ADW Q & A Call - November 17, 2015

1. We are looking to clear up a few matters concerning the mileage. If we're understanding this correctly, MTM will provide the transportation for scheduled Medicaid appointments only. We have different situations that arise where our participants need transported because they have no informal support to take them. They are medical-related but not actual pre-scheduled appointments such as blood work prior to day surgery or picking up a prescription from the doctor office. Are we still able to claim this mileage as an essential errand?

Answer: For blood work prior to surgery, your staff could take the participant, but your staff would need to sign up with MTM as a Friends and Family driver and use that mechanism to bill NEMT (non-emergency medical transportation). They would need to call the number on the form about 5 days prior to the appointment to tell MTM that they were transporting the person that day. No mileage for medical appointments or medical testing can be billed to the ADW program as per mandate from the federal government. To pick up the prescription from the doctor's office, that would be an essential errand and you can bill ADW non-medical transportation to do that.

2. If we have a participant that is to have day surgery in Clarksburg (approximately 60 miles away), will MTM take them to the surgery and then come back later and pick them up? If not and the PA takes them to the hospital for the surgery, they are not able to stay because they cannot be paid for the time. They would need to leave, drive the 60 miles home and then drive back to pick up the participant. This would be twice the mileage necessary.

Answer: You are correct for the day surgery in that the Personal Attendant can't bill for the wait time because surgery is a Medicaid facility code meaning that once the person gets back into the facility, there are staff available to take them to the bathroom, tend to any other needs they have, etc. If I were the Personal Attendant, I would go off the clock and shop around the area, buy my groceries, whatever, until I could go back and pick up my participant. In the end, if you didn't want the PA to do this, then you could have the participant use MTM. And yes, MTM would come back and get them.

<u>Questions/Comments from the call:</u>

Question a: Clarify the five days' notice as it pertains to being a friends and family MTM driver.

Answer: Actually, according to MTM, you do not need to give five days' notice as a friends and family driver. You can, but it is not a requirement. You can actually call the day of the trip but you still must supply all required information and receive your trip number.

Question b: What about coming home from the hospital? Can we bill NEMT for bringing the member home? Or physical therapy? Can the PA transport member?

Answer: Yes. To and from the hospital or physical therapy facility, as long as the participant is in the car.

Question c: Is there a list of Facility vs Non-Facilities?

Answer: No, but you may contact the Bureau of Senior Services on a case-by-case basis.

Question d: Has there been a decision made about when to use the new PAL?

Answer: You may either do all assessments at once or wait until they become due. It is up to each agency.

Question e: Is the ADW Training Record Form that was handed out recently mandatory?

Answer: Yes, because it contains space for all required information.

Question f: Is it billable if a member calls to request a home visit by the RN?

Answer: Probably not. The ADW program is not providing medical care. If the participant is feeling ill, they should go to their own physician. If they feel they need more hours, then they could request a re-evaluation and you would follow policy for that request and billing.

Question g: Regarding the Care Plan, do we still need to pick a specific day for a doctor's appointment?

Answer: When the Case Manager and RN are creating the Service Plan, they should try to be as specific as possible and list purpose of outings, day(s) of the week, specific destination, frequency, etc. It may be difficult to be this specific for doctor's appointments but most other Essential Errands and Community Activities should include this detail. Any changes to the Plan due to unforeseen circumstances can be documented in the participant's file.

Question h: When will forms be fillable and savable?

Answer: We will offer both fillable pdf and WORD formats when the new forms are posted. The WORD version of the form will include a disclaimer to ensure that no changes have been made to the original content of the form.

Question i: Do you still want MTM travel recorded on the Plan of Care?

Answer: Yes, you still need to include it because part of the time will be billable. It is also part of the participants Service Plan.

Question j: When should be begin using the new ADW Training Record form? We just recently conducted some trainings in July.

Answer: You can begin using the form now, if you wish.

Question k: On page three of the Personal Attendant Log, what do you want in the boxes that say "Time In" and "Time Out:"? The instructions are unclear as to what you want there. And also, the PA may work at different times on different days.

Answer: That was intended to be the time in and out, or the hours that it is projected that the Personal Attendant will be working, for example, Time In: 10:00 a.m. and Time Out: 1:00 p.m., if the PA will normally work three hours per day. It would be completed by the RN when they are developing the Service Plan. The request for this information came from the Medicaid Fraud Division.
As you pointed out, the hours may be different on different days, so we will review the form and the instructions to see if we need to make any changes.

Question l: Is the Personal Attendant Log going to remain the same as the form handed out at training?

Answer: In most respects, yes. There may be some formatting or other changes due to questions or comments made during the training sessions, but for the most part, it will remain the same.

Question m: Is review time of the Personal Attendant Log billable?

Answer: Yes, because you are allowed to bill one unit for review per month.

Question n: Do we have to wait for the Case Manager to sign off on the Personal Attendant Log?

Answer: No. Sometimes you may need to initiate services before the Case Manager can sign it.

Question o: When someone transfers to another agency, when are reviews to be done?

Answer: If it is a Personal Attendant agency transfer, you will have to go ahead and do an initial assessment right away, but you can use the Case Management assessment that is already in place, until it needs to be done again. (It should be attached to the participant's record in CareConnection.) In addition, you do not have to be on the same schedule, but you can align them if you want to whenever the next six-month or annual assessment is due. The Service Plan meeting with the Case Manager and RN is mandatory and is done every six months.

Question p: Can we bill for an initial assessment on a transfer?

Answer: Only if it has not been billed already. Remember, T1001 can only be billed every 300 days but T1002 can be billed once per month.

Question q: For dental and eye appointments, can we bill that as an Essential Errand?

Answer: Yes. Medicaid does not pay for these services.

Question r: What if someone has the flu? Can MTM pick them up that day?

Answer: There is an emergency MTM phone number, (844) 549-8354, and they may be able to provide transportation that day, however, if the Personal Attendant has signed up to be a friends and family driver, they can notify MTM that they are taking the participant, receive their trip number and take them that day.

Question s: Regarding Community Activities and Essential Errands, can the RN make changes to the Service Plan is something changes?

Answer: Yes, there is some leniency. Just be sure to document the reason for the change.

Question t: Is shopping at the mall a Community Activity?

Answer: Yes, within reason.

Question u: When changing to the Personal Attendant Log (PAL), do we need to do a new assessment?

Answer: Every participant needs to be "converted" to the new PAL by May 30, 2016. The switch to the new PAL can be done when the assessment would normally be due or you can do them all at once.