Missouri Department of Social Services

MoHealthNet

Provider Bulletin

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Medically Fragile Adult Waiver Policy Updates

Applies to: Medically Fragile Adult Waiver Providers

Effective date: Upon Publication

- **Criminal History Screening**
- **Provider Monitoring Log**
- **Plan of Care**

This bulletin provides notice of policy clarifications that will be published soon in the Medically Fragile Adult Waiver (MFAW) provider manual. These policy clarifications are effective with the publication of this bulletin.

Criminal History Screening

MFAW providers are required by statute at RSMo 192.2495 to complete an Employee Disqualification List (EDL) screening and a criminal background review through MSHP for all new applicants prior to employment in positions involving contact with participants. Providers are also required to complete checks of the EDL at least annually to determine whether any current employee, contractor, or volunteer has been recently added to the list. If the provider finds that a current employee was added to the EDL, that employee will not be allowed to be employed as a caregiver. Providers must abide by the rules set forth in 19 CSR 30-82.060 regarding any employees not eligible for employment.

Providers using the Family Care Safety Registry (FCSR) to conduct the EDL and criminal background review fulfill the background screening requirements, provided there is sufficient documentation showing the identity of the person who was screened, the date the screening was required and completed, and the outcome of the screening.

DHSS is responsible for maintaining the FCSR and EDL.

Provider Monitoring Log

The requirement for providers to complete and submit provider monitoring logs to the Bureau of Special Health Care Needs has been removed.

Plan of Care

Provider agencies may use a standardized plan of care form, or they may develop their own plan of care form as long as the form contains all the required information. The individualized plan of care must include the following:

- All pertinent diagnoses (including the International Classification of Diseases (ICD) diagnosis codes), and any relevant surgical procedures
- The patient's mental, psychosocial, and cognitive status
- The types of services, supplies, and equipment required
- The frequency and duration of visits to be made
- Orders for discipline, treatments and services
- Prognosis
- Functional limitations
- Activities permitted
- Nutritional requirements
- All medications (to include name, dose, frequency and route), treatments and allergies
- A description of safety measures to protect against injury (to include the patient's risk for emergency department visits and hospital re-admission, and all necessary interventions to address the underlying risk factors)
- Patient goals (to include specific intervention, education and measurable outcomes). These goals should address the patient's rehabilitation potential, and patient and caregiver education and training to facilitate timely discharge
- Information related to any advanced directives
- Any additional items the provider agency, physician or allowed practitioner may choose to include

In addition, the plan of care should include the following:

- Patient's Medicaid ID number (DCN), date of birth, gender, name and address (to correctly identify patient)
- Start of care date and certification period (to ensure that nursing care documentation corroborates that the patient's care was assessed/reassessed in a timely manner and care was completed in correspondence with the dates listed on the plan of care)
- The provider's National Provider Identifier (NPI) number, name and address (to confirm the agency that is providing the patient care)
- Nurse's signature and date of verbal order, where applicable (to validate that a verbal order was obtained, and to allow the nurse to begin providing skilled nursing services)

- Practitioner's signature (legally authenticates verbal or written orders and confirms practitioner reviewed and approved the treatment as outlined in the plan of care).

APPLICABILITY

The information in this bulletin applies to the MO HealthNet (MHD) Fee-For-Service (FFS) program and may apply to the MHD Managed Care (MC) program, as well. MHD's FFS policies set the basic coverage policies for benefits and limitations in the MC program. The MC health plans have additional flexibilities in operating their respective programs, such as determining which services require prior authorization and details required for claims submission. Certain services, such as pharmacy, are "carved out" of MC and will be paid through the FFS program. To ensure your understanding of this bulletin's applicability to each MC health plan, please **contact your health plan** directly. If you are unable to resolve a MC issue directly with a health plan contact a MC Liaison by completing a **Managed Care Provider Request for Information**.

Bulletins will remain on the **MO HealthNet News** page only until incorporated into the **provider manuals** as appropriate, then moved to the appropriate **Provider Manual Archives**.

Providers and other interested parties are urged to **subscribe** to **MO HealthNet News** email list to receive automatic notifications of provider bulletins, provider hot tips, provider manual updates, and other official MO HealthNet communications.

Before delivering a service, please check the patient's eligibility status by swiping their MO HealthNet card, calling the Provider Communications Interactive Voice Response (IVR) System at 573-751-2896 and choosing Option One or using the Participant Eligibility option in **eMOMED**. Questions regarding MO HealthNet MC benefits should be directed to the patient's MO HealthNet **MC health plan**.

MHD Education and Training offers interactive web-based training for providers and general and program-specific educational resources. Visit our **Provider Training Calendar** to register for an upcoming training.

Provider Communications
573-751-2896
or via Provider Communications Management in eMOMED