

# CCA Monthly Roundtable | MINUTES

Meeting Hours: 2:00 PM – 4:00 PM  
2:00 PM – 3:00 PM CCT  
3:00 PM – 4:00 PM CCA ALW

Date: 1/5/2016

## Conference Phone Line

\*Line Phone Number: (877) 929-7616

\*Participant Code: 6918960

## Standing Updates:

[3:00 – 3:10 pm]

- Review of Minutes/Action Items
  - During the last roundtable meeting we had a question about what to do when a CCA is having a hard time placing an individual due to location or facility preference. The state will discontinue the case 6 months after the pend date if a move in date has still not been established.
  - No comments or changes to minutes.
- ALW inbox / enrollment statistics
- Assessment / IR Inbox submission standards
  - Patty Watson-Wood (Huntington Hospital Senior Care Network) we have not received a response regarding facility changes. Should those still go to assessment inbox?
  - Lindsay Jones (DHCS) yes, we will send an email following the call.

## Topics:

[3:10 – 4:00 pm]

1. Quarterly Status Reports
  - Angie Azevedo (DHCS) Quarterly status reports for the October – December 2015 period are due on January 15th. As a reminder, we want you to report **all** participants currently enrolled. For the categories of awaiting review, pending, denied, or disenrolled please list their current status at the end of the three month period only.
  - Patty Watson-Wood (Huntington Hospital Senior Care Network) do we still send monthly IR reports to the IR inbox?
  - Angie Azevedo (DHCS) yes.
2. Updated Application Checklists
  - When submitting Medi-Cal member applications for enrollment into the Assisted Living Waiver Program we are requiring the submission of a **completed** application packet. We previously sent out several application checklists to be used when submitting applications. We have made some updates to the original

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checklists sent out on November 09, 2015 and added two additional checklists. The changes that have been made for to the original checklists are as follows:

- Removal of the 602/602A requirement from on the SNF checklist;
  - Addition of the appropriate submission timeframes, for submission based upon the waiver language requirements;
  - Modification of existing Amenity Form, which must be submitted with all new applications and re-enrollments (if applicable); and
  - Addition of two new checklists to be used when submitting re-enrollments and re-assessments.
- Please be advised that incomplete application packets will no longer be reviewed by DHCS and will be returned for completion. The effective enrollment date will be determined by either the date a completed application is received by DHCS or the date the participant moves into the facility, whichever is later.
  - Participants that are moved into facilities prior to a completed application packet being received by DHCS will not have their services covered until a completed application packet is received. The required checklists were sent out with the roundtable materials and must be completed and attached to all new enrollment, re-enrollment and re-assessment packets that are submitted for review to the ALW Assessment Inbox. Please note that there is a separate checklist for each type of application.
  - As a reminder, all email submissions containing Protected Health Information must always be encrypted.
  - Patty Watson-Wood (Huntington Hospital Senior Care Network) what if timeframes do not match the reassessment?
  - Lindsay Jones (DHCS) the seven day requirement is per the waiver language.
  - Heather Angel-Collin (Jewish Family Services) in regards to the seven day requirement, nurses go see a group at a time and seven days is daunting.
  - Patty Watson-Wood (Huntington Hospital Senior Care Network) agree.
  - Hector Ornelas (Media Home Health) agree.
  - Mark Smith (ABCM) agree.
  - Joseph Billingsley (DHCS) this is waiver language from CMS. Perhaps the CCAs can have their nurses group clients for reassessments and completing the ISP. Please reach out to your nurse or the ALW assessment inbox with any questions.
  - Heather Angel-Collin (Jewish Family Services) When nurses are seeing more than 5 clients it is hard to complete paperwork and get them to sign.
  - Angie Azevedo (DHCS) please keep in mind, the ISP is not considered complete until the ISP is signed.
  - Heather Angel-Collin (Jewish Family Services) can the social worker sign?
  - Hector Ornelas (Media Home Health) what if the assessment and ISP has different dates?
  - Joseph Billingsley (DHCS) you can start the assessment while working on the ISP. The complete application is not complete until both are signed.
  - Kathleen Marek-King (Always Best Care San Diego) what about having the social worker sign?

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- Joseph Billingsley (DHCS) who ever works with the client on the ISP should be signing the ISP.
- Kathleen Marek-King (Always Best Care San Diego) with several facilities, do we have to communicate the service plans with the facilities and the clients?
- Joseph Billingsley (DHCS) yes, the ISP should involve the clients, DPOA or conservator and the facility.
- Kathleen Marek-King (Always Best Care San Diego) Several facilities don't want to have a relationship.
- Joseph Billingsley (DHCS) collaboration should be in place between the CCAs and ALW approved RCFEs in order for the clients to utilize ALW services. We need to know ASAP if these RCFEs are not willing to work with the CCAs and see if they are still suitable for ALW.
- Sergio Blancas (Huntington Home Care) for existing facilities check list, nurse is requesting an updated 603.
- Joseph Billingsley (DHCS) for community placement it is required to submit the 603. We need an updated 603 because we need to see how the client is at their current state. CCAs need to demonstrate skilled need on the assessment tool as well as how the client is deteriorating and how ALW services will assist and keep clients out of a SNF. If the individual has been at the RCFE for a long period, we need to see the original 603 as well as the subsequent 603s to demonstrate the change in condition and why ALW services are needed.
- Patty Watson-Wood (Huntington Hospital Senior Care Network) Have re-enrollment slots changed from 90 days to 60 days?
- Joseph Billingsley (DHCS) the waiver language has not changed in regards to this requirement.
- Heather Angel-Collin (Jewish Family Services) the old waiver stated that after 30 days, clients have 60 days to re-enroll into the waiver.
- Joseph Billingsley (DHCS) we will check on this.
- Hector Ornelas (Media Home Health) what is the effective date for the new amenity and ISP form? It was sent out December 31, 2015 but what about applications that were submitted after that date?
- Heather Angel-Collin (Jewish Family Services) also for applications that have been prepared but not submitted?
- Lindsay Jones (DHCS) if they have not yet been sent to the Assessment inbox then yes, please submit using the updated forms.
- Sergio Blancas (Huntington Home Care) how about applications submitted yesterday?
- Joseph Billingsley (DHCS) because of the holidays and some people coming back to work not aware of the update, as of tomorrow, January 6, 2016 all applications should have the updated forms.

### 3. Revised Forms: ISP and Amenity Form

- We made some revisions to the ISP and Amenity form. Changes to the ISP include general formatting changes and the addition of three columns, one to identify the measurable outcome of each stated intervention, one to indicate the

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start date of the intervention and one to indicate the end date. The start and end date will help inform the DHCS Nurse if an intervention is short term or long term.

- Changes to the Amenity Form include the addition of a yes or no check box for each amenity. This change ensures clarity in what amenities the AW participant is willing to waive, if any.
- Both forms have been sent out with the roundtable meeting materials. As of today, please be sure to utilize these revised forms when submitting ALW applications. Submission of applications using the old forms will be rejected and sent back for correction. We would also like to remind the CCAs to make sure all applicable boxes are checked on each form.

#### 4. Updated CCA Criteria

- We have made some changes to the requirements for new CCAs. Thank you to those who provided us with feedback and made recommendations. We sincerely appreciate your input. Attached to the meeting materials for this roundtable call is a list of new requirements as well as the updated CCA provider application. Please let us know if you have any comments/questions/concerns.
- Bill Mathis (Always Best Care San Diego) is the moratorium lifted and how many new CCAs are allowed per county?
- Joseph Billingsley (DHCS) there was never a moratorium. We had a back log with new RCFE applications and needed to catch up. As for the new CCA criteria, we are focusing on organizations that can demonstrate experience and that can transition clients from a community setting. Organizations with community and nursing facilities and HCBS provider relationships.
- Bill Mathis (Always Best Care San Diego) and what is the max CCA per county?
- Joseph Billingsley (DHCS) there is no maximum. Time is running out so we need to wrap up quickly. Topic five we already briefly touched on. Let's quickly discuss topic six and seven

#### 5. Community Placement Criteria for Individuals Currently Residing in an RCFE

- RCFEs are required by CCR Title 22, Section 87464(f) to provide a safe and healthful living accommodations and services, regular observation of the resident's physical and mental condition, three meals per day plus snacks, personal assistance with ADLs, medication management, social and recreational activities, transportation, housekeeping and maintenance.
- Submit copies of the 603 forms including the original preadmission appraisal and any additional appraisals.
- CCAs need to clearly justify in the notes box of the assessment tool the need for the additional services that will be provided through the waiver, such as the need for skilled care by an RN and case management services by the CCA.
- Examples include: deterioration in physical or mental health
- Justification should be very specific and concise and any documentation included in the application should be for the purpose of substantiating or verifying what is written in the assessment notes.

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## 6. CCA Training

- We are interested in scheduling some training sessions for CCAs. These would be 1 to 2 hour training sessions focused on specific topics. These would be conducted either via phone or through webinar. We would like to get a better understanding of what topics the CCAs would benefit from learning more about.
- Joseph Billingsley (DHCS) a good topic may be the Rollover/Community criteria if anyone would like for us to come out and train. Please submit training ideas and request to the IR inbox or email Lindsay Jones.

## 7. Consumer FAQs

- We are creating an FAQ document for our website and would like to get a better understanding of some of the frequently asked questions your organizations' receive. Please send us any FAQ documents you have developed or send examples of questions you receive most often.
- Joseph Billingsley (DHCS) please let us know if you already have FAQs that you use or any FAQs that you currently receive most often.

### **Action Items:**

- Clarification of re-enrollment time frame – 60 or 90 days?