

UTILIZATION OF ATTENDANT CARE



Welcome!

- This presentation is for the purpose of offering training and support for Providers of Members utilizing Attendant Care
- Your host today is:
 - Kansas Health Solutions

What is Attendant Care?

- Attendant Care is a medically necessary service provided to Members who have:
 - a Severe and Persistent Mental Illness (SPMI) *or*
 - for children who are Seriously Emotionally Disturbed (SED).

What is Attendant Care?(cont)

Attendant Care is a *service* provided to a Member who:

- Would otherwise be placed in a more restrictive setting due to significant functional impairments.
- Enables the Member to accomplish tasks or engage in activities that they would normally do themselves if they did not experience a mental illness.
- Is direct support, supervision and/or cuing so that the Member performs the task by him/herself.
- The assistance relates to maintaining daily routines and/or engaging in activities critical to residing in their home and community.

Documentation Guidelines for Attendant Care

- Date*
- Start Time and Duration*
- Goal of service, which must coincide with a current treatment plan*
- Summary of the service*
- Location of the service (community or CMHC)*
- Consumer behavior and/or response to service*
- Signature of person providing the service. Electronic Signature with title is acceptable. *

*denotes a Medicaid Requirement

**denotes a KHS Requirement

Documentation Guidelines for Attendant Care (cont)

- In the “Summary of the Service” section, the note should describe one or more of the following:
 - Supervision or support of daily tasks, activities, or routines
 - What skills or personal care were supported
 - What prompting was done
 - In what way was safety maintained

Key Words

- Some key words in Attendant Care documentation include:

Accompanying

Assisting

Attending

Coaching

Cueing

Demonstrating

Encouraging

Guiding

Monitoring

Observing

Prompting

Reminding

Reinforcing

Overseeing

Supervising

Supporting

Validating

Sample note

Date: 1/23/2008

Start Time and Duration: 3:00 PM; 30 minutes

Goal: Improve Consumer's anxiety symptoms

Summary: This Attendant Care worker met with consumer at consumer's home. **Prompted** consumer to take daily medications and **reminded** consumer to take a shower and wear clean clothes.

Location: Community

Consumer Behavior and/or Response: Consumer was unkempt but cooperative and took medications.

Jane Doe, Attendant Care Worker

Examples of Differentiation Between Levels of Care

- **Attendant Care:** A Member who needs assistance with ADLs and is at risk of self harm.
- **PRI:** A Member needs coping skills reinforced in order to reduce symptoms such as anxiety or depressive symptoms.
- **Peer Support:** A Member who needs assistance with utilizing community supports and implementing his/her coping skills. This service is provided by a person who has experienced a mental illness.
- **CPST:** Development of coping skills for symptom reduction due to a mental illness and assistance with identifying community supports.

Higher Utilization

Increasing Attendant Care service is appropriate when:

- Diverting someone from inpatient or PRTF treatment.
- As part of a discharge plan from inpatient (State Hospital or Acute Care Psychiatric Unit) or PRTF treatment.
- Increase in symptoms.
- Behavioral changes that interfere with daily functioning.
- Crisis.

Expectations of Rehabilitation Services

- It is the expectation that progress will be made when Members receive services identified as rehabilitative.
- It should be noted that Attendant Care *is not* a rehabilitative service and progress or improvement (i.e. symptom reduction) is not an expectation of this particular service.

Medical Necessity

- **Medical Necessity Requirement**
- MEDICAL NECESSITY means that a clinical intervention for an otherwise covered category of serviced, is NOT specifically excluded from coverage, and is medically necessary, according to all of the following criteria:
 - a). Authority
 - b.) Purpose
 - c.) Scope
 - d.) Evidence
 - e.) Value

1915(b) Attendant Care vs. SED and PRTF Attendant Care

The difference between 1915 (b) Attendant Care and HCBS SED Waiver and PRTF Waiver Attendant Care is the funding stream. Both require pre-authorization.

- 1915(b) Attendant Care is funded through a limited pool of funds.
 - Attendant Care requires Pre-Authorization to monitor utilization.
 - Attendant Care is a separately funded 1915(b)(3) service –pool of \$42,570,000.
 - Over-Utilization of funds is not currently at risk.
 - Year to Date:
 - Attendant Care Services paid is \$1,316,454.

1915(b) Attendant Care vs. SED and PRTF Attendant Care (cont)

- The HCBS SED Waiver and PRTF Waiver Attendant Care is **only** available when a Member is under the age of 22 and has qualified for one of these Waivers.
- An SED or PRTF Waiver beneficiary **cannot** receive 1915 (b)Attendant Care.

How Attendant Care is Authorized

- An authorization form is completed and sent into Care Management.
- Attendant Care is a service that must be prior authorized.
- Back dating cannot go beyond one (1) business day.
- Initial authorization is for 1000 units or 250 hours.
- Once 75% of what has been authorized has been used, and it appears more units will be needed, additional units may be requested.

Billing

- Billing for Attendant Care while assisting with medication administration can only be done if the service duration is 8 minutes or more.
- Attendant Care can be billed while other services are being directly provided to the Member.

Training Required

- Attendant Care training is part of staff certification and is available through Wichita State University at www.kidstraining.org or www.trainingteams.org

Q & A