

Meeting summary for ID/DD Member Call (03/27/2024)

Quick recap

Debbie led discussions on various topics including the department's mission, vision, and values, the availability of the Icf assistive technology grant, and issues with Medicaid reimbursements. Pete addressed the ongoing review of the 5 Year Rule and concerns about the removal of individuals from the waiting list due to data collection methods. Josh updated on the work being done around the Mui rule and the department's plan to revise a rule, with a focus on hospitalizations. Lastly, Debbie addressed questions from ICFF providers about the certificate of need requirement for revalidations and reminded the team about the upcoming HCA convention.

Next steps

- Josh will provide an update on the MUI rule in about two weeks and share the draft with the membership for feedback.
- Debbie will communicate with the Department of Medicaid about the certificate of need issue for ICF providers during revalidations and ensure the department addresses the error in their coding.
- Pete will continue to work with the Department of Medicaid to identify and resolve issues with the provider enrollment and revalidation processes.

Summary

Dd Department Mission, Vision, and Values Update

Debbie initiated a call with Dd members, acknowledging that it was spring break for many. She shared updates, including a request from Jeremiah Wagner at Dodd to gather input on the department's mission, vision, and values. Debbie provided a link to a survey for members to share their feedback on the current statements and their impact on the Dd system in Ohio. The aim was to ensure the statements accurately reflected the department's role.

Icf Assistive Technology Grant Update

Debbie informed the team about the ongoing availability of the Icf assistive technology grant with two tranches of funding totaling \$300,000. She encouraged Icf providers to apply as soon as possible, as the funds are allocated on a first-come, first-served basis. Debbie also mentioned a notice from the Department regarding non-medical transportation for community integrated employment, which allows billing at commercial transportation rates until a new rule is effective, anticipated to be around the beginning of next year. She noted that a proposed model for this service has not yet been received from Milliman.

Authorization, Deadlines, and Medicaid Reimbursements

Debbie reminded the team about the authorization of commercial transportation by county boards and the upcoming deadline for submitting outcome tracking data. She also informed the team about an extension for ICf cost reporting to April 15th. Finally, she addressed ongoing issues with Medicaid reimbursements, particularly in regard to missing remittance advice. Meanwhile, Pete gave an update on the work group's progress.

5 Year Rule Review and Assessment Process

Pete discussed the ongoing review of the 5 Year Rule, focusing on data analysis and the assessment process for the waiting list. He noted some concerns about county boards potentially avoiding the assessment process, but also highlighted that this was not a widespread issue. The team also considered whether changes needed to be made to the assessment tool to better cater to the needs of children. However, no concrete decisions or drafts of the new rule were reported. In response to Debbie's question about comparisons with other states' waiting list processes, Pete confirmed that no such discussions had taken place.

Addressing Waiting List Removal Concerns and Mui Rule Update

Pete discussed concerns about the removal of individuals from the waiting list due to the Department of Health's data collection methods, specifically cases where people are taken off the list despite not receiving services due to a lack of providers. Debbie then handed over to Josh, who gave an update on the work being done around the Mui rule. He explained that a work group had been formed to review the Mui rule, which has resulted in multiple drafts being distributed. The latest draft was discussed, with a focus on limiting unnecessary reporting of Mui eyes to reduce administrative burden on providers. Josh also introduced the idea of a new category for reportable medical incidents to potentially alleviate the Mui reporting requirements.

Revising Hospitalization Definition in Rule

Josh discussed the department's plan to revise a rule, which is expected to be shared with the membership in about two weeks. The draft will be accompanied by a track changes version to facilitate feedback, with the next work group meeting scheduled for about a week to a week and a half after the initial distribution. The revised rule is set to address a definition change around hospitalizations in response to a debate within the group. Debbie clarified that the revised definition would not cover unscheduled medical needs. Gina, who missed the meeting, inquired about a new meeting, and Josh promised to check the calendar for the next gathering.

CoN Issue and HCA Convention Reminder

Josh discussed a planned draft and requested feedback within a specific time frame to facilitate a more focused discussion. Debbie addressed questions from ICFF providers

about the certificate of need (CoN) requirement for revalidations, an issue still unresolved despite bringing it to the Department of Medicaid's attention over a year ago. She advised providers to upload a blank document as a workaround and mentioned ongoing efforts to rectify the issue. Debbie also reminded the team about the upcoming HCA convention and the early bird registration deadline. Lastly, she informed the group that there would be no meeting the following Wednesday due to her and Pete's attendance at the Anchor Convention.

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