

Questions and Answers from Provider Roundtable July 27, 2022

Q1. The provider list on My Life My Community is not up to date. Why?

A1. All of the providers list in the provider search are self reported and/or pulled from Senior Navigator. If you are a provider and you do not see your information in the system, please use the [Register or Verify a New Provider Profile link](#) to enter or verify the information on file.

Q2. What are the LEIE checks?

A2. These are the [lists of excluded individuals and entities](#). These are people who are not permitted to provide Medicaid services. Providers are required to pull this list at the time of hire and monthly for all staff. Providers will be cited for not doing so and keeping the monthly list in a file.

Q3. Are the DSP tests required annually?

A3. All DSPs are required to complete the 2016 test only once. A copy of the completed test must be kept in the employee's file along with their assurance and competencies documents. More information about required trainings can be found [here](#).

Q4. How do we ensure that we are getting paid at the correct rate?

A4. Julie is working on verifying the billing adjustment. This might be done by DMAS automatically, but we will verify.

Q5. What is the timeline for CSBs to conduct the annual ISP in order for providers to get their Part Vs and SAs completed in time?

A5. If you are a provider and you are having difficulty with a CSB not coordinating annual ISP meetings in a timely manner, please reach out to your Team 3 CRC.

Q6. If someone leaves an agency, but returns within 30 days, do they have to restart the DSP orientation and competencies trainings?

A6. The orientation certificate can be transferred from agency to agency. If an individual returns to the same agency within 30 days, complete a new competencies checklist based on the new hire date, but the provider can use documentation from the first time the individual was hired to support their answers on the checklist.

Q7. Regarding quarterlies, how do we get signatures from guardians/ARs/SDMs who live out of town/state? Can we call them and review the information over the phone?

A7. Regulations state that the quarterly must be reviewed with the guardian/AR/SDM and the signature is used to document that it was reviewed. If they are not able to sign, there should be significant documentation that it was reviewed. Additionally, the signature could be obtained through mail, fax, or email, as electronic signatures are accepted. Documentation including all attempts to get the quarterly signed should be noted in the progress notes and on the quarterly itself.

Q8. Do we keep just the current month for the LEIE check and dispose of the previous month's or keep all checks? This will make the employee's file quite full.

A8. Keep all LEIE checks in the employee's file.

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Q9. Are you aware of any resources that can do an automated monthly LEIE check?

A9. While there are additional sites where you can check for LEIE, they might not be accurate. It is recommended to use [this site](#) to pull the LEIE reports each month.

Q10. Are there trainings available for supervisors in order to increase their own education, such as advanced competencies or code of ethics trainings?

A10. DBHDS does not offer trainings on code of ethics, however the [National Alliance of Direct Support Professionals](#) offers resources and trainings related to ethics. Providers can find or create their own trainings, provided the training meets all of the criteria listed in [the DSP and DSP Supervisor DD Waiver Orientation and Competencies Protocol](#).

Q11. Can you go into more details regarding QMR citations regarding supervision for sponsored residential? Do the competencies cover this, or does it have to be separate semi-annual note?

A11. It must be documented in a separate semi-annual note by whomever is responsible for supervising the specific DSP, as this is different from the competencies.

Q12. Please clarify what "all staff" means for LEIE checks, specifically for a provider that is not licensed for DD Waiver and has a significant number of employees.

A12. It does not matter if you are licensed or not, all employees must have monthly LEIE checks. In the past, there have been environmental modification providers that have been cited for not having these for all of their employees. Some providers might have been able to automate this process internally. DBHDS will look into this and consider this as a possible presentation for one of the PRT presentation forums.

Q13. Is there a list or documentation available to providers to ensure that DSP and individual service records have what they need in the event of an audit?

A13. Information can be found in the DMAS and DD Waiver regulations, DD Waiver manual, Office of Licensing documentation, Office of Human Rights documentation, and HCBS regulations. Most organizations have their own internal lists that they have created.

Q14. Does anyone know of any training offered for Sponsored Residential Services?

A14. There are many trainings offered through the Office of Licensing and the Office of Integrated Health. Please check the [DBHDS Centralized Training website](#) and [Person Centered Practices](#) for additional trainings.

Q15. As a provider, is it sufficient to have a statement on the quarterly to say that it was reviewed by the individual and SDM instead of a physical signature?

A15. If the individual is there in person they should sign or make a mark, in addition to the guardian/AR/SDM.

Q16. What are the regulations for medication administration training?

A16. Each provider responsible for medication administration shall provide in-service training to employees who will be responsible for administering medications. The training must be completed with

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a certificate of completion on file prior to an employee administering medications. Training curriculums are approved by the Board of Nursing. For more information about the DBHDS-specific training can be found [here](#).

If you have questions that are not answered in this document, please contact your CRC.