IACP

Documentation and Service Planning for Habilitation Services

Iowa Association of Community Providers

Relentlessly Advocating for *Iowa Providers* to Build *Healthy Communities*

One day, all Iowans will live, learn, and work in their community of choice.

IACP

Service Planning

Section Subtitle

Iowa Association of Community Providers

IACP

Service Plan

Service providers are required to develop a service plan with the member that is consistent with the Person Centered Service plan completed by the IHH including the need for the amount of supervision and skills training requested

Iowa Association of Community Providers

IACP

Service Plan - Prior to meeting

Collaborate with Team Members:

- Including Member, Legal representative, IHH worker, Agency staff, Other services (therapist, PCP, etc)
- DOCUMENT COLLABORATION (now and throughout services)
- Gather info on strengths, updates and concerns

Iowa Association of Community Providers

IACP

Service Plan Development

At service plan meeting discuss:

1. Member's strengths, preferences, desired outcomes, assistance or needed accommodations, additional supports or needed referrals, nutritional health plan, infectious disease prevention, emergency medical intervention, and review of basic demographic updates.

Iowa Association of Community Providers

IACP

Service Plan Development

2. Risk profile
3. Coping/Crisis Plan
4. Rights Restrictions if any & plan to remove/review restriction (assure at least quarterly review)
5. Assessment-strengths and barriers to reaching desired outcomes

Iowa Association of Community Providers

IACP

Service Plan Development

6. Goals (Goals will be relevant to the diagnosis and assessment), Objectives (Objectives must contain a description of a behavior that is specific, observable, and measurable standards) and Interventions (Interventions will clearly define specific action steps).

Iowa Association of Community Providers

IACP

Service Plan Development

7. Discharge plan-team will review when and how discharge from services would look and what would be happening in their life to know they could be discharged in order to evaluate their discharge plan as a working tool.
8. Support Team agreement-All members present for the support team meeting will sign the service plan.

Iowa Association of Community Providers

IACP

Goals and Objectives

Everything we do in Habilitation Services needs to be tied to a goal that is tied to the member's mental health assessed need.

Iowa Association of Community Providers

IACP

Goals and Objectives

The Provider plan will include Measurable goals and objectives that reflected the specific tasks/behaviors/skills that the member wants to work on specifically for the timeframe identified. Generally the top 2-4 things that are most critical to them reaching their desired outcome.

Iowa Association of Community Providers

IACP

Goals and Objectives (example)

- ***Goal**: I will be able to cook my own meals by the end of this year.*
- ***Objective:** I will be able to make at least 10 different meals by the end of the year.*
- ***Interventions**: 1. Staff will cook with Simon, walking him through the steps to making meals. 2. Staff will educate Simon on the food pyramid and then review him how to select various foods that he likes that fit this pyramid. 3. Staff will help Simon learn how to grocery shop for items that would allow him to make the food he selects.4. Staff will provide guided direction as necessary for food prep which includes modeling, giving hand/hand support, encouragement, and praise.*

Iowa Association of Community Providers

IACP

Goals and Objectives

We can have a more general goal that is reflective of what was previously our support note...but this must contain a clear list of what our “support and protective oversight” includes.

Iowa Association of Community Providers

IACP

Goals and Objectives (example)

Goal: *I want to remain safe and secure in my home.*

Objective: *Staff will support me in maintaining my overall wellness by providing protective oversight and supervision. I will remain safe and secure in my home throughout the next 3 months by utilizing the protective oversight and supervision services offered to me.*

- ***Interventions:***

1. *Staff will administer medications as prescribed per doctor's orders.*
2. *Staff will provide transportation as needed to meet basic needs because member has no driver's license and there are no public transportation systems available.*
3. *Staff will provide overnight supervision because Member has a tendency to be distressed more in the evenings and has a tendency to wander around outside with little knowledge or adherence to weather conditions.*
4. *Staff will support Johnny in establishing a daily routine that supports wellness because Johnny will isolate and avoid interactions with others due to his depression.*
5. *Etc...*

Iowa Association of Community Providers

IACP

Barriers

Barriers will be key to the "WHY" we are doing what we want to be doing. We need to describe why we are having to support them in the Goals we've identified as well as the need for protective oversight and supervision. This might include statements like:

IACP

Barriers

- *Johnny has never had anyone show him how to cook. He has been in various institutions his entire life and this is not a skill that he has been taught.*

- *Or Joan has very limited awareness of her medications and has never been taught what or how her medications work for her or how to take them. In addition her diagnosis of depression causes her to struggle with the ability to concentrate so this makes the risk of error higher. Currently the doctor is mandating she have support in her medication administration.*

Iowa Association of Community Providers

Barriers

- *Or.. Due to Sally's high level of anxiety she is not able to live alone without support. Historically when she was living without overnight support she would frequently contact the emergency rooms and/or of call 911 due to fears that occur when alone. She also has a high risk of performing self-harming activities when this anxiety escalates so for her safety overnight support and supervision is required.*

Iowa Association of Community Providers

IACP

Barriers

- Barriers NEED to reference anything that was identified as relevant in the client's RAI that we are planning to do w/ the Member as that ties the whole package together. So use that as resource to write your barriers. You could even say.. *According to the RAI, Sam has difficulty with...or rates low on*

- **We have to JUSTIFY what we are doing w/ the client.**

Iowa Association of Community Providers

IACP

Habilitation Documentation

Section Subtitle

Iowa Association of Community Providers

IACP

All Habilitation Documentation must:

- Revert back to the Service Plan's goals and objectives and interventions.
- Relate narrative to the mental health issue as much as possible. **Barriers** may help you with words to use and diagnosis to reference.

Iowa Association of Community Providers

IACP

All Habilitation Documentation must:

- Each progress note entry, for each Medicaid member, and for each date of service must include:
  - The date and amount of time services were delivered, including the beginning and ending time of service delivery.
  - The first and last name and title of provider staff actually rendering service, as well as that person's signature. (*Note: UHC is holding providers to the Hab provider manual which states (pg 50):The first and last name and title of provider staff actually rendering service, as well as that person's signature.)*

Iowa Association of Community Providers

IACP

All Habilitation Documentation must:

- Each progress note entry, for each Medicaid member, and for each date of service must include:
  - The place of service (i.e., location where service was actually rendered).
  - A description of the specific components of the Medicaid-payable habilitation service being provided **(using service description terminology from the covered services section of the Hab manual).**
  - The nature, extent, and number of units of the habilitation service that was rendered. The progress note must describe what specifically was done, and include the progress and barriers to achieving the goals and objectives as stated in the member's comprehensive service plan.
  - The name, dosage, and route of administration of any medication administered, when it is a part of the service.

Iowa Association of Community Providers

IACP

All Habilitation Documentation must:

- Include the identified Goal, Objective and Interventions/Teaching Procedures/Actions Step on the printed document.

Iowa Association of Community Providers

IACP

All Habilitation Documentation must:

- Note specific support type used either in interventions or directly in the notation.

- Support Type Examples- Home Based Hab:
  - **Adaptive Skills Development:** Ability to manage your home, personal care, money, telephone, getting around in community, staying safe and healthy, following schedules and routines, talking to others, solve problems, able to plan and organize.
  - **Assistance with Activities of Daily Living (ADL's):** eating, bathing, dressing, toileting, walking

Iowa Association of Community Providers

IACP

Example Con't:

- **Community Inclusion:** able to know and choose community activities/events. Not just be around something but to be active in something liked or valued.

Staff assisted Joan today in participating in a Community Inclusion activity of participating in her church's Harvest Festival….

- **Social and Leisure skill Development:** An opportunity to meet up with old friends and make new ones. Held in many different locations, offer a range of activities and events that bring people together in varied and active way.

Staff noted it was Lisa's birthday on Saturday and suggested she contact her twin sister (social and leisure skill development) to plan a party . . .

Iowa Association of Community Providers

IACP

All Habilitation Documentation must:

- **Include documentation of member's progress. Can't just be a single word that says "progressing" or "yes" Need to include what they did that showed progress.**
  - *Example: Logan made progress today by making his bed and being up and ready by 8am. Or*
  - *Staff explained all the steps to Logan on how to make scrambled eggs, then Logan showed progress on his cooking objective by making scrambled eggs for himself and his roommate with only a few reminders from staff on action steps.*

Iowa Association of Community Providers

IACP

All Habilitation Documentation must:

- Show implementation of the service plan – objectives need to be implemented as directed by the service plan.
- Support the number of direct support hours identified in the comprehensive plan
- Be specific to the person and the encounter – Cutting and Pasting... NEVER allowed. Don't do it.

Iowa Association of Community Providers

IACP

All Habilitation Documentation must:

- Be Completed on the day the service was provided. (if not indicate why note was late – Optum provider manual pg 60)
- Occur AFTER providing service.

Iowa Association of Community Providers

IACP

Home Based Habilitation

Tailored supports that assist with the acquisition, retention, or improvement of skills related to living in the community

- Adaptive skill development
- Assistance with activities of daily living
- Community inclusion
- Transportation
- Adult educational supports
- Social and leisure skill development
- Personal care
- Protective oversight and supervision

Iowa Association of Community Providers

IACP

Home Based Habilitation

Documentation Must Support The Tier - not just in time but in content...Documented interventions have to support the time billed.

Iowa Association of Community Providers

IACP

Day Habilitation

Foster the acquisition of skills, appropriate behavior, greater independence, and personal choice.

- Intellectual functioning
- Physical and emotional health and development
- Language and communication development;
- Cognitive functioning
- Socialization and community integration
- Functional skill development
- Behavior management
- Responsibility and self-direction
- Daily living activities
- Self-advocacy skills;
- Mobility

Iowa Association of Community Providers

IACP

Example of Functional Skill:

White shirts & Spaghetti don't mix unless…

Iowa Association of Community Providers

IACP

Day Habilitation

1. Lunch Breaks are billable ONLY if working on an identified goal at that time.

1. Day Hab does NOT include any Supervision and Protective Oversight. **Have to be working on a skill maintenance or acquisition.**

1. Does NOT include times someone leaves for appointments or meetings (including support team meetings).

Iowa Association of Community Providers

IACP

Pre-Voc

Intended to develop and teach general employability skills and includes Career Exploration

- the ability to communicate effectively with supervisors, coworkers and customers;
- an understanding of generally accepted community workplace conduct and dress;
- the ability to follow directions;
- the ability to attend to tasks;
- workplace problem-solving skills and strategies;
- general workplace safety and mobility training;
- the ability to navigate local transportation options;
- financial literacy skills;
- and skills related to obtaining employment.

Iowa Association of Community Providers

IACP

Iowa Association of Community Providers

What is a Good Note?

Ask yourself: **If I read this tomorrow or next week would I:**

1. Be able to see what I did as a staff to support the Member?
2. Be able to see how the Member responded to my support?
3. Be able to see if the Member is making progress?
4. Be able to see how I as staff supported the Mental health need

If the answer is YES to these questions you wrote a good note.

Iowa Association of Community Providers

IACP

Examples of not so good notes:

1) Staff processed with Member B her feelings, questions and concerns. Member B was open with staff. Member B made progress on this goal.
2) Member A told staff that she spent most of the day in her room not feeling well.
3) Member A was not out of her room for at least 10 hours today.
4) At 4:30 pm staff initiated Member to do his laundry and he went to his room. He started his laundry before going out to eat.
5) Staff knocked on his door as they arrived on shift and asked him if he had any laundry to start. Member stated yes but never started it on this staff shift. Member was not successful and staff will continue to encourage him to complete his laundry.
6) Staff asked Member if he was going to do his chore when his housemate did his and Member said not tonight and shut his door. Member was not successful.

Iowa Association of Community Providers

IACP

Examples of not so good notes:

7. Member arrived to the work floor and accepted her job assignment of labeling. Staff observed Member at the start and praised her for the precise way she placed the label on the spool. Member Continued to label during the morning hours doing an excellent job. Staff thanked Member C for her attention to detail when placing the label on the spool and Member C thanked staff for the compliment. Member C returned from the break on time and continued to work on labeling up until it was time for the lunch break.

7. Staff went outside and asked Member C if she would take a shower tonight before she goes to bed. Member C told staff she would take a shower tomorrow morning instead. Member C did not complete her shower goal tonight. Staff will continue to support Member C on her shower goal.

Iowa Association of Community Providers

IACP

Examples of better notes

Member A did not make progress on her objective of minimizing her isolating behaviors when feeling down as she stayed in her room the entire shift. However, to support Member A on reducing her isolating behaviors staff discussed with Member A from 1:30pm-2pm about her coping tools (social skill development). Staff encouraged Member A to pick some coping activity she could do to reduce her avoiding behaviors today. Staff gave Member A a copy of her coping plan to review. When Member A struggled to identify anything, staff suggested...A, B, or C. Member A listened politely chose to not do any activities reviewed. Staff checked in with Member A every hour of this shift to ensure Member A's safety and to encourage her to come out and be around others ensuring at least 5 minutes was spent with Member A modeling appropriate conversation and socialization skills each time.

Iowa Association of Community Providers

IACP

Example 2

Member A was not out of her room for at least 10 hours today. She stayed in her PJ's all day and appeared unkempt. This is a pattern that indicated Member A is struggling w/ her mental health wellness. During this shift staff attempted 4 times to engage Member A in her room(adaptive skill development). Staff reviewed things Member A might want to do. Staff discussed the importance of doing things despite feeling like not wanting to do something, as this can offset depression. Staff also reviewed her coping plan to work through ways that Member A may reduce her isolating behaviors. Member A responded by only nodding her head. She talked to no one outside of her room all day. Progress was not made today on this objective because Member A stayed isolating.

Iowa Association of Community Providers

IACP

Example 3

Member A made progress again today as noted by her being active in the following activities: X, Y, and Z. Staff took time to review with Member A what was different about today than other days when she stays isolated(adaptive skill development). Staff summarized the things Member A said to reinforce these ideas. Throughout the shift staff pointed out to Member A things she was doing very well at today. Member A and staff did a community inclusion activity of going out to the grocery store and buying special snacks for the group. While there staff modeled appropriate behaviors and communication skills to use. Throughout the shift,staff talked with Member A about how well she was doing user her coping skills. Member A was engaged and involved throughout the shift, responding to feedback and engaging w/ others.

Iowa Association of Community Providers

IACP

Pre-Voc Example

At work today, Staff supported Sally by teaching her to attend to task. She was distracted and having difficulty concentrating as evidenced by her inability to complete tasks without repetitious reminders. Staff reviewed things Sally could do to help stay focused such as doing deep breathing techniques to stay relaxed and doing self-talk activities saying “I can do this, I am a good worker.” Staff also provided support to Sally by breaking steps down, giving her more frequent encouragement and reminders and by checking back over her work to ensure things were completed as necessary. Sally responded to the reminders and extra support by saying thank you and by working hard to make corrections where needed. By the end of the shift, Sally had make progress as there were no behavioral outbreaks and she was able to finish her shift and tasks.

Iowa Association of Community Providers

IACP

TIPS

Iowa Association of Community Providers

- Review the information in the assessment to reference symptoms, diagnosis etc. Include this information in your service plans.
- Communicate with IHH Care Coordinator to assure all information is in their plan so services can be justified.
- Assure staff understand treatment plans.
- Use Common Intervention Terminology in documentation (see handout)

IACP

Common Intervention Terminology in Documentation

- Acknowledged attempts to…
- Actively listened to ct as…
- Addressed ct's concerns…
- Addressed worries/fears…
- Aided in developing insight…
- Allowed ct to ventilate…
- Amplified…
- Affirmed…
- Asked about…
- Assessed risk…
- Assessed for…
- Assigned task…
- Assisted ct in/with…
- Attempted to generalize…
- Built rapport by…
- Built trust through…
- Challenged beliefs/ thoughts
- Clarified/Sought clarification…
- Commended…
- Connect comments about…
- Confronted…
- Contracted for…
- Cued…
- Deescalated…
- Developed a contingency plan…
- Developed behavioral program…
- Developed positive affirmations…
- Discussed…
- Directed/Redirected…
- Educated…
- Elicited…
- Encouraged…
- Encouraged verbalization…
- Engaged ct in play…
- Empathically responded…
- Established boundaries…
- Established connections between…
- Examined benefits/ consequences…
- Explained…
- Explored…
- Explored self-defeating life patterns and beliefs
- Explored options…
- Evaluated…
- Facilitated…
- Focused on…
- Gave feedback…
- Guided…
- Helped ct develop…
- Helped ct to express anger constructively…
- Helped ct redefine…
- Highlighted consequences…
- Identified…
- Identified themes…
- Identified triggers…
- Increased awareness…
- Inquired about…
- Informed…
- Interpreted…
- Investigated…
- Led ct in practicing…
- Listed ct's…
- Modeled…
- Monitored…
- Normalized ct's feelings…
- Praised…
- Probed…
- Processed…
- Problem solved…
- Provided feedback…
- Provided a corrective social experience…
- Provided ct with unconditional positive regard…
- Questioned…
- Reassured…
- Redefined…
- Reflected…
- Reflected… (ND Play Therapy)
- Refocused…
- Reframed…
- Reinforced…
- Responded to…
- Restated…
- Reviewed…
- Reviewed limits…
- Recommended…
- Role played…
- Set limits…
- Summarized…
- Supported…
- Taught coping skill…
- Tracked… (ND PlayTherapy)
- Used directive comments to…
- Utilized desensitization…
- Utilized imagery/ visualization…
- Utilized assertiveness training.
- Utilized relaxation training…
- Utilized humor…
- Utilized empathic understanding…
- Utilized silence…
- Validated ct's point…
- Verbalized…
- Worked on behavioral program

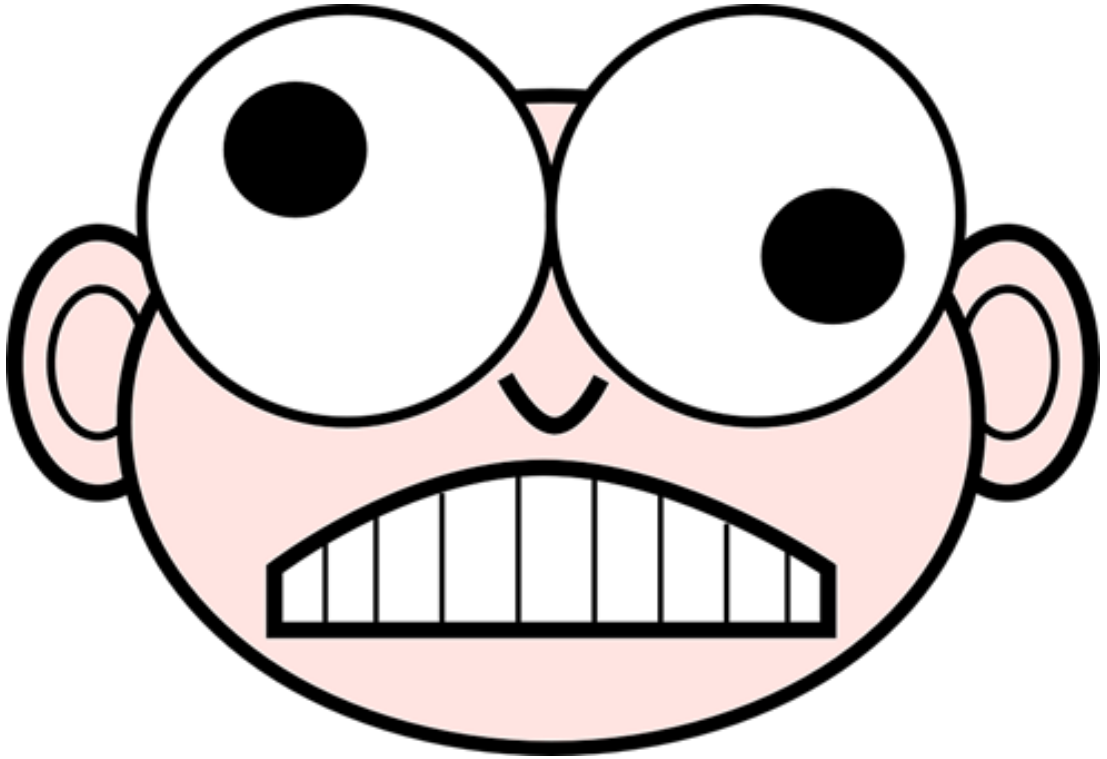
Iowa Association of Community Providers

IACP

Last Joke

What did 1 eye say to the other eye?

Between you and me something smells!!



Iowa Association of Community Providers

IACP

Iowa Association of Community Providers

IACP

Q&A: You Ask, We Answer

Fall 2017 Regional Training

Presenters: Gayla Harken & Brita Nelson

Iowa Association of Community Providers

IACP

Q: Anything new on ABLE accounts?

A: CMS issued guidance on September 7.

Of note,

- Medicaid state agencies are directed to disregard all funds in an ABLE account, including interest/earnings, in determining the resource eligibility of Medicaid applicants and beneficiaries who are subject to a resource test.

Iowa Association of Community Providers

IACP

ABLE cont…

- Interest/earnings of the funds in an ABLE account will be excluded with respect to countable income when determining eligibility for the Medicaid program.

http://www.ablenrc.org/news/center-medicare-and-medicaid-services-cms-releases-guidance-able-accounts

Iowa Association of Community Providers

IACP

Q: Has anyone received a final report from the Case Manager's residential setting assessments?

No. These have not been done yet. DHS is still in the process of gathering location information.

Iowa Association of Community Providers

IACP

Q: What about the non-residential reviews. How are those going?

As of September 1, 2017, 63 of 153 non residential providers have been assessed.

CAPs have been required from 32 providers in 88 different focus areas.

Iowa Association of Community Providers

IACP

Q: Is Iowa still using the March 2019 date or are they going to extend based on the federal extension?

According to Iowa's STP, all HCBS providers are required to be in compliance with CMS final setting rules by March 17, 2022. Settings found to be out of compliance after March 17, 2022, may have payment withheld until compliance is demonstrated.

Iowa Association of Community Providers

IACP

Settings Cont...

A: The CMS deadline of March 2022 will allow a bit of additional time for CAPs to be accomplished. The HCBS program will use its existing process for follow through with the implementation of a corrective action. No action plan or no progress on a plan could result in disenrollment from HCBS provision. The HCBS program will work with a provider to get an acceptable CAP submitted, but once submitted and approved, the IME will expect that actions be taken to implement the needed changes.

IACP

Q: Regarding the new Emergency Preparedness rule: The rule, I feel, needs addressed more in detail. CARF has had these standards in place but there is some clear differences that appear to conflict.

A: We hear you.

First step: Do you know who your local emergency __ is and where they are at with any local and regional emergency planning?

Iowa Association of Community Providers

IACP is working on securing a national expert on these rules to help train providers and other stakeholders on the rule implementation. Currently, Iowa is awaiting further training and clarification from federal bodies.

IACP

Q: Update on the SIS and tiered rates. Do we know anything more about the tiers?

A: We don't know anything different at this time. DHS and MCOs are currently working on funding agreements, and we do not believe tiers will come out until after that time. What we believe we do know:

Tiers for SCL for ID Waiver are coming. According to IME provider training they will be phased in and finalized July 1, 2019.
The tiers will be based on SIS scores.

Iowa Association of Community Providers

IACP

Q: Where are things at with the federal managed care rules?

A: They are in play.

November 2016 FAQ located here: https://www.medicaid.gov/federal-policy-guidance/downloads/faq-11-10-2016.pdf

Iowa Association of Community Providers

IACP

Q: Is there any news on the inconsistency between Telligen assessors and MCO assessors in completing the SIS?

A: IME acknowledges that providers must have a copy of the SIS in order to effectively plan for appropriate services. They have stressed this to the MCOs.

After contacting the care coordinator, and/or their supervisor, you could contact your HCBS specialist for assistance.

Iowa Association of Community Providers

IACP

Q: What is the actual requirement for when we should be getting authorizations?

A: By contract, the MCOs are required to have them back to the provider in no longer that 7 business day. If it is an emergency, it is 3 days.

Iowa Association of Community Providers

Q: Can you please give us information and updates on EVV?

A: Sure!

These federal requirements will be implemented in Iowa sometime in 2018.

IL:

https://dhs.iowa.gov/sites/default/files/1805-MC-FFS_ElectronicVisitVerification.pdf

Iowa is starting with CDAC – individual and agency.

Iowa Association of Community Providers

What HCBS services will require EVV ?

IACP

Iowa Association of Community Providers

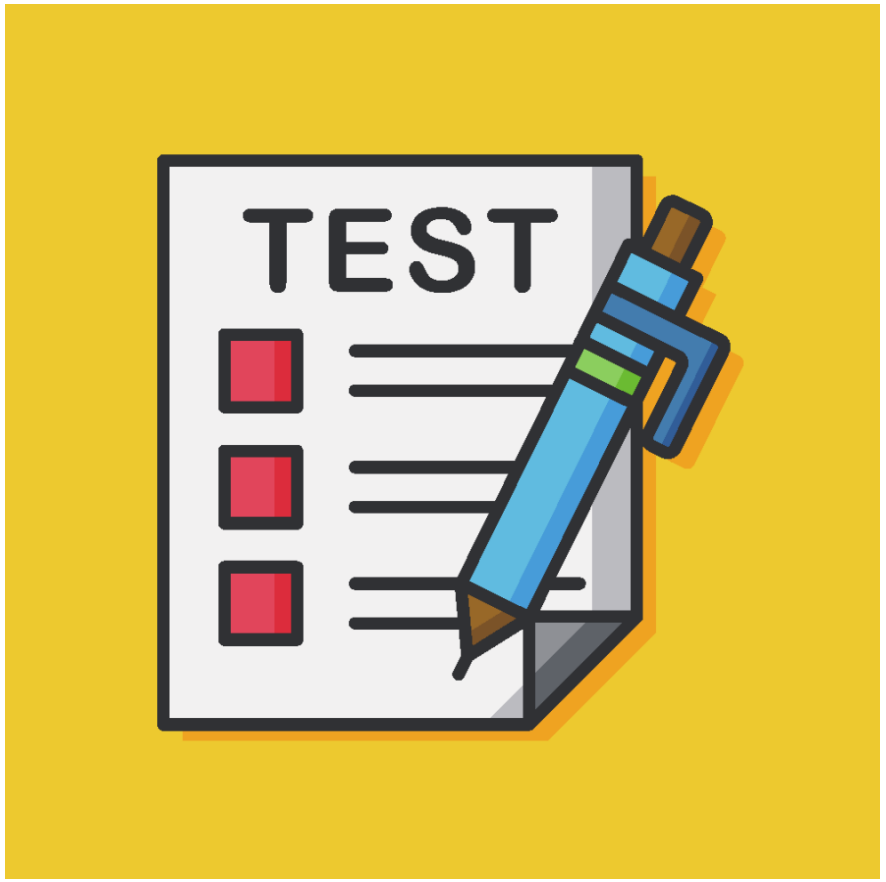
What is the status of the Financial and Statistical Report (FSR) going forward?

- There continues to be conversation with the Department and Legislature regarding this. At this time, the Department is acting on an AG opinion that this change will start next FY which means things stay the same for this year. We are continuing to advocate for this to be re-evaluated.

IACP

Q: The CESP exam that is required for Individual Supported Employment requires 12hrs of ongoing training to maintain certification. The state requirement of ongoing education is 4 hrs. Should we be requiring 12 hours of yearly training for these staff?

A: Yes, if you want to spread out the training costs. However, this is not required by the state (you could do it all in one year if you felt so compelled.)



Iowa Association of Community Providers

IACP

Q: What are agencies using for the ongoing 4 hours training requirement for job coaches? The monthly IVRS webinars are not typically related to job coaching, nor are the trainings available on Relias. Can ongoing training requirements be met through training that is developed internally by an agency?

- DirectCourse has lots of lessons
  - We've added content from the ICIE Employment Community of Practice
- Relias – Does have some employment lessons.
- Any training that is specific to the actual provision of the service

Iowa Association of Community Providers

IACP

Q: Our question is regarding NEMT. Are Home-Based Hab folks indeed in NEMT? It is not outlined in Iowa Code for them, but the NEMT section references HCBS/SCL activity.

A: Habilitation does not have SCL as an option, so be careful when referencing rules related to SCL.
NEMT is available to any member with full Medicaid.
https://dhs.iowa.gov/ime/members/medicaid-a-to-z/NEMT

Iowa Association of Community Providers

Q: Case managers are supporting the provider by writing into their plan that we can take the member to/from all appointments for safety concerns due to the member's diagnosis. Is this ok to do in rare cases? (The one example I have is a Hab member.)

A: Well……

I would question how any diagnosis prevents anything as a general rule. If it was based on assessed need and IDT plan recommendations, you'd have a better shot. Transportation is included in home-based habilitation.

http://dhs.iowa.gov/sites/default/files/Habilitation.pdf

Iowa Association of Community Providers

IACP

Q: What is the time limit on MCO's recoupment on claims?

Ch. 79.3 (3) indicates that records must be retained minimally for 5 years. Recoupment can go back that far for overpayment.

IME stated that if fraud is suspected, there is no limit on what can be reviewed.

IACP

Q: What is happening with HF653?

A: This rule was cost saving measure that will mean that if eligibility paperwork is turned in late, there will be NO COVERAGE between the the time the paperwork was due and the time it was turned in.

INSERT IMAGE OF NIGHTMARE

Iowa Association of Community Providers

IACP

HF653 Cont

This rule passed last legislative session. It will be published in the IA Administrative Bulletin on 10/11 for 35 day public comment period. This will start on 10/1/2017 and any reversal, based on comment, will be applied retroactively.

If you believe this will affect your ability to provide quality, continuous services, COMMENT!

Iowa Association of Community Providers

IACP

Q: Social Determinants of Health – What does this mean?

- A: Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship, and age that **affect** a wide range of health, **functioning**, and quality-of-life outcomes and risks.
- The QSDA outcomes related to employment, access to healthcare, housing stability, and community inclusion are examples of these.
- These are factors that can directly influence HEDIS measures

Iowa Association of Community Providers

IACP

What are HEDIS Measures?

- The Healthcare Effectiveness Data and Information Set (**HEDIS**) is a tool used by more than 90 percent of America's health plans to **measure** performance on important dimensions of care and service. Altogether, **HEDIS** consists of 81 **measures** across 5 domains of care:

  - Effectiveness of care
  - Access/availability of care
  - Experience of Care
  - Utilization and Relative Resource Use
  - Health plan descriptive information

Iowa Association of Community Providers

Q: What is the end of the Any-Willing-Provider period for LTSS? I've heard December 31 and also March 31. Which is it?

A: It is March 31 for those providers who were enrolled as of 4/1/2016. This provision does NOT apply to NEW (after 4/1/2016) LTSS providers.

IACP

Q: Any news on the DOL Overtime Rule?

A: As of September 1, it is truly dead (or, technically, invalid). The rule was overturned. A federal court in Texas issued a ruling on the case that originally led to the preliminary injunction in November against the Obama-era Department of Labor (DOL) Overtime Rule. The Court held yesterday that the Final Rule from 2016 is invalid because DOL overstepped its authority and focused too much on salaries rather than duties. Read more about the judgment **here** and the full decision **here**.

Iowa Association of Community Providers

IACP

Q: Please tell us about the new personal degradation rules and what it means for us for mandatory reporter training.

From Karin Ford at IDPH:

- Embed the rule change in your presently approved curriculum and/or hand out the law language
- Verify that it was included and discussed as part of the training.

Iowa Association of Community Providers

IACP

Personal Degradation Continued…

- Curricula does not need to be re-approved as this is an addition, more of a housekeeping issue, that providers just need to add to their already approved program.
- https://idph.iowa.gov/Portals/1/userfiles/101/files/Personal Degradation.pdf

Iowa Association of Community Providers

IACP

Q: Are host home programs different than traditional HCBS daily services?

A: No and Yes.

They are a way to provide daily SCL services.

But:
There are specific considerations (legal and other) related to matching, independent contractor contracts, DOL, background checks for others in the home, back up support, etc.

IACP

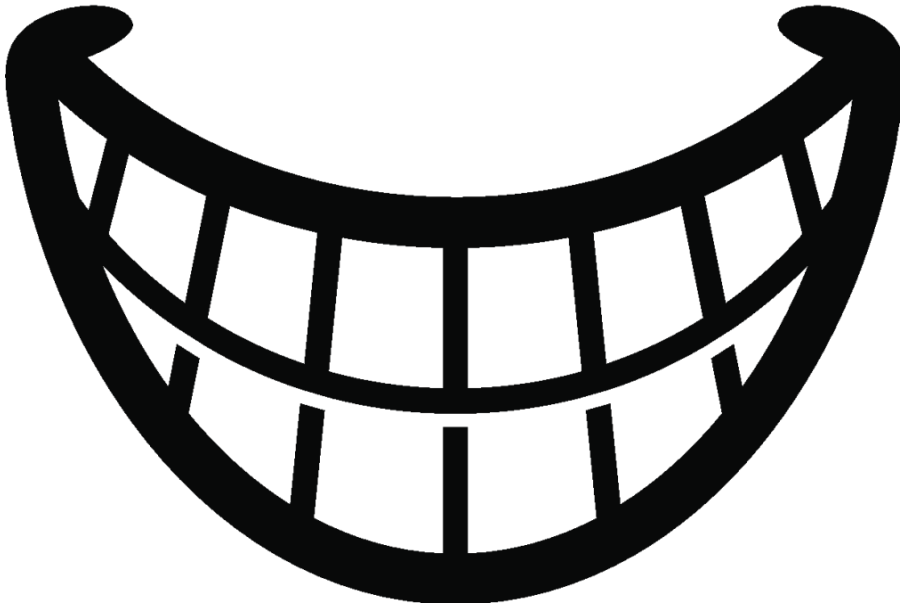
Q: I would like to learn more about Host Families

A: You are in luck! We hosted a webinar in August about one agency's program (Mosaic). They have a wealth of experience in the area. The webinar is recorded and posted on the IACP website: www.iowaproviders.org

Iowa Association of Community Providers

Q: What's happening with the regional outcomes project?

- Glad you asked……



IACP

Statewide Data FY17 Caveats/Suggestions

- Unverified Data
  - Providers trained in Oct. 2015
  - Providers not provided with report information not available until close to FY16 year end
  - No file reviews to validate “say/do” ratio
- Number Served/Participating Agencies
  - Results reflected if 10 person minimum was met
  - Unclear if data is non-Medicaid, Medicaid, or a mix of individuals
  - Unclear on how employment numbers were calculated

IACP

Statewide Data FY17 Caveats/Suggestions

- Setting Targets
  - First year is a baseline year to establish a system average
  - Suggest targets set prior to the fiscal year with provider input
  - Suggest system averages are in the “meets expectation” range
    - Except Somatic Care – always expect 100% to exceed expectation
    - Except when aligning with strategic priorities
- Outcome Indicators
  - Outcome indicators reflect system values
  - The fewer the outcomes, the greater the impact of each outcome
  - If only a few outcome indicators, recommend setting wider target areas

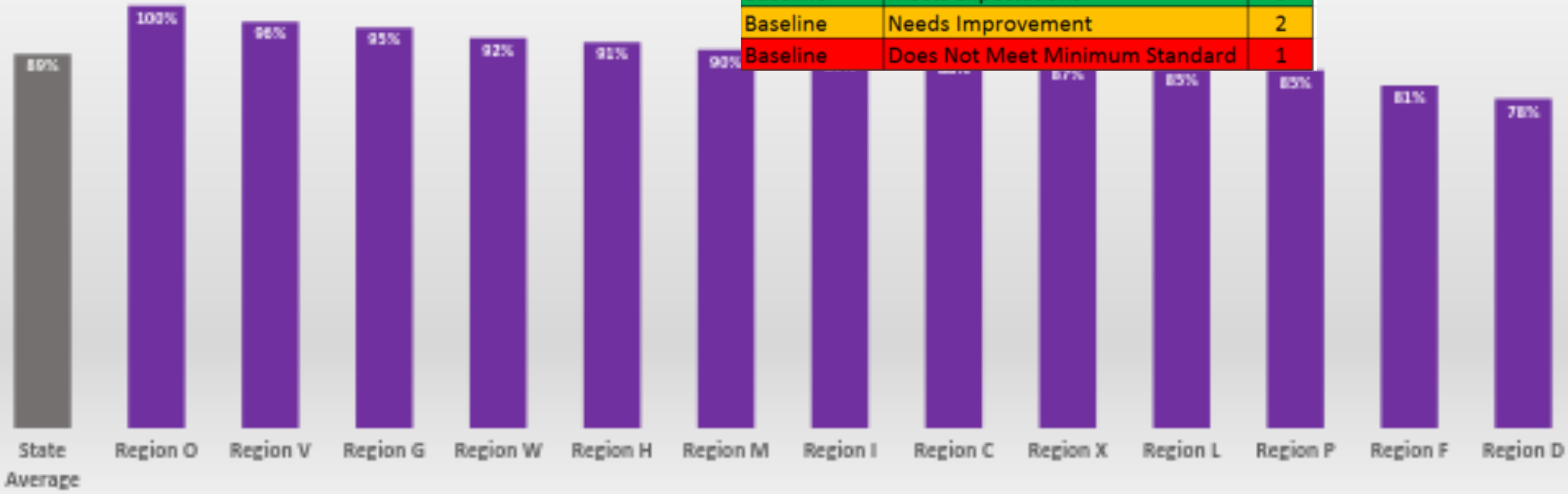
Iowa Association of Community Providers

IACP

How Did We Do? – Somatic Care

Area: Somatic Care
Description: The percentage of individuals having involvement with a physical health care physician.
Comment: Scored annually.

Goal	Rating	Score
Baseline	Exceeds Expectations	4
Baseline	Meets Expectations	3
Baseline	Needs Improvement	2
Baseline	Does Not Meet Minimum Standard	1



IACP

How Did We Do? – Community Living

Area: Community Living
Description: The percentage of individuals living in safe, affordable, accessible, and acceptable living environments annually.

Goal	Rating	Score
Baseline	Exceeds Expectations	4
Baseline	Meets Expectations	3
Baseline	Needs Improvement	2
Baseline	Does Not Meet Minimum Standard	1

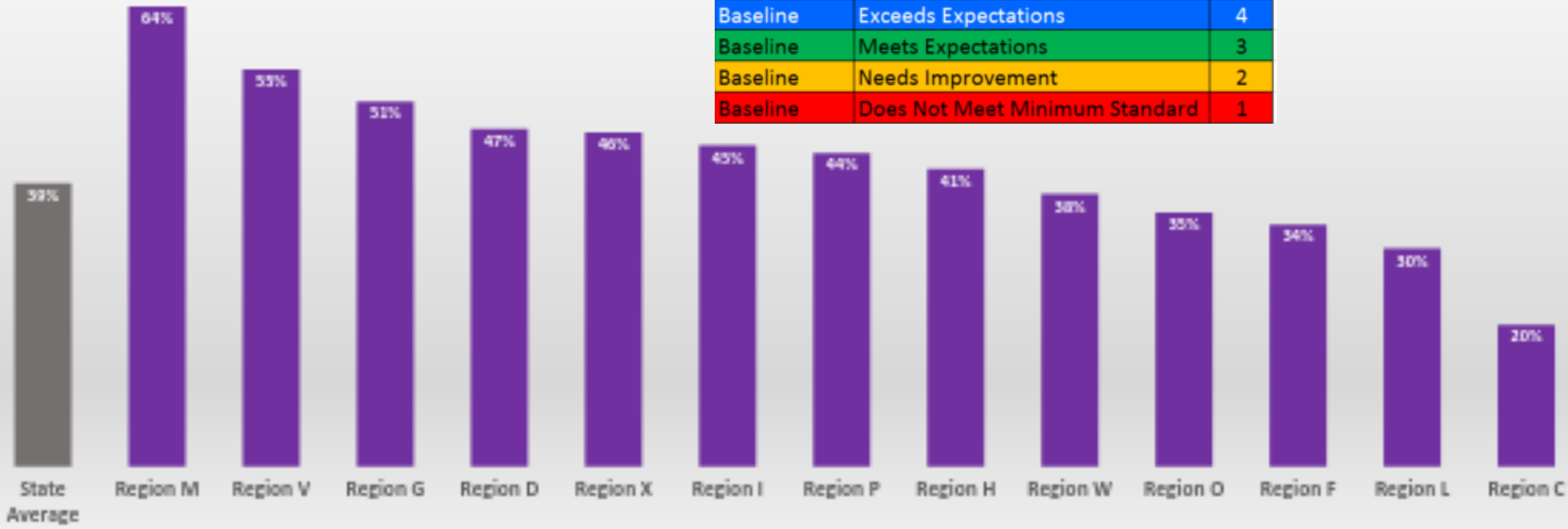
IACP

How Did We Do? – Community Employment

Area: Community Employment

Description: The percentage of individuals working 5 or more hours a week at or above minimum wage.

Goal	Rating	Score
Baseline	Exceeds Expectations	4
Baseline	Meets Expectations	3
Baseline	Needs Improvement	2
Baseline	Does Not Meet Minimum Standard	1



IACP

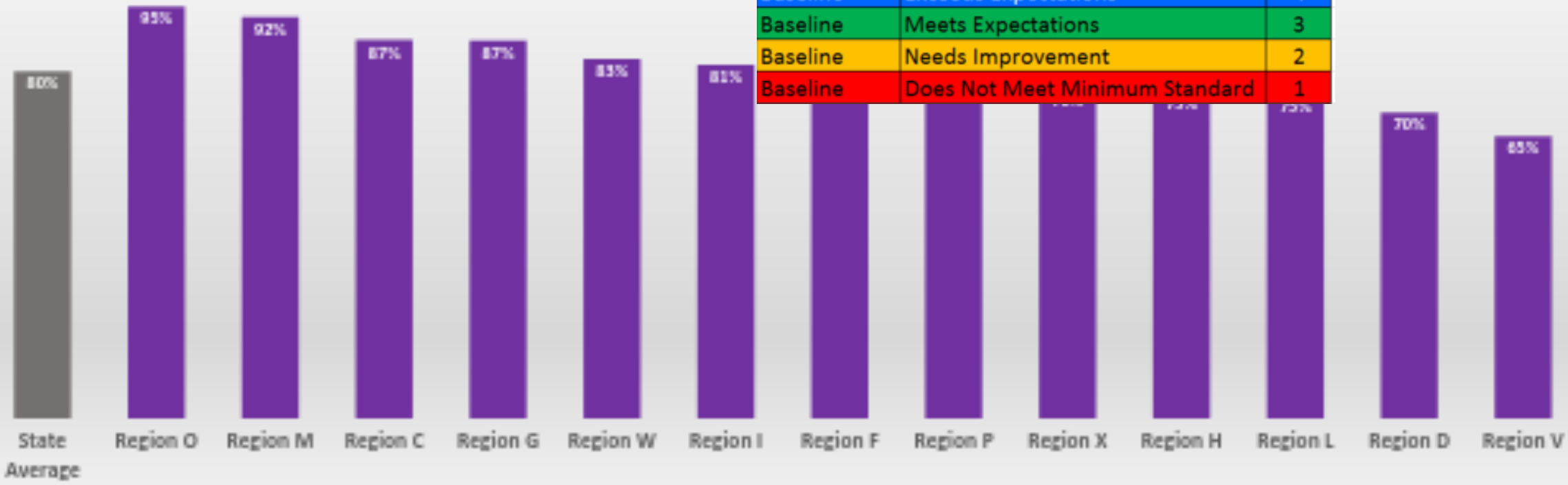
How Did We Do? – Community Integration

Area: Community Integration

Description: The percentage of individuals accessing one category area (spiritual, civic, cultural) and participating at least 3 times.

Comment: Scored annually.

Goal	Rating	Score
Baseline	Exceeds Expectations	4
Baseline	Meets Expectations	3
Baseline	Needs Improvement	2
Baseline	Does Not Meet Minimum Standard	1



Outcomes Project: Recommendation

Iowa Association of Community Providers

Create a joint Region CEO/QSDA/IACP/DHS/MCO work group to identify common social determinant/quality of life outcomes for value-based contracting.

Technology

- Telehealth – It's not just for doctors and psychiatrists anymore!
- Medical Alert Buttons with a data plan?
- Can also loop with:
  - Scale
  - Blood Pressure Cuff
  - Glucose Monitor
  - Pulse ox (reads oxygen level in blood)

- IACP's TA team will be hosting webinars about technology options over the winter.

Iowa Association of Community Providers

IACP

Upcoming Trainings

- October 17 – Documentation for HCBS Services
- October 19 – HCBS Employment Summit
- October 31 – Disability Rights Iowa – Grievances and Appeals
- November 2 – Derrick Dufresne
    - Person Centered Planning--The Impact of Loneliness

To view the IACP calendar of events and to register go to www.iowaproviders.org and click on View Full Calendar under Upcoming Events

Iowa Association of Community Providers

IACP

Upcoming Trainings

- October 17 – Documentation for HCBS Services
- October 19 – HCBS Employment Summit
- October 31 – Disability Rights Iowa – Grievances and Appeals
- November 2 – Derrick Dufresne
    - Person Centered Planning--The Impact of Loneliness

To view the IACP calendar of events and to register go to www.iowaproviders.org and click on View Full Calendar under Upcoming Events

Iowa Association of Community Providers

IACP

Other Questions?

Iowa Association of Community Providers