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GOVERNOR

TERRY F. WHITE
SECRETARY

MEMORANDUM

TO: AAA Directors **NOTICE#:** 082903-2-I-SWCBS

FROM: Terry White
Secretary

DATE: August 28, 2003

SUBJECT: Notice of Instruction: Care Plan Review Procedures

This memorandum is in response to the care plan review procedures submitted by each of the Area Agencies on Aging (AAAs). Department staff has reviewed the procedures and discussed proposed recommendations. The wide variance in procedures indicates need for more standardization. In the near future, the Department will be forming a workgroup to focus on at least four areas, including predicting and controlling cost, quality of care, standardization of client services statewide, and cost effective services. However, our immediate goal is to provide the necessary guidance to assist each planning and service area (PSA) to effectively control cost. Thus, this guidance applies initially and immediately to PSAs with budget deficits in the Aged/Disabled, Adult Medicaid Waiver (MW).

Area Agencies on Aging and Lead Agencies will take the following actions:

1. During semi-annual care plan reviews and annual assessments, case managers will assure the following:
 - a. The care plan services are consistent in quantity and frequency with the client's assessed needs.
 - b. The care plan includes non DOEA-funded services and incorporates assistance from caregivers and other family members when feasible.
 - c. The care plan includes services funded by the State Medicaid Plan and the Older Americans Act (OAA) when appropriate.
2. When care plan service costs exceed the statewide budget average (based upon the attached care plan cost data), the case manager supervisor will request the AAA's review and approval of the care plan. The AAA, in partnership with CARES, will review and approve the care plan. There must be no MW care plan adjustments based solely upon costs.
3. On a monthly basis, the Lead Agency and the AAA will conduct quality assurance monitoring. Client files will be reviewed to ensure transfer of appropriate service costs to non DOEA-funded community resources, the State Medicaid Plan and other programs, including OAA and Local Service Programs.

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4. On a monthly basis, the AAA will send the Department the surplus/deficit report in accordance with the MW Specialist contract and the DOEA Master Agreement.
5. As an option, the AAA may consider negotiating rate reduction agreements with service providers.

After evaluating MW service cost over any three-month period and the results indicate a deficit in excess of the amount allowed by contract, the AAA executive director must develop a plan to comply with the spending authority agreement. Reductions of services and caseloads in State General Revenue programs to free up funds for transfer to MW should also be considered. The Department will offer an opportunity for transfer of Community Care for the Elderly and Home Care for the Elderly funds into MW in the 2nd quarter of the State Fiscal Year. It will be incumbent upon the AAA to seek DOEA approval before implementing the plan. If you have questions, please contact your OMC Manager.