

WELCOME!!!



CardinalCare
Virginia's Medicaid Program



DMAS & DBHDS Quality Review Team (QRT) Quarterly Collaboration

SFY 25, Quarter 3

Facilitated by:

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Office of Community Living



Objectives



Present CMS Approved data for the DD HCBS Waiver



Collaborate to address barriers



Develop solutions & increase remediation efforts

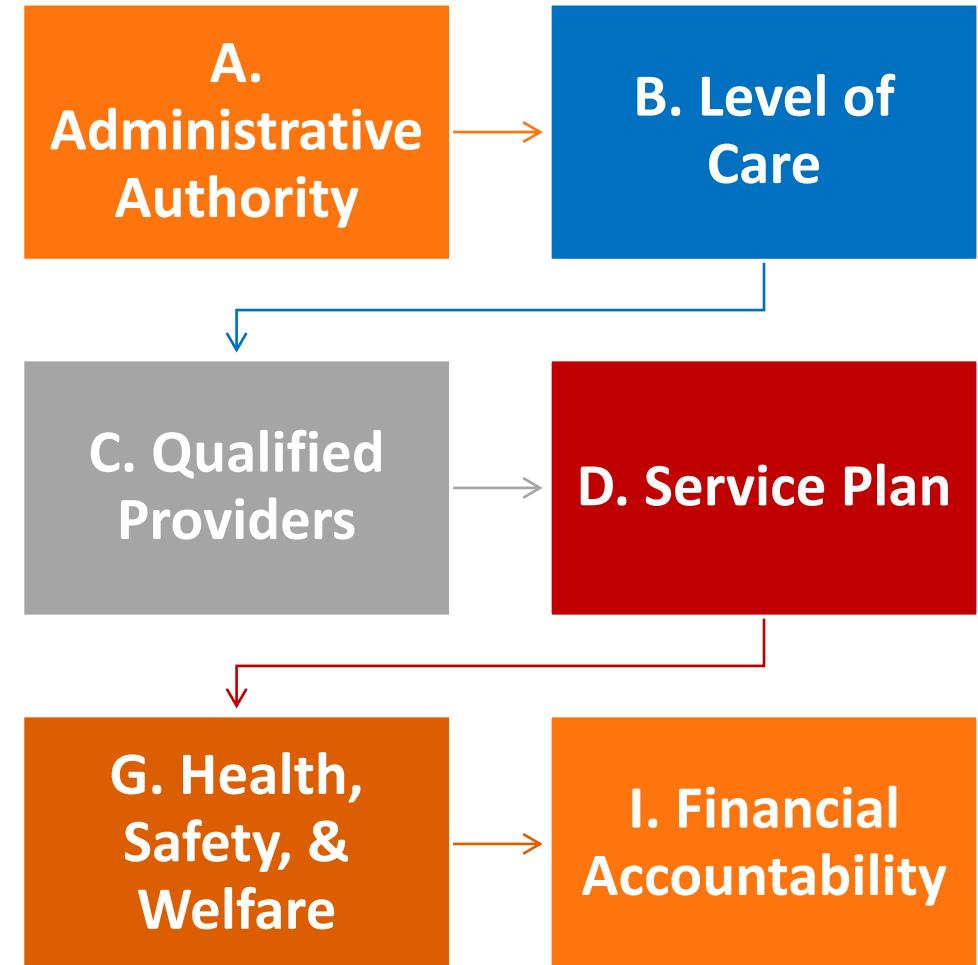


Optimize services for our members



Prioritize & plan for improvement with monitoring the overall success of each stakeholder impacted by the DD HCBS Waiver

Developmental Disability Home Community Based Services (DD HCBS) Waiver Assurances:



A. Administrative Authority

The Administrative Authority Assurance measures oversight of the performance of all waiver functions.

A. Administrative Authority Summary

No deficiencies to report for Quarter 3!!!



B. Level of Care

The Level of Care (LOC) Assurance evaluates a waiver applicant's / existing participant's LOC consistent with care provided in a hospital, NF or ICF/IID.



B. Level of Care Summary

No deficiencies this quarter!

C. Qualified Providers

The Qualified Providers Assurance ensures all waiver services are provided by qualified providers.

C. Qualified Providers Summary

Close Watch

C4. Number and percent of non-licensed/non-certified provider agencies that meet waiver provider qualifications.

- SFY 25, Q3 = 100%
- Overall Fiscal year is trending below threshold at **80%**

C. Qualified Providers Summary

- C9. Number and percent of provider agency direct support professionals (DSP's) meeting competency training requirements

CL: 99/127= **78%**

FIS: 43/59= **73%**

BI: 1/1= **100%**

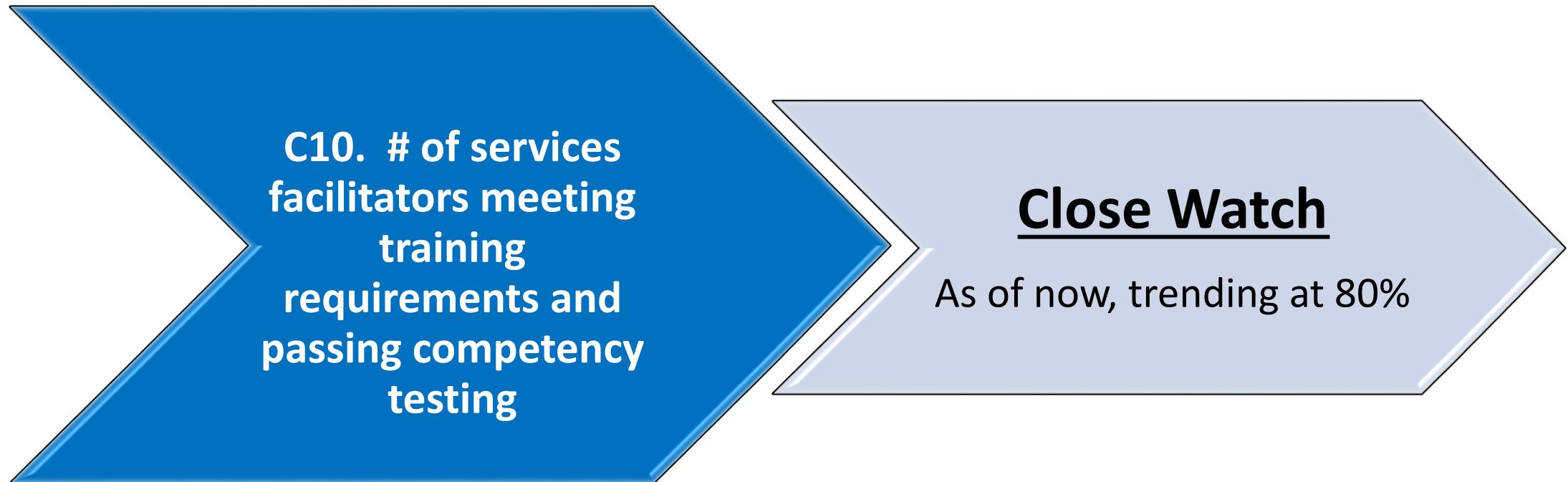
Total: 143/187

Common Issues:

- ✗ Not in record
- ✗ Not completed
- ✗ Proficiency boxes not checked
- ✗ Using old form
- ✗ Missing signature and/or dates

SFY 25, Q3 Total: 76%

C. Qualified Providers Summary



D. Service Plan

The Service Plan Assurance monitors the adequacy of service plans for waiver participants.

D. Service Plan Summary

- **D1. Number and percent of individuals who have Plans for Support that address their assessed needs, capabilities and desired outcomes.**
 - **SFY 25, Q3 Total: 58%**

D1.	Q3 Sample	Q3 Total	Threshold
CL	119/191	62%	86%
FIS	52/107	49%	
BI	4/6	67%	

D. Service Plan Summary (*cont.*)

- **D3. Number and percent of individuals whose Plan for Supports includes a risk mitigation strategy when the risk assessment indicates a need.**
 - **SFY 25, Q3 Total: 61%**

D3.	Q3 Sample	Q3 Total	Threshold
CL	117/179	65%	
FIS	54/103	52%	86%
BI	3/4	75%	

D. Service Plan Summary (*cont.*)

D4. Number and percent of service plans that include a back-up plan when required for services to include in home supports, personal assistance, respite, companion, and shared living.

- CL: $38/47 = 81\%$
- FIS: $40/49 = 82\%$
- BI: NA
- **SFY 25, Q3 Total: 81%**

2 providers given CAPS for both CL & FIS Waivers due to not having a backup plan documented

D. Service Plan Summary (*cont.*)

- D7. Number and percent of individuals who received services in the frequency specified in the service plan



SFY 25, Q3 Total: 88%



7% increase from Q2



FY Data is trending closely to threshold at 87%



CLOSE WATCH!!

D. Service Plan Summary (*cont.*)

- **D11. Number and percent of individuals who received services in the amount specified in the service plan**

CL: $137/162 = 85\%$

FIS: $70/89 = 79\%$

BI: $3/3 = 100\%$

SFY 25, Q3 Total = $210/254 = 83\%$

G. Health & Welfare

The Health and Welfare Assurance monitors waiver participants health, safety, and welfare

G. Health & Welfare Summary

- G1. Number and percent of closed cases of abuse/neglect/exploitation for which DBHDS verified that the investigation conducted by the provider was done in accordance with regulations

Met threshold at 87%

4% increase

SFY total is currently at 86%

- G2. Number and percent of substantiated cases of abuse/neglect/exploitation for which the required corrective action was verified by DBHDS as being implemented

82%

5% increase

G. Health & Welfare Summary (cont.)

- G4. Number and percent of individuals who receive annual notification of rights and information to report ANE



CL: 90/118= 76%



FIS: 32/59= 54%



BI: 4/4: 100%



SFY 25, Q3 Total: 70%



CLOSE WATCH

FY Total: 87%

I. Financial Accountability

The Financial Accountability Assurance monitors claims and reimbursement.

I. Financial Accountability Summary

No deficiencies reported for Quarter 3!!!

Q&A



Thank you for your participation & valuable feedback

NEXT QRT MEETING 10/23/25 @ 1pm