

Agenda
Statewide Case Management Director's Meeting
January 25, 2018
10:00 am to 2:00pm
Bank of the West 5301 Central NE, 17th Floor Conference Room
Short Lunch Break /Working Brown Bag Lunch

10:00 - 10:15 am Welcome and Introductions

10:15 – 11:00 Annabelle Martinez, HSD/ Medical Assistance Division

- Address and DOB discrepancies
 - ✓ HSD provided phone numbers and website information to ensure any address changes are made with Social Security Office. ISD will not see updates in the system unless this process is followed. (See attachment: *Client Address Changes with SS*).
- LOC and required information on the CIA
 - ✓ Qualis verifies that the MAD 378 (LTC Abstract) matches the CIA submitted.
 - ✓ Be sure DOB and last four of SSN are correct on the and LOC Abstract and CIA so this match is clear.
- Technical Denials from the TPA
 - ✓ Submit LOC's on time and respond to RFI's timely. Pay attention to JIVA and check for any open items for LOC submissions and respond timely.
 - ✓ A technical denial could be issued after a third RFI on incomplete LOC submissions. Review by Qualis cannot start until the packet is complete.
 - ✓ If submitting a LOC late, DDS must approve. Process for approval is the same.
 - ✓ At 90-day and 45-day (prior to LOC expiration) mark HSD is preparing to implement a process to generate letters to notify individuals/ families of submission requirements for LOCs.
 - ✓ Note LOC dates do not change in the system even if submission is late on year. Keep track of LOC dates.
 - ✓ Provide specific examples to HSD Leann.Adams2@state.nm.us if you experience a problem with technical denials.
 - ✓ HSD will research process with physicians so that a LOC Abstract can still be completed even when timing of the LOC recertification is off track with the last annual physical.
- 90- Reconsideration Period for Waiver Categories
 - ✓ HSD published notice that 90-day reconsideration for Modified Gross Adjusted Income renewals is extended to all Waiver categories. (See attachment: *IPP 17-01 HCBW 90 Day Reconsideration Period.*)
 - ✓ which was also e-blasted to the field on 12/29/17.)
 - ✓ ISD is looking at language in their letters.
 - ✓ Provide specific examples of recertification issues/questions about dates to AnnabelleM.Martinez@state.nm.us and she will assist with research.
- 1915 (c) List
 - ✓ Use the 1915(c) lists being sent to you by your Regional Office as a tool to monitor.
 - ✓ HSD is working to add an LOC end date to the list.
 - ✓ Notify your RO Case Management Coordinator if you are having trouble using the list.

- ✓ The 1915 (c) is run bi-weekly. Be proactive, so the list does not reflect real time.
- ✓ Use other tools to verify the information such as Medicaid provider portal. Enter a date span back 6 months to check COE.
- ✓ DDS is reinstating ASPEN access for someone in each region. Your RO will soon be a resource to check ASPEN.
- LCA and BWS
 - ✓ Beginning Feb 1, 2018, a single BWS can be used for revisions to LCA and tiered rates.
 - ✓ You can open and close two LCA's or tiered rates on the same BWS. (See attachment: *Beginning February 1 OR and CM instructions for LCA changes*).
 - ✓ BWS instructions are being revised and will be reissued with new BWS on or before March 1, 2018.
- ISD Call center
 - ✓ ISD call center being answered within 30 seconds.
 - ✓ Use correct number ISD number **1-866 507-1121 #2**.
 - ✓ ISD is conducting various other QA activities to reduce wait times and be responsive.
 - ✓ When calling, you must speak with call center representative. That representative reflects notes about the call in ASPEN, and each call is recorded. This helps with follow-up.
- New Mexico HSD Announces Managed Care Organizations for Centennial Care 2.0
 - ✓ Current MCOs are still providing services until December 31, 2017. (See attachment: *Procurement Press Release*).
 - ✓ Blue Cross/Blue Shield of New Mexico, Presbyterian Health Plan and Western Sky Community Care (Centene Corp.) will begin operations for Centennial Care 2.0 on January 1, 2019.

11:00 -11:30 Carrie Roberts and Casey Stone Romero, Community Inclusion

- Use of DVR before DD Waiver funded services
 - ✓ DVR must be used first.
 - ✓ Check for additional language about this in DD Waiver Standards.
 - ✓ The issue will also be further addressed in Standards training and OR process, new clinical criteria.
- Scaffold Funding Project (DDS partnering with DVR)
 - ✓ Working on an incentive payment to Case Managers to compensate time spent collaborating with VR.
 - ✓ Working on “presumptive eligibility” to streamline VR process.
 - ✓ Working on efficient rate and pay structures for providers.
 - ✓ Working with providers to increase capacity for Discovery.

**11:45 – 12:45 Jen Rodriguez, Community Programs Bureau
Christina Hill, DD Waiver**

- S 1.1.2-Revised Addendum A and DHI letter
 - ✓ Review information annually. Have a robust conversation using the script. (See Attachment: *draft script 1.1.2 (002)*).
 - ✓ Hand out DHI letter annually. (See Attachment: *ANE Letter Final*).

- ✓ Addendum A includes added acknowledgment that information was provided and reviewed. (See Attachment: *draft Add A*)
 - ✓ New process applies to all Waiver participants and is not just Jackson Specific.
 - ✓ Provide feedback on drafts to Jennifer.Rodriguez@state.nm.us by February 1, 2018.
- OR Streamlining Plan, Clinical Criteria Updates and Roll-out
(See Attachments: *Copy of Annual Review Cycle draft* and *Frequency of Reviews revised 1-25-18 JR*).
- ✓ Currently, systemic issues affecting efficiency include high volume of RFIs, late submissions, and # of revisions throughout the year.
 - ✓ DDSO is close to implementing a decrease in frequency of reviews as indicated in DDSO decision October 2016.
 - ✓ Draft OR Streamlining process includes decreasing frequency of annual submissions to the OR and is detailed in attachments.
 - ✓ Draft process developed with input from OR implementation group, OR, ADDCP, CMAAC and DDSO.
- Qualified Provider Project for CM's
 - ✓ Qualified Provider Project for CM is a revision to the CM Agency application and scoring guide for new and renewing CM agencies.
 - ✓ Decision to revise the application has been presented to this group previously and is based on need to make process meaningful to CM Agencies and DDSO and to better align the application and scoring guide with new Standards, Statewide Transition Plan, and related Evaluative Components about a quality CM system.
 - ✓ DDSO will be transparent about the application and scoring guide so CM Agencies have clear understanding of expectations. The status of the project is as follows:
 - Phase 1: Core group at DDSO has worked through several drafts of a revised application and scoring guide.
 - Phase 2: Next set of revision with project with Regional CM Coordinators.
 - Phase 3: Gather other stakeholder input including Pilot Project with CM Agencies;
 - Phase 4: Implement.
- Program Updates
 - ✓ You must register to attend webinars on DD Waiver Standards Feb 6 and Feb 20.)
See attachment: *DD Waiver Standards Presentation flyer*).

12:45 – 1:30 Chris Futey Systems Improvement, DDSO

Case Management Data Summary (See Attachments: *pds_12_31_2016_all_alpha*; *PDS_12_31_2016_se_sort*; *Provider Data Summary Intro*; and *provider_data_summary_cm_mockup_01_24_2018*)

- ✓ BSI seeking input on a data sources for a "Case Management Data Summary" a progression from Provider Scorecard.
 - ✓ Questions to consider: Would having a data points proposed be helpful to the field and individuals, families, guardians in services? What additional or alternative data sources do you propose?
 - ✓ Please provide feedback to Christopher.Futey@state.nm.us and Steve.Schan@state.nm.us by February 15, 2018.
- Therap Updates

- ✓ Expanding information that can be sent in an Scomm.
- ✓ Person receiving the must be linked to the individual.
- ✓ Therap is working on CM access to MARs.
- ✓ Therap is looking at the search function of the GER.
- ✓ Email Kathy Baker Kathy.Baker@state.nm.us or call at 505-841-5524 if you have more concerns about Therap.
- ✓ IDT must be updated. Be sure updates are accurate and Jackson Class Membership is accurately marked.

1:30 – 1:50 Coti Viljoen from Clinical Services Bureau, DDSD

- ✓ Services for young adults (18-20) are available if they were found to be at mod or high risk for aspiration as required by the current standards.
- ✓ Decision consultation process decisions follow the person to all areas, not just at the house.
- ✓ SARLs must be submitted by case managers within 7 days of the meeting to Jacoben (Coti) Viljoen, Statewide Aspiration Risk Coordinator.

1:50 -2:00 Wrap Up

Evaluation survey link: <https://www.surveymonkey.com/r/HSC8QR5>

Next meeting: 4/26/2018 10am -2pm at CDD Room 103 E

Attachments:

- Client Address Changes with SS
- IPP 17-01 HCBW 90 Day Reconsideration Period
- Beginning February 1 OR and CM instructions for LCA changes
- Procurement Press Release

- RORI Letter 1.4.18

- pds_12_31_2016_all_alpha
- PDS_12_31_2016_se_sort
- Provider Data Summary Intro
- provider_data_summary_cm_mockup_01_24_2018

- ANE Letter Final
- draft Add A
- draft script 1.1.2 (002)

- Copy of Annual Review Cycle draft
- Frequency of Reviews revised 1-25-18 JR

- DD Waiver Standards Presentation flyer