

Volume XXXIX - December 2022

New Contracts for Home and Community-Based Services (HCBS)

The Request for Qualified Vendor Application (RFQVA) is the Division's contract for Home and Community-Based Services (HCBS). It is the Division's goal to end the current Agreement and implement the new Agreement in March 2024. Regular communication will be provided on the <u>Division's website</u> for existing Qualified Vendors and those interested in becoming a Qualified Vendor. During this transition, Qualified Vendors must maintain compliance with all agreement requirements for RFQVA DDD-710000 until the new agreement, RFQVA DDD-2024 is implemented.

Agreement requirements include, but are not limited to:

- Insurance
- HCBS Certification and other required licenses
- Credentialing
- AHCCCS ID and Provider Participation Agreement

Additionally, Qualified Vendors will need to take action to correct or complete information in the Division's Contract Administration System (CAS) or in the Vendor's FOCUS account. Failure to maintain compliance and take action timely on required activities will create barriers to a successful re-application and may result in the denial of a Qualified Vendor's new application.

The Division is posting the final <u>RFQVA DDD-2024 document</u> and the projected timeline to help Qualified Vendors and applicants plan for the implementation of RFQVA-2024. The timeline is subject to change and will be updated as necessary. A summary of RFQVA changes will be posted to the Division's website for Qualified Vendor reference at a later date.

Stakeholders may submit questions via this Google Form.

COVID-19 Public Health Emergency Flexibility Unwinding

Since March 2020, the Division has been operating under conditions unlike anything encountered previously. Vaccines and treatments to help people who contract COVID-19 are now available. This allows for life to return to a level of normalcy not seen in over two and a half years. Much like influenza, RSV, and other viral illnesses, COVID-19 is now considered an endemic disease.

While Governor Doug Ducey ended Arizona's COVID-19 public health emergency (PHE) declaration in March 2022, the federal government has continued to extend the federal COVID-19 public health emergency. This federal extension has allowed specific flexibilities approved by the Arizona Health Care Cost Containment System (AHCCCS) and the Center for Medicare and Medicaid Services (CMS) to continue to be available to

participants in the State's Medicaid programs and those who support them. These flexibilities are outlined on the Division's Actions Related to COVID-19 web page.

The federal PHE was last extended in October and is currently scheduled to end in January 2023, with a possible final extension after January 2023. However, the Division is now making plans to unwind certain flexibilities and return to normal operations as outlined in Division policy. This will include a return to inperson planning meetings on April 1, 2023, in alignment with Division Medical Policy Manual chapters 1620D (ALTCS members), and 1650 (DD-only members). Both DDD and AHCCCS as well as several other states have advocated for a reduction in the number of required in-person planning meetings to be held each year with CMS, but they have not approved this request for any state.

Planning meetings are the core of the work DDD does in helping its members live self-directed, healthy, and meaningful lives. The personal connection developed between a Support Coordinator and member is key to helping each member achieve their goals and live the life they want to live. In-person planning meetings are necessary to ensure Support Coordinators can truly assess each member's health and well-being in their living environment. This includes seeing their entire living situation to ensure they have what they need to meet their essential needs and are free from abuse, neglect, or exploitation which is difficult to determine through a virtual medium.

Flexibilites that will be unwound in April 2023 include:

- Remote Support Coordinator visits will return to in-person.
- Notification requirements to DDD for Qualified Vendors for changes to service delivery or service location.
- PRC meeting format and Paper Review.
- Requiring Qualified vendors to hold a place in the group home or developmental home if a Member
 or family temporarily moves out of a group home or developmental home to their family home due to
 group home or developmental home staffing issues or COVID-19 concerns/mitigation strategies.
- DDD will rescind the use of Remote Learning Supports, including published guidance for Support Coordinators to assess for this support.
- DDD will rescind the Assessing Risk Document, defer to posted CDC guidance.

ARPA HCBS Directed Payments SFY 2022 Update

Providers have until February 28, 2023, to expend SFY 2022 ARPA HCBS Directed Payment funds.

AHCCCS has previously communicated that the State Fiscal Year (SFY) 2022 ARP HCBS directed payments made by Managed Care Organizations (MCOs) in April/May 2022 must be spent by December 31, 2022, for expenses that occurred between January and December of 2022.

AHCCCS has extended the deadline to spend ARP SFY 2022 HCBS-directed payments to February 28, 2023, for expenses that occurred between January 2022 and February 2023. <u>Previous guidance</u> outlines how these funds must be used. All prior guidance is applicable, except for the time period to spend the funds, which is now extended until February 28, 2023.

2023 Provider Meeting Schedule

The Division has updated the Provider Meeting Schedule for 2023 which now includes Home Health Services. The schedule is below and also available on the Division's website.

Statewide 2023 Virtual Qualified Vendor Provider Meeting Schedule

In-Home Services - January 12. 2023, 10:00 a.m. – 12:00 p.m.

- Join ZoomGov Meeting https://azdes.zoomgov.com/j/1612241665
- Meeting ID: 161 224 1665
- Join by phone 669 254 5252

Home Health Services - February 9, 2023, 10:00 a.m. - 12:00 p.m.

- Join ZoomGov Meeting https://azdes.zoomgov.com/j/1601113667
- Meeting ID: 160 111 3667
- Join by phone (669)-254-5252

Day Program/Employment/Transportation Services - March 9, 2023, 10:00 a.m. - 12:00 p.m.

- Join ZoomGov Meeting https://azdes.zoomgov.com/j/1611401558
- Meeting ID: 161 140 1558
- Join by phone (669)-254-5252

Therapy Services - April 13, 2023, 10:00 a.m. - 12:00 p.m.

- Join ZoomGov Meeting https://azdes.zoomgov.com/j/1617793485
- Meeting ID: 161 779 3485
- Join by phone (669)-254-5252

Developmental Home/All Group Home Services - May 11, 2023, 10:00 a.m. - 12:00 p.m.

- Join ZoomGov Meeting https://azdes.zoomgov.com/j/1610585435
- Meeting ID: 161 058 5435
- Join by phone (669)-254-5252

In-Home Services - June 8, 2023, 10:00 a.m. - 12:00 p.m.

- Join ZoomGov Meeting https://azdes.zoomgov.com/j/1611955369
- Meeting ID: 161 195 5369
- Join by phone (669)-254-5252

Home Health Services - August 10, 2023, 10:00 a.m. - 12:00 p.m.

- Join ZoomGov Meeting https://azdes.zoomgov.com/j/1610051132
- Meeting ID: 161 005 1132
- Join by phone (669)-254-5252

Day Program/Employment/Transportation Services - September 14, 2023, 10:00 a.m. – 12:00 p.m.

- Join ZoomGov Meeting https://azdes.zoomgov.com/j/1604265607
- Meeting ID: 160 426 5607
- Join by phone (669)-254-5252

Therapy Services - October 12, 2023, 10:00 a.m. - 12:00 p.m.

- Join ZoomGov Meeting https://azdes.zoomgov.com/j/1604919788
- Meeting ID: 160 491 9788
- Join by phone (669)-254-5252

Developmental Home/All Group Home Services - November 9, 2023, 10:00 a.m. – 12:00 p.m.

- Join ZoomGov Meeting https://azdes.zoomgov.com/j/1608840259
- Meeting ID: 160 884 0259
- Join by phone (669)-254-5252

The Division's Provider Network Support team will continue to send out email reminders and login details to Qualified Vendors prior to the applicable Provider Meeting. Agenda item requests can be submitted using this <u>Google Form</u>. If you have any questions please contact the Provider Network Support team at <u>providernetworksupport@azdes.gov</u>.

Therapy Reminders and Updates

Certified Plan of Care (CPOC)

A Certified Plan of Care (CPOC) is required before therapy services can be authorized for members. The CPOC must contain at a minimum:

- The member's treatment diagnosis,
- The long-term treatment goals,
- The type, duration and frequency of therapy services,
- Discharge criteria,
- The signature and professional identity of the person who established the plan of care, and
- The date it was established

In order for the Support Coordinator to authorize the service correctly, the CPOC must also include:

- The length of each session (ie. 30 minutes, 1hr.),
- The frequency of each session (ie. weekly, 2 x per month), and
- How long the service will be needed (ie. 6 months, 52 weeks)

New CPOCs should be submitted 30 days before the current authorization's expiration date to prevent any issues in new authorizations from being entered and to avoid gaps in service. If it is not possible to submit the new CPOC 30 days in advance, please discuss with the member's planning team in advance to see how barriers can be addressed. More information about the CPOC can be found in Provider Manual Chapter 37 Therapy Services - Occupational, Physical and Speech Language.

Therapy Billing

As part of the Division's C2F Initiative, DDD has implemented the WellSky billing system that utilizes the Healthcare Common Procedure Coding System (HCPCS), and standard Centers for Medicare and Medicaid Services (CMS) claims forms for submitted claims.

When the system was first implemented, the need for separate codes for Swallowing/Feeding therapy was identified. The Division has developed a solution to address this need and effective January 1, 2023, these codes will be available for billing. The codes to be used by Occupational Therapy and Speech Therapy providers are:

- 92526 Treatment for swallowing dysfunction and/or oral function for feeding
- 92610 Evaluation for feeding/swallowing.

Support Coordinators who have members that need feeding or swallowing therapy are adjusting FOCUS authorizations for members that receive swallowing and feeding therapy services from a Speech-Language Pathologist or Occupational Therapist. Current authorizations for OTA and STA that include Feeding/

Swallowing treatment with regular therapy sessions will be adjusted and new authorizations will be entered, separating the Feeding/Swallowing treatment from regular therapy sessions.

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

- 92507 Speech therapy 1 unit per Date of Service (DOS)
- 92523 Speech therapy evaluation 1 unit per DOS
- 92526 Feeding/swallowing therapy 1 unit per DOS
- 92610 Feeding/swallowing evaluation 1 unit per DOS
- 97162 Physical therapy evaluation 1 unit per DOS
- 97166 Occupational therapy evaluation 1 unit per DOS
- 97530 Physical therapy service 6 units per DOS
- 97535 Occupational therapy service 8 units per DOS

Additional information about submitting these claims is available in the <u>DDD Provider Coding Guide</u>.

Group Home Monitoring Pilot Program - House Bill 2865

House Bill 2865 (HB 2865) was passed by the Arizona Legislature and signed into law in June 2022. The legislation requires the Division to contract with the Arizona Center for Disability Law (ACDL) to implement a 3-year pilot program, beginning January 1, 2023, which includes:

- ACDL monitoring group homes that serve members with complex behavioral needs, and
- ACDL conducting quality of care complaint investigations for group homes.

The Division will establish a process to identify group homes that support members with complex behavioral needs and refer those homes to ACDL for monitoring. For purposes of the Group Home Monitoring Pilot Program, members with complex needs are defined as members:

- with dual disorders (I/DD and psychiatric/behavioral health disorders), AND
- who also engage in challenging behaviors that impact the member's daily functioning or quality of life such as physical aggression, self-injurious behavior, elopement, property destruction, danger to self, or danger to others.

ACDL will monitor the following areas during the Group Home Monitoring Pilot Program:

- If the members received services identified in their person-centered service plans, including medication monitoring and habilitation treatment, as applicable.
- If the provision of services identified in the person-centered service plan has been effective in addressing the member's complex needs.
- If the services have resulted in a reduction in behaviors that interfered with the ability of members to live safely in the community.
- If all physical interventions used by the group home staff complied with the member's Behavior Plan and applicable state laws.

What Can Group Homes Do to Prepare?

- Ensure Direct Support Professionals (DSP) are aware of the pilot program.
- Ensure DSPs follow the agency's established protocols to verify the identity of any monitors or investigators prior to admission to any group home.
- Ensure Current Documentation: ACDL will need access to various documents during the Group Home

Monitoring Pilot Program. Group Home vendors should ensure homes have current versions of the following documents available for the ACDL monitors:

- Current Behavior Plans (Current/Approved)
 - Work with the Support Coordinator and Planning Team to ensure all members who need a Behavior Plan have an active and approved plan in place. See the Resource Highlights section below if assistance is needed.
 - Ensure staff members are trained on how to implement the Behavior Plans.
 - Ensure staff members are documenting the behavioral data related to the Behavior Plans.
- Person-Centered Service Plans (including 90-day updates)
- Behavioral Data/Tracking
- Habilitation Goal Daily Documentation
- Habilitation and Behavioral Monthly Progress Notes

Resource Highlights

- The Division will host an optional educational forum on January 27, 2023, from 9:00 a.m. 11:00 a.m. for interested Group Homes vendors. The educational session will be virtual using Zoom, https://azdes.zoomgov.com/j/1613269381. Please contact providernetworksupport@azdes.gov for questions regarding the educational session. Educational objectives for this forum include:
 - Details regarding House Bill 2865
 - The role of ACDL and the Group Homes during Group Home Monitoring and Quality of Care investigations
 - Refresher training regarding the Program Review Committee process
 - Information about the Behavior Plan Writing Workshop training available to Qualified Vendors
 - To join the educational session via Zoom, https://azdes.zoomgov.com/j/1613269381
 Zoom Meeting ID: 161 326 9381
 - +1 669 254 5252 US
- House Bill 2865 is the authority outlining the pilot program.
- Behavior Plan Writing Workshops are available through the Division. Please email dddstatewidetraining@azdes.gov for more information and registration.
- For an editable version of the Standardized Behavior Plan Template, additional resources are available in the <u>PRC Resource Drive</u>.
- For questions or technical assistance related to writing Behavior Plans or the PRC process, contact your local PRC District.
 - District Central DDDCentralRegionPRC@azdes.gov
 - District East <u>DDDEastRegionPRC@azdes.gov</u>
 - District North DDDNorthPRC@azdes.gov
 - District South <u>DDDD2PRC@azdes.gov</u>
 - District West <u>DDDWESTPRC@azdes.gov</u>

Questions about House Bill 2865 and this Pilot Program can be submitted via email to DDDQMProgramMonitoring@azdes.gov.

DES Article 9 Rulemaking Update

The Division of Developmental Disabilities (DDD) has been working with stakeholders to revise the DDD rules found in Title 6, Chapter 6, Article 9 of the Arizona Administrative Code (<u>6 A.A.C. 6, Article 9 - Managing Inappropriate Behaviors</u>) over the past two years. The revisions are being made per the governing laws, best practices, and needs of the members DDD serves. The Department will engage our stakeholder community again with that goal in mind and because of feedback regarding the Notice of Final Rulemaking expressed during the Governor's Regulatory Review Council's (GRRC's) Study Session on November 29, 2022. This will be done to reach a better understanding of the proposed revisions.

The Department filed a formal Notice of Termination of Rulemaking with the Secretary of State on Monday, December 5, 2022. The Department's goal is to produce rules and policies that support high standards of service delivery. The Department will continue to work with the stakeholder community as it pursues policy changes and Article 9 revisions to meet this goal.

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, January 5, 2023, from 6:00 p.m. to 8:00 p.m. Please share this information with members and families and encourage them to participate at the next event. The town hall schedule and instructions to join via the Internet or phone can be found bit.ly/dddtownhall.

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, https://des.az.gov/services/disabilities/developmental-disabilities/vendors-providers/vendor-announcements.

Report Fraud, Waste, Abuse and Misconduct

Report to DDD

- Call DDD at 1-877-822-5799
- Send an email to dddfwa@azdes.gov
- Send a letter to DES/DDD

Attn: Corporate Compliance Unit

1789 W Jefferson St.

Mail Drop 2HA1

Phoenix, AZ 85007

• Complete this online form.

Report to AHCCCS

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 AHCCCSFraud@azahcccs.gov.