

Medicaid Community Options

Course 14: Ongoing Role of the Supports Planner

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MARYLAND
Department of Health

Plan is Approved, Participant is Enrolled

What's Next?

- Contact as often as prescribed in the plan of service
 - At least monthly contact (may be by phone) and at least one annual in-person visit.
 - Ensure all services are being provided.
 - Ensure the participant is satisfied with the providers.
 - Ensure the amount of duration of the services are adequate.
 - Complete activities/tasks in LTSSMaryland as appropriate.
 - Keep track of Medicaid/Waiver eligibility.
 - An alert will be sent to you regarding medical/technical redetermination. You must follow-up and ensure applications are submitted and appointments are made.
 - Certain eligibility may change throughout the year that may not relate to the program.
 - Checking eligibility in the LTSSMaryland system ensures uninterrupted services and helps problem solve issues that arise.

What if The Plan of Service Isn't Meeting the Needs of the Participant?

- The time may come when the plan of service isn't adequate or a new (temporary or permanent) service is necessary.
 - It may be necessary to request a Significant Change assessment if there has been a change in a person's health status.
- Create a “revised” plan of service from the previously approved and active plan of service.
 - Request the new service and submit like the other POS types.
 - The other POS will remain active until the revised can be approved.

Monitoring ISAS and Submitting Reportable Events

- Monitor personal assistance workers for the participant through ISAS.
 - Is the provider showing up on time?
 - Are they coming on the right days?
 - Are they clocking in for the appropriate number of hours?
- In the case of an event that impacts the participant's health or safety, a Reportable Event must be submitted.
 - The supports planner becomes responsible for following up on a Reportable Event.
 - The Department conducts an investigation based on the immediacy of the event.