|  |
| --- |
| **Support Plan Workflow reminders****Purpose:** To notify mentors of important information for MnCHOICES support plan workflow. Mentors must share background, workflow instructions, and risk information with staff in their agency. Background:Following the November MnCHOICES release, DHS has received several MnCHOICES Help Desk forms regarding the support plan signature sheet completion requirements are showing not met, when in fact the signature sheet attestations were completed. If a support plan is moved to "In Progress - Assessment Complete" status before the assessment is in one of the complete statuses (Completed-Ready for MMIS, Pending MMIS Response, or Approved by MMIS), support plan completion requirements are impacted. The support plan is not pulling needed information from the assessment in the proper order. This impacts the support plan signature sheet completion requirements showing they are not met. DHS would like to remind users the importance of following the appropriate workflow to avoid this issue. Support plan workflow instructions:Support plans must not be moved to “In Progress - Assessment Complete” status until the assessment is in one of the following complete statuses:* Completed-Ready for MMIS
* Pending MMIS Response
* Approved by MMIS

**Support plan status information is referenced in the following MnCHOICES Help Center resources:** * Smart Guide: Support Plan – MnCHOICES Assessment v3, page 3.
* Smart Guide: Support Plan – MCO MnCHOICES Assessment v3, page 2.
* Smart Guide: Support Plan – HRA v4, page 2; page 9.

Risk if support plan workflow is not followed:If a support plan is moved to "In Progress - Assessment Complete" status before the assessment is in one of the complete statuses, the support plan signature sheet completion requirements will show as not met.* **Required workaround:**
1. Discard support plan.
2. Ensure assessment is in one of the complete statuses.
3. Create a new support plan.

For definitions of support plan statuses see MnCHOICES Help Center resource: Practice Guide: Support Plan v3, pages 9-10.**Questions:** MnCHOICES mentors use the [MnCHOICES Help Desk Contact Form, DHS-6979](https://urldefense.com/v3/__https%3A/edocs.dhs.state.mn.us/lfserver/Public/DHS-6979-ENG__;!!CwIvYz4dIaSa!Nge6vlfUlIgDevyWBmk-eLcIypOmBTd37Pp4PXaKjQEby_jlOtaxeyXs5sgi-HkbD1nC-1hijMU6zoDQ9T8aSIpTeGcKIw$) to submit their agency’s questions or concerns. **December 2024 Release Summary****Purpose:** To provide MnCHOICES mentors and users with the following update and release summary. **1.** **Resolved Current Functionality items:** * **MnCHOICES assessment: Functional assessment heading-Description:** The Supplemental Summary Chart report should have included each narrative summary in the MnCHOICES assessment. However, the chart did not show the health stability narrative.
	+ **Changes made:** The Health stability narrative in the Health Stability subsection, Wellbeing section of the MnCHOICES Assessment will display on the Supplemental Summary Chart printout between Cognitive abilities and Interventions.
* **Support plan heading-Description:** For CFSS budget on the about plan page of the support plan, the application used an old PCA T1019 unit rate of $4.45. This had not been updated to the current PCA/CFSS unit rate of $5.95. [**This is a critical functionality item.**]
	+ **Changes made:** The current PCA/CFSS unit rate of $5.95 will be used for the CFSS budget.
* **Support plan printout heading-Description:** The “Care Coordination Next Steps Indicator report” is a print option specifically in the SP—HRA and SP—MCO/MnA. The report did not show all information in some fields and showed information in fields where a user did not enter data in the HRA or MnCHOICES Assessment—MCO application. Also, the first page of the report showed “HRA" regardless of the type of support plan.
	+ **Changes made:** The “Care Coordination Next Steps Indicator report” now shows the following description, "This document is a tool for care coordinators to provide a high-level summary of some responses to elements contained in the Health Risk Assessment or MnCHOICES Assessment with staying healthy. The items below indicate the person requested assistance with follow-up and is not meant to replace required care coordination practice."DHS will provide futurecommunication once it is advised to begin use of the Care Coordination Next Steps Indicator report.
* **Support plan: Service agreement heading-Description:** When the program type was any value that is not “Other” and a user entered yes for “Is the person receiving other services,” a person’s other services incorrectly appeared on the service agreement.
	+ **Changes made:** "Other Services" that are added to Services that Support Me will not display in the Standard Service Agreement for All Programs or Type B Service Agreement printouts.

**2. Updated Current Functionality and Future Enhancements document items:** * **Support Plan: Services and supports, Service type – Services that support me-description:** A user cannot choose a consultation services provider in the support plan as a service provider for a person using CFSS.
	+ **(Updated) Directions:** In the support plan, choose “Add service or support.” Select “People and community organizations that support me,” and type in the organization’s name. Include a support description that includes the service details. Then, manually enter CFSS Consultation Services T1023 information in the service agreement for MMIS entry.
* **Support Plan: Services and supports, Service type – Services that support me-description:** For a person using CFSS, some services are not currently available for selection in the support plan.
	+ **(Updated) Directions:** In the support plan, choose “Add service or support.” Then, select “People and community organizations that support me,” and type in the organization’s name. Enter a support description that includes service details, including service type(s). Then, manually enter CFSS service information in the service agreement for MMIS entry. Service type(s) not available in MnCHOICES:
		- Budget — CFSS worker training & development S5116, UB, UD
		- Budget — CFSS extended services (1:1) T1019, UB, UC
		- Budget — CFSS extended services, complex (1:1) T1019, UB, UC, TG
		- Budget — CFSS reduction (1:1) T1019, UB, U5
		- Budget — CFSS reduction, complex T1019, UB, U5, TG
		- Budget — CFSS temporary increase (1:1) T1019, UB, U6
		- Budget — CFSS temporary increase, complex (1:1) T1019, UB, U6, TG
		- Budget — Continuation of benefits (1:1) T1019, UB, U4
		- Budget — Continuation of benefits, complex (1:1) T1019, UB, U4, TG
		- Budget — FMS fee T2040, UB, UA
		- Budget — Failed background study fee T2040, UB, UA, U6
		- Budget — CFSS personal care T1019, UB
		- Budget — CFSS personal care, complex T1019, UB, TG
		- Budget — CFSS goods and services T5999, UB
		- Agency — CFSS goods and services T5999, U9.

**3.** **Other changes made - not listed in the Current Functionality and Future Enhancements document:*** **Description:** The system required an update to implement rate and budget changes occurring January 1, 2025.
	+ **Changes made:** Rate and budget changes occurring January 1, 2025 were implemented. Information and resources about these changes are available on the [Long-term services and supports rate changes webpage.](https://urldefense.com/v3/__https%3A/mn.gov/dhs/partners-and-providers/news-initiatives-reports-workgroups/long-term-services-and-supports/ltss-rates/__;!!CwIvYz4dIaSa!KAXf7trziaqz5lFT_oQOOGpXhwpKDRrimNBYdFnHPW84MvIHNMdEhI0HGtZWUM0hJfOloZSl5l7lc2Im9JheWtqI2yhg4g$)
* **Description:** When using the print function within a Support Plan, MnCHOICES Assessment and Health Risk Assessment, the header and footer vary across all reports.
	+ **Changes made:** The application will generate a consistently formatted header and footer for all reports based on a uniform set of standards including logo, font, title, labels for person's name and Form ID, date printed, and page number.
* **Description:** For initial assessment forms,the calculation from the referral date to the activity date used to determine if the “reason for late assessment” and “reason for late assessment comments” fields display was based on 20 calendar days.
	+ **Changes made:** As a result of a legislative change (MN Statute 256B.0911 Subd. 17 (a)) from the 2024 session, the timeline for calculating when the “Reason for late assessment” and “reason for late assessment comments” fields display has been changed to 20 working days (does not include weekends or holidays). Holidays include the following DHS observed holidays:
		- New Year's Day
		- Martin Luther King Jr. Day
		- Presidents' Day
		- Memorial Day
		- Juneteenth
		- Independence Day
		- Labor Day
		- Veterans Day
		- Thanksgiving Day
		- Day After Thanksgiving
		- Christmas Day

\*When these holidays fall on a Saturday, the preceding day shall be a holiday. When these holidays fall on a Sunday, the following day shall be a holiday.**4.** **New additions to the Current Functionality and Future Enhancements document (2 additions which includes 0 critical functionality items):*** **Support plan signature-Description:** The Support Plan – Health Risk Assessment (SP – HRA) requires a signature even when a person cannot be located or refuses to complete an HRA. Support plans cannot be moved to “Plan Approved” status without a signature.
	+ **Directions:** Write "Unable to obtain signature, attempted multiple requests" on the signature sheet. Upload the signature sheet to the Support Plan – HRA and move to "Plan Approved" status.
* **Support plan printout-Description:** When a Support Plan – HRA or Support Plan – MCO MnCHOICES Assessment (SP—MCO/MnA) is created before a care coordinator or case manager is assigned to a person record, the organization phone number for the "I can call the following number if I am unable to reach my case manager/care coordinator" on the Support Plan Signature Sheet section might appear in the system but will not be shown on Support Plan printout.
	+ **Directions:** Write the organization phone number in this field of the Support Plan printout.
 |