Q: How do we identify why a QSP stops providing services?
   A: QSP survey completed by the Resource Hub will attempt to answer this question.

Q: What is being done for difficult people and does behavioral health have plans?
   A: State staff from multiple divisions do interdisciplinary staffing for individuals with behavioral health needs. In addition, the 10% FMAP plan sets aside funding to contract with the behavioral health develop plans for HCBS consumers.

Q: Are there any mentorships, job shadowing, or on the job training to learn the skills that are needed to become a QSP?
   A: The QSP Resource Hub contract scope of work requires them to develop a QSP mentorship process.

Q: Can additional units be approved?
   A: Yes, policy allows for some exceptions. The individuals need to reach out to the Case Manager.

Q: An application for HCBS can take up to 45 days to process and it can’t be back dated for billing, but the nursing facilities can. Skilled nursing facilities will accept an individual knowing that their Medicaid application is pending because it can be back dated. HCBS you must wait until they are on Medicaid and can only bill when it’s signed. Can HCBS application be expediated?
   A: This process is dictated by federal rules. Aging Services will continue to work with the eligibility staff to expediate applications.

Q: Can we look at other states to better understand time from referral to services: what is the best practice?
   A: This is a good idea. Aging Services is trying to engage with other states to learn best practices.

Q: We need to educate medical doctor, nurse practitioners and primary care providers about services and how to access. How does DHS get access to these providers?
   A: Aging Services agrees that this is an issue and could use stakeholder input to with help brainstorming ways to engage with the medical community.

Q: There appears to be some difference from Case Manager to Case Manager in assessments and what services are authorized. How can we be more consistent across the state?
   A: There will always be professional discretion, but the Department provides the same training and technical assistance to all Case Managers. If an individual needs additional services, they should reach out to their Case Manager.
Q: Do you have adequate interpreters or of non-English speaking providers?
   A: The Department staff have access to interpreter services that can be used for any language.

Q: Has anyone contacted the nursing homes to see if they want to diversify their funding to help people stay home?
   A: The Department has had many meetings to talk about diversification into HCBS. There are currently two nursing facilities that also provide HCBS.