

PARTNERS

BlueCare Tennessee Managed Long-Term Services and Supports Program

News and tips to support MLTSS partners and enhanced care for our members

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Quality Corner: Supported Decision-Making

For our members with disabilities, supported decision-making not only allows them to make decisions, but also offers the opportunity for increased independence, self-determination and autonomy.

The Department of Disability and Aging (DDA) evaluates supported decision-making services during Provider Quality Monitoring surveys. Quality Topic 6: Choice and Decision-Making addresses six quality indicators on choice and decision-making opportunities for members receiving services.

What is Supported Decision-Making?

The Tennessee Council on Developmental Disabilities defines supported decision-making as the idea that each member has the right to make decisions to the full extent possible, even as they get needed support. This allows individuals with disabilities to make choices about their lives with support from a team of people they know and trust. The support team doesn't choose for them but can provide support and tools for them to decide. According to the Tennessee Center for Decision-Making Support, examples of supported decision-making include:

- Helping individuals understand the decision to be made and think about what they want to do
- Answering questions and providing information in a format that works for them, such as visual or audio
- Working with a team of their choosing such as a Circle of Support
- Supporting their decision
- Helping them communicate their decision

In addition to a support team, our members enrolled in ECF CHOICES are eligible for decision-making supports. This service provides up to \$500 for a one-time consultation, education and helping family caregivers understand legal, financial and other decision-making supports.



In 2016, Tennessee's Council on Developmental Disabilities began collaborating with The Arc TN and Disability Rights TN on supported decision-making supports. Thanks to this collaboration, vast training and resources are now available to members across the state.

Supported decision-making may be used for big decisions, like health care and employment, or smaller decisions like choosing clothing or meals. Regardless of the decision, supported decision-making empowers those you support with the information needed to make choices.

To learn more about supported decision-making, review the information at these links:

- [Home | Tennessee Center for Decision-Making Support \(tndecisionmaking.org\)](https://tndecisionmaking.org)
- [Supported Decision-Making Gives People with Disabilities a Voice \(supporteddecisions.org\)](https://supporteddecisions.org)
- [Supported Decision Making \(SDM\) - Disability Rights \(disabilityrightstn.org\)](https://disabilityrightstn.org)

Review Amendment 19 Changes

Amendment 19, which took effect July 1, 2024, includes program changes and eligibility requirements for CHOICES, 1915(c) waiver benefits, Employment services and additional background checks for direct support professionals (DSPs).

Effective July 1:

- Attendant Care has been removed from eligible CHOICES services. Personal Care has replaced it.
- CHOICES members enrolled in Group 2 or 3 may be eligible for ongoing employment services.
- New policies and registry changes, including additional background checks, are required for all workers including volunteers.



What This Means for You

Providers should have policies in place to:

- Provide and document initial (within 30 days of hiring) and ongoing education/training for employees on cultural competency.
- Send any discrimination complaints about TennCare services or activities within two days of receipt to TennCare's Office of Civil Rights Compliance (OCRC) by emailing HCFA.Fairtment@tn.gov.
- Conduct criminal background checks on all prospective employees (and monthly after hiring) who will deliver CHOICES Home and Community-Based Services.
- Conduct an individualized assessment for workers whose criminal background, registry or exclusion check reveals past criminal conduct. The policy must include a plan to address exception requests for workers who fail a criminal background check, registry or exclusion check.

Additionally, providers and their staff must pass criminal background checks as required by TennCare for the ECF CHOICES program. Providers can't be listed on the Tennessee Department of Health Abuse Registry or Tennessee Sexual Offender Registry.

We'll continue to support our providers throughout the process with training and by answering any questions that may arise. If you have questions, please:

- Email your question to CHOICESProviderRelations@bcbst.com
- Include in the subject line "Questions About 07/01/2024 Updates – [Your Business Name] – [Your BlueCare Provider ID]"
- Ask your question in the body of the email

Updated Rates Effective July 1, 2024

We've received updated Nursing Facility and HCBS rates for dates of service on or after July 1, 2024. This update applies to CHOICES, Employment and Community First (ECF) CHOICES and Katie Beckett.

We're currently working on system updates. Once those activities are complete and tested for accuracy, we'll review all claims to ensure the appropriate reimbursement has been applied. This process will happen automatically, and corrected claims won't be required.

Non-Reportable Staff Misconduct Events

Please note: The information shown below is a memo from the Division of TennCare.

As stakeholders in the provision of quality services to our beneficiaries, TennCare, DDA, and the Managed Care Organizations (MCOs) share a common interest in ensuring the highest standards of care.

However, DDA has observed an increasing number of complaints regarding MCOs' requests for information on non-reportable events related to Staff Misconduct. While it is crucial to maintain oversight and quality assurance measures, it has become apparent that this process may be overly burdensome for providers.

To streamline processes and prevent duplication of efforts, we are halting requests for information on every non-reportable event involving Staff Misconduct. Instead, we will rely on existing mechanisms, such as the Provider Reportable Event Review Team (PRERT) meetings, to address quality concerns comprehensively.

Specifically, the DDA Quality Assurance team conducts thorough Quality Provider Reviews for every provider, which include reviewing PRERT minutes to ensure that non-reportable events, such as Staff Misconduct, are addressed by the provider. We believe that this established process adequately addresses non-reportable events without placing undue burden on providers.

Moving forward, DDA and TennCare will communicate with MCOs when specific follow-up actions are deemed necessary regarding non-reportable events involving Staff Misconduct for certain providers who begin to experience systemic quality issues, as identified through the Reportable Event Management (REM) system.

Should you have any questions or concerns regarding this, please do not hesitate to reach out to DDA at DIDD.ReportableEvents@tn.gov.

Reportable Event Management Reminder

Reportable Medical Events are events occurring during the delivery of services, outside of a diagnosed chronic condition, **which requires treatment in an ER or urgent care facility.**

Reportable Medical Events, ER and urgent care facility visits shouldn't be reported to DDA or BlueCare Tennessee **unless treatment is provided.**

Community Transportation

Community transportation is non-medical transportation intended to help members access employment, community life, activities and other resources. It should only be used when public or other no-cost community-based transportation services aren't available, and the member doesn't have access to transportation through other means.

There are two service models:

Formal Provider

Community Transportation:

- Available for Groups 2 and 3
- Service rate is \$7.50 per day (up to \$225 per month)
- Member must have hands-on care before and/or after being transported

Stand-Alone Community Transportation (SACT)*:

- Available for Groups 2 and 3
- Not available for members receiving Community Living Supports (CLS) level 2 or 3
- Service rate is \$18 per unit (one-way trip)
- Wheelchair accessible rate is \$22 per unit (one-way trip)

Consumer Direction

Community Transportation:

- Using readily available community services

*SACT is limited to a combined maximum of 12 one-way trips per week per member and must meet these guidelines:

- No more than two one-way trips per day
- No more than 12 one-way trips per week for employment
- No more than six one-way trips per week for integrated community activities other than employment

Note: Members should get a maximum of two one-way trips per day and a combined maximum of 12 one-way trips per week.

Pest Control Providers: CHOICES Members Need You!

Grow your business by serving CHOICES members. These members are in desperate need of pest control services across all 95 counties in Tennessee. Helping provide a clean, safe environment for those who are aging or disabled is crucial to their health.

If you're interested in becoming a CHOICES Pest Control provider, please review the requirements below:

- Licensure
- General liability and/or malpractice insurance
- Medicaid number
- Tax ID number
- NPI number (if applicable)
- CHOICES provider application

If you're an existing Pest Control provider interested in expanding your service area to additional counties, please contact your Provider Network Manager.

Automobile Insurance Requirements

Effective July 1, 2024, CHOICES providers are required to have automobile insurance if they're expected to transport a member as a component of service delivery (including owned, leased, hired and non-owned vehicles). The insurance coverage must include bodily injury/property damage with combined single limits of at least \$1,000,000 for the following CHOICES services:

- Personal care
- Community living supports
- Community transportation
- Community living supports – family model
- Individual employment support services

If you have questions, please email us at CHOICESProviderRelations@bcbst.com.

Retention Strategies for Direct Care Staff

According to the 2022 Tennessee LTSS Workforce Quality Improvement Survey, the overall turnover rate for provider agencies reached a staggering 61%. The majority of turnover occurred within the first six months of employment.

Turnover in 132 organizations

overall turnover **61%**



Of those who left:

61% early turnover, left within first 6 months of hire

28% left within 6-12 months of hire

Top Reasons for Departure

66% no call / no show

54% found another job at another company

38% pay too low, needed better pay

Rather than constantly filling positions left vacant by departing employees, we encourage providers to shift their focus toward retention. After all, retaining talent is the best form of recruiting.

While high turnover is a widespread issue in the industry, there are agencies with low turnover rates. These encouraging stories are a reminder that retaining staff in this field isn't impossible. There's no one-size-fits-all solution, but making your employees feel valued will always lead to success.

Below are some best practices we recommend to support employee retention:

- **Know and recognize employees** – Direct Support Professionals (DSPs) and caregivers by nature are likely to be relationship-oriented. Take the time to get to know them and acknowledge their unique contributions to your organization.
- **Touchpoints** – Regularly conduct touchpoints with long-term employees. Listen to their feedback and respond accordingly.
- **Growth opportunities and career advancement** – Encourage professional development for your employees. Offer pathways for career growth and educational support aligned with your employees' long-term goals. Employees who see a future in the organization and feel empowered to pursue their goals are more likely to stay. (Consider the NADSP E-Badging Certification program.)
- **Effective management** – People don't quit jobs; they quit managers. Invest in training your frontline supervisors and equip them with the skills needed to support and motivate their teams.
- **Mentorship programs** – Pair new hires with experienced employees. Mentorship programs provide guidance, boost confidence and help newcomers integrate seamlessly into the organization.
- **Client-specific training and matching** – Use meet-and-greets to thoughtfully match employees with clients and invest time in client-specific training. A well-matched client-employee relationship contributes to job satisfaction and quality care.
- **Competitive pay and benefits** – Provide competitive compensation and benefits when possible. Consider rewarding loyalty by offering pay increases for milestone service anniversaries.

We recommend building a six-month retention plan outlining actions you plan to take to support employee engagement. If you need help building a retention plan for your agency, contact our Workforce Development team.



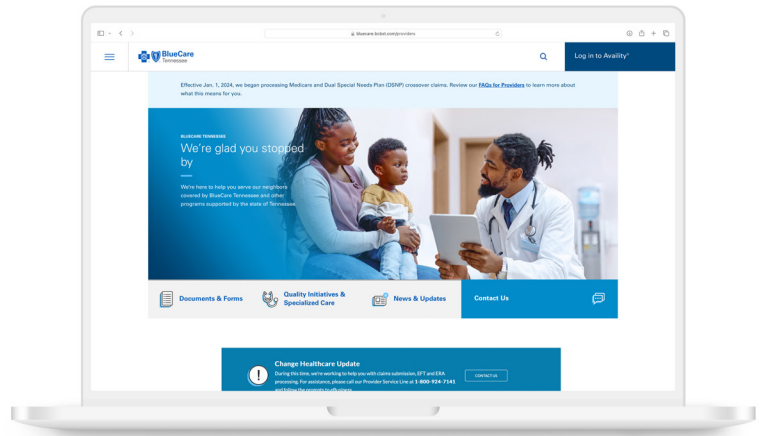
Exciting Updates to Our Provider Website

We're proud to announce we've redesigned our BlueCare Tennessee provider website. Our goal was to improve your experience by:

- Simplifying site navigation for quicker access to the resources you need most
- Organizing critical information, including TennCare-mandated guidelines, forms, policies and more
- Removing outdated information

Everything you need – all in one place.

To view the new site, you can still use the same URL – bluecare.bcbst.com/providers. We hope these updates make it easier to find the tools and resources you need to take care of our members.



Committed to Service

As your partner in serving our CHOICES and ECF CHOICES members, we're committed to providing you unmatched service and support. Stay current with the most current news and program guidance. Visit us at bluecare.bcbst.com to find resources, updates and the most recent version of the CHOICES newsletter.

How Are We Doing?

As a valued BlueCare Tennessee provider, we welcome your feedback and want to hear from you. If you have questions and/or concerns about a process, or if there's an individual that you'd like to point out for good service, please email us at: CHOICESProviderRelations@bcbst.com. We look forward to hearing from you.

Provider Network Manager and Workforce Development Contacts

| Manager | Region | Phone | Email |
|---|-----------|----------------|--|
| Britney Douglas, Provider Relations Supervisor | Statewide | (615) 427-3782 | britney_douglas@bcbst.com |
| Phyllis White, Director, MLTSS | Middle | (615) 295-9680 | phyllis_white@bcbst.com |
| Recie Gunartt, Provider Network Manager | West | (901) 201-7786 | recie_gunartt@bcbst.com |
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| Christian Ceccotti, Workforce Development Manager | Statewide | (423) 290-9284 | christian_ceccotti@bcbst.com |
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| Kylie Hennie, Workforce Development Specialist | Middle | (615) 924-3424 | kylie_hennie@bcbst.com |
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| Corey Vance, Claims Liaison | East | (615) 761-8732 | corey_vance@bcbst.com |
| Nichole Phillips-Brock, Employment Services & Supports Specialist | Statewide | (615) 651-9076 | nichole_phillips@bcbst.com |
| Aimee Rogers, Employment Services & Supports Specialist | Statewide | (423) 362-2562 | aimee_rogers@bcbst.com |
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| Evy Boyer, Housing and Transition Manager | Statewide | (615) 218-2642 | evelyn_boyer@bcbst.com |

Where to Turn for Help

| Your Service Need | Operational Area | Contact |
|---|---|---|
| Eligibility Services, Claims, Inquiries | BlueCare Provider Services/ Eligibility Service Line | 1-888-747-8955 |
| General Contracting/ Credentialing Questions | Provider Network Services/ Credentialing | 1-800-924-7141, ext. 5775 (Provider Network Services) 1-800-357-0395 (Credentialing) |
| Member Related Questions/Supports, Member Emergencies (After Hours/Weekends Only) During Regular Hours Contact Coordinator Directly | Support/Care Coordination | 1-800-262-2873 |
| Sandata/EVV Tech Support | Sandata Client Relations (EVV) | 1-855-389-4843 |
| Availity Claim Submission Tech Support | Availity | 1-800-282-4548 |
| CHOICES Web Portal Claims Tech Support | e-Business | (423) 535-5717, select option 2 |
| Provider Education, General Provider Support, Assistance with Contracting/Credentialing | CHOICES/ECF Provider Relations | CHOICESProviderRelations@bcbst.com |
| Authorizations Support, General Billing – Release of Units | Provider Inquiry Specialist Team | ProviderAuthIssues@bcbst.com OR call 1-888-747-8955, select option 2 |
| Change of Ownership Notifications, Questions/Concerns | Provider Relations | Provider_CHOW@bcbst.com |
| GPS Tablet Replacement, Tablet Exceptions | Provider Specialist Team | CHOICES_EVV_Device@bcbst.com |