Service Plan Assurances and Performance Measures Training

Assurances and Performance Measures – How Are They Related?

- A State makes assurances of compliance to The Centers for Medicare and Medicaid Services (CMS) about services to participants. The assurances were put into place by Congress to address the unique challenges of assuring the *quality* of services delivered to vulnerable persons living in their community.
- Performance Measures are the standards a state will use to evaluate how well the HCBS waiver is meeting each of the federal assurances.

Assurances and Performance Measures – How are They Related

Each Assurance has corresponding performance measures associated with the Assurance.

Both are contained in the approved waiver application for each waiver.

When we complete the review for a Service Plan, we are looking at what is documented. The documentation or lack of documentation is what is used to measure compliance with the Performance Measure. If it's not documented, it's not in compliance!

Service Plan Assurance

- Service plans address all participant's assessed needs (including health and safety risk factors) and personal goals, either by the provision of waiver services or through other means
 - SP 1 Number and percent of waiver participants with ISPs adequate and appropriate to their needs, capabilities, and desired outcomes, as indicated in the assessment
 - SP 2 Number and percent of waiver participant satisfaction survey respondents who reported unmet need/needs (not addressed in this training measured by survey)
 - SP 3 Number and percent of waiver participants who have service plans that address the participant's goals



Service Plan Assurance:

- The state monitors service plan development in accordance with its policies and procedures
 - SP-4 Number and percent of ISPs and related service plan activities that comply with who develops the plan, who participates in the process and the timing of the plan development
 - SP 5 Number and percent of ISPs and related service plan activities that comply regarding how waiver services and other non-waiver services are coordinated
 - SP 7 Number and percent of waiver participants whose ISP included a risk factor assessment and needs assessment instrument



Service Plan Assurance:

- Service plans are updated/revised at least annually or when warranted by changes in waiver participant's needs
 - SP 8 Number and percent of participants with ISPs reviewed and revised before the waiver participant's annual review date
 - SP 9 Number and percent of waiver participants reviewed whose ISP was revised as needed, to address changing needs

Service Plan Assurance

 Services are delivered in accordance with the service plan, including in the type, scope, amount, duration, and, and frequency specified in the service plan.

THIS ASSURANCE IS MEASURED BY OTHER MEANS AND NOT ADDRESSED IN THIS TRAINING

SP – 10 Number and percent of participants who are receiving services in the type, scope, amount, frequency, and duration specified in the service plan

SP – 11 Number and percent of waiver providers who delivered services in the type, amount, and frequency specified in the ISP

SP – 12 Number and percent of participant satisfaction survey respondents reporting the receipt of all services in the ISP

SP – 13 Number and percent of complaints received regarding non-receipt of services.

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Service Plan Assurance:

- Participants are afforded choice between waiver services and institutional care, and between/among waiver services and providers
 - SP 14 Number and percent of waiver participants whose records contain appropriately completed and signed Freedom of Choice forms that specifies choice was offered between institutional care and waiver services
 - SP 15 Number and percent of waiver participants whose records documented an opportunity was provided for choice of waiver services and providers

Service Plan Assurances will now be broken down into the Performance Measures that measure them. All data for these Performance Measures comes from the manual review of records.

Service Plan Assurance 1:

 Service Plans address all participant's assessed needs (including health and safety risk factors) and personal goals, either by the provision of waiver services or through other means.

Performance Measures That Measure Service Plan Assurance 1:

 SP - 1: Number and percent of waiver participants with Individualized Service Plans (ISPs) adequate and appropriate to their needs, capabilities, and desired outcomes, as indicated in the assessment.

Factors Considered When Reviewing Records for this Performance Measure

- Are there adequate and appropriate services according to needs identified?
- Is there justification for all services?
- Is the duration of services adequate/appropriate according to identified needs?
- Is the emergency backup plan documented?
- Are the individualized backup plans documented and reviewed?

More Factors Considered for This Performance Measure:

- Is the frequency of services adequate/appropriate according to identified needs?
- Is the ISP adequate and appropriate according to the Needs Assessment?
- Are the participant's capabilities addressed?
- Are the participant's preferences addressed?
- Is the participant's emergency backup plan documented?
- Is the participant's individualized backup plan documented/reviewed?



Where Documented in HCSIS:

- Current Health Status
- Physical Assessment
- Individual Preferences
- Personal Interest
- Strengths
- Outcome Summary
- Outcome Actions
- Service Notes



Where Documented in SAMS:

- Assessments
 - Narrative
 - ADLs
 - IADLs
- Care Management
 - Service Plan
 - Services
 - Desired Outcome
 - Backup plan



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Questions to Consider for This Performance Measure:

- What are the participant's identified need for each service?
- Is the justification for the services requested documented?
 - Why does the participant need each service?
 - What identified need is the service fulfilling?
 - Why is the service essential to the participant's independent living?
- Are informal supports available to meet the needs?
- Is the amount of time requested for each service adequate and appropriate?
- Are the participant's strengths documented and preferences noted and accommodated?
- Are the capabilities of the participant taken into consideration?



Performance Measures That Measure Service Plan Assurance 1:

• SP3: Number and percent of waiver participants who have service plans that address the participant's goals.

Factors Considered When Reviewing Records for this Performance Measure

- Are the participant's goals documented and addressed?
 - What are the participant's goals for the services received under the waiver?

Where Documented in HCSIS:

- Plan
 - Individual Preference
 - Personal Interest

Where Documented in SAMS:

- Care Management
- Current Plan
- Goal Statement



Questions to Consider for This Performance Measure:

- Were the participant's goals discussed with the participant and addressed in the plan?
- Were the goals from the needs assessment considered and addressed in the plan?

Service Plan Assurance 2:

 The State monitors service plan development in accordance with its policies and procedures

Performance Measures That Measure Service Plan Assurance 2

• SP4: Number and percent of ISPs and related service plan activities that comply with who develops the plan, who participates in the process and the timing of the plan development.

Factors Considered When Reviewing Records for This Performance Measure:

- Contact with participant, other requested parties and providers documented?
- Plan indicates who participated in the development/revision of Service Plan?
- Were plan and/or updates completed timely?

Where Documented in HCSIS:

- Service Notes
- History-Summary (Comments)
- Services and Supports
 - Service Details

- Where Documented in SAMS:
 - Consumer Journal Notes
 - Activities and Referrals to determine if updates were completed timely.



Questions to Consider for This Performance Measure:

- Does documentation exist that indicates who was present at the meeting when the plan was developed?
- Who participated in the plan development?
- When the participant requested an update to the plan, was the update submitted timely?

Performance Measures That Measure Service Plan Assurance 2

 SP5 Number and percent of ISPs and related service plan activities that comply regarding how waiver services and other non-waiver services are coordinated.

Factors Considered When Reviewing Records for This Performance Measure:

- Are community resources documented?
- Are informal supports documented?
- Is third party liability documented?
- Does the plan indicate who is providing each service?
- Are waiver and non-waiver services coordinated to prevent duplications?

Where Documented in HCSIS:

- Service Notes
- Plan-Services and Supports-Non-Waiver Services
- Plan-Services and Supports-Know and Do-Personal Interest-Strengths
- Plan-Services and Supports-Outcome Actions (who is responsible for providing each service?)
- Service Notes

Where Documented in SAMS:

- Assessments
- Most current CMI
 - Social Participation
 - Informal Supports
- Care Management
 - Current Plan
 - Service Plan
 - Summary
 - Insurance
 - Special Instructions for informal supports
 - CMI and CMI Narrative



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Questions to Consider for This Performance Measure:

- Are community resources and informal supports used prior to requesting waiver services?
- Are insurance resources used before waiver services?
- Are informal supports used in conjunction with waiver services?

Performance Measures That Measure Service Plan Assurance 2:

 SP7: Number and percent of waiver participants with Individual Service Plans that include a risk factor assessment and needs assessment instrument.

Factors Considered When Reviewing Records for This Performance Measure:

- Is the discussion with the participant about the risks associated with independent living documented?
- Is the risk mitigated or accepted by the participant?
- Is the LOCA or CMI used to develop the service plan?

Where Documented in HCSIS:

- Service Notes
- Plan
 - Health and Safety
 - Focus Area
 - General Health and Safety Risks

Where Documented in SAMS:

- Service Plan
 - Worksheet
 - Risk Management Issues



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Questions to Consider for This Performance Measure:

- What are the identified risks for the participant?
- What is the likelihood of the risk occurring?
- What are the possible mitigation strategies?
- What mitigation strategies does the participant have in place?
- If there is no mitigation strategy, what is the participant's response to the risks and what steps will be taken when the risk occurs?

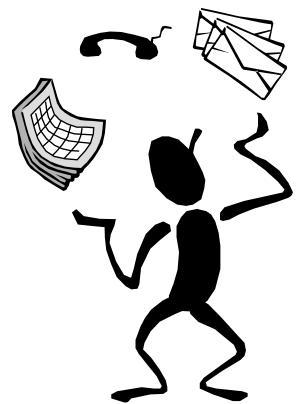
Service Plan Assurance 3:

 Service plans are updated/revised at least annually or when warranted by changes in waiver participants' needs.

Performance Measures That Measure Service Plan Assurance 3:

 SP8: Number and percent of participants with ISPs reviewed and revised before the waiver participant's annual review date.

Was the annual Service Plan Reassessment completed timely?





- Service Notes for the last 2 years which document the ANNUAL Reassessment Visit
- Yearly reassessment of needs should be documented along with the forms completed and signed by the participant.
 - Should be documented as a Reassessment Visit and occur yearly in the same month as the Initial Assessment.

 Consumer Journal Notes and Activities and Referrals for plan changes and updates



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Questions to Consider for This Performance Measure:

DOCUMENT THE FOLLOWING:

- Who participated in the yearly Reassessment Visit and plan development?
- Have the participant's needs and capabilities have been considered?
- Have the participant's goals have been addressed?
- Have waiver and non-waiver services have been coordinated so that there is no duplication?
- Have risks and mitigation strategies been discussed and documented?
- Was the appropriate Level of Care re-assessment done?
- Was the participant made aware of how to report incidents of abuse, neglect and exploitation?
- Where the appropriate forms reviewed and signed by the participant?
- Was the ISP developed with the participant based on the needs assessment?
- See sample for suggested language.



SAMPLE SERVICE NOTE CONTAINING ELEMENTS FOR THIS ASSURANCE ONLY

Other items may be need to be noted for other purposes, this is the sample suggested for this assurance.

REASSESSMENT VISIT:WAS PRESENT ALONG WITH HER MOTHER
AND BROTHER WHO PROVIDE INFORMAL SUPPORTS . PLAN WAS
DEVELOPED WITH, MOTHER AND BROTHER. REVIEWED THE
SERVICES THAT RECEIVES STATES THAT WAIVER SERVICES
ARE APPROPRIATE FOR HER NEEDS AND CAPABILITIES LEVEL OF CARE REASSESSMENT COMPLETED.
SHE HAS NO UNMET NEEDS AT THIS TIME
VERIFIED WITHTHAT SHE IS RECEIVING ALL SERVICES LISTED AND
AT THE FREQUENCIES LISTED ON HER ISP.
THERE ARE NO DUPLICATIONS OF WAIVER OR NON -WAIVER SERVICES .
DISCUSSED RISKS AND MITIGATION STRAGETIES.
COMPLETED AND REVIEWED THE FOLLOWING FORMS: SERVICE PROVIDER
CHOICE FORM; FREEDOM OF CHOICE FORM; ISP; RIGHTS AND
RESPONSIBILITIES; HOW TO REPORT INCIDENTS OF ABUSE, NEGLECT AND
EXPLOITATION.
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Performance Measures That Measure Service Plan Assurance 3:

• SP 9: Number and percent of waiver participants reviewed whose ISP was revised as needed to address changing needs.

 Since the last annual or initial review, were all necessary changes made to address changing needs?

Service Notes

Where Documented in SAMS:

Consumer Journal Notes and Activities and Referrals for plan changes and updates

Questions to Consider for this Performance Measure:

Do the Service Notes indicate that the ISP was reviewed/revised when the participant's needs changed?



Service Plan Assurance 4:

 Participants are afforded choice between waiver services and institutional care and between/among waiver services and providers.

Performance Measures That Measure Service Plan Assurance 4:

 SP14 Number and percent of waiver participants whose records contain appropriately completed and signed Freedom of Choice forms that specifies choice was offered between institutional care and waiver services.

- Do the Service Notes indicate that the participant was offered a choice between institutional care and waiver services?
- Is it indicated in the Service Notes that the form indicating this choice is signed and made part of the record?
- This should be reviewed at each annual reassessment and a new form signed.

Service Notes

Where Documented in SAMS:

Consumer Journal Notes and Activities and Referrals

Questions to consider for this Performance Measure:

Was the participant offered choice between institutional care and waiver services and is that choice documented?

Performance Measures That Measure Service Plan Assurance 4:

 SP 15: Number and percent of waiver participants whose records documented an opportunity was provided for choice of waiver services and providers.

- Do the Service Notes indicate that the participant was offered a choice of waiver services and providers?
- Is it indicated in the Service Notes that the form indicating this choice is signed and made part of the record?
- This should be reviewed at each annual reassessment and a new form signed.



Service Notes

Where Documented in SAMS:

Consumer Journal Notes and Activities and Referrals

Questions to consider for this Performance Measure:

Was the participant offered choice between institutional care and waiver services and is that choice documented?



THANKS!

Thank you for taking the time to participate in this training.



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QUESTIONS?



For any questions about this training please

Email: <u>RA-PWQuality@pa.gov</u>.

Each question submitted will be answered.



Please copy and paste this link into your browser to test your knowledge of this presentation and to verify that you have completed this training.

Thank you!

http://questionpro.com/t/ALHsBZSCNE



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