

Bridge Technical Assistance

Goals and Inventory of Needs

Department of Health Care Policy and Financing

October 2019

Our Mission

Improving health care access and outcomes for the **people** we serve while demonstrating sound stewardship of financial **resources**

Background

Character limitations in text boxes for Goals and Inventory of Needs have been expanded to 600 characters

Implementation of Effective Date (Eff Date) and End Date fields for Goals and Inventory of Need

Documents the Certification Period the for the Goal(s) and Inventory of Need(s)

Note: Individuals must have at least one Personal Goal and Inventory of Need throughout the Certification Period

Previous view of PPA with Goals in the Bridge

Line	<input type="text"/>	Activities Of	Instrumental Activities of	Frequency Calculator
Rendering Provider ID	<input type="text"/>	Daily Living :	Daily Living :	Unit Value <input type="text"/>
Provider Name	<input type="text"/>	Bathing <input type="checkbox"/>	Hygiene <input type="checkbox"/>	No. Days/Hrs/Trips <input type="text"/>
Service	<input type="text"/>	Dressing <input type="checkbox"/>	Medication Management <input type="checkbox"/>	Days/Wk <input type="text"/>
Service Description	<input type="text"/>	Toileting <input type="checkbox"/>	Transportation <input type="checkbox"/>	No. of Weeks <input type="text"/>
Additional Service Description	<input type="text"/>	Mobility <input type="checkbox"/>	Money Management <input type="checkbox"/>	No. of Months <input type="text"/>
Units	<input type="text"/>	Transferring <input type="checkbox"/>	Shopping <input type="checkbox"/>	Recommended Units <input type="text"/>
Dollars	<input type="text"/>	Eating <input type="checkbox"/>	Meal Preparation <input type="checkbox"/>	Max Amount <input type="text"/>
Eff Date	<input type="text"/>	Supervision <input type="checkbox"/>	Laundry <input type="checkbox"/>	
End Date	<input type="text"/>	Memory/Cognition <input type="checkbox"/>	Accessing Resources <input type="checkbox"/>	
Balance Units	<input type="text"/>		House Work <input type="checkbox"/>	
Balance Dollars	<input type="text"/>			
Quantity Used Dollars	<input type="text"/>			
Quantity Used Units	<input type="text"/>			
Claims First Paid Date	<input type="text"/>			
Claims Last Paid Date	<input type="text"/>			
Receive Alert?	<input type="text"/>			
Alert Threshold	<input type="text"/>			
Status	<input type="text"/>			
Payment Method	<input type="text"/>			
Claims Activity	<input type="checkbox"/>			
		Goal1 <input type="text"/>		
		Goal2 <input type="text"/>		
		Goal3 <input type="text"/>		
		Goal4 <input type="text"/>		
		Goal5 <input type="text"/>		

Current view of PPA with Goals

Line	Status	Service Description	Units	Dollars	Eff Date	End Date	ADL	IADL
01			0	\$0.00			N	N

Line: 01

Rendering Provider ID:

Provider Name:

Service:

Service Description:

Additional Service Description:

Units:

Dollars:

Eff Date:

End Date:

Balance Units:

Balance Dollars:

Quantity Used Dollars:

Quantity Used Units:

Claims First Paid Date:

Claims Last Paid Date:

Receive Alert?:

Alert Threshold:

Status:

Payment Method:

Claims Activity:

Activities Of

Daily Living :

Bathing

Dressing

Toileting

Mobility

Transferring

Eating

Supervision

Memory/Cognition

Instrumental Activities of

Daily Living :

Hygiene

Medication Management

Transportation

Money Management

Shopping

Meal Preparation

Laundry

Accessing Resources

House Work

Frequency Calculator

Unit Value:

No. Days/Hrs/Trips:

Days/Wk:

No. of Weeks:

No. of Months:

Recommended Units:

Max Amount:

Goals Data

*** No rows found ***

Goal Num:

Goals Text*:

Case Manager:

Date Added:

Linking Goal in PPA

1. Add the line item on the PPA
2. Highlight the line item in the PPA
3. Click Add in the Goal section below the PPA
4. Select the Goal to be linked to the line item from the dropdown menu
5. Click Save on top of the PPA screen.
6. Repeat steps 4 through 5 for adding more goals to the specific line item.

Linking Goal in PPA

Line	Status	Service Description	Units	Dollars	Eff Date	End Date	ADL	IADL
01	APPROVED	H0038 -SELF-HELP/PEER SVC PER 15MIN U1	10.000	\$73.70	06/12/2018	06/30/2018	N	Y

Line: 01

Rendering Provider ID:

Provider Name:

Service: H0038 -SELF-HELP/PEER SVC PER 15MIN U1

Service Description: H0038 -SELF-HELP/PEER SVC PER 15MIN U1

Additional Service Description:

Units: 10.000

Dollars: \$73.70

Eff Date: 6/12/2018

End Date: 6/30/2018

Balance Units: 0

Balance Dollars: \$0.0

Quantity Used Dollars: \$0.0

Quantity Used Units: 0

Claims First Paid Date: N/A

Claims Last Paid Date: N/A

Receive Alert?: NO

Alert Threshold: 90%

Status: APPROVED

Payment Method: Pay Unit Limit

Claims Activity:

Activities Of

Daily Living :

Bathing

Dressing

Toileting

Mobility

Transferring

Eating

Supervision

Memory/Cognition

Instrumental Activities of

Daily Living :

Hygiene

Medication Management

Transportation

Money Management

Shopping

Meal Preparation

Laundry

Accessing Resources

House Work

Frequency Calculator

Unit Value: 15 Minutes

No. Days/Hrs/Trips: 0

Days/Wk:

No. of Weeks:

No. of Months:

Recommended Units: 0

Max Amount: 0

Goals Data

Goal Num	Goals Text	Case Manager	Date Added
1	Test Goal	SSUNDARA	07/23/2019

Goal Num:

Goals Text*:

Case Manager:

Date Added:

Changes to Goals

Previous view of Goals:

Base Information X Inventory Needs X Override X CDASS TASK WS X Agency X Goals X Risk X PETI X

*** No rows found ***

Goal

Support Detail

Active

Support Type

- HCBS
- Non HCBS
- Long Term Home Health
- Natural Support
- Non Medicaid Community Resources
- Other Insurance
- State Benefit Plan

delete add

Changes to Goals

Current view of Goals:

Existing Goals assigned Eff Date and End Date based on the dates of the PPAs to which they are linked

Goal Num	Eff Date	End Date	Text	User ID	HCBS	Non HCBS	Other Insurance	State Ben Plan	Natural Support	Long Term Home	Non Medicaid Community Resources
1	06/12/2018	11/30/2018	Test Goal	SSUNDARA	Y	N	N	N	N	N	N

Goal Num: 1

Eff Date: 6/12/2018

End Date: 11/30/2018

Goal: Test Goal

Support Detail: Test

Support Type:

- HCBS*
- Non HCBS*
- Long Term Home Health*
- Natural Support*
- Non Medicaid Community Resources*
- Other Insurance*
- State Benefit Plan*

delete add Print

Changes to Goals

New Goal:

Eff Date and End Date are two new fields. These dates must be contained within a Certification Period (they cannot span across Certification Periods).

The dates of the Goal can either match exactly or be within the Certification Period.

1. Eff Date - On or after the Start Date of the PPA
2. End Date - On or before the End Date of the PPA

Changes to Goals

NOTE: If the case manager checks off Support type as HCBS for the Goal, it must still be linked to at least one line item in the PPA

If there is a current PPA for that Goal's Certification Period (Eff Date and End Date) there will be a pop-up message indicating that case managers may be required to make changes to the identified PPA

Changes to Goals

The screenshot displays a web application interface for managing goals. On the left is a sidebar with search and navigation options. The main area shows a client information form with fields for Client ID, SSN, Gender, Birth Date, Death Date, Age, Race, Ethnicity, Language, and County. Below this is a table of goals with columns for Goal Num, Eff Date, End Date, and various support categories. A modal dialog box is open in the center, displaying a warning message: "Please Update PPA 196709, 19556 if necessary to reflect the new Goal". Below the message is an "OK" button. The goal detail form below the table includes fields for Goal Num, Eff Date, End Date, Goal, and Support Detail, along with a list of support types with checkboxes.

Changes to Inventory of Need

Existing Inventory of Need:

Assigned Eff date and End date based on date Inventory of Need was created

Individuals must have at least one Inventory of Need throughout the Certification Period

If the system generated dates do not accurately reflect the Certification Period, case managers may edit dates

Previous view of 'Inventory Needs' in the Bridge

Base Information X Inventory Needs X Override X CDASS TASK WS X Agency X Goals X Risk X PETI X											
*** No rows found ***											
Activities of daily living*	HCBS	Non-HCBS	Long-Term Home Health	Natural Supports	Non-Medical Community Resources	Other Insurance	State Plan Benefits	Support Details			
Bathing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dressing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Toileting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mobility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transferring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Memory/Cognition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Instrumental Activities of daily living*											
Hygiene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Current view of 'Inventory Needs' in the Bridge

Base Information X Agency X CDASS TASK WS X Goals X Inventory Needs X Override X PETI X Risk X

*** No rows found ***

Eff Date 
 End Date 

Activities of daily living*	HCBS	Non-HCBS	Long-Term Home Health	Natural Supports	Non-Medical Community Resources	Other Insurance	State Plan Benefits	Support Details
Bathing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dressing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Toileting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mobility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transferring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

New Inventory of Need

Eff Date and End Date are two new fields.

Dates must be contained within a Certification Period
(they cannot span across Certification Periods)

1. Eff Date - On or after Start Date of Certification Period
2. End Date - Before or on End Date of Certification Period

New Inventory of Need

Open Tab save cancel help Audit Show All

Message Description	Panel	Field	Row
✓ Base Information - Save was Successful	Base Information		

Client ID
SSN
Gender
Birth Date
Death Date
Age
Race
Ethnicity
Language: ENG - English
County: Adams
Phone: (000)000-0000
Phone Type: Unknown
Add Phone: (000)000-
Add Type:

SIS Survey Date: 10/12/2012 12:00:00 AM

Message from webpage

⚠ Please Update PPA 196709 if necessary to reflect the new Inventory of Needs

OK

Inventory Num	Cert Start Date	Cert End Date	UserID
1	01/08/2019	09/30/2019	PACKIRAV
2	10/01/2019	10/31/2019	PACKIRAV

Base Information Agency CDASS TASK WS PETI

Eff Date:

End Date:

Activities of daily living*	HCBS	Non-HCBS	Long-Term Home Health	Natural Supports	Non-Medical Community Resources	Other Insurance	State Plan Benefits	Support Details
Bathing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dressing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



QUESTIONS?

Contact Information

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Thank You!