

Volume XXXVI - September 2022

Provider Rate Increase Forums

Governor Doug Ducey and the Arizona State Legislature approved funding in the most recent Legislative for the Arizona Department of Economic Security (DES) Division of Developmental Disabilities (DDD) to increase rates paid to Qualified Vendors for Home and Community Based Services (HCBS).

DDD hosted five virtual forums in August 2022. Over 650 members, families, vendors, providers, and stakeholders attended. DDD received over 600 comments about the services most in need of rate increases. The Division would like to thank all who attended and those who provided their feedback. The new provider rate book will be published on September 24, 2022, and thenew rates will be effective October 1, 2022.

WellSky Claims System Updates

On September 1, 2022, the Division implemented the WellSky claims system that utilizes the Healthcare Common Procedure Coding System (HCPCS) and standard Centers for Medicare & Medicaid Services (CMS) claims forms when reimbursing Qualified Vendors for submitted claims. This includes the use of standardized Health Insurance Portability and Accountability Act (HIPAA) Transactions and Code Sets (TCS).

Since the system went live on September 1, 2022, over 408,000 total claims have been submitted. On average, the Division has received 51,000 claims per day. Prior to the WellSky launch, the Focus system averaged 61,000 claims per day. The WellSky system is approving 97% of claims submitted. The Division would like to thank all the providers who have participated in training and preparing their systems for this change. The Division's Provider Relations team continues to be available to support Qualified Vendors with questions about the WellSky system. This unit has identified a few trends that all Qualified Vendors should be aware of when submitting claims through the WellSky system.

Identified Trends

- Diagnosis Code must have a minimum of four characters and decimals and all other formatting should be removed when entering them into the WellSky system. For example, service F84.0 should be entered as F840.
- Some vendors encountered claim denials due to incorrect rates for habilitation-hourly, occupational therapy, and physical therapy. These rates were updated in WellSky earlier this week. Vendors who received a previous denial should re-submit their denied claims.
- As the Division continues to review claim denials and monitor the workflow, vendors submitting claims via 837 continue to include extraneous trailing spaces that cause claims to deny or fail to process correctly. Vendors must create 837P files that are compliant with the companion guide and the underlying TR3. Trailing spaces, except where explicitly called for, extraneous delimiters, and any other

deviation from a compliant file may result in claim denials, incomplete, or inappropriate processing, ultimately resulting in a delay in payment or non-payment.

The Division has published a <u>Claim Denial Tips</u> document which Qualified Vendors can reference to help reduce claim denials.

Question and answer sessions are being held through September 30, 2022 where Qualified Vendors can have their questions answered. The schedule for these sessions is available on the <u>C2F - HIPAA TCS Compliance</u> <u>WellSky Claims Processing System web page</u>.

Additional information and resources including <u>Frequently Asked Questions</u> and a <u>form to submit questions</u> are available on the <u>Division's web page</u> dedicated to this project.

Therapy Services Update

The Division's new WellSky claims system conforms to the Medicaid National Correct Coding Initiative (NCCI). The Medicaid NCCI regulations set daily maximum limits for each service and procedure to procedure limits. While most of the HCBS services are unchanged, therapy services are the most impacted.

As previously communicated in WellSky training sessions and various communications, Medicaid NCCI regulations prohibited a member from receiving a physical therapy session and an occupational therapy session on the same day. **On August 30, 2022, the Medicaid NCCI regulations were updated and this limit is no longer applicable.** The WellSky system has already been updated to allow claims for physical therapy and occupational therapy to be delivered on the same day to the same member.

The daily unit limits are still in place and remain unchanged. The daily limit for each therapy service according to the Medicaid NCCI regulations are:

- Physical Therapy 6 units of 15 minute increments (equivalent to 1.5 hours)
- Occupational Therapy 8 units of 15 minute increments (equivalent to 2 hours)
- Speech Therapy 1 unit of untimed service, which means it can be any length of time

The Division recognizes some members receive feeding therapy and speech therapy on the same day, which causes conflicts with the daily limits. The Division developed the following billing guidance for situations where speech therapy sessions are delivered on the same day as a feeding therapy session. The Division has created additional rates that will be published later this month in the October 1, 2022 rate book where the rate will be double the normal rate for all settings and tiers in these situations. One example for speech therapy base rate in the natural home is illustrated below:

Service	Unit	Туре	Rate	Max Units
Speech Therapy	Visit	Natural Home, Base	\$113.26	1
Speech Therapy Session with an additional				
Feeding Therapy Session	Visit	Natural Home, Base	\$226.52	1

Qualified Vendors will be required to submit claims for only one unit, but the rate will cover both sessions. These rates will be effective as of September 1, 2021 to allow for claims to be submitted through WellSky.

September is Suicide Prevention Awareness Month

In 2021, Arizona's rate of suicide per 100,000 people was 35% higher than that of the United States. Suicide In Arizona currently ranks 10th among the leading causes of death, down from 8th in 2019. Arizona ranks 38th of 50 states in rate of suicide per 100k of population, up slightly from 39th in 2020. Arizona's Suicide Prevention Action Plan identifies 5 goals to address suicide in the state:

- 1. Ensure suicide prevention resources, crisis support, and treatment services are universally available to clinicians, communities, families, and survivors.
- 2. Utilize current community trends in order to best address emergent threats and direct future efforts.
- 3. Support disproportionately affected persons and populations with focused interventions that are appropriate and delivered with cultural humility and respect.
- 4. Support state prevention efforts by serving as a focal point for internal and external coalitions and partnerships.
- 5. Improve the resilience of individuals and communities.

National Suicide Prevention Lifeline: 1 (800) 273-8255 (English) or 1 (888) 628-9454 (Spanish)

Progress Notes Submissions

The Division would like to thank all providers using the FTP site for submitting progress reports as outlined in Chapter 35 of the Division's Provider manual. Please remember that the FTP site is secure and files uploaded should not be locked or require any passwords to open. The files are now uploaded directly to the member's files and if they are uploaded by the vendor with any type of security, the Support Coordinator is not able to access the report. If you are not yet using the FTP site, please review the guide online at <u>Progress Report</u> <u>Upload Printable Directions with FTP Information</u>.

PCSP Language and Format Updates

On September 28, 2022, an update will be made to the Person-Centered Service Plan (PCSP) to reflect the following changes per an AHCCCS update to the PCSP document.

1. Language Change to Section V. Individualized Goals and Outcomes

The language before the first question in the Individualized Goals and Outcomes section of the PCSP will change.

- Currently, the question reads, "Is there an area of your life that you would like to work on?"
- Beginning September 28, 2022, the question will read, "What area of your life would you like the team to support you in?"
- 2. Writing Goals in Order of Importance

Member goals documented in the Individualized Goals and Outcomes section of the PCSP will be documented by the Support Coordinator in order of importance. When the Support Coordinator is discussing this section with the member, they will ask the member which of their goals would have the most positive impact on their lives when completed. The goal that the member identifies as having the most positive impact will be documented in the first goal table, then each following goal will be documented below in order of importance.

V. INDIVIDUALIZED GOALS AND OUTCOMES				
WHAT AREA OF YOUR LIFE WOULD YOU LIKE THE TEAM TO SUPPORT YOU IN: (Goals are listed in order of priority: Use the additional pages as needed and number each goal accordingly) Health Home Life Daily Life				
GOAL 1:				
OUTCOME:				
Where are they now (at the time of this plan)?				
What needs to be done?				
A				
8.				
¢.				
WHO WILL DO:	WHEN?			
A.				
B.				
C.				

Abuse of a Vulnerable Adult

In the last legislative session HB 2397 updated the definition of "Abuse of a Vulnerable Adult" to add "emotional abuse" as one of the criteria for the purposes of reporting to DES Adult Protective Services. To align with this definition, the Division is updating the Chapter 64 Preventing Member Abuse, Neglect And Exploitation and Recognizing and Reporting Abuse, Neglect and Exploitation of Vulnerable Populations Presentation. Qualified Vendors should review and update as necessary, policy and staff training aimed at prevention of Abuse and Neglect.

Reporting Fraud, Waste, and Abuse to AHCCCS

The AHCCCS Office of Inspector General (OIG) has recently updated how they want suspected fraud, waste, and abuse to be reported to their office. Previously, they had contact numbers for Maricopa County and then all other Arizona counties. They now have a reporting line dedicated to the entire state as well as a number for reports from outside Arizona. The new reporting information is outlined below:

- Provider Fraud
 - In Arizona: 602-417-4045
 - Outside Arizona: 1-888-ITS-NOT-OK (1-888-487-6686)
- Report Member Fraud:
 - In Arizona: 602-417-4193
 - Outside Arizona: 1-888-ITS-NOT-OK (1-888-487-6686)
- If you have questions about AHCCCS fraud, abuse of the program, or abuse of a member, email the AHCCCS Office of Inspector General (OIG) at <u>AHCCCSFraud@azahcccs.gov</u>.

Town Hall Meetings

The Office of Individual and Family Affairs (OIFA) continues to host town hall meetings for members, families and providers. The next town hall meeting will be held on Thursday, October 6, 2022, from 6:00 p.m. to 8:00 p.m. DDD will present updates and announcements.

Please share this information with the members and families you serve and encourage them to participate. The town hall schedule and instructions to join via the Internet or phone can be found at <u>bit.ly/dddtownhall</u>.

Get Caught Up

Did you know the Division posts vendor announcements and editions of the Shout on the web? Get caught up and stay informed on all of the recent vendor communications, <u>https://des.az.gov/services/disabilities/</u><u>developmental-disabilities/vendors-providers/vendor-announcements</u>.

Report Fraud, Waste, Abuse and Misconduct

Report to DDD

- Call DDD at 1-877-822-5799
- Send an email to <u>dddfwa@azdes.gov</u>
- Send a letter to DES/DDD Attn: Corporate Compliance Unit 1789 W Jefferson St. Mail Drop 2HA1 Phoenix, AZ 85007

• Complete this <u>online form</u>.

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