

CHOICES

NEWSLETTER

BlueCare Tennessee CHOICES Program

FEBRUARY 2017

See What's New for CHOICES & Employment and Community First (ECF) CHOICES in 2017

BlueCare Tennessee and Providers On the Clock to Best Serve ECF CHOICES Members

When someone chooses a provider for ECF CHOICES services, the clock starts for your business and for us. As a provider selected to participate in the ECF CHOICES program, the expectation is that you can serve members immediately and if you cannot, that you will inform

the MCO Referral team. **Regardless of your ability to serve members sooner, later or not at all, quick communication is vital.** If you can provide services, respond to the MCO on all referrals. If you cannot serve a member, please inform the MCO of the reasons why.

Tips for Accurate and On-Time Service to ECF CHOICES Members

- Make sure the staff members and their phone numbers who handle the following roles are current and accurate:
 - EVV Contact
 - Person-Centered Support Plan (PCSP) Contact
 - Employment Specialist (if different than the PCSP Contact).
 - Contact who can verify that Plan services started as outlined on the plan
- Confirm each service and county that your organization is contracted to serve is up-to-date and accurate (Changes have occurred since the implementation date).
- Ensure that the direct support professional (DSP) serving the member has a copy of the PCSP.
- If providers encounter differences in the PCSP and what the member communicates once the services start, contact BlueCare Tennessee immediately.

Community Transportation Notes

- Community Transportation is only for members to go to work or travel in the community; it is not for transport to receive ECF CHOICES services.
- Community Transportation is not needed for any Outcome-Based Employment Service (Exploration, Discovery, Situational Observation & Assessment, Job Development/Self-Employment Plan and Career Advancement), Community Integration Support Services (CISS) or Independent Living Skills Training (ILST).
- Providers are expected to transport the member to these services.
- Transportation to provide outcome-based employment services (CISS and ILST) is included in the rate.
- Rates do not include travel for the DSP from wherever they start to the member's house, and from the member's house to wherever the DSP travels to after the service.
- For those services, the DSP is expected to transport the member into the community for the service.

Background Checks Required for New Employees

Before hiring anyone who will provide direct support to a HCBS/ECF CHOICES member, you must have all criminal background checks completed for that person and they must be on file prior to serving a member. Please make sure these are included in your employees' files and are available for verification, along with an organizational chart when CHOICES or ECF CHOICES Network Managers conduct site visits. TennCare requires a quarterly report of this information.

Assessing Job Applicants with a Criminal Background

Each individual job applicant whose background check reveals a criminal record should be carefully assessed before they are hired. With member safety as the top priority, your process must determine if any crimes committed by the potential employee would put the people they serve at risk.

Using Santrax for Person-Centered Support Plan Attestations

Person-Centered Support Plans (PCSP) for CHOICES members require a provider attestation and the process for those reviews is managed through the Santrax Agency Management (SAM). When a member has a PCSP which requires review and attestation, the assigned provider will receive an indicator in the SAM system on the General Screen > Services screen. These indicators must be reviewed and managed within 24-48 hours to remain compliant of approved HCBS services.

Timely Reporting Promotes Faster Claims Payments

Ensuring that your EVV databases and reporting are managed in a timely manner helps us pay your claims faster. This is especially important if you provide Personal Assistance, Supported Home Care and Respite services. Training for EVV requirements is always available during annual site visits, webinars and by special request.

Managing Missed and Late Visits

Managing missed and late visits is an important part of the service you provide to members and a requirement of your contract. You will continue to receive monthly reports of your organization's performance regarding total missed and/or late visits. The organizational performance is a result of total visits per member if outside of the approved Person-Centered Support Plan (PCSP) time and frequency of visits. Please take time to review the Guidance on Missed and Late Visits and ensure you have adequate staffing, appropriate oversight for the EVV process, and remain compliant for this required component of your contract. The guidelines are also available in exhibit B of your HCBS contract.

Important Reminders

- Providers are required to electronically clock in and out for approved services rendered to CHOICES members (all services applicable).
- The check-in and check-out process for workers should be timely and accurate using the GPS device. (Telephony is only to be used when a device is not available or does not work.)
- BlueCare Tennessee providers using Sandata must adhere to "auto-scheduling" and refrain from manually inputting schedules.
- If your agency experiences issues with the GPS device or the approved member phone number, contact BlueCare Tennessee immediately.
- When there is probability of missed visits, initiate the back-up plan as documented in the member's PCSP.
- Ensure workers have time sheet templates during visits for events of technical issues.
- When you encounter missed visits; please enter accurate reason codes to avoid delays in the electronic billing process.
- Avoid using the reason code "other" to ensure an appropriate reason for the "provider missed" visit is entered.



New ECF CHOICES Reporting Requirements for 2017

Providers in the ECF CHOICES network now have additional reporting requirements for two types of events. These new requirements are for actions that do not meet the definition of emotional or psychological abuse.

Disrespectful or inappropriate communication like humiliation, harassment, threats of punishment or deprivation, intimidation or demeaning or derogatory communication (vocal, written, gestures) or any other acts regarding a person receiving support is strictly prohibited. These actions fall into one of two categories.

- **Tier 2 Reportable Events** – Any disrespectful or inappropriate communication listed above directed to or within eyesight or audible range of the person receiving support.
- **Non-Reportable Events** – Any disrespectful or inappropriate communication listed above about the person receiving support, but not directed to or within eyesight or audible range of that person.

As of Jan. 1, 2017, regardless of an action's **definition** as reportable or non-reportable, it must be reported to BlueCare Tennessee's Non-Discrimination Compliance Coordinator. Providers can report events by mailing details of the event on business letterhead or by calling BlueCare Tennessee.

Mail

BlueCare/TennCareSelect Non-Discrimination
Compliance Coordinator
1 Cameron Hill Circle
Chattanooga, Tennessee 37402

Phone

BlueCare: 1-800-468-9736
TennCareSelect: 1-800-276-1978

ECF CHOICES Quality Oversight

TennCare and BlueCare Tennessee will be implementing the ECF CHOICES Quality Oversight program; in conjunction with Lisa Mills, the consultant for ECF CHOICES, and DIDD.

- New Tools
- New Team
- New Process
- Training will begin in early 2017

Remind Your Employees About Preventing the Spread of Infection

Hand Washing and Hand Sanitizer Use

We are in the middle of cold, flu and pneumonia season; germs and viruses are everywhere. Cleaning hands at key times with soap and water or hand sanitizer is one of the most important steps you can take to avoid getting sick and spreading germs to those around you.

Key Times to Wash Hands

- Before, during and after preparing food
- Before eating
- Before and after caring for someone who is sick
- Before and after treating a cut or wound
- After using the bathroom or cleaning up after a member
- Taking care of pets
- After blowing your nose, coughing or sneezing
- After touching garbage
- If your hands are visibly dirty or greasy

Proper Use of Alcohol-Based Hand Sanitizers

- Must be used before and after visiting someone in the hospital or nursing home
- If soap and water are not available, you must use a sanitizer with at least 60 percent alcohol to be effective
- DO NOT use hand sanitizer if you are exposed to *Clostridium difficile* (C-diff). You must use soap and water to wash your hands.
- If your hands are visibly dirty or greasy, hand sanitizer is not enough to clean your hands. You must use soap and water to thoroughly wash your hands.



Guidelines for Using GPS Devices

Using GPS devices to log your employees' time has been in place for nearly 18 months, so we're offering a few reminders about the system for your staff:

- Telephony is only to be used when a device is not available or does not work.
- Workers should use the same method to clock-out as they did to clock-in.
- Workers should enter the tasks they complete that day.
- Workers are required to answer the survey at the end of the shift.
- Schedules are based on authorizations. While providers no longer need to schedule appointments, they do need to ensure workers are assigned for those appointments.
- BlueCare Tennessee must approve any deviation to a member's schedule.

The following are important measures pertaining to the utilization and adherence to the GPS device.

CHOICES providers must ensure workers are properly trained and using appropriate log-in information. (Training available on the Sandata website. To log-in or register, visit: webtraining.sandata.com/tenncare.)

- Utilization reporting with organizational results will be provided monthly along with missed and late visits to convey an awareness of non-compliant providers.
- Member experience of care is critical, the completion of surveys is required.
- Missed visits are monitored; ensure workers clock in immediately (To ensure member safety and welfare, BlueCare Tennessee will reach out to providers when these circumstances occur).
- Your agency has a contractual obligation to use the device. Please contact your Provider Relations Representative when the member's tablet is lost, stolen or when your staff needs training.
- Please contact Sandata if you experience technical difficulties, such as: error Invalid Agency ID, username and/or password, the device freezes or has fatal errors or the device is plugged in for at least 10 minutes but will not power on.

Top Claim Rejection and Denial Reasons

In an effort to reduce claim rejections and denials, the following supplemental information about top rejections and denials is provided to assist you in the event you encounter them. You may also contact Customer Service about other codes or if you need additional assistance.

- **W22:** This Explanation Code is generated when the revenue code submitted is not valid for the provider. For example, if revenue code 0191 is submitted by an SNF provider, the claim will deny W22. A corrected claim must be submitted.
- **WE0:** This Explanation Code is generated when the member's LTC indicator does not match the services billed. Please contact Customer Service for assistance with claims receiving this denial. A corrected claim may be required.
- **SHD/DUP:** These Explanation Codes are generated when a duplicate claim is submitted. Please refer to your remittance advices to avoid duplicate claim submission. If a claim has been denied and you have questions regarding the denial, please contact Customer Service for assistance prior to resubmitting the charges.

Claims Submission Timelines

Most of the time it takes a day, sometimes two, for a claim to begin processing in our system after submission, which is why we encourage you to submit claims as soon as possible. Please note there are also time limits for the submission of claims.

A claims submission must be made within 120 days from the date of service or within 60 days of a payment denial notice from BlueCare Tennessee, whichever is later. Members cannot be billed for claims denied because they were not filed by their deadline. The explanation code for this type of denial is TF1.

Corrected bills must be filed within 120 days from the remit of the original claim. Denials for corrected bills submitted after 120 days will receive WK3 explanation code.



Developing Your Organization’s Staff for ECF CHOICES Support Roles

Direct support professionals (DSP) are a very important part of your organization’s success in serving people who are in the ECF CHOICES program. A work group made up of representatives from ECF CHOICES providers, managed care organizations (including BlueCare Tennessee) and the Bureau of TennCare met to discuss elements of the

ECF CHOICES program and specifically about DSPs. The following are suggestions and tips about hiring and retaining DSPs with the goal of developing a workforce that helps support every individual in achieving dignity by assisting in the accomplishment of their personal and professional goals.

Workforce Suggestion	Objective or Expected Outcome
Recruit recent college graduates	<p>Increase the salary for this role, and seek higher educated staff with the intent of providing a full load of members to manage with the expectation of a career path within the organization.</p> <p>This may be a great opportunity for larger organizations, and organizations could partner and begin a partnership in rotating in smaller companies and rotating out to the larger ones.</p>
Change the title from DSP to something that the job aligns with case management	By changing the title, the recruitment efforts and bank of candidates would allow a broader/different spectrum of candidates. This title change could remove the stigma that is often times attached to the title.
Create career paths/ career steps for the DSP	<p>Identify additional career path opportunities within the organization when developing staffing models for each of the following roles:</p> <ol style="list-style-type: none"> 1. DSP 2. Job Coach 3. House Manager
Staff Floaters	Create a “floater position” that enables mobility to serve multiple geographic areas, and variable roles. This is a stop-gap role that can serve in in the interim while training and building full schedules for other staff.
Job Sharing	Build cluster schedules with individuals that only want/need part-time hours.
Cross Training	<p>Create incentives for staff to be population, program savvy as a means to increase salary and retain staff. Create educational and career development opportunities for staff that is trained and capable of serving members in all available programs:</p> <ul style="list-style-type: none"> • CHOICES • EFC CHOICES • 1915(c) waiver programs operated by DIDD



Expansion of Support People (Non-Typical)	Below are potential target categories for recruiting support
Family Members	Family and friends play a major role in the natural supports system that help members successfully reach their goals. During the system of support meetings, encourage and integrate natural supports within the PCSP when they can meet a member’s wishes and desires.
Others	<p>Consider the following group of individuals when recruiting, which includes individuals who are enrolled in a non-traditional high school and are seeking next steps in a career.</p> <ul style="list-style-type: none"> • Retirees • College Age • Non-College Graduates • Students • Internships • Provider to Provider (job sharing)
Educational Opportunities	
Nurses Aid Program	See Tennessee rules for details
Technical Certificates	Partner with local community colleges within your community or hospitals.
Scheduling	
“In the Interim”	
Introduce more flexibility in scheduling	Education and initiation of flexible hours, specifically for roles that do not require specific start and stop times. Ensure families understand their ability to be flexible with schedules when the services are not hands-on and would not impact personal support.
MCO partnering	Collaboration to provide combined geographical information via volumes of members per county, allowing Providers to use for forecasting and staffing decisions.
MCO/Provider Scheduling collaboration	Provide dual information regarding combined immediate member needs to build fuller schedules for workers.



How Are We Doing?

As a valued BlueCare Tennessee provider, we welcome your feedback and would like to hear from you. If there are questions and/or concerns regarding a process or if there is an individual that you'd like to give "kudos" please submit them to CHOICESProviderRelations@bcbst.com.

We look forward to hearing from you.

CHOICES Provider Network Managers

Manager	Region	Phone	Email
Bianca Merrell	East Tenn.	(423) 535-5900	bianca_merrell@bcbst.com
Jonathan Miller	East Tenn.	(423) 854-6001	jonathan_miller@bcbst.com
Buffy Bass (Interim)	Middle Tenn.	(615) 565-1988	buffy_bass@bcbst.com
Ashley Hill	West Tenn.	(901) 544-2136	ashley_hill@bcbst.com

ECF CHOICES Provider Network Managers

Manager	Region	Phone	Email
Jonathan Miller (Interim)	East Tenn.	(423) 854-6001	jonathan_miller@bcbst.com
Vivian Williams	West Tenn.	(901) 544-2484	vivian_williams@bcbst.com
Keshanna Brents	Middle Tenn.	(615) 760-8792	keshanna_brents@bcbst.com

CHOICES & ECF CHOICES Home Modification Specialists

Manager	Region	Phone	Email
Steve Hargis	East Tenn.	(423) 535-6925	steve_hargis@bcbst.com
Blake White	West Tenn.	(901) 562-3277	john_white@bcbst.com
Stephanie Ray	Middle Tenn.	(615) 490-1515	stephanie_ray@bcbst.com