

Monthly Provider Call

July 7, 2016

9am – 11am

EVV

1. What are the minimum number of hours a client can work to be qualified under Supports Waiver Supported Employment?

Answer: There is no minimum number of hours at this time that the individual has to work to qualify for SE services. However, SE services are only billed when the job coach is following up or assisting the individual with work related activities. The total of Supports Waiver SE individual, SW prevoc and SW day hab combined cannot exceed 5 hours a day. SW Group employment is a per diem and cannot be billed on the same day as other SW SE/Prevoc/Day Hab services.

2. Will the EVV training site be available for training before Supported Employment becomes effective Sept. 1, 2016? If not, why?

Answer: Providers of Supported Employment already have access to the production LaSRS system. If additional training is needed for Supported Employment services, then please contact SRI prior to September 1 to set up a refresher training on the actual clock in/out process within LaSRS.

3. Once you clock out the client from morning transportation and services check in starts, do you sign them in on payroll at time service start? Example: arrive at worksite, clock out morning transportation at 07:49am. Work starts at 8:00am or should work start at 07:49am when you arrive getting off the van going into the building preparing to start work?

Answer: The time for which you clock a participant into a service once they have arrived at the center is up to the provider agency. You should clock them in when the services are ready to be delivered. The time you put on an individual's timesheet for payment is up to the provider agency. It is recognized that all supported employment time may not match actual hours worked.

CMS Settings

1. For consumers who receive ACS services with one provider, but day hab or supported employment with another provider, is OCDD or Support Coordination encouraging those consumers to switch ACS providers so that all services are delivered by one provider?

Answer: No we are not encouraging anyone to change providers. It is our intent to work with each provider to assist with coming into compliance with the rule. There has not been nor is there currently any issues with a person wanting to access multiple providers.

2. Are providers being encouraged to offer supported employment so that they do not lose their consumers? Employment is a big part with the Settings Rule.

Answer: As an employment first state, we have been encouraging providers to work with people evaluating where they are at, what they would like to be doing and where it makes sense to assist

people with locating employment even prior to the Settings Rule. We are asking that provides continue doing this.

3. **Person-Centered Planning/Living Conditions/Rights:** consumers who are competent majors with family involvement; if the family does not allow the consumer to participate in planning meetings or “over rule” a consumers wishes, which are not a health and safety concern, how do they want providers to handle these situations to ensure compliance with the Settings Rule?

Answer: In these types of situations, we are going to have to work together to come up with strategies for how we handle this. Some initial thoughts in terms of strategies would include partnering together to assure that we provide education to individuals, families, and other identified entities; we need to look at training opportunities with SC agencies related to pc thinking/planning to assist them with better facilitating and maneuvering these types of situations.

RN Delegation

1. Providers are being asked to have current RN Dels and verification of staff training in the home (reference CMIS service log). Do not have a problem providing them upon request, but keeping up to date RN Dels in home is very difficult. Licensing requires that they be kept in the provider’s permanent file.

Answer: Providers are not required to keep RN Dels and verification of staff training in the home; however, these documents are required to be retained at the agency’s office. The provider is required to make these documents available upon request by any appropriate office (Support Coordination, LGE, OCDD State Office, Health Standards, etc.). Providers are expected to keep in the home a listing of current medications and dosages. This can be through a MAR that is updated with each medication change, or a medical report completed at a doctor’s visit, etc. The intent is that it is easy to ascertain the current medication regimen for the participant.

General Discussion:

1. What were the major issues discovered in initial EVV implementation?
 - a. Providers not meeting the ratio requirements of staff to participants (too little staff for the number of participants served).
 - b. Services prior authorized not provided (Supported Employment was prior authorized but Day Habilitation services were provided).
 - c. Overlaps within service types – a staff person cannot supervise both Day Habilitation and Supported Employment services at the same time due to the nature of the services.
2. Mandatory electronic clock in/out for Supported Employment and Center Based Respite goes into effect 9/1/16.
3. OCDD is currently reviewing the list of providers who are not using the mandatory electronic clock in/out.