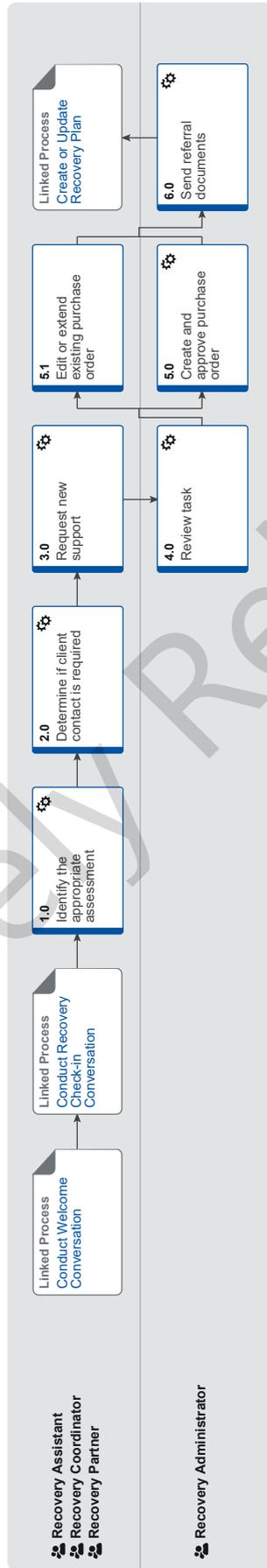


Arrange interRAI assessment for Integrated Home and Community Support (Casemix) - Contracted v21.0



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Summary

Objective

To arrange an interRAI assessment for Integrated Home and Community Support Services (IHCS).

An interRAI assessment is an objective clinical assessment completed by a clinical assessor from an IHCS supplier that helps to understand the client clinical, functional and social needs and supports the creation of an individualised care plan for our clients

Background

The standardised assessments in IHCS supports the move to a different funding model - from fee-for-service to casemix.

The interRAI assessment will ensure our clients are fairly assessed and have assurance that they will receive services based on their needs.

For the supplier the assessment will determine the casemix funding package which provides better surety of payment and allows flexibility in service delivery on a day to day basis without involving ACC.

Owner Name Withheld

Expert Name Withheld

Procedure

PROCESS **Conduct Welcome Conversation**
Recovery Assistant, Recovery Coordinator, Recovery Partner

PROCESS **Conduct Recovery Check-in Conversation**
Recovery Assistant, Recovery Coordinator, Recovery Partner

1.0 Identify the appropriate assessment

Recovery Assistant, Recovery Coordinator, Recovery Partner

- a** Receive request from the client, MyACC, DHB or identify the requirement while carrying out the welcome or check-in conversation.

NOTE **What do you need to consider when the entitlement request is received and deemed cover exists?**

Refer to the Deemed Cover and Entitlements Policy for considerations to determine client entitlement eligibility while in deemed cover period.

Deemed Cover and Entitlements Policy

NOTE **What if you receive the request through MyACC?**

Check the client's injury and assess that the request is appropriate for the injury.

If unsure, contact the client for more information and create a contact in Salesforce or talk to a Practice Mentor.

If approved, forward the task to Recovery Admin to process and ensure that you indicate that the client should be referred for a casemix assessment.

NOTE **What if you receive a request for additional support following a SIP package?**

If you receive a request for support at the end of a SIP package, continue to follow the process to determine whether casemix or standard and extended services are appropriate.

- b** Confirm the client's eligibility IHCS.

NOTE **What is the eligibility criteria?**

To be eligible for IHCS, social rehabilitation must be required for one of the following:

- as a direct result of a client's covered personal injury
- to assist with activities of daily living
- to help develop and maintain natural supports
- because a client lives alone, or there are no natural support to help them undertake their activities.

For additional information about the IHCS service review the below service page.

Eligibility to Integrated Home and Community Support Services (IHCS Services)

Integrated Home And Community Support (IHCS) Services Service Page

NOTE **What if the client's IHCS needs have changed or are likely to change due to ACC funded surgery?**

- Casemix can be used following surgery when outside of the 18 months lodgment criteria and client's needs are still "low complexity".
- If needs are NOT low complexity, a referral for standard support must be made.

NOTE **What if the client is already receiving casemix support and their needs have changed or are likely to change due to ACC funded surgery?**

- ACC will provide a second HCS60 service item code for the casemix assessment. This will require a new purchase order AND a new referral task informing the Supplier of the ACC funded surgery.
- If the support need increases outside of the initial Package A or B, Suppliers can invoice for a second Package A or B depending on assessed need.
- When the change in supports following surgery increases and is considered to be outside of the 'low-complexity' criteria, Suppliers can request a transition to Standard supports from ACC.

- c** Determine if the client is eligible for casemix, standard or extended IHCS support.

NOTE What if the client's received IHCS support for this injury in the past and or is currently receiving supports and requires an extension?

Do not refer the client for IHCS casemix, consider referring the client for standard or extended IHCS support.

Follow the Set Up Integrated Home & Community Support Service - Contracted process. This process ends.

 **PROCESS** Set Up Integrated Home & Community Support Service - Contracted

-  IHCS casemix non-complex referral eligibility criteria
-  IHCS casemix referral exclusions

NOTE What are criteria for standard or extended services?

Standard support consists of attendant care and home help for clients who are likely to return to pre-injury independence within 12 months (more than six months) and require non-complex support.

Clients who receive non-complex support are also eligible for integrated nursing and allied health support, as well as childcare services and overnight care.

Extended support provides attendant care and home help for clients who are expected to require support for more than 12 months and require non-complex or complex support.

Clients who receive extended support are also eligible for integrated nursing and allied health support, as well as childcare services and overnight care.

For more details on the eligibility criteria for the standard or extended IHCS services, please see the business rules below.

If standard and or extended services are more appropriate for the client follow the Set Up Integrated Home and Community Support Service - Contracted process.

This process ends.

 **PROCESS** Set Up Integrated Home & Community Support Service - Contracted

-  IHCS Standard support eligibility criteria
-  IHCS Extended support eligibility criteria – complex needs
-  IHCS Extended support eligibility criteria – non-complex needs

NOTE What if the client required childcare and or overnight care in addition to home help? Ask the homecare agency to determine amount of supports needed as part of their interRAI assessment and if this is not possible refer for a SRNA after homecare has started.

NOTE What if the client requires a Social Rehabilitation Needs Assessment (SRNA) in addition to Integrated Home and Community Support services?

If the client needs standalone supports such as childcare or overnight supervision AND is also eligible for casemix support, refer for IHCS casemix first so the homecare component can be conducted by the homecare agency. Then refer for a SRNA (social single discipline assessment) so that the provider can assess the standalone support separately once the casemix base package has been confirmed.

The referral should include the IHCS service plan and interRAI assessment if these are available. It should be noted on the referral that the SRNA supplier is not required to comment on how many hours of attendant care or home help are needed. The SRNA referral is for childcare and/or overnight supports only. This should avoid over-assessment of homecare needs, and any confusion about who determines level of support.

If the client has an urgent need for assessment and this needs to be done BEFORE the homecare referral is made, then the SRNA should consider all needs (i.e. an integrated assessment as opposed to a single discipline) and the client should subsequently follow the Standard Supports pathway as opposed to casemix.

Follow the below process to arrange a Social Rehabilitation Needs Assessment

 **PROCESS** Arrange Social Rehabilitation Needs Assessment

-  IHCS SRNA referral eligibility
-  Social Rehabilitation Needs Assessment (SRNA) Service Page
- d** Consider whether family members might reasonably be expected to provide home help, attendant care or child care for the client. Refer to Using Natural Supports Policy and links to Supervisory Care within this policy.
-  Using Natural Supports Policy

NOTE What if the client can solely manage with Natural Supports?

If the client can solely manage with Natural Supports, then they are not eligible for IHCS. If they can partially manage, note natural supports available in the task so that recovery administration can add it on the referral.

2.0 Determine if client contact is required

Recovery Assistant, Recovery Coordinator, Recovery Partner

a Contact the client if the required support has not been confirmed through the welcome conversation and or a recovery check-in.

If you have already confirmed the support then go to Activity 3.0.

b Confirm you are speaking with the right person by asking ACC's identity check questions.

 Identity Check Policy

c Explain the support and advise if it is being approved/partially approved/declined, and what their rights and responsibilities are.

NOTE What if you approve/partially approve the support?

- Advise the client that an interRAI assessment referral will be made and the vendor will be in touch to arrange the support.

- Do not discuss support tasks or hours as this will be appropriately identified by the casemix assessor.

- Advise the client that following the assessment, the assessor will formulate an individual support plan based on their injury related needs and send this to ACC for approval. The client should receive a copy of their support plan from the Supplier, however if they do not, they can request one from ACC. Also advise that the recommended supports should commence immediately while waiting for ACC's decision on the support plan. If ACC declines the support, both the supplier and client will be notified as soon as possible.

- Remind the client, if they have any concerns about their support plan, they should raise these first with the Supplier and if an agreement cannot be reached, they should then contact ACC.

NOTE What if the client wants a non-contracted agency, family caregiver or private engaged carer?

Casemix is not appropriate. Refer to - Non-contracted support.

This process ends.

 **PROCESS** Set Up Home & Community Support Services - Non-contracted (Private contractors and family support)

 Client Legislative Rights and Responsibilities Policy

NOTE What does home help include?

Home help can include:

- grocery shopping for food, cleaning products and similar necessities
- meal preparation and cooking
- cleaning, including kitchen surfaces and dishes
- bathroom and laundry
- vacuuming and mopping floors
- dusting
- bed making
- rubbish disposal.

Home help excludes:

- exterior home maintenance services
- lawn moving
- gardening
- in any hospital, hostel, rest home, hotel, motel or other institution
- interior cleaning where there is no risk to the client's health, safety of hygiene, eg spring cleaning or preparation for interior decorating
- home help for clients currently residing outside of New Zealand.

Refer to the Policy page above

d In Salesforce, record the details of the discussion with the client regarding the decision to refer for interRAI assessment and whether the request has been approved/partially and or declined as a Contact action. Record in Salesforce life areas that you have referred the client for casemix support.

3.0 Request new support

Recovery Assistant, Recovery Coordinator, Recovery Partner

a In Eos, under Recovery Plan, select 'Add Activity' and generate a new "NGCM Entitlement Tasks".

NOTE How do you refer a task to Recovery Administration?

See the 'Referring Tasks to Recovery Administration - Principles' document link below for further information and guidance.

 Referring Tasks to Recovery Administration - Principles

NOTE How is the task created for the support?

Refer to the system steps below.

 Creating Entitlement Requests Tasks - System Steps

NOTE What do you select from the drop down boxes?

Select

- home help/attendant care

Then select

- new

Then select

- contracted

b Complete the relevant fields of the eform.

NOTE What other comments need to be included?

'Hours per week'

- a dash/hyphen is to be used in this field.

'Number of weeks'

- A dash/hyphen is to be used in this field.

REMINDER - Do not discuss support tasks and hours/weeks as this will be appropriately identified by the casemix supplier and discussed with the client.

'Expected outcome'

- Can remain as 'Return to independence' which should auto-generate.

'Client vendor preference'

- Ensure you note the selected vendor if the client has a preference, otherwise admin will select a contracted vendor at random. If there has been a SIP in place, noting the specific vendor is especially important for continuity of care.

'Other comments'

- Make it clear that the referral is for Casemix and provide the correct Casemix service code HCS60.
- Include details of ACC funded surgery if relevant.
- Include any other potential risks to the supplier. i.e. dogs on property, property access, other family members etc.
- Include whether the client is living alone or not. Married, children? Working?
- Active care indicator details can go here. See note below.

 NG GUIDELINES Purchase Order Details - Integrated Home & Community Support Services

 Contracted Suppliers by Geographic Area of Coverage

NOTE What if your client has a Care Indicator?

Clearly outline this in the e-form under 'other comments'.

Refer to the 'Disclosure of care indicator information to third parties' policy below for more information on how information is disclosed

 Disclosure of Care Indicator Information to Third Parties Policy

- C** Consider the timing of the task. The tasks route to the Recovery Administration team with an SLA of 24 hours.

NOTE What if the request is urgent and needs to be completed that day?

- 1) Call Recovery Administration.
- 2) Give the Recovery Administrator who answers the call the claim number.
- 3) The Recovery Administrator will open the claim in Eos and find the task on the claim.
- 4) Transfer the task into the Recovery Administrator's name. This will move it to their personal Eos queue and stop it from being reallocated by Salesforce.

NOTE What if the request is required in the future?

If the request is required in the future, set a reminder task for the future date when the service will be required.

When the reminder task comes up complete Request new or extend support process (4.0 step a).

Consider the contract timeframes and SLAs as specified in the service page.

NOTE What if you do not have the delegation to approve the Purchase Order?

Save the Purchase Order, create a request authorisation task and fill out the e-form.

Refer to the System Steps link below for further information.

 Request Authorisation for a Purchase Order - System Steps

NOTE What if you get a limited payment error message when authorising the amended Purchase Order?

If you have received a request to amend a Purchase Order or create a Purchase Order for client reimbursements, then you will need to change the limited payment indicator.

- 1) In Eos, save the purchase order
- 2) go to the 'Validations' tab, select 'Edit' and update the Limited Payment List Indicator to 'No'
- 3) Select 'Ok'
- 4) Go back to the Purchase Order to authorise.

Once you have authorised the Purchase Order and notified the vendor, remember to change the Limited Payment List Indicator to 'Yes'.

If you have received a request to set up or extend, taxis, equipment, home help or a referral for vocational or social supports, contact the Recovery team member advising they will need to re-open the claim so you can complete the request. This does not apply, if the claim is for Casemix only.

4.0 Review task

Recovery Administrator

- a** Following the task assignment in Salesforce, navigate to Eos and select 'Do Task' from your task queue.
- b** Review the task to ensure it has all the information you need to proceed.

 Principles of Working in the Administration Team

- d** Complete the ACC5972 - Referral for Integrated Home and Community Support Services. This form is populated during PO creation. It is the referral to the contracted agency and is always provided.

NOTE Include any 'Other Comments' from the original Entitlement Task to the referral.

Particularly any information relevant to potential risks to the assessor and the client's current living situation. I.e. dogs on property, property access, living with other family members etc.

5.0 Create and approve purchase order

Recovery Administrator

- a** In Eos, generate a purchase order for the code HCS60 using the entitlement type Home Help/Attendant Care.

-  Creating purchase orders using general + QE
-  Purchase Order - Handy Hints on how to create and edit POs
-  NG GUIDELINES Purchase Order Details - Integrated Home & Community Support Services

- b** Locate contracted vendors via the Geographic Location search, select and add the vendor as a 'Vendor - Contracted' participant in Eos.

NOTE What if the vendor details are provided in the task?

You must look up the vendor even if details are provided.

-  Manage Participants (Eos Online Help)
-  Service Contracts and Contracted Providers - MFP spreadsheet
-  Contracted Suppliers by Geographic Area of Coverage

- c** Approve the Purchase Order.

-  ACC5972 Admin Template - Integrated Home & Community Support Services referral
-  Use of ACC5972 when making an IHCS casemix referral
-  Send letters from Client Recovery and Claims Assessment

- e** Complete the forms.

NOTE What documents are required for the contracted provider?

Ensure the appropriate decision letter/factsheets are sent to the relevant parties.

This will provide ACC with the ability to query this information for specific reporting purposes.

If approved:

- ACC5972 - Referral for Integrated Home & Community Support Services
- ACC45 - Injury claim form

All forms are required for contracted care.

-  ACC45 Injury claim form
-  Send letters from Client Recovery and Claims Assessment

5.1 Edit or extend existing purchase order

Recovery Assistant, Recovery Coordinator, Recovery Partner

- a Review the request and check if the change and or extension request is appropriate.

NOTE What information should you check to ensure the request is appropriate?

If the client has either reached the end of six months, or a threshold of visits under casemix, you will need to switch to Integrated Home and Community Support Service standard support or Extended support depending on the clients needs.

To set up additional support follow the Set Up Integrated Home and Community Support Service - Contracted process below.

This process ends.

 **PROCESS** Set Up Integrated Home & Community Support Service - Contracted

NOTE What if the client wishes to change Supplier within 6 months from the start of services?

- Discuss with the client their reasons for changing. Can the issue with their existing Supplier be resolved?

- If not, explain to the client that you will make a new referral and a new assessment will be undertaken.

- Approve another purchase order for the new Supplier using code HCS60 (Do not change or cancel the Purchase Order for the first Supplier). Ensure you include the information from the first Supplier in the referral so that they are aware this is a transfer from another supplier.

- The Supplier will undertake another assessment and return the clients Individual Support Plan. On the plan will be a request for a package of care.

Note: Clients may only receive a maximum of two casemix packages per claim. If a client wishes to move to a third Supplier, the new referral must be for Standard Support.

 Limit on changing casemix supplier

NOTE What if the client has been discharged from IHCS support and then the client or provider requests another package within six months of discharge?

There may be some instances where a Supplier feels they have returned the client to independence, but the client continues to want additional care. Where this cannot be resolved between Client and Supplier it should be escalated to ACC.

- You (RTM) need to consider whether there is any evidence to support additional care.
- Request a completion report from the Supplier outlining what care has been delivered and what progress has been made.
- You (RTM) may choose to decline further care for the Client or seek a third-party opinion via a Social Rehabilitation Needs Assessment (SRNA).

NOTE What if the Supplier has asked for prior approval to upgrade to a different billing package and/or to extend the purchase order approval date?

In this case, we should remind the Supplier of the correct process. Recovery Administrators are only required to raise a purchase order approval for the initial set-up under code HCS60.

Suppliers do not need approval dates to be extended (unless it is to surpass the 6 month timeframe for casemix) and they do not require codes HCS61/62 to be added to the purchase order approval. These codes have been deliberately designed to NOT require prior approval.

6.0 Send referral documents

Recovery Administrator

- a Ensure you have completed all the documents.

- b Convert all documents into a non-editable pdf.

- c Perform privacy checks ensure that the documents are accurate, do not contain any third-party information and do not contain any other information that needs to be withheld.

 Privacy Check Before Disclosing Information Policy

NOTE What do you need to check?

For details on what checks you need to complete before sending documents out, refer to the link below:

 NG SUPPORTING INFORMATION Inbound and Outbound Document Checks

 Send letters from Client Recovery and Claims Assessment

NOTE What if this a sensitive claim, if so confirm if the client has a safe contact?

Refer to the system steps below.

 View a safe contact (Eos Online Help)

- d Confirm support with the provider via email for a new purchase order.

NOTE What template do you use?

Create an email using the template 'request and referrals' and attach the documents.

Select the most appropriate email address. TIP: It is common for the applicable email address to be listed under General Purchasing.

TO DO: Once the email template has generated in Outlook, you will need to add 'CASEMIX REFERRAL' to the subject line in front of the client's name.

For more information on the most appropriate template to use see the system steps below

 NGCM - FINAL Emailing from Eos using a Template - System Steps

NOTE What documents do you send to the contracted provider?

- If approved
 - ACC5972
 - ACC45 - Claim form

 Use of ACC5972 when making an IHCS casemix referral

- e In Salesforce, close the assigned referral task.

Proactively Released