Date: January 15, 2019

To: DD Waiver Case Managers and DD Waiver Service Providers

From: Christina Hill DDW Manager

Subject: New guidelines Special Instructions beginning 2/1/2019

Special Instructions are revised to improve efficiency when processing Imminent Reviews, Retroactive Reviews, and Reviews involving a Waiver of 30 Days. The process described below is intended to decrease delays caused by the addition of Regional Office review of submissions with Special Instructions. The OR Coversheet for submissions to C.O.R.E. has been revised to include checkboxes that reflect the processes described below. The current OR Coversheet can be found here: https://nmhealth.org/about/ddsd/pgsv/ddw/sas/cm/. Implementation of the following changes begins immediately for your convenience and efficient processing. However, the Regional Office will still accept special requests through January 31, 2019.

Beginning February 1, 2019, the following process shall be followed.

Imminent Reviews
An Imminent review is a review that needs to be completed by the C.O.R.E within a 3 or 5-day turnaround time and will be marked for data entry into Omnicaid by the Third Party Assessor Qualis for the shorter turn-around time as well.
1) Imminent Reviews no longer need to be reviewed and submitted by the Regional Office.
2) The case manager submits packets directly to the C.O.R.E using standard submission protocols and adding IMMINENT REVIEW to the subject line of the cisco email.
3) The case manager indicates the type of submission of the OR Coversheet as:
   a) Imminent Review 3-day;
   b) Imminent Review 5-day;
   c) Imminent Review-Crisis Supports
4) The case manager must provide justification by way of a brief explanation in a letter or on the text box in the OR coversheet. Documents provided with the submission must also support what was indicated in the explanation.
5) The C.O.R.E. screens submissions marked for Imminent Review.
   a) If a submission does not meet Imminent Review criteria, the case manager is notified by email, and the submission is reviewed according to standard timelines.
   b) Crisis Supports will be accepted with retroactive start dates if indicated by the DDSD Crisis Supports Prior Approval Memo.
6) The Imminent Review criteria remain as follows:
   a) Significant life changes (i.e., change in living situation or change in medical condition),
   b) Risk of significant harm to self or others; loss or death of a significant person to the individual,
   c) A serious accident, illness, injury, or hospitalization,
   d) Loss of a job or being at risk of losing a job,
   e) Sudden relocation,
f) Situations where it has been determined that the individual is a victim of abuse, neglect, or exploitation,
g) Criminal justice involvement (arrest, incarceration, release, etc.),
h) Expedited allocation,
i) Risk of loss of services,
j) Risk of provider crisis if PA not provided, or
k) Other situations that warrant urgent changes to protect the best interest of the individual, including loss of services or being at risk of losing services.

Retroactive Reviews
A retroactive review is a review for a service or provider with a start date that has already passed.

1) Retroactive reviews continue to require submission through the Regional Office.
2) CMS requires that service delivery only be provided if reflected in the person-centered plan. Retroactive review at the OR requires that certain steps have been taken which document and demonstrate person centered planning prior to start of the service.
3) To submit a budget with retroactive start dates, the case manager checks “Retroactive Review” on the OR Coversheet and submits the entire packet to the Regional Office with a letter of justification.
4) Circumstances should be rare and based on the following examples.
5) Examples of appropriate requests are:
   a) Reasonable error or oversights;
   b) Problems with IDT planning or submissions; or
   c) Provider delays that were unanticipated or outside of case manager’s control.

6) Examples of inappropriate requests are:
   a) No transition meeting/planning;
   b) Services were documented and provided before the retroactive start date; or
   c) Provider not compliant with agreed upon start date.

7) The case manager works with the Regional Office Case Management Coordinator to submit:
   a) A Letter of Explanation from the Case management agency and any applicable provider which includes:
      i) Letter of Explanation through the Agency Director on agency letterhead;
      ii) Name and Date of Birth (DOB) of the person in services;
      iii) Reason(s) why retroactive review is being requested; and
      iv) What will be put in place to prevent a retroactive review in the future.
   b) Additional documentation showing that the service was already provided.

30-Day Timeline
Revisions must be submitted with a 30-day projected start date for the change in services.

1) A Waiver of 30 Days no longer need to be reviewed and submitted through the Regional Office.
2) The C.O.R.E. will review all revisions according to standard timelines unless marked as a Retroactive or Imminent.
3) If a revision is submitted without a start date projected 30 days from the submission, it is marked late in OR reporting.
4) The OR will provide monthly late reports to DDSD. If a case manager or case management agency is showing patterns of late submissions, the Regional Office may implement a continuum of contract management activities depending on the nature and severity of the issue.