



BDS Provider and Case Manager Webinar

December 19, 2024





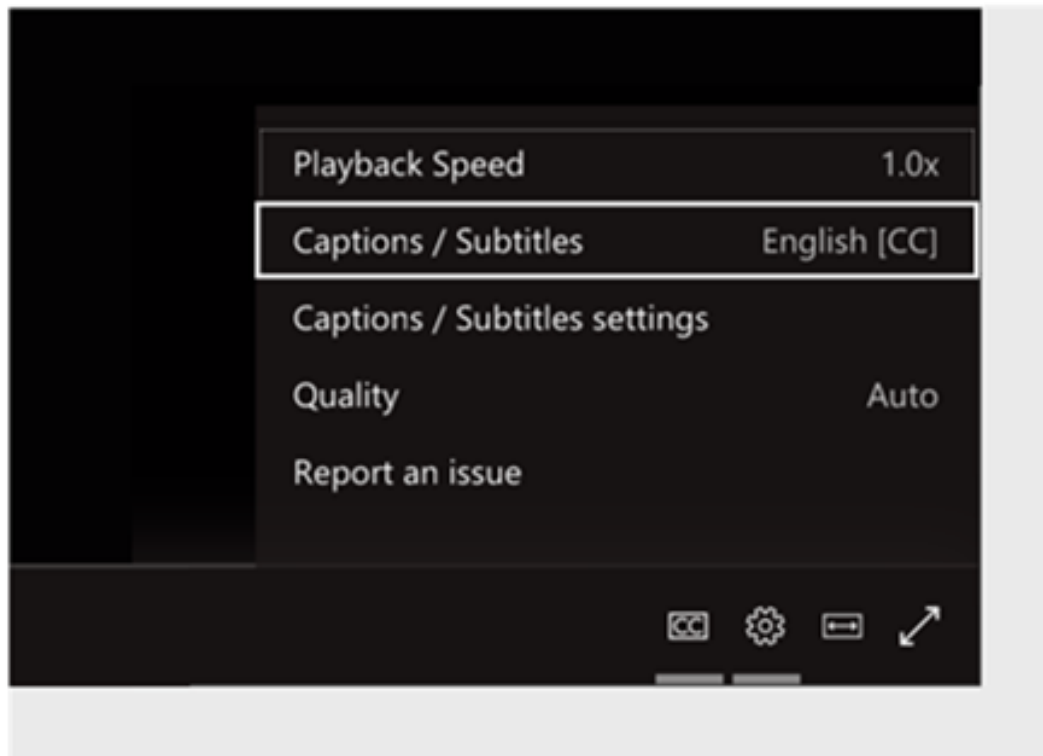
Before We Get Started...

How to Use Live Captions



To turn on live captions and subtitles, select **Captions/Subtitles On**  in your video controls.

To change the caption language, select **Settings**  > **Captions / Subtitles**, and choose the language you want.





How to Ask a Question

- 1.) Select Q&A on the right side of the screen.
- 2.) Type your question in the compose box, and then select Send.
- 3.) Your question will only be visible to the presenters.
- 4.) Questions will be answered as time permits.



Provider & CM Monthly Webinar Agenda – December 2024

- Updates for all Providers
- Updates for HW/TBI Waiver Providers
- Updates for CIH/FSW Waiver Providers
- November Webinar Questions
- Future Webinar Topics Invitation



Provider Updates: All Providers

Home & Community Based Services (HCBS) Settings Rule

- Centers for Medicare and Medicaid Services issued in 2014.
- Clarified expectations about person-centered planning and the things that need to happen with HCBS waivers are administered, including where and how supports are provided.
- HCBS is provided in settings that are integrated in and support full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.



Provider Owned or Controlled Settings (POCOS)



In 2023, the Bureau of Disabilities Services updated the definition of Provider Owned or Controlled Settings based upon feedback from the Centers on Medicare and Medicaid Services during their onsite visits to some of Indiana's Home and Community-Based Services Waiver Settings.

The Settings Rule applies to all HCBS. The POCOS definition is defining what BDS considers a provider owned or controlled setting and it is not limited to RH20 but would be any residential setting where a waiver recipient is receiving any waiver services where they are not living with family.

It's important to remember that CMS guidance is clear that HCBS settings should not have the effect of isolating individuals from the broader community of individuals not receiving HCBS. Thus, it is incumbent on the state and its provider partners to ensure individuals have access to and are integrated in the broader community and that they receive services in the community to the same degree of access as individuals not receiving HCBS.

Provider-Owned or Controlled Settings (POCOS)



A setting that meets the definition of a POCOS requires additional monitoring. For the FSW and CIH, the additional monitoring takes place via questions completed by the case manager to ensure that the individual residing in the POCOS has the same level of choice and protections as an individual living in a setting that is not a POCOS. For the H&W and TBI, case managers complete and document the Person-Centered Monitor Tool (PCMT) every 90 days for active participants.

A setting being identified as a POCOS does not equate to heightened scrutiny. HCBS settings could be flagged as a heightened scrutiny setting regardless of their POCOS status.

The heightened scrutiny process applies to HCBS settings that are presumed to have the qualities of an institution. CMS describes three categories of residential or non-residential settings that are presumed to have the qualities of an institution:

- Settings that are located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment;
- Settings that are in a building located on the grounds of, or immediately adjacent to, a public institution; and
- Any other settings that have the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS.



Home Modifications

- All bids should be itemized and provide detail of what the provider is responsible for completing and with what materials/equipment are being used.
- Case managers should go over winning bids with individuals and their families, if applicable, and those bids should be signed prior to the modification taking place.
- **Note:** HCBS waiver funding cannot cover structural issues or upgrades from basic modifications.



ANE Fact Sheets

- As a reminder, all waiver case managers are responsible for sharing the ANE fact sheet and companion acknowledgement form **annually**.
- Once the ANE fact sheet is discussed with the individual and the signature is received, that should be uploaded, and the discussion should be case noted in the BDS Portal or in CaMSS.





Provider Updates: H/W and TBI Providers

Case Management System

- Effective **July 1, 2025**, CaMSS will no longer be utilized by case managers supporting individuals on the Health & Wellness (H&W) and Traumatic Brain Injury (TBI) waivers.
- Case Managers will utilize the BDS Portal as of **July 2025**.
- BDS will provide training and support to case managers prior to the July implementation.





Service Plan Reviews and Medicaid Prior Authorization (MAPA)

A reminder that when a Service Plan (PCSP) is under review, and it is necessary to pursue Medicaid PA, individuals and families should be supported in seeking an assessment for skilled home health with a provider of choice rather than a blanket outreach to three providers at once.

The goal of seeking services through Medicaid PA is to ensure individuals have access to the appropriate resources/services.



Level of Care Assessment Representative (LCAR) Update

Effective July 1, 2025, there will be one entity that completes all Nursing Facility Level of Care (NFLOC) assessments for those seeking nursing facility placement or Home and Community Based Services via the Health and Wellness, Traumatic Brain Injury, or PathWays waivers.

The NFLOC assessment tool for adults is not changing. NFLOC will continue to be assessed utilizing the InterRAI-HC tool.

July 1, 2025 will see implementation of new tools from the InterRAI suite of tools to appropriately assess NFLOC for children. This includes the InterRAI Peds – HC and the InterRAI Early Years tool.



Provider Updates: CIH and FSW Providers



Provider Attestations



A provider system administrator **MUST** log into the BDS Portal and confirm the Provider Profile information at a minimum of every **90 days**. We are near the end of the final quarter of 2024 and well over half of all CIH/FSW providers have yet to complete a provider attestation.

The Provider Profile information should always be updated anytime there is a change in the Provider Profile.

For assistance with completing the Provider Attestation, please refer to the BDS Portal User Guide for Providers located in the Resource Section of the BDS Portal under the "User Guides" tab.



Provider Referrals



Please check your provider referrals grid and respond to referrals within **30 days**. You may view the referral then accept, reject or request additional information by selecting the record.

For assistance with completing the Provider Referrals, please refer to the BDS Portal User Guide for Providers located in the Resource Section of the BDS Portal under the "User Guides" tab.

STBR/LTBR

- Both case managers and providers are equally responsible for proactively monitoring the BDS Portal for new STBRs/LTBRs as well as Requests for Information (RFIs).
- RFIs should not be necessary as all information should be provided with the original STBR/LTBR submission. The CM/CM Supervisor must ensure all information is accurate, relevant and supported by the documentation **PRIOR** to STBR/LTBR submission to BDS Central Office.
- If a CMO/provider receives an RFI, it must be responded to with the requested information and/or clarification by the deadline provided in the RFI. *BDS will not RFI more than twice for the same request.*
- Both case managers and providers can view all statuses of the STBR/LTBR process in the BDS Portal. This includes approvals and denials.



Resolution of Disputes



- If a dispute arises between or among providers, the dispute resolution process shall be implemented per 460 IAC 6-10-8.
- This process is designed to address an individual's needs, and the parties shall attempt to resolve the dispute by following the steps outlined.

This process was recently utilized by a team where there were some disputes between the RHS provider and the behavior clinician. The IST was able to meet to resolve the issues which resulted in the individual being at the center of the supports they receive. BDS team members or the Waiver Ombudsman can assist if necessary, after attempts have been made as outlined in 460 ICAC 6-10-8.

Documentation of Criminal Histories



- A provider shall obtain a limited criminal history from the Indiana central repository AND complete a county check for each county where the potential staff resided during the three (3) years before the criminal history check.
- If a provider cannot obtain a county check because the county doesn't provide it, then mycase.in.gov should be utilized.
- If a background check comes back with a recommendation of fingerprinting or had inconclusive results, those should be cross referenced with the county, mycase.in.gov, fingerprinting, etc.
- If a provider is made aware of a conviction, it is required that appropriate action is taken.



Webinar Questions from November



Question #1: For H&W/TBI Providers

Q: Can you share the email address for H&W and TBI providers to update their choice list record?

A: If a Health and Wellness (H&W) or Traumatic Brain Injury (TBI) Waiver provider needs to add/remove services and/or counties, change/add/remove addresses/phone numbers, complete a change of ownership, or other significant change, this is completed through the OMPP Waiver Certification Portal. Once this is updated with OMPP and Medicaid, BDS will receive the information and update CaMSS (which automatically updates the choice list). You do not need to contact BDS as BDS receives this information directly from OMPP.

For a simple change, such as contact person, this may be e-mailed to BDSProviderServices@fssa.in.gov and will be completed as soon as possible.



Question #2: For H&W/TBI Providers

Q: What is the expectation for AAA or H&W/TBI Case Managers to update Waiver providers when there's a CM change?

A: Case Managers are responsible for directing collaboration and coordination with providers and monitoring progress from identifying need to meeting goals and/or preferences identified by the participant. Additionally, case managers are expected to engage the participant and their circle of support in all aspects of the case management process as well as coordinating and collaborating with other entities. Thus, it is expected that Case Management providers ensure providers that are supporting an individual are informed of case manager changes.



Question #3: For CIH/FSW Providers

Q: Within the BDS Portal, there are two places a provider can identify not having staff for that county and/or not providing certain services in certain counties without actually deactivating the service. Are those enough? It seems we still get referrals when we do these things.

A: If a provider is currently on a Choice List for a service or county, only deactivation will remove them from the Choice List and discontinue referrals.



Question #4: For CIH/FSW Providers

Q: Can you share more about referral processing? Are individuals still selecting a provider from a “pick list?”

A: Yes, individuals still utilize the “pick list” or “choice list” to select a provider for a desired service. Providers receive and respond to referrals via the BDS Portal.

Future Provider Webinar Topic Ideas?



The BDS Provider Webinar primarily offers an opportunity for BDS to share current news, updates, and to offer brief training opportunities. We want to hear your ideas about additional webinar topics that would be helpful to you across the H&W, TBI, CIH, or FSW waivers. This webinar is a monthly opportunity to discuss updates and issues impacting Indiana's HCBS Waiver providers and other providers of services administered by DDRS.

Share your topic ideas at:
BDSProviderServices@fssa.in.gov



Thank you

