Waiver 90 Day Face to Face Visits:
CM-Waiver HCBS Care Plan Review Script Example

CM-Waiver HCBS Care Plan Review

Total Questions:12
Total Responses: 12
Completed By: Kayla Dennis-Benam,LMSW
Script Status: Completed
Eligibility: N/A

Total Script Score:0
Total Score Received: 0
Created On: 3/3/2022 10:55:39 AM
Completed On: 3/3/2022 11:04:18 AM
Program Name: N/A

Altruista ID : 89490	Member Name: [redacted]
Member DOB: Jul-17-1949	

1. Type of review
Response :
Monthly

2. IICSP Review Completed
Response :
Telephonic -Date:3/3/2022

3. Member's Current Risk Score?
Response :
High Risk-Follow up at least every 30 calendar days. At least every 3 months, the ICO care coordinator/LTSS Supports Coordinator will complete an in-person face-to-face visit with the member to review the IICSP. The other monthly IICSP reviews during the quarter may be conducted as an in-person, telephonic or telepresence visit with the member.

Check High Risk for all members. All waiver members are high risk.

4. Who Was Present for the Care Plan Review?
Response :
Member and CM

5. Review of waiver services -provide detail in the care plan summary section –question 12
Response :
Adaptive Medical Equipment/Supplies
Chore Services
Home Delivered Meals
Personal Emergency Response System
Preventative Nursing Services

6. What door does member meet under?
Response :
1

7. Does member still qualify for current door?
Response :
Meets

8. Review of Personal Care services -provide detail in the care plan summary section –question 12
Response :
Not Receiving Services

9. Any new needs identified?
Response :

Yes -Explain:Requesting an air cushion ring pillow and window replacement. Pillow is added to the care plan, CM will consult with supervisor regarding the window.

10. Provider name for each service listed in question #5 and #8 including agency/caregiver for personal care services.
Response :

PCA-No Provider, Chore services-Spodek, PERS-Guardian, HDM and Air Conditioner-On Hold, Air Ring Pillow-To Be Determined

11. Member identified as high risk for unplanned transition
Response :

Yes -Interventions offered/ Review all services/Implemented changes to prevent transition and follow up with member:APS is involved, working on getting providers for personal care and preventive nursing. CM has frequent f/u with member to ensure needs are met.

12. Visit Summary Note (provide detail of member satisfaction in amount, type and scope of each waiver service and personal care service reviewed)
Response :

See care plan notes for details. Member reports she thought Lincare had a portable concentrator for her but she called and they are still waiting for one, did not have an idea of when it would be available. Reports this is due to supply issues. Member also reports another window in her bedroom is cracked from the snowplow throwing a rock. Member reports when it was looked it she realized it is also missing the interior glass and there is cold air coming in. She states it has likely always been this way, she just did not notice. Member reports she got a quote from the person who installed her other window and they told her it would be around $400. CM will check with supervisor regarding this. She also reports her friend [redacted] might be interested in being her worker. Directed her to have [redacted] apply with NHCS and sent a message to UPCAP regarding this and the air ring pillow.

[redacted]

1. **Associated chart notes for 90 day face to face and PCA review:**

Example 1: CM called client prior to visit to confirm visit and complete covid pre-screen. 90 day face to face completed with member. He reports satisfaction with Waiver services - Homestyle Direct home delivered meals 1/daily; Medscope PERs, adaptive medical equipment including delivery of raised toilet seat and washable chair pad. Member has requested chore services/snow removal to be provided by his worker. This will be added to care plan in the amount of 4hours per week. Personal care services are being provided in the amount of 32.5 hours per month. Member reports satisfaction with new worker. He asked for follow up on incontinence supplies. He reported that he is falling frequently and is requesting assistance with obtaining a wheeled walker. Provided CM with new medication, this has been added to his med list. No other issues at this time.

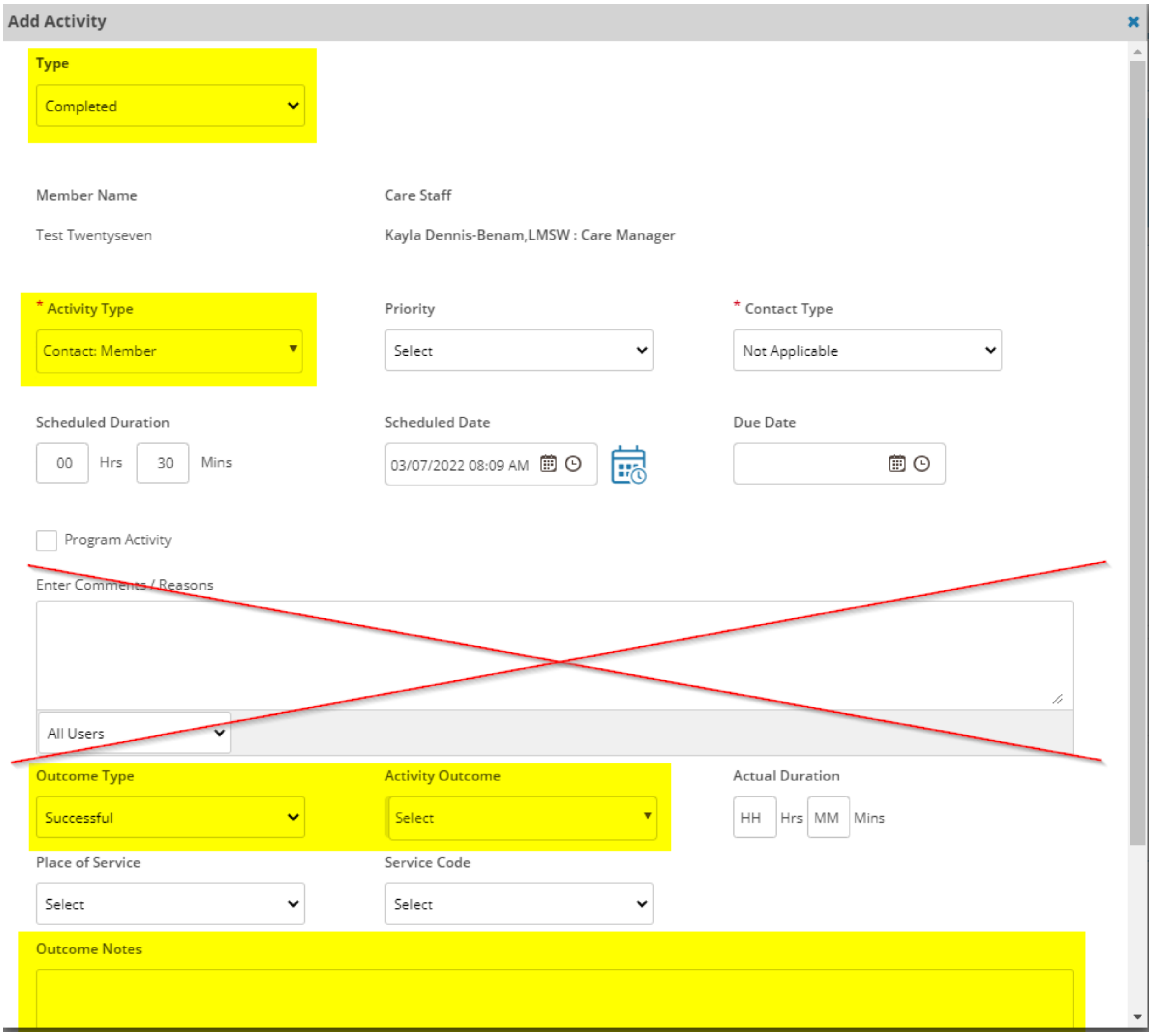
Example 2: 2-11-22-HCBS waiver care plan review completed w member by phone, due to covid. See summary note.

ADDITIONAL TIPS:

Charting <u>SHOULD</u>:

- Limit documentation to what is pertinent to service delivery, health and safety
- Be clear and concise
- If quoting is used, write down what was said immediately after it was said. Quoting should rarely be used
- Allow a team member that is unfamiliar with your member to read your notes and readily identify the issues or needed follow up

2. **<u>Completing an Activity</u>**



To enter a ***Completed Activity***:

<u>Type:</u> Change to Completed. Note that if you do not do this you will not have the option to choose successful or unsuccessful as noted below and the activity will not be completed in the member record. The type must be changed to completed.

<u>Activity Type:</u> You will typically use Care Coordination, Contact Member, or Contact Provider depending on the type of contact you had

Do not enter text in the box titled <u>Enter Comments / Reasons</u>

<u>Outcome Type:</u> Choose either Successful or Unsuccessful

<u>Activity Outcome:</u> If the Outcome Type is Successful, your choices for Activity Outcome will either be “Successful” or “Acknowledged.” In this case, choose the “Successful”

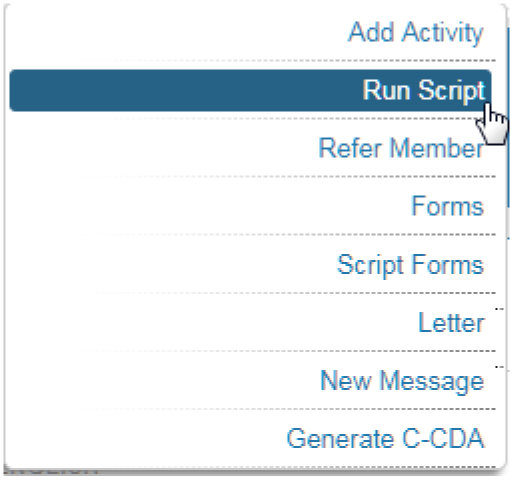
outcome. If the Outcome Type is Unsuccessful, you will have a variety of choices, such as “Left Message,” “Number Busy,” “No Answer and No VM,” etc.

Outcome Notes: This is where you document your notes related to the completed activity.

Once you have completed your activity documentation, select “Add and Close” to complete it and close it.

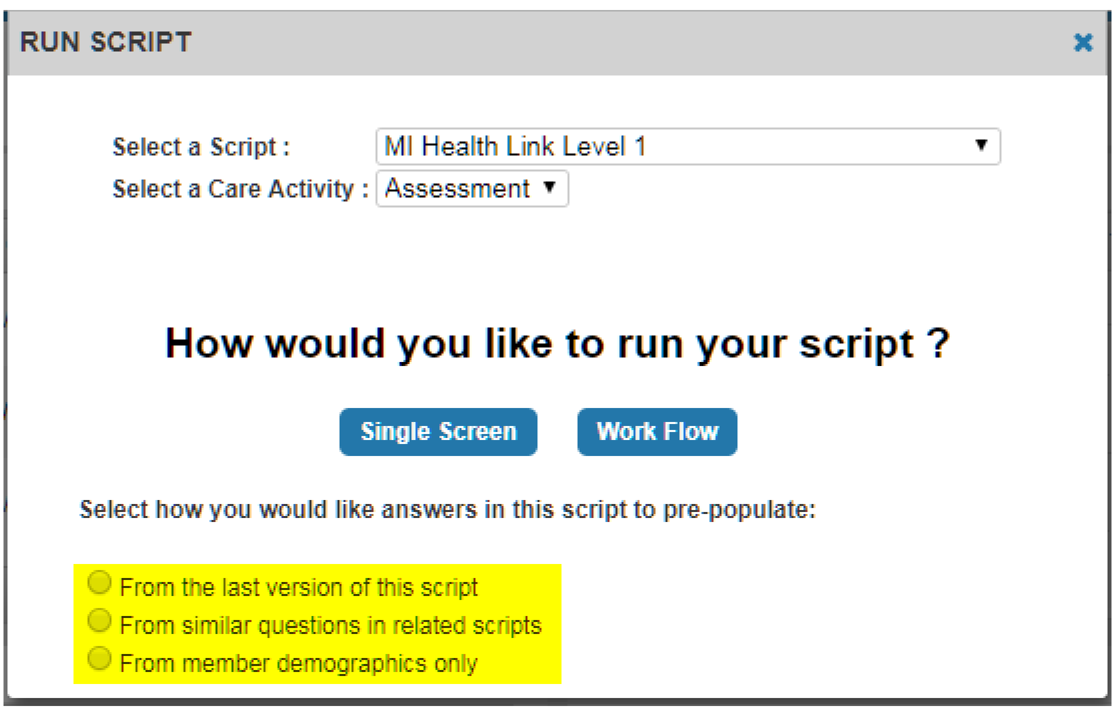
3. **Completing a Script**

To open a script, follow the same process as before. From the Action button, select "Run Script" from the drop down list:



You will then see the Run Script Dialog box, where you can select the specific script you would like from the drop down list. Again, this is the same as the previous version of Altruista. One difference you will note is that a new drop down box, "Select a Care Activity" will appear and will default to Assessment. This is due to the fact that the system will automatically add an activity when you complete a script.

Once you've selected your script, you will again have the option to choose either Single Screen or Work Flow. Now you will see a few different options appear:



You will have the option to choose to populate the new script questions based on the last version of the same script, from similar questions in related scripts, or from demographics only. The last choice will give you a blank script, while the first choice will fill from the last time the same script was completed. DO NOT USE the middle button.

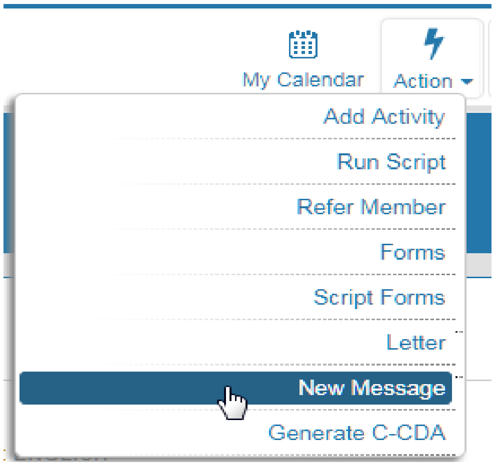
If you choose “from the last version of this script” ensure you are updating any date fields related to the new script.

If you need to leave the script, you will again have the choice to “Save for Later.” This will allow you to return to the script with your previous information saved.

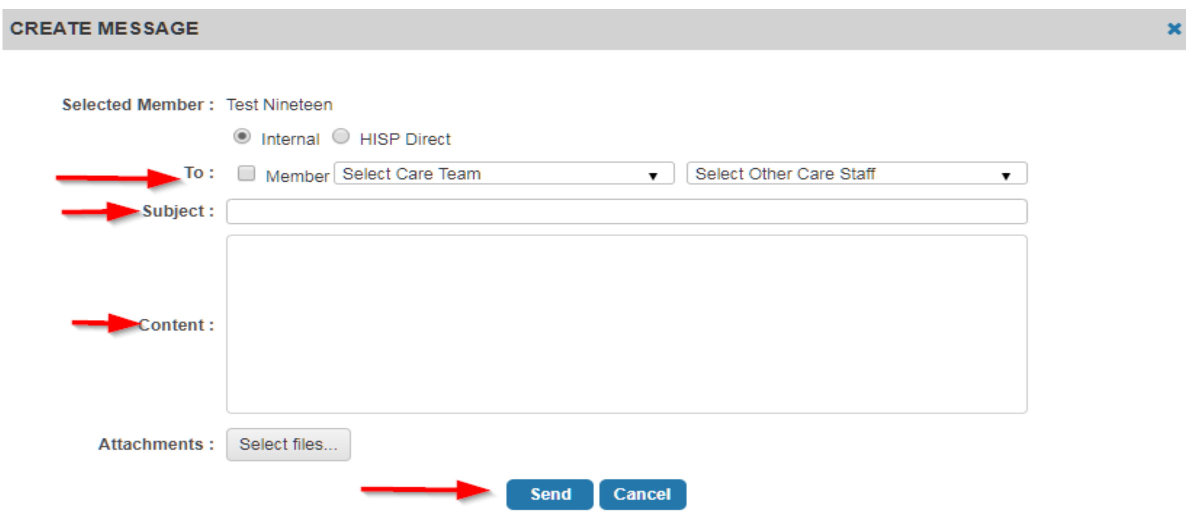
If you are done with the script and have answered all questions, click the “Save & End Script” button.

4. Sending a New Message

This functionality has not changed from the previous version. To send a message, simply open the member record, and under the Action button, select New Message:



The Create Message Dialog Box will open and you will have the exact same choices as in the previous version of the system:



Select who you wish to send the message to by using one of the choices in the "To" line. If you check the "Member box", the member will receive the message if they are set up in the Member Portal.

Use the Subject Line to enter the subject of your message

Use the Content box to enter the body of your message. Keep in mind that messages become a part of the member's permanent medical record. Please refrain from slang terms and document in a professional manner when using the message feature.

When everything is complete, you can hit the Send button and the message will send to the intended recipient.