## Agenda Item

### Welcome / Introductions

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<tr>
<th>Aging Services</th>
<th>Summary of Discussion</th>
<th>Requests and Follow-Up</th>
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<tr>
<td>Jeff Clark</td>
<td>• Older Americans Act (OAA) Title III services and additional State General Fund programs for older adults and adults with disabilities are administered by the Aging Division, Community Living Section.</td>
<td>• Attached presentation</td>
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<td>• Community Living Section oversees the senior centers and the other providers which deliver these services.</td>
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<td>• Title III – B support services provides services for individuals with the greatest needs. These individuals are over 60 and show a need for services. These services include health services, socialization, support services, transportation and legal services. These services are designed to provide access to services to help older adults to remain independent in their community. Support services include chore type services. Legal services covers the entire state through Legal Aid of Wyoming at no cost to the individual or a donation of their choosing.</td>
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<td>• Title III – C nutrition programs have two sections. Title III – C1 (Congregate meals) and Title III – C2 (Home-delivered meals). Congregate meals are conducted at the senior center. Individuals who qualify for this program are 60 or older and show the need. Nutrition programs can serve individuals under 60 if they are the spouse of an individual over 60 or if they are a disabled individuals who resides with a person who is over 60. Home-delivered meals are primarily for individuals show are home bound or geographically isolated.</td>
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<td>• Title III – D disease prevention and health promotion program. These programs are generally offered to large groups like the senior center. These services include Tai Chi and Chronic Disease Self-Management Program.</td>
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<td>• Title III – E national family caregiver support program. This program is intended to help caregivers who are supporting the older adult. This program helps to relieve stresses of the caregiver. The caregiver must be 18 or older and provide care for an individual who is 60 or older or who is diagnosed with Alzheimer’s or a dementia related disorder with...</td>
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| Neurological or organic brain dysfunction. This program is also available for caregivers who are over 55 providing care to an individual 17 or younger. The child must live with the primary caregiver who has legal custody or guardianship or who is raising the child informally. Services include information, assistance, counseling and support groups, respite care and supplemental services. Respite care services take place in the home or possibly in the caregivers home and is limited to 50 hours per month.  
  • Wyoming Home Services is another program offered. This is a social program to prevent premature institutionalization. This program is fund by all State General Funds. This helps to promote self-sufficiency, prevent abuse, neglect and exploitation. This is for an individual 18 or older in need of services. Services include care coordination, homemaking service, PERS, personal care, chore services, home modifications, respite care, medication set-up and adult day care.  
  • Questions can be directed to the Aging Division or directly to the service providers. There is a list of providers on the Division’s website.  
  • Every county does offer every program. Some counties might have limited resources or providers. |                                                                                              |                        |
| Waiver amendment update  
  Transition Plan –  
  Manual and training | • We are currently developing a transition plan to roll out changes to the waiver.  
  • The new case manager and case management agency qualifications were attached to a bulletin that was sent out as well as posted in the resources section on our website. Agency qualifications will now require agencies to be a registered agency with the Secretary of State. The only exception to this is the County Public Health agencies. Compliance for this is not due July 1st. We will give a transition period for this. We will update our agency list and request the certificate within 60 days of July 1st. The process of completing this online is pretty much an instant certificate. If processed through the mail it is 3 to 5 days for processing. The County Public Health agencies will be required to send us updated administrator contact information. These can be sent to the CCW waivers email or faxed to CCW. We will be updating our system to allow back up agencies and allow agencies to change their own case managers as well. |                                                                                              |                        |
| Waiver amendment update  
  Transition Plan –  
  Person Centered Planning training | • We are currently working with our consulting firm in developing the case manager training and manual. We will distribute the manual once we have a deliverable product, for comment. We are also working to develop new forms and operations along with the manual. We will have a provider manual, case manager manual, and a participant handbook. This will include all aspects of service planning, incident reporting, addressing risks and needs, etc. |                                                                                              |                        |
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<td>• The training modules we are working on as well are expected to be completed late summer/early fall. There will be live sessions as well as webinar trainings. These trainings will address person-centered planning requirements as well as have modules for case managers and caregivers. These trainings will also touch on participant rights and right modifications, e.g., a memory care unit restricting access to the greater community for participant safety.</td>
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| Waiver amendment update Transition Plan – Participant Direction employer manual and program materials | • We are developing a participant direction manual and new documentation, recognizing that we haven’t given enough detailed guidance to support participant direction. The manual is designed to support the participant or their employer of record. This manual will help direct them to understand their duties and responsibilities as an employer and how to meet their needs and manage their services within their budget.  
• We are also developing a budget worksheet. This will support the case manager to estimate the frequency and duration of caregiver tasks and guide the development of the participant-directed budget.  
• ACES$ forms and instructions will still exist and will remain focused on the employer/employee enrollment and payroll processing functions, e.g., applying for an EIN, timesheet instructions, and tax forms. The ACES$ materials supplement the Division’s participant direction manual. |             |
| Waiver amendment update Transition Plan – Service updates | • CMS has approved for us to continue to allow two home-delivered meals per day.  
• We have added a personal support service (home health agencies can provide). This is effective now. This rolled out before July 1st due to COVID. Senior centers can also deliver this service. This allows for basic personal care/homemaker-like tasks that do not require a CNA to complete.  
• Personal support services allow homemaker tasks to occur when not incidental to a personal care task. The personal support services do not have to be provided by the same provider. However, the case manager must coordinate the services so that each provider understands their respective responsibilities and there is no duplication of services. The amendment for July 1st does make this service permanent.  
• Home health aide services must still include assistance with personal care which requires a CNA, in order to include homemaker tasks in the service plan, and homemaker tasks performed by a CNA must still be incidental to the personal care tasks delivered during that visit, i.e., homemaker tasks cannot be the only reason for a CNA visit.  
• We are working on a rate rebasing study for the entire waiver program. We invited providers to participate in the study and rate setting methodologies. A survey will be |             |
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<td>Waiver amendment update Transition Plan – EMWS</td>
<td>• We are working with the case management system to convert our pilot service planning into the system. We will provide visuals on this when we have new screens to demonstrate. There will also be a test environment for this as well. The work from the pilot will be automated, e.g. assessments question skip patterns. EMWS will pull information from the assessments and summarize so that they can be printed. We will not be doing another focus group for this. We will have training on the case management system as well as the process and how the service plan is put together.</td>
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| Waiver amendment update Appendix K/COVID-19 | • The ALF and personal care providers must adjust their claims with Conduent in order to receive enhanced rates. Case managers do not need to do anything in EMWS.  
• When we have new COVID updates they will be going out with our GovDelivery system. |  |
| Case Manager updates Quality assurance | • We are now conducting some random as well as some focused reviews on plans. This QA process is to ensure services are provided and that policies and procedures are followed. Through our reviews, we might ask to have corrections made to the plan and EMWS. If warranted, we also might forward to PI or MFCU for their review. The review could also result in a corrective action. Some reviews might only warrant a follow up email or phone call to talk about the review. Other reviews might be fine and you may not know a review was conducted.  
• The QA process is also a learning opportunity for us. It allows us some feedback on areas where we might need more training or communications. |  |
| Case Manager Updates Monthly Evaluations | • Monthly evaluations are required to document that case management services were provided and should be promptly uploaded in EMWS. With the new service planning processes, case managers will no longer have a year to get them uploaded. Documentation of incidents reported and follow up activities should also be added to the evaluation.  
• Third parties are also reviewing these as part of their utilization reviews and review of services provided. |  |
<p>| Case Manager Updates Skilled nursing vendor | • The skilled nursing Utilization Management (UM) vendor is moving from Comagine to Optum. The process has not changed just the vendor. Optum does not yet have the approval letter in their system we are asking for this to be added as soon as possible. If the letter is needed right away providers can ask that the letter be faxed to them. |  |
| Case Manager Updates Webpage review | • We presented our webpage and walked through where to find all the information |  |</p>
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<td>Case Manager Updates</td>
<td><strong>CCW group email</strong></td>
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<td>• <a href="mailto:ccw.waivers@wyo.gov">ccw.waivers@wyo.gov</a> – all communications for the community choices waiver should go to this email.</td>
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<td>• <a href="mailto:ltcunit@wyo.gov">ltcunit@wyo.gov</a> – all communications regarding Medicaid eligibility should go to this email.</td>
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<td>• <a href="mailto:ccw.emws.helpdesk@wyo.gov">ccw.emws.helpdesk@wyo.gov</a> – all communications for technical issues with EMWS should go to this email.</td>
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<td>EVV update</td>
<td>• Self-direction logs are still required. This serves as documentation to prove that the service was performed and must be maintained for six years past the date of service. The Division hopes to eventually phase out the logs if the required data can be captured by the EVV system.</td>
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<td>• EVV implementation is still in process. The self-direct portion is moving along faster than the agency option. The agency option timeline is for mid-2021. This will also have trainings involved.</td>
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<td>• EVV will primarily be used through an app on the caregiver’s phone and will translate into a timesheet in the ACES$ portal for self-directed services. The agency-based option should be similar with a web-based portal.</td>
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<td>• EVV is currently only required by the 21st Century Cures Act for personal care and personal care-like services. Home health services are required to use EVV by 2023.</td>
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<td>ACESS$ complaint review</td>
<td>• Paige presented on the ACESS$ formal complaint process. Everyone has the right and ability to file a complaint. This process starts by calling the customer service. If this complaint isn’t resolved there it can move up the chain by calling Paige. Please review the attached complaint process for the full process and detail of the process.</td>
<td>• Attached documentation</td>
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<td></td>
<td>• <a href="mailto:supportwy@mycil.org">supportwy@mycil.org</a></td>
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<td>Q&amp;A town hall call</td>
<td>• The first Q&amp;A call went well, so we will continue with the call for July. There is no agenda for these calls just come prepared with your questions.</td>
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<td>• July 28, 2020 12:00 – 1:00 PM</td>
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<td>Next Call</td>
<td>• August 25, 2020 2:30 – 4:30 PM - Please submit any agenda items you would like to discuss.</td>
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*Supporting Wyoming Residents to achieve independence, maintain health and safety, and fully participate in community living through access to high quality, cost effective community-based services.*
All Employers have the right to file a formal complaint (also called a grievance). If there is a problem with the services being provided by ACES$, you may file a formal complaint. Filing a formal complaint does not affect the services or supports you receive from ACES$ in a negative way and may help improve those services and supports over time.

Before you file a formal complaint, you should reach out to ACES$ customer service (1-844-500-3815) and the Director of Wyoming Programs, Paige Kelley (570-344-7211, ext. 24101 or pkelley@mycil.org) to help resolve the problem. If that does not address the issue, the next step would be to file a formal complaint.

All formal complaints must be sent in writing, either through an email, fax or other electronic format to the ACES$ Chief Operations Officer (see contact information below). Complainant must include email address in order to receive future communications from ACES$.

The ACES$ Chief Operations Officer will respond to the complainant, within two (2) working days by email, to acknowledge that the complaint was received.

The formal complaint will be reviewed by the ACES$ Chief Operations Officer, a decision will be made and action taken (if needed), and an email response sent to the complainant within five (5) working days after receipt of the formal complaint.

If the decision/action taken by the ACES$ Chief Operations Officer does not resolve the issue to your satisfaction, you may send a written communication, either through an email, fax or other electronic format, requesting that the complaint stay active. This request must be made within five (5) working days from the day you receive the communication about what decision/action was taken by the ACES$ Chief Operations Officer.

The formal complaint and decision/action taken by the ACES$ Chief Operations Officer will then be sent by email to the Chief Executive Officer (CEO) for further review, decision, and action within five (5) working days of the receipt of your request to keep the formal complaint active.

The decision/action taken by the CEO will be made and communicated to you via email within five (5) working days of the CEO’s receipt of the formal request to keep the complaint active.

If the decision/action taken by the CEO does not resolve the issue, you may ask that the formal complaint be sent to the Executive Committee. This request must be written, either through an email, fax or other electronic format, and made within five (5) working days from the day you receive the communication about what decision/action was taken by the CEO.

If the Executive Committee rejects or does not agree with the issues included in the complaint, the decision/action taken by the CEO will remain final and the formal complaint will be closed.

If the Executive Committee decides the complaint should be heard, the Executive Committee will pick a hearing date and inform you of the time. After the hearing the Executive Committee will review the final facts and make a decision/take action based on all the previous actions and information provided.

The Executive Committee will communicate via email the final decision/action taken within five (5) working days of the hearing date.

The decision or actions taken at that time by the Executive Committee will be final and no further action or decisions will be made in regard to the specific formal complaint.

Submit Formal Complaints To:

ACES$ Chief Operations Officer
Jeff Thomas
jthomas@mycil.org
Fax: 570-344-7218
1142 Sanderson Avenue Scranton, PA 1850

ACES$ Chief Executive Officer/Executive Committee
Tim Moran
tmoran@mycil.org
1142 Sanderson Avenue Scranont, PA 18509

Employer Signature: ___________________________ Date: ___________________________
Wyoming Department of Health

Programs for Older Adults

Aging Division
Community Living Section

June 23, 2020
Community Living Section

• Role of the State Unit on Aging
  - State plan development and administration
  - Planning, policy development, administration, coordination, priority setting, and evaluation of all state activities related to the objectives of the OAA
  - Distribution of funds throughout the state service programs
  - Services to people with greatest needs
Title III-B Support Services Program

Betty Sones
Program Manager
Program Review

- Services are designed to:
  - Provide access to services that allow older adults to remain independent and continue to be active members in their communities
  - Provide health education and information to increase the quality of life of older Americans, especially for those who have the greatest economic needs and those with limited English proficiency
  - Promote physical activities and a healthy lifestyle to prevent premature institutionalization
Eligibility

- Age 60 and Older
- Economically and socially vulnerable adults, 60 and older, and rural residents
- Older adults with the greatest economic needs and those with limited English proficiency
Services Offered

• Services may include the following:
  – Health services
  – Socialization
  – Support services
  – Transportation
  – Legal Services
Wyoming Department of Health

Title III-C Nutrition Programs

Kaitlyn Livingston, RD
Nutrition Program Manager
Program Review

• Title III-C includes
  - Title III-C1 Congregate Meals
  - Title III-C2 Home Delivered Meals

• Program Purpose
  - To reduce hunger and food insecurity while promoting socialization and the health and well-being of older individuals
Eligibility

- Title III-C1 Congregate Meals
  - Age 60 and older and their spouse
  - Disabled persons under age 60 who reside with adults over 60 years of age or reside in housing facilities occupied primarily by adults over age 60
  - Volunteers under 60 years of age
  - Staff members age 60 years and older
Eligibility

• **Title III-C2 Home Delivered Meals**
  – Age 60 and older who are homebound OR who are geographically isolated
  – Disabled person under age 60 who resides with eligible participant
  – Spouses of eligible participants
Title III-D Disease Prevention and Health Promotion Program

Betty Sones
Program Manager
Services Offered

- Services offered include:
  - Tai Chi: Moving for Better Balance Project (TCMFBB) and Tai Chi for Arthritis (TCA)
  - Stanford’s Chronic Disease Self-Management Program (CDSMP)
Wyoming Department of Health

Title III-E National Family Caregiver Support Program

Jeanne Scheneman
Program Manager
Program Review

• The program is designed to help Caregivers, 18 and older, get relief from the burden of giving care to a loved one
• The client is the Caregiver, not the Care Receiver (loved one)
Eligibility

• Who is the Caregiver?
  - Relative
  - Neighbor
  - Spouse
  - Friend
  - Adult son or daughter
  - Sibling
Eligibility

- Who is the Caregiver?
  - Caring for someone who is 60 or older
  - Caring for a person, of any age, with Alzheimer’s disease or dementia related disorder with neurological and organic brain dysfunction
Eligibility

- **Who is the Caregiver?**
  - *An Older Relative Caregiver*
    - Who is 55 years old or older
    - Of a child who is 17 years of age or younger
    - Must live with the child and be the primary Caregiver
    - Must have a legal relationship to the child
      - Legal custody or guardianship; or
      - Raising the child informally
    - Caregiver of an adult OR parent of an adult, age 18-59, with a disability (started 10/1/2016)
Services Offered

• Services offered through the program include:
  - Information
  - Assistance
  - Counseling/Support Groups/Education
  - Respite
  - Supplemental Services
Program Review

- Social program
- Mandated by the State of Wyoming through legislation.
- Fully funded by the State General Fund
- Granted to 1 provider in each county
  - Total of 23 providers
  - Each provider can provide up to 10 services
Program Review

• Goals of the program:
  - Preventing inappropriate or premature institutionalization
  - Fostering self-sufficiency
  - Preventing abuse, neglect or exploitation
  - Maintaining individuals in the least restrictive and safe environment
Eligibility

- At least 18 years of age
- In need of program services
  - Determined through an on-going assessment to be “at-risk” of premature institutionalization
Services Offered

- The program consists of the following services:
  - Care coordination
  - Homemaking service
  - P.E.R.S. (Lifeline, etc.)
  - Personal Care
  - Chore Services
  - Home modifications
  - Respite care
  - Medication set-up
  - Adult day care
Wyoming Department of Health
Aging Division
Community Living Section
2300 Capitol Ave, 4th Floor
Cheyenne, WY 82002

https://health.wyo.gov/aging/communityliving/
https://www.facebook.com/agingdivision/

Phone: (307) 777-7995
Toll Free: (800) 442-2766

Email: wyaging@wyo.gov