

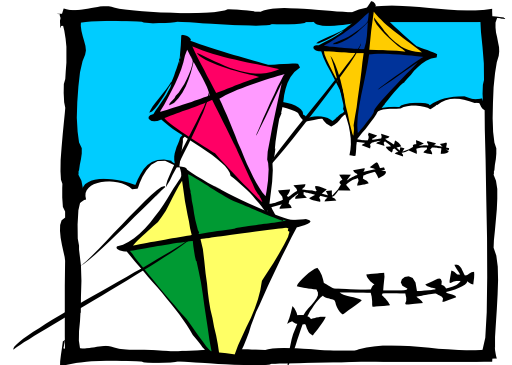
9th ANNUAL CASE MANAGER CONFERENCE

Thanks to all of you who attended and those who donated door prizes as well as all of the speakers, vendors and our fellow staff members who helped. It takes all of you to make an undertaking such as this a success.

We are pleased that the attendance was slightly higher this year. That indicates to us that we are still fulfilling our original goals for the conference, giving all of you the opportunity to network with other Case Managers/providers and giving you access to additional resources to help you maintain your HCBS clients in their homes for as long as possible.

sible.

Next year is our 10th conference so we are looking for ways to make it special. Please let us know any ideas you may have that will help us accomplish this goal. ☺



Hooray for the rain (and snow)!!! As dry as it is, we will take anything wet. Some days we do get moisture in all of its assorted forms.

Last week I was out with the federal evaluators while they did the full review of the Assisted Living Facility Waiver. We visited all of the facilities that are waiver providers except one, whose distance was

prohibitive. We toured the facilities and interviewed several waiver recipients in each facility. Once again you providers made me proud. Your residents have many nice things to say about you and your staff as well as their Case Managers. I will pass along the comments when we receive the report.

Spring is here! Enjoy! ☺

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Medicaid Comprehensive Case Management (CCM)

Contributed by Michelle Harker, RN, CCM, Office of Medicaid

Thank you for the opportunity to attend and speak at the 9th Annual LTC/HCBS Waiver Case Manager Conference. I appreciate being able to provide an update on "what's new" at Medicaid.

Many of you may have been case managers for several years and have noticed some changes in the program through our office. We now have a more streamlined case management process that focuses on high cost, or complex claims.

Our goal is to facilitate medically necessary care while containing costs through a streamlined, telephonic medical case management system. As there are no companies in Wyoming that provide this service, we have contracted with the Colorado Foundation For Medical Care (CFMC) out of Aurora, Colorado. CFMC is a private, non-profit medical review and quality improvement organization that provides utilization review services, quality review services and health care improvement services. They are committed to working with Wyoming Medicaid to attain the greatest health

care value for our recipients by promoting improved health care quality and efficient, cost effective care. This collaboration has resulted in a return on investment of \$7.80 saved for every dollar spent. Due to the success of the program in the past two years, we have increased the number of cases and added a second nurse for the program.

We look forward to working with each of you and hope that you will consider CCM as an additional resource to assist you in improving the health and well being of the clients we serve. To reach CFMC, the main number is 1-888-545-1710; Camille Allen's extension is 3352, and Audrey Starbuck's extension is 3155. If you have questions or if I can be of help to you, I can be reached at 307-777-5854 or email at: mharke@state.wy.us.



DISCHARGE PAPERWORK

It is time to review the procedure for discharging clients from the HCBS Waivers.

Please indicate which waiver the discharge pertains to on the top of the form. Please fill out the form completely, including the Medicaid Recipient ID number. The date of the actual discharge is vital. Use the date the person entered the nursing home if it is a discharge to the nursing home.

Discharges because of admission to a nursing home or death require only the Discharge Sheet (HCBS-8) as their Medicaid eligibility is not affected. Any other discharge requires the Notice of Termination (HCBS-10) as the discharge causes a loss of Medicaid eligibility. This form is in the form of a letter to the client notifying them of their right of reconsideration. This right has a 30 day time limit so the form must be dated.

The Notice of Termination is given or sent to the client and a copy of both forms are faxed to our office. ☺

Any discharge other than death or nursing home admission requires the Notice of Termination as the discharge causes a loss of Medicaid eligibility.

THE ALF WAIVER AND THE PROVIDER DUTY SHEET

The Provider Duty Sheet (HCBS-6) needs to be completed by the Case Managers on the Assisted Living Facility Waiver and sent to the facility whenever a new or renewal Plan of Care is done.

This form accomplishes the same functions for the ALF Waiver as it does for the LTC/HCBS Waiver. It gives the assisted living provider the exact day the Plan of Care was approved as well as the level that was approved. It also provides a level of security that the facility will not be penalized if the Case Manager makes an error on the Plan of Care.

It is important that the assisted living facilities ask for this form, if they don't receive it, when they have a resident admitted to the Assisted Living Facility Waiver. It is the facility's responsibility to have the form reviewed and signed, if it is correct, and return it to the Case Manager. ☺

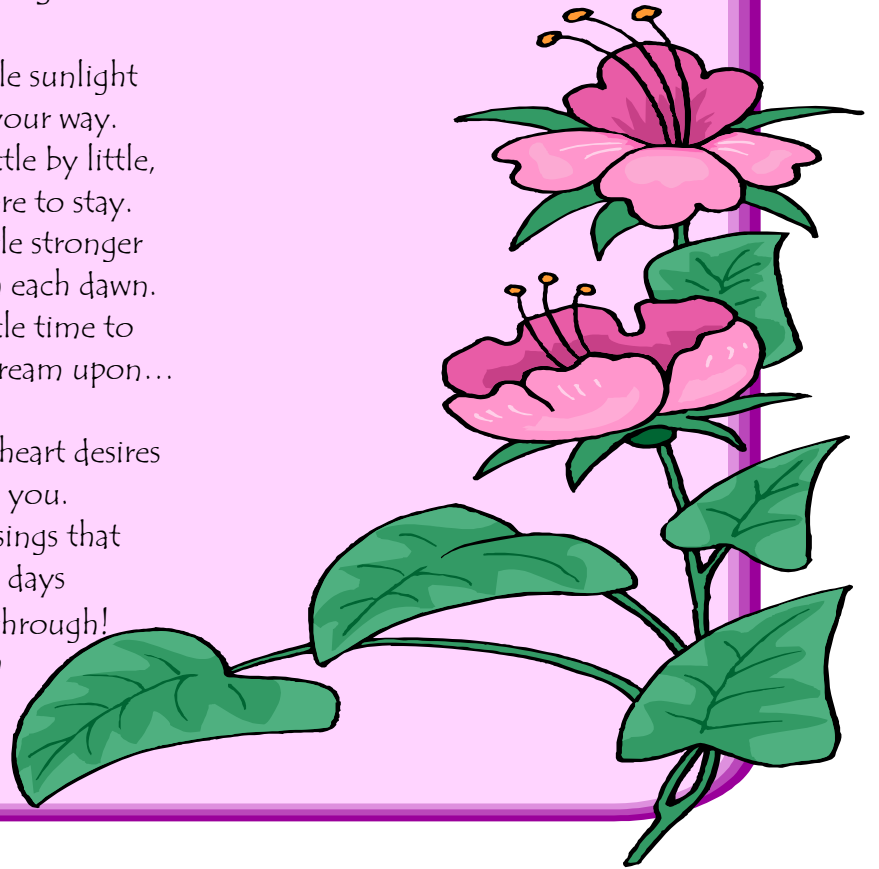


Spring Blessing

May you have a little sunlight
to guide you on your way.
May you discover, little by little,
Happiness that's here to stay.
May you grow a little stronger
and a little wiser with each dawn.
May you have a little time to
believe in dreams to dream upon...

May all the joy your heart desires
find its way to you.
And may the blessings that
brighten your days
keep on shining through!

-Carey Martin



Choosing a Nursing Home: New Resources Available

Professionals whose clients are facing the challenge of placing a loved one in a nursing home should know about an exciting new resource available to the general public. Recently, the Centers for Medicare & Medicaid Services (CMS), a federal agency of the U. S. Department of Health and Human Services, began publishing data on quality of care in nursing homes throughout the country. This information is accessible on the www.medicare.gov web site under "Nursing Home Compare," or by calling 1-800-MEDICARE (633-4227).

The site reports on how well individual nursing homes do on "quality measures" that relate to, among other things, loss of ability in performing daily tasks, pressure sores, pain, and physical restraints. It also provides state and national averages so consumers can compare an individual home to average performance across the state and nation. Paper copies of the same information are available through a "print on demand" feature of the 1-800-MEDICARE service.

Supplementary materials are also available from the Mountain-Pacific Quality Health Foundation, the Medicare Quality Improvement Organization for Wyoming, Montana and Hawaii. The Foundation is charged with raising public awareness about the information available, what it means, and how the public can best use it. The Foundation distributes free packets containing brochures on choosing a nursing home, checklists, and guides that give comprehensive information on long-term care choices, making arrangements, paying for care, resident rights and more. All of these should benefit families beginning their search for a nursing home.

The Foundation encourages professionals who assist people in need of information to request a packet. The contact number for packets as well as general questions is 1-800-497-8232, extension 152.



TRAVEL TIME AND WAIVER SERVICES

It seem as if we have some providers who are having difficulty with the issue of time allowed for travel within the LTC/HCBS Waiver units of service. I am reprinting part of an article on the findings of the Independent Audit about rounding daily units and travel time that was first published in the HCBS NEWS in the June, 2001 issue:

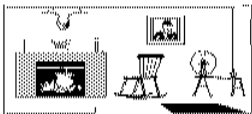
🔔 The handling of partial units of service was also identified as a problem across many agencies. You cannot bill for fractions of units so partial units need to be rounded. Each service has a monthly pre-authorized amount of units and can be used as needed throughout the month. The proper procedure is to total all units for a particular service and round the units at the end of the month. When the total amount of units has a remainder of over one half unit it is rounded up, when it is under one half unit it is rounded down. Units are never rounded on a daily basis.

🔔 Travel time was another issue that seemed to be understood differently from agency to agency. The unit charge for personal care services includes travel time. A

period of 5 minutes before the hour to 5 minutes after the hour can be used to travel from one client to the next. Agencies that require the Personal Care Attendant to record the minute they arrive and the minute they leave have no documentation to support the time required to get to the home. Our state is so rural that many clients are sometimes as much as an hour from any agency that can provide them service. In those cases please contact me to see how we can facilitate their care.

Travel is considered part of the administrative cost already included in the unit reimbursement amount. We do realize that Wyoming is so rural that it would be difficult to provide services in outlying areas with out some special arrangements. If the client is located 15 or more minutes travel outside of town some considerations can be made, but it is necessary to call me for approval, case by case. Additional travel time within the city limits is never appropriate. Case Managers/Care Coordinators need to consider providers who are within the community of the client's home to provide the necessary care whenever possible. 🔔

HOME SWEET HOME



**A PUBLICATION OF THE
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