



Developmental Disabilities Administration (DDA) Coordinators of Community Services Meeting

February 18, 2025



Agenda

- Welcome
- Statewide Themes and Trends
- Policy and Program Updates
- Closing and Questions



Statewide Themes and Trends



- Individuals who are denied enrollment or are disenrolled from any of the DDAoperated Medicaid waiver programs must be added to an LTSSMaryland "wave" before reapplying.
- A new waiver application cannot be submitted by the Coordinator of Community Services for the individual unless they have been added to a LTSS *Maryland* wave.
- Coordinators of Community Services should contact the Regional Office if:
 - An individual wants to reapply; or
 - An individual has been globally deactivated and wants to be reactivated.



 Both Initial and Annual Level of Care forms are posted on the DDA's <u>Partnering with CCS</u> webpage.

Level of Care

- . B Initial Level of Care Form English Version
 - Alivel de Atención, Certificado Inicial de Necesidad Español (Initial Level of Care Form Spanish Version)
- Level of Care Recertification Form English Version
 - o 🚇 Nivel de Atención, Nueva Certificación de Necesidad Español (Level of Care Recertification Form Spanish Version)

Why? Coordinators of Community Services must complete the required DDA forms to meet compliance requirements.



- The Level of Care form serves as documentation that an individual is medically eligible to participate in a DDA-operated Medicaid waiver program.
- Pages 59 68 of the <u>Community Pathways Waiver</u> include details regarding the Level of Care. These details also appear in the Community Supports Waiver and Family Supports Waiver.
- The date the Medicaid Application is signed should be the same date listed on the initial Level of Care, per the concurrent eligibility process.

Level of Care Effective Date:

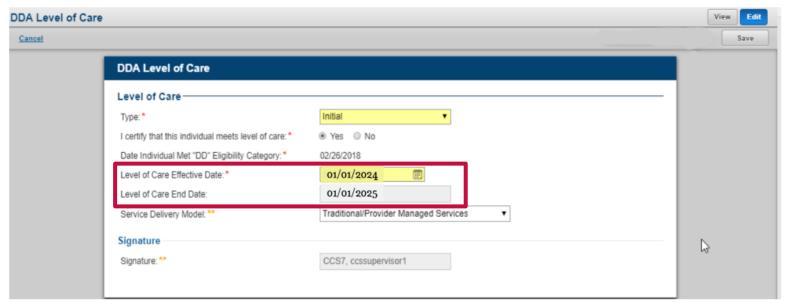
 This date should reflect the same date as the date the MA Waiver Application was signed by the applicant.

The consequences of not complying with the law are: my benefits m be required to pay back the State for benefits received; my case may suspected fraud; and I may be prosecuted for perjury, larceny, are	ay be investigated for and/or Federal health	DDA Level of Care			View Edit Save
care fraud [not limited to Statute 42 U.S.C. sec. 1320a-7b (a) (ii)], using up to \$10,000 per offense and/or federal imprisonment.	e fraud [not limited to Statute 42 U.S.C. sec. 1320á-7b (a) (ii)], which may involve a up to \$10,000 per offense and/or federal imprisonment.		DDA Level of Care		
Signature of Applicant/Recipient	January 1,2024		Level of Care Type: * I certify that this individual meets level of care: *	Initial ▼ • Yes ○ No	
Signature of Witness (If signed with X) Date	te		Level of Care Effective Date: *	01/01/2024	
Signature of Spouse (If applicable) Date	ite		Eaver of Gard End Balls.	04/04/2023	
Signature of Authorized Representative (If applicable)	ite		Service Delivery Model: ** Signature Signature: **	Traditional/Provider Managed Services ▼ CCS7, ccssupervisor1	C _o
DHSSFIA 9709 (REVISED 7-17) Previous editions are obsolete	Page 17 of 17		Signature.	COST, Cosapervisor i	



Level of Care End Date:

 This date should reflect 365 days after the Initial Level of Care effective date





Plan for Coordinators of Community Services coverage challenges

- Open the Person-Centered Plan at the 90-day mark and enter the meeting date as soon as possible.
- Write comprehensive meeting minutes with attendees.
- Supervisors should track plan development to ensure they are meeting timelines.

Why? Coordination of Community Service Agencies will be better prepared to ensure that every plan is completed on time.



Increase in Auto-Extend

- Report barriers to the Regional Office for technical assistance prior to the 20-day submission deadline.
- Urgently prioritize development and submission.
- Plans should not be in clarification for more than five (5) days. Report any barriers to the Regional Office and submit the plan.
- Utilize LTSSMaryland reports to identify a list of all plans in auto-extend with your agency.

Why? Plans in auto-extend delay current service needs, create FMCS payment concerns, prevent duplicate monitoring and follow-up forms, and more.



Virtual Supports is not clearly identified in required forms (1 of 2)

- Virtual Supports is a service that must be specifically noted in the Service Implementation Plan (SIP), outlined in the Person-Centered Plan and uploaded into the documentation section of the Person-Centered Plan.
- Coordinators of Community Services must review the Service Implementation Plan (SIP)
 with the person and their authorized representative and share requested changes with
 the DDA provider.



Virtual Supports is not clearly identified in required forms (2 of 2)

 Coordinators of Community Services must document the quality and effectiveness of all services, including virtual supports, during quarterly monitoring and follow up activities.

Why? Virtual Supports must be agreed by participants and used to support a participant to reach identified outcomes in the Person-Centered Plan.



Monitoring and Follow-Up Visits - Form Submission



- Coordinators of Community Services can complete an in-person monitoring visit anytime up until the LTSSMaryland system-generated due date.
- The monitoring and follow up form must be completed by the due date.
- The "overdue-in progress" 15-day extension allows the Coordinator of Community Services to complete the form.



Monitoring and Follow-Up Visits - Form Submission

The Targeted Case Management service type is "Community Coordination".

- Community Coordination Services are provided when a participant receives funding for community-based services from the DDA. This requires quarterly in-person monitoring visits.
- In the LTSS*Maryland* system, the frequency requirement can be found under the "Type of Review" column of the participant's Monitoring and Follow-Up page.
- The in-person visit must be within the start of the quarter up until the due date.

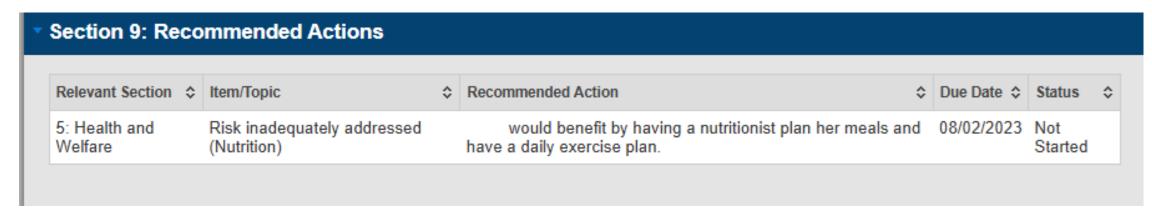
Type Of Review \$	Due Date	\$\tau\$	Active/Inactive \$	Actions	Follow-up for Issues/Risks/Safety/Concerns
Quarterly	09/01/2023	Pending	Inactive	<u>View</u>	
Quarterly	06/01/2023	Submitted	Active	<u>View</u>	



Monitoring and Follow-Up Visits - Form Submission

Recommended Actions (Section 9)

- Use the "Considerations and Confirmation Sources" found within the <u>Monitoring and Follow-Up Guidance</u> to assess health and safety, service delivery, and participant satisfaction with services.
- After discussing with the team, enter recommended actions into the Monitoring and Follow-Up form.
- Make sure to follow-up on recommended actions.





Monitoring and Follow-Up Visits/Form Submission

Electronic Visit Verification (EVV) report reflects less hours of services are being delivered according to what is authorized in the Person-Centered Plan

Understand: Was this the participant's choice? Were there any health and safety concerns while services were not provided? When monitoring the service, was there any progress towards their goals?

Action Steps/Remediation: Talk with the person and their team to understand the situation better. Were there any health and safety concerns when services were not being provided? Does an incident report need to be completed, as per the Policy on Reportable Incidents and Investigations (PORII)? Does the Person-Centered Plan need to be revised? These action steps should be listed in the Recommended Action Section.

Loop Closure: Were the identified action steps taken?



Policy and Program Updates



Appeals

- The Medicaid Fair Hearing is held by the Office of Administrative Hearings (OAH), which is separate from MDH, DDA.
- A fair hearing is also known as an appeal.
- Medicaid released an online appeal form on December 15, 2024. This version provides a confirmation receipt.
 - Full Website access is here: https://health.maryland.gov/mmcp/Pages/medicaid-appeal.aspx
 - Mobile access is here: https://www.cognitoforms.com/MDH3/MedicaidRequestForFairHearing



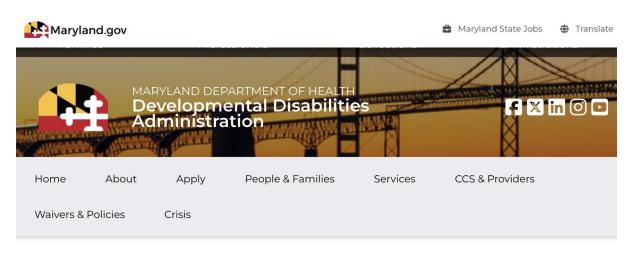
Frequently Asked Questions

What should Coordinators of Community Services do if a family member, participant, provider, or any other team member encourages them to reach out to state legislators or officials, including the Secretary of Health, regarding the Eligibility Determination Division (EDD)?

- Coordinators of Community Services are to work with Eligibility Determination Division case workers and their supervisors to address challenges and concerns.
- DDA Regional Office team members are also available.
- Coordinators of Community Services can inform people and their families of their options to express dissatisfaction, but should not communicate this for them.



Resources and Other Related Activities



Daily Life and Employment

People and Families > Maryland Resources, Support, and Services > Daily Life and Employment

Maryland Statewide Resources

Daily Life and Employment

- Child care
- Food and cash assistance programs
- MD ABLE
- Education and technology supports
- Respite for people cared for by a grandparent



Reminders



Recordings of these meetings are posted on:

- DDA's YouTube Channel Coordinator of Community Services playlist
- DDA's Coordinator of Community
 Services webpage <u>Partnering with</u>
 <u>CCS</u>



Closing

Please submit agenda topics, questions, or details about presenting your agency's accomplishments and ideas for the next meeting to Nicolette Paparoidamis, Director of Coordination of Community Services, at Nicolette.Paparoidamis@maryland.gov.



Questions



