



Americare Certified Special Services
Policy, Procedures and Information

Title: Plan of Care Implementation and Scheduling	Effective Date: 04/12/2012
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Issued By: Governing Board	Approved by: Miri Bank- Director of Compliance

Policy:

All contracted Home Health Aide Vendor Agencies must implement and utilize Electronic Visit Verification (EVV) system in order to ensure that personal care services provided by the agency personnel provided according to the MD orders (plan of care)

Procedure:

Scheduling:

- ◆ In order to ensure that paraprofessional services are rendered according to times, days and frequencies specified in the patient’s plan of care the following process is being adhered to when scheduling home health aide services:
 - Americare CSS home health aide department schedules the home health aide hours in the McKesson system. Frequency and duration is concurrent with the plan of care ordered by the physician.
 - Any changes in schedule should be entered in the system immediately in order to ensure timely notification to the vendor from the CHHA and vice versa.
 - HHA department will relate the any changes in scheduling to the coordinator of care nurse in order to ensure that the MD is notified.
 - Vendor will designate staff members to monitor, review and actively respond to changes in the patient schedule.

Paraprofessional Plan of Care (PPOC):

- ◆ A PPOC is completed, reviewed with the paraprofessional and entered electronically into McKesson system by the nurse or a therapist on the initiation of services
 - In the event that a PPOC plan can not be entered immediately, documentation must be present underlining the reason for the delay.
 - A copy of PPOC plan will be kept at the patient home
 - If paraprofessional does not have the training in performing the tasks in the plan of care, teaching will be initiated and documented by the clinician.
 - PPOC will be reviewed with the paraprofessional at the time of HHA supervision and as needed
 - Vendor will notify Americare CSS in the event that a new/replacement aide starts on the case.
- ◆ Any changes that require a need to alter the plan of care, such as changes in schedule, missed visits, etc require vendor to notify Americare CSS coordinator of care nurse, which in turn will notify the physician of the changes.
- ◆ At a minimum the new PPOC will be completed every 60 days at the time of patient recertification.
- ◆ HHA Exchange system is interfaced with McKesson in order for the plan of care to be transmitted electronically to the vendor
- ◆ All contacted vendors must utilize an EVV system in order to ensure duties/tasks and all other activities ordered by the MD are provided by the home health aide (HHA) to each recipient.
- ◆ Vendor is responsible to conduct an EVV system training program at the time of orientation in order to ensure that each HHA is proficient in entering tasks and codes based on the clinician ordered plan of care for the patient.
- ◆ Vendor will designate staff members to monitor, review and actively respond to the exceptions reports that are related to the plan of care implementation.

- ◆ Vendor shall conduct audits of the plans of care to ensure that established policies related to documentation and reporting of tasks by the aides are complied with.
- ◆ To measure compliance the following audits will be conducted quarterly

- ◆ **Americare CSS audit on Exceptions**

5% random sample of exceptions audited by vendor conducted by Americare compliance department in order to evaluate vendor performance and measure the compliance as it pertains to the resolution and documentation of the exceptions that pertain to the plan of care, i.e. entering tasks and adherence to the frequency and duration of services that is specified by the physician (See Conflict/Exception protocol)

Review of time sheets for the 5% to ensure the accuracy of competition (Patient/Aide signatures, Date of service, etc.)

Tasks: Minimum 5 tasks, one of which is personal.
Tasks on the time sheet vs tasks entered in the HHA exchange system

- ◆ **Vendor Self Audit on Exceptions**

5% random sample of exceptions audited by the vendor in order to evaluate performance and measure the compliance as it pertains to the resolution and documentation of the exceptions that pertain to the plan of care, i.e. entering tasks and adherence to the frequency and duration of services that is specified by the physician (See Conflict/Exception protocol)

Review of time sheets for the 5% to ensure the accuracy of competition (Patient/Aide signatures, Date of service, etc.)

Tasks: Minimum 5 tasks, one of which is personal.
Tasks on the time sheet vs tasks entered in the HHA exchange system

- ◆ **Trending and tracking:**

-All results will be trended and tracked by vendor/Americare CSS.

-Plan of correction will be requested from the vendors with deficiencies.

- Warning to pull funds back for the visit will be given to vendors if it was identified that personal task is not documented on the time sheet, however it was entered in the system. If noncompliance will continue, funds will be pulled back from the vendor for the visit in question.

-Contract will be terminated if reaudit shows no improvement on the part of the vendor.

-In the event that a specific paraprofessional will be identified as being consistently non-compliant with entering tasks vendor will have to retrain the aide. If noncompliance will continue, vendor will be required to remove the aide off of Americare's case.