MDC Phase II Policy & Procedural FAQ (Revised 9/13/19)

ADCAPS- General

1. How often must a new ADCAPS be completed in the system and who can complete it?

The ADCAPS module in LTSSMaryland includes the assessment, problem list, care plan(s), service plan, signatures and attachments. A registered nurse is required to complete the ADCAPS assessment for a participant every 120 days or when there is a significant change in the participant's condition (COMAR 10.12.04.21; federal CMS Waiver Authority). The system follows this timeline. Only users with the MDC Provider Nurse role are able to complete the ADCAPS assessment. A new assessment is required this often due to the ever-changing needs of our Medicaid participants.

Care plan(s) are required to be reviewed by the multidisciplinary team every 180 days or more frequently when a significant change in condition is identified or reported (COMAR 10.09.07.03M). The system requires the MDC's registered nurse to review the care plan whenever an assessment is conducted.

2. How will the system know when an assessment or care plan is due for currently enrolled participants? - Updated 8/16/19

Providers will be able to work with a Pre-Launch ADCAPS screen between July 22 and August 31, allowing them to enter the dates that the participant's next ADCAPS assessment and care plan is due, removing the necessity to submit each of them immediately. Users with the MDC Provider Nurse, MDC Provider Administrator and/or MDC Provider Staff roles may complete the Pre-Launch ADCAPS screen. After August 31, only the full ADCAPS will be available to MDC Provider Nurses. The Pre-Launch ADCAPS screen is now available for any participants who are currently receiving MDC services through a Medicaid program and do not have an ADCAPS in LTSSMaryland. The MyLists will use these dates to track participants' next assessment and care plan due dates.

The initial care plan due date indicated in the MyLists can be used to determine when to next convene the multidisciplinary team. However, if changes are made to a care plan after it is saved, the system resets the 180 day clock for when the next care plan is due. In these cases, the system may indicate the next care plan is not due until after the multidisciplinary team should have been convened. Therefore, the schedule for convening the multidisciplinary team should be tracked outside of the system until additional changes can be made to LTSSMaryland.

3. Will nurses be required to enter ICD-10 codes in the ADCAPS?

Although the option to enter ICD-10 codes exists in the system, nurses will not be required to enter ICD-10 codes when entering a diagnosis. Diagnoses can be entered as free text.

4. Where can we find the Fall Risk Assessment (referenced in section J of the assessment) required by OHCQ?

The Fall Risk Assessment is not in LTSSMaryland. Please continue to complete the Fall Risk Assessment in the manner prescribed by OHCQ.

5. Is an approved nursing facility (NF) level of care required for DDA waiver participants who want to receive the medical day care service?- Added 8/16/19

Yes. Medical day care providers must ensure all accepted DDA waiver participants obtained an initial NF level of care approval from AERS, prior to enrollment, and annual, thereafter, in accordance with MDC Transmittal No. 68 (dated November 20, 2008).

6. What is the Medical Day Care enrollment process for individuals transitioning from a hospital or nursing facility? - Added 8/16/19

Beginning immediately, medical day care providers must enroll participants transitioning out of institutions (i.e., hospitals and nursing facilities) with an approved 3871B NF level of care using the LTSSMaryland enrollment packet process. Paper admissions will no longer be accepted. If you do not see the initial NF level of care in LTSSMaryland, please reach out to MDH. Providers are still required to obtain a new NF level of care and submit a subsequent "Initial" enrollment packet, prior to the end of the 3871B NF level of care's certification period (120 days).

ADCAPS-Assessment

7. Will the system copy over sections of the assessment to the next ADCAPS?

All of the information previously entered in an assessment will copy over to the next assessment the registered nurse initiates for a participant. This includes all comments. Registered nurses should review all information copied from one assessment to the next to ensure its accuracy and an attestation will be required for each section. The attestation will require the registered nurse to indicate whether or not the information reflects the participant's current status.

8. Are comments required in the assessment?

Comments are required when selecting certain options for certain questions in the assessment. Comment boxes will appear below these questions and are marked with a double asterisk (**)

indicating that they are required. Additionally, nurses can enter additional comments in section V of the assessment.

9. Why are allergies not a required field in the assessment?

The three areas of the Allergies section within the ADCAPS assessment are not required. However, the registered nurse must attest that the section is correct each time an assessment is conducted.

10. What if the ADCAPS assessment was completed on a different date than the date the nurse is entering it into the system?

The MDC registered nurse can indicate the date that the physical assessment was conducted in the "Assessment conducted on" field in the Overview section of the ADCAPS, but it is not required to submit the ADCAPS. Assessments must be conducted every 120 days.

11. Are participants required to sign the assessment?

No. The participant's signature is only required for the initial care plan, with significant changes, and every 180 days thereafter. The nurse's physical signature is required during every assessment and care plan review.

ADCAPS- Problems & Care plans

12. Can we create a problem without associating it to a diagnosis?

Yes, the system allows you to create a problem without associating it to a diagnosis. Problems that do not require a diagnosis (such as preventive care, participant non-compliance, etc.) can be documented as "Personal Goals" as the "Source of Concern" in the care plan. The system requires users to enter at least 1 personal goal in order to submit the ADCAPS.

13. How do we do a care plan without having to do another assessment? Is the expectation that we now do care plans every 120 days?

An ADCAPS assessment must be conducted and submitted in LTSSMaryland before a care plan can be completed in the system. The registered nurse will be required to review and re-associate all problems with their respective care plans after each 120-day assessment. Any necessary edits to the care plan may be completed during this time.

If a care plan review is due before the first assessment is due in LTSSMaryland, providers have several options. A nurse may complete the full ADCAPS, including the Care plan, the full ADCAPS with a provisional care plan, or review that care plan offline. Please see the "System FAQ" and "LTSSMarlyand MDC Phase II Provisional Care plan Guide" for more information.

14. Why can't the assessment be uncoupled from the care plans?

The ADCAPS is a system (Adult Day Care Assessment and Planning System) that includes an assessment, problem list, care plan(s), and service plan. Maintaining the ADCAPS as one module helps ensure the health, safety and welfare of Medicaid participants.

15. Resolved care plans currently show up in the printed care plan pages. Can the care plan pages be printed without resolved care plans?

The displaying of resolved care plans in the print view is intentional as it allows participants and their representatives to clearly see the progress the participant has made. Resolved care plans are clearly labeled as "Resolved" in order to distinguish them from active care plans.

16. How do we indicate the outcome score that is currently printed on the bottom of the care plan?

Outcome scores may be entered in the Additional Comments section during a care plan review. The displaying of outcome scores will be considered as a future enhancement in LTSSMaryland.

17. Since the LTSSMaryland ADCAPS includes a service plan, are providers still required to care plan the Medical Day Care service?-Added 8/16/19

Providers may elect to continue care planning the MDC service. However, if a provider chooses to no longer care plan the MDC service, they must ensure the care plan is comprehensive.

ADCAPS- Service Plan

18. Why can't any staff member with an LTSSMaryland user role complete the service plan? How often does the service plan need to be completed?

The service plan continues to be a component of the ADCAPS, which can only be completed by a registered nurse. Additionally, the information required in the service plan is obtained from the medical order. Every time the nurse completes an assessment, the service plan should be updated with the information from the most recent medical order. Orders concerning medication, treatment, and diet shall be in effect for the specified number of days indicated by the health care provider; however the period may not exceed 6 months.

19. Is the rate field in the service plan editable by nurses? How is the rate updated when the rates change?

No, the rate prepopulates in the service plan and is not editable. The rates in LTSSMaryland for particular services are updated by MDH when the rates change.

ADCAPS- Attachments

20. We were instructed to label our documents in the following way: "document type_first and last initial of participant_date". Can we reverse the name to last name initial and first name initial, as that is frequently company policy?

The file naming convention was a suggestion by the Department to encourage organization of electronic files within LTSSMaryland. The center may use whatever file naming convention it chooses.

Transferring Participants & Discharges

21. Is a 257B and Discharge Planning Summary required when a participant is transferring to a new MDC?

Discharge 257B and Discharge Summary forms are required when an individual needs to be disenrolled from the MDC waiver. A VCT form is required from the new provider when an individual transfers from one center to another.

22. When can providers admit a transferred participant? Is it when the VCT is submitted?

When a participant elects to attend a new center, the new provider enters the participant's anticipated start date on the VCT form and sends it to the Department. When the form is received by the Department, staff assigns the new provider in LTSSMaryland. The new provider may admit the transferred participant as early as the date stated on the VCT form.

23. Is discharge follow up still required?

Per COMAR 10.09.07.05, discharge follow up is required, when applicable. The follow-up should be documented in the Discharge Planning Form.

General LTSSMaryland System & Nightly Data Extract Questions

24. Will MDCs be able to continue to use their own EHR systems? Is the use of a separate EHR system required for MDCs to operate as an enrolled Medicaid provider?

LTSSMaryland is the system of record for all Medicaid MDC Providers and MDCs are required to

use LTSSMaryland. Existing EHR systems can still be utilized by providers. MDH will provide a file of the data submitted through LTSSMaryland on a daily basis so that providers can maintain the currency of their patient data.

25. Is LTSSMaryland HIPAA compliant?

Yes, LTSSMaryland is a secure, web-based application. All information and documents entered into LTSSMaryland are done securely with encryption during the transport of the file object and are stored with encryption.

26. Will there be additional opportunities to submit feedback about the LTSSMaryland system and will additional enhancements be made in LTSSMaryland for MDC providers?

MDH is committed to engaging MDC providers in order to elicit feedback on the LTSSMaryland system and additional opportunities to submit said feedback will be communicated by the department. MDH is actively reviewing potential change requests (CRs) related to MDC functionality and will prioritize the feedback accordingly for future potential enhancements to the LTSSMaryland system.