

PCS Stakeholder Meeting
Taylor Building – Conference Room 204 (Dix Campus)
683 Palmer Dr.
Raleigh, NC 27603-2001

Agenda

4/24/14

1:00pm to 3:00pm EST

- 1) Welcome
- 2) Reports
 - a) Liberty Health Care
 - i) PCS Regional Training Schedule
 - ii) SPA 13-009 Webinars
- 3) DMA PCS Program Updates
 - a) Medicaid Reform
 - i) Long Term Services & Supports
 - b) Shared Savings
 - i) PCS Shared Savings Plan
 - c) PCS SPA Update
 - i) PCS Reimbursement and the recoup/repayment process
 - ii) Retro Prior Approval for Additional Hours
 - (1) Required provider documentation
- 4) Reports from Other Divisions
 - a) DAAS
 - b) DHSR
 - c) DMH/DD/SAS
- 5) Provider Q&A
- 6) Next Steps
- 7) Adjourn

Minutes

1) Welcome:

DMA thanked all stakeholder group members for attending and reminded stakeholders of the Question Submission Process and that potential subjects or questions for discussion should be sent at least three days prior to the meeting. The relevant section of the announcement is reposted below.

Stakeholders should submit questions through the PCS mailbox at PCS_Program_Questions@dhhs.nc.gov. Items and concerns you would like addressed during the stakeholder meetings should be submitted at least three days in advance of the regularly scheduled meetings with a notation "FOR STAKEHOLDER MEETING."

2) Reports:

Liberty Healthcare NC:

Liberty provided an outline of the Schedule for upcoming Regional Trainings:

- See Liberty Healthcare NC Presentation Powerpoint 03-20-14

Schedule will also be posted on the Liberty Healthcare NC Website.

Liberty also indicated to stakeholders the preparation of instructive Webinars for the Specifics of SPA 13.009 that will be provided following the SPA's approval by CMS.

Viebridge:

No Specific Reports.

3) DMA PCS Program Updates

a. Shared Savings

- i. *DMA indicated that the Shared Savings was currently in the Metrics Development process*
- ii. *Providers required to submit Session Law 2013-306 PCS Training Attestation Form DMA-3085 to DMA by 6/30/2014*

b. SPA 13-009

- i. *DMA submitted SPA RAI responses on February 14th, 2014.*
 1. *90-day SPA Approval Clock restarted*
 2. *SPA rate and recoupment still intended retro to October 1st, 2013*
- ii. *Documentation requirements still in development*

c. Hospice In-Home

- i. *Hospice Denial Issue Workaround*
 1. *Root of issue noted as Hospice Billing incorrectly as room and board service*
 2. *NCTracks Error Processing for error code 05065*

d. Expedited PCS Requests

- i. *Expedited Services Prior to Medicaid Approval*
 1. *Expedited assessment can grant 35-60 hours, provider begins providing services at that level.*
 2. *Once beneficiary gets Medicaid Approval, provider may bill for the expedited assessment hours provided prior to the Medicaid Approval. If the beneficiary does not receive Medicaid Approval, services back to expedited assessment are denied.*
 3. *Full independent assessment hours determined are retro to Medicaid approval, not the expedited assessment.*

e. Cost Reporting

- i. *DMA is looking into reinstating Cost Reporting Requirements*
 1. *Still under discussion*

f. PCS Reimbursement and Recoup/Repay

- i. *Recoupment implementation process TBD. Under discussion by DMA Leadership.*

g. Medicaid Reform

- i. *Presented Medicaid Reform Concept now being vetted*
 - *See Medicaid Reform Handout (Strategic Planning Process: Appendix 3)*
- ii. *Inaugural Meeting for Strategic Planning Stakeholder Group planned for May 22nd.*

4) Reports from Other Divisions

a. DAAS

- i. No specific updates*
 - b. DHSR
 - i. No specific updates*
 - c. DMH/DD/SAS
 - i. No specific updates*
- 5) Provider Q&A
 - a. Stakeholders expressed concern over the requirements of reporting documentation after the fact when Providers were not initially informed of the need for documentation for additional hours provided since October 1st, 2013.
 - i. DMA indicated that Provider Realities would be included in Documentation discussion.*
 - b. Stakeholders expressed grave concerns over the NC FAST lag in processing Medicaid Approvals causing unnecessary harm to providers housing Medicaid Pending Beneficiaries due to the Expedited Process providing only retroactive payment following the Beneficiary's Medicaid Approval.
 - i. DMA offered to hold additional training Webinars on the Expedited Process.*
 - c. Will DMA be developing documentation requirements that reflect the realistic application of periodic and non-periodic care?
 - i. DMA: Yes; the documentation requirements will be developed in collaboration with Stakeholders.*
 - d. Will DMA be providing Stakeholders with the Independent Assessment Hours Calculation to allow Providers to estimate the possible hours for Beneficiaries still awaiting Independent Assessment completion?
 - i. DMA is looking into the generation of a Paper "Hours Estimation Tool" for Providers.*
- 6) Next Meeting: April 17th, 2014: 1:00pm to 3:00pm EST in Kirby 297