

This is a working document for PDPPC. We will use this document at PDPPC meetings to review CDASS and the OSA report.

OSA Recommendations	Department Response	Timeline
<p>1B: Working with SEP agencies and training vendor to ensure that case managers receive adequate training and guidance on the program</p>	<p>The Dept. training vendor is required by contract to conduct in person case management trainings twice per quarter and more trainings to case managers as needed or requested. The Dept. will require that webinars be available on the training vendors reference library website along with current forms and information for case managers. The training vendor also maintains a customer service line where case managers can call and access information as needed. The Dept. will require the training vendor to promote this customer service line through communication with case management agencies.</p>	<p>Aug-15</p>
<p>2A. Develop guidelines and training for case managers on how to accurately identify and document client needs as a basis for clients' funding allocations</p>	<p>The Dept. will work with the FMS training vendor to develop guidelines and training for case managers on how to accurately identify and document client's needs as a basis for client's funding allocations.</p>	<p>Sep-15</p>
<p>3.C. Developing clear guidance and training for case managers on conducting and documenting each element of required client contacts.</p>	<p>The Dept. will work with the FMS training vendor to ensure the quarterly case management trainings provide guidance for case managers on conducting and documenting each element of required client contacts.</p>	<p>Oct-15</p>
<p>1C: Implementing adequate contract monitoring procedures to ensure that the FMS providers follow all contractual requirements including conducting background and nursing license checks on all attendants.</p>	<p>The Dept. will require the FMS providers to send the FMS contract specialist, a Dept. employee, a report that verifies contractual requirements including background checks and nursing license checks for new clients each quarter.</p>	<p>Dec-15</p>

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<p>3.B. Developing clear guidance and training for case managers on implementing the Depts. overspending protocol</p>	<p>The Dept. will work with the FMS training vendor to ensure the quarterly case management trainings provide guidance for case managers on implementing the Depts. overspending protocol</p>	<p>Dec-15</p>
<p>1A: Working with its financial management services (FMS) providers to implement enrollment system prompts requiring case managers to verify that all enrollment requirements and forms are completed prior to clients beginning the Program</p>	<p>The Dept. will amend the three FMS contracts to require implementation of enrollment system prompts to ensure case managers verify all enrollment requirements and forms are completed prior to enrollment into CDASS</p>	<p>Jan-16</p>
<p>2B. Modifying and aligning the forms used during the care planning process. This could include standardizing the types of services listed on the care management plan and task worksheet, and requiring case managers and clients to include projected hours for each service on the care management plan.</p>	<p>The Dept. will work with stakeholders and case managers to modify and align the forms used during the care planning process. This could include standardizing the types of services listed on the care management plan and task worksheet and requiring case managers and clients to include projected hours for each service on the care management plan.</p>	<p>Jan-16</p>

<p>3.A. Establishing process requiring case managers to provide clients with additional training and support when actual attendant hours vary from the hours planned by a specified amount or when clients do not have employment contracts with the required number of attendants. This could include requiring the Financial Management Services Provider to notify clients' case managers when either of these situations occur or other controls to ensure that case managers review clients' use of attendant hours.</p>	<p>The Dept. agrees there is a need to address the discrepancy between hours allocated and hours awarded and a need to address noncompliance with the two attendant rule. Addressing the discrepancy between hours allocated and hours used would require case managers to review the monthly reports the FMS provides on clients use of attendant hours and providing support when actual attendant hours vary by a specified amount from the client's allocated hours. The could include requiring case managers to contact the training vendor to offer training when this situation occurs.</p> <p>To address compliance with the two attendant requirement, Dept. agrees to work with the FMS providers to establish a protocol when a client (AR) only has one attendant. This will include a timeline for when the FMS must reach out to the client to notify that they need to hire a second attendant. There will also be steps in place so that if a client fails to comply they will be referred for retaining through the FMS training vendor. If the client continues to fail to comply, he/she may be required to designate an AR (or a new AR will need to be designated for clients who already have one)</p>	<p>Jan-16</p>
<p>2C. Requiring case managers to use the standard forms developed in PART B</p>	<p>The Dept. will work with stakeholders and case managers to ensure the standard forms are being utilized as prescribed . The Dept. will work with the FMS training vendor to make training available on their website resource library.</p>	<p>May-16</p>

<p>2D. Reviewing the pay rates used to estimate client allocation amounts and adjusting the rates to ensure that they reflect clients' actual average cost to hire attendants and do not provide clients with allocation amounts in excess of their identified need for services.</p>	<p>The Dept. agrees to work on aligning the actual cost to hire attendants with the pay rates used to estimate client allocation amounts. However, the Dept. feels it would be problematic to address this issue by adjusting reimbursement rates alone. The Dept. recognizes the need to consider additional factors that may contribute to discrepancies in client allocation amounts, highlighting the need for consistent training on managing budgets. The Dept. will work with the FMS training vendor to ensure that client trainings include instruction on how to properly utilize their services.</p>	<p>Jul-16</p>
<p>4. The Dept. of Health Care Policy and Financing (Department) should conduct a comprehensive analysis of the Consumer-Directed Attendant Support Services Program (Program), including the benefits, health outcomes achieved, and costs compared to other service delivery options. The Dept. should use the results to identify and implement controls over Program costs, in addition to those identified in Findings Nos. 1 through 3. The Dept. should also report the results to policymakers, and if necessary, work with the General Assembly and the federal Centers for Medicare and Medicaid Services as appropriate on changes to the Program based on the evaluation.</p>	<p>The Dept. is not currently appropriated any funding for the purpose of conducting a comprehensive analysis, and cannot complete such an analysis within existing resources. The Dept. will investigate the possibility of requesting funding through the state's Budget process. If funded, the Dept. will use the results of this analysis to identify appropriate changes to the program.</p>	<p>Jul-16</p>