

Final Rule Stakeholder Call

Topic: Systemic assessment process

11-2-16

Noon call: (128 participants on the line)

1. When will transition plan be posted?
 - a. As soon as reviewed - end of this week or first of next week.
2. Language on PCSP will be removed?
 - a. No. Person Centered Service Plan. Language in transition plan is being removed
3. How is this different that what IDD is doing now?
 - a. Incorporates additional requirements (Provider must sign service plan agreeing they'll provide the services). MCO's will generate the service plan (Called PCISP in some areas). This has created lots of confusion.
4. ISP TCM signs off on this already. You mean all providers must sign off?
 - a. Correct.
5. Will there be one form or multiple?
 - a. Have heard MCO's have worked together to create one form. But being called different things. Want consistency.
6. Will KDADS send out a notice when posted?
 - a. Yes. On website.
7. Will there be a specified level of staffing as to who signs (direct support or supervisor?)
 - a. Does not delineate a specific person.
8. Will person centered service plan serve as a contract?
 - a. No. It's so service provider will have record of what they agreed to. Will be necessary to meet with all providers. Service plan requires much the same as support plan.
9. Will MCO contact care provider?
 - a. Not determined yet. Will sign the plan.
10. If there are multiple providers, all will sign off on support plan?
 - a. Yes.
11. If providers change, will there be an amendment?
 - a. Yes. Signature page will be amended.
12. ISP must be given to everyone at the meeting, or a week later?
 - a. We don't want to delay implementation because of a signature. It's not a service plan until it is signed by everyone and distributed.
13. When is this effective?
 - a. Already in effect. Just not totally in compliance right now.
14. Many of the same requirements for service plan vs support plan. Will this be spelled out?
 - a. Yes. Will timeline still be at least annual? A: Yes. At least annually or as changes occur.
15. If copies of plan are not distributed until after the meeting, can we go ahead and implement before providers get a copy in hand?
 - a. Yes. That makes sense.
16. Which providers are you speaking of?
 - a. All providers who provide services.
17. Annual service plan. Are there guidelines as to when it is done?
 - a. This will not change.

18. We need to talk through this, as MCO's do this differently. They're not always done in conjunction with birth date or Medicaid app submittal. There's no set schedule.
 - a. Need clarity. MCO's need to be there as well.
19. Protocol to disperse service plan to all parties?
 - a. Yes. All parties. MCO has this responsibility.
20. How many facilities will need to make changes (in compliance)?
 - a. You'll get an idea when you see the plan.
21. Service plan and support plan are different documents. What will lead the day or residential provide? How will we marry these two, and what will CDDO's role regarding mediation if there are differences?
 - a. If they contradict, something went awry. Both are driven by the individual.
22. With IDD population, which services need to be signed off?
 - a. All services. Facility or home-based. PCSP is specific to IDD, but everyone will have to have the service plan.
23. Self-directed care? Will the DSW sign the plan?
 - a. Will need to check.

Evening Call (30 participants on the line)

1. How soon will the trainings on this document be kept? How soon will the compliance piece be on them?
 - a. I would like to have them by the end of the year.
2. Susan: Provider needs to sign – lot of questions, don't have all the answers at this point.
 - a. Want to hear from providers and MCOs how to handle this
 - b. What if provider isn't there. Have to have it there before we can start the plan so we want to make sure that's as easy as possible so it gets done.
3. How do you define a provider?
 - a. They mean providers of services that are on the plan
4. If a person has multiple providers for day/res services, which is responsible for getting the signatures and plan completed?
 - a. Is the MCOs responsibility and get the provider signatures.
5. Do you see the PCServiceP taking over for the PCSupportPlan plan?
 - a. We still see TCMs doing the Support plan. What if they're different, that's a problem because they are person centered and driven by the individual. They've worked well with the MCO and that they are matching, so it's again a topic we should discuss.
6. On the personal care, if there's a PC worker (direct support) will every DSW have to sign that?
 - a. That's a great question. I really want to go back and look at that to make sure. We will get that information so when we have the training we will know – there may be several.
7. Who is going to route those and make sure everyone gets a contract?
 - a. The MCO is responsible for it.
 - i. Right now there's a delay or it's being sent to CM or CDDO but not to both at the same time.
 1. It also came up at noon. It's also the MCO resp that all involved get it.
8. Final rule going to have any effect on Art. 63 and any changes that take place?
 - a. We don't think so. Art. 63 fits with the rule and we don't expect to make changes at this point.

9. Does the service plan need to be done after the basis is already entered in order to have the tier put on there so providers also see the tier as well as CMs and anyone else part of the team or is that going to be done at the time of the BASIS and entered later?
 - a. We have heard there wasn't coordination there. This is on the list for our meeting lists so that they are coordinated and reduce number of meetings.
10. Would we want to have the PCSP done after the decisions?
 - a. Have to take the whole process into consideration. Part of having a coordinated process to get it done.
11. What I'm understanding on PCSP – an AL would need to meet with the MCO to develop the plan except now they come out and assign what they want you to do and send you the paperwork after it's been approved by their different teams. Will we need to meet to have a formal care plan/NSA/Functional Capacity screen?
 - a. Yes, this is the goal that everyone involved is there. We hear things are done differently, so we want to get everyone on the same page and doing the same page. CMS tells us sometimes it'll be a room very full of people that develop the PCSP. For ACH, you already have the neg. svc agreement and health svc plan, but now there will be the PCSP also and you would have a copy of that.