

Provider Requalification for Cycle 1 Year 3 ODP Announcement 20-083

AUDIENCE:

Administrative Entities (AEs), Providers of Consolidated, Community Living and Person/Family Directed Support (P/FDS) Waiver services including direct vendors, Agency with Choice (AWC) providers, Organized Health Care Delivery Systems, and Supports Coordination Organizations (SCO).

PURPOSE:

The purpose of this communication is to announce the requalification process for Cycle 1 Year 3. Below is an updated timeline to meet the extension based on the onset of the COVID-19 pandemic and the Governor's subsequent Proclamation of Disaster Emergency.

NOTE: Please reference ODP Announcement 20-026: Provider Requalification Deadline

Extension of for Cycle 1 Year 3 and ODP Communication Number: 20-007:

Provider Qualification Process

DISCUSSION:

REQUALIFICATION

The requalification process will follow ODP communication 20-007, but the due date and expiration date will be 8/31/2020 and 10/31/2020 respectively.

Requalification for New Provider

Following the provider's initial qualification date, all providers classified as **New** are normally to be requalified by the end of the following fiscal year as designated on <u>the DP 1059</u>. For example, if a **New** provider's first **Qualification Begin Date** in HCSIS is 01/20/2019, the provider must be requalified by 06/30/2020, which is the end of the following fiscal year. The **New** provider status is updated from New to Existing after the provider is requalified for the first time. Under the new extension guidelines, the 06/30/2020 date will be extended to 10/31/2020.

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Existing Provider Requalification Cycle

Existing providers whose last digit of MPI ends in 6-9 are scheduled for requalification.

For example: An Existing provider with an MPI number of 22345678**7**, normally must be requalified by the end of that fiscal year, 06/30/2020 but that date has now moved to **10/31/2020**.

By 9/1/2020, sixty days prior to the provider's qualification 10/31/2020 end date, the Qualification Status will change to **EXPIRING**. If the provider is not requalified by the end of 10/31/2020, the Qualification Status will change to **EXPIRED**.

Providers must submit the qualification documentation (Posted on MYODP -<u>DP 1059</u> and the Provider Qualification Documentation Record with all required supporting documentation) by 7/31/2020. Failure to meet this deadline will affect the assigned AE's ability to designate the provider as "qualified" in HCSIS by the "Due Date" of 8/31/2020.

Upon receipt of a provider's qualification documentation, the assigned AE will review all materials and determine if qualification standards are met. If the provider fails to include all the required qualification documentation in their submission, the assigned AE will notify the provider by email of the missing elements within 10 business days of receipt. If the provider has met all required qualification standards as evident by the documentation submitted, the assigned AE will mark the provider as "Qualified" in the HCSIS Qualification Status Screen. Please refer to **APPENDIX A in ODP communication 20-007** for specific instructions related to AE completion of the requalification process in HCSIS. The assigned AE will sign the DP 1059 form and email the completed form to the provider within 30 days of the provider's submission.

Providers who are not marked as "qualified" by their assigned AE in HCSIS by 8/31/2020 will be automatically designated as "EXPIRING" on 9/1/2020. If the provider has not been requalified by the assigned AE in HCSIS by 10/31/2020, the provider's 'EXPIRING' status will change to 'EXPIRED' on 11/1/2020 and the provider will no longer be qualified to provide services or be paid for services provided on 11/1/2020 and after.

During a provider's requalification year, from 7/1/2020 through 8/31/2020, the assigned AE will change the service specialty status from 'Qualified' or 'Expiring' to 'Not Requalified' if the provider no longer meets ODP's qualification requirements or is no longer interested in maintaining a qualification status for that service specialty.

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UPDATED REQUALIFICATION TIMELINES

The chart on the following three pages summarizes the requalification process and timelines

TIMELINE	ACTIVITY
JULY 1 TO JULY 31	This date range is the timeframe providers/vendors must submit their <u>DP</u> 1059, <u>Provider Qualification Documentation Record</u> and supporting documentation to the assigned AE.
AUGUST 1	Assigned AEs will send warning e-mails to providers/vendors who have not submitted their DP 1059 and supporting documentation. See APPENDIX B in ODP communication 20-007 to view the notification titled "Reminder to Provider - AE Warning" e-mail
AUGUST 31, **DUE DATE**	Providers/vendors who have not submitted their documentation by August 31 will be considered out of compliance with ODP waiver and regulation requirements
SEPTEMEBER 1	ODP will identify providers/vendors not requalified by this date by reviewing the "PQ Status Report" in HCSIS. If the provider/vendor has not been marked "Qualified" or "Not Requalified" in HCSIS by August 31, then on September 1, the qualification status of those specialties that have not been marked for the provider/vendor will automatically change to "Expiring." The AE can still mark a provider/vendor as "Qualified" in HCSIS until October 31, if the provider submits their qualification documentation.

TIMELINE	ACTIVITY
SEPTEMBER 1 TO SEPTMEBER 16	The assigned AE will send a "failure to comply" notification to providers/vendors who have been determined to be out of compliance. The notification will inform providers/vendors that SCOs will begin transition planning activities for an alternate provider/vendor in order to meet the assessed needs of the participant. See APPENDIX C in ODP communication 20-007 to view the standard notification letter titled "Assigned AE Failure to Comply Notification letter to Provider"
	ODP will notify all AEs, through email, that have authorizations with providers/vendors who have been determined to be out of compliance. The notification will instruct authorizing AEs to communicate with SCOs that they should begin transition planning activities for an alternate provider/vendor in order to meet the assessed needs of the participant. See APPENDIX D in ODP communication 20-007 titled "Notification e- mail to ALL Authorizing AE(s) with attached authorizations" The authorizing AE then must notify the SCOs who have individuals
	receiving services by sending notification <u>APPENDIX E in ODP</u> <u>communication 20-007</u> titled "Notice from Authorizing AE to SCO with attached authorization," instructing SCOs to begin transition planning activities. For family and individuals effected by the transition, ODP developed talking points for SCs. See <u>APPENDIX F in ODP communication 20-007</u> titled "Choosing an alternate provider – talking points for SC"
SEPTEMBER 16 TO OCTOBER 31	 SCs will begin transition planning activities with waiver participants, families and Individual Support Plan (ISP) teams for all waiver providers who have not submitted their qualification materials by July 31. AEs should notify ODP of any providers whose supporting documentation is not acceptable in order to determine next steps. The intent of the transition planning activities is for SCs to offer participants and families choice about alternate willing and qualified provider(s). Providers/Vendors that are out of compliance with provider qualification requirements may still qualify during this timeframe; however, there is no guarantee the existing provider/vendor will continue service delivery to the participant because he or she may select a new willing and qualified provider to render services. If, during planning activities, the waiver participant chooses to begin service with an alternate willing and qualified provider prior to

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TIMELINE	ACTIVITY
	November 1, then service authorizations for the current provider will be end-dated accordingly in the ISPs in HCSIS. When an individual chooses to transition to another provider, the current provider must participate in transitioning activities as per Chapter 6100.302 . If the provider remains in a status other than "Qualified" through October 31, a contract will not be created in HCSIS for the upcoming fiscal year (FY). If a contract is not created in HCSIS, the services the provider intended to provide in the new FY will not be available in HCSIS to authorize on ISPs.
OCTOBER 31	Providers/vendors who are not "Qualified" by October 31, will be
EXPIRATION DATE	considered out of compliance regarding ODP requalification standards.
	Effective November 1, the following actions will occur:
NOVEMBER 1	 ODP will confirm which providers/vendors are in "Expired" status in HCSIS. ODP, in conjunction with AEs, will review all providers in "Expired" status to determine steps to resolve any outstanding issues. Service authorizations will not be carried forward to the new fiscal year in ISPs. Both the provider's/vendor's service offerings in HCSIS and PROMISe™ enrollment(s) will be end dated October 31 by ODP. When this action occurs, the provider/vendor will no longer be able to receive payment for services rendered to participants enrolled in the waivers.