

Council on Aging of Central Oregon (COA) & APD D10 OPI-M PROCESS
Updates 4/30/2024

IMPLEMENTATION TIMELINE:

Phase One: No later than June 3, 2024: (will be adjusted due to DHS timeline changes)

● **The process used to identify the priority individuals:**

1. Beginning in June, 2024, AAA will review the waitlist and identify those with the highest needs based on the risk score generated from the existing OPI risk assessment tool.
2. AAA will identify current OPI consumers who have been assessed as having an SPL of 1-10. Those with an SPL of 10-17 will be added to the program following review of consumers on the OPI waitlist. Also, current consumers who are being dropped by their current service provider will also be prioritized.
3. Those identified will be shared to APD via established TEAMS channel in batches, as identified below:
 - Month 1: June: 10 consumers (area dependent)
 - Month 2: July: 10 consumers (area dependent)
 - Month 3: August: 20 consumers (area dependent)

● **The process used to identify any additional groups:**

1. Beginning in June, 2024, AAA will conduct outreach to culturally specific organizations with translated materials in order to educate those providers of the OPI-M program. This includes specifically targeted outreach to Title VI partners and Tribal Elders.
2. AAA will connect with all family caregiver clients and will be contacted to review and explain the OPI-M program to glean interest and provide programmatic information.

● **The referral process between AAA and APD:**

- Month 1: June: 10 consumers (area dependent)
 - Month 2: July: 10 consumers (area dependent)
 - Month 3: August: 20 consumers (area dependent)
2. Referrals will be made to APD from the AAA via the established TEAMS channel through the developed Excel spreadsheet/template. *See communication process below*
 3. In September, 2024, any additional waitlist or current OPI consumers not currently being assessed for OPI-M will be referred to APD via established TEAMS channel.

4. Following the waitlist and current consumer caseload, the AAA and APD agree to ten (10) referrals a month (depending on area, could be adjusted up depending on capacity) through the established TEAMS channel. The number of referrals per month will be reviewed and adjusted given AAA and APD capacity and the implementation timeline of the program.

- **Target completion date for phase 1 will be November 2024. (dependent on rollout timeline from APD)**

Phase Two: No later than December 2024: (will be adjusted due to DHS timeline changes)

- **The process to screen and offer to current OPI consumers: **NEED SCRIPT FOR STAFF****
 1. Having identified the current OPI consumers at greatest risk during Phase One, those with previously identified SPL's will be moved onto the program as soon as possible given their location and AAA capacity. This could occur prior to their annual reassessment.
 2. Current OPI clients will be provided information regarding a warm handoff with APD as well as how the screening and onboarding process occurs once that has been established at the state level. This will occur via the established TEAMS channel through the developed Excel spreadsheet/template. See *communication process below*
- **The process to identify how new individuals contacting ADRC/AAA office will be screened and offered OPI-M:**
 1. ADRC staff will be provided with training and the talking points in order to better understand the OPI-M program. If deemed appropriate, any incoming calls/in-person requests that appear to be appropriate for the program will be routed to AAA client services staff for deeper screening purposes. If deemed appropriate and interested in OPI-M, the OPI Risk Assessment Tool will be utilized (until another tool is created and provided by the state) and consumers will be added to the queue.
 2. List will be filtered by highest score/need and sent to APD in a monthly batch as identified above (subject to change given capacity and need). Batch will be sent via the established TEAMS channel through the developed Excel spreadsheet/template. See *communication process below*
- **This process will be reviewed throughout implementation and will be adjusted between the AAA and APD as needed, with formal review occurring in December 2024 to address any potential differences between this Phase and Phase One.**

Phase Three: No later than December 2024: (will be adjusted due to DHS timeline changes)

- **The process to screen and offer to current TXIX consumers: NEED SCRIPT FOR STAFF Choice Counseling will need to be offered through eligibility as well as through OEP at the support of Central Office, including the need for training for all entry points/offices.**
 1. APD will begin offering OPI-M as a service option when current LTSS (TXIX & SPPC) in-home consumers are due for an annual reassessment. APD will develop a workflow for internal referrals, LTSS to OPI-M. This workflow will be DHS 0078 (01.19) completed by October 2024.
- **The process to screen and offer new individuals contacting the APD office: NEED SCRIPT FOR STAFF**
 1. At the local level, support staff will answer the calls, ask the standard set of questions and then will schedule for a LTC intake with an eligibility worker and placed on the log for a call from an ECM. During the LTC intake, OPI-M will be offered as a service option.
 2. If possible, those that are denied in ONE could be reviewed and added to OPI-M prior to public launch.

Phase Four: No later than March 2025

- **At time of public launch, ongoing monthly meetings between the AAA and APD will occur to adjust this implementation plan as needed.**
 1. Marketing materials from the state will be needed prior to public launch.
 2. Central Office will be notified at least 30 days in advance if the deadlines outlined in phases 1-4 cannot be met.

COMMUNICATION PLAN

NOTE: TEAMS to be utilized throughout phases 1-4, which is ideal and needed in order to streamline this work from an efficiency standpoint. If TEAMS is not ready in time for phase 1, information will be shared through the established opim@councilonaging.org email as noted below until TEAMS is ready.

Situation:	Communication Process/Method:	Process Notes
ADRC receives consumer contact and handles it	<ul style="list-style-type: none">● Consumer requests Medicaid – consumer referred to APD office and to options counseling if appropriate.	NEED A DATE OF REQUEST! Warm handoff will be completed through TEAMS: Consumer name

	<ul style="list-style-type: none"> • Consumer requests OPI – COA staff determines referral for OPI or OPI-M and makes referral accordingly. • Consumer referred to COA case manager for OPI or APD office for OPI-M. Consumer also referred to options counseling if appropriate. <p>Warm hand-off to APD office via TEAMS spreadsheet/consistent template for referrals to APD.</p>	<p>DOR DOB SSN Contact Info</p> <p>APD to build TEAMS pages per town for our team</p> <p>Will let us know how many SPPC people they currently have on. SPPC closes in 30 days if you don't hire a HCW. Do we have to find a caregiver for this program? APD is not required but will help if it is a difficulty. Can identify someone to do it for you.</p>
ONE denies and referral needed to APD		Potential in Phase 3 for APD to reach out to denied consumers regarding OPI-M
ADRC referral to APD for eligibility determination	Repeat process established above for OPI-M referrals to APD office.	
APD denies for OPI-M, refers [back] to ADRC	<p>APD referrals to ADRC via TEAM</p> <ol style="list-style-type: none"> 1. Consumer initiated from COA office and was referred to APD and then determined ineligible- Warm hand-off back to COA. Reply to TEAMS referral from COA to let staff know the consumer was 	

	<p>determined ineligible. The Excel template should include a notes section. COA staff can also see OACCESS narrative for additional details. APD staff need to make sure they narrate in OACCESS.</p> <p>2. Consumer initiates from APD office and is determined ineligible - Warm hand-off to COA office. Utilize established TEAMS spreadsheet with needed information as established above.</p>	
<p>APD approves for OPI-M, refers to COA</p>	<p>APD staff will utilize designated TEAMS Excel to communicate approvals to AAA office.</p> <p>1. Utilize a consistent template via established TEAMS channel</p>	<p>Secondary option to use OACCESS to see cases transferred from APD office to AAA and review ticklers (training needed for AAA staff).</p> <p>Email box: opim@councilonaging.org Available as needed, TEAMS is required</p> <p>Warm handoff= through TEAMS If not, through email Case transfer for current clients Case transfer to COA=via email/TEAMS to include the supervisor with acknowledgement that it has occurred. Will identify what COA CM will be</p>

		covering what territories and/or supervisor will assign based on caseload.
Annual redetermination due. COA refers to APD	<p>APD CM will remain on the case as a worker, as well as AAA CM.</p> <p>Cases to be kept in the AAA OPI branch. Spreadsheet to be maintained in Teams.</p>	<p>Case will live in the AAA OPI Branch Code.</p> <p>Bend OPI Branch 0912</p>
Annual redetermination: client is eligible.	<p>APD staff will utilize designated TEAMS spreadsheet/communication lines to communicate redetermination approvals to AAA office. Use unique subject line (as needed): OPI-M redetermination approved</p> <p>Use OACCESS narration for communication between APD and AAA CMs.</p> <p>APD office needs to send consumer notification regarding re-determination approval.</p> <p>APD office does a new assessment. AAA reviews service plan with the consumer to determine if any changes need to be made.</p>	
Annual redetermination: client is ineligible.	<p>APD staff will utilize designated TEAMS spreadsheet/communication line to communicate redetermination when</p>	<p>Same notice and contested case hearing rights requirements as with Medicaid program.</p>

	<p>consumer is no longer eligible to AAA office. Use unique subject line (as needed): OPI-M redetermination – consumer ineligible</p> <p>Use OACCESS narration for communication between APD and AAA CMs.</p> <p>APD office sends consumer notification regarding ineligibility and provides ADRC information for referral.</p>	
<p>Annual redetermination: client determined eligible for Medicaid.</p>	<p>Consumer receives choice to continue with OPI-M or switch to Medicaid.</p> <p>If a consumer chooses to continue with OPI-M, the annual redetermination process above is followed. If the consumer chooses Medicaid, the process below is followed.</p>	
<p>Annual redetermination: client determined eligible for Medicaid and accepts it.</p>	<p>APD staff will utilize designated TEAMS spreadsheet/communication lines to communicate redetermination when the consumer is no longer eligible to AAA office. Use unique subject line (as needed): OPI-M</p>	

	<p>redetermination – consumer ineligible - accepted Medicaid</p> <p>AAA office notifies in-home care agency of change and coordinates with APD so the consumer doesn't lose their provider. AAA makes necessary updates/changes to the case in OACCESS and transfers case to appropriate APD office.</p> <p>APD office sends consumer appropriate notices and makes necessary updates/changes to case in OACCESS.</p>	
<p>Services CM attending eligibility assessment- initial</p>	<p>Monthly meetings with APD and AAA CM's scheduled for the X Wednesday of every month from X-X beginning XXXX</p> <ul style="list-style-type: none"> ● Will attempt to schedule quarterly eligibility intake appointments if possible 	<p>Address this once we have more information regarding how many APD staff will be doing this work to determine if it'll be feasible from a scheduling standpoint.</p>
<p>Services CM attending eligibility assessment- annual</p>	<p>Monthly meetings with APD and AAA CM's scheduled for the X Wednesday of every month from X-X beginning XXXX</p> <ul style="list-style-type: none"> ● All for time to share information, update client changes and needs, etc. ● Venue to connect for annual redeterminations due the following month 	<p>Address this once we have more information regarding how many APD staff will be doing this work to determine if it'll be feasible from a scheduling standpoint.</p>

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