CABINET FOR HEALTH AND FAMILY SERVICES	Subject: Participant Directed Services SOP Title: Administrative Responsibilities of the Cabinet for Health and Family Services PDS-SOP-6.11
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PURPOSE

The Participant Directed Services (PDS) standard operating procedures (SOP) administrative responsibilities of the Department for Medicaid Services or operating agency designee within the Cabinet for Health and Family Services section outlines OPERATING AGENCY administrative responsibilities for PDS across the following five 1915(c) waivers: Acquired Brain Injury (ABI), Acquired Brain Injury Long-Term Care (ABI-LTC), Home and Community Based (HCB), Michelle P (MP), and Supports for Community Living (SCL). The goal of this section is to delineate program administration expectations of Department for Medicaid Services (DMS) or operating agency designee within the Cabinet for Health and Family Services to facilitate effective and efficient oversight of PDS.

POLICY

1. Operating Agency shall be responsible for statewide administration of PDS.
2. DMS shall establish and communicate statewide PDS policies and procedures essential for program operation.
3. Operating Agency shall implement statewide PDS policies and procedures established by DMS.
4. In keeping with statutory and regulatory mandates, Operating Agency shall provide PDS direction to case management agencies (CMA) and financial management agencies (FMA).
5. Operating Agency shall solicit and utilize input from CMA, FMA, the PDS working group, and other advisory councils, agencies, organizations, citizens, advocates – and most importantly, from PDS participants and their representatives - in the administration of the program.
6. As part of PDS program administration, Operating Agency shall:
    a. Develop and revise, as necessary, reporting requirements for the PDS program;
    b. Maintain a viable working relationship with CMA and FMA by providing PDS training and PDS technical assistance;
    c. Maintain and revise, as necessary, DMS-approved PDS forms, PDS training, SOP and manuals;
    d. Ensure through initial certification and recertification, that case management agencies meet the criteria to be able to facilitate PDS Verify all aspects of PDS training requirements are met and followed, including but not limited to, case management, person-centered planning, participant health, safety, and welfare, Medicaid fraud, program waste and abuse, critical incident reporting, FMA electronic visit verification documentation, and adherence to approved PDS person-centered service plan;
    e. Require corrective action plans up to request of moratorium, when necessary, should the CMA not adhere to PDS standards outlined in Kentucky Administrative Regulations, provider letters, SOP, and contractual agreement;
    f. Conduct, at least annually, a random sampling of participant experience surveys with participants;
    g. Coordinate and administer the state's participation in the appropriate National Core Indicator's survey

h. Provide or assist with PDS training and technical assistance where assistance is needed due to problems in PDS coordination with other programs or agencies, difficult PDS participant situations, and PDS complaints;
i. Provide periodic updates and provider memos/letters for continuing PDS education and PDS support;
j. Submit reports to DMS;
k. Review and approve, deny or return requests for Legally Responsible Individuals in the Medicaid Waiver Management System (MWMA). Refer to PDS-SOP 6.33;
l. Comply with DMS audit and billing reviews, including reviews conducted by sub-contractors and/or operating agency; and
    i. DMS may perform second-line reviews or audits and may impose other penalties, including recoupment of monies, as necessary following the second-line review or audit;
m. Develop other protocols, guidelines or PDS requirements, when the need has been identified.