

OPWDD/Provider Association Partnership

Monthly Meeting – April 23, 2012

Meeting Notes

OPWDD Attendees: Commissioner Courtney Burke; Jim Moran; Kate Bishop; Barbara Brundage; Mike Feeney; Jill Gentile; John Gleason; Henry Hamelin; Joanne Howard; Jerry Huber; Michael Kirchmer; Kate Marlay; Ceylane Meyers-Ruff; John Monteiro; Maryellen Mosier; Janet Zampella; Jenny Haneman; Caryn Scott; and topic-specific staff

Provider Association Attendees: Waffa Abboud (Human First, Inc.); Jan Abelseth (COMPASS Agencies); Sue Constantino (CPA of NYS, Inc.); Pat Dowse (NYS Rehabilitation Association); Mark Foley (DDAWNY); Ann Hardiman (NYSACRA); Sue Hoger (Resource Center for Accessible Living, Inc.); John Kemmer (NYSARC); Ed Matthews (UCP of NYC); Gary Milford (LDA of NYS); Anne Ogden (NYS Catholic Conference); Peter Pierri (Interagency Council of MR & DD Agencies); Seth Stein (Long Island Alliance); Barbara Wale (EDA NYSARC); Yvette Watts (NY Assoc. of Emerging & Multicultural Providers, Inc.)

Welcome/General Remarks

- Jim Moran opened the meeting with the somber news of the passing of Gary O'Loughlin, former Director of the Revenue Support Field Offices.

Open Discussion

- *Promote* – Jill Pettinger gave a brief history of SCIP and the reasons behind the transition to the PROMOTE curriculum. Jill noted that there were many inconsistencies throughout the State with regard to the teaching and implementation of SCIP-R, and that instructors focused more on physical interventions than positive interactions. It was found that there were too many vast differences in the physical intervention techniques utilized statewide, and “dusting off” current SCIP-R curriculum and intervention techniques would not meet OPWDD’s goal of promoting positive relationships. Therefore, OPWDD made the decision to develop a consistent, standardized teaching method, curriculum and timeframes for delivery of the curriculum content. OPWDD will implement tighter policy and quality assurance mechanism around the program and the competencies that staff must have prior to using PROMOTE. This will foster a more positive culture and provide staff with the necessary tools that will encourage less reliance on physical interventions.

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Providers expressed concern that with all the other training going on, it might take an inordinate amount of time to train on the new curriculum. Jill mentioned that a shorter “bridge” program was in development, which will provide training for existing staff already trained in SCIP-R, and that this would alleviate some of the time issues. This current year of training is focused on training “master trainers,” “instructor trainers” and “instructors” so training for direct support staff will be pushed out later in the year. However since staff may be deployed to fill in for other personnel due to absences etc, it is necessary for all staff to be trained.

One provider also expressed concern about the cost of providing training, which could result in providers deciding to take more challenging individuals. In responding to the question as to how an agency determination will be made, Jill stated that a master instructor will identify the strongest trainers and which agencies have the strongest interest in getting started. Jill indicated that she would schedule a statewide webinar or video conference to share more information about the history of and rationale for development of the PROMOTE training, as well as sharing an overview of the content of the curriculum. Jill noted that it was important to run both SCIP-R and PROMOTE concurrently to keep costs down and will chair a workgroup, which includes PA members, that seeks to identify the most effective strategies for statewide rollout of the new curriculum.

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- *Center for Medicaid and Medicare Services (CMS) Q&A's* – Jim stated that OPWDD continues to meet with CMS regularly, with the most recent call being April 19, 2012, focusing on the program side of the proposed “People’s First Waiver”. OPWDD is still working with CMS on the financial piece with the hope of a speedy resolution. Much of the discussion on the program side has focused on requests from CMS to provide additional details, and while our goals have remained the same, CMS is looking for additional specifics as to how we will achieve these goals, and under what waiver(s) these goals are more likely to be achieved. It is still OPWDD’s intent to move away from fee-for-service and into managed care. Jim stated that we hope to have sign-off by the summer so we can proceed with the case studies and pilots. Questions surrounding DISCOS cannot be addressed as the particulars have not yet been designed.

OSC – Fraud Detection and Prevention for the Not-for-Profit Sector

- Elliot Pagliaccio, Deputy Comptroller of Office of The State Comptroller’s (OSC) Division of State Government Accountability, spoke of OSC’s high priority to reach out to Not-for-Profit providers and indicated that the Comptroller has been

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pushing for prompt payment for contactors. More attention is now being devoted to the audit side and OSC will be putting together a training program on audit protocols. With a greater emphasis on fraud indicators, a fraud consulting unit has been established and Mr. Pagliaccio invited PA members to contact him with ideas or if they feel an audit team is not performing an audit properly. One member requested that OSC try to coordinate with other auditing entities so that a provider is not being audited by multiple entities at the same time.

OSC's Suzanne Mazoné next presented a brief description of OSC's fraud training program. The nearly three hour program, which can be provided to large and small groups, is a broad overview which details the fraud triangle and gives examples of fraud schemes (e.g., stealing cash, fake payments, collusion/kickbacks, payroll fraud). Additionally, the training packet contains information on self assessment, fraud risk assessment, data analysis, fraud prevention and detection steps and the importance of policies (background checks, code of conduct, whistleblower, etc.). Suzanne indicated that OSC would be open to providing training via webinar, and also stated that OSC hopes to roll out a more in-depth training program next year. To schedule a training session, providers can contact Joseph Galante, Not-for-Profit Liaison at the OSC at 212-681-4475.

Early Alert

- Megan O'Connor reported on the Early Alert Process, which establishes defined early alert triggers (program, fiscal and governance deficiencies), the notification process (letter will go to Executive Director and the Board), potential courses of action and criteria for removal from Early Alert (agencies will come off Early Alert in six months, as long as they show consistent compliance during that timeframe). Agencies will not be eligible for expansion of services while on Early Alert status and Megan stated that there will be a separate decision stipulating how long all Early Alert information on a specific agency will remain on the OPWDD website. A request was made that once an agency comes off Early Alert, that all information be removed from the website, but Jim noted that performance of an agency is part of the public record and should be available for review.

Fire Safety ADM

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- Megan O'Connor and Jonathan Pease reported on the changes to the Fire Safety ADM, and gave a brief synopsis of the recent revisions, which include changes to the smoking ban language for non-certified sites, unannounced and observed fire drills (for certified residences, unannounced fire drills will be conducted a minimum of once per year on the overnight shift and once a year on a shift chosen by the agency, and a change in language as to who is considered an administrator), and smoke/heat detector requirements for attics and crawl spaces. There has also been a standardization of fire drill forms, which will go into effect 2 months after the effective date of the revised ADM. A question was raised on "Defend in Place". "Defend in Place" will be addressed as a separate project.

Reportable Incidents

- Leslie Fuld gave an update on reportable incidents, and stated that by fall 2012, there will be certain data required for a reportable incident. For example, required information would include such things as contributing factors and medical findings (type of injury, where on the body it occurred). The intent is to be able to pull specific data for quality improvement purposes. In addition, a memorandum regarding financial exploitation/theft will come out from the Regulatory Affairs Unit and will indicate that wherever it appears that a crime may have been committed, theft greater than \$100 will be considered a serious reportable incident, while less than \$100 will be a reportable incident (unless it is a credit or benefit card, which remains as a serious reportable incident).

Community Hab Review

- Joanne Howard and Chris Nemeth discussed hourly community habilitation and whether restructuring is meeting our goals. Based on program and fiscal analyses, a determination will be made whether adjustments to current hourly community hab fee levels are warranted. A second meeting will be held within the next few weeks to provide more information.

Updates

- *Executive Order #38, Capital Commitment and the RRR Letter and Workmen's Comp Study* – Mark Pattison stated that the Executive Order filing will be on May 1st. A memo was sent out on the Capital Commitment and RRR letter, and there were

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no comments back. Lastly, work continues on the Workmen's Comp study and the contract and deliverables still need to be worked out. The first phase of the study is being funded by IAC and OPWDD will fund the second phase.

- *eMedNY Prompt Payment* – Karla Smith spoke briefly about the new Delay Codes put out by Department of Health (DOH), which will take effect beginning in May, and noted that if an agency is billing promptly, they will have no reason to use a delay code. Karla stated that OPWDD will not advise agencies which delay reason code they should use, because the reason for the delay should be supported by their documentation. Jim also reiterated that OPWDD will not reimburse an agency that does not bill within the required timeframes (90 days of the date of service) or has their delay code rejected. Karla also stated that the number of OPTS calendars available for service recording will be reduced, most likely, to two in order to give OPWDD that third month to bill once services have been recorded.

DDSOs and agencies must work together to get the contracts renewed so that an agency does not lose out on the calendars in which to bill, and agencies should be encouraged to use CHOICES for program additions/ removals, in order to better track the process. Finally, Karla stated that a strategy is in development for the phase out of OPTS contracts, but nothing has been finalized to date.

- *Governance* – Jim Nellegar reported that the Governance Workgroup circulated a draft governance document to stakeholders and is awaiting comments on the draft. When it comes back, it will be shared with the PA group prior to the final regulatory language.
- *MSC* – Helene DeSanto reported providers appear to be unwilling to pick up new MSC cases because staff are leaving the field due to a perceived uncertainty of OPWDD's future waiver status. Regardless of which waiver OPWDD is granted, there will be a straddling of both worlds (MSC and Case Management) for a number of years. Helene requested feedback on how we can maintain staff in MSC while OPWDD undergoes CMS negotiation. Helene also requested emergency, after-hours contact information for providers in the event OPWDD needs to pass urgent information on to providers.

Wrap Up

- The next meeting of the Provider Association will be Monday, May 21, 2012.

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NYS Office For People With Developmental Disabilities

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