Louisiana's Efforts to Ensure the Integrity of Home and Community Based Services: Using data to preserve resources, equip auditors, and educate assessors

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Office of Aging and Adult Services (OAAS)

- Medicaid State Plan Personal Care Services program
- Two 1915(c) waivers
- Nursing facility admissions
- Operate one nursing facility
- Protective services
- State funded Traumatic Head and Spinal Cord Injury program
- Money Follow the Person Demonstration Grant (Supplemental for NH transition)
- Louisiana Life Span Respite Grant

Long Term Personal Care Services

- Provides in-home assistance with activities of daily living
- Established in January 2004 as part of an Olmstead related lawsuit settlement
- Initially capped at 56 hours per week; currently capped at 32 hours per week

Eligibility for LTPCS

- Financial
 - Determined by the Medicaid office
- Program Eligibility
 - Delegated to a third party contracted with the State and monitored by OAAS
 - OAAS trains and certifies Contractor staff
 - 65 years of age or older, OR 21 years of age and have a disability
 - Require assistance with at least one activity of daily living
 - Meet nursing facility level of care (NFLOC) AND additional criteria based on risk of institutionalization

Overview of Contractor's Roles

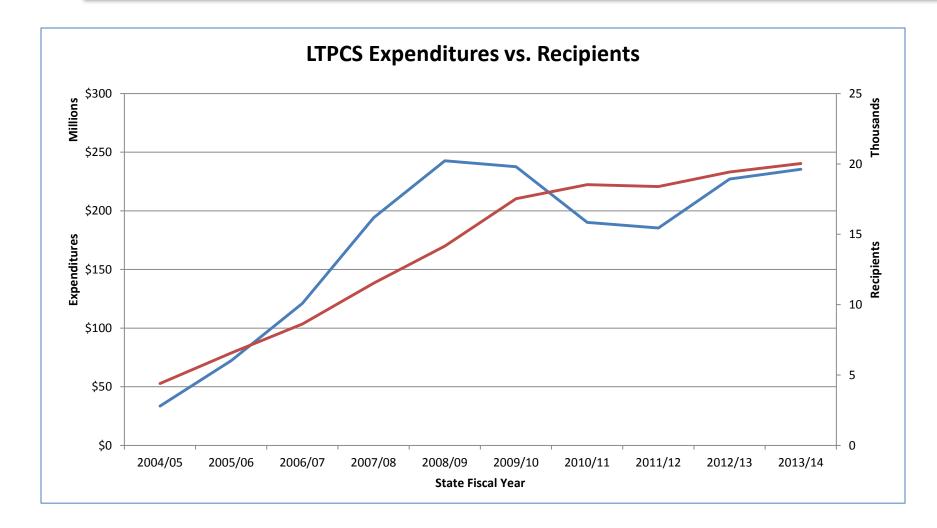
- Information and referral
- Level of Care screening
- Face to face assessment of functional/medical condition
- Determination of LTPCS program eligibility

- Care planning
- Freedom of Choice
- Linkage to services
- Correspondence
- Appeals

LTPCS Program Challenges

- Rapid growth in expenditures
- The State cannot cap enrollment
- Quality Monitoring
- Fraudulent activities by provider agencies, individual workers, and even recipients
- Active "marketing" by providers to increase enrollment

LTPCS Growth



Sustainability - Program Changes

- March 2009 Acuity based Resource Allocation
 - Hours now based on acuity
 - Hours more flexible
 - 56 hour per week max reduced to 42 hours
- **2nd Reduction** Max hours reduced from 42 hours to 32
 - Resulting in a lawsuit successfully settled, no change in program requirements
- \$2 million dollars saved. Even with 5000+ additional persons served and no increase of transition into nursing homes
- FY13 Program Cost resumed Driven by increased enrollment

Shift in Focus

- High profile cases investigated by Attorney General
 - Billing fraud
 - Incidents of abuse and neglect of recipients
- Anecdotal reports from community agencies
 - Recipients appear to be fully functional, don't meet program requirements
- Anonymous calls and letters
- Observations from our Contractor

INTEGRITY EFFORTS

OAAS Discovery Activities

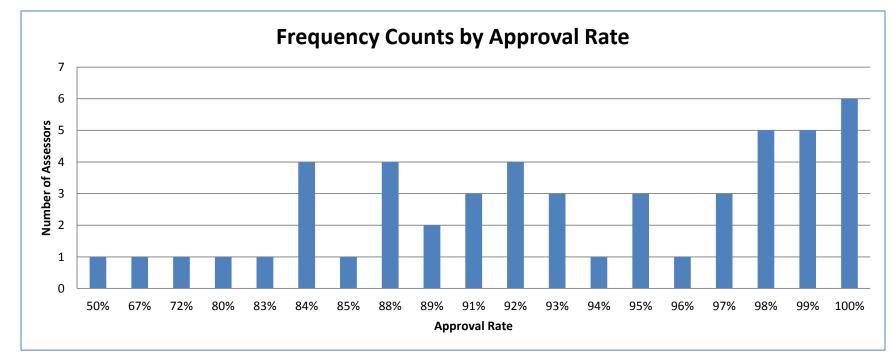
Using data mining

- Providers calling in initial applications
- Responsible representatives for multiple recipients
- Lack of critical incident reporting
- Geographic mapping for high density of recipients
- High growth providers
- Assessors (case managers) with high approval rates

Assessor Approval Rates

Initial Applications (88%) Annual Reassessments (96%)

6 assessors with 100% approval rates



Field Audits

- Field Audits of Eligibility Determinations
 - Concerns
 - Time gap between assessment and audit

Audit to be completed within 3 days

- Labor Intensive
 - Regional office staff completed 2 per week
- Targeting your efforts
 - Initially targeted assessments with low ADL dependence
- Low agreement rates between assessor and auditor (50%)

Shadow Audits

- Shadow audits of Eligibility Determinations
 - Develop procedures & protocols
 - Continuous Quality Improvement Committee
 - OAAS & Contractor review shadow audit results
 - Identify training opportunities
 - Improvement (audit agreement rates now at 76%)

Coordination with our Partners

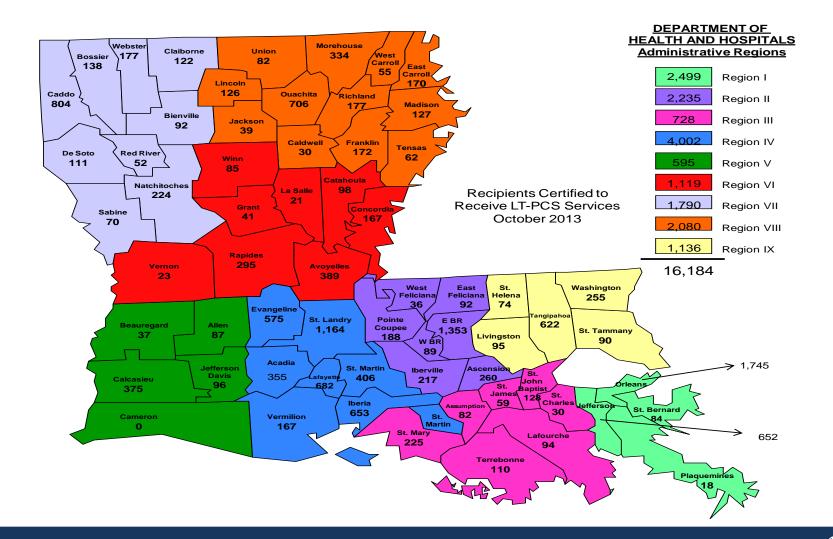


- Office of Citizens for Developmental Disabilities
- Office of Behavioral Health
- Protective Services
- Health Standards (Licensing & Certification)
- Attorney General
- Program Integrity
- Data Contractor(Prior Auth, provider DSW billing,)
- Fiscal Intermediary
- Access Contractor (OAAS programs)

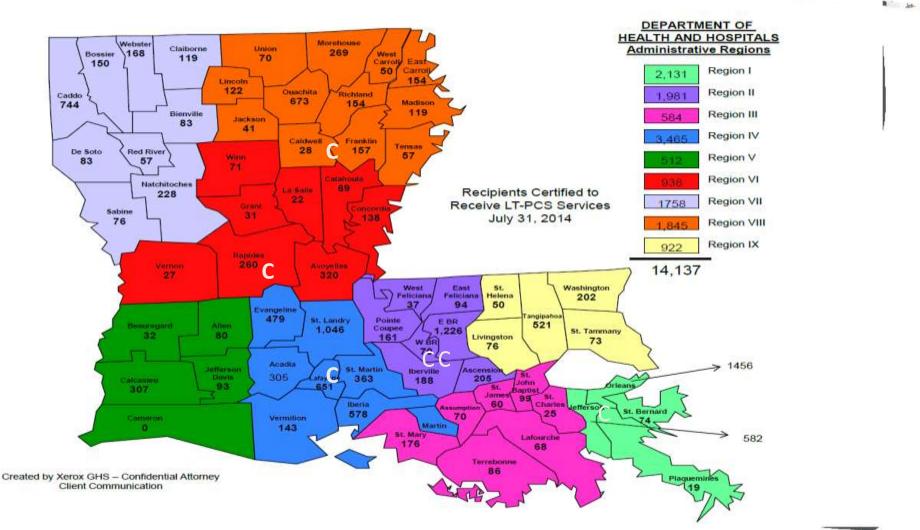
Compliance & Audit Team

- Started January 13, 2014
- Funded by DHH Program Integrity
- 5 staff across the 9 regions
- 1 person in the state office to coordinate
- 1 person to assist in appeals

LTPCS Participants by Parish OCT 2013



LTPCS Participants by Parish July 2014



What It Takes To Be On The Team

- Eye to detail
- Ability to use a scientific tool while using common sense
- Ability to scan the environment
- Ability to develop a relationship

- Ability to use investigative skills
- Ability to implement probing questions
- Ability to use cautious diplomacy in tense situations
- Ability to work independently

What We Sometimes Find

- Communities not understanding the purpose of the program
- Family members/DSWs and are not taking care of recipients
- DSWs bringing children to the home of the recipient

- Family members or others manipulating during the interview
- Family members or providers coaching recipients so the recipient knows how to get "upcoded"

Targeted Assessments

- Targeted assignments directed towards assessing recipients who have been flagged for a variety of reasons. Examples: Health standards referral, information from community, contractor requests follow up assessment
- High volume providers in a specific region
- Providers possibly associated with unusually low denial rates in their assessments outcomes



Closer Coordination with Partner Agencies

- Agencies assessing recipient right after each other
- Whose assessment trumps whose?
- Health Standards and/or AG doing investigations

Challenges



Appeals

- Increased 400%
- Need for additional staff
- Valuable field staff off the streets for hearings

Challenges



Unexpected Situations Requiring Policy

- Recipients who were not at home after several visits
- Recipients who refused to be interviewed
- Recipients being dishonest after being observed performing the ADL tasks without difficulty

Lessons Learned

Never let your eye off the training Focus on universal training and standards Don't underestimate the resources needed for supervision and quality checks

Geographical distance affects the efficiency of the team

Prioritizing the value of unscheduled visits

Interagency communication can relieve work load and add resources.

Lessons Learned

One voice: Contractor supervisor to CAT supervisor and vice versa

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