



BDDS Provider & Case Manager Bi-monthly Webinar

May 10, 2023

Agenda

- IPP Webinars
- PHE Ending Updates
- EVV Compliance Updates
- IHCP Bulletin Update: Modifier Change
- Jira Help Desk Basics
- Incident Reporting
- Structured Family Caregiving Fast Fact
- Train-the-Trainer Next Training
- Provider Attestations
- Provider Referrals





Innovation Pilot Projects

Pilots offer an opportunity to:

- Demonstrate new service models that could be expanded and adopted more broadly;
- Build private/public partnerships to expand opportunity for employment and community engagement among those receiving BDDS services;
- Investigate unique ways of meeting expressed needs of individuals seeking or receiving services from DDERS/BDDS; and
- Generally, explore ways of improving the lives of Hoosiers with intellectual and developmental disabilities.

<https://www.in.gov/fssa/home-and-community-based-services-spending-plan/bdds-innovative-pilot-projects/>



Innovation Pilot Project Webinars

- **Tuesday, May 16, 10-11 a.m.**
- **Friday, May 19, 10-11 a.m.**
- **Tuesday, May 23, 10-11 a.m.**
- **Wednesday, May 24, 10-11 a.m.**
- **Thursday, June 1, 10-11 a.m.**
- **Monday, June 5, 10-11 a.m.**
- **Tuesday, June 6, 10-11 a.m.**



Public Health Emergency Ending Vital Information

- The Federal PHE ends tomorrow, **May 11, 2023**.
- BDDS will be rolling back flexibilities allowed during the PHE.
- Some flexibilities will end on May 11th, 2023, others 6 months later, November 11, 2023.



Public Health Emergency Ending What Now?

As of the end date of the PHE:

- ICF/IDD will no longer be reimbursed for services rendered to an unlicensed facility;
- HCBS Providers will no longer be able to provide services in non-HCBS settings (ICF/IDD); and
- PAS requirements that PASRR process be complete prior to admission into a nursing facility will resume. PASRR Level II screen will no longer be allowed to be delayed up to 30 days after admission.



Public Health Emergency

Appendix K Flexibility Information

Certain flexibilities approved through Appendix K will remain until November 11, 2023 (see Appendix K and FAQ for details):

- Expanded language in family paid caregiver in re-defined circumstances;
- Expanded language waiver waiving the 40-hour limitation on family members when existing services are interrupted due to circumstances related to COVID;
- Expanded language for RHS reimbursement for overnight staff/paid caregiver;
- Allow RHS reimbursement for time when staff/paid caregiver is asleep;
- Expanded language for SFC allowances;
- Modify SFC visits to require at least one face to face visit;
- Allow flexibilities in day service ratios;



PHE Ending Appendix K Updates (Cont'd)

- In unique and rare situations, the home of a DSP familiar to the individual may be used as a temporary/alternate waiver residential setting for a participant when the participant's primary caregiver has been diagnosed with or quarantined due to COVID-19;
- If a 90-day BMR has been requested previously, additional BMRs may be requested for a period of up to 60 days;
- Temporarily allow BMRs to be filed within 60 calendar days of the event or status change; and
- Temporary waiver of the requirement for a Confirmation of Diagnosis to complete Level of Care for re-entries to waiver services.
- Allow telehealth as a service delivery option *unless* authorized in [Senate Enrolled Act 3 and Senate Enrolled Act 284 and \(SEA 3 and SEA 284\)](#), and as governed by their professional licensure requirements.



Public Health Emergency Ending Vital Information for Case Managers

With the end of the PHE, Case Managers will begin rollback of flexibilities and end them no later than November 11, 2023:

- Completing the Level of Care Screening Instrument (LOCSI) over the phone or virtually;
- Documenting choice of service providers electronically or by signing on behalf of another; and
- Documenting Freedom of Choice or agreement with the PCISP on the BDDS Signature page electronically or by signing on behalf of another.



Public Health Emergency Ending Vital Information for Individuals

- Medicaid continuous coverage protections are ending;
- Encourage individuals/guardians to go to fssabenefits.in.gov or call 1-800-403-0864 to make sure their information is correct; and
- Let individuals/guardians know to watch their mail and respond to any requests for information or documents they receive from FSSA.



EVV Compliance

- Federal law requires personal care service and home health service providers to use an electronic visit verification (EVV) system to document services rendered.
- The Indiana Health Coverage Programs (IHCP) announced in IHCP Bulletin BT202248 that the IHCP would begin denying claims for personal care services that are not EVV compliant beginning with dates of services on or after Jan. 1, 2023.
- The IHCP has decided to postpone this final enforcement date for personal care services until later in 2023. However, personal care services providers that are found to be out of compliance with the EVV requirement have begun seeing select claims recouped beginning with services provided in January 2023.



Reminder: EVV Compliance Resources for Additional Support

[Electronic Visit Verification Training](#)

Virginia Hudson at inxixevv@gainweltechnologies.com

FSSA at evv@fssa.in.gov



IHCP Bulletin: Day Hab/Pre-Voc Modifier Change

In a recent IHCP bulletin, modifier changes were announced impacting providers of pre-vocational services and day habilitation.

More information to come!



JIRA Help Desk Web User Basics

BDDS utilizes the JIRA Help Desk Web Portal for all help desk ticketing. When you have any system issue, a ticket will need to be created for assistance. Follow these steps:

1. To access the Help Desk Web Portal, open a web browser window and go to:
<https://dmha.fssa.in.gov/helpdesk/?div=ddrs>
2. Enter your e-mail address and click "Create Ticket."
 - a. If you have not yet registered as a Help Desk customer, you will be directed to submit your ticket via e-mail to DTS-DAS@fssa.in.gov
 - b. If you are registered as a Help Desk Customer, the new ticket screen will open.



JIRA Help Desk Web Basics

3. The Customer Name and Related Provider field will be automatically populated when the new ticket opens. These values are not changeable. If this information is incorrect, please note that in the description box.
 - a. NOTE: If you have only one choice for a field, the drop down will be grayed out. If a field is not grayed out, you will need to choose from drop down options.
4. Next, Select the Related Application for which you are having issues. For example:
 - a. BDDS Portal – General – DDRS
 - b. BDDS Portal – Provider
 - c. Claims – BDDS Billing - DDRS
 - d. Enter the e-mail addresses for other people, if any, you want copied on correspondence about your ticket. You must put a comma and a space between multiple e-mails.
5. Select the Service Type (Access, Question, Performance, Data Issue) and Severity
6. Enter a summary and description of the issue. Include attachments if applicable. Review and Submit. Your ticket will be assigned a ticket number, triaged, and reviewed. You may be contacted for additional information and you will receive an e-mail advising you of ticket resolution/closure.

Incident Reporting

Elopements are always reportable. But what constitutes an elopement?

460 6-3-20- “Elopement” means that an individual leaves without the authorization or consent of the appropriate provider, the level of supervision identified as appropriate for the individual in the individual’s PCISP.

- Losing line of sight momentarily as the individual goes around a corner or is temporarily blocked by a sign, tree, etc. is not “lost line-of-sight” for this item.
- If the individual’s actions meet his/her allotted “alone time” the incident is not deemed to be “elopement”.
- If the individual goes outside but does not leave the property, it is not elopement.



HCBS Highlight: Structured Family Caregiving

- Living arrangement in which the individual lives in the private home of a principal caregiver or family member
- 10% of the per diem for Structured Family Caregiving includes respite for the caregiver. The individual cannot have respite on their plan in addition to SFC.



Next Train-the-Trainer Core A/B Medication Administration Training

**This is a virtual training*

June 16, 2023

10am – 4pm EDT

Register at: [BDDS | Medication Administration Train-the-Trainer II - State of Indiana](#)



BDDS Provider Portal Expectations: Provider Attestations

A provider system administrator **MUST** log into the BDDS Portal and confirm the Provider Profile information at a minimum of every 90 days. The Provider Profile information should always be updated anytime there is a change in the Provider Profile. To update, change, or modify any of the Provider Profile information before completing the Provider Attestation, see sections Waiver Provider Amended Application, Waiver Provider Maintenance, New Provider Location, and Waiver Provider Closure.

Step 1: Click on the Profile tab of the Provider Profile.

Step 2: Click the "Confirm Profile Information" button.

(NOTE: The Provider Attestation modal appears with the message "By adding the date and clicking OK, I attest that all information in this profile, as well as the profile of each associated child location, is accurate and current including, but not limited to, contacts addresses, services, counties, and staffing capacity.")



BDDS Provider Portal Expectations: Provider Attestations (Cont'd)

Step 3: Enter the current date for the Attestation Date.

Step 4: Click OK.

(NOTE: A new message appears at the bottom of the screen, "Profile information attested as accurate and current as of (date and time of verified attestation)." If a Provider Profile has never been confirmed, the message "Profile Information has not been confirmed" will be displayed.

This expectation for all BDDS Providers is a CMS requirement and we appreciate your support in ensuring provider and agency compliance.



BDDS Provider Portal Expectations: Provider Responds to Referrals Within 30 Days

It is the expectation that all BDDS Providers will respond to BDDS Portal referrals within 30 days. To find out more about the BDDS Provider Referral process in the BDDS Portal:

- a. Visit the Resources Tab in the BDDS Portal.
- b. Click on "Resource Page" (the fourth of four options).
- c. Under User Guides click on "BP2 User Guide for Providers." This allows you to review and download a PDF copy of the User Guide.
- d. Pages 36-42 of the User Guide will guide you through the process.
- e. If you have need technical assistance, you may submit a Jira ticket. If you have additional questions, you may contact BDDSPROVIDERSERVICES@FSSA.IN.GOV

