FIRST REGULAR SESSION SENATE COMMITTEE SUBSTITUTE FOR

SENATE BILLS NOS. 70 & 128

100TH GENERAL ASSEMBLY

Reported from the Committee on Appropriations, March 7, 2019, with recommendation that the Senate Committee Substitute do pass.

0572S.07C

ADRIANE D. CROUSE, Secretary.

AN ACT

To repeal sections 208.909, 208.918, and 208.924, RSMo, and to enact in lieu thereof three new sections relating to personal care assistance services.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Sections 208.909, 208.918, and 208.924, RSMo, are repealed

2 $\,$ and three new sections enacted in lieu thereof, to be known as sections 208.909, $\,$

3 208.918, and 208.924, to read as follows:

208.909. 1. Consumers receiving personal care assistance services shall 2 be responsible for:

- (1) Supervising their personal care attendant;
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(2) Verifying wages to be paid to the personal care attendant;

5 (3) Preparing and submitting time sheets, signed by both the consumer 6 and personal care attendant, to the vendor on a biweekly basis;

7 (4) Promptly notifying the department within ten days of any changes in
8 circumstances affecting the personal care assistance services plan or in the
9 consumer's place of residence;

10 (5) Reporting any problems resulting from the quality of services rendered 11 by the personal care attendant to the vendor. If the consumer is unable to resolve 12 any problems resulting from the quality of service rendered by the personal care 13 attendant with the vendor, the consumer shall report the situation to the 14 department; [and]

15 (6) Providing the vendor with all necessary information to complete 16 required paperwork for establishing the employer identification number; **and**

17 (7) Allowing the vendor to comply with its quality assurance and

18 supervision process, which shall include, but not be limited to, bi19 annual face-to-face home visits and monthly case management
20 activities.

21 2. Participating vendors shall be responsible for:

(1) Collecting time sheets or reviewing reports of delivered services andcertifying the accuracy thereof;

24 (2) The Medicaid reimbursement process, including the filing of claims25 and reporting data to the department as required by rule;

26 (3) Transmitting the individual payment directly to the personal care27 attendant on behalf of the consumer;

(4) Monitoring the performance of the personal care assistance services plan. Such monitoring shall occur during the bi-annual face-to-face home visits under section 208.918. The vendor shall document whether the attendant was present and if services are being provided to the consumer as set forth in the plan of care. If the attendant was not present or not providing services, the vendor shall notify the department and the department may suspend services to the consumer.

35 3. No state or federal financial assistance shall be authorized or expended 36 to pay for services provided to a consumer under sections 208.900 to 208.927, if 37 the primary benefit of the services is to the household unit, or is a household task 38 that the members of the consumer's household may reasonably be expected to 39 share or do for one another when they live in the same household, unless such 40 service is above and beyond typical activities household members may reasonably 41 provide for another household member without a disability.

42 4. No state or federal financial assistance shall be authorized or expended
43 to pay for personal care assistance services provided by a personal care attendant
44 who has not undergone the background screening process under section 192.2495.
45 If the personal care attendant has a disqualifying finding under section 192.2495,
46 no state or federal assistance shall be made, unless a good cause waiver is first
47 obtained from the department in accordance with section 192.2495.

5. (1) All vendors shall, by July 1, 2015, have, maintain, and use a telephone tracking system for the purpose of reporting and verifying the delivery of consumer-directed services as authorized by the department of health and senior services or its designee. [Use of such a system prior to July 1, 2015, shall be voluntary.] The telephone tracking system shall be used to process payroll for employees and for submitting claims for reimbursement to the MO HealthNet

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54 division. At a minimum, the telephone tracking system shall:

(a) Record the exact date services are delivered;

(b) Record the exact time the services begin and exact time the services67 end;

58 (c) Verify the telephone number from which the services are registered;

(d) Verify that the number from which the call is placed is a telephonenumber unique to the client;

61 (e) Require a personal identification number unique to each personal care62 attendant;

(f) Be capable of producing reports of services delivered, tasks performed,
client identity, beginning and ending times of service and date of service in
summary fashion that constitute adequate documentation of service; and

66 (g) Be capable of producing reimbursement requests for consumer 67 approval that assures accuracy and compliance with program expectations for 68 both the consumer and vendor.

69 (2) [The department of health and senior services, in collaboration with 70other appropriate agencies, including centers for independent living, shall establish telephone tracking system pilot projects, implemented in two regions of 7172the state, with one in an urban area and one in a rural area. Each pilot project shall meet the requirements of this section and section 208.918. The department 7374of health and senior services shall, by December 31, 2013, submit a report to the 75governor and general assembly detailing the outcomes of these pilot projects. The report shall take into consideration the impact of a telephone tracking system on 76 77the quality of the services delivered to the consumer and the principles of 78self-directed care.

(3)] As new technology becomes available, the department may allow use
of a more advanced tracking system, provided that such system is at least as
capable of meeting the requirements of this subsection.

82 [(4)] (3) The department of health and senior services shall promulgate by rule the minimum necessary criteria of the telephone tracking system. Any 83 rule or portion of a rule, as that term is defined in section 536.010, that is created 84 under the authority delegated in this section shall become effective only if it 85 86 complies with and is subject to all of the provisions of chapter 536 and, if 87 applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to 88 89 review, to delay the effective date, or to disapprove and annul a rule are

subsequently held unconstitutional, then the grant of rulemaking authority andany rule proposed or adopted after August 28, 2010, shall be invalid and void.

92 [6. In the event that a consensus between centers for independent living 93 and representatives from the executive branch cannot be reached, the telephony 94 report issued to the general assembly and governor shall include a minority 95 report which shall detail those elements of substantial dissent from the main 96 report.

97 7. No interested party, including a center for independent living, shall be
98 required to contract with any particular vendor or provider of telephony services
99 nor bear the full cost of the pilot program.]

208.918. 1. In order to qualify for an agreement with the department, the vendor shall have a philosophy that promotes the consumer's ability to live independently in the most integrated setting or the maximum community inclusion of persons with physical disabilities, and shall demonstrate the ability to provide, directly or through contract, the following services:

6 (1) Orientation of consumers concerning the responsibilities of being an 7 employer[,] and supervision of personal care attendants including the 8 preparation and verification of time sheets. Such orientation shall include 9 notifying customers that falsification of attendant visit verification 10 records shall be considered fraud and shall be reported to the 11 department. Such orientation shall take place in the presence of the 12 personal care attendant, to the fullest extent possible;

13 (2) Training for consumers about the recruitment and training of personal14 care attendants;

15 (3) Maintenance of a list of persons eligible to be a personal care16 attendant;

17 (4) Processing of inquiries and problems received from consumers and18 personal care attendants;

19 (5) Ensuring the personal care attendants are registered with the family 20 care safety registry as provided in sections 210.900 to [210.937] **210.936**; and

21 (6) The capacity to provide fiscal conduit services through a telephone 22 tracking system by the date required under section 208.909.

23 2. In order to maintain its agreement with the department, a vendor shall 24 comply with the provisions of subsection 1 of this section and shall:

25 (1) Demonstrate sound fiscal management as evidenced on accurate 26 quarterly financial reports and **an** annual **financial statement** audit performed by a certified public accountant if the vendor's annual gross revenue is one hundred thousand dollars or more or, if the vendor's annual gross revenue is less than one hundred thousand dollars, an annual financial statement audit or annual financial statement review performed by a certified public accountant submitted to the department; [and]

(2) Demonstrate a positive impact on consumer outcomes regarding the
provision of personal care assistance services as evidenced on accurate quarterly
and annual service reports submitted to the department;

36 (3) Implement a quality assurance and supervision process that ensures37 program compliance and accuracy of records:

38 (a) The department of health and senior services shall
39 promulgate by rule a consumer-directed services division provider
40 certification manager course; and

41 (b) The vendor shall perform with the consumer at least bi-42 annual face-to-face home visits to provide ongoing monitoring of the 43 provision of services in the plan of care and assess the quality of care 44 being delivered. The bi-annual face-to-face home visits do not preclude 45 the vendor's responsibility from its ongoing diligence of case 46 management activity oversight;

47 (4) Comply with all provisions of sections 208.900 to 208.927, and the 48 regulations promulgated thereunder; **and**

49 (5) Maintain a business location which shall comply with any and
50 all applicable city, county, state, and federal requirements, verified by
51 the Missouri Medicaid audit and compliance unit.

52 3. No state or federal funds shall be authorized or expended if 53 the owner, primary operator, certified manager, or any direct employee 54 of the consumer-directed services vendor is also the personal care 55 attendant, unless such person provides services solely on a temporary 56 basis.

208.924. A consumer's personal care assistance services may be 2 discontinued under circumstances such as the following:

3 (1) The department learns of circumstances that require closure of a 4 consumer's case, including one or more of the following: death, admission into a 5 long-term care facility, no longer needing service, or inability of the consumer to 6 consumer-direct personal care assistance service; 7 (2) The consumer has falsified records; provided false information of
8 his or her condition, functional capacity, or level of care needs; or
9 committed fraud;
10 (3) The consumer is noncompliant with the plan of care. Noncompliance

11 requires persistent actions by the consumer which negate the services provided12 in the plan of care;

(4) The consumer or member of the consumer's household threatens or
abuses the personal care attendant or vendor to the point where their welfare is
in jeopardy and corrective action has failed;

16 (5) The maintenance needs of a consumer are unable to continue to be met17 because the plan of care hours exceed availability; and

(6) The personal care attendant is not providing services as set forth inthe personal care assistance services plan and attempts to remedy the situation

20 have been unsuccessful.