

413 - GAP IN CRITICAL SERVICES

EFFECTIVE DATE: 04/01/07, 10/01/15

REVISION DATE: 07/01/10, 01/08/14, 06/18/15

STAFF RESPONSIBLE FOR POLICY: DHCM OPERATIONS

I. PURPOSE

This Policy applies to ALTCS/EPD and DES/DDD (DDD) Contractors. This Policy establishes guidelines, criteria and timeframes for responding to and reporting of gaps in the provision of critical services provided to ALTCS members receiving Home and Community Based (HCBS) services.

II. DEFINITIONS

CONTINGENCY PLAN OR BACK-UP PLAN Includes information about actions that the member/representative should take to report any gaps in critical services.

CRITICAL SERVICES Include Attendant Care, Personal Care, Homemaking and Respite care.

GAP IN CRITICAL SERVICES The difference between the number of hours of home care worker critical services scheduled in each individual's HCBS care plan and the hours of the scheduled type of critical services that are actually delivered to the qualified individual.

MEMBER SERVICE PREFERENCE LEVEL Indication of the timeframe in which the member chooses to have a critical service gap filled if the scheduled caregiver of that critical service is not available.

III. POLICY

The Contractor shall implement policies and procedures to identify, correct, and track gaps in critical services as outlined in contract, AMPM Chapter 1600, and this Policy. These policies and procedures shall, at a minimum, cover the following areas:

- a. Information (verbally and in writing) to members on their right to receive services as authorized, including the right to have any gaps in critical services filled within two hours and the right to have a back-up caregiver to substitute when an unforeseeable gap in critical services occurs.

- b. Information to members on how to contact the Contractor, its Subcontractor or AHCCCS when a critical service is not provided as scheduled.
- c. At the time of the initial and quarterly reassessment case managers are required to assess a member's needs, including a member's service preference level if a gap in critical services were to occur and develop a contingency plan in the event of a gap in a member's critical services.
- d. The Contractor's process for providing services in the event of a gap in critical services. This shall include a description of the process used to ensure that the Contractor or its Subcontractor timely provide a back-up caregiver in the event of an unforeseeable gap in critical service.
- e. Tracking and trending gaps in critical services and grievances as a result of gaps in critical services.

A. GAP IN CRITICAL SERVICES REPORT

1. The Gap In Critical Services Report must be submitted semi-annually to the designated Operations and Compliance Officer as specified in Contract, Section F, Attachment F3, Contractor Chart of Deliverables.
2. The semi-annual report must contain at a minimum:

DATA

- a. Total number of authorized critical service hours
- b. Total number of authorized critical service hours that were gap hours
- c. Percentage of gap hours to authorized critical service hours
- d. Number of hours provided to resolve gaps
- e. Percentage of hours provided to resolve gaps to total gap hours reported
- f. Number hours to resolve gaps provided by unpaid caregivers
- g. Percentage of hours provided by unpaid caregivers to resolve gaps to total gap hours reported
- h. Number of members with gaps
- i. Percentage of members whose preference level were not met
- j. Total number of providers
- k. Monthly average number of providers reporting gaps
- l. Number of service gaps reported
- m. Data a. through l. above from the previous reporting period

NARRATIVE SUMMARY

- a. Percent of gap critical hours to authorized critical hours
- b. Grievances
- c. Trends identified – By GSA, County, and provider-specific issues
- d. Corrective Action Plans initiated
- e. Network Development
- f. Telephone Survey Results

B. GAP IN CRITICAL SERVICES LOG

1. The Contractor must monitor authorized critical hours and gaps in critical services on a monthly basis utilizing Attachment A-1 and A-2 Gap In Critical Services Log (GAP Log) and Authorized Critical Hours Log Form.
2. The Gap In Critical Services Log shall be submitted quarterly to the designated Operations and Compliance Officer as specified in Contract, Section F, Attachment F3, Contractor Chart of Deliverables with the data for each month during the quarter using Attachment A-1 and A-2.

C. TELEPHONE SURVEY REPORT

1. The Contractor must conduct telephone surveys quarterly, verifying that each contracted provider agency of critical services has availability after normal business hours, including weekends.
2. The results of the telephone surveys must be submitted semi-annually as part of the Gap in Critical Services Report to the designated Operations and Compliance Officer as specified in Contract, Section F, Attachment F3, Contractor Chart of Deliverables.
3. AHCCCS may at any time direct a Contractor to conduct Telephone Surveys more frequently.
4. A provider agency is considered available to address a member's potential gap in critical services if:
 - a. The provider immediately answers the phone call, or
 - b. The provider returns the phone call within 15 minutes.
6. See Attachment B for the Telephone Survey Instructions and Template.

IV. REFERENCES

- ALTCS/EPD Contract, Section D
- DES/DDD Contract, Section D
- Contract, Section F, Attachment F3, Contractor Chart of Deliverables
- AMPM Chapter 1600, Case Management
- Attachment A, Gap In Critical Service Log and Authorized Critical Hours Log Form Instructions
- Attachment A-1 and A-2, Gap In Critical Service Log and Authorized Critical Hours Log Form
- Attachment B, Telephone Survey Instructions and Template

**ATTACHMENT A, GAP IN CRITICAL SERVICE LOG AND AUTHORIZED CRITICAL HOURS
LOG FORM INSTRUCTIONS**

SEE THE ACOM WEBPAGE FOR ATTACHMENT A OF THIS POLICY

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**ATTACHMENT A-1 AND A-2, GAP IN CRITICAL SERVICES LOG AND AUTHORIZED CRITICAL
HOURS LOG FORM**

SEE THE ACOM WEBPAGE FOR ATTACHMENT A 1 AND A-2 OF THIS POLICY

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ATTACHMENT B, TELEPHONE SURVEY INSTRUCTIONS AND TEMPLATE

SEE THE ACOM WEBPAGE FOR ATTACHMENT B OF THIS POLICY

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