

Questions and Answers

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Why?

We do the Q&A Session to give you the opportunity to get your questions answered! A survey was sent out beginning late February 2016.

If you are not on the TA distribution list and would like to be, please email bnelson@iowaproviders.org

Outcomes Project and Evidence Based Practices

Q: What is up with the Outcomes Project?

A: There are several overview documents linked here:

http://www.iowaproviders.org/trainings/technical_assistance.html

Q: Is the Outcomes Project still voluntary?

A: It is still voluntary, though there is discussion from regions of making it mandatory.

Q: I've seen some things recently about Evidence Based Practice. Can you bring us up to speed on what that is about?

Regions are charged with implementing evidence based practices. They are to collect data on use of EBPs throughout Iowa.

Q: Is there training on EBPs that you'd recommend?

A: Glad you asked! May 17 there is a training in Ames. It will give an overview of EBP, how to practice to fidelity, and applications for populations for whom EBPs are not normed (but are best practice).

Registration:

Go to <http://www.iowaproviders.org>

Click "Register for a Training"

Q: CCBHC. What's up with that?

A: Certified Community Behavioral Health Centers. They don't currently exist, but we would like them to. They are an outcropping of the affordable care act and efforts to coordinate and collaborate for effective services.

Iowa won a planning grant to attempt to be one of 8 states that will be able to implement CCBHC.

MANAGED CARE QUESTIONS

Q: Can you please remind me how to check eligibility and the assigned MCO?

A: We think an informational letter that came out 3.31.2016 will be most helpful to you.

Eligibility and Verification Information System (ELVS) and Checking Eligibility with the MCOs

IL 1650 - MC

<https://secureapp.dhs.state.ia.us/IMPA/Information/ViewDocument.aspx?viewdocument=59538445-5f53-4c31-9809-06f543fb773d>

Q: Can you please remind me how to check eligibility and the assigned MCO?

A: Website link with EDISS and ELVS info:

<http://dhs.iowa.gov/ime/providers/tools-trainings-and-services/provider-tools>

Q: How do we contact the MCOs?

AmeriGroup Iowa, Inc.

Provider services: **1-800-454-3730**

Member Services: **1-800-600-4441**

AmeriHealth Caritas Iowa, Inc.

Provider Services: **1-844-411-0579**

Member Services: **1-855-332-2440**

UnitedHealthcare of the River Valley, Inc.

Provider Services: **1-888-650-3462**

Member Services: **1-800-464-9484**

Q: What are the MCO contacts? Are there local contact maps available?

Amerigroup Iowa

Medical Consultant Regions Map:

[http://www.iowaproviders.org/BB/AmeriGroup Medical Consultant regions map.pdf](http://www.iowaproviders.org/BB/AmeriGroup%20Medical%20Consultant%20regions%20map.pdf)

LTSS Consultant Regions Map:

[http://www.iowaproviders.org/BB/AmeriGroup LTSS Consultant regions map.pdf](http://www.iowaproviders.org/BB/AmeriGroup%20LTSS%20Consultant%20regions%20map.pdf)

Behavioral Health Consultant Regions Map:

[http://www.iowaproviders.org/BB/AmeriGroup BH Consultant regions map.pdf](http://www.iowaproviders.org/BB/AmeriGroup%20BH%20Consultant%20regions%20map.pdf)

Q: What are the MCO contacts? Are there local contact maps available?

AmeriHealth Caritas

Territory Map:

[http://www.iowaproviders.org/BB/ACIA-1522-209 Territory Map_v15.pdf](http://www.iowaproviders.org/BB/ACIA-1522-209_Territory_Map_v15.pdf)

Q: Who are the MCO contacts?

Are there local contact maps available?

UnitedHealthcare

Provider Advocate Map:

http://www.iowaproviders.org/BB/UHC_Provider_Advocate_Map_v2.pdf

Additional Information from United Healthcare:

Online Training Resources:

http://www.iowaproviders.org/BB/UHC_UHCOnline_Training_Resources_v1.pdf

Electronic Payments & Statements:

http://www.iowaproviders.org/BB/UHC_Electronic_Payments_Statements_v2.pdf

Provider Quick Reference Guide:

http://www.iowaproviders.org/BB/UHC_Provider_Quick_Reference_Guide_v2.pdf

Provider Manual Links

<https://dhs.iowa.gov/ime/about/initiatives/MedicaidModernization/MCO-materials>

United HealthCare Behavioral Health Optum
Provider Manual (not linked on DHS site):

<https://www.providerexpress.com/content/ope-provexpr/us/en/clinical-resources/guidelines-policies/locg/iaLOCG.html>

Add chart of covered services

A comparison chart can be found here:

https://dhs.iowa.gov/sites/default/files/Benefit_Comparison_Final_March2016.pdf

VALUE ADDED SERVICES FROM MCOs

This is a comparison chart for value-added services:

<https://dhs.iowa.gov/sites/default/files/ValueAddedServicesComparisonHighlights.pdf>

These are services not offered through Medicaid in the past, but additional things offered by each MCO.

Q: Is there an indication of the outcomes measurements that the MCOs will require?

A: Not yet. At a meeting in February 2016, discussion amongst the company representatives indicated that this will be an area of greater focus after full transition has occurred. MCOs are responsible to meet HEDISS measures, and we understand they will transition to collecting data around quality of life measures in the future.

Q: Is there a crosswalk of MCO requirements/IAC anywhere?

A: When we work through the details in rules, we hope to be better able to assist with this process. Check out our training from October 2015. We highly encourage you to take the format provided there and make your own crosswalk based on your agency services, policies and practices.

http://www.iowaproviders.org/trainings/technical_assistance2.html

Q: What services are covered by the MCOs?

You can find a listing of what services are covered by IME and the MCOs here

[http://dhs.iowa.gov/sites/default/files/Benefit
Comparison_Final_March2016.pdf](http://dhs.iowa.gov/sites/default/files/Benefit_Comparison_Final_March2016.pdf)

Q: How are the HCBS services changing due to the MCOs?

A: Other than the obvious payor changes, the member may see more frequent review of their service plans, documents that look different, have different assessments completed, and different processes for acquiring rides.

Q: How will provider waiting lists be handled by MCOs?

A: Waiting lists should be discussed with the care coordinators of the MCOs.

Q: How will referrals be handled by MCOs?

If an agency does not have capacity to serve a person due to agency skill level, staff, etc the MCO cannot “force” service delivery. However, the MCO will be a large referral source, so this will become an issue of agency viability.

Q: Can an MCO force people to live together or force me to take a referral?

A: MCOs will not make people live together and you can accept or refuse a referral.

Q: How is HCBS going to be working with the MCOs to insure they apply the waivers correctly?

A: Oversight is a tricky thing. There is new division in DHS that is specifically assigned to oversee Medicaid services administered by MCOs. It is the responsibility of that department. There are some changes we expect to see in upcoming rules in 441. We believe HCBS specialists will continue to do compliance certification as a way of monitoring services.

Q: Please talk about oversight to the system.

A: The Legislature is defining what will be included in oversight to the MCOs. In addition, the state is charged with oversight of implementation and the MCOs will be reporting a variety of information.

There will be a program manager for each of the three MCOs under the new organizational structure. New Table of organization is on the website [here](#).

Q: Please talk about oversight to the system

[Health Link Contracting requirements](#)

[Weekly Dashboard Prototype PDF](#)

[MCO Claims Processing Compliance Review Chart](#)

[Benefit Comparison Final March 2016](#)

[IA Health Link_Reporting Manual Matrix](#)

Q: Please talk about oversight to the system

There are two designated state Ombudsmen assigned to Managed Care

Kelsey Zantingh Kelsey.zantingh@iowa.gov

Kelli Todd kelli.todd@iowa.gov

There are links to their info in the resources section at the end of the presentation.

Q: What can we expect at the time of accreditation renewal? Do we anticipate a continuation of the annual Self-Assessments?

Self Assessments will continue and IME will continue to do accreditation renewals. The rules regarding accreditation practice have not changed.

HCBS is the single entity to do data gathering and analysis.

Q: Will the MCOs do their own site visits?

A: MCOs have all stated that they will do site visits but it is unclear as to frequency

Q: Will Medicaid of Iowa be performing on-site audits?

A: Audits will continue as they have.

Q: With the MCOs taking over when do you think the tiers for ID & BI will change or go into affect?

A: IME is working on it and we understand we'll be notified when it is closer.

Q: With the changes in Medicaid to Managed Care, are the 3 MCOs going to provide the same services as people currently receive?

A: The same types of services will be provided. The question really is whether or not the same providers will be available to provide those.

An MCO Comparison Chart can be found here:
<https://dhs.iowa.gov/sites/default/files/ValueAddedServicesComparisonHighlights.pdf>

Q: How do I report major incidents to the MCO?

A: HCBS Services:

The form:

<https://dhs.iowa.gov/sites/default/files/470-4698.pdf>

[IL 1643-MC](#)

Non-HCBS Services: Currently being clarified.

Q: Can you give us the information on transportation under managed care?

A: There was initially a good deal of confusion around transportation that we hope has been worked out by the date of this training. What we know:

Q: Can you give us the information on transportation under managed care?

If you provided transportation as a bundled service in March, nothing should change with that in April.

NEMT goes through the individual brokers.

Waiver Transportation scheduling varies by broker.

Reference: [IL 1631-MC](#)

Q: Can you give us the information on transportation under managed care?

Each of the Managed Care Organizations (MCOs) has selected a transportation vendor. Members may contact their assigned MCO's non-emergency medical transportation (NEMT) broker at the numbers below to schedule their NEMT services:

Amerigroup Iowa Inc.

Logisiticare

1-844-544-1389

AmeriHealth Caritas, Iowa Inc.

Access2Care

1-855-346-9760

UnitedHealthcare Plan of the River Valley, Inc.

MTM

Employment and Day Services

Q: What is the future of Day Habilitation with the employment first initiative?



A: The state is moving forward with the new employment standards as it applies to all waivers. This, however, does not seem to “push out” day habilitation services. They are a continued part of the spectrum of services available.

IACP TA Webinar Scheduled April 27, 2016 @ 2pm

Q: What specific requirements do day habilitation providers need to meet to continue to receive funding for their programs?

A: HCBS Settings Standards and meeting the scope of service are of the utmost importance.

We covered some of this in the settings presentation.

Reference: [Exploratory Questions](#)

Q: What is up with the employment rules that were supposed to go into effect last December?

The rules have been adopted and filed.

They can be found here:

<https://www.legis.iowa.gov/docs/aco/arc/2471C.pdf>

Q: What is up with the employment rules that were supposed to go into effect last December?

These amendments implement the changes in employment service definitions as provided by the Centers for Medicaid and Medicare Services (CMS) in its September 16, 2011, Informational Bulletin and in the CMS 2015 Technical Guide.

These amendments also change the provider qualifications, scope of services, duration, limitation and reimbursement methodologies for the home- and community-based services (HCBS) prevocational and supported employment services within the habilitation services program and the intellectual disability (ID) and brain injury (BI) waivers. [ARC 2471C](#)

Q: Regarding the employment rules: I heard the limit for pre-voc was 90 days for current members after each person's annual meeting after the rules are effective. The way the rules read, the 90 days starts to be counted on the effective date of the rules, i.e. May 1. Which is it?

These rules go into effect May 4. The timeline from Pre-Voc is:

(2) Time limitation for members enrolled in prevocational services. For members enrolled in prevocational services on or before May 4, 2016, participation in these services is limited to 90 business days beyond the completion of the career exploration activity including the development of the career plan described in subparagraph 78.27(9)"a"(1). This time limit can be extended as stated in paragraphs 78.27(9)"e"(1)"1" through "6." If the criteria in paragraphs 78.27(9)"e"(1)"1" through "6" do not apply, the member will not be reauthorized to continue prevocational services.

The criteria referenced are listed on the next slide. We hope to get greater clarity on this topic prior to our April 27 webinar.

e. Limitations.

(1) Time limitation for members starting prevocational services. For members starting prevocational services after May 4, 2016, participation in these services is limited to 24 calendar months. This time limit can be extended to continue beyond 24 months if one or more of the following conditions apply:

1. The member who is in prevocational services is also working in either individual or small-group community employment for at least the number of hours per week desired by the member, as identified in the member's current service plan; or
2. The member who is in prevocational services is also working in either individual or small-group community employment for less than the number of hours per week the member desires, as identified in the member's current service plan, but the member has services documented in the member's current service plan, or through another identifiable funding source (e.g., Iowa vocational rehabilitation services (IVRS)), to increase the number of hours the member is working in either individual or small-group community employment; or
3. The member is actively engaged in seeking individual or small-group community employment or individual self-employment, and services for this are included in the member's current service plan or services funded through another identifiable funding source (e.g., IVRS) are documented in the member's service plan; or
4. The member has requested supported employment services from Medicaid and IVRS in the past 24 months, and the member's request has been denied or the member has been placed on a waiting list by both Medicaid and IVRS; or
5. The member has been receiving individual supported employment services (or comparable services available through IVRS) for at least 18 months without obtaining individual or small-group community employment or individual self-employment; or
6. The member is participating in career exploration activities as described in subparagraph 78.27(9)"a"(1).

Q: With individual care plans I have heard they will be meeting every 3 months instead of yearly. Is this so and will a formal meeting need to be held with all team members?

A: Services may need to be reviewed on a quarterly basis. (This is already the case for some parts of some services - Hab rights restrictions, for example.) This does not, however, mean quarterly meetings are required.

Q: Is there a firm date from either the state or feds on when vocational services will no longer be funded?

A: To our knowledge, this is not a thing. Employment First has been gaining ground nationally and we do not anticipate reduction nor elimination of funding for those services. We understand some regions are reducing their funding of segregated vocational services, though this is not a state nor federal mandate.

Q: How have agencies begun to transition from facility based employment to community based employment? Once the MCO transition takes place, I would like to know how others are handling this and how it is going.

A: This really depends on the organization.

Resources:

APSE

Employment First Community of Practice

Q: WIOA - How is it affecting Iowa Providers?

A: IVRS did a webinar 3.31.16 that has been recorded.

<http://www.ivrs.iowa.gov/partners/CRP/Section%20511%20Meeting%20on%20August%2031%202016.wmv>

Section 511 FAQ:

http://www.ivrs.iowa.gov/Transition/FAQ_Final_Letterhead_Feb2016.pdf

Section 511 Guidance Doc:

<https://drive.google.com/drive/u/0/folders/0Bw27V1V5FdX4TmZtMTJrTzF5Q3c>

Q: DOL Home Care Rule - What's the update?

A resource guide has been put out by the Department of Labor.

This guide is titled ***Paying Minimum Wage and Overtime to Home Care Workers: A Guide for Consumers and their Families to the Fair Labor Standards Act***

http://www.dol.gov/whd/homecare/homecare_guide.htm.

Q: FLSA Overtime Exemption: What's the update?

A: A nice summary document is located here:

<http://www.adp.com/tools-and-resources/adp-research-institute/insights/insight-item-detail.aspx?id=%7B947E52D2-BF60-4A10-82AC-609091C17D60%7D>

And the Rest

Q: Can you give us some resources and information on protecting people's assets (not forcing people to live in poverty) and benefits counseling?

A: What an important question!

Changes to special needs trusts occurred July 2015.

Benefits Training Resources

<http://www.ivrs.iowa.gov/TTW/2015TicketToWork.html>

Q: Can you give us some resources and information on protecting people's assets (not forcing people to live in poverty) and benefits counseling?

- *Special Needs Trusts
- *Pool Trusts
- *Able Act
- *Specific programs through Social Security

Q: Would like more information about the ABLE act that is slated to be available in Iowa 7-1-16

A: We are waiting on federal rules.

Q: How specific do service locations need to be referenced in case notes? Can it be Joe's home, or 123 Happy Hollow Lane NE? Does the exact location need to be written in the case note narrative each time a location is referenced, or can it be written out once in a key on the case note somewhere, and then write in general, Fareway, or Joe's home in the case note narrative?

A: Auditors have told us previously that you need to be able to trace it to a specific tract of land. How you make that clear in the documentation is up to you. However, in our experience, 'keys' are tricky, because if just one location is not updated, you risk payback.

Q: What license or certification is required to dispense meds and how can you become certified in med dispensement?

Dispensing is done by pharmacies.

Administering is different. For HCBS services, you must follow chapter 63 for storage of Schedule II medications. Other than that, there are no rules. If you are administering medications, you may want to consider formal training such as medication management.

Medication administration

Assess your risk. There were proposed rules this year under DIA in relation facilities. The proposed rules are being rewritten based on public comments. In addition many insurance carriers have stipulations for medication management certifications.

Q: When could we anticipate more slots opening up for CMH and ID waiver?

A: With the ID waiver, look at on a monthly basis to see when might be able to issue more slots. There is a monthly slot document on the DHS website [here](#). There have been CMH slots opened.

It is important to note that waiver slots and eligibility will continue to be determined by DHS/IME. Slots do not “belong” to the MCOs.

Q: Is there any update with HIPAA for 2016 that agencies should be aware of?

A: No, not that we are aware of.

Q: Do you have information on substitute decision making? We are interested in resources that could be shared with both staff and families.

The Office of Substitute Decision maker is awesome!

Sherry McLeran

Tyler Eason

Q: Will individuals under the HIPP program still use TMS for NEMT?

A: That is our understanding. The state is still contracting with TMS.

Upcoming Training & Registration Links

April 21, 2016 - OSDM Webinar - Powers of Attorney

April 27, 2016 - Webinar on New Employment Rules

April 28, 2016 - DirectCourse Admin Training

May 4-5, 2016 - IACP Annual Convention!

June/July 2016 - OSDM -

Upcoming Training & Registration Links

April 21, 2016 - Webinar - Office of Substitute Decision Making - Powers of Attorney. 10AM. Registration [Link](#):

<https://attendee.gotowebinar.com/register/5208798168293364226>

April 27, 2016 - Webinar - IACP and State Leaders Review Employment Rule Changes. 2PM. Registration [Link](#) :

<https://attendee.gotowebinar.com/register/558566574270312708>

April 28, 2016 - DirectCourse Admin Training Workshop - Stoney Creek Inn, Johnston IA. Contact Brita or Megan to register.

May 4-5, 2016 - IACP Annual Convention and Trade Show. Registration [Here](#)

May 17, 2016 - Evidence Based Practices - Sheman Building, Ames, IA.
Registration Coming Soon.



