



Investing for tomorrow, delivering today.

Case Management Director's Quarterly Meeting

10/19/2023

Introductions

- DDS
- A Step Above Case Management
- Cornerstone Case Management
- Heart of New Mexico Case Management
- New Mexico Quality Case Management
- Professional Case Coordination Services
- The Columbus Organization
- Visions Case Management
- HSD
- Carino Case Management
- Excel Case Management
- J&J Homecare
- Peak Developmental Services
- Sun Country Care Management
- Unidas Case Management

Agenda

- HSD Updates
- Transition Plan for DDW Budgets Transitioning from the OR to the TPA
- New Budget Worksheet and Instructions
- Waiver Amendment
- Appendix K- Allowances
- PCG Rate Study Recommendations
- Provider Capacity Assessment Recommendations
- Employment
- New Budget Submission Process
- DD Waiver Service Standards
- Addendum A
- Spanish Forms
- Provider Capacity Assessments
- Wellness Visits

HSD Updates

- NMAC Updates
- Cost of Living Adjustment (COLA)

Employment Updates (5 min)

- Input request on emerging topics/issues/concerns from case managers.
- DDSD is trying to gather agenda topics for the next Reaching New Heights Conference in April.
- With input received from Case Managers, the Conference Planning Committee, Partners For Employment will write five questions to give providers.
- They will also be provided on a flyer, with a QR Code to link to a central Survey Monkey Site. <https://www.surveymonkey.com/r/MJBWMT8>

Transition Plan for DDW Budgets Transitioning to the TPA

- OR TPA Transition will start with initial and annual budgets starting on or after February 15, 2023.
- Annual and Initial budgets will be submitted to Comagine Health.
- Revision budgets will need to be submitted to the OR until May 15, 2023.
- If the case manager submits the budget to the wrong entity, the OR will issue an unable to work or the TPA will void the episode and notify the case manager.

New Budget Submission Process

- This process will eliminate the use of Clinical Criteria and reduce the burden on Case Managers.
- Two training dates will be held for Case Managers.
 - November 7, 2023 from 9-12
 - November 14, 2023 from 1-4

New Budget Worksheet and Instruction

- Highlights of changes
 - Added dropdown box for LCA: No Paid LCA for individuals with no LCA or CIHS.
 - Modified Type of ISP choices: Annual ISP, Initial ISP, Transfer from Mi Via, Transfer to Mi Via.
 - Separate Modifiers for SL Cat 4 medical and SL Cat 4 Behavioral (This was added so that DDSD can determine how many individuals are in SL CAT 4 who are under medical and who are under behavioral)
 - Radio Box to indicate former Litigation. (Box has FJCM and other for those not FJCM)

New Budget Worksheet and Instruction

- New Name: BWS-V-TPA-2023
- Issue Date 10/15/2023- Provided to CMs
- New BWS will be required for budgets starting on or after 2/15/24
- Annual and Initial Budget Worksheets Submitted on or after 01/01/2024 using the old budget worksheet will be issued an RFI.

New Budget Worksheet and Instruction

- Removed:
 - Customized Community Support, Individual Intensive Behavioral Support (CCS-IIBS)
 - Fees/Rates (This is so that this document becomes a timeless document. Each time there is a change in rates/fees the BWS has to be updated to signify the rate/fee changes. As you know it can take up to a year for a new budget to be worked through the system)
 - Auto calculations for proposed and actual dollar amounts (PBA's are being removed from DD Waiver Service Standards. PBL's removed from service standards as they are no longer being utilized)

New Budget Worksheet and Instructions

- Removed Continued:
 - Case Management, Guardian, and Participant signature boxes.
 - Type of ISP Choices: Removed ISP Validation and Clinical Review (New Submission Process going into effect 2024)
 - PA Effective Date Based On: Removed transfer from Child ARA (As child is now incorporated into the BWS there is no need for transfer from Child ARA).

New Budget Worksheet and Instructions

- Improved
 - Error Check Tab to help with clean submission
 - BWS Instructions as a companion document

New Budget Worksheet training will be included in the New Budget Submission Process training.

DD Waiver Service Standards

- DD Waiver Service Standards
 - Public Feedback ended 10/05/2023. Thank you to all those who provided feedback.
 - Response to public feedback and new service standards- tentative release date 11/01/2023

Waiver Amendment

- Waiver Amendment Submitted to CMS for:
 - Cost of Living Adjustment (COLA): \$10.2 Million/5.32% Rate Increase for DDW, Mi Via, and Medically Fragile Waiver
 - A legally responsible person (LRI), relative, or legal guardian may provide Community Integrated Employment, Customized Community Supports, Customized In-Home Supports, and Respite.
 - If approved by CMS, this will be retroactive increase as of 07/01/2023.
- Timeline:
 - 09/08/2023: Tribal Notification
 - 10/06/2023: Notice for Request of Public Comment
 - 11/06/2023: Public Hearing
 - 11/15/2023: Formal Submission of Waiver Amendment

Addendum A

- CPB is working on updating Addendum A
 - Addendum A is part of the ISP
 - The case manager meets with the Individual/guardian to review the Addendum A on an annual basis prior to the annual ISP meeting.
 - Reminder: The Addendum A contains
 - Individual Client Rights
 - Client Complaint Process
 - ANE Reporting

Appendix K Allowances

- Appendix K Allowances:
 - October 1, 2023 Memo from Dr. Acosta regarding remaining Appendix K
 - The Developmental Disabilities Supports Division (DDSD) and the Human Services Department are issuing an update to certain Appendix K allowances, with some planned for permanent implementation. The COVID-19 pandemic was classified as a Public Health Emergency by the federal government on May 11th, 2023.
 - Appendix K allowances planned for permanent implementation: Allow provider to bill for staffing supports while individual is hospitalized (payments may only be made up to 30 consecutive days):
 - As a mechanism to support hospitalized individuals and promote continuity of care, this allowance will be implemented permanently through the DDSD Regional Office Exception request process.

Appendix K Allowances

- American Rescue Plan Act (ARPA) rate increased:
 - Per the state spending plan related to ARPA funds, current rate increases of 5% will be implemented until ARPA funds expire on June 30th, 2024.
- A legally responsible individual (LRI), relative, or legal guardian may provide Community Integrated Employment, Customized Community Supports, Customized In-Home Supports, and Respite.
 - To support provider network and service delivery, this allowance will be implemented permanently, pending waiver amendment approvals.

Appendix K Allowances

- Appendix K Allowances Expiring 11/11/2023
 - Supported Living exceeding 2-4 Individuals:
 - DDS will discontinue this allowance on November 11th, 2023, but will consider households supporting more than four (4) individuals on a case-by-case basis through the exception request process.

Spanish Forms

- The following forms have been translated to Spanish and attached for your use.
 - ANE Brochure
 - ANE Reporting Poster
 - ANE Reporting Cards

PCG Rate Study Recommendations-Corrected

- DDS will implement the following PCG recommendations, with approval from CMS:
 - Inflation Consideration- will be handled every two (2) years through rate studies.
 - Cost of Living- Will be handled every two (2) years through rate studies.
 - Rate recommendations- Increases as listed in the report- Amendment planned for implementation date of 07/01/2024.
- | | | |
|---|--|--|
| <ul style="list-style-type: none"> • Behavior Support consultation | <ul style="list-style-type: none"> • Case Management | <ul style="list-style-type: none"> • Customized Community Support, Individual |
| <ul style="list-style-type: none"> • Customized Community Support, Group Cat 1 | <ul style="list-style-type: none"> • Customized Community Support, Group Cat 2, Extensive Support | <ul style="list-style-type: none"> • Family Living |
| <ul style="list-style-type: none"> • Supported Living Cat 2 | <ul style="list-style-type: none"> • Supported Living Cat 4, Extraordinary | <ul style="list-style-type: none"> • Adult Nursing Services, RN |
| <ul style="list-style-type: none"> • Adult Nursing Services, LPN | <ul style="list-style-type: none"> • Respite | <ul style="list-style-type: none"> • Occupational Therapy |
| <ul style="list-style-type: none"> • Occupational Therapy Assistant | <ul style="list-style-type: none"> • Physical Therapy | <ul style="list-style-type: none"> • Physical Therapy Assistant |
| <ul style="list-style-type: none"> • Speech Language Pathology | <ul style="list-style-type: none"> • Community Integrated Employment Job Maintenance | <ul style="list-style-type: none"> • Socialization and Sexuality Education |

Provider Capacity Assessment

- Participants report having provider choice and service quality
 - 75% agree their services meet their needs
 - 92% agree that their services are provided in their language and/or in a culturally competent manner.
 - 91% agree their services are being provided in a manner that respects their dignity and privacy.
 - 86% agree their services are being delivered in an individualized and person-centered way.
 - 66% agree they have multiple service providers to choose from for the service(s) on their Individualized Service Plan (ISP) or Service and Support Plan (SSP)

Provider Capacity Assessment

- When issues arise...
 - 96% indicated that they contacted their provider, case manager, consultant, or the Developmental Disabilities Supports Division (DDSD) or another State employee for help.
 - 60% of participants indicated that their efforts resolved the problem.
- Thank you for all the work that you and your case managers do.

Provider Capacity Assessment- Recommendations

- Enhance Recruitment and Retention
- Leverage the Advisory Council on Quality
- Collaborate with Department of Workforce Solutions
- Implement Wage Pass Throughs for the DSP workforce
- Implement Rate Modifiers
- Establish Telehealth Oversight Framework
- Develop a Telehealth Quality Assurance and Monitoring Process

Provider Capacity Assessment: Recommendations

- Additional Study of Service Availability
- Explore Providers' Inability to Staff Services for Participants with Complex Needs
- Additional Targeted Outreach to Mi Via Waiver Participants
- Implement a Participant Data Management System to Enhance Participant Communication and Engagement
- Outreach to Encourage the Use of and Feedback on the RORA Process

Wellness Visits

As a part of an ongoing process to prevent abuse, neglect, and exploitation DDSD will continue wellness checks.

- Visits will be done to identify:
 - Gaps in services
 - Abuse, Neglect and Exploitation (ANE)
 - Connect with participants and families
- Starting October 2, 2023, DDSD began home visits with a goal to visit every individual receiving waiver services two (2) times a year.

NM Tech Task Force

- Technology First Approach. An initiative by DDSD that started in the fall of 2022.
- 10/04/2023: Technology First Series Kickoff (This was the first in a series of virtual events to provide awareness and education from tech vendors, national tech leaders, and individuals and providers in NM.
- NM DDSD Technology Community of Practice: Series of Virtual Events regarding technology first movement. These series will include technology demonstrations from national vendors, success stories of individuals benefiting from enabling technology in NM and resources for technology.
- The first Wednesday of Every Month: Dates of NM DDSD Technology Community of Practice. Please help spread the word by informing and inviting your CMs to attend.

Reminders- From Clinical Services Bureau

- Environmental Modifications- For children
 - Reminder: Emods are covered under Managed Care Organization (MCO) services and are limited to \$5,000.00 every five years. Administrative costs of the provider for environmental modification services will not exceed 15% of the total cost of the environmental modification project for each project managed by MCO.
- Durable Medical Equipment
 - Reminder: please ensure that the DDW recipient is receiving the equipment. Clinical Services Bureau is getting reports that individuals are not receiving their DME equipment. If you are having any difficulties, please file a RORA.

OPEN FOR
DISCUSSION