

Statewide Case Management Director's Meeting Summary
October 26, 2017
10:00 am to 2:00pm
CDD Room 109 East
Short Lunch Break /Working Brown Bag Lunch

10:00 - 10:15 am Welcome and Introductions

- Ice breaker
- Summary of evaluation feedback from last agency directory on 7/27/2017

10:15 – 10:45 Edward Stallard, Bureau Chief from DHI-Incident Management Bureau

- A follow up to publishing the ANE - FAQ for CM's responsibilities for substantiated and unsubstantiated cases on the DHI website was provided to the field.
- NMAC rule 7.26.5.2 was discussed in reminder of the importance of convening an IDT meeting and modifying the ISP as needed. When ANE is reported and health and/or safety are a concern a ISP must be modified to address the concerns.
- Time was given for an open discussion and for the field to ask questions. A request from the field for IMB to notify case managers, by SCOMM, of ANE at intake and for the action plan to be sent to case managers. The requests will be taken into consideration by DHI.
- If any specific questions or concerns arise Edward Stallard can be contacted. Cards with his information were provided to the field.

10:45 -11:30 Iris Clevenger, from Clinical Services Bureau

- Iris provided and reviewed a power point on Insurance Basics and reminded the field about the importance of partnering with care coordinators from the MCO's.
- Brochures on The Supports and Assessment for Feeding and Eating Clinic for Adults were given.
- If any specific questions or concerns arise with eChat or anything related to the information provided in the power point presented Iris can be contacted. Cards were provided for the field.

11:30 – 12:00 Annabelle Martinez, Joleen Mondragon and Leeann Adams from Human Service Department/Medical Assistance Division - Exempt Services and Programs Bureau

Updates to recent issues/concerns were discussed as followed:

- Opening and Closing BWS when there is a LCA changes—HSD explained how Omnicaid was built and the need for this to happen.
- Full implementation of Jiva is in place. A CM needs to be logged into JIVA to view any alerts/notifications from Qualis. Notifications do not come through as an email alert. Approval letters will only be sent for JCM's and children.

- When a CM is responding to a Qualis RFI's they need to respond using the same episode number and not create a new one. Once an episode number has been closed, a CM should not send a note back to Qualis using that closed episode number, it will not be delivered.
- A CM should not copy and paste documents into the notes section, instead they should create a new note and upload the documents.
- CIU's should be filled out for each individual served in each agency so CM's can receive a 45-day notice of an expiring COE for the individuals they serve. Agency directors report they have completed this process and receive notifications.
- The field reported to experience concerns when calling Qualis and needing information on more than one issue at a time. Callers are being asked to only address one issue per call, even if they have multiple concerns, and to call back with the next request. Qualis has been notified and now will be able to address all issues needed on one phone call.
- If specific issues related to communication with Qualis arise please contact Leann Adams.
- A list of late LOC's was produced and provided by Qualis. The list will be broken up by CM agency and was distributed to each regional office CM and each agency director. Agency directors will be given two weeks to clean late LOC's up. Qualis health will be issuing technical denials.

12:00 – 12:20 Break

12:20 – 12:45 Kathy Kunkel, Deputy Director from DDSD

- A JCM Update was given to the field. The process to move JCM's into the current standards continues to move forward. The field will be given formal information, in the way of a memo, when the process is complete.
- ISD/COE's – DDSD assisted ISD to contact individuals with expiring or expired COE's. ISD is aware this is a system issue and continues to find ways to aid in this area.

12:45 – 1:15– Chris Fuety, Bureau Chief from System Improvement Bureau

- Deborah Hibbard representative from Therap joined the meeting by phone to answer questions or concerns the field had regarding changes in case managers access in Therap.
- The Therap change for case managers access is reported to be a national change not just a change in New Mexico.
- GER questions and concerns were filtered.

1:15 – 2:00 Christina Hill, Gayla Delgado, Lisa Martinez from the DDW Unit and Tammy Barth from Provider Enrollment Unit

- Gayla provided a brief overview and a copy of a power point for the DDW website migration from ACT to DOH website.
- Christina gave an update to the field on the CM Chapter of Standards and update on roll out of standards. Feedback forums and surveys have been completed for all proposed

chapters of the standards. Responses and draft language are being developed in response to the fields questions, concerns or requests for clarification. A request for a “Save the Date” on December 14, 2017 was announced.

- Helpful hints for revisions requiring open/close budgets and Budget Worksheet Version – Instructions Updated was given to the field. Feedback from field given on inconsistent OR RFIs and the BWS drop down menu does not address all related types of revisions. The field was asked to send specific examples and the DDW unit will look into these issues.
- Reminder given to agency directors: justification letters for late LOC’s, retro requests or request for a waiver of 30-day need to be signed by the agency director. Often CM’s are signing the letter and submitting it without the agency directors signature. Agency directors should use their signature as a “stamp of approval” meaning a packet was reviewed and is complete for submission.
- An update of the Qualified Provider Project for Case Management project was given. A draft of the Endorsement of Qualified Provider Project for Case Management was provided to the field.
- Please complete evaluation on survey monkey by COB of 11/9/2017.

Handouts:

- Agenda
- DHI - FAQ by Case Managers related to ANE reporting
- HSD - provided each agency with a late LOC list
- CSB - Insurance Basics (power point copy), MCO Coordination with 1915c, Centennial Care Managed Care Company Directory, The Supports and Assessment for Feeding and Eating Clinic for Adults
- BSI - Memo from Kathy Baker dated 10/13/2017, Memo dated September 15, 2017 Re: GER and GER Requirements
- DDW Unit – Introducing the DOH DDSD DD Waiver Section on nmhealth.org website, Helpful hints for revisions requiring open/close budgets and Budget Worksheet Version – Instructions Updated and Endorsement of Qualified Provider Project for CM

Evaluation survey link: <https://www.surveymonkey.com/r/K9SNTVR>

2018 Agency Directors Meeting Dates:

January 25th **Bank of the West 17th Floor**

April 26th CDD Room 103E

July 26th CDD Room 103E

October 25th CDD Room 103E