



The MSC E-VISORY is an electronic publication which provides information on policies, guidance, available programs and services and training opportunities related to MSC. In order to receive an email notification when a new MSC E-Visory is posted, or to view past issues visit the following link: [MSC E-Visory](#)

ISSUE # 05-16

June 6, 2016

Materials for the June 8, 2016 MSC Supervisors Conference

The MSC Supervisors Conference is being held on June 8, 2016 via videoconference and WebEx from 9:30am-12:30pm. The conference agenda is as follows:

- MSC2 & MSC3 Review
- DOH's ISP Review Findings
- Advocacy
- DSP Core Competencies
- Incident Management

NOTE: The materials that will be referenced during this conference are attached to this MSC E-Visory. There will not be any materials distributed on the day of the conference.

Registration for this conference will close June 5, 2016. Those who have not registered for this conference and would like to can do so at the following link:

http://www3.opwdd.ny.gov/wp/wp_catalogc1310.jsp

Training Opportunities on CQL Personal Outcome Measures

The Council on Quality and Leadership (CQL) is hosting more than a dozen free training events across New York, in collaboration with NYSACRA and OPWDD. These trainings share how CQL's Personal Outcome Measures® (POMs) put person-centered philosophies into action, by finding out what really matters to a person receiving supports and services. In a Personal Outcome Measures® interview, 21 indicators explore the presence, importance and achievement of outcomes, involving choice, health, safety, social capital, relationships, rights, goals, dreams, employment and more.

Location and dates of trainings, as well as registration, can be found at

<http://www.c-q-l.org/NYtraining>



NEW YORK
STATE OF
OPPORTUNITY

**Office for People With
Developmental Disabilities**

MSC Supervisors Conference

June 8, 2016

June 3, 2016

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Welcome

Anne Swartwout
MSC Statewide Coordinator
Anne.Swartwout@opwdd.ny.gov



NEW YORK
STATE OF
OPPORTUNITY

**Office for People With
Developmental Disabilities**

Agenda

Welcome
MSC2 & MSC3 Review
DOH's ISP Review Findings
Advocacy
DSP Core Competencies
Incident Management
Closing



NEW YORK
STATE OF
OPPORTUNITY

**Office for People With
Developmental Disabilities**

Information

Materials can be found in the evisory
http://www.opwdd.ny.gov/opwdd_services_supports/service_coordination/medicaid_service_coordination/msc_e-visories

Certificates are not provided to those attending by Webex. Use your confirmation email.



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MSC2



MSC2: Change of Vendor

- The individual works with the DDRO to select a new vendor.
- The new vendor completes section III
- The requested effective date must be at least the first day of a month following the month in which the requested change is being made.
- Requests must be received by the DDRO by the 15th of the month to process for the 1st of the month,
 - After that deadline, the request will be processed for the following month



MSC2: Change of Vendor

- If the regional office determines that the vendor can serve the individual a notification letter is sent to the individual, family/advocate, the “old” vendor and the “new” vendor. The letter notifies all parties of the effective date of the vendor change.
- Vendors must hold to the effective date made during the DDRO’s review.
- The effective date of the change of vendor must always be the first of the month.



MSC2: Change of Vendor

The prior MSC vendor needs to send copies of all necessary and required documents to the new MSC vendor including but not limited to:

- The most current ISP
- LCED determinations and related documentation including the initial LCED and supporting evaluations
- The executed service coordination agreement(s)
- The Notice of Decision (NOD) authorizing MSC for the person




MSC3



MSC3: Withdrawal from MSC

Allowable Reasons for Withdrawal:

- Individual is deceased
- Individual is no longer enrolled in Medicaid
- Individual is now permanently residing in an ICF/MR or ICF/DD, or another Medicaid facility that provides service coordination
- Individual is enrolled in another Medicaid funded service coordination program
- Individual does not meet the need for ongoing and comprehensive service coordination
- Individual moved out of state
- Individual moved out of catchment area
- Other reason (will need to specify)



MSC3: Withdrawal from MSC

- Additional information may be requested before processed by the DDRO
- Certain reasons always require additional information:
 - Individual does not meet the need for ongoing and comprehensive service coordination
 - Completed MSC Assessment of the Need for Ongoing and Comprehensive Service Coordination
 - Last 3 months of MSC notes
 - Individual can't be located (marked as "other")
 - Certified letter and mail receipt documenting attempt to make contact with individual/family.
 - MSC4 completed by DDRO
 - Voluntary Withdrawal (marked as "other")
 - Section IV completed by individual
 - MSC4 completed by DDRO
 - Moves to other Region (DDSO)
 - MSC1-APPL (New Vendor)
 - Completed MSC Assessment of the Need for Ongoing and Comprehensive Service Coordination – only in cases in which the individual is also changing MSC vendor (New Vendor)



MSC3: Withdrawal from MSC

The DDRO will review the form for accuracy, verify supporting documentation and complete section V.



- The DDRO will choose the appropriate reason for withdrawal and identify the effective date.



MSC3: Withdrawal from MSC

The service coordinator should ensure that when an individual is being withdrawn from MSC that:

- the Individual and his/her circle of support understand what it means to withdraw from MSC and understand who to contact if s/he want or become eligible to re-enroll in MSC.
- If the Individual is participating in the HCBS Waiver, the Individual and his/her circle of support identify an agency that will be responsible for keeping the person's ISP and Level of Care up to date (PCSS provider)



Resources

Required Supporting Documentation for MSC Transaction Forms

http://www.opwdd.ny.gov/sites/default/files/documents/Required_Supporting_Documentation_for_MSC_Transactions_0.pdf

Transaction Forms

http://www.opwdd.ny.gov/opwdd_services_supports/service_coordination/msc_forms



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DOH's ISP Review Findings

Kate Marlay



DOH ISP Review

- Some background:
 - DOH in collaboration with OPWDD (DQI) reviews on an annual basis agency documentation and Medicaid billing as part of its oversight function.
 - Current review: a sample of individuals authorized to receive HCBS Waiver Services during October 2014 – September 2015.



DOH ISP Review

- Review entailed comparison of Medicaid paid claims with the HCBS Waiver Services that were outlined in a person’s ISP and Habilitation Plan(s).
- This spring, the review of Individuals’ ISPs and Habilitation Plans as well as eMedNY billing took place at both DOH and OPWDD.
- Staff from DQI and Waiver have been analyzing the findings.



Preliminary Findings

- ISP reviews have not been reviewed/signed within the 45 day time period.
- ADM #2010-04: If an ISP review results in a rewritten ISP, the service coordinator must sign and date within 45 days of the date of review.
- 13 ISPs out of 100 reviewed had late signature dates.
- This is a program standard that must be met. MSCs must ensure that the 45 day timeframe is met.



Preliminary Findings

- ISPs need to be updated accordingly to reflect HCBS Waiver Services and 100% State Paid Services.
- The review has indicated in many instances that Respite Services were listed under HCBS Waiver Services when they should be listed under State Paid. A review of billings has determined this.



Preliminary Findings

- Respite is **Relief to Caregiver**.
- 4 individuals had ISPs that discovered people living independently, therefore there was no caregiver to relieve.
- 6 individuals had ISPs that showed no waiver services were billed for the entire timeframe of the review but were listed on their ISP.
- MSCs need to make sure individuals are eligible and remain eligible for the waiver services they receive.
- Accuracy of ISP content and adherence to mandated timeframes will ensure that disallowances are not issued.



Preliminary Findings

- Habilitation Plans also need to accurately reflect required elements: ADM # 2012-01.
- Four Required Sections of Hab Plan:
 - Identifying Information (Name, Medicaid ID #, etc)
 - Valued Outcomes – derived from the ISP.
 - Staff Services and Supports – must address one or more strategies for service delivery: skill acquisition/retention, staff support, exploration of new services.
 - Safeguards – those lined out in Section 1 of the ISP are the starting point for the Hab service providers



Preliminary Findings

- Safeguards: Habilitation Plans need to accurately reflect Safeguards.
- Safeguards are necessary to provide for the person's health and safety while participating in the habilitation service.
- Therapeutic Leave Days: this must be noted in Hab Plan, not in ISP.



DOH ISP Review

- MSCs need to work with Habilitation Plan providers to ensure that timeframes for both ISP and Hab Plans are met.
- MSCs need to ensure that reviews happen on a timely basis.
- Adherence to these standards will ensure that service continuity is preserved for individuals and that billing is appropriate and in compliance with Medicaid rules.



Questions?



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Advocacy

Chester Finn



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DSP Core Competencies

Dianne Henk






Direct Support Professional Core Competencies

A Collaborative Approach for Improved Outcomes

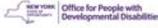
MSC Presentation
June 8, 2016

Developed by the New York State Talent Development Consortium

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NYS Core Competencies – Today’s Goals

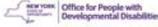
- Competencies at a Glance
 - What, Why and the MSCs
- Resources to Support Implementation
 - Regional Centers for Workforce Transformation
 - Training Opportunities for MSCs



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What are the Core Competencies?

- Standards Based on Knowledge/Skills/Ethics
 - Adopted by the NYS Talent Development Consortium - 2014
 - Apply statewide to all DSPs, at state and voluntary programs
 - Coupled with the NADSP Code of Ethics, they are the foundation for providing person-centered supports



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What the Core Competencies are NOT

The Core Competencies are **NOT** a training program.

Agencies are not expected to revamp their training programs, but rather, should compare their current training to the Core Competencies and cross-walk the training criteria.

The Goal is OUTCOMES!! Not a checklist!



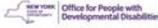
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Why the Core Competencies?

There can be no service system transformation without workforce transformation.

Core Competencies and Workforce Transformation are essential to the implementation of:

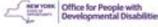
- Person-Centered Planning
 - HCBS
- CQL Personal Outcome Measures
 - NADSP Code of Ethics



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MSCs and the Competencies

- MSCs are NOT required to be evaluated on the Core Competencies under the OPWDD ADM
- HOWEVER...
 - MSCs are critically important to their implementation
 - Through understanding, supporting and promoting the standards
 - Through assisting individuals, families and DSPs
- MSCs are a key part of our service system, our standards and culture

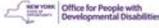




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Core Competency Goals

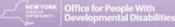
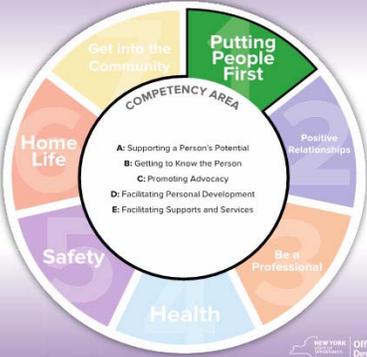
1. Putting People First
2. Building and Maintaining Positive Relationships
3. Demonstrating Professionalism
4. Supporting Good Health
5. Supporting Safety
6. Having a Home
7. Being Active and Productive in Society



Core Competencies for Direct Support Professionals



Core Competencies for Direct Support Professionals

















ADM #2014 - 03

- Released July 1, 2014
 - Explains Initiative
 - Defines DSP
 - Documents
 - Assistance and Advice to Service Providers
 - Code, Competencies and Required Performance Evaluations

New York State Office for People with Developmental Disabilities

ADM #2014 - 03

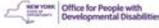
- Implementation Date April 1, 2016
 - Use of performance evaluations required for DSPs
- March 31, 2017
 - Performance evaluations completed according to provider's written policy.
- October 1, 2017
 - DQI begins verifying the implementation of the NADSP Code of Ethics, the NYS DSP Core Competencies and the NYS DSP Performance Evaluations

New York State Office for People with Developmental Disabilities

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Regional Centers for Workforce Transformation

- Regional collaborations to develop capacity of DSP workforce in NYS
- Shape system-wide cultural thinking
- Share leading practices, trainings, etc.
- Combine Code & Core with POMs, HCBS, Person-Centered Planning
- Established with 3 Years of DDPC Funding
 - Currently in Q3 of Year 3



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www.workforcetransformation.org



2016
11,000+ visits

Code of Ethics & Core Competencies for Direct Support Professionals

What's New to the website

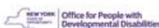
Website Tip: The State has the 2015-2016 Code of Ethics and Core Competencies for Direct Support Professionals. This is an important tool for all DSPs. It is available on the website and in the 2015-2016 Code of Ethics and Core Competencies for Direct Support Professionals. It is available on the website and in the 2015-2016 Code of Ethics and Core Competencies for Direct Support Professionals. It is available on the website and in the 2015-2016 Code of Ethics and Core Competencies for Direct Support Professionals.



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RCWT Resources

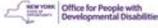
- Links to ADM and Forms
- Where to find training
- How to Communicate the Competencies
- Provider Shared Resources
 - Observation Tools
 - Implementation Strategies
- Frequently Asked Questions
- Contact Information for Assistance



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Free Webinars

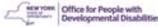
- April through August
 - Crosswalk: HCBS, POMs, PCP, Comps, Code
 - What Families Need to Know
 - How/Why of Workforce Transformation
 - Workforce Transformation Supervisor Version
 - Demystifying Performance Evaluation
 - Agency Culture Change
 - Person Centered Language
 - Performance Evaluation Systems



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Free CQL Trainings

- Statewide Regional Trainings by CQL
 - One-day POMS
 - Four-day Person Centered Interviewing

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Resources – Videos – Online and DVDs



- Core Competencies Orientation
- Redefining the Role of the DSP
- Demonstrating Professionalism
- How to Supervise Using the Core Competencies and the Code of Ethics
- The Changing Roles and Expectations of Direct Support Staff: What Families Need to Know
- Informed Decision Making
- Being Active and Productive in the Community

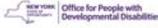


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Comps Implementation – The Tool

3 Evaluation Tools

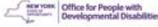
- Initial – 3-6 Months
 - Annual
- Family/Individual Interview Tool (+ written version)



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Questions

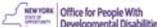
Dianne Henk, Director of Workforce Transformation
dianne.w.henk@opwdd.ny.gov



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Incident Management

Shari Mayo

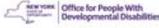


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Incident Management Updates

Shari Mayo
Statewide Compliance Officer
OPWDD Incident Management Unit

shari.mayo@opwdd.ny.gov

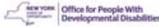


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WHO ARE MANDATED REPORTERS?

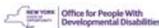
- Mandated Reporters are (1) Custodians and (2) Human Service Professionals.

1. Custodians:
 - Employees, volunteers, directors and operators of covered facilities and programs and
 - External staff who have regular and substantial contact with the people being served.
2. Human Service Professionals:



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Incident Reporting Part 624



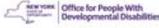
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Reporting to the Justice Center (JC)

855-373-2122

All reportable incidents must be reported to the Justice Center when it meets the following criteria:

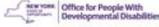
- Meets the definition of a “reportable incident” in Section 624.3 of abuse/neglect or a significant incident; AND
- **Occurred under the auspices of a program certified by OPWDD or operated by OPWDD**



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Reporting to OPWDD

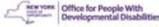
- All Incidents which rise to the level of Reportable Incidents must be reported to OPWDD;
- To the appropriate OPWDD Incident Compliance Officer during business hours
- Via phone during off hours to IMU
1-888-479-6763
- All contact information is posted on the OPWDD website on the incident management page



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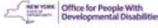
Voluntary Non-certified Programs

- Reportable incidents & deaths are reported to OPWDD
- Serious Notable occurrences – reported to OPWDD
- Voluntary non-certified programs are all programs which do not have an operating certificate and are not under the authority of the Justice Center



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Part 624-Categories of Incidents



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Reportable Incidents: Abuse and neglect

- Physical abuse
- Sexual abuse
- Psychological abuse
- Deliberate inappropriate use of restraints
- Use of aversive conditioning
- Obstruction of reports of reportable incidents
- Unlawful use or administration of a controlled substance
- Neglect (no subcategories)

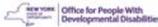


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Reportable Significant Incidents

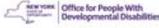
- Conduct between individuals receiving services
- Seclusion
- Unauthorized use of time-out
- Medication error with adverse effect
- Inappropriate use of restraints
- Self abusive behavior with injury



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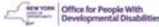
Reportable Significant Incidents

- Missing person
- Unauthorized Absence
- Choking with known risk
- Choking with no known risk
- Injury, with hospital admission
- Theft/Financial exploitation
- Mistreatment
- Other significant incident



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- Other Part 624 Incidents which do not fall under the authority of the Justice Center

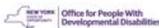


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Serious Notable Occurrences:

- Sensitive Situation
- Death*

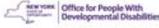
*Must be reported to Justice Center Death Reporting Line – 1-855-373-2124



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Minor Notable Occurrences:

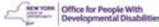
- Injury
- Theft/Financial Exploitation



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Death Reporting to OPWDD

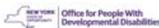
- All deaths must be reported to OPWDD
- This includes deaths reported under Part 624 and Part 625
- The report of death form must be completed and submitted in IRMA within 5 working days



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Part 625

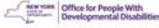
- OPWDD added Part 625 to its regulation effective June 30, 2013
- Part 625 applies to Events/Situations which are not under the auspices of the agency
- Part 625 satisfies OPWDDs responsibility under the adult abuse reporting law



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Part 625

- If an individual is known to OPWDD, the OPWDD provider is responsible to intervene as appropriate
- APS may be able to assist in certain circumstances

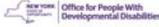


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Part 625 Classifications

Agencies are required to intervene if the event/situation meets the definitions of:

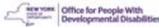
- Physical abuse
- Sexual Abuse
- Emotional Abuse
- Active/Passive/Self Neglect
- Financial Exploitation
- Death
- Other



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- If an event/situation occurs in a facility subject to the oversight of another state agency;
 - School
 - Hospital
 - Doctor's office

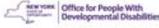
This must be documented and reported and the agency must report the event/situation to that oversight agency



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Interventions may include:

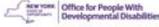
- Notifications to family, SCR, APS, law enforcement, etc.
- Offers to make referrals to service providers, clinicians, other state agencies, etc.
- Interview of the individual or witnesses
- Assessment or monitoring the individual
- Review of records
- Education for the individual about choices



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Part 625-Events/Situations

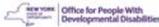
- Not subject to Jonathan's Law (not incidents)
- No Committee Review Required



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Questions

**Next MSC Supervisors
Conference:
September 14**