



Home and Community-Based Services Waivers DHHS HCBS Unit Off-Site Review Process

June 23, 2015

Purpose

The DHHS Home and Community Based Services (HCBS) Unit Off-Site Review Process is a key component of the Quality Improvement Framework. Reviews focus on the quality and compliance of services coordination and resource development activities and their impact on service outcomes for program clients.

HCBS Unit Review Process

1. File Monitoring Schedule

- A. Contracted agencies and DHHS local offices which provide Services Coordination for Nebraska's HCBS Waiver programs in the Medicaid and Long-Term Care Division are included in this process. In this document, these are referred to as "the SC agency."
- B. A review cycle will be established during which each SC agency will be reviewed annually. Prior to the beginning of the monitoring cycle per population, a draft statewide monitoring schedule will be distributed to the agencies.
- C. Once the review cycle begins, the format and content of the review will not change.
- D. A single HCBS Unit staff will be assigned as the Off-Site Review Lead for each agency. The Lead is the SC agency's contact in regard to the review.
- E. The Off-Site Review HCBS Unit Lead will notify the SC agency's director/DHHS Service Area Administrators with cc to waiver supervisor(s) by e-mail approximately two weeks in advance that an off-site review is scheduled to occur. A review key listing the client and provider files to be reviewed will be sent along with the file review notification. The list of documents needed for the review will also be included with the file review notification.

2. Sample Files for Review

- A. Section A Client Review: The client review sample size is **three (3%)** of the agency's current open cases or a minimum of **three (3)** files, except for EDN offices which will have one file reviewed annually. The sample is random by agency, not random by Services Coordinator, recognizing that some SC's work may not be included. No other filters (such as type of service, high/low cost, time on waiver) are used. The files may or may not be files reviewed through the Local Level Supervisory Review process.
- B. Section B Provider Review: The provider sample size is **one (1)** currently authorized provider review per client in the Section A sample unless the contract is not owned by the SC agency or has already been reviewed. A provider review will be completed whether or not the provider submitted a claim for the sample month. The review will be for either an individual or an agency. Provider file reviews are not completed for EDN clients since DHHS has provider enrollment responsibilities.
- C. Section C Billing Review: The claims sample size review is for **all (100%)** providers who billed for the sample month except for Assistive Technology services. Billing reviews are only completed for EDN offices who are responsible for reviewing billings. The sample month is **three (3)** complete months before the month of the Off-Site review. This includes the file sample provider's billing documentation and Individual Provider Record of Service.

3. Submitting/Review Documents

- A. The SC agency's contact person (a supervisor or administrator/director) will collect the client documents and the provider files in the random sample and billing materials (billing documents, Individual Record of Services) from other (non-AL, non-ATP) providers who billed for the sample month.
- B. The contact person mails/uploads/faxes/brings the client documents, provider files and claims billings and Individual Provider Record of Service to DHHS HCBS Waiver Unit in Lincoln, Attn: the Off-Site HCBS Unit Review Lead, so that they are received by the Friday before the first Off-Site Review date. In the case of a large review, requested review information may be requested in phases.
- C. The alternative to sending identified files, would be to upload all required review documents in the Clients' CONNECT Document Upload feature. If the SC agency chooses this function, the contact person will need to let the Lead know this is how documents will be submitted. The SC agency contact person will notify the lead when all sample client documents have been uploaded. The list of the required review file documents will be included with the file review notification.

4. Conducting File Review

- A. The file review format is identical to the format used by supervisors in their review process and is documented in CONNECT as QA Sections A, B and C. The HCBS Unit will assign and complete reviews within **seventy-five (75)** days.
- B. The HCBS Unit will review submitted documents/files/using the Instructions and inputs results of each client provider, and billing review into QA Sections A, B, and C.
- C. The reviewer will notify the agency immediately to address issues of abuse, neglect, exploitation and client safety risks.

5. Returning Files/Documents

- A. The HCBS Unit staff will conduct review of files/documents and returns any original materials to the local office. This plan limits the time each document/file is out of the local office by keeping them in Central Office no longer than **five (5)** working days.
- B. Once materials are received by the local SC agency, the SC agency will notify the HCBS Unit Lead of receipt of returned materials within **five working days**.

6. Preliminary File Review Results

- A. Each Off-Site Visit concludes with a review of the preliminary performance, compliance, and strengths.
- B. File review process/content includes:
 - 1. The HCBS Unit Team Lead will e-mail the SC Agency/Office contact person the "HCBS Unit QA Preliminary File Review" spreadsheet. The review spreadsheet outlines the preliminary results for each file reviewed for Section's A, B and C.
 - 2. The SC/RD supervisor may access the CONNECT reviews and inform the Off-Site Lead within 5 working days of any additional information.
 - 3. A file result discussion may be conducted, as requested, by either the HCBS Unit or by the SC agency/office. An in-person interview will occur when a file review results identify critical non-compliance issues of client safety.

7. Conducting Remediation Activities

- A. The HCBS staff will submit reviews to CO and assigns remediation to the local SC agency and sends e-mail notifying SC agency of findings.
- B. The SC agency will have a maximum of **forty-five (45) days** to complete remediation activities. In the case of abuse and neglect, remediation must be **completed immediately**. SC agency will e-mail HCBS Lead notifying remediation activities have been completed.
- C. All SC agencies will start the remediation follow-up in a Shared Resolution status, unless there are immediate identified risks to client's health and safety. Based on the remediation results, a Quality Improvement Plan may be required.

- D. As always, the goal is compliance in all areas. Ongoing communication between the SC agency and the Off Site Review Lead is key to achieve ongoing quality improvement. The HCBS Unit will provide technical support when requested by the local supervisor.

8. Reviewing Remediation Activities

- A. Within **five (5)** working days, the HCBS Off-Site Review Lead/Reviewer will review remediation actions and approve/disapprove steps. If the HCBS Off-Site Review Lead/Reviewer disapproves remediation steps, the HCBS Off-Site Review Lead/Reviewer will return the review to the SC agency for correction of remediation activities.
- B. The SC agency will resubmit remediation to HCBS Unit for approval.

9. Final Off-Site Report

- A. The Off-Site HCBS Review Lead develops the final results report.
- B. The HCBS Quality Unit Review Lead will e-mail the results report to the DHHS Administrators or AAA/ILC Director with copies to the Agency’s Waiver Supervisor (s) within **10 working days** of the date of the finalization of the review. Either the HCBS Unit or the SC agency can request a conference to explain the results.

10. State Wide Reports

- A. Following the end of the review cycle, HCBS Waiver Unit Quality Team will develop statewide reports based upon the data collected through this Off-Site Review process.
- B. These reports will be aggregated, analyzed and presented to the QI sub-committee.

11. Off-Site HCBS File Review Flow Chart

