

IPMG Professional Development Webinar: Medicaid Prior Authorization - Q&A



Question	Answer
<p>What medical responsibilities does a PA provider have if their PA staff don't show up for a shift and don't call to let anyone know they will not be coming to provide PA services? I've dealt with PA providers that have asked residential providers to sign a waiver that says the PA provider is not responsible if something happens to an individual when their staff do not show up.</p>	<p>It is the provider's responsibility to provide the hours they are approved for, such as providing alternate staff. If it is a short notice, there may be a delay.</p>
<p>Can wheelchair ramps possibly get covered?</p>	<p>A ramp can be covered through the RFA process in certain circumstances. It is not covered through Medicaid PA.</p>
<p>Could you explain how services are delivered to individuals with behavioral issues?</p>	<p>For the specific service provider panelist, they also provide other services. If the individual is experiencing behavioral issues, this particular provider can assist by providing behavior management support. You may want to ask if the home health agency you are considering has experience working with individuals with ID/DD or behavioral issues.</p>

Question	Answer
<p>We use sign language at home for our daughter. We use just words she needs. Do we need a PA to get the day service to use the sign as well?</p>	<p>Interpreter services funded through the waiver are only covered for 4 team meetings per year. Medicaid PA does not cover Interpreter services.</p>
<p>Who would provide the PT service? Would it also be a nurse at the PA Medicaid provider's office?</p>	<p>For PA, physical therapy must be provided in the home by a licensed physical therapist. An individual can also obtain an order for outpatient services that can be approved by Medicaid.</p>
<p>How do we get a copy of all the slides/presentation?</p> <p>Will the PDF be on the IPMG website?</p> <p>Is there a way to print off the slides from the webinar?</p>	<p>After the PDW, an email with links to the PDW recording and materials is sent to everyone who registered for the PDW. The materials will also be posted under the resources tab on the IPMG website.</p>
<p>What is Ruth's contact information?</p>	<p>r.roberts@gotoipmg.com</p>
<p>Why is the installation of a shower not covered?</p>	<p>Installation of showers fall under home modifications and therefore, can only be covered under the waiver. If the individual is on the Family Support Waiver (FSW), then home modifications are not currently a service under that waiver.</p>
<p>Why would a ramp not be covered through the FSW?</p>	<p>Home modifications are not a service on the FSW based on the current waiver policy guidelines.</p>
<p>So if an individual only has a support services waiver, they will not be able to get home modifications?</p>	<p>Correct. Though they cannot qualify for home modifications, sometimes we can look at equipment such as a transfer bench or a bath lift to help make the bathroom accessible.</p>

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<p>Does IPMG send an email to all of the individuals/ guardians regarding these webinars?</p> <p>Is there a way to print off the slides from the webinar?</p>	<p>Yes. An email announcement is sent to all individuals/guardians served by IPMG prior to each PDW. After the PDW, an email with links to the PDW recording and materials is sent to everyone who registered for the PDW.</p>
<p>Is there anything that participants need to do in order to get CEU credit for this webinar?</p> <p>Do I need to sign in anywhere for attendance?</p> <p>Please repeat how a CM NOT with IPMG can obtain a record of attendance for this webinar?</p>	<p>IPMG does not currently offer CEU credit for our PDWs, but this is something we are looking into for next year.</p> <p>Case Managers will submit their proof of attendance email to Advocare for training credit.</p>
<p>Kudos to Ruth! Always helpful and informative when I have contacted her :)</p>	<p>Thank you!</p>
<p>As a CM, sometimes we go into the family home in which an elderly parent is caring for the waiver participant. If the parent, not the waiver participant, is needing help, has surgery, needs temporary assistance, etc. can Medicaid PA agencies help the parents/caregivers as well?</p>	<p>The same process would be followed for a caregiver or parent of a Waiver Participant. The parent or caregiver may also qualify for AD Waiver services.</p>
<p>Helping Challenged Children and About Special Kids are both good resources for financial help and grants for equipment.</p>	<p>Thank you! We will add this to the presentation.</p>

Question	Answer
I have a young client that lost several teeth. He has been unable to wear dentures. His family is looking into having implants put in. Does Medicaid ever pay for these if a doctor felt medically necessary?	Medicaid will most likely pay for implants. The dentist provider should submit the PA paperwork.
Is adaptive equipment such as a sippy cup covered under Medicaid PA? I have an individual who only can use sippy cups due to his CP.	Typically, Medicaid PA will deny this, but the waiver may be able to cover it with a PA denial.
Can individuals residing in a nursing facility in process of transitioning to the CIH waiver submit Medicaid PA for a new wheelchair prior to transitioning to the community?	It may not be approved prior to discharge, but the documentation can be prepared in advance of the discharge date. The discharge planner at the nursing facility should be completing the documentation.
Vocational Rehabilitation will also provide an iPad.	Thank you for sharing this information. For more information on Vocational Rehabilitation, please visit http://www.in.gov/fssa/ddrs/2636.htm .
Would PA cover an App on the iPad that is strictly used for communication purposes?	Unfortunately, apps have not yet been something providers can get covered under PA or waiver.

Question	Answer
<p>Is there a maximum amount of weekly Medicaid PA hours for Home Health Nursing and home health aid services?</p>	<p>There is not a maximum amount other than the initial 30 days after a hospitalization, up to 120 hours. However, the hours requested are not always approved. The provider can appeal if the original hours requested are denied. Additional information and documentation may be needed. We have not seen 24 hour services approved. 12 hour shifts could be approved if waiver services are not available. If there are housemates that are sharing services, the PA may not be approved for all housemates. The PA provider must provide a cost estimate as part of the PA request. Medicaid is looking at the comparison in costs between home health care and a nursing facility. Communication between the PA provider and physician is very important.</p>
<p>It is my understanding that there cannot be a duplication of services paid for by the waiver and Medicaid PA. What is the process to prevent duplication of services?</p>	<p>Before a PA is submitted, the provider will ask what other services the Individual receives and that information can be included in the PA request. All providers should be aware of limitations and policies.</p>
<p>How often do PAs have to be renewed? I work with a minor whose family was told every 30 days. That seems extreme.</p>	<p>PA can go up to 6 months at a time. The POC must be resubmitted every 60 days.</p>