



Targeting Home and Community-Based Services

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HMS Introduction

- » Serving Medicaid program since 1985
- » Program integrity solutions for healthcare payers
- » Eight billion claims reviewed, \$3.2 billion recovered annually
- » Extensive nationwide PI team
- » Experience includes:
 - ▶ Fraud, waste, and abuse detection and prevention (Medicare / Medicaid)
 - ▶ Recovery Audit Contractor (Medicare / Medicaid)
 - ▶ Audit
 - ▶ Clinical Review



Agenda

- » **Background**
- » **Challenges**
- » **Approach**
- » **Opportunities for Improvement**
- » **Discussion**





Background





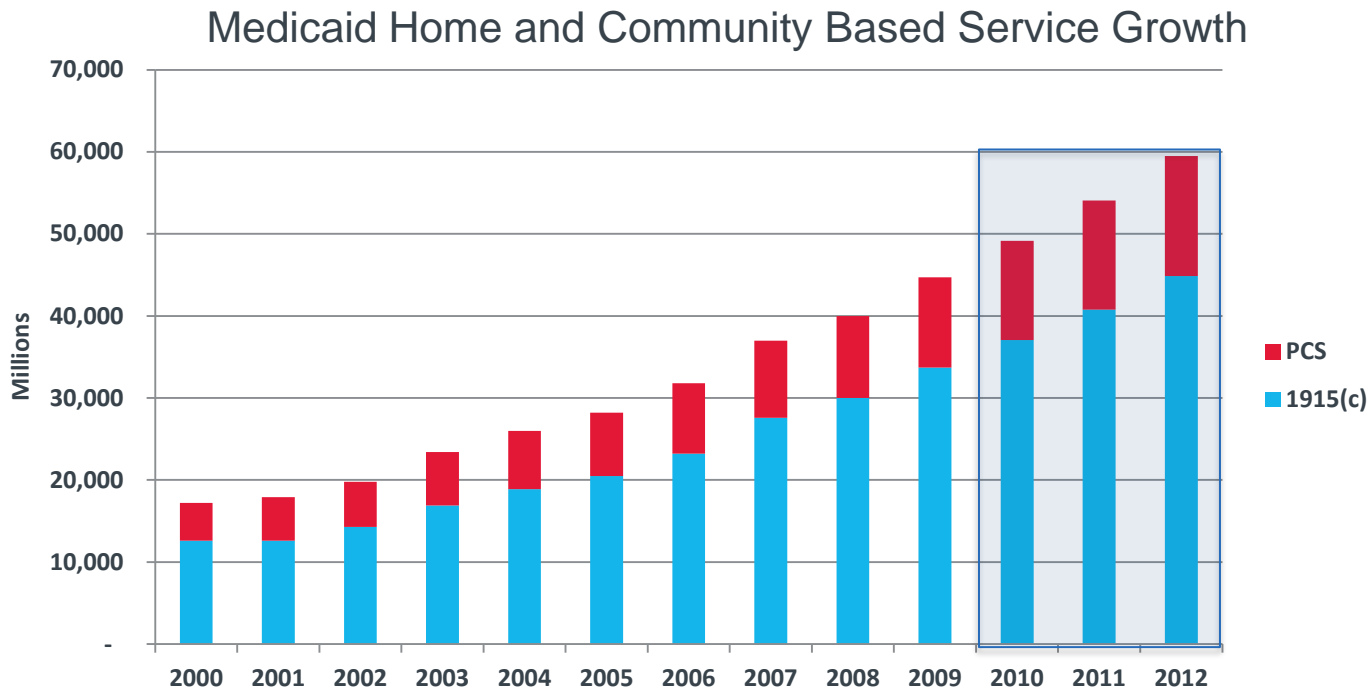
Home and Community-Based Services

- » Community-based behavioral health
- » Personal Care Services (State Plan)
- » 1915(c) waiver
 - ▶ Developmentally disabled
 - ▶ Aged
 - ▶ Traumatic Brain Injury (TBI) / Acquired Brain Injury (ABI)
 - ▶ AIDS/HIV
 - ▶ Consumer directed service models





Home and Community-Based Services (cont)

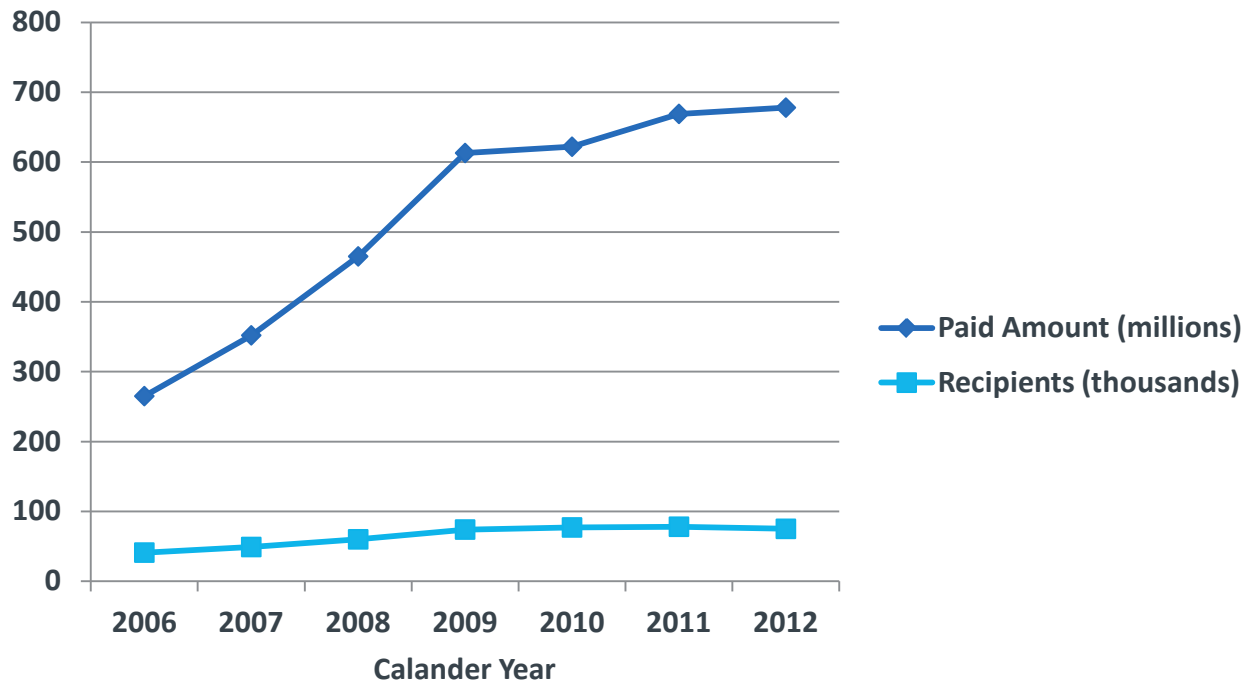


Source: Kaiser Commission on Medicaid and the Uninsured and UCSF analysis of CMS Form 372 data and program surveys. (2010 - 2012 extrapolated based on historical growth avg. 10%)



Home and Community-Based Services (cont)

One State's Growth in Community Behavioral Health





Routine Issues

» Fraud and Abuse

- ▶ Billing for services not provided
- ▶ Billing errors / overpayment
- ▶ Non-qualified staff
- ▶ Non-compliance with documentation requirements





What? I Need to Keep Documentation?





More Complex Issues

- » Are appropriate services being provided
 - ▶ Are services and level of services appropriate?
 - ▶ Are services coordinated?

- » Policy Issues
 - ▶ Are services structured properly?
 - ▶ Are services appropriately reimbursed?
 - ▶ Do policy gaps enable overutilization and abuse?
 - ▶ Could more be served through improved policy?





One Example

MFCU findings for referred behavioral health provider:

- » Billed for services not provided
- » Documentation not compliant
- » Counselors not qualified
- » Unneeded services
- » Services provided not therapeutic
- » Payment for beneficiary referrals
- » Falsified records in response to audit
- » Services to multiple siblings in the same home



Multiple Siblings

PRELIMINARY ASSESSMENT (To be completed prior to admission)

Name: Justin

File #:

Onset/Duration of problems: C.H. also has difficulty with following directions from authority figures, also loses temper.
Onset/duration of problems (past 5 years)
for at least 6 mo: Claudio presents
concerns of C.H. having poor anger
control - C.H. often loses temper as this
is evident by physical / verbal aggression
in the home, school and comm. Claudio
also reports C.H.'s last interaction with
bro Peter approx 2 yrs ago. C.H. often wonders
where Peter is, cries night and day to
understand why Peter not home.
C.H. also appears to be affected by father not
being involved in life. C.H. usually reports
problems since deceased.

Social/Behavioral/Developmental/Family History:

C.H.'s social behaviors are such that
he has very poor interpersonal skills to
such a degree that C.H. has very
strained relationships with his peer/
and family members. C.H.'s behaviors -
poor anger control and grief/loss are such
that C.H. has difficulty with appropriate
behaviors in the classroom & home to such
a degree that he is at risk of being home
placed.

Employment/vocation/educational background:

C.H. not employed as result of age.
Edu. background to include: poor peer
relationships with peer/family members
as result of defiance, poor anger control
and grief/loss of missing parent. Also
such that repeated in terms as deemed
necessary by guardian and/or other
authority figures.

Description of past treatment or service efforts and their outcomes, if known:

NONE

Axis I: OPP-313.81

PRELIMINARY ASSESSMENT (To be completed prior to admission)

Name: Christian

File #:

Onset/Duration of problems: C.H. also has difficulty with following
directions from authority figures, also loses
temper.
Onset/duration of problems (past 5 years)
for at least 6 mo: Claudio presents
concerns of C.H. having poor anger
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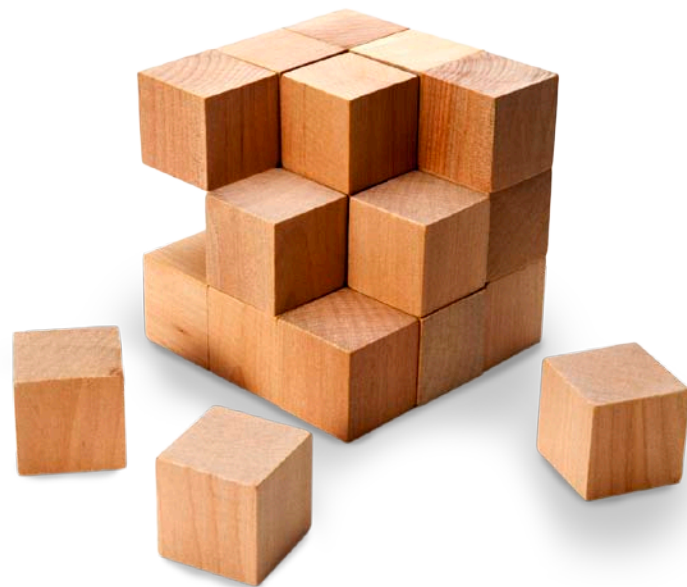
Description of past treatment or service efforts and their outcomes, if known:

NONE

Axis I: OPP-313.81



Challenges





Why Is This So Hard?

- » Complex services
- » Thousands of providers
- » Millions of claims
- » Difficult data
- » Limited audit resources
- » Policy challenges





Approach

Is RAC The Answer?



An all-too-common RAC example:

- » State AVG TBI spending/beneficiary \$62,556 vs. National Avg. \$32,251*
- » Fee schedule, and comparative services, indicate 1 unit per **visit**

MMIS	Code	Provider Fee Schedule	Fee
TBI-OCCUPATIONAL_THERAPY_VISIT	97535	TBI-Occupational Therapy (Per 30 Minute Session)	\$ 73.00
TBI-COG_THERAPY_PER_VISIT	97532	TBI-Cognitive Therapy (Per 30 Minute Session)	\$ 73.00
TBI-PHYSICAL_THERAPY_PER_VISIT	S8990	TBI-Physical Therapy (Per 30 Minute Session)	\$ 73.00
Physical Therapy (15 minutes)	RC420	Physical Therapy (15 minutes)	\$ 24.06
Occupational Therapy (15 minutes)	RC430	Occupational Therapy (15 minutes)	\$ 23.81
Psychotherapy Session (45-50 minutes)	90806	Psychotherapy Session (45-50 minutes)	\$ 37.00

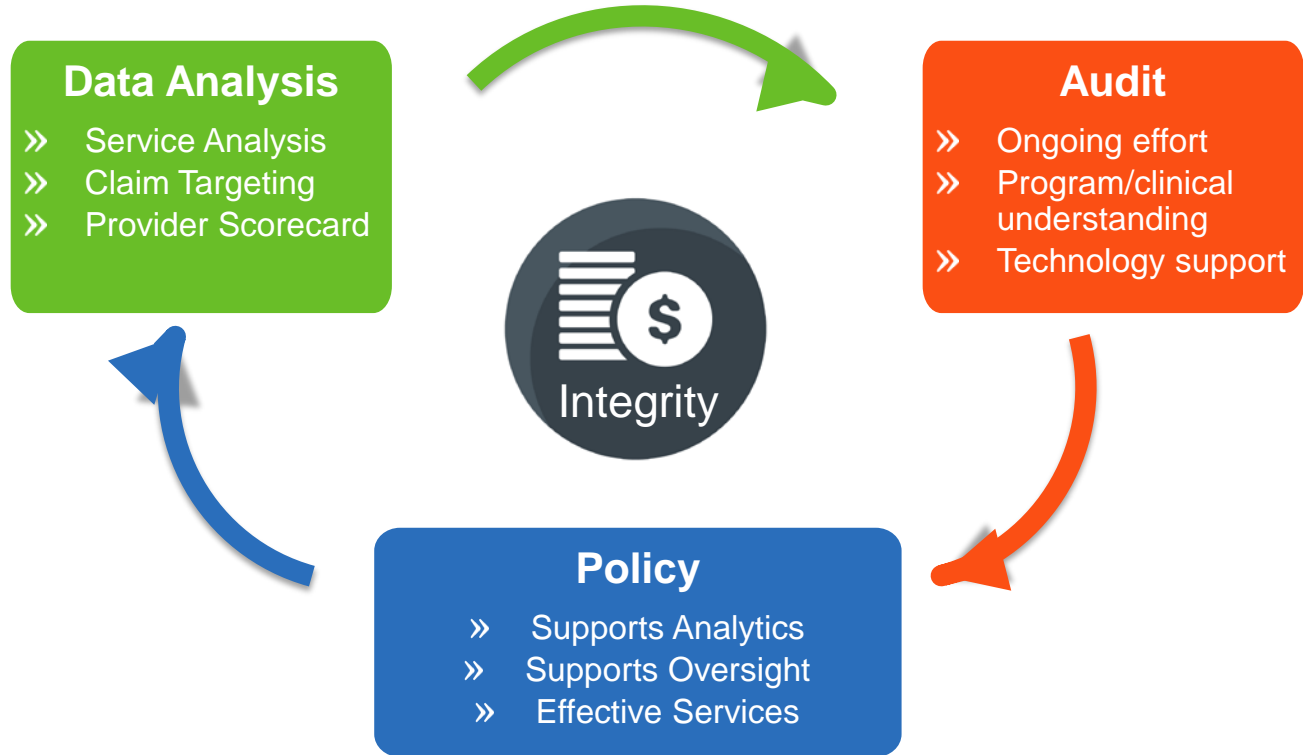
- » Most providers (not all) billing > 1 unit per visit
- » \$11+ million in potential overpayments
- » **But**.....discrepancy prevented State from recovering on issue

* Kaiser Foundation State Health Facts database based on The Centers for Medicare & Medicaid Services (CMS) Form 372, December 2012, Table 6. "[Medicaid Home and Community-Based Service Programs: 2009 Data Update](#)"



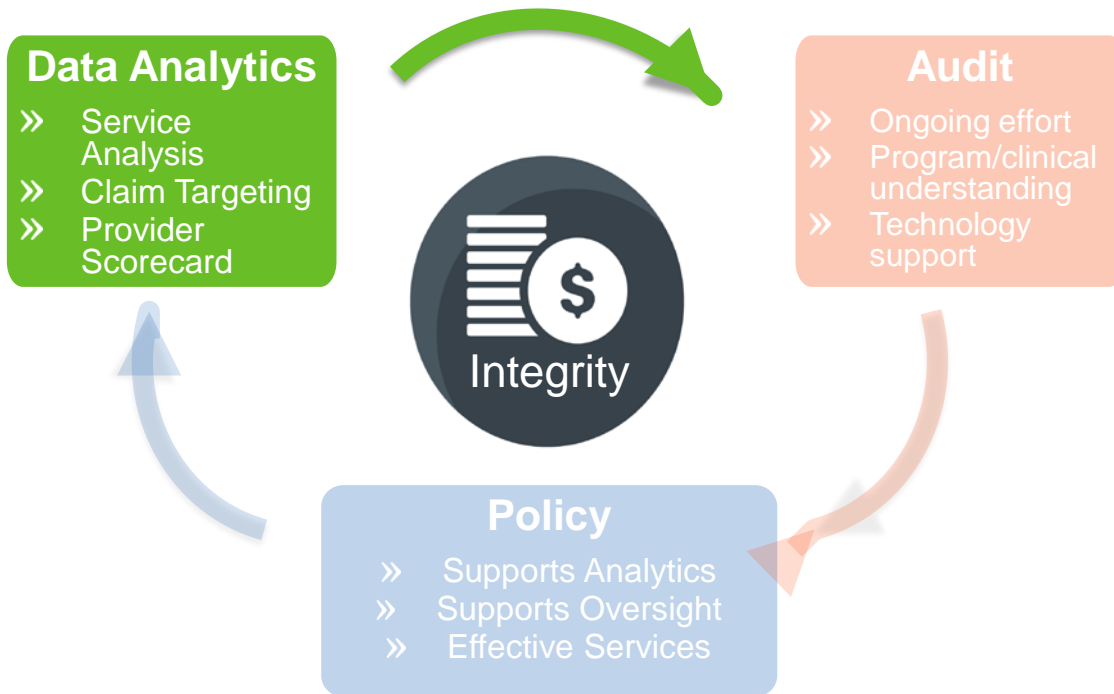


Comprehensive Model





Data Analytics



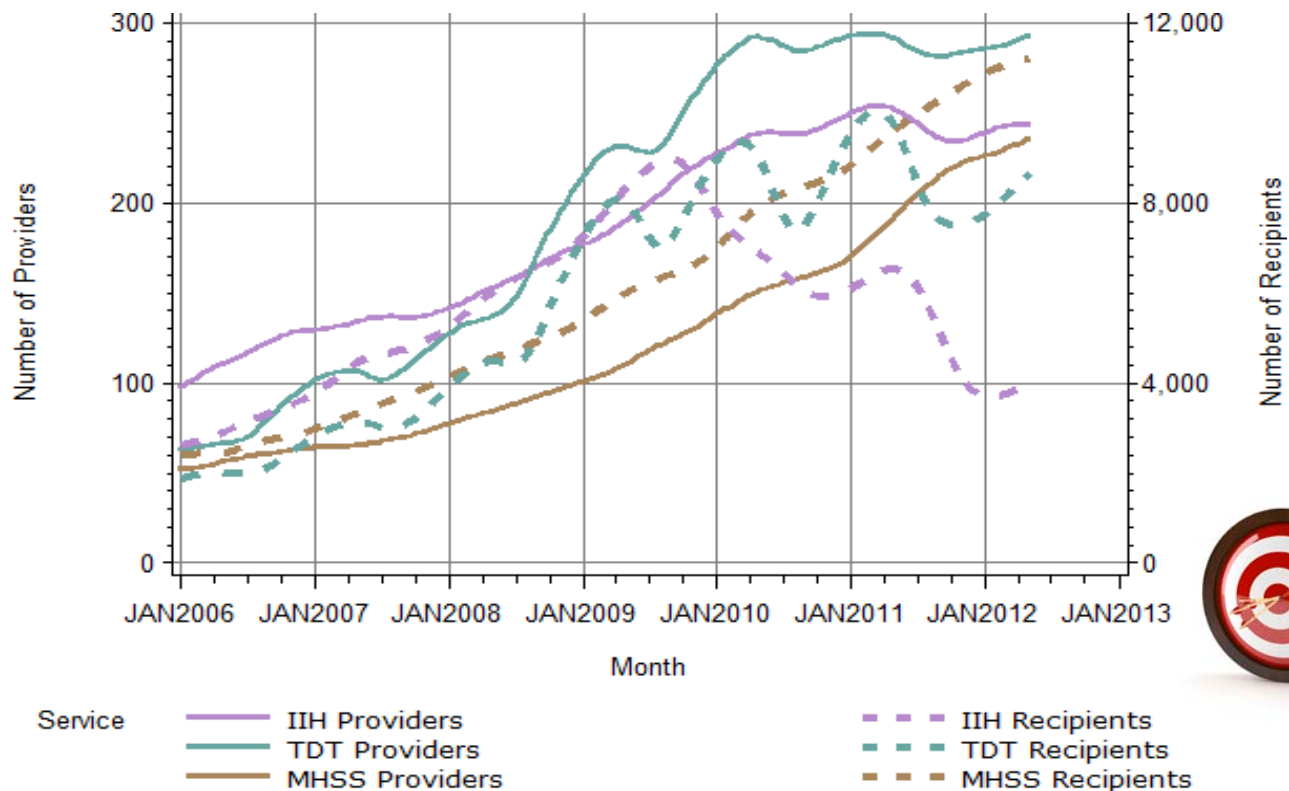


Data Analysis and Targeting

- » Service analysis
- » Growth trend analysis
- » Patient Drift
- » Longitudinal beneficiary analysis
- » Issue analysis
- » Service-link analysis
- » Provider-link analysis
- » **Provider scorecards**



Overall Service Analysis



Service Level Analysis



» Personal care and waiver services year to year

Prov Type	Description	Prov Spec	2011 Claims	2011 Paid Amt	2012 Claims	2012 Paid Amt	% Change
36	Personal Care Services	361	400,728	\$ 22,791,242	472,157	\$ 27,136,396	19%
52	Acquired Brain Injury	029	83,802	\$ 37,254,360	137,859	\$ 38,770,096	4%
53	DMR Waiver	530	585,182	\$ 108,149,551	65,811	\$ 14,489,018	-87%
54	DMR Waiver Performing	533	2,839,050	\$ 609,584,759	3,302,273	\$ 703,814,171	15%
57	CT Home Care Program	541	1,574,137	\$ 83,527,210	1,458,170	\$ 82,423,135	-1%
57	CT Home Care Program	542	114,896	\$ 8,474,622	125,002	\$ 9,615,420	13%
57	CT Home Care Program	543	1,675	\$ 105,595	160,124	\$ 10,798,026	10126%
58	CT Home Care Program P	540	1,450,399	\$ 86,760,124	1,514,557	\$ 96,238,715	11%
	Total			\$ 956,647,461		\$ 983,284,977	3%

Procedure Analysis



» Personal care procedures year to year

Pdr Type	Proc	DESC	2011 Claims	2011 Paid Amt	2012 Claims	2012 Paid Amt	% Change
36	1520P	Personal Care Assistance Services	434,317	\$ 24,676,681	475,002	\$ 27,341,285	11%
54	T1019	Personal care services, per 15 minutes,	96,392	\$ 12,191,294	156,005	\$ 19,891,395	63%
57	T1019	Personal care services, per 15 minutes,	141,021	\$ 9,162,983	169,929	\$ 11,173,196	22%
57	1019Z	Personal Care	968	\$ 134,116	4,020	\$ 539,336	302%
57	1020Z	Personal Care, Overnight	166	\$ 17,823	276	\$ 29,898	68%
57	1021Z	Personal Care 15 minutes	11,920	\$ 1,462,156	47,588	\$ 5,999,821	310%
57	1022Z	Personal Care Services, Overnight, Agency	133	\$ 17,485	1,261	\$ 166,183	850%
57	1023Z	Personal Care, per diem	7,128	\$ 1,272,687	23,336	\$ 4,176,830	228%
58	1021Z	Personal Care 15 minutes	47,518	\$ 5,093,621	150,055	\$ 17,043,724	235%
58	1022Z	Personal Care Services, Overnight, Agency	1,813	\$ 238,929	5,422	\$ 714,383	199%
58	1023Z	Personal Care, per diem	12,951	\$ 2,325,306	52,938	\$ 9,464,629	307%
		Totals		\$ 31,916,400		\$ 69,199,395	117%

Provider Analysis



» Sample providers year to year

Provider	Name	Proc	Description	2011 Claims	2011 Paid Amt	2012 Claims	2012 Paid Amt	% Change
	Provider 1	1021Z	Personal Care 15 minutes	3,711	\$ 371,354	9,035	\$ 981,374	164%
	Provider 1	1022Z	Personal Care Services	326	\$ 43,032	474	\$ 62,568	45%
	Provider 1	1023Z	Personal Care, per diem	356	\$ 64,021	1,730	\$ 309,808	384%
	Provider 1	1210Z	Companion services	20,575	\$ 1,382,390	13,767	\$ 994,382	-28%
	Provider 1	1214Z	Homemaker Service - Agenc	28,597	\$ 1,511,656	22,084	\$ 1,216,809	-20%
			Totals		\$ 3,372,454		\$ 3,564,941	6%
	Provider 2	1021Z	Personal Care 15 minutes	10,679	\$ 1,049,481	32,059	\$ 3,312,973	216%
	Provider 2	1023Z	Personal Care, per diem	3,390	\$ 608,482	4,910	\$ 882,112	45%
	Provider 2	1210Z	Companion services	78,766	\$ 3,999,260	77,235	\$ 3,478,827	-13%
	Provider 2	1214Z	Homemaker Service - Agenc	102,977	\$ 4,124,447	98,667	\$ 3,576,376	-13%
	Provider 2	1225Z	NF	16	\$ 1,448	53	\$ 6,499	349%
			Totals		\$ 9,783,118		\$ 11,256,787	15%

Longitudinal Beneficiary Analysis

- » Service analysis (understanding full range of a patient's services)

Waiver Profile Analysis									
ID:			Acute Services			Waiver Services			
YYMM	# Waiver Service Types	Monthly Waiver Spend	INP	LTC	HH	9764Z	9780Z		
1301	2	\$ 18,602.00	Y			\$ 18,352.00	\$ 250.00		
1302	1	\$ 16,576.00				\$ 16,576.00			
1303	1	\$ 18,352.00				\$ 18,352.00			
1304	1	\$ 17,760.00				\$ 17,760.00			
1305	1	\$ 18,352.00				\$ 18,352.00			



Claim Discrepancy Targeting

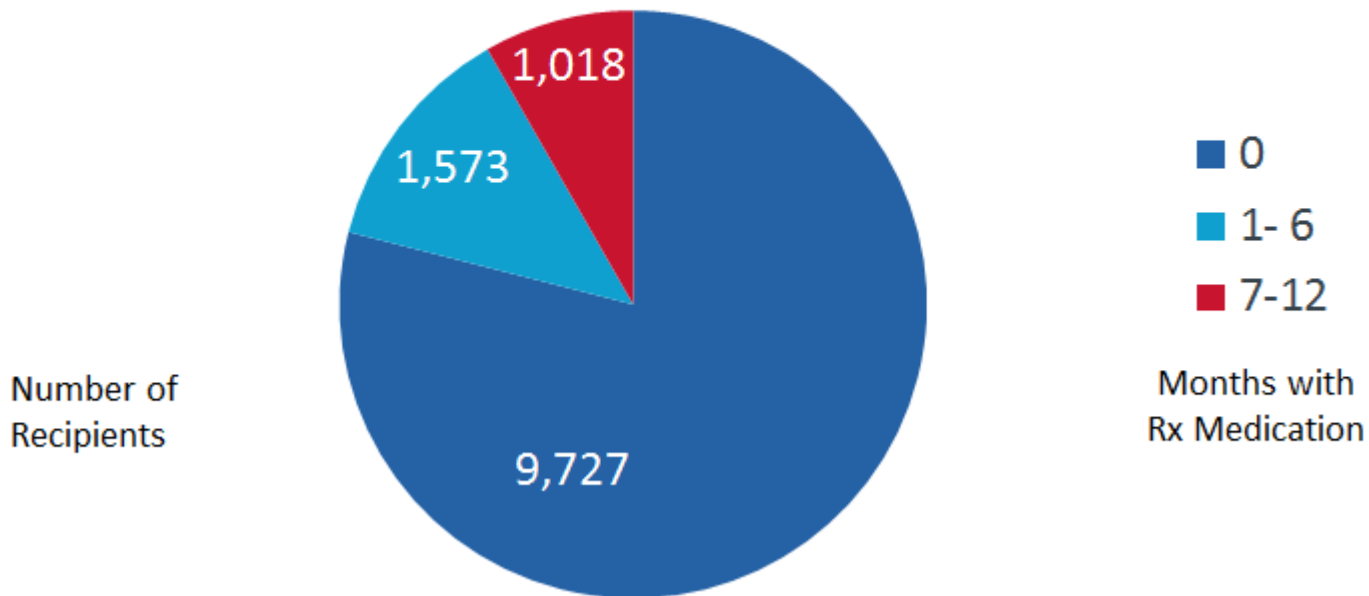
» Inappropriate Overlap analysis

Recipient Case Summary										
Patient ID:										
Provider	Service Type	Place	Proc	Description	DOS From	DOS To	UNITS	BILLED	PAID	Rate
✓	Waiver	Home	9764Z	DDS Residential Habilitative Services	1/1/2013	1/31/2013	31	\$ 18,352.00	\$ 18,352.00	\$ 592.00
	Inpatient	Hospital			1/9/2013	1/12/2013	3	\$ 12,658.70	\$ 4,521.30	
	Waiver	Home	9780Z	DMR Targeted Case Management	1/30/2013	1/30/2013	1	\$ 250.00	\$ 250.00	\$ 250.00



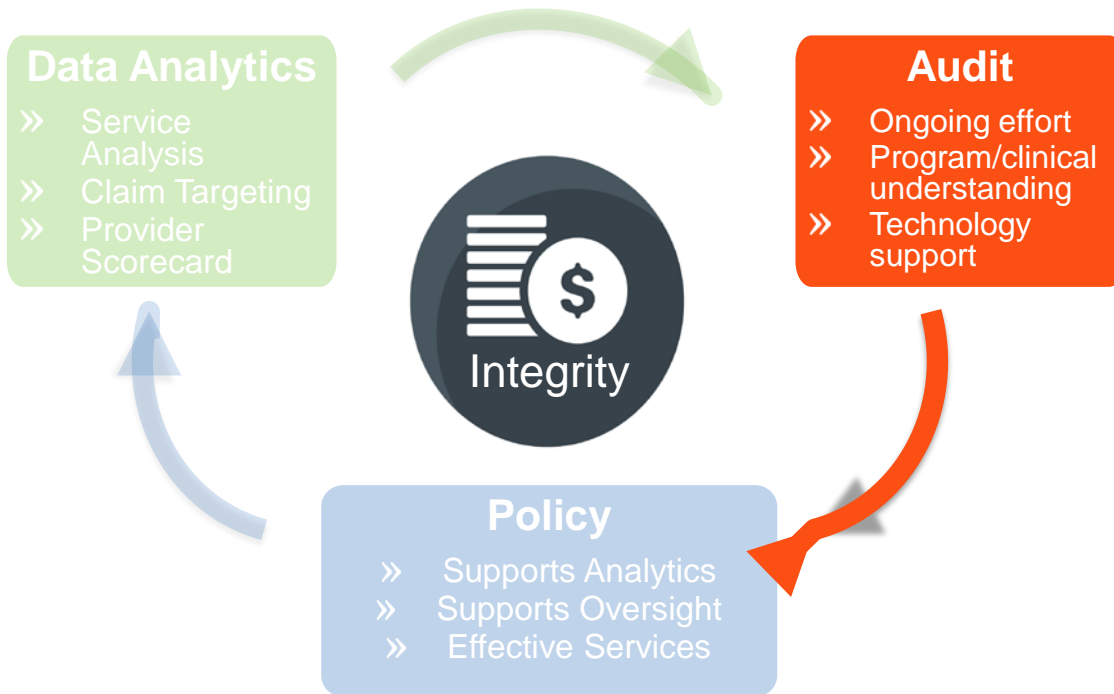
Issue Analysis

Mental Health Support Service Patients Receiving Psychotropic Drugs First YOS





Audit





A Comprehensive Audit Program

- » Targeted through data
- » Program and policy understanding critical
- » Clinical insight necessary
- » Technology support important
- » Both direct and indirect ROI
 - Identification of errors and overpayments
 - Provider education/sentinel effect
 - Resolution of policy issues



Understanding Policy and Regulations



Criteria Reference

Issue	Long Term- Personal Care Services (LT-PCS)	Elderly and Disabled Adult Waiver- Community Support s (EDA-CS)	Early and Periodic Screening, Diagnosis and Treatment – Personal Care Services (EPSDT-PCS)	
DSW Family Members	<p>Reference: LAC 50.XV.9.12911(C) LOUISIANA ADMINISTRATIVE CODE (LAC) Title 50 PUBLIC HEALTH—MEDICAL ASSISTANCE Part XV. Services for Special Populations Subpart 9. Personal Care Services Oct 12, 2009 §12911(C) Restrictions. A legally responsible relative is prohibited from being the paid direct service worker for a family member. For the purposes of the Long Term-Personal Care Services Program, legally responsible relative is defined as the recipient's spouse, curator, tutor, or legal guardian.</p> <p>Reference: LAC 50.XV.9.12905(D) §12905(D) Persons designated as the personal representative of either an individual receiving services under LT-PCS or the La POP option may not be the paid direct service worker of the individual they are representing.</p>	<p>Reference: DSPM 6-13, 6-14 DIRECT SERVICE PROVIDER MANUAL (DSPM) Issued: September 1, 2001 DEPARTMENT OF HEALTH AND HOSPITALS Bureau of Community Supports and Services Elderly and Disabled Adult Waiver Direct Service Provider Requirements (Pages 6-13 and 6-14) Legally responsible relatives shall not be employed by the service provider to provide direct support services reimbursed through the EDA waiver. This would include:</p> <ul style="list-style-type: none"> • Spouses, • Parents or stepparents, • Foster parents, or • Legal guardians <p>Family members who provide paid support services to the recipient must meet the same standards as personal care attendants who are unrelated to the recipient.</p>	<p>Reference: LAC 50.XV.5.73.7315.(A) LOUISIANA ADMINISTRATIVE CODE (LAC) Title 50 PUBLIC HEALTH—MEDICAL ASSISTANCE Part XV. Services for Special Populations Subpart 5. Early and Periodic Screening, Diagnosis, and Treatment Chapter 73. Personal Care Services §7315. Provider Qualifications A. Personal care services must be provided by a licensed personal care services agency which is duly enrolled as a Medicaid provider. Staff assigned to provide personal care services shall not be a member of the recipient's immediate family. (Immediate family includes father, mother, sister, brother, spouse, child, grandparent, in-law, or any individual acting as parent or guardian of the recipient). Personal care services may be provided by a person of a degree of relationship to the recipient other than immediate family, if the relative is not living in the recipient's home, or, if she/he is living in the recipient's home solely because her/his presence in the home is necessitated by the amount of care required by the recipient.</p>	<p>Reference: LAC 50.XV.5.73.7315.(A) LOUISIANA ADMINISTRATIVE CODE (LAC) Title 50 PUBLIC HEALTH—MEDICAL ASSISTANCE Part XXI. Home and Community-Based Services Chapter 9 – Covered Services §13901. Individual Services E. Staffing Criteria 1. IFS-D or IFS-N services shall be provided in the recipient's residence and the facility defined in §13901.C</p> <p>Reference: NOWP LOUISIANA MEDICAL ASSISTANCE PROVIDER MANUAL ISSUE DATE JANUARY 2010 CHAPTER 32 32.10 SERVICES FOR INDIVIDUALS 32.10.1 INDIVIDUAL SERVICES 32.10.1.2 SPECIAL SERVICES IFS-D employees must be made for service of a minor child.</p>

Record Intensive!



- » 50 sample cases
- » 30,000 pages



Technology is Important!



File Batch Tools Reports

Audits Cases Case Details Contact

Case ID: [Redacted] Provider: [Redacted] Audit Date: 07/01/2011 Auditor: ksimpson Last Modified: 06/20/2013 2:11:35 PM

Medicaid ID: [Redacted] Case Name: [Redacted] DOB: [Redacted] Case From: 07/08/2011 Case Thru: 06/28/2012

Case Type: IHH Case Scope: Full Scope Case Result: Not Reviewed Case Status: Not Reviewed QC Status: Not QC'd

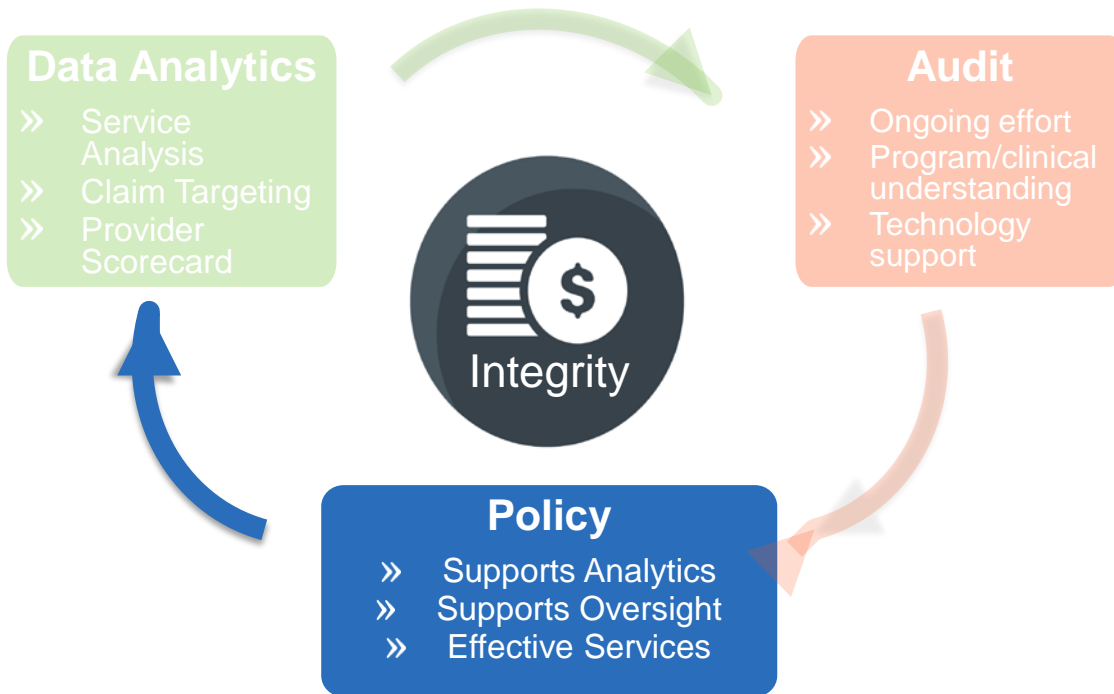
Retract Units: 64.00 Retraction Amount: 3840.00 ☐ Retract ☐ Approved

Entities Claims Time Tracking

	PN Units Claimed	Retract Units	Retract Amt	Review Status	DOS From	DOS Thru	Proc	Mod	Claim Units	Billed Amt	Paid Amt	NPI
Progress	11.00	11.00	660.00	Error	07/08/2011	07/10/2011	H2012		11.00	660.00	660.00	1437480688
Progress	2.00	2.00	120.00	Error	07/11/2011	07/14/2011	H2012		12.00	720.00	720.00	1437480688
Progress	0.00	0.00	0.00	Not Reviewed	07/11/2011	07/15/2011	H0035	HA	15.00	547.95	547.95	1437480688
Progress	10.00	0.00	0.00	Requirement Met	07/18/2011	07/20/2011	H2012		10.00	600.00	600.00	1437480688
Progress	0.00	0.00	0.00	Not Reviewed	07/18/2011	07/22/2011	H0035	HA	15.00	547.95	547.95	1437480688
Progress	0.00	0.00	0.00	Error	07/25/2011	07/27/2011	H2012		10.00	600.00	600.00	1437480688
Progress	0.00	0.00	0.00	Not Reviewed	07/25/2011	07/29/2011	H0035	HA	15.00	547.95	547.95	1437480688
Progress	0.00	0.00	0.00	Not Reviewed	08/01/2011	08/05/2011	H0035	HA	15.00	547.95	547.95	1437480688
Progress	10.00	0.00	0.00	Requirement Met	08/02/2011	08/05/2011	H2012		10.00	600.00	600.00	1437480688
Progress	0.00	0.00	0.00	Not Reviewed	08/08/2011	08/12/2011	H0035	HA	15.00	547.95	547.95	1437480688
Progress	0.00	0.00	0.00	Error	08/09/2011	08/11/2011	H2012		10.00	600.00	600.00	1437480688
Progress	0.00	0.00	0.00	Not Reviewed	08/15/2011	08/19/2011	H0035	HA	15.00	547.95	547.95	1437480688



Policy





Policy Issues and Improvement

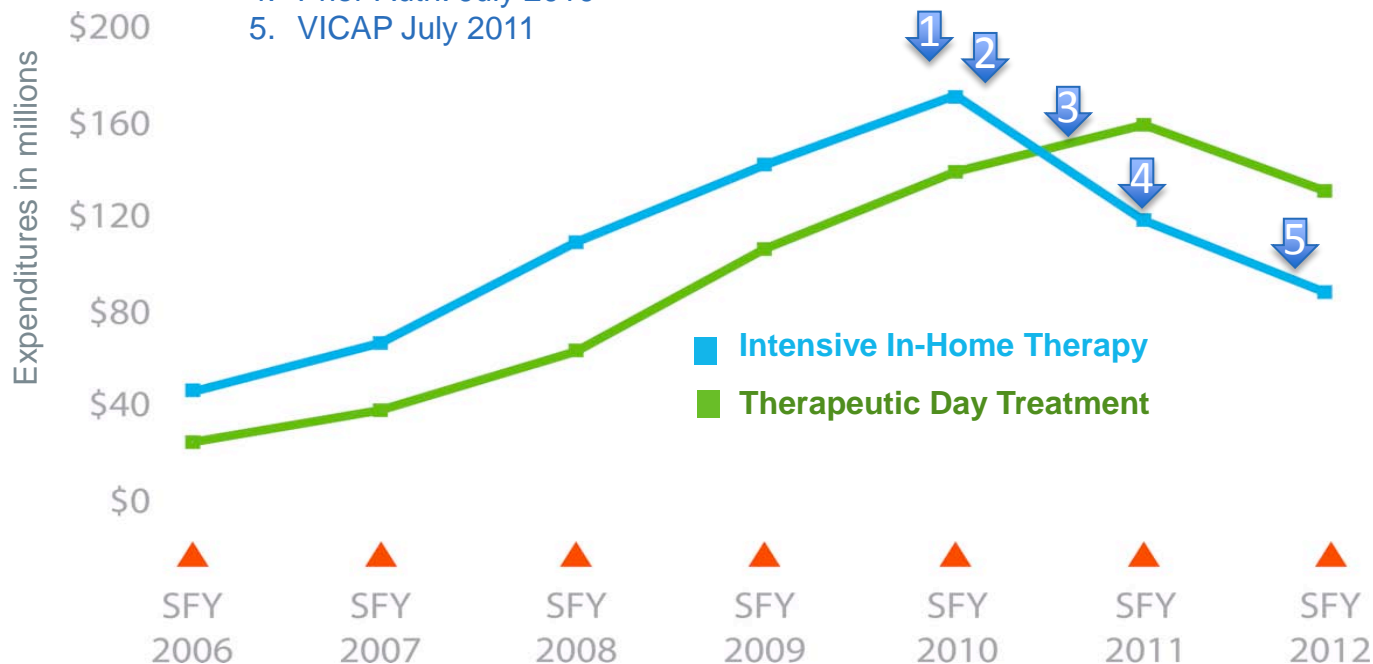
- » Audits identify policy gaps and inconsistencies
- » A great opportunity for policy improvement





Impact of Audit + Policy Improvement

1. Audits start Sep 2009
2. Policy Changes Nov 2009
3. Reimbursement Change Feb 2010
4. Prior-Auth. July 2010
5. VICAP July 2011



But When There's a Will, There's a Way...



» Providers switching from IIH to MHSS

Provider ID	Provider Name	Proc	Description	2011 Paid	2012 Paid	% Change
		H0046	Mental Health Support Services	656,747.00	1,328,216.00	202%
		H2012	Intensive In Home Treatment	1,875,180.00	648,120.00	34%
		H0046	Mental Health Support Services	1,310,582.00	3,115,203.00	237%
		H2012	Intensive In Home Treatment	208,380.00	177,180.00	85%
		H0046	Mental Health Support Services	93,912.00	624,169.00	664%
		H2012	Intensive In Home Treatment	262,095.00	241,905.00	92%
		H0046	Mental Health Support Services	692,783.00	1,663,480.00	240%
		H2012	Intensive In Home Treatment	227,760.00	142,860.00	62%
		H0046	Intensive In Home Treatment	0.00	0.00	0%
		H0046	Mental Health Support Services	49,302.00	2,561,048.00	194%



Opportunities for Improvement





Opportunities: Data

- » Improve claim data
 - ▶ Ban spanned dates
 - ▶ More detailed procedure and unit coding
 - ▶ Require service workers unique identifier on claim
- » Digitize / access to eligibility data
 - ▶ Assessment
 - ▶ Plan of care
 - ▶ Authorized services / limits
- » Access to timesheet data (where applicable)





Opportunity: Service Worker Tracking

- » Leverage CMS Grant Funding for Service Worker Enrollment platform
- » Tie enrollment identifier to claim identifier
- » Require access to timesheet data for analysis

DIGITAL HARBOR™
Predict, Prevent, PRO-ACT

Best-of-Breed Authoritative Data Sources...

- **Identity Verification**
 - AKA Name
 - DoB
 - SSN
 - Driver License
 - Education Verification
 - Employment Verification
 - Finger Printing
- **Demographics Verification**
 - Address
 - Phone Number
 - Map based Geo-location verification
- **Eligibility Verification**
 - Criminal Record
 - Infractions
 - Lawsuits Record
 - Arrest Record (real-time arrests)
 - Drug and Substance Abuse Record
 - Incarcerations
- **Disclosure Verification**
 - OtherNamesForSSNs Record
 - OtherSSNs Record
 - SSNFraudAlert Record
 - Relatives Record
 - Associates Record
 - Work affiliations Record
 - National Sex Offender Registry
 - OIG Exclusion List
 - FBI's Integrated Automated Fingerprint Identification System

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Recommendation: Comprehensive Monitoring

» Comprehensive Monitoring Program

- ▶ Monitoring and Targeting Analytics
- ▶ Comprehensive Audit Program
- ▶ Formal Policy Review and Recommendations

» Benefits

- ▶ Direct ROI
- ▶ Provider education
- ▶ Sentinel effect, encourage self audit and whistleblowers
- ▶ Improved policy
- ▶ Enhanced program integrity



Discussion





Thank You!

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