

## **FMSA Quarterly Questions & Answers**

### **From May 23, 2023**

#### **CDS**

**Q1: What action does the FMSA take when the LIDDA does not provide a breakdown of ISS on-site and off-site hours for the client's LON? This data is needed for the TxHmL CDS budget.**

A1: The FMSA should contact the LIDDA to request this information. If LIDDA staff are contacted by the program provider or FMSA to inquire about an IPC form submission or form correction, LIDDA staff are expected to respond within two business days. If LIDDA staff do not respond or if no action is taken, the program provider or FMSA may file a complaint with the IDD Ombudsman by calling 800-252-8154 between 8 a.m. and 5 p.m. Monday through Friday. A complaint may also be emailed to [OmbudsmanIDD@hhs.texas.gov](mailto:OmbudsmanIDD@hhs.texas.gov).

LIDDAs, program providers, and FMSAs must comply with [Section 16200, General Complaint Information](#) in the HCS Handbook to resolve issues between LIDDA staff, program provider staff or FMSA staff.

#### **EVV**

**Q1: When EVV moves will validations be done in TMHP or HHAeXchange?**

A1: On April 26, 2022, HHSC posted a solicitation for EVV System Management Services. Through a competitive selection process, HHSC has selected Accenture State Healthcare Services LLC for this contract. Accenture will continue to be known as Texas Medicaid & Healthcare Partnership (TMHP) for this contract. Accenture is partnering with HHAeXchange (HHAX) to provide a new, single EVV vendor system.

TMHP's responsibilities will include coordinating EVV system integration with the EVV Aggregator for validation. Validations will be completed by the EVV

Aggregator. The process will be unchanged. It will continue to work in the same way as it does in today's environment.

**Q2: Will you discuss the EVV software change?**

A2: A GovDelivery notice was posted on 5/1/23 discussing the contract awarded to Accenture and HHAExchange. Within that notice is a pdf document that explains the vendor transition which can be found at this link [EVV Vendor Transition Overview \(PDF\)](#).

## CAPM

**Q1: Does notification of over/under utilization on the Quarterly Budget reports suffice or does additional notification to the CM/SC need to happen?**

A1: Over- or under-utilization is not always caught at the time of the most current Quarterly Budget report. It may require additional notification outside of the regularly scheduled Quarterly Budget reports. Whenever the FMSA notices an over- or under-utilization of services or funds, the FMSA should notify the case manager or service coordinator even if it is outside of the scheduled time frame that the FMSA is required to send the Quarterly Budget report. The notice of over- or under-utilization should be reported to the case manager or service coordinator as soon as possible to avoid service delivery disruption or funding issues during the individual's plan of care (IPC) effective period, especially if the notification is for over-utilization.

**Q2: Slide 37--terminate employER if employEE is convicted? or typo?**

A2: Thank you for bringing this typo to our attention. For clarification, TAC §41.225(i) states "An employer or DR must immediately **terminate an employee** if an updated criminal history report indicates that the employee has been convicted of an offense included in Texas Health and Safety Code (THSC), §250.006(a), or the employee has been convicted of an offense included in THSC, 250.006(b) within the previous five years."

**Q3: We have been having a ton of issues with IPCs in MESAV for TxHmL and HCS. We are often directed to reach out to Provider Claims Services (PCS) to help resolve something. I was wondering if there is an email address for Provider Claims Services. It is much easier to relay information via email than it is over the phone.**

A3: No, there is not an email for this purpose. When contacted by phone, the PCS agent is able to research a case and request additional information if needed in real time.

**Q4: What is the update to fix ISS bill code H2038 mod KX or ER? (Vendor ISS for FMSAs). It is hours for units at the rate of \$1.00. We cannot bill dollars so we cannot bill.**

A4: Issues with HCSPC code H2038 for Individual Skills and Socialization (ISS) under CDS, billed as code 23V, were resolved in May 2023. FMSAs were initially only allowed to bill in hourly increments; however, FMSAs should now be able to bill in exact dollar amounts. If an FMSA is not able to bill individualized skills and socialization under CDS in dollars, the FMSA should contact TMHP 1/800-626-4117 Option 1 for billing/claims issues.

**Q5: On [\[Form\] 3617](#), when a client is transferring ONLY program providers (not FMSAs), is there any action needed from the FMSA? Do we have to fill out page 3 or 4?**

A5: There is no action needed by the FMSA. Pages 3 and 4 of Form 3617 do not need to be completed.

## **ODSC/Direct Service Workforce**

**Q1: For Lonnie... what type of public advertising is HHSC doing to promote the direct care careers (DCC) resource? How will the public be made aware?**

A1: HHSC has sent out several GovDeliveries regarding DCC and will continue to send them out as the launch date nears. HHSC Office of Disability Service Coordination (ODSC) staff are also working with our internal HHSC communications team to develop fliers, social media posts

(Facebook, Instagram, Twitter, LinkedIn), and business-like cards with QR codes that can be scanned. Additional information about DCC will be posted on the ODSC website, [Office of Disability Services Coordination | Texas Health and Human Services](#).

**Q2: Is the DCC only for FMSAs that contract directly with HHSC?**

A2: DCC is not designed for use by FMSAs. As a non-hiring entity, FMSAs are not able to create an employer profile to match with a potential employee. However, HHSC encourages FMSAs to share information on DCC as a resource for the CDS employers and employees with whom they work.