

ADW Q & A – September 20, 2016

1. If I do an annual meeting and then 2 months later a Dual Services meeting is done, is my 6 month meeting due 6 months from date I did annual meeting or 6 months from date of Dual Services meeting?

Answer: I am assuming that you work for the PA agency. If that is so, you can count that Dual Services meeting as your six-month in order to sync up with the other providers in the case if you want to. And then your next assessment would be due 6 months after that. If you do that for the example given, you will not be able to bill the T1001 code because 300 days have not elapsed since the last time you billed the code. You would have to use the T1002 code. You also can keep your schedule as it currently is and there is no penalty for that. If you want to keep your established initial, 6-month and annual calendar going like you were before dual services were introduced, that is totally allowable as well. Once again, before trying to sync up with other providers' timeframes, I warn you to make sure that you do not miss any of your deadlines and also, it is useless to try to get that going if the person receiving services transfers providers a lot.

2. If I hired someone provisionally and worked them for 3 weeks while awaiting the results of their employment fitness determination from WV CARES and it comes back that the person is not fit for employment, do I report myself as noncompliant in my yearly Continuing Certification Report in July?

Answer: Yes, you will report yourself as noncompliant and then do a self-audit to pay back the billing during that three-week period.

3. My questions is regarding: 501.16.3 Case Management Responsibilities: K. At a minimum, upload the following documents into the UMC web portal: Enrollment Request, MNER, Service Plans, Person-Centered Assessment, legal representative information, WV Personal Care Dual Services Request form (if applicable) and any other pertinent information. In addition to a previous

Q&A on this matter a memo was also sent out on 2/10/16 by Teresa reiterating that it is ultimately the case manager's duty to upload the PCA and SP documentation. Due to the wording of the policy, Q&A session and the memo, the question of whether it could be considered a payback (for the CMA) during an audit if the RN uploads her portion of the documentation into CareConnection has come about. While I want to do my duty as a case manager, it seems unnecessary to print documentation from CareConnection only to turn around and upload it back into CareConnection to ensure it shows I was the one to upload it. Frequently I do upload all of the PCA and SP, but there are a few RNs that find it just as easy to upload in CareConnection and let me know it is there as to send it by fax. I personally appreciate the time saver, but to be certain I am following policy I was hoping for further clarification.

Answer: I agree that it makes little sense to re-upload something into ADW CareConnection that has already been uploaded by someone else. It will not result in a disallowance to the CM agency if the CM does not upload the documents as instructed in the policy if they made their way into ADW CareConnection® in some other manner.

4. Please summarize the role of the CM with the change to F.E. first. Does DHHR send the yellow DHS-2 to KEPRO for CareConnection attachment? Does the CM dismiss this F.E. notification, and when?

Answer: If a CM is selected by the applicant during the FE part of the application process, the applicant already has the yellow DHS-2 in their possession. The CM will assist the applicant with completing the yellow DHS-2 if the applicant so chooses. The CM and/or the applicant will submit the yellow DHS-2 and a copy of the letter from KEPRO to the local DHHR so they can make the determination. The yellow DHS-2 has an expiration date. Once the DHHR has made a determination and deemed the person financially eligible, the CM can upload the yellow DHS-2 into ADW CareConnection® and indicate YES on the financial eligibility screen. The system will not prompt you for a Medicaid number at that time. Once this

has been done, then KEPRO will move forward with scheduling the medical eligibility assessment.

5. Is the CM supposed to notify the estate recovery unit when there is an ADW death? Where do we get the forms?

Answer: Yes. It is expected that you will complete the form at http://www.wvrecovery.com/docs/NOTIFICATION_OF_DEATH.pdf and return it within 3 days of the passing of the waiver recipient. For more information regarding this process, please visit <http://www.wvrecovery.com/estate.asp>.

6. I have noticed now that I am not getting my enrollment confirmation/activation date as fast as I used to after I send the enrollment request to BoSS. Why is there a delay? Sometimes, the activation is the next month.

Answer: You are correct. There is a delay. Gone are the days when you could simultaneously upload your enrollment request and schedule your first meeting with the participant. BoSS now has to verify when coverage will begin with Molina to ensure that ADW providers will get paid for their work. Case Managers will notice an uptick in questions from BoSS regarding client eligibility and may be asked to contact the ES Worker on the client's behalf in order to ensure services will be paid.

NOTE: BoSS is receiving Transfer Request Forms without Selection Forms and Selection Forms without a Transfer Request Form. Whether you are faxing the forms (if the participant is not your client) or you are attaching them in AD CareConnection®, if we do not receive both the Transfer Request Form and Selection Forms, we cannot process the transfer. (BoSS can still mail forms to the participant, but that adds time to the process.)

Additional Questions/Comments from the call:

7. Regarding WV CARES, is it correct that after September 1, 2016 we can no longer work Personal Attendants provisionally?

Answer: Please see email below, dated August 30, 2016, from Meghan Shears at WV CARES:

"I am sending this notice out to all providers. We are going to delay the system setting related to provisional hires. I want to make sure you all understand we are NOT doing away with provisional hires. We have a setting in the system that allows the agency to hire provisionally upon submitting an application. We have put the burden on the agency to verify prints have been taken up to this point. When I am comfortable that all issues have been resolved with MorphoTrust I will change the setting to only allow provisional hire once we receive the notice from the State Police that fingerprints have been taken. This change is meant to make sure agencies are not employing people prior to having the background check started. If you have any questions, please let me know.

Good Morning All,

Given the issues that have arisen in the last few weeks with MorphoTrust I have decided to delay the system change regarding provisional hire. It appears the submission issues between MorphoTrust and the State Police have been resolved but I am going to monitor submissions for a few weeks before making the change in the system. While the provisional hire button will be available upon submission of the application, the facility/agency is still responsible for verifying fingerprints have been taken.

As before, I will notify all users before the system setting change has been made. To clarify, WV CARES is NOT doing away with provisional hires. We are making a change in the system that will not allow the provisional hire button to be available UNTIL we have received the fingerprints taken message from the State Police.

To ensure you do not experience delays in receiving system notifications, including fingerprints taken and determinations, it is imperative you use the facility number assigned by WV CARES. This number can be found at the bottom of your home page by clicking on the provider listed. If you have multiple providers listed, you will see multiple facility numbers.

If you have any additional questions, please let me know."

Meghan S. Shears, AFI

Director, WV CARES

WV DHHR

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8. Who does the PAS?

Answer: For ADW, a nurse from KEPRO does the PAS, and for Personal Care, the Personal Care agency nurse does it.

9. For a Level of Care increase, when can the Personal Attendant begin providing the extra time?

Answer: For a LOC increase, you can begin providing the additional services as soon as the Personal Attendant Log is updated. Be sure to attach KEPRO's approval of the LOC increase to the participant's record in ADW CareConnection®.

Additional information:

- **BMS is revising the letter that accompanies the Yellow DHS-2 as well as the Yellow DHS-2 form in an attempt to make the process of financial determination more clear. These changes will be implemented in the near future.**
- **The ADW CareConnection® manual has been updated and is on KEPRO's website at <http://wvaso.kepro.com/programs/waiver-programs/aged-and-disabled-waiver/>.**

Next Q & A will be held at the quarterly meeting in Flatwoods on October 24, 2016.