

Implementing Integrated State LTSS Information Systems The South Carolina Experience

Rhonda C. Feaster

South Carolina Department of Health and Human Services

Hilltop Institute Symposium

June 14, 2012

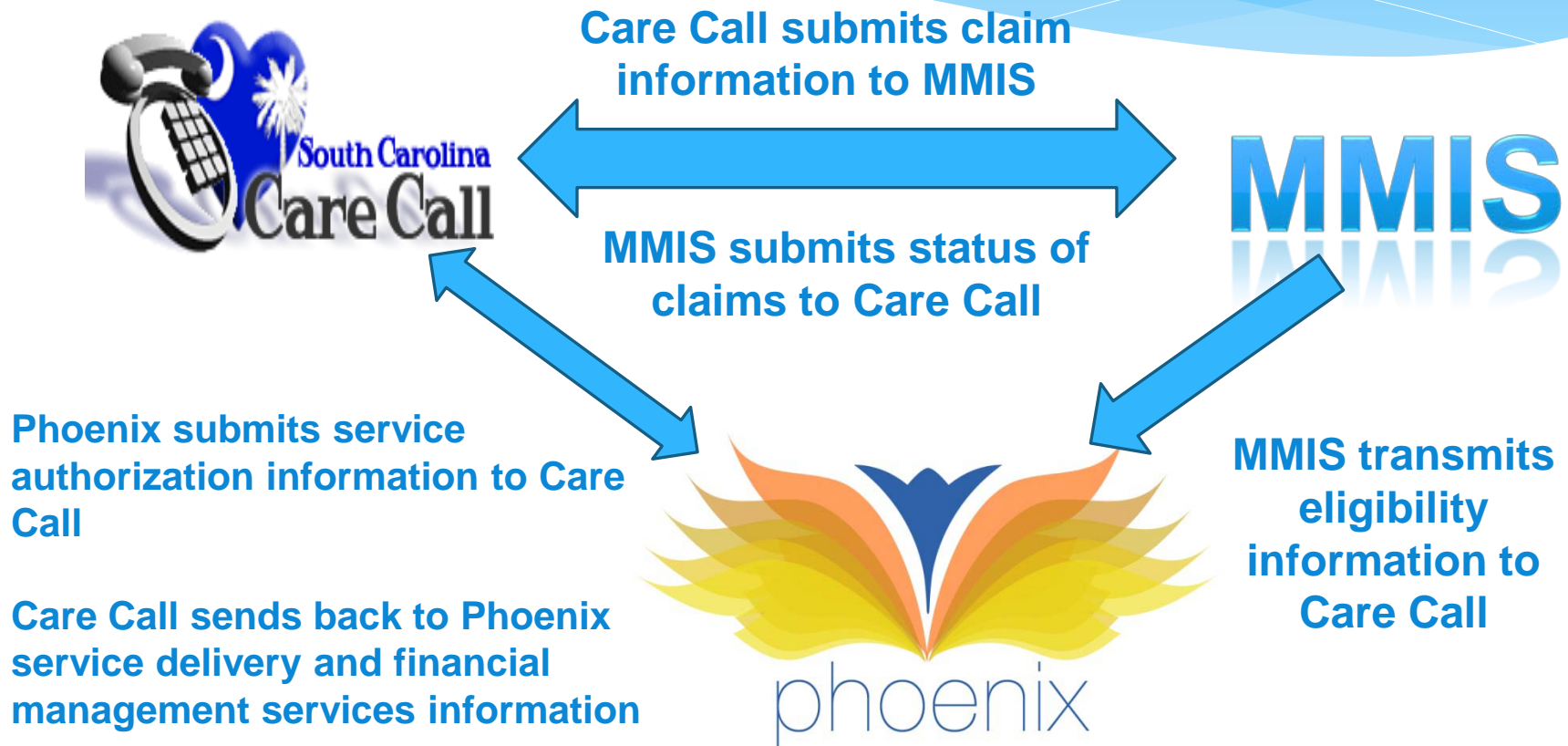
SC Department of Health & Human Services (SCDHHS)

- * SCDHHS is the single state Medicaid agency
- * SCDHHS manages and administers five HCBS waivers
- * SCDHHS administers four HCBS waivers managed by the SC Department of Disabilities and Special Needs
- * SCDHHS completes certification for Medicaid nursing home placement

South Carolina Systems

- * Phoenix
 - * Comprehensive web based case management system developed by another state agency
 - * Can be synced and used on a tablet computer
 - * Went live April 2010
- * Care Call
 - * Two part system (IVRS and web site)
 - * Allows providers to document service delivery
 - * Provides Reporting
 - * Exports claims to MMIS on behalf of providers
 - * Provides financial management services for participants receiving self directed care
 - * Has been in existence since October 2002

Systems Interaction



The Phoenix System

- * Prior to Phoenix, SC had used CMS (Case Management System) since 1991
- * Phoenix was developed for Medicaid administration and received 50% federal funding and 50% state funding
- * Phoenix is being enhanced to include some Care Call functions
- * Approval has been received from CMS for 90/10 funding for some components
- * Ongoing funding will be at 50/50 and 72/25

What is Phoenix?

- * South Carolina's comprehensive case management system
- * Phoenix can be accessed on the web or data synced to a tablet computer
- * Prevents HCBS waiver enrollment until all federal requirements are met
- * Uses an algorithm to determine level of care based on assessment information
- * Creates a care plan based on assessment information
- * Provides electronic service referrals to providers
- * Providers respond to referrals electronically
- * Automated Quality Assurance reviews

Who Uses Phoenix and Why

- * State staff and provider case managers to complete intake and ALL case management activities
- * Providers of waiver services to respond to referrals and access authorizations, and service plans
- * Staff of two PACE programs to complete intake and initial/annual assessments
- * University of South Carolina staff to assess recipients receiving self directed care
- * SCDHHS Division of Program Integrity to conduct audits

Phoenix modules

- * Intake
- * Applications
- * Participant Information
- * Assessments
- * Medications
- * Care Plans
- * Personal Goals
- * Home Assessment
- * Caregiver Supports
- * Service Authorizations (Waiver Supports)
- * Non Waiver Supports
- * Case notes
- * Claims for waiver services
- * Quality Assurance
- * Forms and Letters

Programs Used By Phoenix

- * Community Choices (Elderly/Disabled Waiver)
- * HIV/AIDS Waiver
- * Ventilator Dependent Waiver
- * Medically Complex Children's Waiver
- * Children's Personal Care Program
- * Children's Private Duty Nursing
- * TEFRA
- * PACE Programs
- * HASCI Waiver (Initial assessment only)
- * Pre Admission Screening for nursing home placement

Phoenix Training

- * 2 “Train The Trainer” sessions were held in February 2010
- * During the month of March 2010 - five regional trainings for providers and 13 regional trainings for state staff and provider case managers
- * 13 refreshers were conducted when the software was installed
- * Providers receive a brief overview prior to contracting to provide services
- * Quarterly training is offered to all providers
- * Ongoing training is provided to state staff and providers as changes are implemented
- * PowerPoint training sessions are available in Phoenix for state staff and provider case managers
- * On demand provider training is provided over the telephone

What is Care Call?

- * A system that receives prior authorizations for HCBS waiver services
- * IVRS used by providers to document services provided in a recipient's home
- * Web site used by providers to document services not provided in a recipient's home
- * Worker registration for in-home workers
- * A system that provides financial management services for recipients receiving self directed care
- * Reporting for providers, case managers, and state staff
- * A systems that bills MMIS on behalf of providers for services delivered
- * A system that started in October 2002 with six services that now has 49 services

Care Call

- * South Carolina developed the concept several years prior to development
- * Provider contracts were amended to reflect mandatory use of an “electronic monitoring system”
- * An APD was developed and federal approval granted to develop the system
- * Prior to implementation extensive training was provided to providers and over 6,000 in home workers
- * During early implementation MANY onsite visits were made to providers
- * Provider meetings were held to receive input from providers which resulted in policy changes, report changes, and enhancements

Collaboration With Other Agencies and Providers

- * Collaboration is generally held with associations (e.g. Personal Care Association, Adult Day Health Care Association)
- * Initially the state faced resistance to Care Call because providers would only receive reimbursement for service “delivered” and not service “authorized”
- * Initially providers had to pay a subscription to use the web site for reporting
- * Once free web access was given more providers began to utilize the system for managerial functions

Care Call Funding

- * May 20, 01 APD approved by CMS
- * Initial funding was 90/10 (development) and 75/25 (ongoing operations)
- * Current funding is 75/25 (ongoing operations) and 50/50 (financial management services)

Lessons Learned

- * If possible, increment in stages keeping the BIG PICTURE in mind
- * Allow sufficient time to pilot
- * Listen when problems are reported
- * Be ready to quickly fix problems
- * Have buy-in from stakeholders
- * Admit when you're wrong or made a mistake

Next Steps

- * APDs were developed and federal approval received for both systems
- * A new Phoenix contract is in effect that will move some Care Call functions to Phoenix
- * A Care Call request for proposals was released on May 18, 2012
- * Writing of manuals

Future Phoenix/Care Call Modifications And Expansions Plans In Progress

- * Care Call will only be used for:
 - * Documentation of services delivered in a participant's home (e.g. Personal Care, Nursing)
 - * Documentation of critical incidences
 - * Documentation of tasks performed
 - * Financial management services
- * Phoenix will assume from Care Call:
 - * Reporting
 - * Documentation of service delivery not provided in a recipient's home (e.g. Adult Day Health Care, Telemonitoring)
 - * Calculation of claims
 - * Submission of claims to MMIS

Future Phoenix Expansions

Internal Collaboration

- * Medicaid eligibility staff using Phoenix
- * Used by PRTF (Psychiatric Residential Treatment Facilities) Waiver
- * Used by Money Follows The Person
- * Will be used for The South Carolina Dual Eligible Demonstration (SC DuE) Project

Future Plans External Collaborations

- * Used for waivers managed by the Department of Disabilities and Special Needs
- * Means for hospitals and nursing homes to complete referrals, assessments, and PASARRS
- * Used by the ADRC's (Aging and Disability Resource Centers)

Future Phoenix Modifications And Expansions Plans

- * Inclusion of non waiver claims for service
- * Documentation of payment and billing system for nursing homes and residential care facilities
- * Instant messaging capability for case managers and providers

Contact Information

Rhonda C. Feaster

South Carolina Department of Social Services

Division of Community Long Term care

803-898-2532

feaster@scdhhs.gov