



ADRC Activity Reporting Requirements Frequently Asked Questions #3 March 23, 2010

1. Question:

Recently an I& A specialist talked with a customer over the phone and met with that person in their home to learn more about their situation. The home visit revealed that the individual had multiple needs including financial support to pay for services. This interaction that began with a call to the ADRC resulted in several conversations including a long-term care functional screen, assistance with an application for Medicaid and enrollment counseling to select a publicly funded long-term care program. How are these conversations documented and fit into the ADRC activity reporting?

Answer:

ADRC staff are to use an encounter based reporting. What that means is each encounter is recorded as a contact. For each contact one or more activities are to be identified. In this example the first contact of information and assistance occurred over the phone, information and assistance was also part of subsequent contacts (which took place in the home) along with assistance with the Medicaid application process, administration of the long-term care functional screen and enrollment counseling. It is important to note that administering the long-term care functional screen checked only when the screen is completed.

2. Question:

Our ADRC is receiving a lot of IRIS contacts for their annual updated long-term care functional screen. When the specialist contacts the IRIS participant (because they got the letter but haven't contacted us yet) or they call us to set up an appointment for the screen and our specialist explains the process including what the screen is and what to expect during the appointment, we should be considering that I&A correct?

Answer:

If the contact to make the appointment was only about setting the appointment, then the phone contact would not be entered. If the interaction with the IRIS participant included explaining the process and/or the program, the contact would be coded as information and assistance. Once the I&A specialist meets and completes the long-term care functional screen, that contact (or contacts) would be logged as the ADRC activity "administered functional screen."

3. Question:

A son calls about his parents, and through the discussion it is determined that the I&A specialist will go out to meet with his parents to learn more. During the conversation, the I&A specialist also shared information about caregiver support/education opportunities. When the I&A specialist puts the contact in the system, she codes the son as caller and one of the parents as the consumer. Does she need to enter another contact with the son as the caller and the other parent as the consumer? (2 for 1 type call)

Answer:

No, she does not have to enter a separate contact for each parent if the visit involved both at the same time. This question is about who the conversation is with not what activity took place. The initial conversation with the son would be entered as one contact or interaction and coded as information and assistance. After the

visit takes place with the parents, the I&A specialist would enter another contact and select the appropriate activity or activities that occurred at the time of the visit.

4. Question:

An I&A specialist does an annual long-term care functional screen for an IRIS participant. During the process, the participant expresses concerns about IRIS and they talk about IRIS and Family Care benefit packages. Is this options counseling or enrollment counseling or neither?

Answer:

It sounds like during the process of administering the annual long-term care functional screen the individual shared concerns about rethinking enrollment in IRIS? If this is the case, the conversation about Family Care benefits as well as IRIS would reflect as a disenrollment counseling activity. A critical point in your scenario is the individual is already enrolled, so the enrollment counseling has already occurred.

5. Question:

The ADRC receives a phone call from someone currently residing in a nursing home who is interested in looking at long-term care programs. The I&A specialist meets with the person to discuss their options including different benefit packages and services in their area. Ultimately, the individual decides not to relocate or enroll in a long-term care program, but the conversation still took place. Is this counted as enrollment counseling?

Answer:

Yes, enrollment counseling doesn't always mean that people select and enroll in a publicly funded long-term care program. In the example provided, the individual received enrollment counseling due to a desire to learn more about possible benefit packages and services in the area, but did not enroll. The counseling occurred; therefore, enrollment counseling is selected as the appropriate ADRC activity provided.

6. Question:

An I&A specialist meets with an individual who is over the age of 60 who has challenges with paying bills, and is interested in exploring benefits other than long-term care programs. The specialist refers the individual to the Elderly Benefit Specialist. Is that included in the ADRC activity as "referred for financial related needs other than ES?" In addition, how would you log a contact for a person under the age of 60 using the same scenario?

Answer:

Both scenarios involve information, assistance, and referral to a Benefit Specialist. In these instances, I&A specialists would document the conversation and check "information & assistance" as the ADRC activity. EBS and DBS referrals are logged as information and assistance. Please Note: the EBS and DBS staff have separate reporting requirements where their interaction is logged and reported.

7. Question:

An I&A specialist is having a discussion with an individual who is exploring home care services and will pay privately for those services. The I&A specialist shares names of providers or agencies with the individual, but a phone number or contact person is not given at that time. Should I&A specialists be selecting "referred for private pay services" as the ADRC activity?

Answer:

The ADRC activity should capture the conversation that the specialist is having with the individual who is sorting out worries and concerns and exploring choices, in this case which include paying for services privately. The activity would be logged as "I&A" and "referred for private pay services."

8. Question:

A PAC referral form is received from a nursing home indicating that an individual residing there is not interested in contact with the ADRC. Would we enter “consumer refused (PAC)” as the ADRC activity?

Answer:

One of the decision points is that the activity “Consumer Refused (PAC related)” is logged when an actual conversation between the ADRC and a consumer occurs and the consumer refuses to talk further. You would not enter the contact when the PAC form indicates that the person does not want to have a discussion with the ADRC and no conversation takes place.