

Provider Webinar

The Life Plan Process

Agenda





- Welcome & Introductions
- Care Design NY/PHP overview and Alignment
- Review of Life Plan process
- Ensuring Effective Communication and timely resolution
- Provider Satisfaction Survey
- Next steps/Q&A

Welcome & Introductions





- Megan O'Connor-Hebert
 Chief Administrative Officer
 CCO/HH and FIDA-IDD
- Diane Marrone
 Chief of Care Coordination
 CCO/HH and FIDA-IDD
- Danielle Mazza
 CDNY Assistant Vice President of Care Management for Upstate NY
- Ernie McNutt
 CDNY Assistant Vice President of
 Care Management for Downstate NY
- Natalia McGarry
 PHP Assistant Vice President of Care Management
- Kim Carroccia
 PHP Director of Network Development
 & Provider Relations
- Stephen Schneider
 PHP Senior Director of Network
 Development and Provider Relations

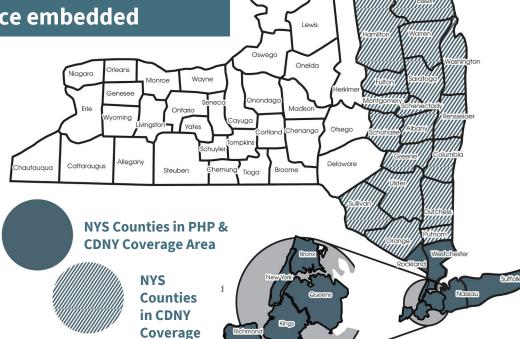


Care Design NY & PHP Alignment



CDNY is a Care Coordination
Organization / Health Home (CCO/HH)

PHP is a not for profit managed care plan with CM service embedded



Area

Both Partners Health Plan, and Care
 Design NY, provide care management
 services to individuals with intellectual
 and other developmental disabilities

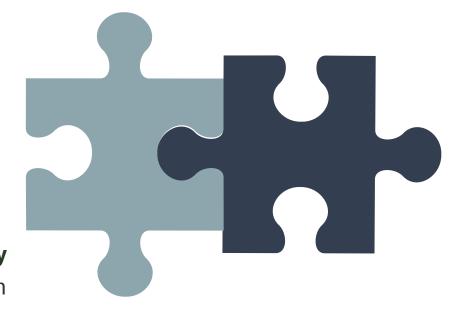
PHP & Care Design NY have recently
 aligned in partnership to enable mutual
 access and benefit of the infrastructure
 and provider relationships across both
 organizations.

Care Design NY & PHP Alignment



What does this alignment mean for members and providers?

- Both organizations retain distinct properties
- CDNY remains a CCO/HH
- PHP FIDA plan remains a voluntary option for dual eligible adults in 9 downstate counties
- No changes in service delivery
 CM models have not changed in
 either organization; no changes
 in assigned CM related to the
 alignment; same management
 teams



- Care Management
 department integration
 leverages sharing of best
 practices and current systems,
 experiences and skillsets
- Improved internal process
 result in enhanced member and
 provider experience (i.e. greater
 access to shared resources;
 aligned communications)

Questions







What to Expect in the Life Planning Process





A collaborative person-centered process considering all voices







What to Expect in the Life Planning Process

Starts with assessment and/or review of assessments.

Assessment sources inform the Life Plan, but do not "dictate" it.

Person-centeredness is KEY!



IAM Assessment (completed by CM) in advance of the LP meeting.

Providers can participate if desired, with the person/representative's approval.



DDP-2 (completed by CM every 2 years or as needed and by Waiver Providers)



LCED Re-Determination (completed by CM annually)



CAS/CANS (completed by OPWDD/Maximus Staff)





The Life Plan Process for PHP & CDNY Members



CM convenes the IDT and schedules the meeting - inclusive of service providers.
Care Managers should be offering option to do in-person.

 Service providers do have the option to join via HIPAA compliant technology – even outside of the Public Health Emergency



Care Managers will make every effort to share a draft of the LP prior to the meeting, and minimally will share a draft at the LP meeting for team members to view.



Member should be present for their LP meeting.



Assessments, Staff Action Plans, Self Direction budget, and other relevant documents are reviewed at the meeting.



The Life Plan Process for PHP & CDNY Members



The team discusses services,
outcomes, and goals and
assigns service providers,
resulting in a draft plan sent by
CM to the member/advocate
and IDT.



If no edits, plan is approved for finalizing.



Signature/agreement of the person/representative must be in writing. Can be scanned attestation or email response (attendance sheet for PHP). Must have approval of person/family to finalize the LP. Providers need to review and acknowledge/agree to the provider assigned goals, supports and tasks.



Finalizing the Life Plan



For members enrolled in the CDNY CCO/HH:

- Annual and semi-annual LP should be finalized
 45 days following the day of the meeting.
- Finalized LP is then distributed to the member, representative and providers listed in Section IV of the LP.



For members enrolled in PHP FIDA plan:

- Life Plan approval includes agreement to authorized services (type and frequency)
- LPs for members enrolled in PHP FIDA plan must be finalized prior to effective date of new LP. IDT members have up to 3 days following receipt of finalized draft LP to approve.

Alignment of the LP and the SAP





Goals, Levels of Supervision,
Tasks and Supports may be
assigned to providers following
the comprehensive assessment
process, but should be discussed
and reviewed for relevance and
validity.



POM's and Goals in sections 2 and 3 of the LP are in general language and will not exactly match the Staff Action Plan. This is not a billing standard issue. Staff Action Plans spell out how the provider will deliver the outcome.



LP should be reviewed with the SAP. Reviews can also be held early to avoid discrepancies.

The Life Plan Approval





The process for capturing the informed written consent of the person or their representative for their life plan is similar for Care Design NY and PHP.

- Care Design NY recently implemented a Life Plan Attestation Form
- Partners Health Plan (PHP) continues to use the Life Plan attendance sheet



In the event the Care Manager is unable to obtain the signed attestation form, the following methods will be used in order to document the person and/or their representative's approval:

- Email exchange
- Memorialized verbal approval as a last resort with documented efforts to obtain a signature/email approval.



The attestation form is only for the person and/or their representative's approval after the final approval of the life plan.

 Provider agreement to provide the supports and services in sections II, III and IV of the plan will continue to be captured through a verbal process and recorded in the drop downs on the Life Plan.

Staff Action Plan Distribution



- Compliance for Staff Action Plans as a part of the person's record is shared between the CCO or PHP and the Habilitative Provider.
- CCOs and PHP are required to have the SAP as a part of the record and must be able to show this upon request during PCR reviews.
- Habilitative Providers are responsible per the OPWDD 18-09R ADM to distribute the SAP to the CCO or PHP as a part of the billing standard for reimbursement.
 - 12) Evidence demonstrating the Staff Action Plan was distributed no later than 60 days after: the start of the habilitation services; the life plan review date; or the development of a revised/updated Staff Action Plan, whichever comes first (which may include, but is not limited to: a monthly narrative note; a HITS upload; or e- mail).
- Failure of a provider to demonstrate SAP distribution within the regulatory timeframe can represent an audit risk to the provider agency.



Questions







Communication is critical. CDNY and PHP are committed to effective communication with our providers in order to achieve quality outcomes for the people we support.



- Care Managers are the primary point of contact for members enrolled in both the CCO/HH and PHP FIDA plan
- CM Supervisors may be engaged if CM is unreachable/if support with communication is needed.
- CM Directors and Regional Directors are available for support or if issues cannot be resolved at the CM and Supervisor level



How to contact your Care Manager

CM contact info is available in email signature.



BEST FORM OF CONTACT FOR all CM dept staff:

CDNY CCO/HH main number: 518-235-1888

PHP – Participant Services: 855 -747-5483



Partners Health Plan Regional Director Contact Info

RDs can be engaged for communication issues or any complex issues needing escalation

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Care Design NY Regional Director Contact Info

RDs can be engaged for communication issues or any complex issues needing escalation

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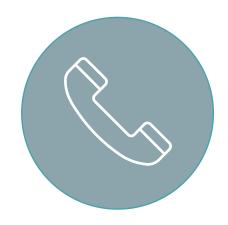
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After-hours urgent needs

CDNY after-hours emergency number: **1-877-855-3673**

PHP 24/7 nurse advice

line: 1-855-769-2507

Additional Communication Methods

Internal escalation processes support Care Managers and provider teams for complex issues

- Clinical/healthcare support, cross system team support to the care management teams to intervene and find needed supports.
- If needed, CDNY Leadership outreaches to OPWDD Leadership and Leadership from other systems like ACS/CPS, APS, OMH etc..
- Additional strategies to improve communication coming soon:
 - Supervisor contact info will be added to Email signature
 - Meetings with provider agencies and regional teams/senior leadership upon request. Reach out to NDPR, a Regional Director or AVP)

Questions





Next Steps – Communication from NDPR





- Provider Newsletters
- Provider Satisfaction Surveys
- Provider Spotlights
- Provider Trainings

Questions



