Lilia Teninty

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Topic: Developmental Disabilities

Subject: Updates to service plans in Plan of Care

Applies to (check all that apply):

☐ All DHS employees
☐ Area Agencies on Aging
☐ Aging and People with Disabilities
☐ Self Sufficiency Programs
☒ County DD Program Managers
☒ ODDS Children’s
☒ Residential Services
☐ Child Welfare Programs
☐ County Mental Health Directors
☐ Health Services
☐ Office of Developmental Disabilities Services (ODDS)
☐ ODDS Children’s Intensive
☐ In Home Services
☐ Stabilization and Crisis Unit (SACU)
☐ Other (please specify): Support Service Brokerages; Service Coordinators; Personal Agents

Action required:

Updated 04/03/15 to clarify that the use of the generic provider authorization is not allowed to be used for any PSWs. See highlighted section below for correction/edit to the version that was posted on 03/27/15.

No later than the May 15, 2015, all Plans of Care in eXPRS must be updated to accurately identify the ISP end date of each individual’s ISP. This is only an update of the Plan date at the top of the plan; this does not include the service lines or provider lines. See the attachment for instructions on entering ISP end dates.

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No later than June 30, 2015, all Plans of Care in eXPRS must be updated to reflect the following:

1. Actual ANA and CNA hours
2. Generic providers as applicable
1. ANA hours
The Monthly Assessed Attendant Care/Skills Training Hours field in POC must reflect accurate ANA and CNA hours for each individual. When editing/adjusting the ANA/CNA hours total in eXPRS, the new total entered cannot be less than what is authorized in any single service line in the POC that reconciles to the ANA/CNA monthly total, and/or cannot be less than the total available to be claimed for all attendant care services combined in a calendar month. In combination, ANA/CNA hours authorized for services may appear to exceed those that are available, however any Service Delivered billing entries submitted that exceed that monthly limit will suspend. A review of any Service Delivered entries that have suspended for this reason can be requested to ODDS.

2. Generic providers
Review any service prior authorizations in POCs that have the provider identified as Generic Providers and update appropriately if the provider has an SPD Medicaid provider number. This applies to providers who are providing attendant care services, skills training, behavioral consultants, all employment services, and relief care providers.

For Non-PSW providers who are waiting for an SPD enrollment number or specialty type from the Department, CDDPs and Brokerages can utilize the “generic” provider option to authorize services, using the below guidelines:
- The “generic” provider authorization is for 90 days of service.
- After the first 90 days, CDDPs/Brokerages must update the service prior authorization in the POC to authorize the provider directly if the provider is now enrolled and has an allowed provider type/specialty for the service.
- If there is still no SPD enrollment number or assignment of needed provider type/specialty for the service, CDDPs/Brokerages may authorize an additional 90 days using the “generic” provider option.
  (- examples of who these providers may be = agency providers of behavioral consultation, foster care providers as relief care providers- retail businesses or vendors for purchases)

Additional information and guidance will be coming from ODDS, regarding providers who may be appropriate to remain a “generic” provider until further notice. (Examples of these providers would be providers of; transportation, home modifications, chore services, vehicle modifications and one-time purchases may continue to be authorized as generic providers until further notice)
Field/stakeholder review:  ☑ Yes  ☐ No

If yes, reviewed by: CDDP and Brokerage policy reviewers

If you have any questions about this action request, contact:

| Contact(s)         | Chelas Kronenberg  
|--------------------|---------------------
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Plan of Care ISP end date instruction 03/27/2015

Step #1

1. From the Plan of Care Menu
   a. select POC
   b. select Update POC

Step #2

2. Search by entering "Plan ID" or other criteria such as prime and selecting Find
Step #3

3. Select the Plan ID (the blue hyperlink blurred in this example for privacy purposes)

Step #4

Update Plan of Care

Plan Id: [redacted]
Client Name: [redacted]
Plan Total: $7,033.75

Plan Dates: 4/1/2015 - 6/30/2015
Client Prime: [redacted]
Plan Status: Accepted

4. Select the edit button

Step #5

Update Plan of Care

Plan Id: [redacted]
Client Name: [redacted]
Plan Total: [redacted]

Plan Dates: 4/1/2015 - 6/30/2015
Client Prime: [redacted]
Plan Status: Accepted

5. You can now edit the plan date to match it up with the ISP date.
6. Select Save

Save  Cancel