DSIPT & LRI Provider Training

Provider Training



MCO Introductions











DSIPT – Why is this information Needed?

- Beginning July 1, 2024, the Turquoise Care Managed Care Organizations (MCOs) are required by New Mexico Health Care Authority (HCA) to capture additional information on agency-based Personal Care Services (PCS) provided for the Delivery System Improvement Target (DSIPT) and for Legally Responsible Individuals (LRI).
- MCOs will capture the data to provide accurate reporting on unfulfilled hours to determine why services are not being rendered and if additional support is needed.
- PCS agencies should confirm that their agency contact information (specifically email address) is up to date in AuthentiCare. This will ensure that late/missed notifications are sent to the correct contact person at the agency.
- PCS agencies are also required to create and update schedules in AuthentiCare.

DSIPT – Will this affect the member and provider experience?

- The reporting of data will require additional tasks for the provider and allow for MCOs to effectively capture and report on the information.
- For members, it will allow MCO's and HCA to determine why services are not being rendered and if additional support is needed.
- The new process will not impact claims.

DSIPT – What has changed?

- Providers are now required to enter missed or late visit reason codes in AuthentiCare for each occurrence.
- Late and Missed Event descriptions have been updated to capture additional categories.

Original Description	Original Code	New Description	New Code
Hospital	1	Hospital	1
Nursing Facility temporary	2	Nursing Facility/Inpatient	2
Consumer refusal	3	Consumer Refusal	3
Consumer not available - justify in notes	4	Consumer Not Available/No show	4
Family voluntarily provided temporary service instead	5	Family Voluntarily Provided Temporary Service Instead	5
Other (consumer driven) - justify in notes	6	Other (Consumer Driven) – Justify In Notes	6
Consumer deceased	7	Consumer Deceased	7
No staff available	Α	No Staff Available	Α
No staff willing	В	No Staff Wiling	В
Natural disaster/Inclement Weahter	С	Natural Disaster/Inclement Weather	С
Late plan from Case Manager	E	Late Plan From Case Manager	E
Other (provider driven) - justify in notes	F	Other (Provider Driven) – Justify In Notes	F
No Landline or Cell Phone Service	L	No Landline Or Cell Phone Service	L
Not a Missed Visit - must justify in notes	N	Not A Missed Visit – Must Justify In Notes	N
		Unable to Locate Consumer	0
		Consumer Difficult to Engage	Р
		Consumer Tardy Arrival	Q
		Consumer Traveling Out of State/Away From Service Area	R
		Consumer Incarcerated	S

DSIPT - Viewing Missed Visits

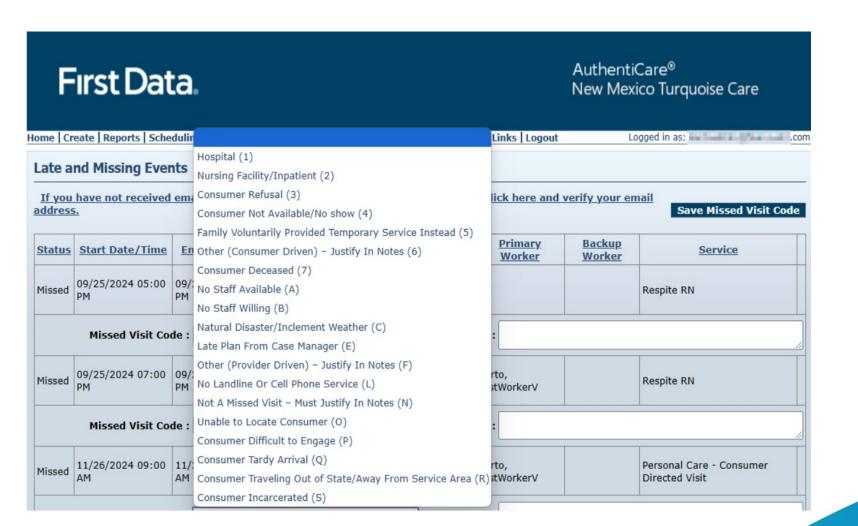
- Providers will continue to access the Late and Missed Visits Report to document the information.
- Providers will now be required to document any Critical Incident (CIR) ID numbers in the missed visit reason code notes section.





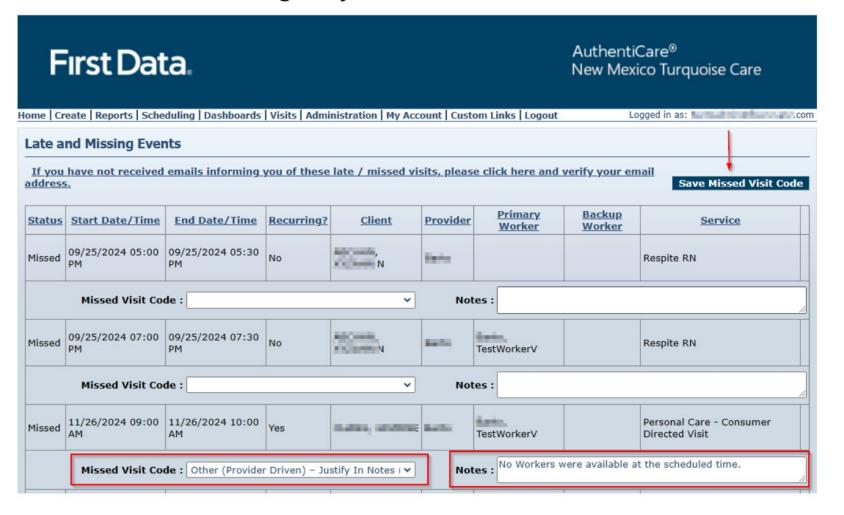
DSIPT - Missed Visit Reason Codes

Providers may reference the missed visit reason codes directly in AuthentiCare.



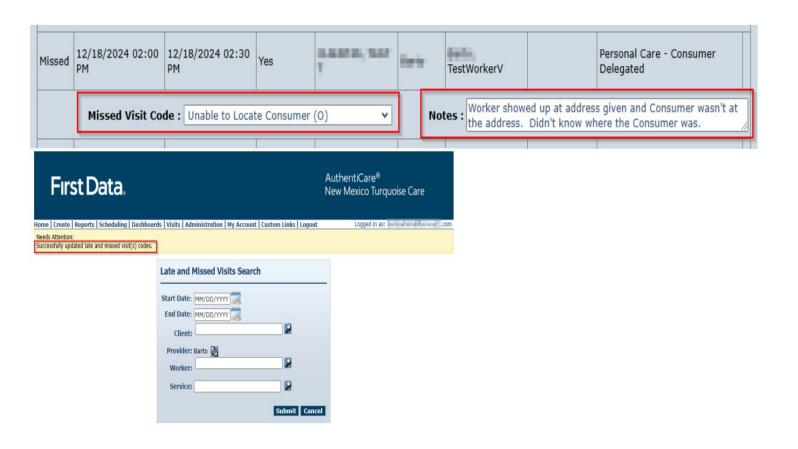
DSIPT – Missed Visit Reason Codes: Other (Provider Driven) Justify in Notes (F)

Providers will enter notes indicating why the visit was missed.



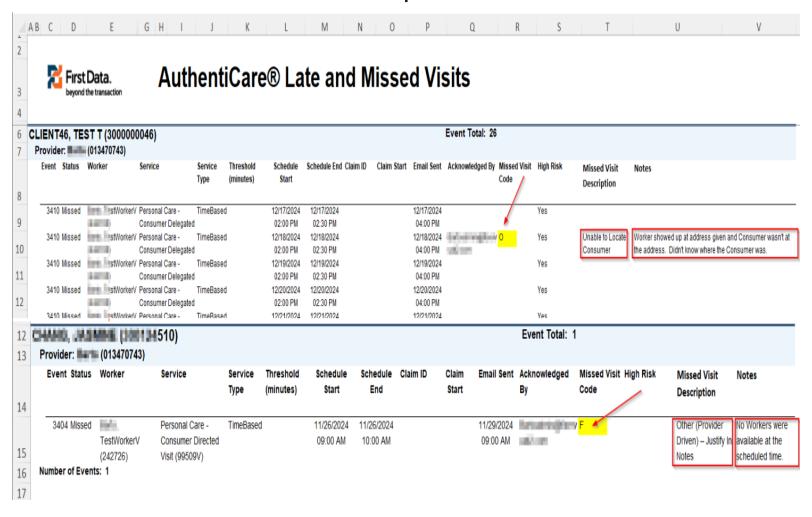
DSIPT – Missed Visit Reason Codes: Unable to Locate Consumer (O)

Providers will enter notes indicating if the consumer was unable to locate.



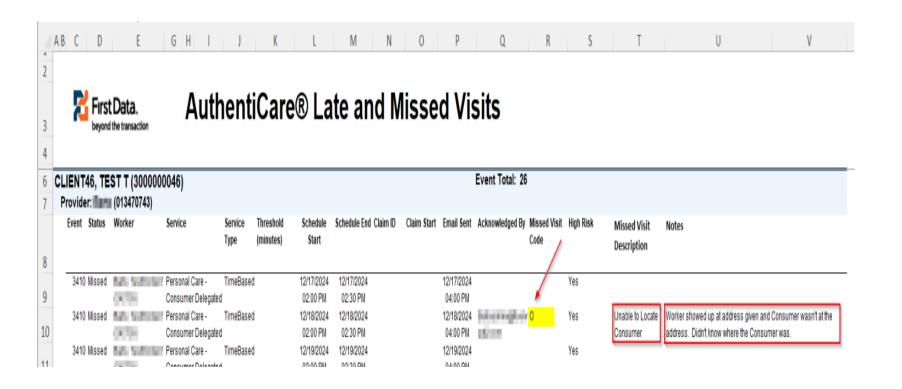
DSIPT – Late and Missed Visit Report: Provider Administrator View

Providers can view all their clients on their report.



DSIPT - Late and Missed Visit Report: MCO View

MCOs will continue to view only members enrolled with their plan.





LRI – Why is this information Needed?

- HCA has mandated that MCOs report on the LRI providing care.
- PCS agencies are being directed by HCA and the MCO's to provide reporting on LRI's providing care for their members.
- MCOs will capture the data via AuthentiCare to obtain more accurate reporting.

LRI – Will this affect the member and provider experience?

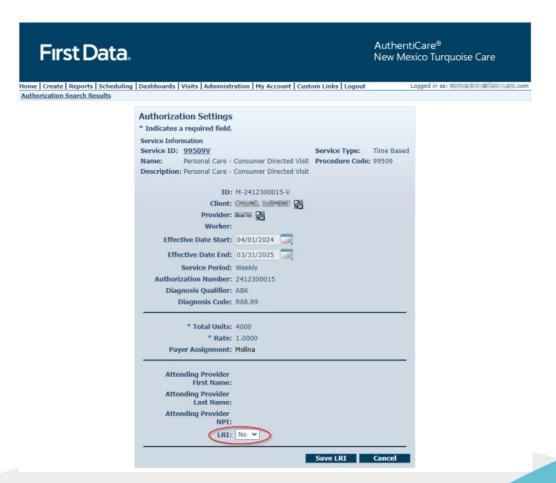
- The reporting of data will provide additional tasks for the provider and allow MCOs to effectively capture and report on this information.
- There will be no impact to the member.
- The new process will not impact claims.

LRI – AuthentiCare Flag

 Providers will have access to update the LRI field in AuthentiCare on the Authorization Settings.

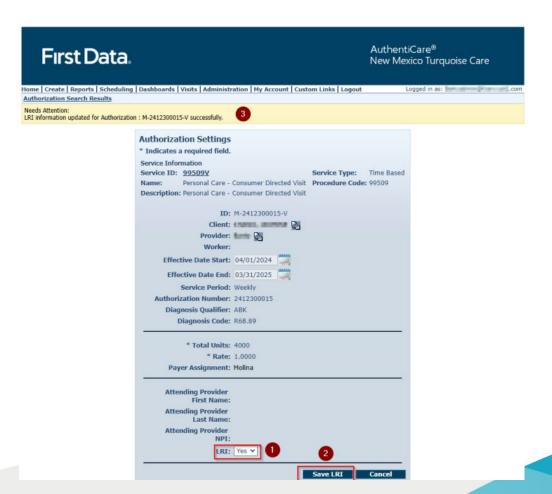
This information will allow for accurate reporting by the provider and MCOs for HCA's

mandated reports.



LRI – AuthentiCare Flag Updated by Provider Administrator

 To ensure the update has successfully saved, providers should ensure to follow the steps in the screenshot below.



LRI – Claims Data Listing Report

- Providers can view updates that their administrators make to the LRI field in the Claims Data Listing Report.
- MCOs will have access to view LRI fields providers make in AuthentiCare for their members.

