Welcome Supports Planners!

Understanding the In-Home Supports Assurance System **ISAS**

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Maryland Department of Health

3/16/2018

Training Agenda

1. Welcome
2. ISAS Overview
3. Supports Planner's Role in ISAS
4. Understanding ISAS Billing
5. Monitoring Participant's Care
6. MyLTSS
7. One Time Password Device (OTP)
8. Medicaid Eligibility
9. Plan of Service
10. Emergency Care
11. Questions

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ISAS: What is ISAS?

- In-Home Supports Assurance System
- A phone-based billing system for in-home service providers

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ISAS: The ISAS Team @ MDH

- The ISAS Division at MDH consists of the people who administer the ISAS system
- We ensure the system runs smoothly, assist providers with the system, and review manually entered times
- The ISAS team currently has 12 full-time analysts and is led by Division Chief Jane Holman

ISAS: Why Do We Use ISAS?

- Improve quality of Service
- Increase provider accountability
- Decrease fraud and abuse
- Simplify and modernize the billing process
- Allow providers to view their service information online in real-time

ISAS: Who Uses ISAS?

- All Personal Assistance Providers giving direct services to Medicaid participants in the following waiver programs:
  - Community First Choice (CFC)
  - Community Options (CO)
  - Community Personal Assistance Services (CPAS)
  - Increased Community Services (ICS)
- Note: ISAS is the *only way* to bill for Personal Assistance, Shared Attendant and Daily Rate services provided through these waiver programs

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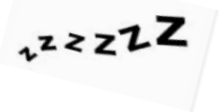
ISAS: What Does ISAS Cover?

- In-home services provided by MA enrolled agencies
  - Direct care
    - Both the participant and provider are together at all times
    - Provider is awake and providing a service to assist the participant
- In-home services do *not* include:
  - Indirect care
    - Errands where the participant is not with the provider
    - Anytime the provider is sleeping



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1. How Does ISAS Work?

- Providers call our toll-free number
- ISAS verifies
  - Who is providing the service
    - Personal Assistance or Shared Attendant Services
    - Agency provider number
    - Staff's Social Security Number
  - Who is receiving the service
    - Participant's MA number & OTP Device code*

      *more information about OTPs to follow

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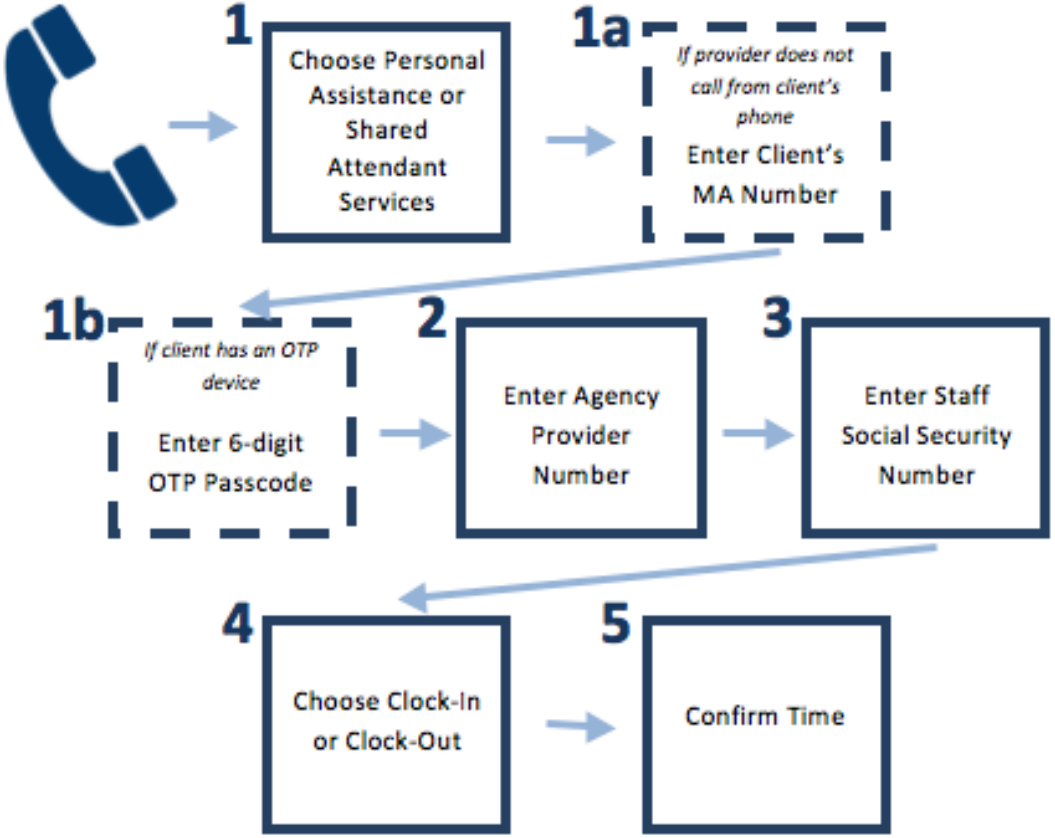
1a. Call-In System Flow Chart



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2. How Does ISAS Work?

- Providers must use either participant's phone, or an OTP device, to prove that they are with the participant

- An OTP device is:
  - A small keychain-sized device that generates a 6 digit time stamp every minute of the day
  - The OTP device stays with the ***participant*** at all times

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3. How Does ISAS Work?

- The ISAS system checks the phone call against the participant's online LTSS record
  - The phone number used should match the participant's phone number, else, an OTP device is used
- The ISAS system will not allow providers to be paid for more hours than are listed on the POS

4. How Does ISAS Work?

- Participant eligibility information is compared to MMIS* records for each service
  - *MMIS stores all participant and provider eligibility and claims information for the State of Maryland.
- The State issues weekly payments to provider agencies based on the ISAS calls

5. How Does ISAS Work?

- Accurate phone numbers are key!
- The participant's home phone and cell phone should be listed on their LTSS profile
- A staff provider's phone number should **never** be listed on a participant's profile
  - If needed for easy reference, enter a phone number 000-000-0000 and write the provider's contact information in the comments section only

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6. What Do I Tell Providers Who Need Help?

- Individual staff (caregivers) should contact their agency administrator for questions regarding ISAS billing
- Administrators should contact MDH ISAS or our Technical Help Desk for assistance

mdh.isashelp@maryland.gov

1-855-463-5877

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7. NEW Provider Portal

- Began in December 2017
- New user interface for provider agencies to access their billing online
- Questions should be directed to MDH ISAS or our Technical Help Desk

mdh.isashelp@maryland.gov

1-855-463-5877

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Supports Planner’s Role in ISAS

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Supports Planner's Role in ISAS

- Writing an accurate Plan of Service
- Notifying providers when they are authorized to begin or stop service (SNF)
- Serving as a gatekeeper for quality service
  - ensure that providers are giving quality service
  - ensure that providers are accurately billing
- Helping the ISAS team resolve participant service concerns

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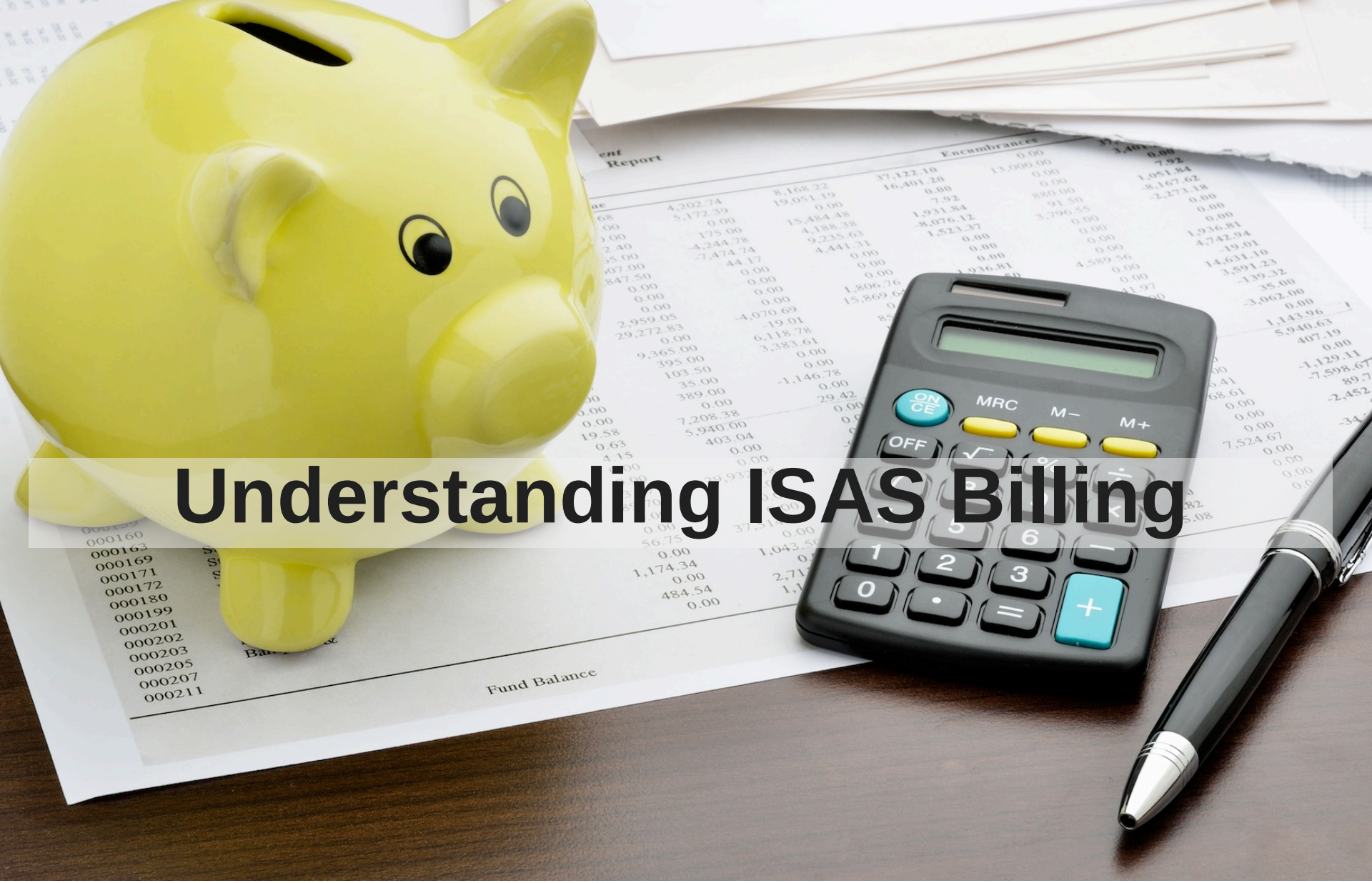
Understanding ISAS Billing



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ISAS Billing: Definitions

- **Service**: One clock-in and One clock-out pair to make a Service
  - i.e. Jane clocked in at 7 am and clocked out at 8 am. Her 1 hour shift is called a “service”

- **Claim:** One service, or multiple services that have been bundled together, make a claim. Claims have the same:
  - Date of Service
  - Provider Number
  - Participant MA Number
  - Service Type (i.e. Personal Assistance)

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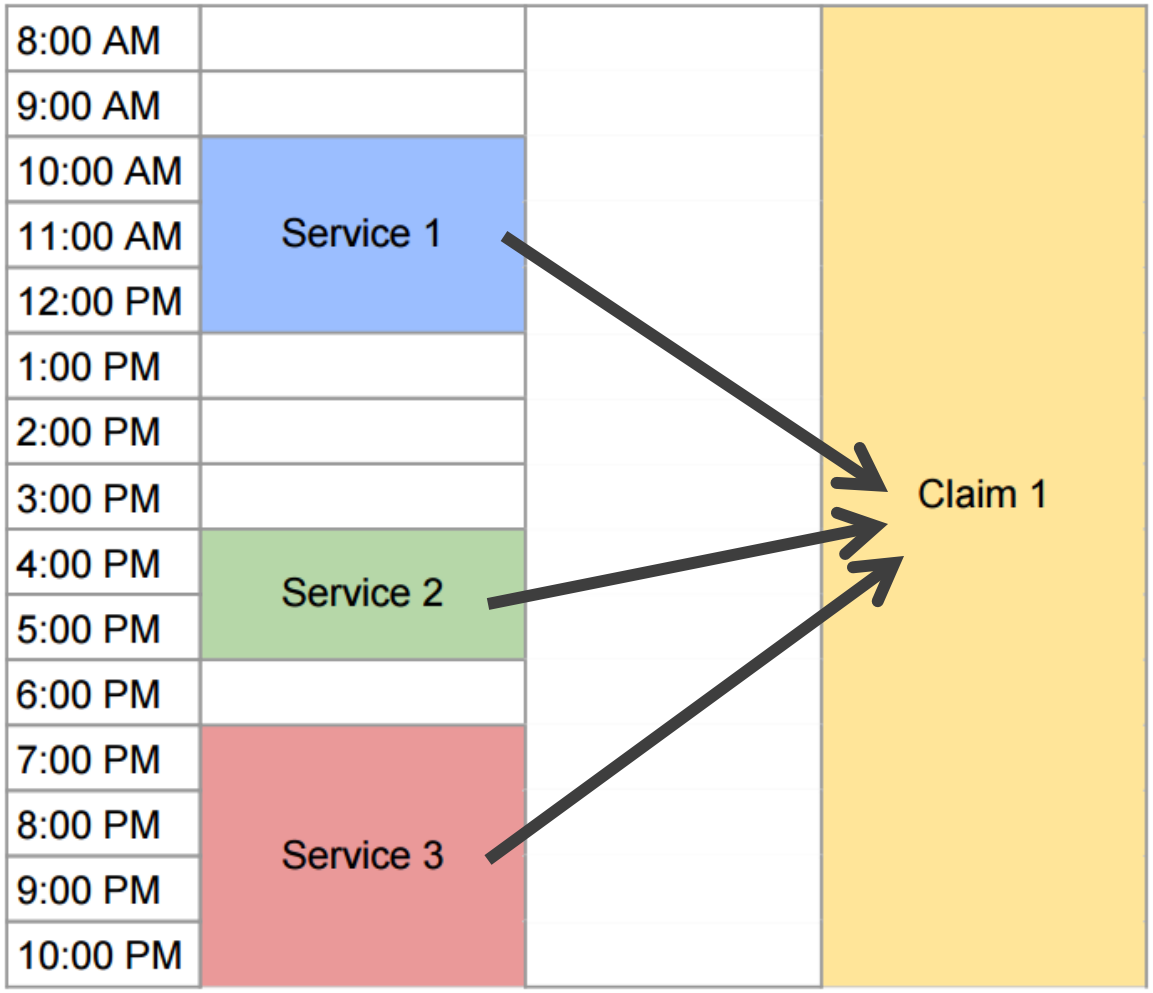
ISAS Billing: Service vs. Claim



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ISAS Billing: Definitions

- **Missing Time**: Adding service information
  - Enter ONE Missing Time to complete a Service
  - Enter TWO Missing Times to create an entirely new Service *ONLY* if no other closed claim exists on that same day
- **Adjustment:** Adding time to a paid CLAIM

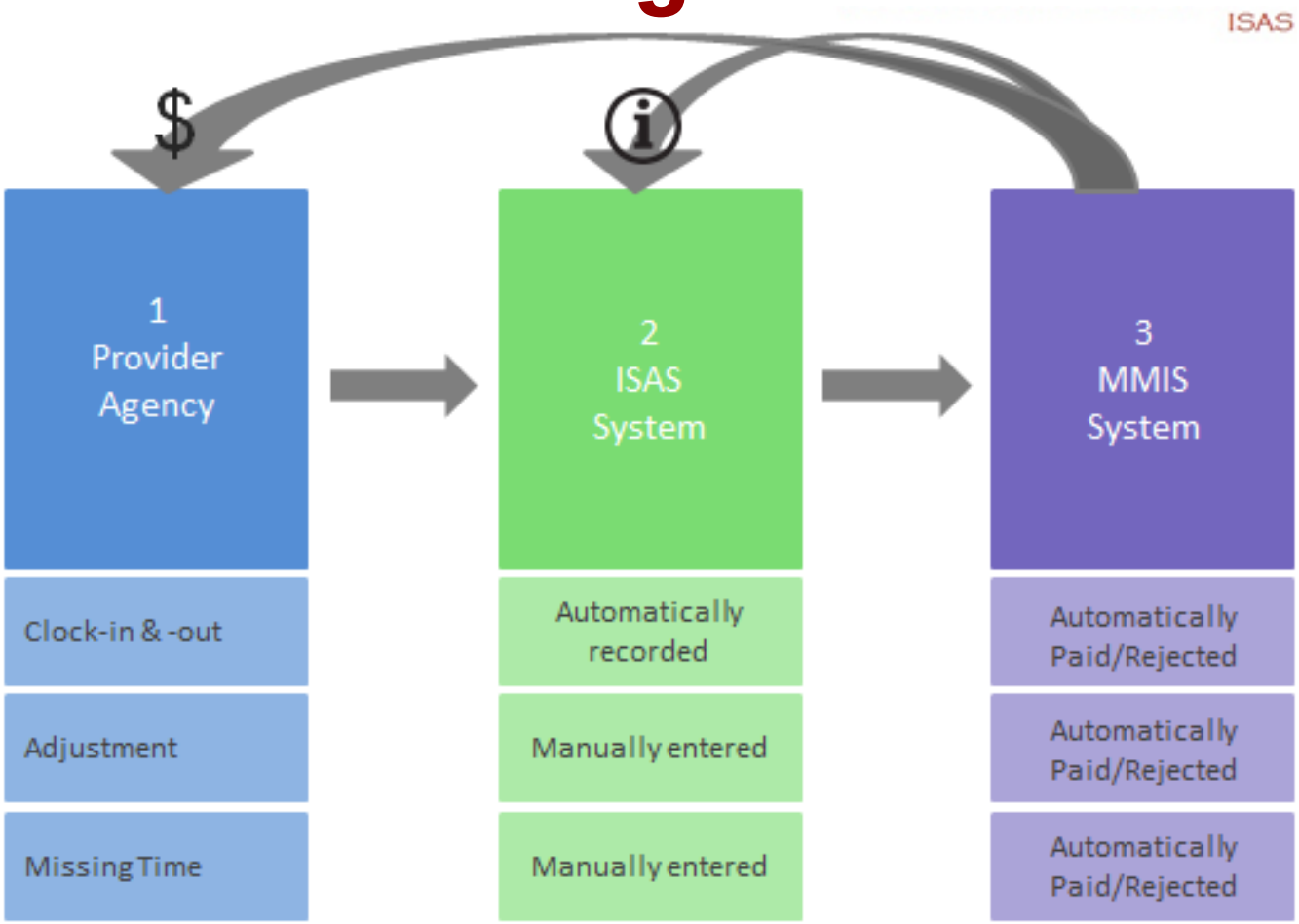
ISAS Billing: Definitions

- **Missing Time/Adjustment Policies**
  - We only accept up to 4 unexcused missing times/adjustments per staff provider each month (providers must remember to clock-in and -out over the telephone!)
  - Each unexcused MTR/adjustment is given 1 point per missed clock in OR clock out.
  - Missing times must be submitted no later than 2 business days after the end of the month

ISAS Billing: Definitions

- **Missing Time / Adjustment Policies**
  - Comments must follow a standard format
  - Agency administrators have received detailed training and materials regarding all MTR and adjustment policies
  - Details are available in our Policy Guide found on the ISAS homepage

ISAS Billing Timeline



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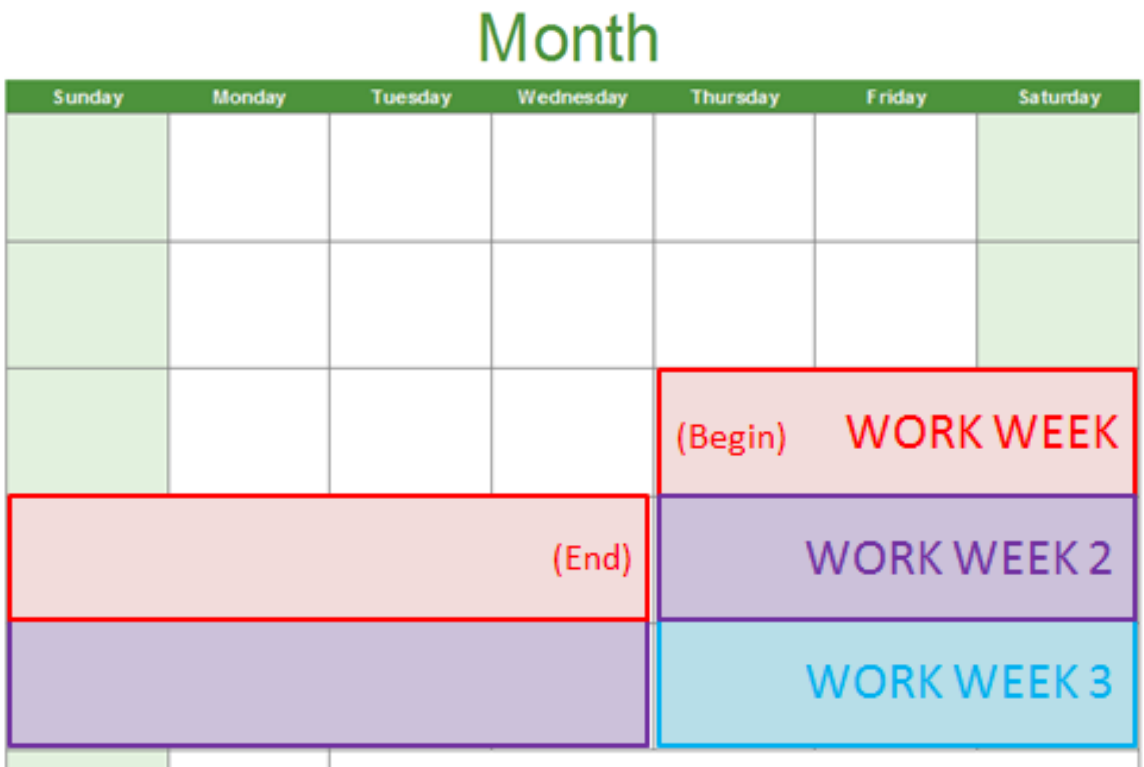
ISAS Billing: Timeline

- One paycheck will include services performed in one Work Week (Thursday through Wednesday)
- A paycheck may also include Adjustments or Missing Time Requests from previous work weeks



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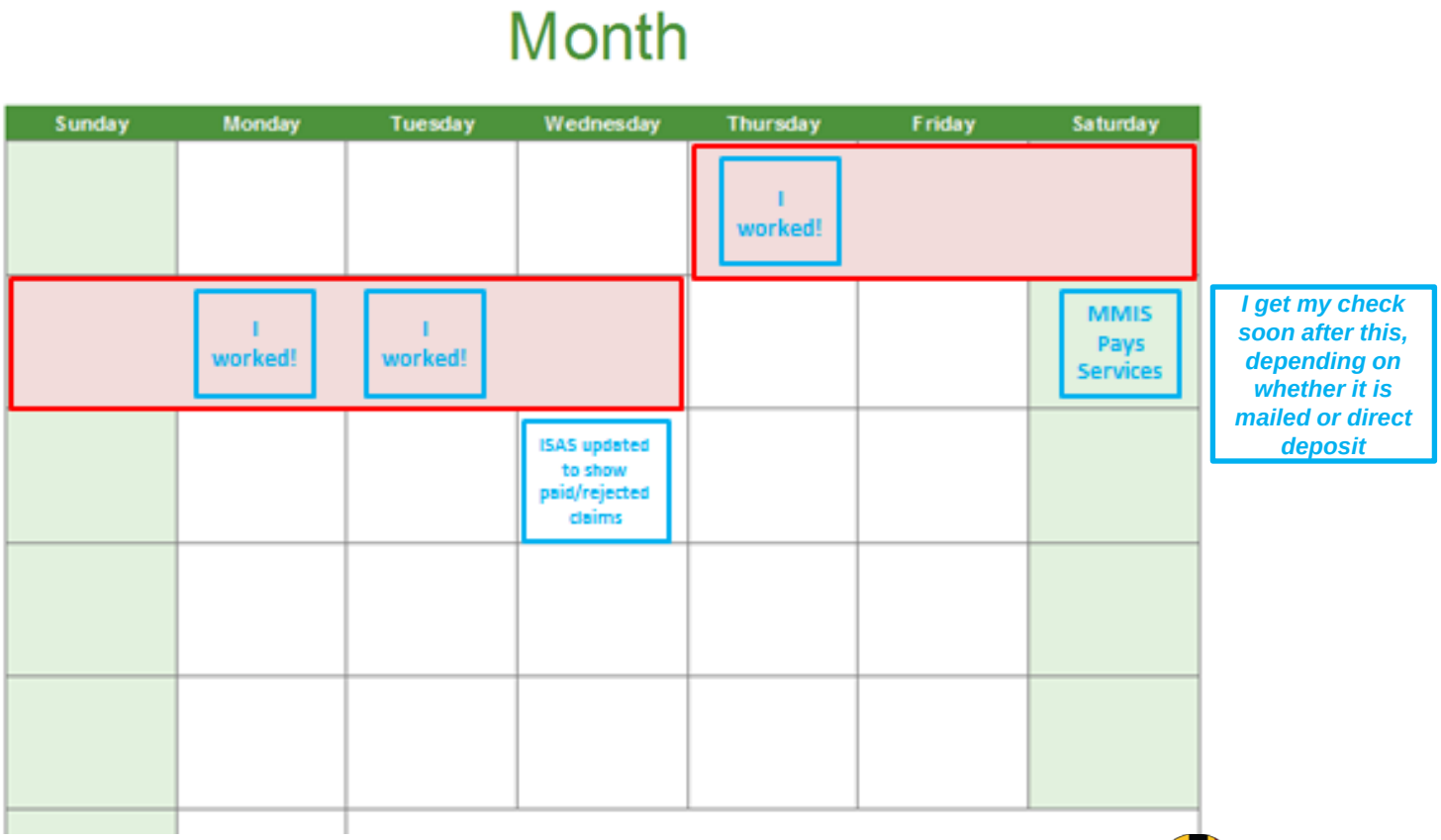
ISAS Billing: Timeline

- What is the timeline for payment of claims?



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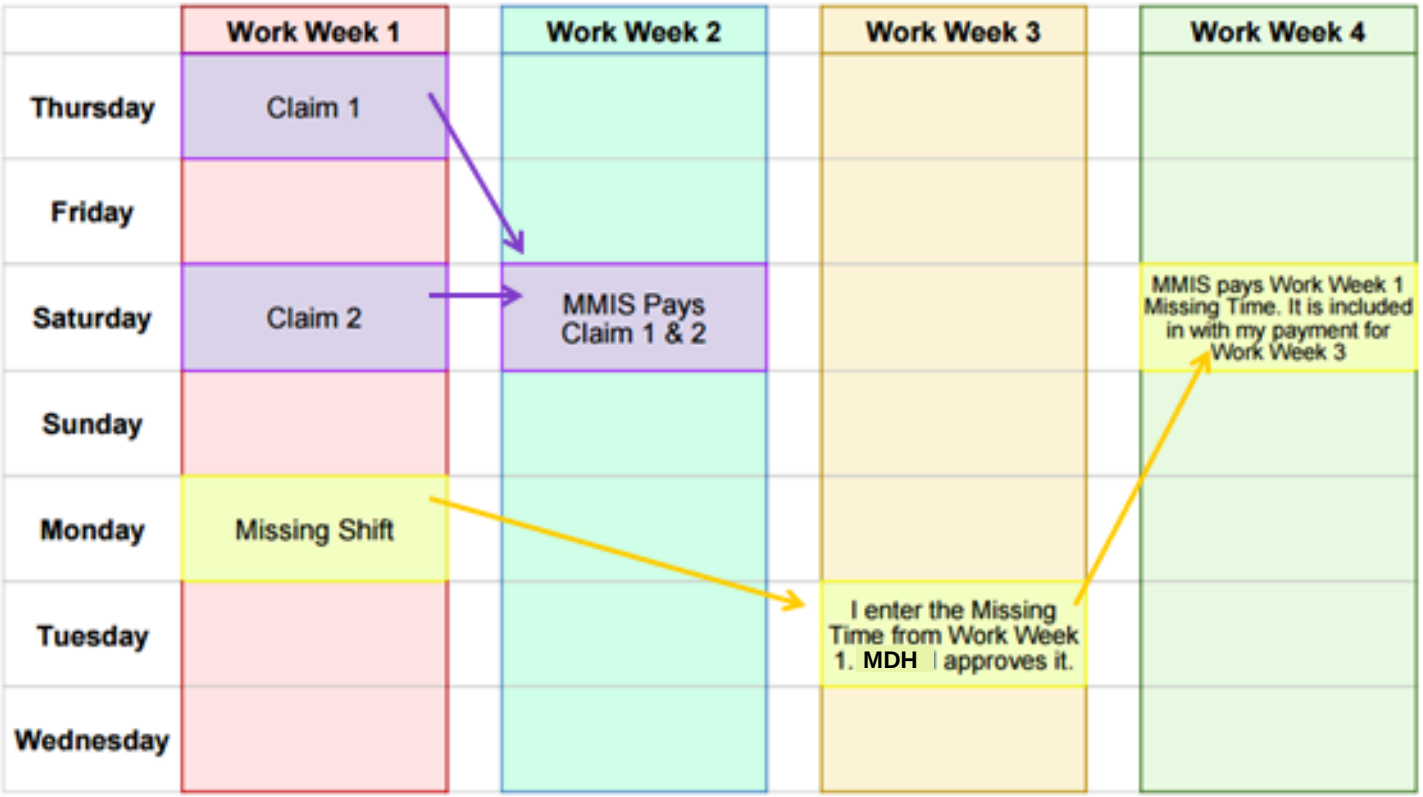
ISAS Billing: Timeline

- What is the timeline for payment of Missing Times?



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Monitoring Participant’s Services

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Monitoring Participant's Service

- Use the ISAS website to regularly review your participant's service
  - Check to see if the agency staff provider is clocking in and out at your participant's home
  - Review which staff providers are working for your participant
  - See any unusual behavior or missed shifts

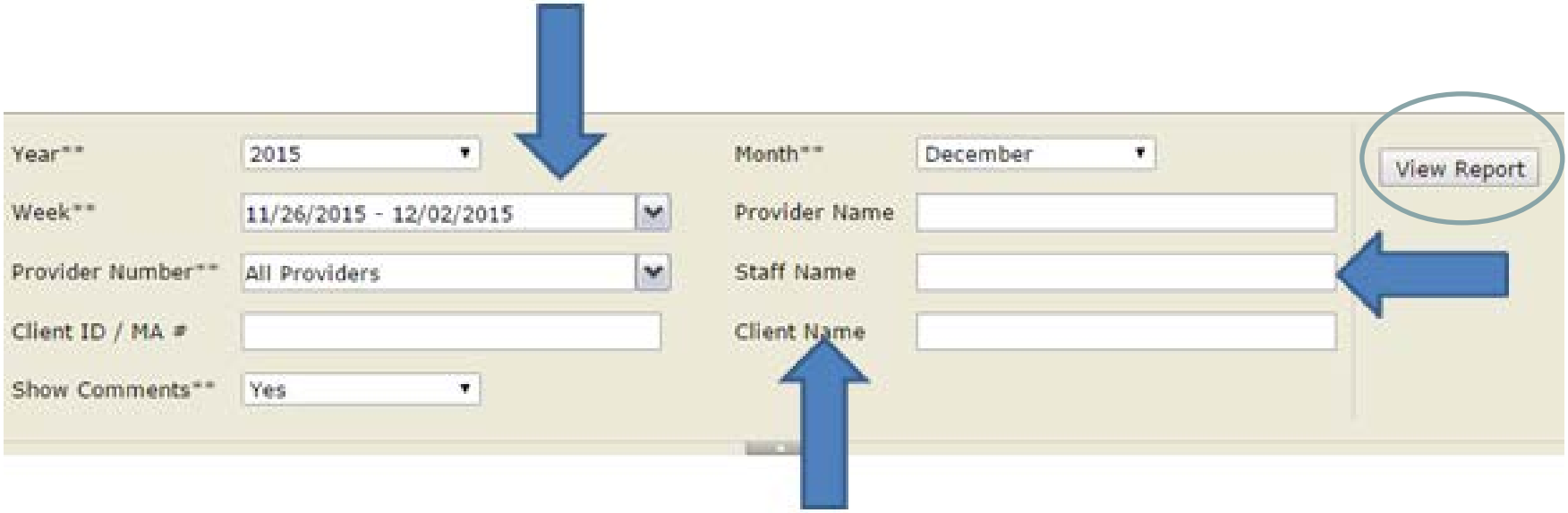
Monitoring Participant's Service

Using the Services Rendered Report Advanced:

- Calculate weekly POS hours
- Monitor services by staff provider or participant
- View clock -in and -out times for staff
- Research patterns in staff behavior
- Review claim status with detail
- Take note of any potential fraudulent billing

Monitoring Participant's Service:

Services Rendered Report Advanced



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Monitoring Participant's Service:

Services Rendered Report Advanced

Date Created: 12/7/2015 1:47:46 PM

ISAS - Services Rendered Report
Client Summary Level

Search Criteria:

Year: 2015
Month: NOVEMBER
Week: 10/29/2015 -11/04/2015,11/05/2015 - 11/11/2015, 11/12/2015 -11/18/2015,11/19/2015 - 11/25/2015, 11/26/2015 - 12/02/2015
Provider Name: ALBERT'S AGENCY
Provider Number: ALBERT'S AGENCY - 123456789, ALBERT'S AGENCY - 123456894, ALBERT'S AGENCY - 123456123
Staff Name:
Client ID/MA#: 99999999999
Client Name:
Comments View: Yes
Report Date: 12/7/15

Total Number of Records Returned: 5

Client Name	Client MA#	Provider Number	Week	Service Type	Weekly POS Hours	Hours Worked
HOWARD TENPENNY	99999999999	535903100	10/29/2015 - 11/04/2015	Personal Assistance Agency	14.00	14.00
HOWARD TENPENNY	99999999999	535903100	11/05/2015 - 11/11/2015	Personal Assistance Agency	14.00	14.00
HOWARD TENPENNY	99999999999	535903100	11/12/2015 - 11/18/2015	Personal Assistance Agency	14.00	14.00
HOWARD TENPENNY	99999999999	535903100	11/192015 - 11/25/2015	Personal Assistance Agency	14.00	14.00
HOWARD TENPENNY	99999999999	535903100	11/26/2015 - 12/02/2015	Personal Assistance Agency	14.00	21.00

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Monitoring Participant's Service:

Services Rendered Report Advanced

Click on the blue text (hyperlinks) for more details. Note: Click the "New Missing Time" hyperlink to submit a missing time request.
If you are unable to click the "New Missing Time" link, you must login under the provider number associated with the service to ente

* *Column* **Amount Paid in ISAS (Gross)*** *will be updated every Wednesday*

Total Number of

Client Name	Provider Number	Day Of Service	Date of Service	Clock In Time	Clock Out Time	Staff Name	Service Initiation Source
Howard Tenpenny	123456789	Monday	11/30/2015	11/30/2015 12:59 PM	11/30/2015 7:59 PM	FARTHING ONE	Telephone
		Tuesday	12/1/2015	12/1/2015 12:59 PM	12/1/2015 8:05 PM	FARTHING ONE	Telephone
		Wednesday	12/2/2015	12/2/2015 1:00 PM	12/2/2015 8:01 PM	FARTHING ONE	Telephone

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Monitoring Participant's Care

- Providers or staff providers may have questions about payment
- Please direct staff providers (caregivers) to speak to their agency administrator
  - ISAS does not directly employ staff providers. Therefore, all questions about payment *must* be directed to their agency employer
- Please direct Agency Administrators to speak directly to MDH ISAS (mdh.isashelp@maryland.gov)

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MyLTSS

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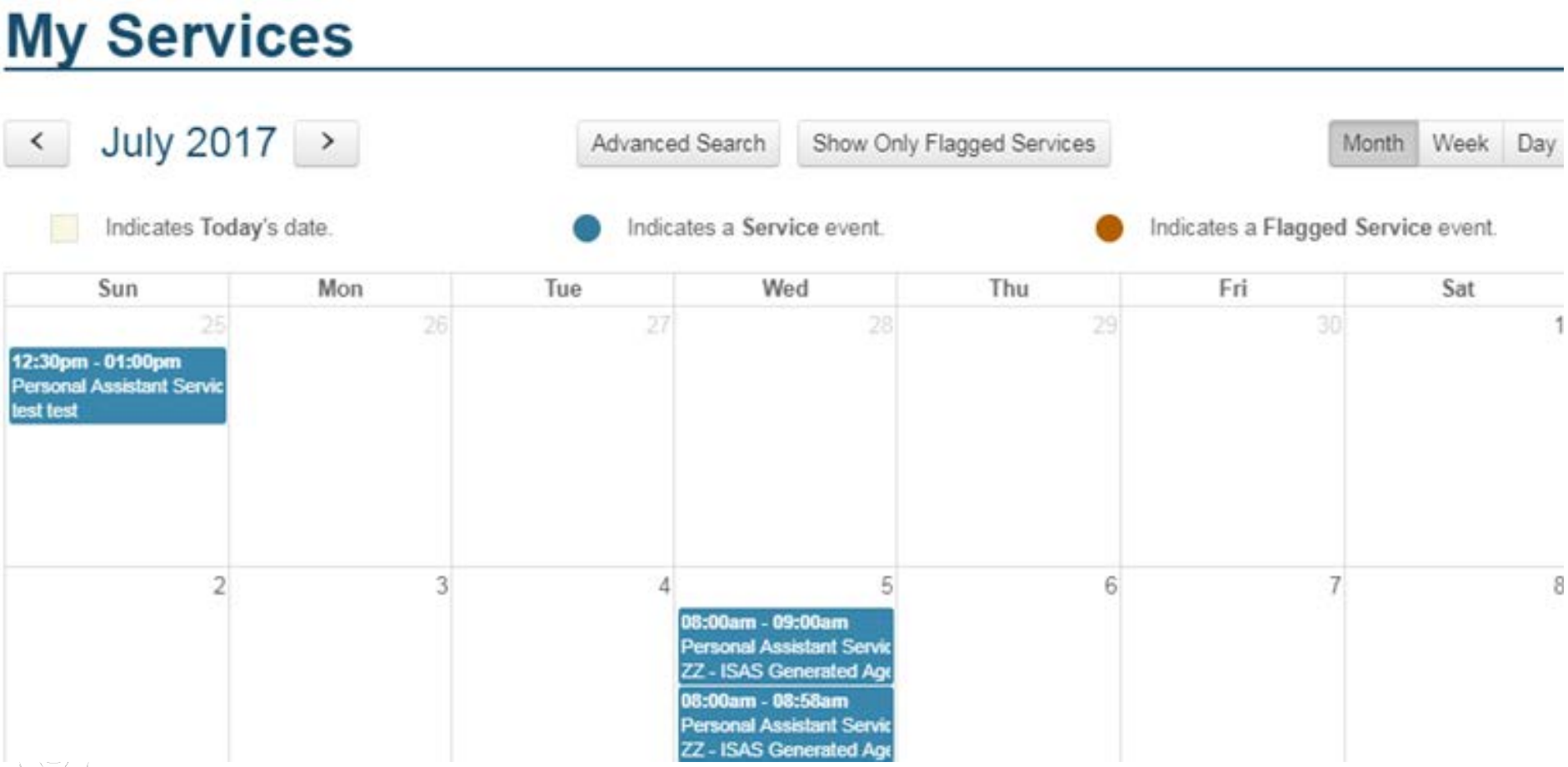
MyLTSS

- What is MyLTSS?
  - MyLTSS is a user-friendly personal health record where **participants** can review their services and flag issues
- Who can use MyLTSS?
  - Participants who receive personal assistance services that bill through ISAS
  - Their authorized representatives
- How do you access MyLTSS?
  - MyLTSSMaryland.org

What Can Participants Do In MyLTSS?

- Review Services



What Can Participants Do In MyLTSS?

- Flag Services

New Flag

Please provide some details about the service in question.

Why are you flagging this service?

Other

- Select Reason
- Provider left early
- Provider arrived late
- Provider left in the middle of a shift and returned later
- Provider took the OTP
- Clock in or clock out time is inaccurate
- Wrong staff listed on the service
- Wrong agency listed on the service
- Hospitalized during service time
- Service was not provided
- Other

Please provide additional information:

< Previous

Cancel

Submit

What Can Participants Do In MyLTSS?

- Review Program Information

My Information

My Name:	Sample Test	**Date of Birth:**	04/24/1986
My Address:	5555 Five St. Baltimore, MD 21211	**Jurisdiction/County:**	Baltimore City
SSN:	***-**-0000	**Primary Language:**	English
Race:	American Indian / Alaska Native	**Hispanic:**	No
Marital Status:	Separated	**Gender:**	Male
Preferred Method of Contact:	Email		

Listed Phone Numbers

Primary	Phone Type	Phone Number
☑	Home	(301) 111-1111
-	Home	(410) 767-0659
-	Home	(410) 767-5367

My Plan of Service Information

POS Effective Date: 01/05/2016

POS Service	Provider Name	Units	Frequency
Personal Assistance Agency	PERSONAL HOME CARE INC	98 hours per week	52 weeks

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What Should You Do?

- Help us get the word out!
  - Please encourage all of your participants to use MyLTSS as a way to monitor the services being billed to their MA account
- Help participants set up their MyLTSS accounts
- Review Flagged services
  - It is very important to follow up with participant's concerns with a phone call and file a RE if necessary

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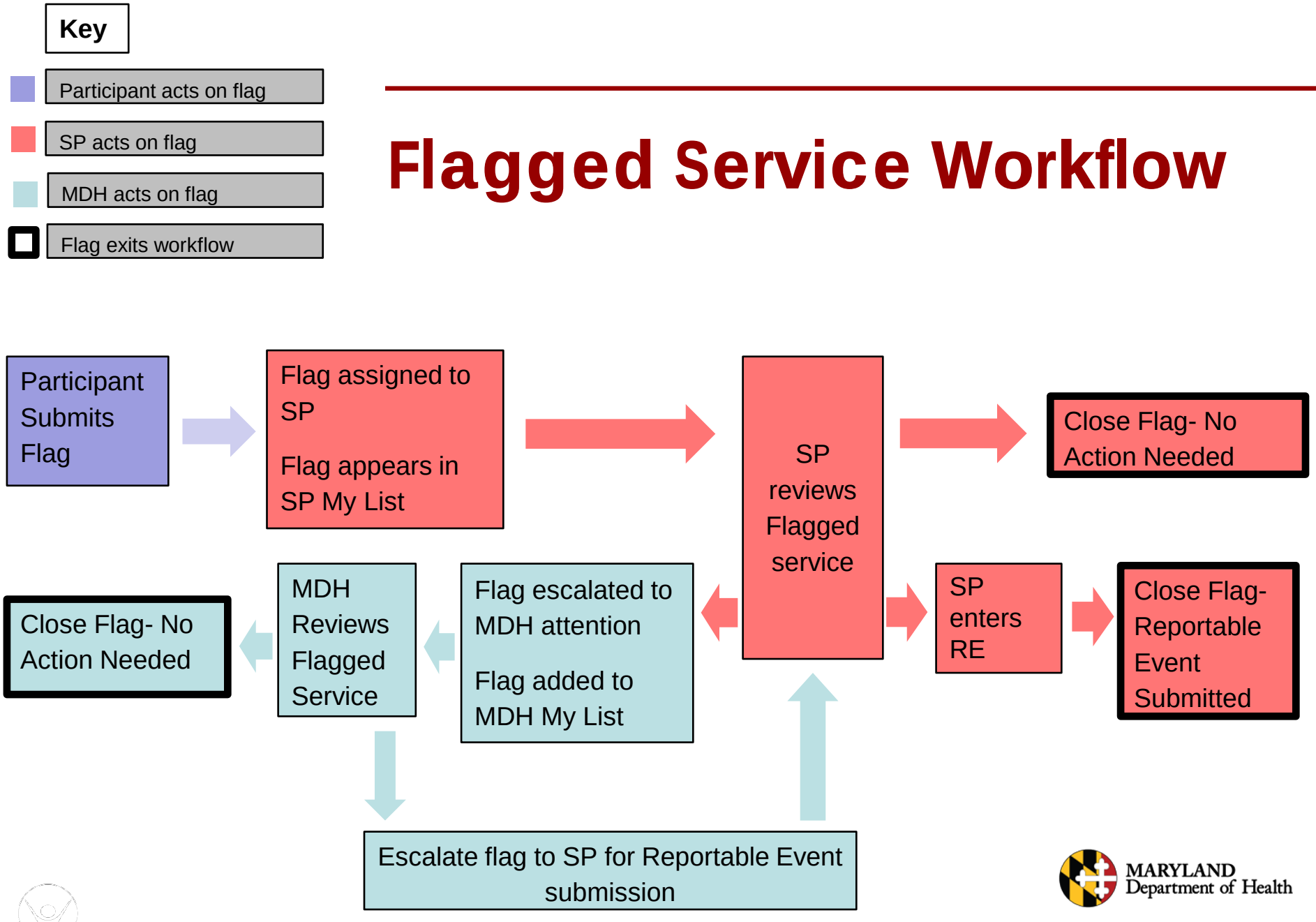
What's new in LTSS?

- MyLTSS Section in the participant's profile
  - Web Activation
  - Challenge Questions
- My List
- Flagged services report

Flagged Service Workflow



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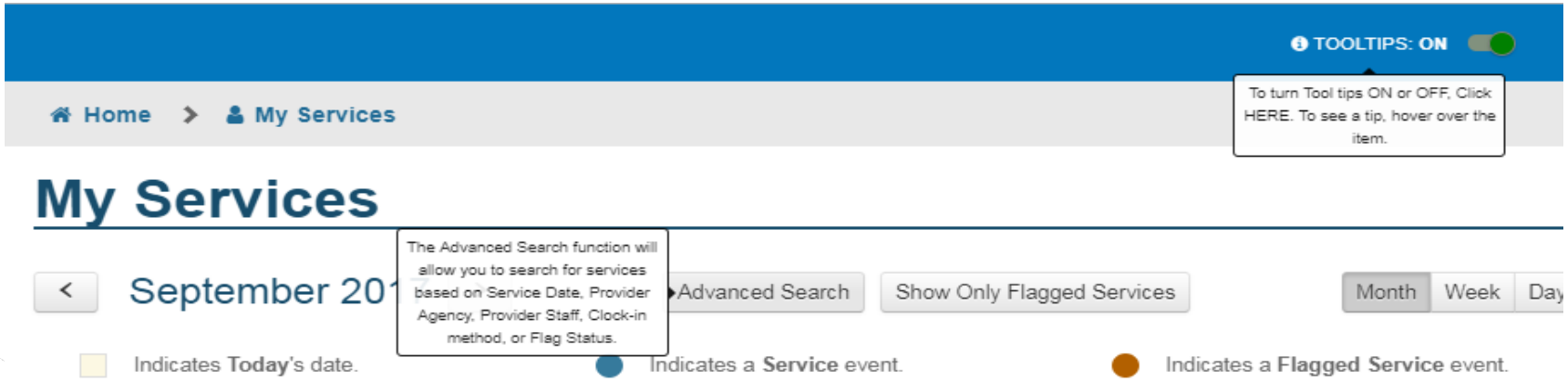
What Training Tools Are Available?

- Training Manual
  - MyLTSS User Guide
  - LTSS User Guide for MyLTSS Functions
- Webinar (LTSStraining.org)
- MyLTSS Tooltips



One Time Password Device (OTP)

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OTP Device – Why We Use It

- A One Time Password (OTP) Device is used when:
  - The participant does not have a reliable phone
    - Reminder: The staff provider's phone number should never be on the participant's LTSS profile
  - Multiple participants live in the same home
- Supports Planners should only assign OTP devices to participants who **absolutely need one**. And it should never ever be taken by the staff provider.

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OTP Device – How It Works

- Time synchronized
- Keychain sized & magnetic
- Randomly generates a 6 digit time stamp
- Providers use the number on the OTP device when clocking-in and out on the phone to prove that they are with the participant

OTP Device - Fraud

- OTP devices must ALWAYS stay with the **PARTICIPANT**
- OTP devices should **NEVER** be taken by the provider
- Supports planners should contact us and submit a Reportable Event (RE) if OTP device is missing, taken, or stolen

OTP Device - Assigning

Assign and UnAssign

- If your participant needs an OTP device, ask your supervisor to assign one to the participant
- Take the device to the participant as soon as possible
  - Explain what it is used for
  - Ask them to be sure that their provider never takes the device
- Unassign when no longer needed and retrieve the device so it can be used for someone else

OTP Device

OTP Serial Number

- Each has a unique serial number
- The system will only recognize the OTP that is assigned to your participant

- Supports Planners should check for the OTP during home visits
  - The OTP MUST stay with the participant
  - Submit RE (Reportable Event) if OTP device has been taken

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OTP Device

- Providers and/or participants are expected to report any OTP issues to you, the Supports Planner, immediately
- Broken/Malfunctioning OTP: Un-assign and send back to MDH
- OTP devices cost the State money. Only assign when needed and reuse them if your participant no longer needs it
- Document information about the OTP in the participant's Activity Notes

Plan of Service

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Plan of Service (POS)

- A participant's Plan of Service (POS) directs how many hours of service a participant may receive
  - A provider's hours are automatically capped according to the plan of service
    - *Example*:

    Patrick is allowed to receive 14 hours of Personal Assistance per week. His staff provider clocks in for 15 hours. His staff provider's agency will only be paid for 14 hours

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Plan of Service (POS)

- Only enter one service line per agency
  - Do not enter two lines of Personal Assistance services for the same provider
    - *Example*:

      Vanessa has a POS with two lines on it. One line lists Whitney's Caring Heart for 45 hours of service on weekdays. The other line lists Whitney's Caring Heart for 12 hours of service on the weekend. This POS should only have ***one*** line with the correct total number of hours per week

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Plan of Service (POS) Signatures and Effective Date

- The POS is **not** Active and Approved until MDH has given it final approval
- Providers sign the POS ***prior*** to approval
- Clearly communicate with providers about when to start services with the **Service Notification Form**

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Medicaid Eligibility

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Eligibility: Spans

- Clearly communicate the eligibility start and end dates with the provider and the participant
- Encourage the provider to use Eligibility Verification System (EVS) regularly to determine if a participant is eligible
  - Dial 1-866-710-1447
    OR visit website www.emdhealthchoice.org.
- If a participant loses eligibility the State will not pay for services

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Eligibility: Participant Loses Eligibility

- The provider may continue to provide services *at their own risk* if they believe the participant will regain eligibility back to the date of loss
- **The provider MUST clock-in and -out during the period of ineligibility in order to receive payment**
  - Payment will be issued only if eligibility is restored
  - Provider **cannot** enter Missing Times in lieu of their staff clocking in and out during the gap

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Eligibility: Participant Loses Eligibility

- Time worked during ineligibility that is not recorded through ISAS will **not** be paid
  - The provider cannot be paid for time entered manually after the eligibility is restored

- Payment will automatically be issued for pending services when eligibility is restored

Eligibility: Appeals

- If a participant enters the appeals process:
  - The provider may continue to provide services at the *participant's* risk for compensation
  - If the participant wins the appeal, all claims recorded through ISAS will be paid by the State
  - If the participant loses the appeal, the participant will be responsible for paying for the services rendered during the appeal process

Eligibility: After the 15th of the Month

- If the participant gains eligibility 1st - 15th
  - Claims pay normally
- If the participant gains eligibility 16th - 31st
  - Claims for the 16th-31st are <u>not</u> processed normally
  - Those claims will be manually processed by MDH
  - Payment will be delayed 2- 5 weeks

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Emergency & Back-Up Services

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Back-Up Services: Definition

- When the assigned agency provider cannot provide services, so an approved back-up provider gives services:
  - -All back-up providers must be listed on the POS under Emergency Backup
  - -Only Medicaid-enrolled providers may bill for back-up services, however non-enrolled providers may provide un-paid backup services
  - The back-up provider must follow the participant's POS and perform all regular duties and tasks
  - Update the participant's activity notes as soon as possible

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Back-Up Services: Payment

- If the back-up provider is *also* listed as a regular provider on the POS:

  They will receive payment, however:

  - Claims will be capped at the provider's regular approved hours
  - To be paid for the additional hours that they worked the provider agency will need to adjust their services online in the Provider Portal

Emergency Services: Definition

- When a participant has an emergency and needs extra hours of Service:
  - -Less than 7 days in duration
  - -More than 7 days in duration

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Emergency Services: Less than 7 days

- Notify MDH ISAS via email
- Describe the emergency and the number of additional hours in participant's Activity Notes
- Direct the provider to give extra hours of service and to clock – in and –out
  - The provider must use adjust claims or resubmit services to regain any time that is automatically cut by our system. *Providers have been made aware of this process but can always use a reminder.*
- Submit a Reportable Event (RE) if necessary

Emergency Services: More than 7 days

- Notify MDH ISAS via email
- Describe the emergency and the number of additional hours in participant's Activity Notes
- Revise the POS to match the participant's emergency needs
  - *Remember to submit a new POS after the emergency ends to reduce the hours back to the appropriate level
  - Submit a Reportable Event (RE) if necessary

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Reportable Event (RE)

- File a RE any time you discover or suspect fraudulent billing.
- Please be as detailed as possible in all REs
  - Include approximate hospital admission/release times if possible
- File a RE and contact MDH ISAS if you notice a provider billing while the participant is hospitalized
- File a RE and contact MDH ISAS if you discover that a provider billed for a time when they were not physically working with the participant

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Supports Planners: Partners w/ ISAS

- We're here to help
- Contact us anytime 410-767-1719
  mdh.isashelp@maryland.gov
- Open communication is key!
- Quality Service for participants is most important

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Questions