

Veteran Directed Care (VDC) Training

December 11, 2019

FY2020 Case Mix Rate Calculator and Veteran Care Agreement (VCA) Tools and Policies

Agenda

- Welcome from the Administration for Community Living (ACL)
- Overview of the FY2020 Case Mix Rate Calculator and impact of new rates
- From our partners at the Veterans Health Administration (VHA), important Veteran Care Agreement (VCA) tools and policies
- Open question & answer (Q&A)
- Closing

FY2020 Case Mix Rate Calculator

Patrick Brady, The Lewin Group

Overview of the FY2020 Case Mix Rate Calculator

State	New York
County or City	New York County
Case Mix Level	D
Start Date of SEOC ^A (MM/DD/YYYY)	10/1/2015
End Date of SEOC (MM/DD/YYYY)	9/30/2016
Number of Months in SEOC	12.0
Prorated First Month Veteran Budget	\$2,688
Average Monthly Veteran Budget	\$2,688
Monthly Administrative Fee	\$758
Average Monthly VA Obligation	\$3,446
Total Veteran Budget for SEOC	\$32,341
Full Assessment Fee	\$1,068
Partial Assessment Fee	\$534
Total VA Obligation for SEOC (if includes Full Assessment Fee)	\$42,507
Total VA Obligation for SEOC (if DOES NOT include Full Assessment Fee)	\$41,439

- **Key highlights:**
 - *New benchmark:* 60% of MN Medicaid's Elderly Waiver
 - 14-15% increase in actual rates from previous case mix rates
 - "Average Monthly Veteran Budget" does not include the monthly administrative fee (see next slide)
 - Rates can be found at: https://nwd.acl.gov/pdf/VDC_Case_Mix_Rate_Calculator_FY2020_508compliant.xlsx

Veteran Budget & Monthly Administrative Fee

Table 3. Veteran Directed Care Monthly Average Case Mix Budget, Administrative Fee, and Assessment Fee List
Effective 1 October 2019 through 30 September 2020

Notes:

- See "Calculator" tab for easy to use tool identifying rates and fees to use in authorization. Otherwise follow steps below for standard way to find rates and fees
- The **Average Monthly Veteran Budget by Case Mix Level** is listed in columns H-T. The Monthly Administrative Fee in column U is the same within a county regardless of case mix level. The Average Monthly Veteran Budget is multiplied by the number of months in the authorization to represent Total VA Obligation for Authorization (without Assessment Fee included)
- Includes both Urban and Rural counties. Search for county of interest using ctrl+"F"

SSA State/County Code	CBSA Code	CBSA or Statewide Rural Name	County or City Name	State	Urban / Rural	Wage Index	Average Monthly Veteran Budget by Case Mix Level										Monthly Administrative Fee	Assessment Fee	Partial Assessment Fee		
							L	A	B	C	D	E	F	G	H	I					
1892	33420	35614	New York-Jersey City-White Plains	New York County	New York	Urban	1.2776	\$1,168	\$1,743	\$2,086	\$2,380	\$2,688	\$3,044	\$3,160	\$3,284	\$3,802	\$3,802	\$96	\$758	\$1,068	\$534

D

\$2,688

- **“Average Monthly Veteran” Budget** does NOT include the monthly administrative fee
- **“Average Monthly VA Obligation”** equals **“Average Monthly Veteran Budget” PLUS “Monthly Administrative Fee”**

	A	B
1	Table 1. VDC Case Mix Rate Calculator	
2	State	new york
3	County or City	new york county
4	Case Mix Level	D
5	Start Date of SEOC ^A (MM/DD/YYYY)	10/1/2019
6	End Date of SEOC (MM/DD/YYYY)	9/30/2020
7	Number of Months in SEOC	12.0
8	Prorated First Month Veteran Budget	\$2,688
9	Average Monthly Veteran Budget	\$2,688
10	Monthly Administrative Fee	\$758
11	Average Monthly VA Obligation	\$3,446
12		
13	Total Veteran Budget for SEOC	\$32,341
14		
15	Full Assessment Fee	\$1,068
16	Partial Assessment Fee	\$534
17		
18	Total VA Obligation for SEOC (if includes Full Assessment Fee)	\$42,507
19		
20	Total VA Obligation for SEOC (if DOES NOT include Full Assessment Fee)	\$41,439

FY20 and FY19 Case Mix Comparison

Table 3. Veteran Directed Care Monthly Average Case Mix Budget, Administrative Fee, and Assessment Fee List
Effective 1 October 2019 through 30 September 2020

Notes:
 -See "Calculator" tab for easy to use tool identifying rates and fees to use in authorization. Otherwise follow steps below for standard way to find rates and fees
 -The **Average Monthly Veteran Budget by Case Mix Level** is listed in columns H-T. The Monthly Administrative Fee in column U is the same within a county regardless of case mix level.
 -Multiply Average Monthly VA Expense by months in the authorization to represent Total VA Obligation for Authorization (without Assessment Fee included)
 -Includes both Urban and Rural counties. Search for county of interest using ctrl+"F"

SSA State/ County Code	CBSA Code	CBSA or Statewide Rural Name	County or City Name	State	Urban / Rural	Wage Index	Average Monthly Veteran Budget by Case Mix Level						G	H	I	J	K	V*	Monthly Administrative Fee	Assessment Fee	Partial Assessment Fee		
							L	A	B	C	D	E											
272	6150	19740	Denver-Aurora-Lakewood	Denver County	Colorado	Urban	1.0245	\$977	\$1,459	\$1,746	\$2,159	\$2,249	\$2,547	\$2,644	\$2,748	\$3,181	\$3,282	\$3,541	\$4,231	\$17,067	\$634	\$894	\$447

Average Monthly Veteran Budget by Case Mix Level					
L	A	B	C	D	E
\$977	\$1,459	\$1,746	\$2,159	\$2,249	\$2,547

Table 4. Veteran Directed Care Monthly Average Case Mix Rates, Administrative Fee, and Assessment Fee: CY 2018
Published 4 April 2018

Notes:
 -See "Calculator" tab for easy to use tool identifying rates and fees to use in authorization. Otherwise follow steps below for standard way to find rates and fees
 -The Monthly Administrative Fee is included in the monthly budget cap. Example: The Case Mix "D" Rate for Autauga County (\$1,895 - cell I8) in the table below is the rate for that county. The Case Mix "D" Rate for Autauga County is \$1,895.
 -Rates are based of monthly budget for Minnesota's Medicaid Managed Care Home Care Case Mix Rates
 -Multiply monthly rates by months in the authorization to represent total available funds in authorization
 -For Veterans who start the program on a day other than the first day of the month, their budget for that month will be prorated to reflect the number of days in the month.
 -Assessment Fee is a one-time fee added to authorization to cover the costs associated with enrolling Veteran in VDC. Partial Assessment Fee is added to authorization for Veterans who enroll in VDC, but chooses to not enroll

SSA State/ County Code	CBSA Code	CBSA or Statewide Rural Name	County or City Name	State	Urban / Rural	Wage Index	Case Mix Level						G	H	I	J	K	Monthly Administrative Fee	Assessment Fee	Partial Assessment Fee		
							L	A	B	C	D	E										
279	6150	19740	Denver-Aurora-Lakewood	Denver County	Colorado	Urban	1.0429	\$1,348	\$1,865	\$2,122	\$2,490	\$2,574	\$2,837	\$2,924	\$3,017	\$3,403	\$3,494	\$3,723	\$4,340	\$569	\$799	\$399

Case Mix Level					
L	A	B	C	D	E
\$1,348	\$1,865	\$2,122	\$2,490	\$2,574	\$2,837

Example of FY19 and FY20 Case Mix

- Denver County, CO
- FY19 Case Mix Level (Case Mix D): \$2,574
 - ▶ Monthly Administrative Fee: \$569
 - ▶ Calculate Veteran Service Budget: \$2,754 (Case Mix Level) - \$569 (Monthly Admin Fee) = \$2,005 service budget
- FY20 Average Monthly Veteran Budget for Case Mix D: \$2,249
 - ▶ Monthly Administrative Fee: \$634
 - ▶ No math needed – Veteran Service Budget is \$2,249 and Administrative Fee is \$634

FY2020 Case Mix Rate Calculator: Impact

Locality – Denver County, CO	FY19 Case Mix Rates	FY20 Case Mix Rates	Diff (% Change)
Wage Index*	1.0429	1.0245	-0.0184
Monthly Administrative Fee	\$569	\$634	\$65 (11%)
Average Monthly Veteran Budget (Case Mix 'D')	\$2,004	\$2,249	\$245 (12%)
Average Monthly VA Obligation	\$2,574	\$2,884	\$310 (12%)
Total Veteran Budget for SEOC**	\$30,888	\$34,608	\$3,720 (12%)

*Wage index set by the Centers for Medicaid and Medicare Services (CMS)

**Assumes 12 month standard episode of care (SEOC)

FY2020 Case Mix Rate Calculator: Next Steps for VDC Providers

- Review FY2020 Case Mix Rate Calculator
- **VAMCs will use the FY2020 Case Mix Rates for new and updated VDC authorizations beginning on October 1, 2019**
 - **Ex. A new Veteran referred for VDC enrollment on 12/1/2019**
 - **Ex. A Veteran has been enrolled in VDC since 3/1/2017. Their current authorization for VDC expires on 12/31/2019. VA will use the new case mix rates when sending a new authorization if VDC is to be continued on 1/1/2020**
- VDC Providers should review new VDC authorizations to verify changes in Case Mix Rates have been applied
- Submit updated Veteran spending plans to your partnering VAMC for approval

Important VCA Tools and Policies



- **Daniel Schoeps**,
Director, VA Purchased
Long-Term Services
and Supports
- **Nick Page**, The Lewin
Group

Important VCA Tools, HSRM

HealthShare Referral Manager (HSRM)

VA's new secure online portal for managing referrals and authorizations to community providers

- Facilitates health information exchanges between VA and community providers through one unified platform
- Reduces turnaround time for authorizations and reimbursement
- Provides easy access to bundled care/standard episode of care (SEOC) information
- Indicates which services are required, and how to acquire precertification
- Allows community providers to submit Request for Services (RFS)
- Reduces time wasted waiting for fax, phone, or email contact prior to serving a Veteran

*Community providers can register for the **HSRM training** by signing up and viewing the webinar (every Tuesday 1-3 PM EST) through the [VHA TRAIN website](#). For more information about HSRM, visit the [OCC Website](#).*

Important VCA Tools, eCAMS

Electronic Claims Adjudication Management System (eCAMS)

VA's new management system for processing claims received from community providers outside of VA's Community Care Network (CCN)

- Streamlines claims processing while improving efficiency and standardization
- Leverages auto-adjudication functionality and is reliant on valid data inputs
- Community care providers outside of the CCN will continue to submit claims much like they do today

eCAMS Requirements for Community Providers

- Acquire a [National Provider Identification](#) (NPI) number and include on all claim submissions
- Include complete 9-digit SSN for the Veteran on all claim submissions
- Include referral/authorization number on all claim submissions
 - List the VCA authorization number on Field #63 of the UB-04 titled "Treatment Authorization Codes"
- Submit claims in accordance with National Uniform Billing Committee (NUBC) and National Uniform Claims Committee requirements (NUCC)

Community providers are also encouraged to submit health care claims through VA's clearinghouse, [Change Healthcare](#). For more information about community care claims processing, visit the [OCC website](#).

Important VCA Tools, CEP

Customer Engagement Portal (CEP)

- VA web application for community providers and other registered vendors to research the status of claims received by VA.
- This includes information on previous, current, and future payments, and provides the option to check the status of CMS 1500 (HCFA-1500) or CMS 1450 (UB-04) claims forms.
- Link to CEP website: <https://www.cep.fsc.va.gov/>

Important VCA Policies, VCA Trainings

Required VCA Trainings

- As described in Section D.9 and D.11, the VCA states that providers must complete certain online training courses offered by VA within 180 days of signing the VCA
- VA requires VDC providers to complete the MISSION-identified training within 180 days of signing a VCA
- Training needs to be completed by one individual per NPI included on the VCA
- Current required courses include:
 - Opioid Safety Initiative Training Course
 - General Competency Training Course

Accessing Required VCA Trainings

- [VA's Community Care Provider Education and Training Resources](#) webpage provides information on educational opportunities for VA community providers
- VDC providers must create an account on the [VHA TRAIN website](#)
- Once you activate your VHA TRAIN account, you may access your account through the [VHA TRAIN log in page](#) to manage your profile and register for and launch the required VCA trainings

Important VCA Policies, Authorizations

Authorizations

- Once a VCA is signed by a community provider and VA Medical Center, the community provider will be notified to begin receiving referrals and authorizations from VA to provide care to Veterans.
- The referral and authorization contain the scope of services authorized for the community provider to provide to a specific Veteran.
- Referrals and authorizations are then sent to community providers through the HealthShare Referral Manager (HSRM).
- VCA authorization numbers should be listed on all VDC invoices.
 - **List the VCA authorization number on Field #63 of the UB-04 titled “Treatment Authorization Codes”**

Questions and Answers

Please use the chat feature in the right side panel of the WebEx platform to enter any questions.



Closing

- Please complete a brief survey:
 - https://www.research.net/r/December_VCA_Training_2019_survey
- Please email the VDC Technical Assistance Team with any questions or to share your own successes!
 - veterandirected@acl.hhs.gov
- Stay tuned: in the coming months, the VDC Ticker will be transitioning to a new, updated reporting page on ACL's No Wrong Door (NWD) website (<https://nwd.acl.gov/>).
 - VDC Programs will receive communications with details regarding the change