



NWD System Medicaid Claiming: Phase II Tools

June 7, 2018





Chat Question

What question would you like to ask another state about Medicaid claiming?





Agenda

1. Webinar Series and Office Hours
2. Overview of Workbook and Toolkit
3. Tool 5: Code Development Guidance
4. Tools 6 and 6a: Cost Pool Spreadsheet
5. Tool 7: Sample MOU
6. Q&A





Medicaid Claiming Webinar Series and Office Hours

Webinar 1: Introduction to FFP and Medicaid Claiming Tools

- Webinar – March 15th – recording available at
https://nwd.acl.gov/sustaining_a_NWD_System.html

- ACL Office Hours – held Thursday March 22nd 2-3 pm EST

Webinar 2: Phase I (Creating a Work Plan, Engaging Partners, and Estimating Amounts)

- Webinar – Thursday May 10th 2-3 pm EST

- ACL Office Hours – Thursday May 17th 2-3 pm EST

Webinar 3: Phase II (Drafting and Testing Codes, Calculating Cost Pools, Drafting MOUs)

- Webinar – Thursday June 7th 2-3pm EST

- ACL Office Hours - Thursday June 14th 2-3 pm EST





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ACL, CMS & VHA Investments in No Wrong Door Vision

- CMS MFP Grants
- ADRC Grants
- ACL & CMS Care Transition Grants

Discretionary
Grant
Investments



- CMS MFP Findings
- NWD System Key Elements
- CMS Balancing Incentive Program

Policy &
Research



- CMS NWD Claiming Guidance
- ACL NWD Claiming Toolkit
- VHA VD-HCBS

Sustaining
Efforts





How much do states claim?

- Annual reimbursements vary
- Reimbursements are supporting ongoing sustainability of the NWD System:
 - Training/Staff Development
 - Infrastructure
 - Dispersed across agency staff





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NWD Medicaid Claiming Workbook and Toolkit

Phase I: Assess Readiness and Document Medicaid Time

Engage NWD System Lead Agency with a State Medicaid Agency Lead

Identify Permissible Sources of Non-Federal Funds for Match

Identify Costs of Allowable and Allocable Activities

Identify NWD System Activities Potentially Eligible for FFP

Phase II: Develop Agreements and Approvals

Establish Contractual Agreements

Secure CMS/DCA Review and Approval



Administration for Community Living



Tool 5: Code Development Guidance

1. Become familiar with the sample codes in the Reference Document
2. Review local agency operations and workflow
3. Evaluate what codes may work from other state-approved codes
4. Consider a pilot time study to test codes and definitions





CMS Reference Document Codes

No Wrong Door Codes

CODE 1: OUTREACH

CODE 2: REFERRAL, COORDINATION AND MONITORING

CODE 3: ELIGIBILITY

CODE 4: TRAINING

**CODE 5: PROGRAM PLANNING, INTERAGENCY
COORDINATION AND CONTINUOUS QUALITY IMPROVEMENT**





Other Codes States are Using

- Options Counseling
- Training
- Referral, Coordination and Monitoring for Individuals at Risk of Institutionalization





Tool 5: Workflow Analysis

- Eligibility/Assessment Processes
- Person-Centered Counseling
- Referrals, Coordination and Monitoring
- Training and Program Planning





Chat Question

Given the activities of your NWD/ADRC System, what percentage of staff time do you estimate is spent on Medicaid claimable activities?



Time Study

Type	Pros	Cons
Random Moment Time Study	<ul style="list-style-type: none"> - Minimal burden - High accuracy - CMS familiarity 	<ul style="list-style-type: none"> - Setting up the system - Time intensive if done internally
100 Percent Time Tracking	<ul style="list-style-type: none"> - Simple tool 	<ul style="list-style-type: none"> - Burdensome on staff - Low accuracy - CMS familiarity

Testing and Refining Codes

Code Clarity Pilot

- Evaluate code language
- Ensure codes reflect all staff activity
- Refine definitions

Estimated FFP Pilot

- Develop cost and time estimates for claiming projections
- Establish a baseline of Medicaid related time



Training Essentials

- Purpose
- Planned approach
- Code definitions
- Time reporting
- Examples and Scenarios



Monitoring

- Answering questions
- Monitoring responses
- Following-up on missing data



Roles and Responsibilities Operating Agencies

- Run and oversee time studies
- Gather staff costs via identified methodology
- Ensure appropriate staff participate in the time studies
- Provide quarterly claims to the state Medicaid agency for reimbursement
- Disburse administrative funds to the local sites
- Develop quality assurance mechanisms to ensure compliance with fiscal and program expectations, including training, fiscal reviews, and time sample reviews





Roles and Responsibilities: Local Agencies

- Ensure all appropriate staff performing reimbursable activities participate in the time study
- Complete fiscal spreadsheets each quarter to include all non-federal dollars allocated to supporting reimbursable tasks and staff
- Review and establish intake and triage workflows
- Attend trainings and participate in time studies



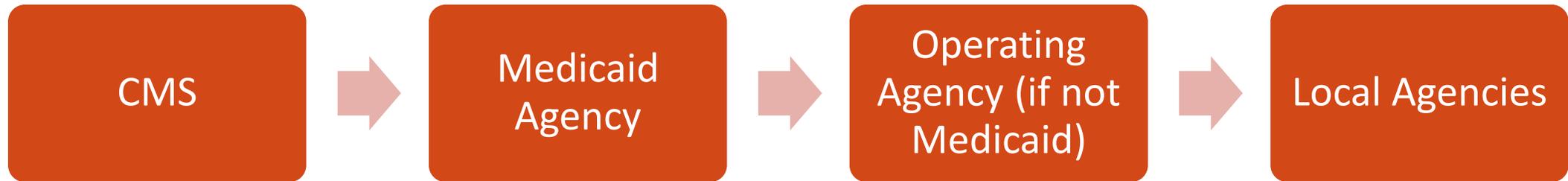
Tool 6 and 6a: Cost Pool Guidance



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Recommended Chain of Agreements for Drawing Down Administrative Funds





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Tool 7: Sample MOU Language



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Q&A





Join us for Office Hours

- Thursday June 14, 2018
- 2:00 to 3:00pm EST
- Registration link is in the chat and will be sent in an email

Questions? Contact us at NoWrongDoor@acl.hhs.gov

