates are easy to find. \$3.00 in St. Louis City

For In Home – a family member is defined as a Spouse, Parent, Sibling, Child by blood, adoption or marriage, Grandparent or Grandchild



RSMo 208.918.3

RSMo 208.918 3 states, " No state or federal funds shall be authorized or expended to pay for personal care assistance services under sections 208.900 to 208.927 if any direct employee of the consumer-directed services vendor conducts the face-to-face home visit of a consumer for whom such employee is also the personal care attendant, unless such person provides services solely on a temporary basis on no more than three days in a thirty-day period".

In other words, as the owner, office staff (billing, EVV, review records, etc.) or reassessor, you cannot provide care to clients of your agency for more than 3 days in a 30 day period.

IMPORTANT

As a CDS vendor, it is your responsibility to pay all taxes in a timely manner.

It is really not fair for an 85 yr old CDS client to receive a notice from the IRS saying they are taking her home or keeping her social security check to pay the taxes that your agency agreed to pay.

The investigators will contact you to produce the proper paperwork showing taxes were paid.

We Need Your Help

- ▶ You're a taxpayer . . . It's your money!
- ▶ More services for this in need
- ▶ If you know about it and don't report it, YOU are committing fraud. This is the easiest way to get terminated from the program
- ▶ It's the right thing to do



Contact Information

MMAC FRAUD HOTLINE: 573-751-3285

MMAC FRAUD EMAIL:

MMAC.ReportFraud@dss.mo.gov

Policy Questions can be directed to:

Bureau of Program Integrity via email

programintegrity@health.mo.gov

or by phone 573-526-8557

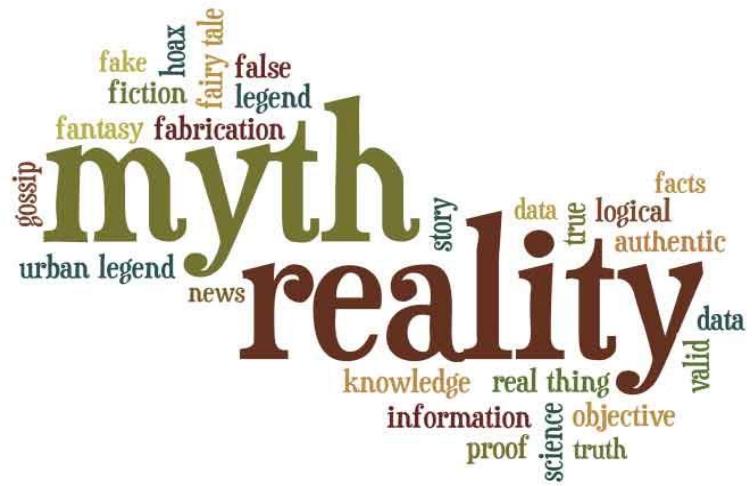
Contact Info

Mike Valley

michael.valley@dss.mo.gov

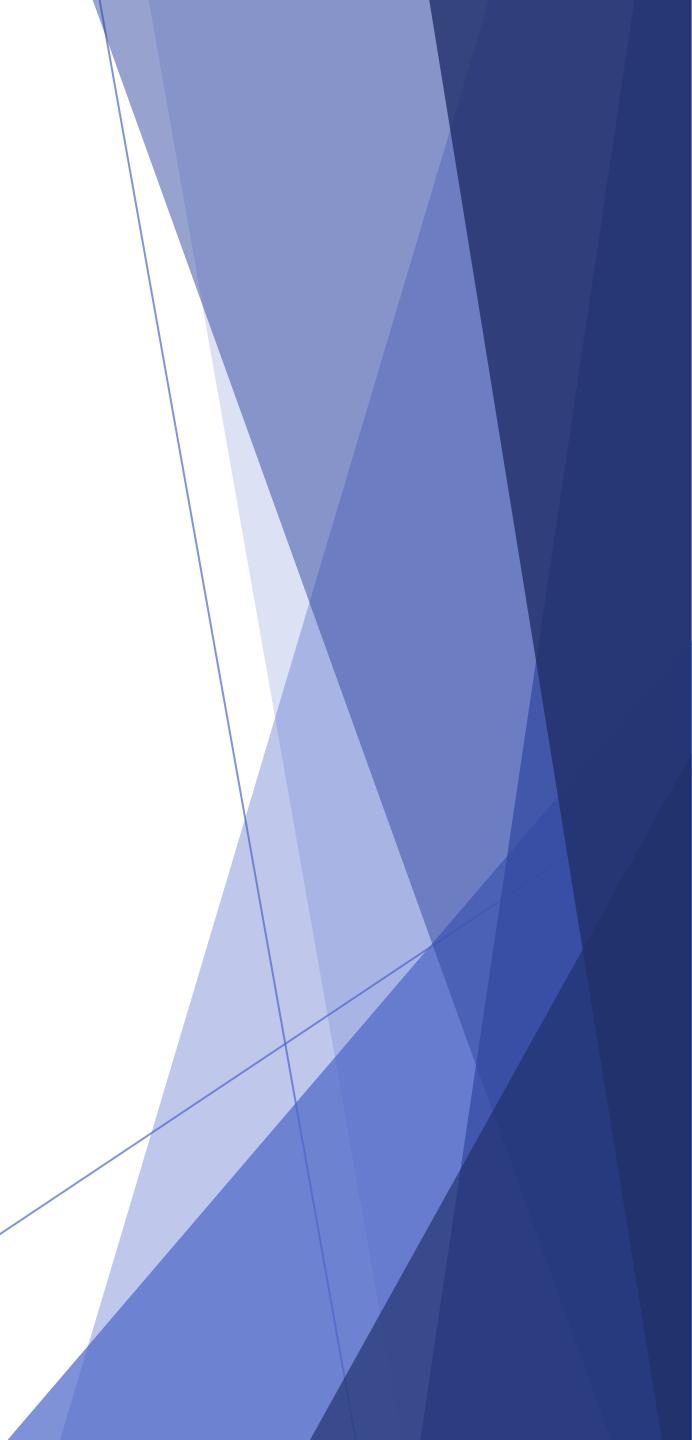
636-442-7074

Website: mmac.mo.gov

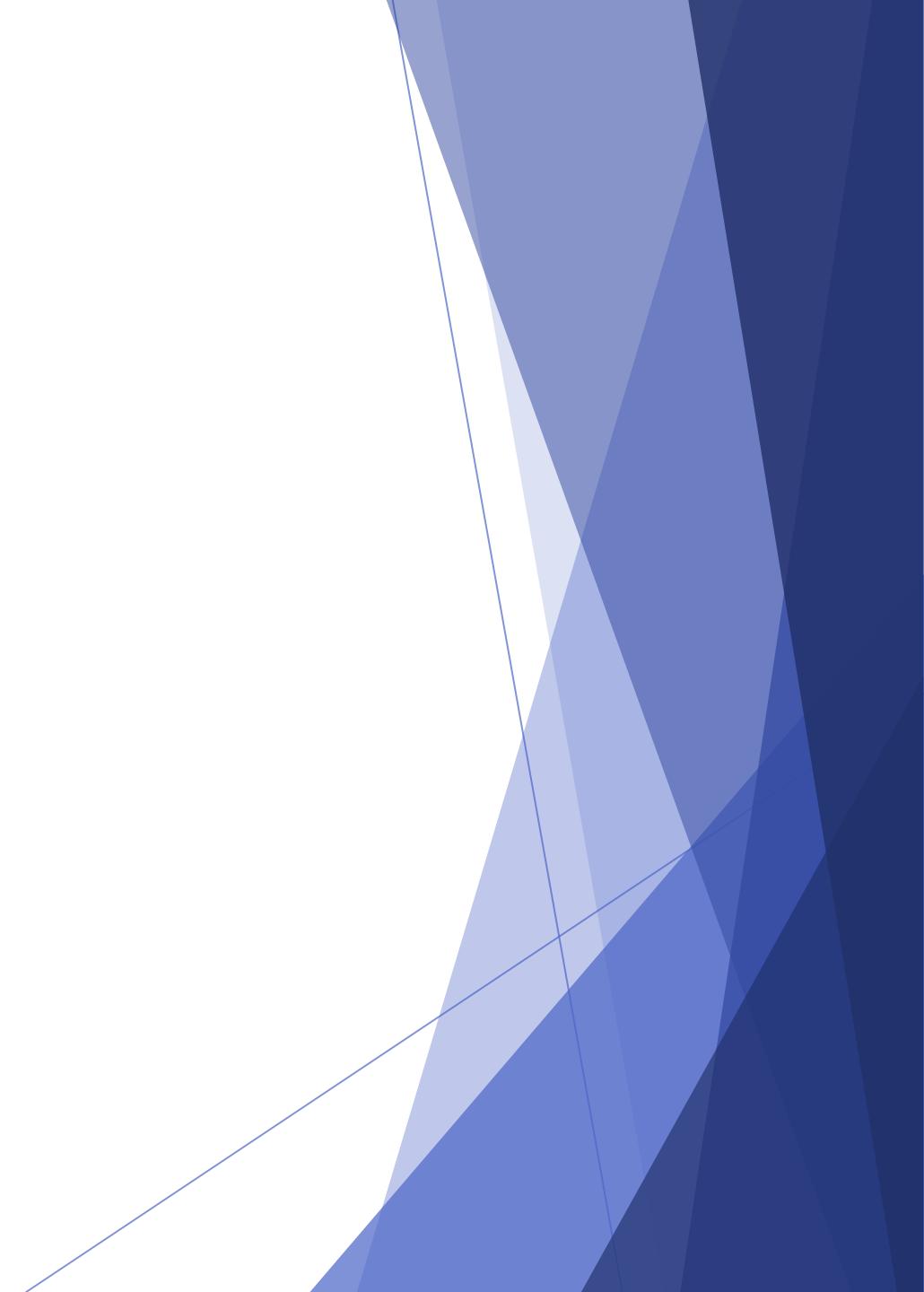


QUESTIONS

QUESTIONS



Provider Review Team - HCBS



Provider Review Responsibilities

- ▶ The Provider Review Group is responsible for reviewing and monitoring statewide utilization and program compliance of Medicaid fee-for-service providers.
- ▶ The Group conducts post-payment reviews and researches complaints.
- ▶ The Group is responsible for detecting and identifying patterns of provider fraud, reviewing provider records, claims and payments to determine whether fraud, waste and abuse exist.
- ▶ The Group is responsible for referring suspected fraud cases to the MMAC Investigations Group for further and full investigations.
- ▶ The Group also performs On Site Reviews (will come to your office for records) and Desk Reviews (will send letter with list of documents to be submitted).
 - ▶ Documents could include: personal care aide records/ training / participant records / Electronic Visit Verification (EVV)

Electronic Visit Verification is Required

Effective January 1, 2021, the use of EVV is mandatory for all Medicaid PCS in Missouri - Medicaid participants cannot opt out. Effective January 30, 2021, Missouri Code of State Regulations (CSR) 13 70-3.320 contains additional requirements for use of EVV for PCS services provided to Missouri Medicaid participants with a prior authorization.

The provider's EVV system must be able to capture service information related to delivery of consumer directed services.

The EVV system will need to produce reports that provide task completed; participant identity; start/ stop times of service; date of service in summary that constitutes adequate documentation; explanation of codes; provider's identity; aide/attendant's identity (FCSR number); document manual adjustments.

EVV reports - provider must be able to run a report that covers all required documentation. Provider system should be able to convert documents to pdf and save to a jump drive or CD.

ELECTRONIC VISIT VERIFICATION AGGREGATOR

- ▶ The State's Electronic Visit Verification (EVV) Aggregator Solution was awarded to Sandata effective April 1, 2021.
- ▶ Sandata has implemented an EVV vendor-neutral aggregator system designed to interface and store the data from the EVV vendors operating in Missouri. Sandata is responsible for interfacing with the EVV systems and ensuring required data elements are being captured and exchanged. Sandata offers training for both EVV vendors and personal care service providers regarding utilization of the aggregator system.
- ▶ Once you have enrolled with MO HealthNet, secured an EVV vendor, and have participants authorized with Department of Health and Senior Services (DHSS) you will need to register with Electronic Visit Verification (EVV) Aggregator Solution (EAS). If you have questions or need assistance with registration, please contact Sandata at:
MOAltEVV@Sandata.com

Payroll & Accounting for Consumers

19 CSR 15-8.400(3) - Vendors shall perform, directly or by contract, payroll and fringe benefit accounting functions for consumers, including but not limited to- (C) Ensuring all payroll, employment, and other taxes are paid timely. It continues that providers will be responsible for payment of any garnishments and be fined by the state per occurrence.

19 CSR 15-8.400(8) - Vendors shall comply, either directly or by contract with the following requirements:

(H) CDS Quarterly Financial and Service Reports shall be submitted to MMAC thirty (30) days after the end of each calendar quarter. <https://mmac.mo.gov/assets/sites/11/CDS-Quarterly-Report-6.2024.pdf>

- January 1st through March 31st – Due by April 30th
- April 1st through June 30th – Due by July 31st
- July 1st through September 30th – Due by October 31st
- October 1st through December 31st – Due by January 31st

(I) Maintain CDS financial records separately from another financial records and make all consumer and CDS financial records, documents, reports, and data available to MMAC upon request.

Annual Survey/Annual Report - January 1st through December 31st - Due January 31st of the following year. <https://mmac.mo.gov/assets/sites/11/CDS-Quarterly-Report-6.2024.pdf>

CDS Annual Audit Requirement

19 CSR 15-8.400(8) - Vendors shall comply, either directly or by contract with the following requirements: (J) Submit an annual audit or review by a properly licensed independent practitioner (certified public accountant licensed in Missouri)

Annual audit/review; if annual gross revenue is less than \$200,000, an annual financial statement from a CPA will be accepted.

Audit reports must be submitted to MMAC 150 days AFTER the end of the providers fiscal year.

NOTE: for those who picked calendar 01/01 to 12/31 as their fiscal year - your 150 days will be May which will be put you in the middle of tax season.

Consequences

CDS Vendors who fail to submit quarterly reports, the annual service report, or the yearly financial audit conducted by a CPA will be subject to administrative actions. MMAC will advise vendors, in writing, if reports are not received by their due date, and given an opportunity to submit the reports.

Administrative actions available to MMAC are:

- ▶ Recoulement
- ▶ Suspend Medicaid Payments
- ▶ Suspend MO HealthNet Participation
- ▶ Termination

Contact Information

Tamara M. Wills
(573) 751-3399

HCBS Provider Review Unit

Please email questions to

MMAC.CDS@dss.mo.gov

CDS Providers



Additional Provider Responsibilities

- ▶ Collecting EVV reports and/or reviewing reports of delivered services and certifying the accuracy thereof
- ▶ Medicaid reimbursement process, including billing of claims, paying the attendant on behalf of the consumer and filing the appropriate taxes
- ▶ Monitoring the performance of the care plan and the utilization of units.

Per RSMo 208.909.1(8) The consumer, attendant and/or the CDS provider are required to notify DSDS if the consumer's health or his/her ability to self-direct care has significantly changed.

EVV (Electronic Visit Verification)

HCBS providers are required to have EVV

- ▶ **Federal law, went into effect January 1, 2021**
- ▶ **No exceptions**
- ▶ **13 CSR 70-3.320– Regulations**

<https://www.sos.mo.gov/cmsimages/adrules/csr/current/13csr/13c70-3.pdf>

MO is choice state which means we allow provider to pick which EVV best works for them. It is then their responsibility to make sure that chosen EVV register and transmit date to the aggregator. There is a list of EVV vendors who are already registered on the MO HealthNet EVV webpage.

Questions - ask.evv@dss.mo.gov / mmac.evv@dss.mo.gov



Keep These In Your “Favorites”

► **MMAC website - HCBS providers**

<https://mmac.mo.gov/providers/provider-enrollment/home-and-community-based-services>

► **DSDS - HCBS Provider Page**

<https://health.mo.gov/seniors/hcbs/>

► **DSDS - Provider Memos**

<https://health.mo.gov/seniors/hcbs/infomemos.php>

► **DSDS - Provider PCQs**

<https://health.mo.gov/seniors/hcbs/pdf/pcq.pdf>



Keep These In Your “Favorites”

►MO Health Net - EVV Page

<https://mydss.mo.gov/mhd/evv>

MO Health Net Fee for Service Page

<https://mydss.mo.gov/mhd/providers>

Sign up for newsletters from DSDS, MMAC
& MO HealthNet

DSDS - HCBS Provider page

MO Health Net - Fee For Service & EVV

MMAC - Home page

QUESTIONS



HCBS Settings Requirement - Final Rule



To ensure that individuals receive Medicaid HCBS in settings that have access to benefits of community living and are able to receive services in the most integrated setting



To improve the quality of services for individuals receiving HCBS.



This is a requirement from CMS - it applies to all HCBS, however in MO In Home and CDS are just that -services in the home - only our heightened scrutiny providers such as Adult Day Cares are required to attend the annual training and submit forms yearly



Annual Trainings are held in November and forms are due by year end (December 31)

MMAC - FORMS

CHANGE REQUEST

EFT - banking

BOS (Business Organization Structure)

VENDOR PROFILE

SAC (Service Area Commitment)

CDS ASSURANCES

<https://mmac.mo.gov/providers/provider-enrollment/home-and-community-based-services/provider-contracts-forms/>

CHANGE REQUEST FORM

As a HCBS provider you are required to submit a Change Request form along with any requested documents/forms listed when you request a change.
(address, telephone, fax, email, days/hours, etc.)

Per 13 CSR 65-2.020(B) - **REQUIRES** MO HealthNet providers to notify MMAC Provider Enrollment Unit (PEU) of any changes to enrollment within 30 days of the effective date, including changes in ownership (CHOW) which must be reported within 30 days of the effective date.

Changing Banking Accounts

Must submit EFT form with sufficient banking documents

DO NOT close the current account until a deposit has been made into the new account or your payments will be delayed

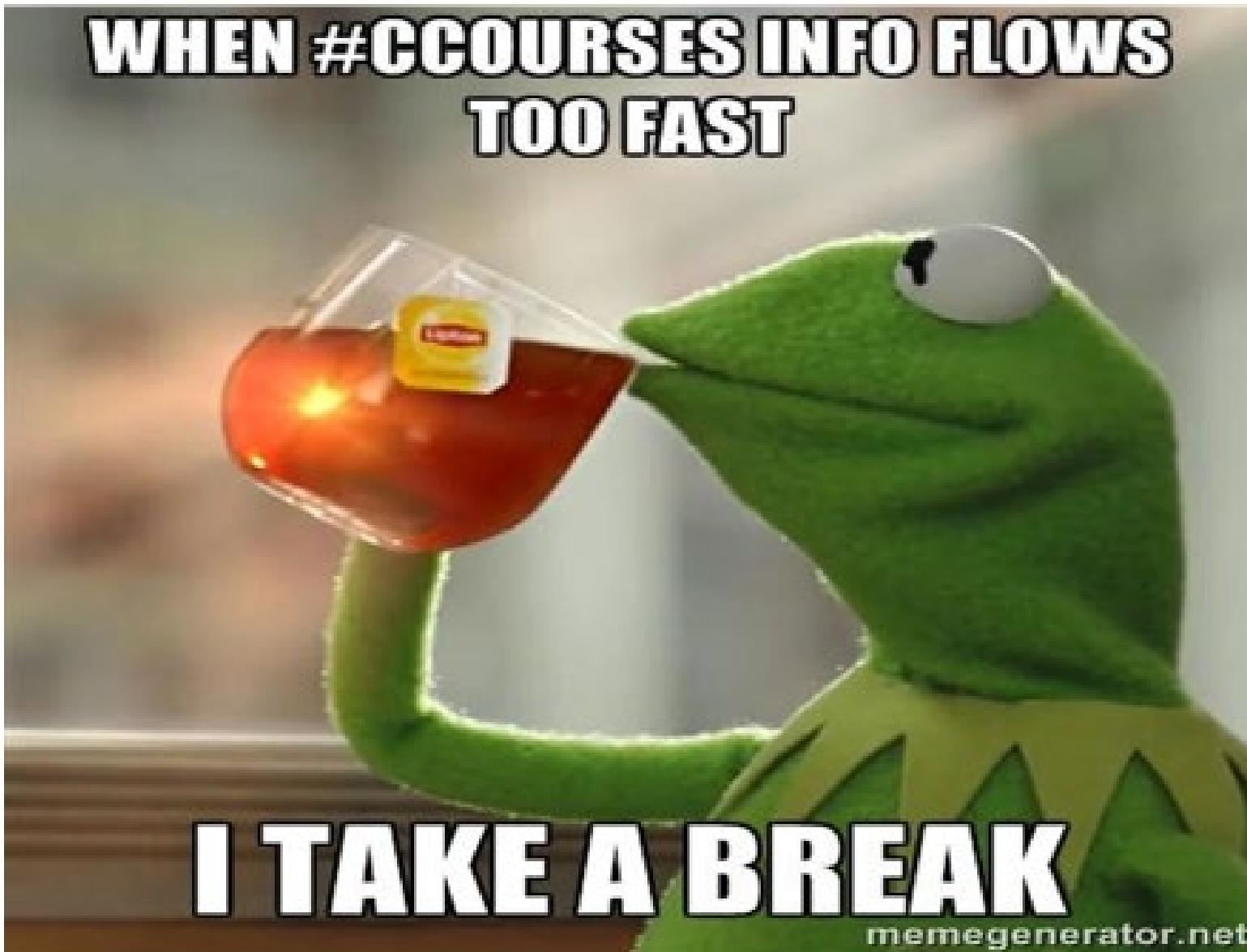
Sometimes banking changes are kicked back for one reason or another; that is why we ask that you NOT close the old account until a deposit has been made into the new one.

To Repeat - The TEST

- ▶ There are 40 questions - 3 hours
- ▶ DESKTOP/LAPTOP computers ONLY (test will not launch from a phone, tablet, Surface or Chromebook)
- ▶ 80% (96 points) to pass the test/120 possible points
- ▶ Open Book testing structure - the link to the materials were sent to you in the email to register, <https://mmac.mo.gov/providers/provider-enrollment/home-and-community-based-services/open-book-dm-testing-materials/>
- ▶ When you finish the test and click submit, you will be asked if you are sure; be sure. Once submitted, you will NOT be able to go back.
- ▶ Certificates or notice of failure will be emailed out 4-6 weeks from today (Oct 3-17)

LET'S TAKE A BREAK

**WHEN #CCOURSES INFO FLOWS
TOO FAST**



I TAKE A BREAK

memegenerator.net

To Repeat - The TEST

- ▶ There are 40 questions - 3 hours
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- ▶ Certificates or notice of failure will be emailed out 4-6 weeks from today (Oct 3-17)

UPDATE MEETING - Required Attendance

ALL CDS Managers will be REQUIRED to attend one of the Annual Update Meetings hosted by MMAC

- You will have the option of four dates per year to pick from
- Held every April and October (usually the third week schedules permitting)
 - 2024 dates: October 23 & 24 (2025 dates TBD, will be posted after the first of the year)
- Links to register for these online webinars will be posted to the MMAC website 30 days prior to the training dates

Attendance to one of these meetings is not OPTIONAL

Failure to attend a yearly meeting will mean that your certification is null/void and the CDS agency non-compliant

It is the responsibility of BOTH the CDS Manager and the CDS Vendor to maintain proof of attendance to these meetings to maintain compliance with the rules and regulations of the CDS program.

- ▶ The test is OPEN BOOK - you will need to know how to look up regulations.
- ▶ <https://mmac.mo.gov/providers/provider-enrollment/home-and-community-based-services/open-book-dm-testing-materials/>
- ▶ Three (3) hours to answer 40 questions

- ▶ Example test Question
- ▶ 19 CSR 15-8.200 (3)
- ▶ Assessments are to be conducted by DHSS or its designee, utilizing the approved interactive assessment tool.
- ▶ True or False
- ▶ [19 CSR 15-8.200.pdf](19_CSR_15-8.200.pdf)

Open Book Test

Open Book Materials

- ▶ CSRs
 - ▶ 19 CSR 15-8 CDS
 - ▶ 13 CSR 70-3.030 Sanctions for Fraudulent Claims and 3.320 Electronic Visit Verification
 - ▶ 19 CSR 30-82.060 - Hiring Restrictions
- ▶ RSMo
 - ▶ 192.2475 - Elder Abuse
 - ▶ 192.2490 - EDL
 - ▶ 192.2495 - FCSR
 - ▶ 208.909 - CDS
 - ▶ <https://mmac.mo.gov/providers/provider-enrollment/home-and-community-based-services/open-book-dm-testing-materials/>
 - ▶ Personal Care Provider Manual
 - ▶ CDS Program Requirements
 - ▶ EDL Website
 - ▶ HIPAA

Testing

- ▶ When you are finished and click submit, the system will ask if you are sure.
- ▶ **BE SURE**
- ▶ Once you click submit, you CANNOT go back
- ▶ If you miss a question, the system will not let you submit until all 40 questions have been answered.

When you have finished the test and closed out of the browser you are free to leave the WebEx session.



I will leave the CHAT open and monitoring them during the testing.

If you have questions, you may reach there.



Testing

After you have submitted the test you will receive the results of your test. You **MUST** close out of the webpage for MMAC to receive your results.

View Test Results

Student name: Pamela Hendrix
Student email address: pamela.f.hendrix@dss.mo.gov

Result Panel

Test Title: DM Test(8)
Test Description: Designated Manager's Testing
50 questions
Author: Cynthia Werdehausen
Time limit: 30 minutes
of allowed attempts: 1

The test will be LAUNCHED INTO YOUR DEFAULT BROWSER (explorer, edge, chrome),
the training will done through WebEx (little blue & green ball)

You MUST close out of this screen, I will not be able to see your score. I will not contact you about correct answers once the test has ended.



MMAC Contracts Unit Contact Info

IHS CONTRACTS
By Email

MMAC.IHSCONTRACTS@DSS.MO.GOV

Phone calls go to a voicemail and will be put in order received with the emails for responses.

All attachments must to be in a .PDF

No pictures or copies of pictures saved as a .pdf

Electronic Fax # 573-634-3105