



NEW HAMPSHIRE
DHHS
DEPARTMENT OF
HEALTH & HUMAN SERVICES

Developmental Services Department Roles Information Session

June 13th 11:00-12:30

June 22nd 11:00-12:30

Agenda

- Introductions
- Review program areas in DHHS
- Review scenarios
- Questions

By the end of this presentation you should know...

The roles of the following DHHS units and how they collaborate with one another, when and how to contact:

- Medicaid Program Integrity Unit (PI)
- Bureau of Developmental Services (BDS)
- Adult Protective Services (APS) within the Bureau of Elderly and Adult Services (BEAS)
- Certification and Licensing with Health Facilities Administration
- Office of Client and Legal Services (for complaint investigations)

Medicaid Program Integrity Unit (PI)

Karen Carleton

Medicaid Program Integrity (PI)

- Each state Medicaid program is required by federal rule to have a Surveillance and Utilization Review (SURS) function
- Its purpose is to assess the quality of care, services, and equipment received by members for which the NH Medicaid program has reimbursed providers.
- Program Integrity is responsible to detect, correct and/or prevent fraud, unnecessary or inappropriate care, service, or equipment for which NH Medicaid program has reimbursed providers.
- PI ensures that accurate and proper reimbursement has been made for the care, services and equipment provided.

Program Integrity Process

- PI will open a referral of investigation. Provider may not inform the person or persons who provided the irregular documents.
- If a credible allegation of fraud is determined by Program Integrity, a referral is made to the Medicaid Fraud Control unit at the Attorney General's Office for further investigation. Provider may be responsible for paying back paid claims.
- If a credible allegation is not found, the provider is responsible for recovery of paid claims and to correct the issue to prevent future problems.
- Contact appropriate program areas as needed.

Program Integrity: Contact Information

Phone: 1-800-852-3345 ext 8029 or 603-271-8029

Fax: 271-8113

Email: ProgramIntegrity@dhhs.nh.gov

Bureau of Elderly and Adult Services (BEAS)

Rachel Lakin

BEAS: The Law- History and Purpose

RSA 161-F: 42-57: Protective Services to Adults

“The purpose ... is to provide protection for vulnerable adults who are abused, neglected or exploited. Implicit ... is the philosophy that whenever possible an adult’s right to self-determination should be preserved, and that each adult should live in safe conditions and should live his own life without interruption from state government...”

BEAS: Eligibility

- Who is eligible for services?
 - APS investigates and may provide services to “vulnerable” adults who are being abused, neglected or exploited.
- RSA 161-F:43, VII. “Vulnerable” means that the physical, mental, or emotional ability of a person is such that he or she is unable to manage personal, home, or financial affairs in his or her own best interest, or he or she is unable to act or unable to delegate responsibility to a responsible caretaker or caregiver.
- Investigates six categories of adult abuse:
 - Emotional
 - Physical
 - Sexual
 - Self-Neglect
 - Neglect
 - Exploitation

BEAS: Reporting and Registry

- 161-F: 46 “Any person, including, but not limited to, physicians, other health care professionals, social workers, clergy, and law enforcement officials, suspecting or believing in good faith that any (vulnerable) adult... has been subjected to abuse, neglect, self-neglect or exploitation...shall report...”
 - Depending on report that comes to APS, the following will be notified: BDS, BFHA, BON/OPLC, and OLTCO, Probate Courts.
 - What comes next – Open Case and/or Registry
 - Results of APS Investigations:
 - Founded
 - Unfounded-An unfounded APS investigation does not always mean that the situation or incident did not occur
 - Disposition
- *If allegations reported appear criminal in nature: APS notifies Attorney General, County Attorney’s office, local PDs/sheriff/NH State Police, and/or SSA if the allegation is Exploitation of social security funds by a Rep Payee.

BEAS: Contact Information

Phone: 1-800-949-0470 (In NH) or 603-271-7014

Emails: APSCentralIntake@dhhs.nh.gov

After hours or nights and weekends you should contact the police.

Certification and Licensure

Peter Bacon

Certification and Licensure

- The current certification components of submitting documents and the onsite inspection will continue as they are currently.
- Beginning on 7/1/2023, all certificates, including emergency certifications issued will only include the provider agency and no longer require Area Agency signature.
- All Certification reviews are completed on an annual basis.
- Contact appropriate program areas as needed.

Certification and Licensure: Contact Information

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E-mail: communityresidences@dhhs.nh.gov

Phone: (603) 271-9039

Bureau of Developmental Service (BDS)

Abby Conger

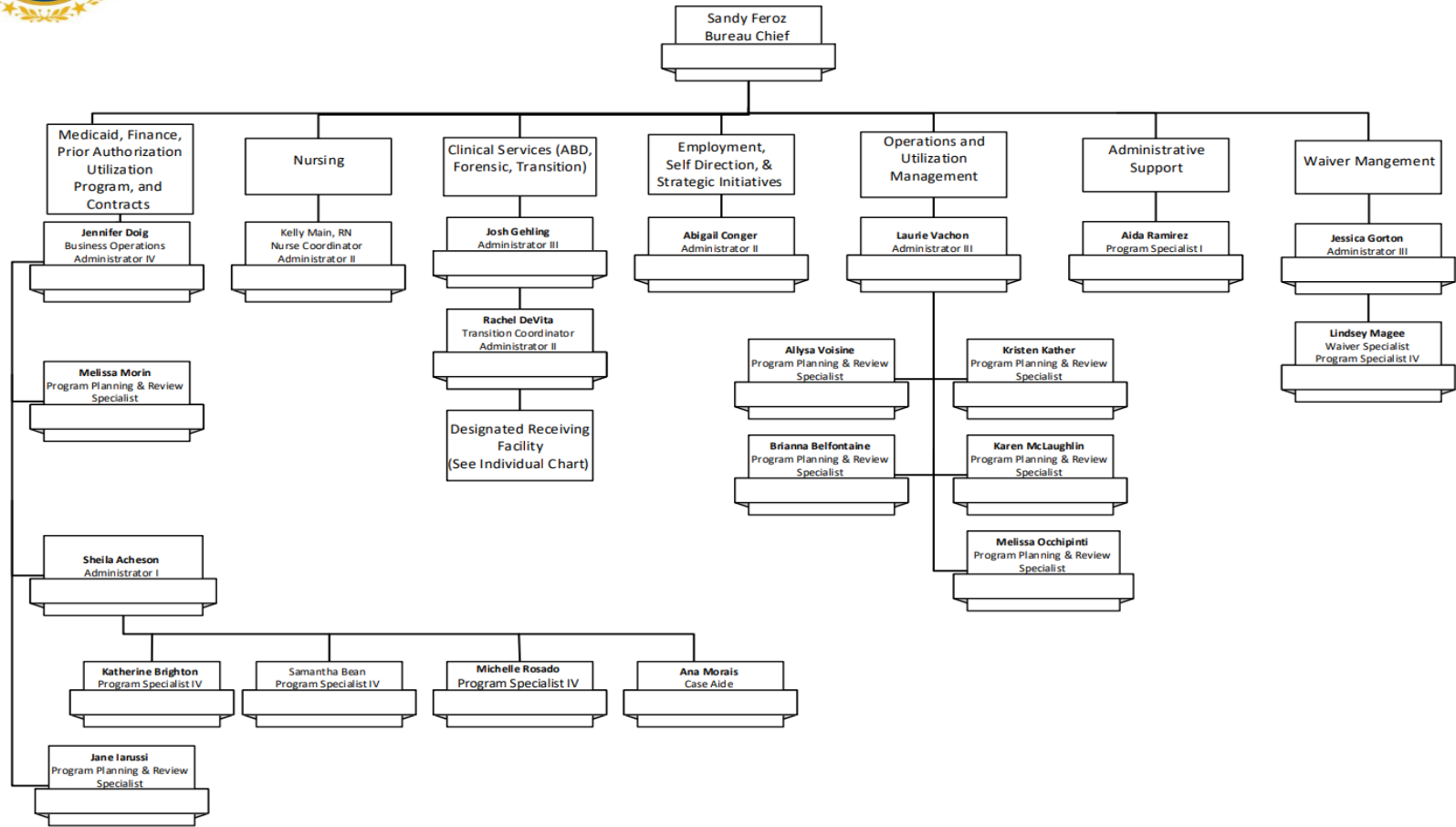
BDS Overview

- Serves as the state's designated agency to ensure the delivery of community based services for adults and children with Developmental Disabilities and Acquired Brain Disorder through three 1915(c) Home and Community Based Service (HCBS) Waivers.
- Ensures the rights, safety, interdependence, and dignity of adults with Developmental Disabilities and Acquired Brain Disorder and prevents their abuse, neglect, and exploitation.
- Builds a comprehensive, community based, service delivery system that maximizes natural supports and interdependence.
- Works with the Bureau of Family Centered Services to administer Early Supports and Services programs for children 0-3 and engages with schools to conduct transition planning for those exiting the school system in to adult developmental services.
- Oversees Wait List management to ensure the people get the services they need and providers get paid.

BDS Org Chart:



NH Department of Health and Human Services DLTSS - Developmental Services



May 2023

BDS: Contact Information

Regional Liaisons

When to Contact: Questions about the regions and/or DAADS functions

Karen McLaughlin: Region 5, Region 6 and Region 10

Email: Karen.L.McLaughlin@dhhs.nh.gov

Phone: 603-271-5094

Melissa Occhipinti: Region 3 and Region 7

Email: melissa.l.occhipinti@dhhs.nh.gov

Phone: 603-271-5032

Allysa Voisine: Region 2, Region 8 and Region 9

Email: allysa.r.voisine@dhhs.nh.gov

Phone: 603-271-5003

Brianna Belfontaine: Region 1 and Region 4

Email: Brianna.n.belfontaine@dhhs.nh.gov

Phone: 603-271-5021

Program Specialist Team:

When to Contact: Questions related to Level of Care, waiver eligibility, status of prior authorizations, and billing assistance.

Sheila Acheson, Administrator

Email: Sheila.j.Acheson@dhhs.nh.gov

Phone: 603-271-5030

BDS: Contact Information

Meeting requests, events updates,
general communication questions

Aida Ramirez, Program Specialist
Email: aida.v.ramirez@dhhs.nh.gov
Phone: 603-271-5018

BDS distribution list additions, meetings
& event questions please contact:

Jessica Kennedy, Senior Project
Manager Email:
Jessica.l.kennedy@dhhs.nh.gov Phone:
603-271-5036

BDS: Contact Information

BDS recognizes the concern providers feel for the unknown and “what ifs.” Through July 30th, an implementation triage phone number and email account have been activated to respond to your questions within 24 business hours.

Regional Liaisons will be the first responders who will answer your calls, supported by Regional Program Specialists.

For questions about Prior Service Authorizations (PAs), Individual Service Agreements (ISA), billing, or any other service-related question, please use the phone number or email.

The phone # is 603-271-7222

The email address is bds@dhhs.nh.gov

For questions about DAADS functions, contact your Regional Liaison directly.

For claims questions, contact Conduent M-F 8-5 at **1-866-291-1674** or **603-223-4774**

Complaint Investigation (Office of Client and Legal Services)

Melissa Nemeth

Complaint Investigation- He-M 202

- He-M 202.02(g) defines complaint as:
 - (1) Any allegation or assertion that a right of an individual as set forth in He-M 310, rights of persons receiving developmental services or acquired brain disorder services in the community has been violated;
 - (2) Any allegation or indication that an individual has been abused, neglected, or exploited by an employee of, or a contractor, consultant, or volunteer for an area agency or program; or
 - (3) Any allegation or assertion that the department or an area agency or program has acted in an illegal or unjust manner with respect to an individual or category of individuals.”

Complaint Investigation- He-M 202

- Once a complaint is received, within one business day it is assigned to a complaint investigator
- Upon conclusion of the investigation, a report is sent to the executive director of the individual's area agency and any involved program and determines:
 - Whether the complaint is founded or unfounded
 - Includes any relevant recommendations
 - Identifies systemic factors
- Any recommendations must be completed and documentation of completion provided to the complaint investigator within 20 business days from the date of the final report (He-M 202.07 (x))
- When a complaint is assigned OCLS will also notify APS Central Intake, Licensing/Certification and BDS.
- If complaint does not fall under the jurisdiction of OCLS, will contact appropriate program areas.

Complaint Investigation: Contact Information

Phone Number: 1-855-450-3593

Filing a complaint with OCLS does NOT replace your obligation to file a report with other entities: APS, Police, DCYF, etc.

Scenarios

Scenario 1

Steve is a 31 year old male who lives in an enhanced family care home and receives 24/7 supervision as outlined in his Service Agreement. During a regular meeting with his Service Coordinator, he shares that one of his home providers husband has been pinching him whenever he doesn't do what he's ask to do.

Scenario 1

Unit/Agency	Role
Service Coordinator (SC), AA, Provider Agency	SC reports allegation to OCLS, APS, AA, and Provider Agency. SC follows BDS crisis policy and ensures the immediate safety of the individual us addressed.
BDS	BDS is notified by the Area Agency after receiving notification from the SC. The AA will contact the appropriate Regional Liaison
OCLS	Complaint report received and assigned to investigator. The assigned investigator contacts appropriate parties involved and conducts investigation.
APS (BEAS)	Receives the report of abuse and reviews information and determines if investigation is needed by APS and next steps. Confirms OCLS received allegation.
Licensing and Certification	Upon request works with Provider Agency on emergency Cert for the location the individual will move to during the investigation.
Program Integrity	At this time not involved.

Scenario 2

Service Coordinator meets with Annie, a 55 year old female who has a legal guardian. They report things are going well in her community residence and Annie states she is happy with how everything is going. SC has concerns about the lack of documentation to support services rendered according to the ISA. SC has not received monthly progress notes for three months, even after repeatedly asking provider's program manager and eventually CEO for supporting documentation.

Scenario 2

Unit/Agency	Role
Service Coordinator (SC), AA, Provider Agency	SC informs AA and reports concern to OCLS.
BDS	BDS is informed by OCLS of complaint and contacts Program Integrity.
OCLS	Investigator is assigned if appropriate and interviews the individual guardian, program manager and direct support staff. Investigator issues determination if service rights were violated. .
APS	Not involved.
Licensing and Certification	Notified by OCLS. Since she lives in a certified home, Licensing and Certification will do a separate investigation.
Program Integrity	Review paid claims and requests documentation to support the claims to determine if the claims paid to the provider followed rules and regulations for payment. Will refer to Medicaid Fraud Control Unit (MFCU) if fraud is found.

Scenario 3

Phil is a 60 year old man whose brother is his representative payee. Rep payee notices unusual withdrawals from his bank account that the individual does not know about. Rep payee calls APS to report financial exploitation.

Scenario 3

Unit/Agency	Role
Service Coordinator, AA, Provider Agency	SC, when made aware, reaches out to offer support to individual and rep payee through the investigation process. SC ensures that AA and Provider Agency are aware of report.
APS	Receives the report of abuse and reviews information and determines if investigation is needed by APS and next steps. APS will contact BDS and OCLS.
OCLS	Complaint report received and assigned to investigator. The investigator assigned will contact appropriate parties involved.
BDS	BDS will be notified by APS and OCLS. BDS confirms that SC was informed by OCLS.
Licensing and Certification	If this occurs in a License or Certified home, Licensing and Certification will do a separate investigation. Certification reviews completed annually
Program Integrity	Is not involved.

Scenario 4

Susie is a 46 year old female who lives in a home with 24/7 staffing supports with one other person. Susie has Prader-Willi Syndrome. A direct support professional learned about Prader-Willi Syndrome in college and understands the health impact of the condition. To help Susie stay out of the hospital, she locks the refrigerator, making Susie and her roommate Diana ask each time they want to get food from the refrigerator. Each DSP has access to the key and unlocks it whenever asked.

Licensing and certification notices the lock during an annual review.

Scenario 4

Unit/Agency	Role
Service Coordinator, AA, Provider Agency	SC(s) learns from Licensing and Certification of locked refrigerator and confirms there is no approved restriction (Behavior Plan or Risk Management Plan. SC(s) confirms OCLS and APS have been notified. SC(s) informs AA(s).
BDS	BDS is notified by L&C, APS, OCLS.
OCLS	Assigned to an investigator(s) who conducts investigation(s).
APS	Receives the report of abuse and reviews information and determines if investigation(s) is needed by APS and next steps.
Licensing and Certification	Notifies the lock and checks with SC to see if the rights restriction is documented and approved. If not, Licensing and Certification notifies BDS, OCLS, and APS.
Program Integrity	Not involved.

Scenario 5

At monthly med committee meeting, BDS Nurse Administrator uncovers discrepancy in controlled medication counts for a 39 year old who attends a day program.

Scenario 5

Unit/Agency	Role
Service Coordinator, AA, Provider Agency	SC is notified by Provider Agency/ Provider Nurse. SC reports to AA.
BDS	BDS Nurse Admin contacts providers nursing coordinator and reports to OCLS and APS.
OCLS	Complaint report received and assigned to investigator. The investigator assigned will contact appropriate parties involved.
APS	Receives the report of neglect and exp. and reviews information and determines if investigation is needed by APS and next steps.
Licensing and Certification	Licensing and Certification will do a separate investigation.
Program Integrity	PI is notified after the investigation by APS and/or OCLS determines staff has been selling the stolen controlled medicine. PI makes a referral to the Medicaid Fraud Control Unit within the AG Office.

Scenario 6

Area Agency conducts a quality service review with a provider and identifies 5 months of missing OIG registry checks for their staff. When the check is finally run, one staff member is found on the OIG list.

Scenario 6

Unit/Agency	Role
Service Coordinator, AA, Provider Agency	AA notifies BDS, OCLS, and individuals' SC.
BDS	BDS receives notification from AA. BDS notifies PI and L&C. BDS confirms complaint filed with OCLS.
OCLS	Investigator is assigned if appropriate and interviews the individual guardian, program manager and direct support staff. Investigator issues determination if service rights were violated.
APS	Not involved.
Licensing and Certification	If this occurs in a Licensed or Certification home, Licensing and Certification will do a separate investigation.
Program Integrity	Would investigate to ensure person has been terminated and recover all funds from provider that the person was involved with providing services.

Questions

Additional Resources

Provider Information and Resources: [Provider Information and Resources | New Hampshire Department of Health and Human Services \(nh.gov\)](#)

BDS Policies, Memos and Guidance Documents: [Developmental Services Policies, Guidance, and Reports | New Hampshire Department of Health and Human Services \(nh.gov\)](#)

Sentinel Event Policy: [sentinel-event-policy.pdf \(nh.gov\)](#)

BDS Crisis Policy: [crisispolicyfinal.pdf \(nh.gov\)](#)

Service Coordinator Functions: [scfunctionlist.pdf \(nh.gov\)](#)

DAADS Functions: [DAADSfunctions.pdf \(nh.gov\)](#)