

CARE NETWORK

Agenda

- Overview of the CHOICES program and self-direction
- * The roles and responsibilities within the program and Consumer Direct Tennessee (CDTN)
- Reporting Requirements
- Time Approval in CareAttend and DirectMyCare

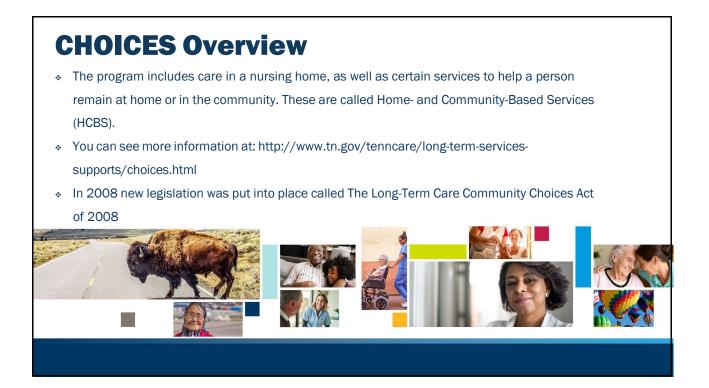




CHOICES Overview

- TennCare CHOICES in LTSS (or CHOICES for short) is TennCare's program for adults (age 21 and older) with a physical disability and seniors (age 65 and older)
- Helps with everyday activities that you may no longer be able to do for yourself as you grow older, or if you have a physical disability
- CHOICES can assist you with things like bathing, dressing, getting around your home, preparing meals, or doing household chores





Self-Direction

- Participants enrolled in the CHOICES program can choose self-direction
- * CHOICES offers four service options:
 - Personal Care
 - ✤ In-Home Respite
 - Companion Care
 - Community Transportation



Personal Care

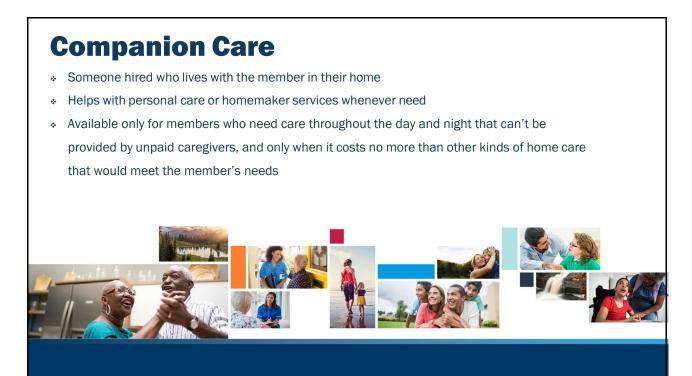
- * Designed to assist an individual with daily activities of living
- Personal Care visits are hourly services of no more than four hours
- Services that are covered include the following:
 - ✤ Eating
 - ✤ Toileting
 - ✤ Grooming



In-Home Respite

- * Offered as needed for caregiver relief
- * Only applies for routine family or other caregivers that are not paid to support the member
- * Can be up to 216 hours per member per calendar year





Community Transportation

- Helps the member get around the community
- Allows members to engage in typical day-to-day, non-medical activities
- When possible, family, neighbors, co-workers, carpools, or friends are utilized to provide this assistance without charge



Roles and Responsibilities

Care Coordinator

- Meeting with the member to identify needs
- Educating the member on the CHOICES program
- Working with the member to develop a Person-Centered Support Plan (PCSP)
- Completing the Risk Assessment and Risk Agreement
- * Ensuring the self-direction backup plan meets the member's needs



Care Coordinator

- Authorizing individual budgeted services
- Monitoring service provision for quality and appropriateness
- * Receiving and reviewing all reports submitted by CDTN and the Supports Broker
- * Maintaining monthly phone contact and completing face-to-face home visits
- Assisting members and representatives in understanding individual services
- * Ensuring the PCSP stays up-to-date



Supports Broker

- Assigned by CDTN
- Provides training and support to members and representatives on:
 - Understanding the program
 - * Fulfilling the responsibilities of being an employer
 - * Scheduling, training, and supervising self-directed workers
 - * Aiding in developing the initial backup plan





Consumer Direct Tennessee (CDTN)

- Provides training and support to members
- Serves as the Fiscal Employer Agent
- Pays workers on behalf of the program members
- Withholds and deposits taxes and files tax and labor reports
- Ensuring the self-direction backup plan meets the member's needs
- Provides regular reporting on authorized units
- * Responds to questions from members, representatives and workers





Member

- Finding, interviewing, hiring and firing workers
- Determining worker duties and developing job descriptions
- * Training workers to provide personalized support
- Scheduling and supervising workers
- Ensuring there are enough workers hired to provide necessary support
- * Ensuring the worker enters time, and approving the hours submitted



Member

- * Ensuring that no worker provides more that 40 hours of support per week
- Managing services
- Evaluating worker performance
- Setting wages
- * Reviewing and ensuring proper documentation for services provided
- Developing and implementing the backup plan



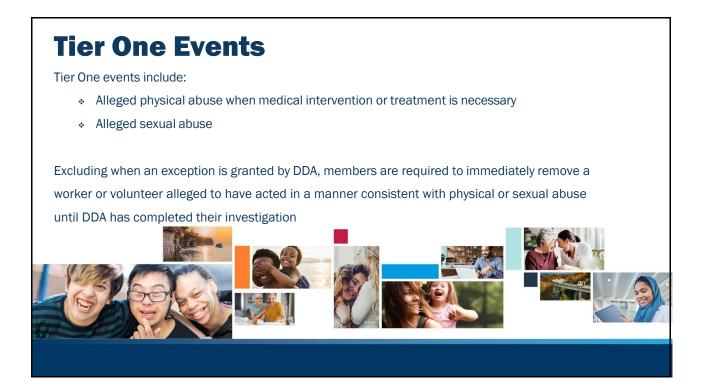




Reporting

- As a member in a TennCare program, you are required to report any instances of Medicaid fraud and abuse, as well as any instances of abuse, neglect, or exploitation
- Reportable events are separated into Tier One and Tier Two events, with other events that also need to be reported
- Tier one reportable events need to be reported to DDA's Abuse Hotline within four hours of discovery, and a corresponding REF must be submitted within one business day using the Formstack Link on DDA's website.



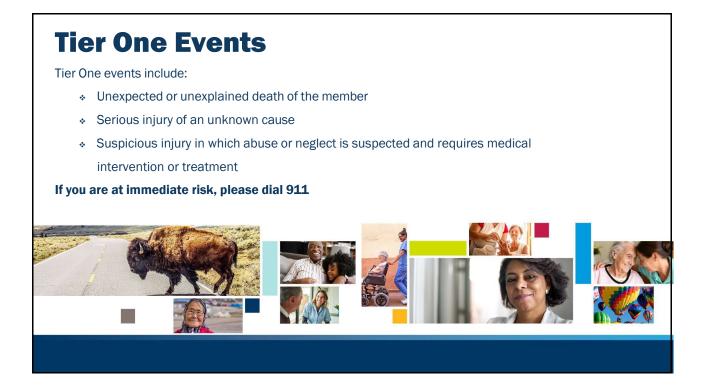


Tier One Events

Tier One events include:

- Alleged emotional or psychological abuse when medical intervention or treatment is necessary
- Alleged exploitation exceeding \$1000 or missing prescription-controlled medication with a replacement value greater than \$1000
- Alleged neglect which requires medical intervention or treatment and all neglect that is potentially felonious in nature when there is not an injury







Reporting Tier One Events

If a Tier One Reportable Event, or any other event, poses an immediate threat to the health and safety of a member, workers are required to remain with the member until the threat is removed or the member receives needed medical treatment, if appropriate.





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Tier Two Events

- REF must be submitted to DDA using the FormStack link within one business day of the occurrence or discovery of the event.
- * The event must also be reported to CDTN and the Supports Broker
- Tier Two Reportable Events should also be reported to Adult Protective Services (APS) or Law Enforcement as required by law



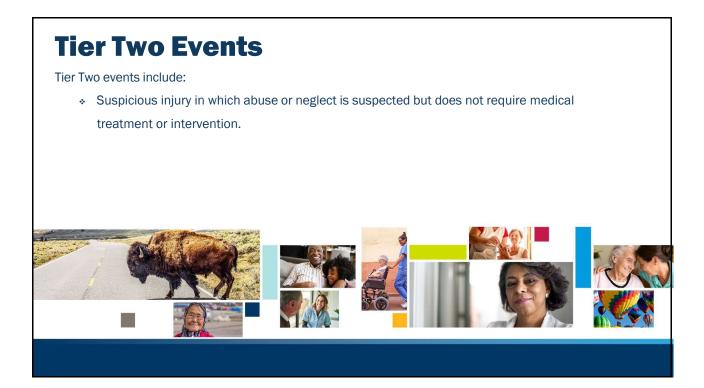


Tier Two Events

Tier Two events include:

- Alleged physical abuse when no medical intervention or treatment is necessary, and the member is not at continued risk of serious harm
 - CDTN, after seeking the member's preference, shall determine at their discretion and in accordance with their policy whether to remove a worker or volunteer named in a Tier Two reportable event from any or all direct support until DDA has completed their investigation





Additional Reportable Events

- Additional reportable events and interventions, which are not related to abuse, neglect, or exploitation, should also be reported using the REF
- * These include medical, psychiatric, and behavioral events
- Report the event to CDTN, the Supports Broker, and online to DDA using the REF FormStack Link within one business day





Reportable Medical Events

Reportable medical events include:

- ✤ Cellulitis
- * A choking episode requiring physical intervention
- * Death (other than those that are unexpected or unexplained)
- * Fecal impaction
- ♦ Flu





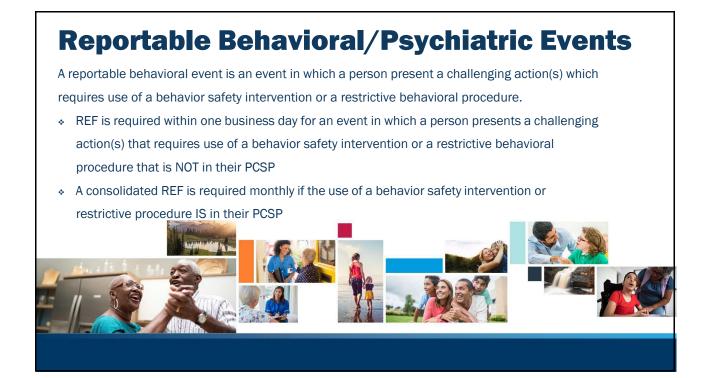
Reportable Medical Events

Reportable medical events include:

- Sepsis
- * Serious injury of known cause
- * Severe allergic reaction requiring treatment by a medical professional
- * Severe dehydration requiring treatment by a medical professional
- Skin infection
- * UTI







Reportable Behavioral/Psychiatric Events

A reportable psychiatric event is an event in which a person presents evidence of psychiatric destabilization which requires the use of a psychiatric intervention or crisis services that is not in their PCSP



Reportable Behavioral/Psychiatric Events

Reportable behavioral/psychiatric events include:

- Behavioral crisis requiring protective equipment, manual or mechanical restraints, regardless of type or time used or approved by the PCSP
- * Behavioral crisis requiring emergency psychotropic medication
- * Behavioral crisis requiring crisis intervention
- Criminal or probable criminal conduct



Reportable Behavioral/Psychiatric Events

Reportable behavioral/psychiatric events include:

- * Engagement with law enforcement
- Physical aggression
- Property destruction exceeding \$100
- Psychiatric admission or observation
- * Reportable behavior involving physical aggression and/or self-injurious behavior resulting

in injury to another person





Other Reportable Events

Other reportable events include:

- * Administration of routine psychotropic medication without consent
- Emergency situations including fire, flooding and serious property damage that result in harm or risk of harm to the member
- * Fall with injury minor or major
- Medication variance or omission
- * The member goes missing for greater than one hour



Other Reportable Events

Other reportable events include:

- * Failure to implement emergency backup plans
- Unsafe environment
- Vehicle accident minor or serious
- * Victim of fire



Reporting Requirements

- * CDTN must immediately report all instances of suspected abuse, neglect, and exploitation
- All reportable events occurring during the provision of HCBS services by a CDTN employee must be reported following the REF reporting guidelines and copied to the member within the required timeframe





Abuse, Neglect, and Exploitation

Abuse is defined as, "The knowing infliction of injury, unreasonable confinement, intimidation, or

punishment with resulting physical harm, pain, or mental anguish"

Some examples of abuse may be:

- * The member is over-medicated or over-sedated
- * A worker hits the member
- * A worker yells at a member to hurry up or do things differently



Abuse, Neglect, and Exploitation

Neglect is defined as, "A failure to provide goods or services necessary to avoid physical harm, mental anguish, or mental illness, which results in injury or probable risk of serious harm." Some examples of neglect may be:

- * The member becomes dehydrated because a worker is not tending to their basic needs
- * A worker does not keep the member's personal dwelling free from hazards
- * A worker leaves a member with balance problems alone in the bathroom



Abuse, Neglect, and Exploitation

Exploitation is defined as, "The deliberate misplacement, misappropriation, or wrongful,

temporary, or permanent use of belongings or money with or without consent."

Some examples of exploitation may be:

- * A worker reads or withholds the member's mail
- * A worker has the member make purchases for them and does not repay the member
- A worker uses their relationship with the member to manipulate items from them, including jewelry, money, or other valuable personal belongings



Fraud, Waste and Abuse of Medicaid Funds

There are different types of misuse of Medicaid funds that you should be aware of:

- * Fraud is using Medicaid funds to pay for something that is not allowed on purpose
- * Waste is overusing, underusing, or misusing funds without knowing
- * Abuse is behavior that results in Medicaid funds being used incorrectly or unnecessarily

The main difference between fraud and abuse is intent. There can be consequences, even if it was not done on purpose, including fines, disenrollment from the program, or jail.



Fraud, Waste and Abuse of Medicaid Funds

Fraud by a worker includes, but is not limited to:

- Being paid for care that the employee did not or is not allowed to provide
- * Misrepresenting the hours worked/falsifying timesheets
- Using someone else's identity to work
- Helping someone else commit fraud





Fraud, Waste and Abuse of Medicaid Funds

All program members, representatives, family members, workers, Supports Brokers, and Care Coordinators are responsible for reporting Medicaid fraud, waste, and abuse. If you learn about fraud being committed you can report it to CDTN, the Supports Broker, or online.



Fraud, Waste and Abuse of Medicaid Funds

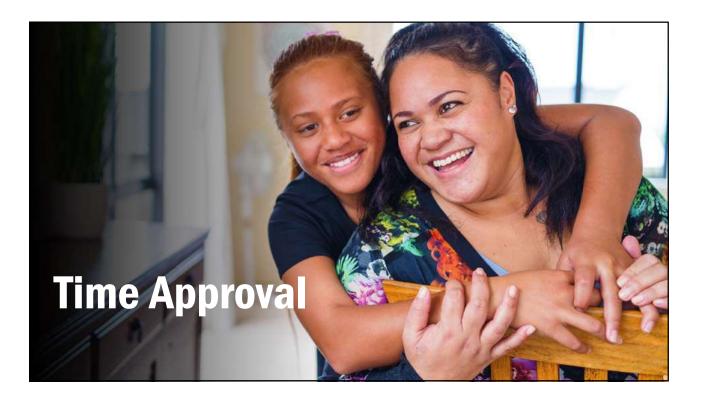
To report fraud and abuse online:

- * Go to www.tn.gov/finance/fa-oig
- * Click on "Report Fraud" on the left hand side of the page

You can also call the following numbers to report fraud or abuse:

- * Office of the Inspector General (OIG) 1-800-433-3982
- Tennessee Bureau of Investigation (TBI) 1-800-433-5454





Time Approval

- * CareAttend is CDTN's EVV application used to track worker's time
- DirectMyCare is CDTN's web portal used to track worker's time
- If you have questions about using the CareAttend application, your employer's ability to use the application, or need an alternative to using the application, please reach out to the Supports Broker.





Thank you

