

**FS 2010-05
GENERAL POLICIES & PROGRAM ASSESSMENTS
Sections 1.1; 1.3; 1.4; 1.5; 2.4; 2.5; 2.6; and 2.7**

SECTION					PAGE	STAKEHOLDER COMMENT	KDOA RESPONSE
1	1.4	1	A.1 through 3	1 of 5	Section 1.4.1.A.1 require disclosure of each" It's unclear that the disclosure just needs to be made to the AAA. Please add this stipulation. Same issue on .2 with subcontractors....do you require disclosure to just the subcontractor or to the AAA also? Same with .3...who receives the disclosure?	Change has been made to clarify	
2	1.4	1 and 2	A; B	1 thru 5	Regarding Section 1.4.1A, B & 1.4.2 A,B related to proposed changes to protect customers by ensuring contracted providers have completed adequate background checks and reference checks for all in-home care staff. We agree with the prudence of these proposed changes to ensure quality services for frail senior Kansans and their family caregivers. It is obvious that staff time to comply with this requirement is necessary. We urge that consideration be given to the administrative costs to carry out this requirement. Funding for Core Services functions is needed by Area Agencies on Aging. Just need to make certain that there is adequate funding for the administrative time to address this.	There were no changes to current policy requirements; rather, this change is to clarify current policy.	
3	1.4	n/a	n/a	Overall	This section was SO outdated. So glad to see it updated. FSM would be good if it mimicked KMAP regulations for background checks. See KMAP Provider Manual for TCM service.	No change; agencies are encouraged to include additional questions to their internal process to gather the needed information	
4	2.4	2	H	1 of 1	"The Standard Intake Information Form data must be entered into the KDOA designated management information system within ten (10) working days of the date the intake was completed." This is not new, but now that it is in policy to enter Standard intakes into KAMIS. Since we have never done this before are there consequences for us not doing it.	There were no changes to current policy requirements; failure to comply could result in additional review or penalties	
5	2.5	2	H	2 of 2	Appreciate the changes	Thank you	

SECTION					PAGE	STAKEHOLDER COMMENT	KDOA RESPONSE
6	2.5	2	I	2 of 2	My suggestion was allowing phone reassessment for UPR's. I'm wondering if a decision has been made on implementing a phone reassessment process for all Older Americans Act Title III-C-1 customers using the UPR since this was approved for the Abbreviated UAI in 2005. The phone reassessment for UPR's would be particularly helpful for our agency due to the CHAMPSS program. I'm hopeful that this decision can be made soon since it has been a proven alternative to the in-home re-assessment processes due to a successful pilot by our agency as well as cost and time savings. 1. Add language about telephone reassessments option 2. Add language about electronic UPR option This is a registration process which with the above two options will still capture the data required for the AoA. The UPR will still be reviewed by Nutrition Provider for referral to other services. When assistance is needed for electronic version of the registration, a contact number for the Interviewer (Reviewer) would be provided. Adding these options and allowing individuals to complete the registration themselves or to have a telephone reassessment will be a much more cost effective and current approach.	No change	
7	2.6	2	B	1 of 3	This section is confusing...what about a service like IIIB respite..it's not listed	OAA IIIB Respite does not require an assessment or registration	
8	2.6	2	L.3	3 of 3	We are very supportive of this change to allow for several reasons that a UAI can be late. Time frame seems reasonable to have done and data entered.	Thank you	
9	2.6	2	L.3	4 of 3	3 "Instances that would allow the reassessment to be completed later than 365 days would include the following..." Great addition! Did KDOA make sure to correlate this update to the QR Tool? This should be added to the "justifiable reasons" for a late reassessment and or initial assessment.	Thank you; once policy is finalized, the QR Tool will be updated	
10	2.6	2	L.3	4 of 3	The reassessment and data entry must be completed the week preceding discharge or no later than 3 working days after notification of discharge" Why such a short turnaround time...I f we are notified Monday afternoon that the person will be discharged on Tuesday...that means we have to have the reassessment completed and data entered by Wednesday. That's not enough time. I would suggest the 6 day turnaround like we do between intakes and assessments.	Change has been made to allow for three days after discharge or notification that discharge has occurred	
11	2.7	2	D.1	1 of 4	Can we add or uai assessor"..while the auai is part of the uai, I think the clarification is helpful.	Change has been made. (Note: The AUAI is a separate document and is not part of the UAI.)	

SECTION				PAGE	STAKEHOLDER COMMENT	KDOA RESPONSE
12	2.7	3		1 thru 4 (Also 2.4) and UPR Interviewer Requirements 1. Change Interviewer to Reviewer to allow participant to complete registration form independently. When assistance is needed a Reviewer will be available either in person or via telephone in completing the form. 2. If the individual is at nutrition risk, then the Reviewer may refer them to appropriate resources like nutrition counseling, homemaker, etc.	No change
13	2.5	n/a	n/a	UPR Form	1. Add a yes or no after each question in the box on the nutrition risk section for ease of completion and confidentiality for the participant. Reviewer will circle the nutrition risks score by virtue of the answer to the questions. All yes answers will trigger the Reviewer to circle the nutrition risk score & total. If the individual is at nutrition risk, then the Reviewer may refer them to appropriate resources like nutrition counseling, homemaker, etc.	No change
14	2.5	n/a	n/a	UPR Form	2. Add to the following nutrition risk question: a. Do you have problems with your dentures, teeth, or mouth which makes it hard to eat? If yes, circle which ones. b. Are you physically not always able to grocery shop, cook, and/or feed yourself? If yes, circle which ones.	Change will be made
15	2.6			UAI Form	Why did KDOA remove the reassessment due date?	Since there were other avenues to obtain the reassessment due dates, we felt this space could be better utilized
16	2.6			UAI Form	Many CME/AAAs use an electronic version of the UAI and the Nutrition Risk Screen requires a "circle" if yes. Can this section be updated to include an electronic version to score the Nutrition Risk Screen?	No change at this time; will keep this recommendation under advisement for future implementation
17	2.6			UAI Form	Remove "IE %" from the UAI since the Income Eligible Program is obsolete.	Change will be made
18	2.6	2		UAI Form	Suggest the UAI be an electronically friendly" form and remove all hand printed parts of the UAI.	No change at this time; will keep this recommendation under advisement for future implementation