



## Missouri Department of Health and Senior Services

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### MEMORANDUM FOR HOME AND COMMUNITY BASED SERVICES STAFF AND STAKEHOLDERS

FROM: Erica Keller, Bureau Chief *Erica Keller*  
Bureau of Systems and Data Reporting

SUBJECT: Upcoming Electronic Case Management System Transition

This memorandum serves to notify Home and Community Based Service (HCBS) providers of the upcoming transition from CyberAccess Web Tool to a new Electronic Case Management System (ECMS).

The new system aims to improve operational efficiency and increase functionality to support the growing HCBS population. The system will combine the five separate systems the Division of Senior and Disability Services (DSDS) uses into one streamlined and modern solution.

DSDS is excited to announce the new system is scheduled to launch and replace CyberAccess Web Tool on February 3, 2025.

Below are key items providers should begin preparing for during this transition phase. Additional information pertaining to the implementation of the ECMS will be forthcoming in future memorandums.

#### Training

Provider staff should be prepared to review all training materials and complete virtual training courses prior to the ECMS launch. Training materials and virtual training will be made available throughout December 2024 and January 2025.

The ECMS has incorporated many enhancements requested by providers. Key features to be covered in training include, but are not limited to:

- Online referral and change request submissions.
  - Referrals and change requests will populate directly into participant records and allow providers to track the progress of submissions.
- Automated e-mail notifications will be sent to the contact email address on file with MMAC when care plans are updated.
  - DSDS recommends providers ensure the contact email is the preferred address.
- Online care plan acceptance capabilities by the provider.
- Streamlined provider reassessment processes.

### Care Plan Calculations

The new enhanced system functionality of the ECMS has allowed DSDS to update the approach used to total authorized care plan units. This method will more accurately reflect the identified needs of the participant. It will also support compliance with federal reporting requirements (i.e, 1915(c) Waiver reporting, [Access Rule](#) provisions, and [Electronic Visit Verification](#)).

Currently with CyberAccess Web Tool, all tasks are rounded based on the tasks with the highest frequency, despite the potentially differing frequencies (and durations) of other tasks. This leads to increased rounding of units and underutilization of units that are not directly reflective of a task.

The ECMS will allow each task to be calculated based on the actual number of days per week needed for each individual task. This will ensure the person-centered care plan is more accurate.

On or after February 3, 2025, upon reassessment or care plan change, participants may see a decrease or increase in their total monthly units. However, the tasks on the care plan will continue to reflect the participant's identified unmet needs. In most cases, the participant is likely not utilizing existing rounded units as they are not directly tied to a specific task or frequency.

Providers are encouraged to discuss this change with their participants, where necessary, to ensure understanding. DSDS staff will discuss this change with participants at reassessments and during change requests beginning February 3, 2025, with the implementation of the ECMS. As always, participants and providers are encouraged to contact DSDS if person-centered care plans do not meet participants' needs.

Questions regarding this memorandum should be directed to the Bureau of Systems and Data Reporting (SADR) via e-mail at [HCBS.Systems@health.mo.gov](mailto:HCBS.Systems@health.mo.gov) .

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