Provider Webinar

The Life Plan Process

02/24/2022
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

- 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.
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)
What to Expect in the Life Planning Process

- An invitation for all Waiver service providers
- A collaborative person-centered process considering all voices
- No surprises after the LP meeting
- Timely receipt of the finalized LP
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.

LCED Re-Determination (completed by CM annually)

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

CAS/CANS (completed by OPWDD/Maximus Staff)
The Life Plan Process

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

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.
The Life Plan Process

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 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.
  - 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
Provider/Care Management Communication

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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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)
Next Steps – Communication from NDPR

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