



NEW HAMPSHIRE
DHHS
DEPARTMENT OF
HEALTH & HUMAN SERVICES

Systems Work Advisory Committee

February 2023

Agenda

- Rates for 7/1
- Direct Bill Contingency Plan
- Q/A
- Readiness Updates
- Workgroup Updates
- Focus Group Breakouts

Rates for 7/1/23

As part of the Department of Health and Human Services (DHHS) FY24/25 agency phase budget request, DHHS had sought to keep service rates and funding levels current while seeking additional funds to pay for the changed role of Area Agencies through the Designated Area Agency Delivery System (DAADS) rate. The Governor's budget recommendation aligns with the Department's agency phase intentions.

Should the Governor's SFY 24/25 budget recommendation be approved and funded, it will:

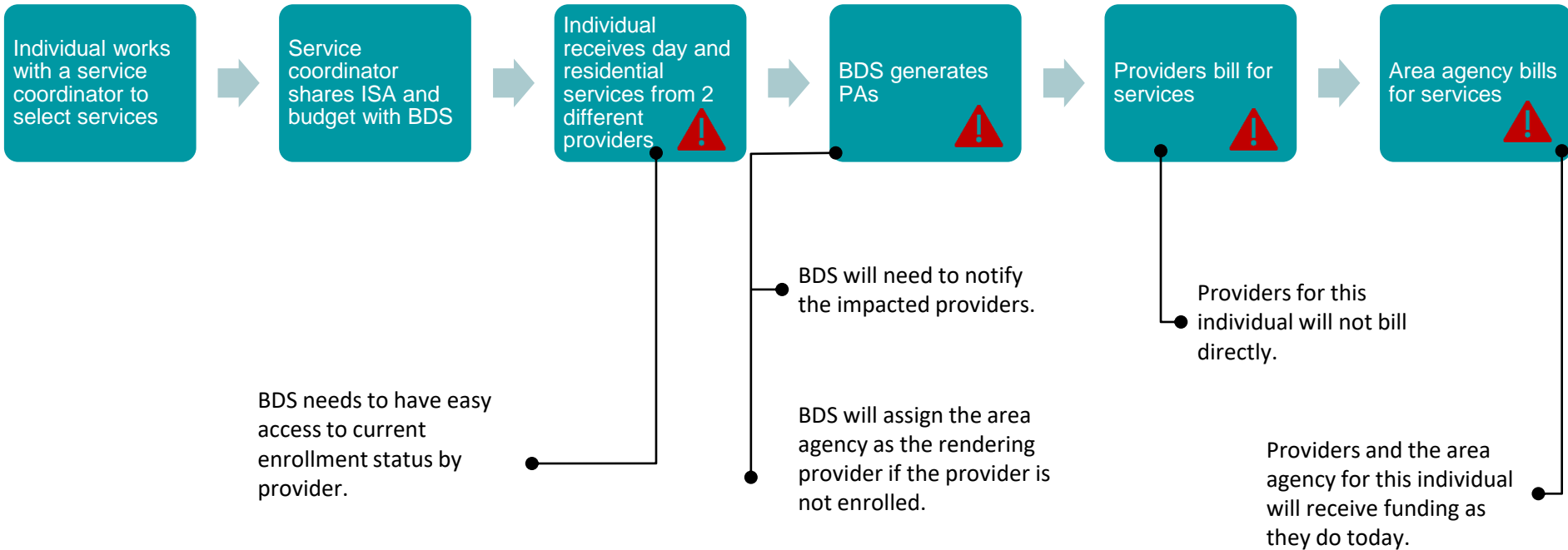
- Eliminate the need to remove funding from current rates to fund DAADS activities.
- Provide an increase to service provider rates by keeping funds previously taken out of rates/budgets for Area Agency functions to stay with providers.
- Allow providers greater flexibility to operationalize the billing changes, including supporting use of a third-party trading partner if selected.

Draft Contingency Plan | Direct Bill (1 of 2)

What happens if...

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

! 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 68 unique providers have submitted enrollment applications. Of those applications 68 applications, 12 provider applications have been fully processed.
- The enrollment team has enhanced their allocation of resources to expedite application processing.

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 will be able to bill.
- As a contingency, BDS proposes that Area Agencies would 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.
- If BDS identifies a provider who may impact service delivery for an individual, BDS will allocate resources to get the provider enrolled immediately to support direct bill.
- Under this scenario, BDS will prioritize work with Area Agencies to identify short-term, time limited billing support to reduce service impact.
- 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?

Readiness Updates



Provider Readiness Survey

BDS will use this information to inform policy, provide support, and deepen the Department's understanding of where providers currently are in the compliance process.

- As of yesterday, 45 organizations have completed the readiness survey.
- The survey will remain open until Friday, February 24th
- BDS will provide updates as we process the results.

Readiness Updates Cont.

Service Coordination Readiness

- BDS will offer a series of trainings to service coordinators focused on 7/1 readiness. We will provide updates in future meetings on training schedule.

Process Development

- BDS staff has begun developing process maps and standard operating procedures for implementation. At least two topics are being workshopped per week.
- BDS expects this documentation to be complete by early March. This content will serve as the source material for trainings and guidance for service coordinators and providers.
- BDS will share updates as these process flows are finalized with the Advisory Committee.

Workgroup Updates

- Waiver Workgroup
- Rate Workgroup



Assessment Focus Group

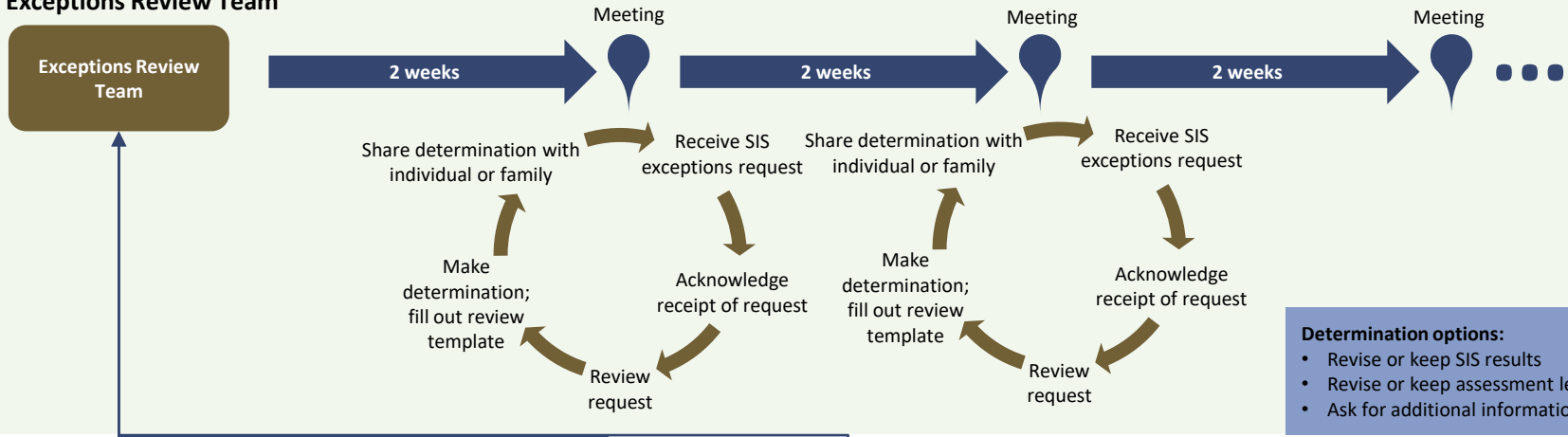


Agenda

- Review process summary graphic
- Develop a more detailed Process Map (If Appropriate)
- Additional Discussion

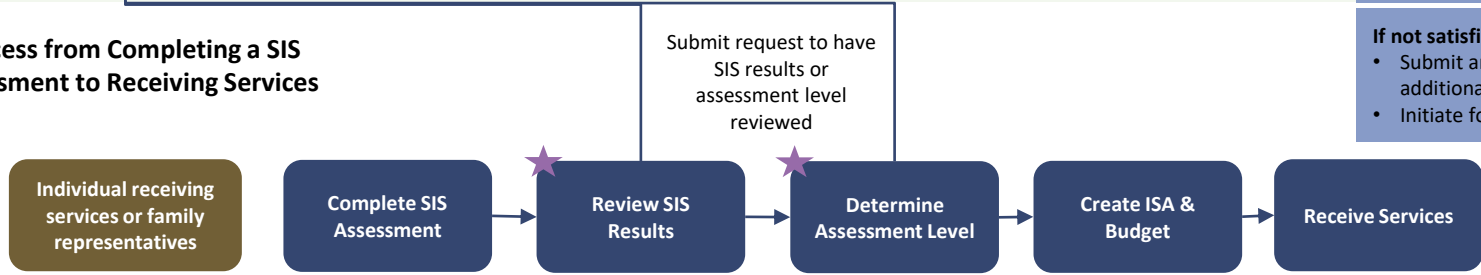
Proposed Exceptions Process Flow

Meeting Cadence & Actions of SIS Exceptions Review Team



- Determination options:**
- Revise or keep SIS results
 - Revise or keep assessment level
 - Ask for additional information
- If not satisfied with determination:**
- Submit another exceptions request with additional information
 - Initiate formal appeals process with CMS

Process from Completing a SIS Assessment to Receiving Services



★ Steps in process where SIS exceptions can occur

Detailed Workflow – What Steps Should be Included?

Exceptions
Review
Team

Individual

BDS

Service
Coordinator

SIS Exceptions Process – Discussion (1/3)

Exceptions Review Team	
Question	Proposed Answer
What types of people/groups should be represented in the Exceptions Review Team? (e.g., Administration, Clinical, Medical, Residential, Day)	Diverse team – Nurse perspective, functional perspective (OT/PT), clinical perspective, family representative (perhaps from a family organization), DAADS representative, service provider agency representative (rendering service provider agency), service coordinator, individual, DSP, HCP, individual not part of our current service system, administrative support professional How many people on team? Recommendation is for at least 7 group members (as identified above and an administrative support professional. Set team
What is the suggested cadence for Exceptions Review Team meetings? (e.g., every 2 weeks)	Recommendation: Every two weeks and as needed. To be adjusted based on volume. Coordinate with ISA group on timeline. Information needed after individual's select their services. If an urgent need is identified, indicate what the expected review/response time will be
Will there be one review team per region or one for the state?	Recommendation: 1 team for the state to ensure consistency
What is the process for review team alternates?	Recommendation: There should be alternates. A SOP should be developed for the Review Team to include an alternate process. Other SOP areas to consider: <ul style="list-style-type: none"> - Annual training and onboarding for exceptions team, families, staff, and individuals - Additional goals for the team (e.g., sharing information trends) - What will annual training and onboarding look like?

SIS Exceptions Process – Discussion (2/3)

Submitting a Query	
Question	Proposed Answer
<p>What information is needed to submit a query? (e.g., written query, additional paperwork)</p>	<p>A statement requesting an exception review and relevant supporting documentation, which could depend on the reason that the exception is being requested.</p> <p>Additional notes/considerations:</p> <ul style="list-style-type: none"> - Ensure access is considered when defining what the “statement” can be. - Examples of supporting documentation could include: <ul style="list-style-type: none"> Person Centered Planning information, if available (via 171-A eligibility info as well) Statement of reason/basis for exception request Video with reason/basis for exception request - Where will the SIS be stored? Will the team have access to it somehow or will the individual need to submit the SIS with the exception request? - Consideration: How to ensure submission of exception request and associated documentation is kept confidential and complies with federal privacy requirements.
<p>Will there be a template/form for both the request for exception and the for the Team’s review?</p>	<p>No specific form to request an exception. An exception request can be accepted in any form (written, verbal, etc.). The Team admin can capture the requests in a standardized way, respond to confirm receipt and rough timeframe for response. There should be a standardized review template for review team to ensure consistency.</p> <p>Can we incorporate the request into HEIGHTS to reduce individual/family administrative burden?</p>
<p>Is there any form of acknowledgement provided when exception query is submitted?</p>	<p>Yes, The Team admin can capture requests in a standardized way, respond to confirm receipt and provide a rough timeframe for response.</p> <p>Clarify how BDS will communicate SIS exceptions with the PCP team</p>
<p>Is there a maximum # of exceptions someone can ask for in a certain period of time?</p>	<p>No. Three different reasons that someone may request an exception: 1) Routine change, 2) unexpected change and 3) new assessment needed (is the 3rd an exception? If not, define in SOP).</p> <p>Need to be clear on which path to take if someone needs change in supports or if something has happened. Distinguish between need for an exception and need for a new SIS.</p> <p>What are the flags for a new assessment within the 5-year period? Tie to a significant life change. Group will consider outlining what those life changes are.</p> <p>Can an exception be requested for immediate change while a new SIS is in progress? What if it is a temporary need and not expected to be needed long-term? Consider how waiver services will be able to support such a situation.</p> <p>What are we asking for an exception review for...rate for a specific service or overall SIS results? For IT System – Put in a clock for review. Will also provide good data for trending.</p>

SIS Exceptions Process – Discussion (3/3)

Rules	
Question	Proposed Answer
Should there be stipulations around time periods exceptions should be requested (e.g., X# days after receipt of SIS score? X# days after SIS Assessment?)	<p>As a SIS is complete, indicate what information is sent and when regarding the decisions (SIS and service level impact)? [Team will research family reports that are sent by AAIDD and versions that other States have developed]</p> <p>Who can ask for an exception?</p> <p>Reinforce that if individual is already receiving services, do they continue “as-is”</p>
What are the reasons an individual may request a SIS exception? Is an exceptions request needed if a change in supports needs occurs? (or is a new SIS scheduled?)	<p>Issue with the SIS itself (either info. included or the process to gather)</p> <p>Issue with support needs identified relative to services selected by the individual.</p> <p>If SIS assessment is upcoming but increased support needs are identified to begin immediately, PCP team will determine if “crisis” can be used to assist if additional staffing/supervision is requested.</p>
What happens to an individual’s current services if they request a review?	The benefit levels should remain the same until a final decision is made.
What documentation is preferred? An SOP?	
What if the exceptions review committee cannot be filled?	

ISA Focus Group



New Hampshire Planning Process Open Discussion

So far, we've talked about a *document* (the ISA), but now we would like to talk about *the process*. Please share strengths and opportunities

related

	Learning about the DD System and available Supports	Completing eligibility with an area agency	Developing and documenting a life vision with an individual	Reviewing and documenting the relationships in a person's life	Reviewing and documenting what supports currently exist in a person's life	Based on an individual's goals and circumstances, developing a plan for services	Sharing that service plan with impacted people	Updating the service plan
For Individuals	✓	✓						
For Families	✓	✓						
For Service Coordinators	✓	✓						

Preliminary Recommendation Log

- Develop a DD System 101 training (potentially a video) that can be shared with families, doctors, and school employees
 - Include information about area agency and provider obligations
- Require BDS staff and all service coordinators to complete social role valorization training
- Offer person-centered planning training such as CtLC to teachers
- Provide guidance to families and individuals about how they can use CtLC to put together an “about me” packet to be shared with providers and other staff
- Issue guidance to area agencies that best practice is for service coordinators to attend IEP meetings if invited; develop educational material for families about IEP coordination
- Provide additional information to families about the difference between RSA 171-A eligibility and waiver eligibility
- Provide clear information to families about what timelines are supposed to be followed throughout intake and eligibility

Updated on 12/15