

# **Systems Work Advisory Committee**

January 2023

## **Agenda**

- July 2023 Implementation Activities Overview
- Implementation Risks
- Direct Bill Contingency Plan
- Next Steps



### **July 2023 Implementation Activities**

Compliance activities are our current focus. Completing these activities is required by the federal government.



# To Accomplish Direct Bill and Conflict Free Compliance Requirements (July 2023)

- Providers will be responsible for submitting Medicaid claims.
- Service coordinators will be responsible for an amended scope of work, including participating in crisis management situations.
- Area Agencies will be responsible for performing DAADS Functions and billing for that work. (This work will support future updates to service reimbursement rates)
- Direct service provision and service coordination must be conflict free.
- Service coordinators will be responsible for submitting ISAs and budgets to BDS. BDS will use this information to generate prior authorizations.
- New rule language (HE-M 503, He-M 505, etc.)
   will be in effect.

# Preliminary Implementation of Waiver and Rate Changes (Fall of 2023+)

- BDS will update the DD Waiver to include new and amended service definitions.
- BDS will fund services with updated service reimbursement rates. (This will complete the rate work started with the DAADS rate for compliance.)
- BDS new rate structure will use the Supports Intensity Scale to inform service reimbursement rates (not total budget amounts).
- IT System updates to support a revised and streamlined ISA will be complete.

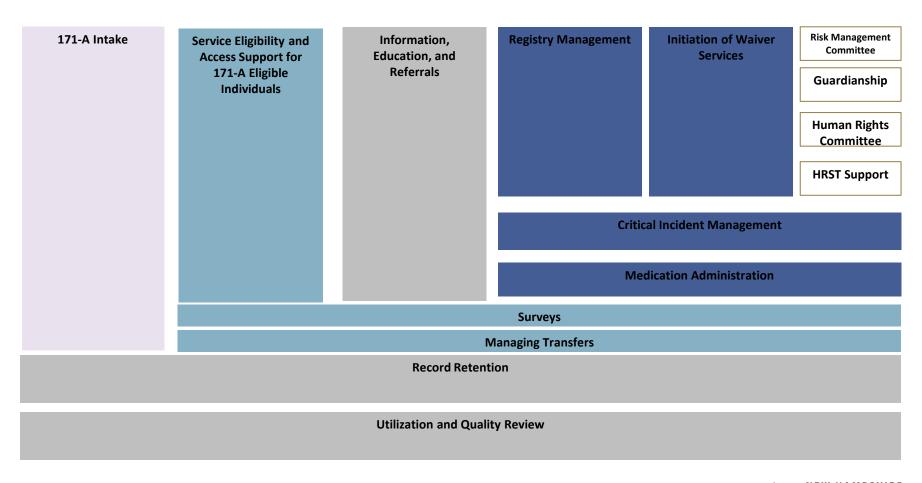


## **DAADS Summary**

Key
All Individuals
171-A
Applicants
171-A Eligible
Eligible Waiver
Participants

Complex
Waiver Cases

DAADS functions include activities across the 171-A and Waiver service intake and delivery process.





4

## Implementation Risks | Providers & Billing

Risk (What if)	Individual & Family Impact	Probability	Mitigation Steps (Then)
Providers do not complete direct bill enrollment.	Individuals and families could experience service interruptions.	High	<ul> <li>BDS will prepare to track enrollment by individual.</li> <li>If an individual receives services from multiple providers, and one or more of their providers does not enroll, the individual's area agency must remain the rendering provider on the prior authorization to avoid duplicate federal claiming.</li> </ul>
Providers are not prepared to submit claims for reimbursement (bill).	If providers experience cash flow issues, some providers may pause operations. This could result in disruptions in service for individuals and their families.	Moderate	<ul> <li>To avoid this, BDS will share more informational resources about how to submit a claim (system walkthroughs) in advance of the go-live date.</li> <li>BDS will establish a central point-of-contact for billing concerns.</li> <li>BDS will establish a tracking process to follow up with providers experiencing claiming delays.</li> </ul>
Systems and processes are not in place in order to successfully operationalize the DAADS payment.	Without automation there may be payment delays to the area agency, but limited impact to the individual is expected.	Low	<ul> <li>To avoid this, BDS has begun collaborating with the Department's technology team (MMIS) and area agencies.</li> <li>Develop prioritization processes for claims once they are submitted</li> <li>Establishing business rules for claim processes, so that the MMIS system can be appropriately leveraged</li> </ul>



# **Implementation Risks | Service Coordination**

Risk	Individual & Family Impact	Probability	Mitigation Steps
Service coordinators do not understand their new roles and responsibilities.	Individuals and families could experience delays in service planning or other supports.	Moderate	<ul> <li>To avoid this, BDS is actively preparing for educational meetings with service coordinators.</li> <li>BDS also intends to increase the number of routine touchpoints with service coordinators.</li> <li>Develop family-focused guidance documents for release in May</li> <li>Identify opportunities for ongoing training/development, and funding</li> </ul>
Crisis processes and responsibilities are not understood and implemented in a streamlined way.	People in a crisis situation might experience additional confusion or delays when seeking support.	Low	<ul> <li>BDS intends to establish business rules to support the allotment of short-term, immediate funding.</li> <li>To avoid this, BDS intends to share a draft policy for review this month for feedback and review. <ul> <li>Expectations for service coordinators will be included in new training materials.</li> </ul> </li> <li>Establish a piloting process for components of the crisis policy, so that key items can tested before larger implementation</li> </ul>



## **Implementation Risks | Other**

Risk	Individual & Family Impact	Probability	Mitigation Steps
Rule updates are not complete by July.	Regulatory delays and confusion may make providers reluctant to offer new services or to change their services. Individuals & family may not have access to as many provider options if rules are delayed.	Moderate	<ul> <li>BDS is prioritizing rule development and is working to quickly develop new drafts for stakeholders to react to.</li> <li>Reaching consensus with stakeholders on key items during informal engagement increases the likelihood of delays during the formal process.</li> </ul>

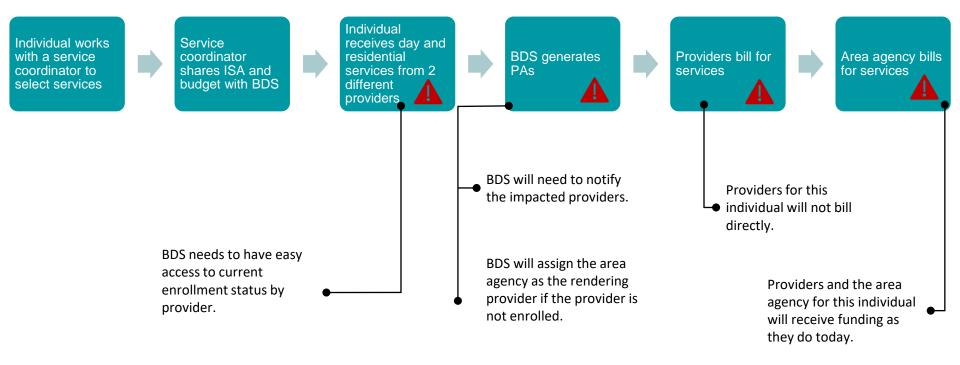


### What happens if...

- Providers do not enroll to direct bill
- Providers do enroll successfully, but are not prepared to submit claims

A

If any of the individual's providers are not enrolled, DAADS payments are unique to individuals, not to services. This means that if an area agency is listed as the rendering provider on a single PA for an individual because the provider is not enrolled, that area agency can't receive a separate DAADS payment for that individual.





## **Draft Contingency Plan | Direct Bill (2 of 2)**

### Current Enrollment Status

- Approximately 77 (~81%) providers have submitted enrollment applications
- Approximately 15 (~20%) of provider applications have been processed

#### Summary

- Multiple issues could result in a provider not being able to participate in direct bill
- BDS currently believes that if any of the providers for an individual are not able to bill, then none of that individual's providers should bill.
- As a back-up-plan, BDS proposes that area agencies continue to serve as the rendering provider on all PAs for individuals who
  are not being served by providers who can bill. This plan is not in compliance with BDS federal obligations and puts continued
  funding at risk.
- If this occurs, BDS will need to support the process with appropriate tracking and information sharing.
- The impacted area agencies and providers will not be eligible for the new DAADS rate and the adjusted service rates.

### **Outstanding Questions Include...**

- Will service coordinators receive guidance to help individuals identify alternative providers who are enrolled?
- How long will individuals receiving services from providers who are not enrolled be eligible for continued funding?
- Will some providers decrease their capacity if they are not eligible for the adjusted rates due to low enrollment rates amongst their peers?



### **Next Steps**

- BDS will continue aggressive outreach to providers and service coordinators about the changes
- BDS will send out a Readiness Survey to providers meant to collect information to inform implementation
- BDS will develop a Go-Live Day Of/ Month Of Overview for area agencies and providers

