



## **2024 Annual Training Requirement: Home & Community-Based Services (HCBS)**

*Transforming the Health of Our Community One Person at  
a Time*

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2/13/2024

# Annual HCBS Training Requirement

HCBS Provider Types 59 required to complete this training annually:

Adult Daily Living	Home Adaptations	Personal Emergency Response System (PERS)
Assistive Technology	Home Delivered Meals	Pest Eradication
Behavior Therapy Services	Home Health Aid Services	Physical Therapy
Benefits Counseling	Job Coaching	Residential Habilitation
Career Assessment	Job Finding	Respite
Cognitive Rehabilitation Therapy Services	Non-Medical Transportation	Specialized Medical Equipment and Supplies
Community Integration	Nursing Services	Speech and Language Therapy
Community Transition Services	Nutritional Consultation Services	Structured Day Habilitation
Counseling Services	Occupational Therapy	Telecare
Employment Skills Development	Personal Assistance Services	Vehicle Modifications
Financial Management Services		

Compliance with this Training Requirement will be tracked per Tax ID #: At least one person from each organization (Tax ID#) must complete this training annually.

Attestation must be completed to receive credit for completion.

# HCBS Annual Training Attestation

<https://www.pahealthwellness.com/providers/provider-training/hcbs-training-attestation.html>



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## FOR PROVIDERS

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Become a Provider +

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Provider Town Hall

Provider Training -

Medicare Model of Care (MOC)  
Training Attestation

HCBS Training Attestation

Provider Updates

Risk Adjustment

## Home and Community Based (HCBS) Training Attestation

I hereby attest that I have completed the PA Health & Wellness 2022 Home and Community Based Provider training.

Name of Individual Completing Attestation \*

Group or Practitioner Name \*

Street Address \*

Phone Number \*

Email Address \*

Tax ID Number(s) - Please include all Tax ID Numbers that you are representing when completing this form: \*



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# Annual HCBS Training Requirement

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## Agenda:

1. The population being served through CHC
2. Service Coordination
3. Accessibility requirements
4. Medical Necessity
5. Information around Alzheimer's Disease and related dementias
6. Referral for mental health and drug, alcohol and substance abuse services
7. The diverse needs of persons with disabilities
9. PHW Policies against discrimination
10. Cultural, Linguistic and Disability Competency
11. Treating the populations served by PA Health & Wellness
12. Administrative processes
13. Provider & Quality Management related issues
14. PHW Utilization Review and Prior Authorizations
15. PHW Complaints & Grievances Process
16. Performance Improvement Plans
17. Dual eligibility for Medicare and Medicaid

# Annual Training Schedule: [www.pahealthwellness.com](http://www.pahealthwellness.com)



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<b>For Providers</b>	<h2>Statewide Provider Training/Orientation Webinars</h2> <p>Welcome to PA Health and Wellness. We thank you for being part of our network of participating physicians, hospitals and other healthcare professionals.</p> <h3>Upcoming Provider Training Highlights</h3> <ul style="list-style-type: none"><li>● <a href="#">PA Health and Wellness CARE GAPS Value Based Programs for LTSS Providers</a>. There are multiple sessions of this training available <b>beginning August 1, 2023</b>. When registering use drop down to choose the date that works best for you.</li><li>● <a href="#">Part 2 PA Health and Wellness EVV/Missed Visit Compliance Value Based Programs for LTSS Providers</a> - There are multiple sessions of this training available. When registering use drop down to choose the date that works best for you.</li><li>● Evolent MSK Management Program Prior Authorization Process Education Webinar<ul style="list-style-type: none"><li>● <b>Thursday, February 22, 2024, 8:00 AM EST</b> <a href="#">Click here to register for February 22</a></li><li>● <b>Tuesday, February 27, 2024, 8:00 AM EST</b> <a href="#">Click here to register for February 27</a></li></ul></li></ul> <p>Note: When registering, you must use a valid email address and the TIN should be entered in XX-XXXXXXX format.</p> <h3>On Demand Webinars</h3> <p>Training at your finger tips! Access webinars anytime, anywhere by visiting one of our On Demand websites:</p> <ul style="list-style-type: none"><li>● 2024 <a href="#">Ambetter from PA Health and Wellness New Provider Orientation [Simulated]</a></li><li>● 2024 <a href="#">PA Health and Wellness New Provider Orientation [Simulated]</a></li></ul>
Login	
Become a Provider	
Pre-Auth Check	
Risk Adjustment	
Pharmacy	
Provider Relations	
Provider Resources	
Provider Claim Escalation	
OLTL Updates	
Quality Program	
Service Coordination Entities	
<b>Provider Training</b>	
ASAM Training	

# Provider Manuals: [www.pahealthwellness.com](http://www.pahealthwellness.com)



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## For Providers

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Become a Provider ▾

Pre-Auth Check ▾

Risk Adjustment

Pharmacy

Provider Relations

Provider Resources ^

Manuals, Forms and Resources

Reporting Communicable Diseases

Risk Adjustment/Patient Acuity Program

## Manuals, Forms and Resources

### New Biopharmacy/Buy and Bill PA Form

PA Health and Wellness (PHW) has recently implemented new Outpatient Biopharmacy/Buy and Bill forms that providers can use for J-code or medical benefit pharmacy requests. This new form will ensure that PHW clinical reviewers have all the necessary information to complete your Biopharmacy Prior Authorization. Along with this new form, please include any relevant medical records to ensure a timely determination on your Prior Authorization.

**Are you looking for Ambetter? Please visit the [Ambetter website](#).**

We will continue to add resources to this section over the next several months.

## Manuals

- [Wellcare by Allwell Provider Manual 2024 \(PDF\)](#)
- [Community HealthChoices Provider Manual 2023 \(PDF\)](#)
- [PA Health and Wellness CHC Billing Manual \(PDF\)](#)

# Community HealthChoices (CHC)

**Community HealthChoices (CHC)** is Pennsylvania's mandatory managed care program for dually eligible individuals and individuals with physical disabilities — serving more people in communities, giving them the opportunity to work, spend more time with their families, and experience an overall better quality of life.

CHC uses managed care organizations to coordinate physical health care and long-term services and supports (LTSS) for individuals 21 years of age and older who are dually eligible for Medicare and Medicaid (dual eligible), qualify for Medicaid long-term services and supports (LTSS) because they need the level of care provided by a nursing facility, or both.

## Want More Information?

- [www.healthchoices.pa.gov](http://www.healthchoices.pa.gov)
- [www.enrollchc.com](http://www.enrollchc.com); CHC Provider Hotline at 1-800-932-0939



## Long-Term Services and Supports (LTSS)

When a PHW CHC Participant (PTP) is nursing facility clinically eligible (NFCE) and qualifies for LTSS, PHW meets with the Participant to assess their needs through a **comprehensive needs assessment**.

As part of the comprehensive needs assessment, the Participant will get a **Service Coordinator** who will work with the Participant to create a **person-centered service plan (PCSP)**, which will include all of the services the Participant needs, whether or not PHW covers the services.

**LTSS** include services in the community and in nursing homes or other institutions, and help Participants live where they want to and also support where they want to work.

## Comprehensive Needs Assessment

The comprehensive needs assessment includes a review of physical health, behavioral health, LTSS, caregiver, and other needs. The assessment will also include talking about preferences, goals, housing, and informal supports:

Situation	Timeframe for PHW Assessment
Nursing facility clinically eligible (NFCE) but not getting LTSS at time of enrollment	Within 5 business days from start date
PTP already has a PCSP and is getting LTSS.	Within 180 days from start date of CHC or within 5 days of a clinical eligibility redetermination
PTP requests assessment	Within 15 days of request
Last comprehensive needs assessment was 12 or more months ago	All PTP receiving LTSS must have a new comprehensive needs assessment at least every 12 months
PTP has trigger event	Within 14 days of the trigger event or sooner based on health status/needs

## Role of the Service Coordinator (SC)

- The SC works with the Participant to create a PCSP and keep it up to date & get all the services and supports listed in the PCSP.
- SC will help Participants get both LTSS and other covered and non-covered medical, social, housing, educational, and other services and supports listed in the PCSP.

The Provider identified on the PCSP is responsible supervising, coordinating, and providing authorized services. The Provider will also work with Service Coordinator(s) to address necessary services and supports and participate in the PCSP to ensure continuity of the Participants' needs.

**To contact a PHW Service Coordinator, please call 1-844-626-6813.**

## Person Centered Service Plan (PCSP)

**The Person Centered Service Plan (PCSP)** is a written plan for each Participant receiving LTSS. The PCSP addresses:

- How the Participant's physical, cognitive, and behavioral health needs will be managed
- How the Participant's LTSS needs will be coordinated

PHW will review and approve the PCSP and will notify the LTSS Providers selected that they are approved to provide the services and supports in the PCSP and the amount and type of service they should provide.

Providers cannot provide the LTSS services in a PCSP until they have the approval from PHW.

## Prior Authorizations & Utilization Review

Submit your Prior Authorization requests online through the Secure Provider Web Portal:  
[Provider.PAHealthWellness.com](https://www.pahealthwellness.com)

Other methods of submitting Prior Authorization requests:

- Call the Medical Management Department at 1-844-626-6813
- Fax prior authorization requests utilizing the Prior Authorization fax forms located here:  
<https://www.pahealthwellness.com/providers/resources/forms-resources.html>
- PA Health & Wellness clinical staff will request clinical information minimally necessary for clinical decision making.

For questions regarding an authorization, contact PHW by phone, email ([authorizations\\_pa@pahealthwellness.com](mailto:authorizations_pa@pahealthwellness.com)) or via secure message in HHAeXchange.

## Medically Necessary

Medically Necessary (also referred to as Medical Necessity) is defined as being compensable under the MA program and meeting any one of the following standards:

- That will, or is reasonably expected to, prevent the onset of an illness, condition, injury or disability
- That will or is reasonably expected to reduce or ameliorate the physical, mental or developmental effects of an illness, condition or disability
- That will assist the recipient to achieve or maintain maximum functional capacity in performing daily activities, taking into account both the functional capacity of the recipient and those functional capacities are appropriate of recipients of the same age.
- Will provide the opportunity for a Participant receiving LTSS to have access to the benefits of community living, to achieve person-centered goals, and live and work in the setting of his or her choice.

## Administrative Processes

PHW's administrative processes include but are not limited to Coordination of Benefits, timely filing, authorizations, Identification and referral for mental health, drug, alcohol and substance use services, PHW's Lock-In Program, and Encounter Data reporting, and more.

**PHW's 2024 "PA Health & Wellness Administrative & Other Processes" webinar will be held later in the year.**

**<https://www.pahealthwellness.com/providers/provider-training.html>**

**We also invite you to view a recording of our previous training below:**

- Administrative & Other Processes – August 2023:

**<https://register.gotowebinar.com/register/6775752937827261533>**

## Dual Eligibility: Coordination of Benefits

Providers will not have to obtain prior approval from PHW for Medicare covered services.\*If PHW becomes the primary payer (non-covered service by primary, primary benefits exhausted, etc.), prior-authorization must be obtained timely from PHW.

Any other insurance, including Medicare, is always primary to Medicaid coverage. PHW, like all Medicaid programs, is always the payer of last resort.



## **Provider Responsibilities: Non-Discrimination**

Network Providers are prohibited from intentionally segregating or discriminating against Participants in any way on the basis of race, color, creed, sex, religion, age, national origin, ancestry, marital status, sexual orientation, gender identity, language, MA status, income status, program participation, health status, disease or pre-existing condition, anticipated need for healthcare or physical or mental disability, except where medically indicated.

PA Health & Wellness will ensure that inclusiveness and fairness are a part of all of our activities. We will be proactive in our efforts to extend our services and programs to our Limited English Proficiency (LEP) Participants.

## **Provider Responsibilities: Accessibility Requirements**

**PA Health & Wellness follows the accessibility requirements set forth by applicable regulatory and accrediting agencies.**

- PA Health & Wellness monitors compliance with these standards on an annual basis and will use the results of appointment standards monitoring to ensure adequate appointment availability and reduce unnecessary emergency room utilization.

**Providers are required to comply with Americans with Disabilities Act (ADA) accessibility guidelines.**

- Providers should also make efforts to provide appropriate accommodations such as large print materials and easily accessible doorways.

## Provider Responsibilities: Cultural Competency

**Cultural Competency** within PA Health & Wellness is defined as the willingness and ability of a system to value the importance of culture in the delivery of services to all segments of the population. Cultural Competency is developmental, community focused, and family oriented.

The road to developing a culturally competent practice begins with the recognition and acceptance of the value of meeting the needs of our Participants.

PA Health & Wellness is committed to helping each Provider reach this goal to demonstrate **Cultural Competency, Linguistic Competency, and Disability Competency.**

# Cultural Competency

PHW's 2024 "Cultural Awareness & Sensitivity" training will be held in April 2024.

We also invite you to view a recording of our previous trainings:

- "Cultural Awareness & Sensitivity" - April 2023 here:  
<https://register.gotowebinar.com/register/1310901971338736991>

# Alzheimer's Disease & Related Dementias

## What is Dementia?

- Dementia is not one single disease
- Dementia is not a normal part of aging
- “Dementia falls under the umbrella term for loss of brain functioning that impairs thinking, emotions, and behavior.” (Brawley, 2006, pg.18)
- Many are progressive and irreversible

## Did You Know?

Dementia literally means "away from mind" and is used to describe a group of symptoms and behaviors (Care for You Inc., n.d.)

## What causes Dementia?

- Damage to brain cells
- How the damage occurs differs from one type of dementia to the next

## Alzheimer's Disease & Related Dementias

PHW's 2024 "Understanding the Basics of Dementia" webinar will be held later in the year. <https://www.pahealthwellness.com/providers/provider-training.html>

We also invite you to view a recording of our previous "Understanding the Basics of Dementia" from September 2023:

<https://register.gotowebinar.com/register/6803945515475204190>

## Complaints & Grievances

PA Health & Wellness recognizes that there are times when participants and providers may not be satisfied with a matter handled by PA Health & Wellness.

- Participants have the right to file a **\*complaint** or **grievance** related to that matter, and Providers have a right to file a **\*dispute** or **appeal**.

### Who can file a Participant complaint or grievance?

- The Participant
- The Participant's designated authorized representative
- The Participant's Provider with written authorization from the participant to file the complaint on their behalf.

**\*This excludes claims reconsiderations or appeals.**

# Complaints & Grievances

## PHW Complaint and Grievance Unit

- Phone: **1-844-626-6813**
- Fax: 1-844-873-7451
- Email: **[PHWComplaintsandGrievances@PaHealthWellness.com](mailto:PHWComplaintsandGrievances@PaHealthWellness.com)**
- Mailing address:

**Attn: Complaints and Grievances Unit**

**1700 Bent Creek Blvd**

**Suite 200**

**Mechanicsburg, PA 17050**

*For more details and forms related to the complaint, grievance, dispute or appeal process – please visit our website at [www.pahealthwellness.com](http://www.pahealthwellness.com).*



## Quality Improvement Program (QIP)

**Scope:** To address the quality of clinical care and the quality of services provided to PHW Participants.

**Provider's Role:** Providers and practitioners are required to cooperate with Quality Improvement (QI) activities and allow PHW to use their performance data.

Focus on Individuals	Whole Health	Active Local Involvement
<p><b>Priorities</b></p> <ul style="list-style-type: none"> <li>Well-Coordinated, Timely, Accessible Care Delivery</li> <li>Participant Healthy Decisions</li> <li>Home and Community Connection</li> <li>Right Care, Right Place, Right Time</li> <li>Participant Engagement</li> <li>Provider Engagement</li> <li>Participant Satisfaction with Provider and Health Plan</li> </ul>	<p><b>Priorities</b></p> <ul style="list-style-type: none"> <li>Meaningful Use of Data</li> <li>Prevent and Manage Top Chronic Illnesses</li> <li>Screen for Unmet Needs</li> <li>Remove Barriers to Care; Make It Simple to Get Well/Stay Well/Be Well</li> <li>Coordination of Care Across the Health Care Continuum</li> <li>LTSS Quality of Life</li> </ul>	<p><b>Priorities</b></p> <ul style="list-style-type: none"> <li>Local Partnerships</li> <li>Population Health Improvement</li> <li>Preventive Health and Wellness</li> <li>Opioid Misuse Prevention and Treatment</li> <li>Address Social Determinants of Health</li> <li>Health Equity/Disparity Reduction</li> <li>Multi-Cultural Health</li> </ul>

## Quality Improvement Program (QIP) & Performance Improvement Projects (PIPs)

1. PA Health & Wellness reviews and adopts an annual QI Program and Work Plan aligned with PA Health & Wellness' vision and goals.
2. The QI Department implements quality/risk/utilization management approaches to problem identification with the objective of identifying improvement opportunities.
3. PIPs, focused studies, and other QI initiatives are designed and implemented. Current PIPs include Strengthening Care Coordination and Nursing Home Transitions.
4. The Healthcare Effectiveness Data and Information Set (HEDIS)<sup>®</sup> is the primary set of measures used in QI activities.

## Provider & Quality Issues

PHW hosts two webinars annually to present and discuss issues identified through Provider Relations, Provider Services, or through our Quality Management Process.

- PHW’s 2024 training will be held in May.

<https://attendee.gotowebinar.com/register/8605579963950525196>

**We invite you to view a recording of our 2023 training at any time:**

“Quality Management Processes and Issues & Provider Relations Issues” – MAY 2023:

<https://register.gotowebinar.com/register/212592109771958876>

*To suggest topics to add to this upcoming webinar please email us at [providertraining@pahealthwellness.com](mailto:providertraining@pahealthwellness.com).*

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- Medicare Model of Care (MOC) Training Attestation
- HCBS Training Attestation**
- Provider Updates
- Risk Adjustment

## Home and Community Based (HCBS) Training Attestation

I hereby attest that I have completed the PA Health & Wellness 2022 Home and Community Based Provider training.

Name of Individual Completing Attestation \*

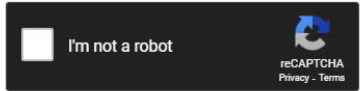
Group or Practitioner Name \*

Street Address \*

Phone Number \*

Email Address \*

Tax ID Number(s) - Please include all Tax ID Numbers that you are representing when completing this form: \*



## Plan Contact Information

Provider Relations: [PHWProviderRelations@PAHealthWellness.com](mailto:PHWProviderRelations@PAHealthWellness.com)

Provider Data Updates: [PHWProviderData@PAHealthWellness.com](mailto:PHWProviderData@PAHealthWellness.com)

Provider Training: [ProviderTraining@PAHealthWellness.com](mailto:ProviderTraining@PAHealthWellness.com)

Authorizations: [Authorizations\\_PA@PaHealthWellness.com](mailto:Authorizations_PA@PaHealthWellness.com)

Complaints & Grievances: [PHWComplaintsandGrievances@PaHealthWellness.com](mailto:PHWComplaintsandGrievances@PaHealthWellness.com)

Contracting: [PHWContracting@PAHealthWellness.com](mailto:PHWContracting@PAHealthWellness.com)

Critical Incident Reporting: [Cireports@PaHealthWellness.com](mailto:Cireports@PaHealthWellness.com)

Provider Services: **844-626-6813**



**Thank you for completing  
your annual training  
requirement!**