

Personal Assistance Oversight Committee Minutes

January 14, 2009

2:00 PM – 4:00PM (MST)

Division of Medicaid – Central Office

3232 Elder Street, D-East Conference Room

Committee Members Present: Jason McKinley (Provider), Pam Catt-Oliason (Advocate), Michelle Wood (Provider), Aaron Thain (Provider), **Committee Members Phone-In:** Scott Burpee (Provider), Karen Schmidt (Consumer), Bart Larsen (Provider), **Committee Members Absent:** Deana Gilchrist (Advocate), Jack Miller (Consumer), Bobby Ball (Advocate/Consumer), Dana Gover (Consumer/Self-Directed). **DHW Staff Present:** Susan Scheuerer, ACC; Susie Choules, ACC, Melanie Belnap, RMS LTC Manager, (Phone); Marcie Young, Administrative Assistant II. **DHW Staff Absent:** Sharon L. Duncan, Bureau Chief, Long Term Care; Sue Harvey RN, Nurse Manager;

| AGENDA ITEM | LEAD | DISCUSSION AND ASSIGNMENTS |
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| Welcome and Introductions Read and approve minutes from September 17, 2008 PAO Meeting. | Melanie Belnap | Minutes from the September 17, 2008 meeting were approved and seconded with changes as written. |
| UNFINISHED BUSINESS | | |
| QA Process -Update | Susan Scheuerer | <p>Marcie to resend QA handouts 9-17-2008 to Scott for review and comments back to Susan before 1-31-2009.</p> <p>Due to October budget and weather issues, staff training will begin in February and will be finished by the end of March 2009.</p> <p>QA forms were changed as per recommendations from the September 17, 2008 meeting. Forms are ready for leadership approval and rollout.</p> <p>Susan outlined the changes that were made to the QA documents:</p> <p>Changes to <i>Nurse Reviewer Quality Assurance Home Visit Instructions</i>: # 7 “Mail a copy of <u>all</u> RNR Home Visit forms to agency. If there is no Plan of Action required, the form can be given to support Staff to mail out with other agency documents.</p> <p><i>Quality Assurance RNR Home Visit</i>: Susan added Dates of Service line to the bottom of form. Question: Why are Children’s services not listed at the bottom of form under Programs? Agencies would like forms available for children also. Melanie will add this request to the Agenda for the Children’s committee meeting that will be held 2/4/2009.</p> <p>Marcie will send (4) handouts – QA instructions and DRAFT Skill Matrix out with changes that have been incorporated with the minutes from this meeting.</p> <p>From the September meeting, members had requested clarification regarding liability when a PCS provider drives a participant’s car. Response from the AG was “ If the PCS worker is driving the participant’s car, presumably they are doing so with the permission of the participant. There are “permissive use” statutes that apply in that scenario that will allow a third party to go after the driver first and then the owner. Again, the third party may have a cause of action against the agency as the PCS worker’s employer but not the Department”. “Does the Department now require an agency to provide proof of insurance for all of the agency’s employees?” “I don’t think that’s wise because it implies that the Department has</p> |

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| | | <p>control over the agency's decision to hire or retain an employee and that's what the Department should not have when it expects the agency to hire, fire, supervise etc.”</p> <p>Also from the September meeting, the question, “How do we handle “Market Over Saturation?” With so many Providers in one locale, some Providers feel that with so many providers in one locale it “waters down the quality of care.” This is their argument for capping Provider enrollment. Others were adamant that provider enrollment not be capped. Providers want to have “quality vs. quantity”. The main concern is quality of service. The committee agreed to form a subcommittee to further research this topic and develop a proposal for Medicaid leadership.</p> |
| INFORMATIONAL UPDATES | | |
| Budget Reductions Suggested Savings | Melanie Belnap | <p>Suggested Savings:</p> <ul style="list-style-type: none"> • Cap Provider Enrollment – See discussion above. • Assistive Technology how about recycling surplus DME equipment, there are mountains of it lying around. Paul Leary has been in contact with Ron Siler and they are looking at options dealing with this equipment. • Code G9002 –PCS Assessment Participant Evaluation & Care Plan Development – agency. For adults the RMS authorized 1 unit for plan development. This is more expensive than consultation, which is authorized for A & D waiver participants. Also, consultation does not have to be completed by an RN where G9002 requires an RN. <p>Paul thanked members for their Cost Saving suggestions and asked that they forward any other suggestions to Sharon Duncan.</p> |
| Other | | |
| Set Next Meeting Date | May 13, 2009 | |
| Items carried over for May Agenda | | <p>Scott requested clarification on the <i>Quality Assurance/Quality Improvement Quarterly Review Summary</i> Criminal History Section B, regarding change of ownership for agencies- when and how often do the background checks have to be done. It was requested that Sue Altman with the Criminal History Unit join us at our May meeting.</p> <p>Concerning the ongoing issue of “Transfer Packets”, for hard to place participants, Scott has requested that LTC research and explain why “the Department would not share that information citing confidentiality” be added to the May agenda. This issue was discussed at the September 17, 2008 meeting. The Department stated that “transfer packets” would not be developed. Providers at the meeting discussed how they do their own analysis of the situation by conducting interviews etc.</p> |
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