

Meeting summary for ID/DD Member Call (04/30/2025)

Quick recap

The meeting covered various administrative updates, including changes to upcoming meetings and Social Security processes. Budget discussions and legislative activities were addressed, with a focus on rate increases and advocacy efforts. The implementation of new assessment tools, challenges with the Electronic Visit Verification system, and updates on federal and state initiatives were also discussed.

Next steps

- Providers to review the updated Social Security Administration process for changing direct deposits, including setting up a my Social Security account to obtain a PIN for phone transactions.
- Providers to check their DODD contract end date in PSM for accurate certification renewal information.
- Providers to review the Nra (interRAI) assessment tool information shared by Jason for upcoming waiver modernization changes.
- Providers using EVV to review their claims matching percentage in preparation for potential claim denials starting October 1st.
- Providers to watch for emails about the new Live Care Marketplace referral system being rolled out by counties.
- Providers to complete the DSP Compensation Survey for calendar year 2024 if they provide residential or day services.

Summary

Upcoming Ohca Convention and May Meeting

Debbie announced that the next meeting will not be held due to the upcoming Ohca Convention at the Columbus Convention Center. She encouraged attendees to join the convention, particularly on Tuesday when Director Houck and her team will discuss their initiatives. The next meeting is scheduled for May 14th.

Social Security System Changes Discussed

Debbie informed the team about changes in the Social Security Administration's telephone system, which could affect their operations. She shared a link from the Social Security Administration's website for more information and advised staff to create a my security social security account for easier access. Debbie also addressed concerns about getting responses from Social Security and encouraged staff to share the link with their team members. She further discussed the department's process for extending certification and renewal dates for waiver providers, clarifying that the end date in PNM

is not the correct date to look at, but rather the Dodd Contract End date in PSM. She encouraged anyone with questions or issues to reach out to her for further assistance.

Budget Update and Advocacy Discussion

Debbie and Pete provided an update on the budget, noting a hiatus in legislative activity. They discussed a recent hearing in the Senate Medicaid Committee, where agency directors and a DD panel testified. The message from the panel was gratitude for the previous rate increases and a need for further rate increases to maintain staffing and access to services. The rate review mechanism was discussed, garnering interest in the committee. Debbie emphasized the need to continue advocating for the maintained items in the executive budget and the lack of new money available. The next steps include continued advocacy and monitoring of the budget process.

Ohio Nra Assessment Implementation Plan

Jason discussed the Department's decision to adopt the Nra assessment instead of the Cis, aiming to streamline the assessment process, reduce administrative burdens, and enable a more accurate acuity-based reimbursement. The Department plans to implement the Nra by January 1, 2027, with a 20-month transition period for assessor training, stakeholder engagement, and data collection. The Nra will be integrated with current Ohio tools like the level of care and the Ohio ISP's discovery process. The assessment will be conducted every three years or sooner if there's a change in condition. The Department also plans to gather input from individuals, families, providers, and county boards to develop a statewide strategy.

New Assessment Tool Implementation Discussion

Debbie and Jason discussed the implementation of a new assessment tool, Nri or Nra, to replace the MRC and DDP. They noted that the tool is more efficient than the current systems and has been used in a few states. However, they expressed concerns about the tight timeline for implementation on January 1, 2027, and the potential impact of a new administration. They also mentioned that the tool is not yet fully developed and that they are working with Deloitte to shape the model. The team is also considering a cost-based methodology for the ICF program, which does not require an assessment tool. They are waiting for additional data from the department to further evaluate this approach.

EVV System Denial Issues Discussed

Debbie discussed the ongoing issues with the Electronic Visit Verification (EVV) system, particularly the denial of claims without matching EVV records. She mentioned that the Department of Medicaid is denying 16% of claims, while data from the Department of Developmental Disabilities (DODD) shows that 60% of claims would be denied if the current system was implemented. Debbie expressed concern about the accuracy of the Department of Medicaid's data and the potential impact on providers. She also mentioned an amendment in the House Bill that would prevent the Department of

Medicaid from denying claims without matching EVV records. Debbie encouraged providers to review their claims data and consider requesting exemptions for services that are not required to use EVV. She also mentioned a potential rule change that would allow independent providers to use alternative EVV vendors.

EVV Meeting Update and Provider Fee

Debbie provided an update on the Evb meeting and the Federal side, mentioning potential leaked language from energy and commerce on the reconciliation bill. She also discussed the impact of the Federal side on the state budget and the potential changes to the provider fee language. Debbie also mentioned the creation of a provider referral system called the Live Care Marketplace by Onseen, which is being rolled out in some counties. Lastly, she reminded the team about the Dsp Compensation survey for calendar year 24.

AI-generated content may be inaccurate or misleading. Always check for accuracy.