

# DMAS & DBHDS Quality Review Team (QRT) Quarterly Collaboration

Facilitated by:

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#### Objectives

#### The purpose of this meeting is to:

- 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
- B. Level of Care
- C. Qualified Providers
- D. Service Plan
- G. Health, Safety, & Welfare
- I. Financial Accountability



#### 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 SFY 23, Quarter 4.



#### 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

- Team needs clarification on reported data for B1 & B2!
  - No deficiencies for quarter 4 of the other LOC data!



#### C. Qualified Providers

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



#### C. Qualified Providers Summary

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

#### **SFY 23 Annual Data**

- CL-258/460=56%
- FIS-24/28=86%
- BI-14/17=82%
- Total all Waivers: 296/505= 59%



#### 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.

D1.	Q4 Sample	Q4 Total	Annual Sample	Annual Total	Threshold
CL	51/100	51%	325/579	56%	
FIS	16/34	47%	78/137	57%	86%
ВІ	9/15	60%	27/40	68%	



• **D3.** Number and percent of individuals whose Plan for Supports includes a risk mitigation strategy when the risk assessment indicates a need.

D3.	Q4 Sample	Q4 Total	Annual Sample	Annual Total	Threshold
CL	49/95	52%	284/533	53%	
FIS	13/30	43%	63/117	54%	86%
ВІ	6/12	50%	17/30	57%	



• **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

No 4<sup>th</sup> quarter deficiency

CL- Small sample size with 11/16 for SFY 23 Total
 69%



- D6. Number and percent of individuals whose service plan was revised, as needed, to address changing needs (Individual Support Plan was updated/revised when individual's needs changed)
- CL Quarter 4: no deficiency
- **Annual:** 38/51=75%

• FIS & BI: small sample sizes quarterly & annually

• **Total all waivers:** 41/58=71%

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

- CL Q4 Data: 30/36=83% close to threshold for Q4
- Annual: 203/260=78%

- FIS: 8/13=62%
- Annual: 15/21=71%

• **Total all Waivers**: 231/294=79%



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

• CL: 25/36=69%

• FIS:4/13= 31%

BI: NO DEFICIENCIES

• TOTAL WAIVERS: 239/294=81%



#### G. Health & Welfare

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



#### G. Health & Welfare Summary(cont.)

Missing Data for the following measure:

**G7.** Number and percent of individuals reviewed who did not have unauthorized restrictive interventions. (DBHDS)



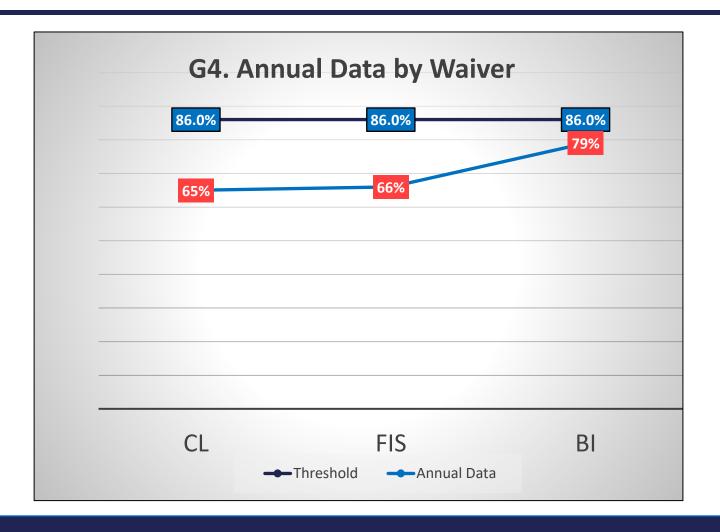
#### G. Health & Welfare Summary

- **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.
- Q3- 83%
- Q4: 81%
- **Annual:** 123/150= 82%



### G. Health & Welfare Summary (cont.)

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





#### G. Health & Welfare Summary (cont.)

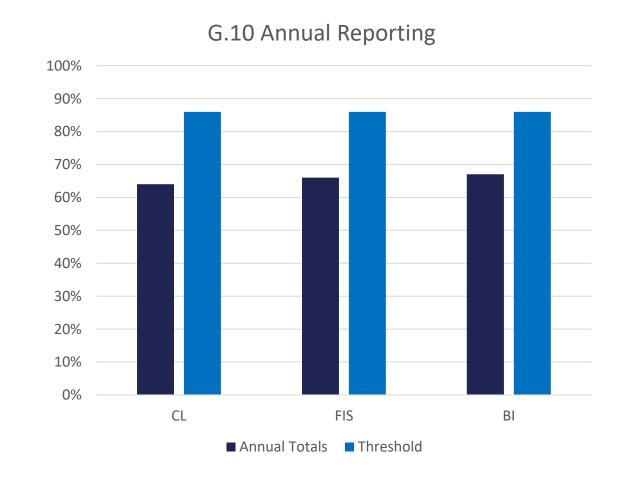
- **G6.** Number and percent of licensed DD providers that administer medications that were not cited for failure to review medication errors at least quarterly.
- Quarter 4 Data fell slightly below threshold at 85%.
- Annual data is at 89%



### G. Health & Welfare Summary(cont.)

• **G10.** Number and percent of participants 19 and younger who had an ambulatory or preventive care visit during the year.

Below threshold with <u>ALL</u> waivers





#### I. Financial Accountability

The Financial Accountability Assurance monitors claims and reimbursement.



### I. Financial Accountability Summary

No deficiencies reported for SFY 23!!





#### Q&A

☐ We will now open the floor for Q & A with the stakeholders





## Thank you for your participation & valuable feedback



#### NEXT QRT MEETING

# Please expect the next meeting invite in the near future!!

