

AGENDA

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TOPICS

Participant direction payroll timelines

The Division of Healthcare Financing (Division) would like to remind case managers of the new guidance for electronic visit verification (EVV) requirements for participant-directed services, which went into effect on January 1, 2021. Time submissions and corrections for processing of payroll must be submitted within two (2) pay cycles of when the service is provided. For example, time worked during the February 1st - 15th pay cycle may be submitted through March 15th. Please remember that pay cycles run from the first to the fifteenth, and the sixteenth to the end of the month.

After the allotted time, submissions and corrections will no longer qualify for payment. This applies to employee time or corrections submitted for services provided beginning January 1, 2021. Timesheets for services provided prior to January 1st may be submitted for up to 12 months, in accordance with previous guidance. If an employer or employee of participant-directed services is unsure about the status of any of their EVV shifts, please refer them to their ACES\$ Online account(s), or encourage them to contact ACES\$ directly.

Beginning April 1, 2021, the Direct Support Worker log will no longer be required as this information is being replaced with the EVV process. More information on this subject will be provided in the Required Forms training.

Service plan checklist

The service plan checklist in the Electronic Medicaid Waiver System (EMWS) is designed to ensure the case manager follows the process in a specific order. Assessments cannot be conducted until the entire Assessment and Service Plan Preparations section has been completed.

The Assessment and Service Plan Preparations section includes the functional assessment that demonstrates the participant has met the level of care determination. This section also includes the target population determination that demonstrates the participant meets the minimum target population criteria. This

information, in addition to the rest of the Assessment and Service Plan Preparation section, must be completed before you begin the Assessment section.

The new process flow doesn't have a "Submit Plan of Care" task as the old process flow had. The "Awaiting Target Population Determination" task is the first task the case manager will complete. When this task populates, it is your notification that the renewal or plan is ready and should be monitored closely moving forward. When this task populates, click on the task and then click on the "View Determination" link. This will complete the task and trigger the "Prepare for Initial Visit" task. As the renewal or plan moves forward, the task name will change accordingly.

There is now an option to roll back assessments that have been submitted, in order to allow case managers to modify assessments during the plan development process. A "Rollback" button should be available at the bottom of the *Assessment* screen. The button is found on the last page of the assessment. If the button isn't available, please contact your Benefits and Eligibility Specialist (BES). If you add an assessment that isn't required based on the Participant Profile, you can remove the assessment, if desired, by selecting the red **X** next to the assessment.

As a reminder, when you are working on the Service Plan Development section and have submitted the service request to the provider, the provider has two days to respond. You will not receive a task notifying you of the provider's acknowledgement, so please check EMWS to confirm the provider's acknowledgement and move forward with service plan development.

Searchable CCW provider list

The Division is excited to announce the development and implementation of a searchable CCW provider and case manager list. This list allows interested parties to search for a provider or case manager by service, county, or specific provider. The searchable list is located at <https://wyoimprov.com/agingPublicProviderSearch.aspx>, and can also be found on the home page of the Home and Community-Based Services (HCBS) Section website at <https://health.wyo.gov/healthcarefin/hcbs/>.

Modifications with missing services

If a case manager creates a service plan modification but services are not listed on the modification, do not add the services back in. Adding services back in creates issues with the prior authorization number. Instead, refer these modification issues to the CCW EMWS help desk at ccw.emws.helpdesk@wyo.gov to have the services pulled into the modification. Then the modification can be created.

Navigating the Assessment section in EMWS

Case managers must be sure to use the navigation options at the bottom of the EMWS when completing assessments. By selecting the *Previous* and *Next* buttons at the bottom of the screen, the case manager saves the information that has been entered. If the back button of the web browser is used, the information that was entered into the screen will be lost, and not saved in the assessment. This is especially important to remember when changing answers on an assessment.

Every assessment is not required for every participant. The only required assessment is the Participant Profile. Required assessments for the participant generate based on the answers in the Participant Profile. Case managers can certainly add assessments if they would like, but are not required to do so.

It is important to be patient when using the site. Clicking on tasks and actions multiple times will create issues in the system.

Case manager contact information

Case managers must ensure that their contact information is current and up-to-date in the Contact section EMWS when they are creating or working on a service plan. The Division utilizes this information to contact case managers, and if it is not accurate it makes it difficult to ensure that assistance can be given as needed.

Division required corrections to the service plan

If a service plan is returned to a case manager for corrections, the case manager must ensure that all corrections are made before submitting the plan again. The BES who returned the service plan will note the specific corrections that are required. When a service plan that was developed using the old process is returned, it is important that you check the *Notes* tab in the Plan Mod Links of EMWS for instructions from your BES. For services plans developed after February 1st, you must check the top of the service plan for the note that is displayed with **red lettering**.

Timely submission of service plans

Service plan renewals must be submitted at least 15 calendar days prior to the renewal start date in order to ensure the BES has enough time to review the plan and there is adequate time for PAs to be established prior to the renewal start date. Service plan modifications must be submitted at least seven (7) calendar days prior to the start date. Please ensure that all renewals are submitted in a timely manner. The Division cannot backdate services, so please plan accordingly.

As a reminder, initial service plans will start on the 1st of the month following the month they are submitted, as long as the plan is submitted at least 15 calendar days prior to the start date. For example, if the service plan is submitted on March 20, 2021, the plan start date would be May 1st, since the plan wasn't submitted a full 15 calendar days prior to April 1st. Case managers should plan accordingly.

Change in frequency of CCW Case Manager Support Calls

In order to ensure that all HCBS providers and case managers are receiving regular updates and training opportunities, the Division has implemented separate support calls for providers and case managers of the Community Choices Waiver (CCW) program and Comprehensive and Supports Waiver (DD Waiver) programs. It is unreasonable to expect case managers who deliver services for both programs to attend two calls each month. Therefore, the Division will hold support calls for each program every other month on alternating months. The next CCW Case Manager Support Call will be held on the second Thursday in April (April 8, 2021) at 2:00PM, and subsequent calls will be held in June, August, and October.

WRAP UP

Next call scheduled for April 8, 2021