



Missouri Department of Health and Senior Services

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MEMORANDUM FOR ALL HOME AND COMMUNITY BASED SERVICES PROVIDERS

FROM: Celesta Hartgraves, Director *Celesta Hartgraves*
Division of Senior and Disability Services

SUBJECT: Important Clarification of Provider Reassessment Process

As the number of Home and Community Based Services (HCBS) providers participating in the provider reassessment process continues to grow, it is increasingly important to adhere to the requirements set forth by the Division of Senior and Disability Services (DSDS). The purpose of this memorandum is to provide clarification of requirements and reiterate the information available on the DHSS website at <http://health.mo.gov/seniors/hcbs/reassessmentprocess.php>. While the process has not been modified, it is recommended that all HCBS providers assisting in the reassessment process review the [Participation Requirements](#) and the [Reassessment Process information](#) to ensure understanding and compliance.

Reassessment Lists

Participating HCBS providers shall only reassess those participants indicated on their list obtained via the HCBS Reassessment SharePoint site. Standardized criteria are applied to determine assignments in order to ensure consistency throughout the state. It is not appropriate to reassess participants authorized for services with your agency without consulting the current assignment list on the SharePoint site. HCBS providers will not bill for any reassessment conducted for a participant who was not on their assignment list unless the change in assignment was preapproved by DSDS. Any questions concerning the list should be addressed prior to completing the reassessment.

Reassessment List Updates

It is expected that HCBS providers notify DSDS as soon as they become aware of a change impacting the reassessment lists. Providers should reference the [Provider Reassessment Contact Information](#) and utilize the [HCBS Reassessment Communication](#) form when communicating requests. If a provider agency has a name change or withdraws from the provider reassessment process, the HCBS provider must notify DSDS and [Missouri Medicaid Audit and Compliance](#) (MMAC) immediately to ensure information remains accurate and reassessments are assigned appropriately.

Completed Reassessments

All reassessment information and related documentation must be uploaded into the HCBS Web Tool no later than the 15th day of the month the reassessment is due. Notification to the [DSDS Regional Evaluation \(REV\) Team](#) should occur immediately following completion of the data entry and under no circumstances should

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reassessment information be held for entry. Failure to upload appropriate information and contact the REV Team in a timely manner may result in a reduction in the number of reassessments assigned for completion.

Notification Responsibility

In instances in which unforeseen circumstances prevent an HCBS provider from being able to complete reassessments as assigned, the REV Team must be notified immediately in order to ensure there are no gaps in service authorization. This notification should take place before the 15th day of the month the reassessment is due to allow adequate time to verify participant needs continue to be met. Consistently being unable to complete the reassessments assigned to an HCBS provider may result in a reduction in the number of reassessments assigned for completion.

Participant Demographic Information

As representatives of DSDS, HCBS providers have a responsibility to review all demographic information available and make updates as appropriate. This includes but is not limited to, telephone and address information. Demographic information should be updated at the time of reassessment or at any point in which updated information becomes available.

As a reminder information is available on the [DHSS website](#) and should routinely be referenced by HCBS providers. Any questions regarding this memorandum should be directed to the HCBS Systems and Data Reporting Unit at providerreassessments@health.mo.gov.

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