# FREQUENTLY ASKED QUESTIONS FROM THE JANUARY 16, 2024 ACH PCS STAKEHOLDER MEETING

## **PCS Beneficiaries #s**

- 1. Q) How many residential and how many in-home beneficiaries are currently receiving PCS?
  - A) Total Beneficiaries- 28,773
    IHC Adult Beneficiaries-19,435
    ACH Adult Beneficiaries-9,161

## **Extending Beneficiaries PA's**

- 2. Q) Can DHB extend PAs prior to the month after the PA has ended so providers are not going without payment for the services, they are providing beneficiaries for up least a month before the PA is generated?
  - A) VieBridge will automatically extend the PAs at the end of the month that they expire, and they will be extended for four months as determined by DHB. If you have a beneficiary whose PAs were not extended, then please call Acentra Health at 883-522-5429 to request an extension.
- 3. Q) If PAs could be extended for an additional 3 months from the PA end date for beneficiaries that are due for an annual IA that would be extremely helpful to providers since the IAE is unable to complete the volume of assessments that are needing to be done at this time.
  - A) Medicaid will evaluate this recommendation and provide guidance during the next stakeholder's engagement or before.

#### **Monthly Stakeholder Reports**

- 4. Q) Can we either have additional detail added on the monthly report for technical denials or provide an explanation during stakeholders on what type of TD have been issued for the month?
  - A) The PCS Report published monthly by NC Medicaid will be redesigned with the feedback from our stakeholders to include utilization data and Due Process information.

# Scheduling IA's

5. Q) Are new admission and change of status requests a priority to schedule vs. an annual?

**A)** Yes, that is correct. Acentra Health is prioritizing new admissions in an effort to get services to beneficiaries who are not currently receiving care. Prior Approvals are being extended for annuals if the assessment cannot be scheduled prior to the due date.

- 6. Q) Are schedulers allowed to give out the name of the nurse who will be completing the assessment? Prior to the transition schedulers would always inform us as the provider what nurse is coming out to complete the IA but last week a scheduler said they were not able to provide the name of the nurse assessor.
  - A) Acentra Health's current practice is to give the first name only of the assessors. Offering this information during the scheduling and confirmation of the appointment will be immediately.
- 7. Q) How many days after the 3051 is received and processed does it take for NCLIFTSS to contact the provider or beneficiary to schedule the IA?
  - A) A new assessment is scheduled within 14 business days from the date 3051 is reviewed and approved.
- 8. Q) What is the turnaround time for the scheduler to return a missed phone call and voicemail message?
  - A) The turnaround time for the scheduler to return a missed phone call and voicemail message is 24-48 hours. All efforts are made to be responsive as quickly as possible to calls and messages.
- 9. Q) If the scheduler assigned to the beneficiary's area of residency is not available can other schedulers assist with scheduling an assessment?

**A)** Yes, the customer call center permits schedulers to schedule appointments for all regions of the state. If a scheduler is unavailable, other schedulers can assist with scheduling an assessment.

- 10. Q) If we are unable to reach the scheduler and calls are not being returned for days, who do we need to speak to at NCLIFTSS?
  - A) Send an email to the NCLIFTSS email address, <u>NCLIFTSS@Kepro.com</u>, and enter in the subject line: NEED TO RESCHEDULE AN APPOINTMENT. In the body of the email,

request the email be escalated to Lyric Cunningham, Scheduling Supervisor and/or Renee White, Contact Support Center Manager. You can also call 833-522-5429 and request to speak with Lyric Cunningham, Scheduling Supervisor and/or Renee White, Contact Support Center Manager to request escalation for scheduling an assessment.

- 11. Q) We are having to make multiple calls and it's taken a week or more at times just to finally reach someone to be able to schedule assessments. This week, as an example, (week of 1/8 through 1/12), there have been 5+ hours spent on hold trying to schedule our residents' assessments.
  - A) If sending an email to <u>NCLIFTSS@Kepro.com</u>, or calling 833-522-5429 as instructed in question #10, follow NC Medicaid's provider complaint guidance. For assistance needed with a specific beneficiary, please submit a ticket through the Provider Ombudsman so that it can be tracked, researched, and resolved (contact information below):

Medicaid Managed Care Provider Ombudsman Phone: 866-304-7062 Email: Medicaid.ProviderOmbudsmand@dhhs.nc.gov

### **Assessments and Nurse Availability**

- 12. Q) Do IA nurses still place a reminder call to beneficiaries and providers 24 business hours prior to the IA scheduled date?
  - A) Yes, the nurse assessors make a reminder call the day before the assessment appointment.
- 13. Q) We have seen an increase of cancellations and no-shows since the transition between Liberty Healthcare and NCLIFTSS. Often, we are not aware that the assessment is not going to be completed and us as the provider is having to take on the responsibility of following up with the IAE to find out if the nurse is coming as planned, as well as initiate the rescheduling of the assessment that was not completed due to the unexpected cancellation.
  - A) It is expected that cancellations and no-shows will increase during the winter months due to flu, Covid, RSV, and even whether related conditions. Any time there is a need for a cancellation, our schedulers work to get that beneficiary scheduled as soon as possible. In cases where there is a positive Covid case, Acentra does have to wait until after the quarantine period to reschedule.

## Staffing

## 14. Q) What are the current staffing needs at NCLIFTSS?

- A) NCLIFTSS plans to hire 75 nurses that will be dedicated to just PCS. At the end of January 2024, there will be 53 PCS nurses on staff as Acentra Health continues efforts to meet this objective.
- 15. Q) Are there areas of the State that do not have enough nurses currently and how are assessments being impacted?
  - A) Acentra Health uses a regional model approach to organize and schedule assessments. Concentrated recruitment is being focused in Western North Carolina. To ensure individuals in this region of the state are assessed timely, nurses are traveling from their assigned regions to this impacted region to assist with conducting assessments.
- 16. Q) Are the nurses employed by NCLIFTSS completing assessments for all programs PCS, PASRR, CAP/DA and CAP/C or does each program have their own group of nurses assigned to the specific program?

A) Each program area has dedicated nurses.

17. Q) If the nurses are only assigned to one program, will NCLIFTSS utilize other programs' nurses to complete assessments in the other services if there is a need?

A) Yes.

18. Q) Do the nurse assessors receive specific training for each program since each program differs?

A) Yes.