(for copies of attachments 2 and 3, contact Molly Bauer at 717-783-5760)

SCOPE:

County Mental Health/Mental Retardation Administrators Base Service Unit Directors

PURPOSE:

The purpose of this bulletin is to transmit the Office of Mental Retardation's (OMR) protocol and web-based application used by OMR regional staff for monitoring of counties related to services provided under the OMR's Consolidated and Person/Family Directed Support Waivers.

BACKGROUND:

The County is the administrative entity for programs funded by the Commonwealth under the terms of the MH/MR Act of 1966. The County MH/MR Program is the agent of the Commonwealth in the administration of the Medicaid Waiver Program as defined in the Supplemental Grant Agreement (SGA). Grant agreements have been in place since the waiver's inception in 1966 as a primary means of ensuring accountability in the use of federal and state funds. The MH/MR Act of 1966 and the SGA provide a description of administrative requirements for county programs.

States make certain assurances to the Centers for Medicare and Medicaid Services (CMS) when requesting a waiver under the authority of section 1915c of the Social Security Act in order to provide home and community-based services. These assurances, contained in the waiver application itself, describe how the state will protect the health and welfare of the individuals enrolled in the waiver. One of the assurances is that the state will have in place a formal system by which it monitors the health and welfare of the individuals served under the waiver through the quality control procedures described in the waiver document. The OMR monitoring of counties is designed to meet this assurance.

DISCUSSION:

Monitoring of counties is one process that is changing as the Department develops the Home and Community Services Information System (HCSIS), a web-based application. It is one of four processes within the OMR's quality framework designed to assess the quality of services provided to individuals with mental retardation and to improve the quality of those services as needed. The other three processes within the OMR's quality framework are Independent Monitoring, Incident Management and Health Risk Profiles.

As a result of this change, the OMR monitoring of counties has been standardized and will be conducted consistently throughout the Commonwealth. Under this new process, the OMR Regional Monitors will schedule an annual monitoring visit, conduct a records review at the county and base service unit, if appropriate, visit with individuals receiving Medicaid Waiver services, provide counties with a report of the review results, and review the corrective action plan submitted by the county to assure that the corrective action plan addresses issues that are identified during the monitoring visit (See Attachment #1).

The change in the process is the manner in which the information is collected and County MH/MR Programs respond to issues raised. The information will now be collected through a monitoring tool that is part of the web-based system designed to support this process (see Attachment #2). County MH/MR Programs will be required to respond to the issues that are raised during the monitoring visit with a corrective action plan that is incorporated in the web-based monitoring tool (See Attachment #3).
Regional Monitors have received training on using the web-based Monitoring of Counties Tool and will implement both the use of the monitoring tool and protocol for Monitoring of Counties beginning with monitoring visits scheduled after January 14, 2002. Regional Monitors will provide hands-on training on the use of the web-based system and entering Corrective Action Plan information to each County MH/MR Program during the county’s annual monitoring visit.

Access to information, security and confidentiality issues for the OMR Monitoring of Counties has been addressed through assignment of roles, user identification and passwords. HCSIS users have specific access rights based on their assigned role and are bound by the Department's confidentiality rules.

It should be noted that the individual's name, social security number and provider name contained on the screen mock ups of the OMR Monitoring of Counties application (Attachments #2 & # 3) are fictitious and included only to demonstrate how the application appears when used for an actual monitoring.

**Attachments** (for copies of attachments 2 and 3, contact Molly Bauer at 717-783-5760)

- Attachment 1: Protocol for Regional Monitoring of Counties
- Attachment 2: Office of Mental Retardation’s monitoring of counties tool.
- Attachment 3: County corrective action plan.

**Protocol for Regional Monitoring of Counties**

Regional Monitors will work with the intent of conducting a review of the Consolidated and Person Family Directed Support Waivers for each County Mental Health/Mental Retardation Program within their region on an annual basis. If this intent cannot be met due to exceptional circumstances, justification must be documented and submitted to the Director, Bureau of Community Programs, for approval. Based on a calendar year, tentative monitoring schedules should be developed by the Regional Office and forwarded to the Statewide Coordinator by November 30th of the previous year. Revisions that occur throughout the year should also be forwarded to the Statewide Coordinator.

There are five (5) primary functions in the Regional Monitoring of Counties process. The composition of the Regional Monitoring Review Team may vary in accordance with the tasks associated with each function. The functions include:

1. Define and finalize the Review Sample
2. Data Collection and record review of selected individuals
3. Preparation of the Findings Report
4. Review and Approval of the County Corrective Action Plan
5. Validation of the County Corrective Action Plan

Regional Office staff, Central Office staff or Departmental staff who may be included in one or more of the above functions for the expressed purpose of offering insight to regional monitors to better prepare for monitoring of individuals served in the region include:

- The Team Leader, (a regional monitor for the county/joiner under review with expertise in waiver policy/regulations related to eligibility, planning and the plan document, due process, and supports coordination);
- The Regional Program Manager (RPM) and/or Regional Program Supervisor;
- The Licensing administrator or representative;
- The Health Care Coordinator;
- A fiscal representative;
- The Risk Manager or other regional program representatives;
- Statewide Regional Monitor Coordinator and/or other Central Office representatives;
- Other DPW Program Office representatives such as OMAP Waiver Monitoring Unit.

A single staff member may function in or have expertise in one or more of the above noted job functions/areas.

**Finalization of the Review Sample**

The Home and Community Services Information System (HCSIS) will generate a five-percent review sample based on a representative proportion of the individuals enrolled in the Consolidated and Person/Family Directed Support Waivers. The minimum number of records to be reviewed is 5 and the maximum number of records to be reviewed is 30. The Team Leader will then review the sample to assure that the sample includes 1) cross section of providers; 2) cross section of supports coordinators; 3) variety of living arrangements (family living, home-based, supported living and community homes). In addition, the Regional Program Manager may choose to include individuals within the following categories based on trend analysis from other sources. Examples may include:

- individuals in age 60+ group;
- individuals recently transitioning from state center; and/or
- individuals in 18-21 age group.
The finalized sample will be reviewed using the County Monitoring Tool in its entirety. In addition to the comprehensive review of the five-percent sample, individuals who are denied waiver services will be reviewed to monitor the implementation of the service preference process only.

**Data Collection (record reviews, site visits, and interviews)**

After finalizing the sample of service recipients and individuals denied services, the Team Leader will consult with regional office staff with expertise in the aforementioned areas.

This group of regional office staff will review the names of individuals defined in the review sample and any pre-populated review information included in the County Monitoring Tool to assure that all identified categories for the sample are represented. This group will also review for the purpose of identifying potential issues and approaches to data collection that will ensure thorough reviews. Until HCSIS is capable of a more extensive pre-population of County Monitoring Tool data, this group will review, at a minimum, trends based on incident reports and/or actual incident reports, complaints, administrative, fiscal, and licensing issues specific to the sample of waiver recipients, providers, and county program under review. When the capability of HCSIS enables pre-population of data in the monitoring tool, this group or experts within the group will also review information related to medications and other Health Risk Profile (HRP) data, IM4Q issues, eligibility, due process, planning, and supports coordination.

The RPM or designee, in consultation with the Team Leader and subject experts, will decide the composition of the data collection review team. The decision as to expertise required of team members will be based on the characteristics of the individuals in the sample.

Other team members may be required to do on-site visits during a monitoring review, however, it may only be necessary for the Team Leader to request expert direction on what to look for, questions to pose, and/or consultation with experts by computer or phone during the course of data collection in the field.

In phase 2 of the county monitoring tool development, there will be systems capability to upload data collected in the field for read only access by staff at regional offices during the data collection stage of the review. This will facilitate consulting capabilities.

**Monitoring Review Data Collection**

The Team Leader and Team Members will be involved in the following activities during the review:

- Complete the web-based County Monitoring Tool;
- Visit the individuals included in the sample either at their home or day program;
- Interview individual or family members as selected in the sample using the Individual Satisfaction Survey Questions. Interviews are to include the family contact person for the individual in the residential setting;
- Provide preliminary findings to county administrative staff before departure from the county.

**Preparation of the Findings Report**

The OMR Monitoring of Counties Findings Report includes narrative as well as an overall compliance score based on the findings during the time of the monitoring review. (*)

Following completion of the OMR Monitoring of Counties Findings Report, subject experts will be provided with read only access to the data. Subject experts will review the draft Findings Report to ensure it fully and accurately addresses issues identified in the data collected. Based on input from other subject matter experts, the Team Leader may revise the Findings Report and forward to the RPM or designee for review. Upon approval and finalization of the Findings Report, the RPM will forward the Findings Report to the County Administrator for review and development of a County Corrective Action Plan to address the findings. The Findings Report should be completed and finalized within 20 working days by the Team Leader following completion of the county monitoring visit.

**Review and Approval of the Plan of Correction**

The County Mental Health/Mental Retardation Program submits a County Corrective Action Plan to the Regional OMR Office within 20 working days of receipt of the Findings Report from the regional office. The Team Leader and, as necessary, subject experts will review the County Corrective Action Plan for completeness and to determine if it adequately addresses issues identified in the Findings Report. The County Corrective Action Plan with the recommendation of the Team Leader and subject experts is then made available to the RPM or designee for review and approval. The County MH/MR Administrator will be notified by the RPM when the County Corrective Action Plan is approved.

**Validation of the County Corrective Action Plan**
The RPM or designee, in conjunction with the Team Leader, will determine the need for an on-site validation based on the severity of the identified issues and the County Corrective Action Plan submitted by the County Mental Health/Mental Retardation Program. The need for an on-site validation will be noted in the approved notice to the County MH/MR Administration.

(*) 85-100% Compliance (may need improvement)
84-60% Compliance (needs improvement)
59% & below Non Compliance (immediate action must be taken)

February 21, 2002

**COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:**

Appropriate Regional Mental Retardation Program Managers