



Written Testimony in Support of LD 415:

*Resolve Directing the Department of Health and Human Services To Increase
MaineCare Reimbursement Rates for Targeted Case Management Services To
Reflect Inflation*

April 15, 2021

Good afternoon, Senator Claxton, Representative Meyer, and members of the Health and Human Services Committee. My name is Bridget McCabe, Assistant Associate Director/Community Case Management Supervisor working at GMS, Group Main Stream, in Westbrook. I appreciate the opportunity to present this my testimony to the committee in support of LD 415.

GMS has been providing services to adults with intellectual disabilities and autism for over 40 years. While our targeted area for residential and community services is in the greater Portland area, GMS supports people through shared living and community case management in 14 counties throughout the State. We support approximately 275 people and of that, 103 are supported by six (6) full time community case managers.

Although we are allowed by regulation to support up to 35 people per case manager, due to the expectations of providing quality services, in person visits/team meetings/contacts, assessments, training requirements, and travel time (when not under a pandemic), GMS community case managers carry on average 18-24 cases with target productivity levels set by GMS to meet budgetary requirements based on the established rates. This is during non-pandemic times. This past year presented challenging situations requiring creative solutions to maintain meeting and communicating with people supported and their teams as well as covering services discontinued as a result of the pandemic.

The primary role of case managers at GMS is to identify the medical, social, educational, and other needs, including housing and transportation, of the person with intellectual disability and/or autism and identify the necessary



services to support the person in meeting their needs. This includes facilitating access to the needed services, coordination, advocacy, monitoring, and evaluation.

When I began working in community case management 8 years ago, the expectation was to carry approximately 28 people on the case load and provide 50% productivity; out of a 40-hour work week, 20 hours was to be billable activities and 20 hours for non-billable activities. GMS has adjusted the expectations to 60% billable to 40% non-billable to accommodate status rates while other expense in doing business inflate. GMS struggles to meet this standard and it puts a tremendous strain on case managers and affects the quality of services.

The rate is intended to cover both billable and non-billable activities as defined by the State. The rate for this service has not been increased since 2009. I don't know the last time a rate study was done, certainly prior to 2009. I understand OADS is working to have rate studies done on all services but this service can't wait for a rate study as the rate of reimbursement is not sustainable.

The change from State case management to community, the growing number of people utilizing the service, and the additional needs of people on the waitlist is creating a crisis for case management services. People on the waitlist typically require more case management time as they have no other services.

I am not going to take time to read the non-exhaustive list of billable and non-billable activities required of case managers but have documented it at the end of this document for your consideration.

In a recent hiring effort from GMS to hire a community case manager, we advertised in multiple venues resulting in one (1) qualified applicant whom we hired and is doing well. CCM's have left GMS to get higher paying jobs not necessarily in this field or to go back to school to increase their credentials to get higher paying jobs. This reflects the inadequacy of the rate to include inflation of salaries and benefits compounded by the pandemic where Portland has a minimum wage of \$18 per hour. Direct support staff are being hired at



rates higher than some CCM's are paid. GMS wishes to be responsive to the needs of TCM which are on the rise. I have grave concerns the professional expectations, demands of the job, productivity expectations, and low pay will make this extremely difficult if not impossible to continue providing this service. I have included state requirements on credentials to qualify for a CCM position and the training requirements at hire and annually. (see below)

GMS supports the need to increase reimbursement rates for TCM services as described in this bill to a level commensurate with the current costs of providing this service. Case management is the gateway for all services for adults with intellectual disabilities & autism making it an essential service. Agencies need relief with an increased rate to continue providing case management services. At this time GMS is assessing whether we can continue to provide this service.

Thank you for your consideration and support for this bill. I am happy to answer questions.

Respectfully submitted:

Bridget McCabe

Assistant Associate Director, Community Case Management Supervisor

RESOURCES

Covered (Billable) Services

10-144 DHHS Ch. 101: MaineCare Benefits Manual Ch. II-Section 13: Targeted Case Management Services, [Section 13.02: Covered Services](#)

- ✓ Person Centered Plan, annual and revisions; IST Meetings, team meetings and preparation, facilitation and follow up of any of these meetings
- ✓ (BMS 99) DS Comprehensive HCB Waiver (Section 21)
- ✓ And/Or (BMS 99) DS Support HCB Waiver (Section 29)
- ✓ Psychosocial
- ✓ (V-7) DS Services and Support Assessment
- ✓ Reportable Events and follow up.
- ✓ Taking client history
- ✓ Identifying the needs & completing related documentation
- ✓ Gathering information from other sources
- ✓ Referral & Related Activities to obtain needed services including completing referral forms & documents



- ✓ Scheduling appointments
- ✓ Monitoring and Follow-Up Activities
- ✓ Completion of required forms, i.e., Auth Requests
- ✓ Vendor Calls
- ✓ QA activities i.e., Home Visit Review Tools
- ✓ Actions and contacts on behalf of or with the person, (advocacy) i.e., social security, housing, MeCare, Food Stamps, benefits, etc.
- ✓ Documents and communications received and sent: phone, email, snail mail
- ✓ Contacts: face to face, visits, time with person and communicating on relevant activities

Non-Billable Services

- ✓ Must not duplicate payments made to public agencies or private entities under other program authorities the same service (hospital, jail, nursing facility, rehab facility, assisted living, UNLESS the social worker/case manager at the facility can't carry out an essential activity to obtain services. MeCare contact for Provider Relations, http://www.maine.gov/dhhs/oms/pdfs_doc/resrcs/PRS-Assignment-List.pdf.
- ✓ Transportation to and from visits, up to 1.5 hours one way for GMS * *Taking a person to medical appointments as a last resort that are not covered by NET transportation (dental, community support options so the person has choice, some community support agencies require 1-3 shadow days- CCM is responsible when there is no family support)*
- ✓ No show at Home visit (potentially 2+ hours of non-billable)
- ✓ Representative Payee activities, (support with budgeting and financial planning is covered under planning) *GMS supports 50 people requiring this service, non-billable.*
- ✓ Documentation of notes in EIS & back up system as identified by the agency.
- ✓ Billing process: agency staff are unable to print reports from EIS for billable and non-billable notes requiring communications with OADS staff to provide these reports from EIS.
- ✓ Can only bill after 7.5 minutes; tracking billable services in order to bill.
- ✓ Filing and creating binders
- ✓ Shredding
- ✓ Training:
 - As identified by regulations, see below, **Case Management Training and Orientation Requirements Per 14-197 Chapter 10:** <http://www.maine.gov/sos/cec/rules/14/197/197c010.doc> , **Technical Assistance Guide.**
 - Agency required training including mandatory DOL and OSHA required training
- ✓ Supervision: based on OADS requirements, agency policies, staff meetings, individual and group supervision, LSW requirement, and best practice.
- ✓ Managing required monitoring:
 - PCP/Reclass Spreadsheet
 - 90-day review Spreadsheet/tracking
 - CCM Caseloads Spreadsheet



- Annual Training Tracker
- Reportable Events Tracking and Follow-Up Logs
- Vendor Call/Referral tracking
- ✓ Create & compile PCP planning & annual consents packets
- ✓ Interviews and intake tasks:
 - Monitor Vendor Calls and respond
 - Supervisors and CCM attend interviews together
 - Review applications
 - Compile Intake Packets
 - Verify MaineCare & OADS eligibility (this is non-billable if done prior to transfer)
 - Create Individual binder and electronic record
 - Complete initial forms/intake releases
 - Complete GMS Emergency Face Sheet
 - Update CCM Spreadsheets
- ✓ Quality Assurance
 - PCP review
 - Authorization requests
 - Section 29 applications
 - Section 21 applications
 - Enhanced medical add on packets
 - Assistive Technology Requests
 - Check 90 day review
 - Family support fund request
 - BMS-99 (support and comprehensive assessment)
 - Respond to QA Compliance Reports, including preparing missing documents/etc for CCM completion/follow-up and/or sending documents to guardians for signature
 - Complete 30-day follow-up to compliance reports to ensure completion (currently called the Supervisor F/U)
 - QA daily notes/assessments in EIS (cross checks for billing & regulatory)
 - Review files, paper, electronic, EIS
- ✓ Financial
 - Prepare weekly/monthly billing data
 - Obtain monthly reports from OADS (billable units, notes) in order to bill
- ✓ Complete filing & archiving of Individual records
- ✓ Rep Payee
 - Complete Rep Payee applications
 - Coordinate opening & closing of accounts w/Finance Dept.



- Complete annual accounting reports for SSA
- ✓ Represent GMS at marketing events/vendor fairs
- ✓ Legislative/committee/advocacy work
- ✓ State webinars/ meetings:
 - New Evergreen monthly webinars
 - New HCBS requirements including verification of home study sent by agencies on 11/30/19 and related training
 - Deaf quarterly meetings
 - Crisis/ IST webinar
 - ICD code webinar
 - DHHS supervisors meeting (some agencies may attend more than one region)
 - Logisticare updates/ changes/ town hall meetings
 - Transition meetings/ webinar/ updates
 - CHOM (monthly)
- ✓ 3-person committee meetings (can bill 15 minutes) but waiting in lobby for 30-60 minutes
- ✓ Communication with DHHS for requests/ questions
- ✓ General updates to funding avenues
- ✓ Reading- stay updated
 - Mainecare funding section 29/21/18/20/28/19/96/97/65/60/Katie Beckett
 - PCP Manuel
 - Social security
 - Medicare
- ✓ Update EIS for demographics including emergency contacts
- ✓ Keep files in order
- ✓ Mainecare audits
- ✓ OADS review & Certification
- ✓ Talking with the clinical team to justify units/ authorization/Crisis Hours
- ✓ QA by CM and CM Supervisor or clinical team
- ✓ Miscellaneous administrative tasks not covered above
- ✓ Community case managers are regulated by multiple rules and regulations which do not always support each other: Section 13 of the MaineCare Benefits Manual, Chapter II, Targeted Case Management Services for Adults with Intellectual Disabilities and Autism 14-197 Chapter 10, and the Office of Aging and Disability Services, Community Case Management Manual. In addition to regulations, the Office of Aging and Disability Services sends out frequent changes in directions in how they want activities documented, provided, requested, and implemented. Keeping up with the routine changes and complexity of systems is a challenge all of which is non billable.



TCM Credentials and training requirements:

Certification Requirements for Agencies Seeking to Provide Community Based Targeted Case Management for Adults with Mental Retardation and Autism, 14-197 Chapter 10, p. 18:

2. Minimum Standards. The following minimum standards shall apply to all staff providing case management.
 - a. A case manager must have a minimum of a bachelor's degree from an accredited four (4) year institution of higher learning with a specialization in psychology, behavioral health, social work, special education, counseling, rehabilitation, nursing, or a closely related field and one (1) year experience in one of the areas listed above.
 - b. A supervisor of case management or a regional supervisor must have a baccalaureate degree plus a minimum of four (4) years experience in the mental retardation or autism field. The supervisor must also have experience supervising staff providing services to persons with mental retardation and/or autism, knowledge of the public education system in Maine, and training in flexible funding and family-focused service provision.

OADS Training Requirements:

Case Management Training and Orientation Requirements

Per 14-197 Chapter 10: <http://www.maine.gov/sos/cec/rules/14/197/197c010.doc>

Technical Assistance Guide

11/9/2018

Records of Training:

V. E. 4 Records of Completion of Orientation and Training: The agency shall maintain written, accessible documentation that orientation and ongoing training have been completed. The documentation shall include, at minimum, curriculum, names and credentials of persons providing orientation or training, dates orientation or training was provided, the length of time of each orientation or training session, and the dated signature of the trainee acknowledging receipt of the orientation or training.

Training Requirements:

V. E. 2 Orientation: Employees **shall not be assigned to duties requiring direct involvement with persons receiving services** until the following elements of orientation and training have been completed and documented:



Required Training Areas:	Required OADS Training	Optional Training	In-Service Resources
<u>All elements of the position specific orientation</u>			Job Description Case Manager/Supervisor Requirements per 14-197 Chapter 10 MaineCare Benefits Manual: Section 13 rule Case Management Manual
<u>Reporting of Abuse, Neglect and Exploitation</u> <u>Consequences for Failure to Report</u>	1.Reportable Events Training: Online Reportable Events Training Or: Maine College of Direct Support: Reportable Events or Renewal (Included in DSP Certification. If taken prior to 6/2018, must be repeated) 1 Online Lesson Or: SETU: Developmental Services Rights, Behavior Regulations, and Reportable Events (If taken prior to 6/2018, would need to be retaken) AND 2.Mandated Reporter Training: Mandated Reporter Training Or: Maine College of Direct Support: APS Module (If DSP prior to 3/2018, must take this additional module. If DSP obtained after 3/2018, this module included) 1 Online Lesson Or SETU: Adult Protective Services	Maine College of Direct Support: Maltreatment (Included in DSP certification) 11 Online Lessons or 1 Live Classroom Session (Reportable Events Training is included in Maltreatment Module)	Recognizing Abuse, Neglect and Exploitation Reportable Events Rule Reportable Event Insert
<u>Safety and Emergency Procedures</u>		Maine College of Direct Support: Safety (Included in DSP Certification) 14 online lessons Or Maine College of Direct Support: Emergency Preparedness (Additional Content in CDS, not part of the DSP Curriculum) 5 online lessons	Agency Emergency Management Plan Agency Safety Policies/ Procedures Emergency Preparedness Curriculum Emergency Checklist
Required Training Areas:	Required OADS Training	Optional Training	In-Service Resources
<u>Individual Rights</u>		SETU: Developmental Services Rights, Behavior Regulations, and Reportable Events Or SETU: Grievance Training Or	Rights Rules: Title, 34B, § 5605 Plain Language Rights Agency Rights Policy Grievance Process Grievance Rules Grievance Insert

		Maine College of Direct Support: Individual Rights and Choice (Included in DSP Certification) 3 Online Lessons or 1 Live Classroom Session	Disability Rights Maine
<u>Privacy and Confidentiality</u>		Maine College of Direct Support: Maine DSP Professionalism: 1 Online Lesson: Practicing Confidentiality (Included in DSP Certification) Or Maine College of Direct Support: HIPAA (Additional Content in CDS, not part of the DSP Curriculum) 3 Online Lessons	

V. E. 1 Training and Orientation: The agency shall provide to **all new employees orientation (within 60 calendar days of hire)** relevant to the organization as a whole and training that relates directly to the provision of case management services for adults with mental retardation and autism. The content of training shall be subject to the review and approval of the Department. This orientation shall include, but not necessarily be limited to:

Required Training Areas:	Required OADS Training	Optional Training	In-Service Resources
Overview of Service Delivery System	OADS Orientation (One Day)		1. Social Security/ MaineCare 2. Section 21/29 Waiver Funding 3. Employment/Career Planning
<u>Agency Mission, Philosophy and Related Services</u>	N/A	N/A	Agency In-Service
<u>Overview of Developmental Theory and Introduction to Intellectual Disabilities and Autism</u>		Maine College of Direct Support: Introduction to Developmental Disabilities (Included in DSP Certification). 4 Online Lessons or 1 Live Classroom Session	
<u>Overview of Abuse and Trauma Informed Services</u>		Trauma Informed Care for Individuals with IDD Thrive	
<u>Cultural Competence/ Diversity Training Including Age, Gender, Race, Religion, Culture and Sexual Orientation</u>		Maine College of Direct Support: Cultural Competence (Included in DSP Certification). 2 Online Lessons or 1 Live Classroom Session	
<u>Supervisory Chain of Command (CCM)</u>	N/A	N/A	Agency In-Service
Required Training Areas:	Required OADS Training	Optional Training	In-Service Resources
<u>Specialized Communication and Intervention</u>		Specialized Communication for Case Managers: Part 1: Talking with People who have Intellectual Disability	Assistive Technology- Case Management Manual (pgs. 34-35) Section 21.05-1 Assistive Technology (pgs. 16-17)

		Part 1 Knowledge Check (for Certificate) Part 2: Getting Hearing and Communication Services for Clients Part 2 Knowledge Check (for Certificate) SETU-Visual Gestural Communication Maine College of Direct Support: Communication (Included in DSP Certification) 1 Live Classroom Session	
<u>Assessments, Evaluations, Maintenance of Electronic Records in EIS</u>		EIS 101 Training (contact your CCM Liaison to schedule)	OADS EIS Instructions Page OADS EIS PCP Assessment User Manual
<u>Person Centered Planning (PCP), Service Delivery:</u>	SETU: Person Centered Planning: An Overview Or PCP Implementation and Documentation (contact your CCM Liaison to schedule)		Maine's Person Centered Planning Process: Instruction Manual U.S. Code of Federal Regulations: <i>Person Centered Service Plan</i> : 42 CFR 441.725 Maine Revised Statutes: <i>Personal Planning</i> : Title 34-B §5470-B
<u>Progress Note Documentation</u>	OADS Action Note Training Knowledge Check (for Certificate)		
<u>Professional Boundaries</u>		Maine College of Direct Support: Professionalism (Included in DSP Certification) 1 Live Classroom Session	Agency In-Service

V. E. 3 (c): Ongoing training and education: The agency shall develop and implement policies and procedures to provide **annual in-service or external training** that includes:

Required Training Areas:	Required OADS Training	Optional Training	In-Service Resources
<u>Reporting of Abuse, Neglect and Exploitation</u> <u>Consequences for Failure to Report</u>	1.Reportable Events Training: SETU: Developmental Services Rights, Behavior Regulations, and Reportable Events (If taken prior to 6/2018, would need to be retaken) Or: Maine College of Direct Support: Reportable Events or Renewal (Included in DSP Certification. If taken prior to 6/2018, must be repeated) 1 Online Lesson Or: Online Reportable Events Training	Maine College of Direct Support: Maltreatment (Included in DSP Certification) 11 Online Lessons or 1 Live Classroom Session (CDS Reportable Events Training is included in this Maltreatment Module)	Recognizing Abuse, Neglect and Exploitation Reportable Events Rule Reportable Event Insert
<u>Reporting of Abuse, Neglect</u>	<p style="text-align: center;">AND</p> 2.Mandated Reporter Training: Mandated Reporter Training Or: Maine College of Direct Support:		



<u>and Exploitation</u> <u>Consequences for Failure to</u> <u>Report- Continued</u>	APS Module (If DSP prior to 3/2018, must take this additional module. If DSP obtained after 3/2018, this module included) 1 Online Lesson Or SETU: Adult Protective Services		
Required Training Areas:	Required OADS Training	Optional Training	In-Service Resources
<u>Diversity Education/</u> <u>Cultural Competence</u>		Maine College of Direct Support: Cultural Competence (Included in DSP Certification). 2 Online Lessons <u>or</u> 1 Live Classroom Session	
<u>Ethics</u>		Maine College of Direct Support: Professionalism (Included in DSP Certification) 1 Online Lesson- Applying Ethics in Everyday Work	Social Work Code of Ethics
<u>Confidentiality</u>		Maine College of Direct Support: Professionalism (Included in DSP Certification). 1 Online Lesson- Practicing Confidentiality Maine College of Direct Support: HIPAA (Additional Content in CDS, NOT part of the DSP Curriculum) 3 Online Lessons	
<u>Job Specific Competencies</u>		Any other Trainings related to Case Manager competencies: SETU: Waiver 101 Benefits Navigator Training Employment/Career Planning Training SETU: Developmental Services Rights, Behavior Regulations, and Reportable Events	
<u>Documentation and Record</u> <u>Keeping:</u> Assessments/ Evaluations, Person Centered Planning, Progress Notes, Maintenance of Electronic Records in EIS		OADS Action Note Training Knowledge Check (for Certificate) EIS 101 Training PCP Implementation and Documentation (CCM Liaison training)	Maine's Person Centered Planning Process: Instruction Manual OADS EIS Instructions Page OADS EIS PCP Assessment User Manual

Key: Trainings areas noted in **red** must be met by attending the specified OADS sponsored training.