



# **DHCF's Oversight Monitoring of IDD Providers**

## **Presenters**

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# Overview of Home and Community Based Services (HCBS) Waivers

- ▶ The District currently has three HCBS Waivers:
  - The Intellectual Disabilities/Developmental Disabilities Home and Community-Based Services Waiver (IDD Waiver)
    - Effective date: October 1, 2022
  - The Individual Family Supports ( IFS) Waiver
    - Waiver Amended: November 1, 2020 with effective date of October 1, 2022
  - The Elderly and Persons with Physical Disabilities Waiver (EPD Waiver)
    - Effective date February 1, 2022



# Overview of 1915(c) HCBS Waivers

- ▶ The six assurances required to operate a HCBS waiver:
  1. Level of Care
  2. Participant-Centered Planning and Service Delivery
  3. Qualified Provider
  4. Health and Participant's safeguards
  5. Administrative Authority
  6. Financial Accountability



# Understanding the relationship - Roles and Responsibilities for DD Waivers

## ▶ Oversight vs. Operational

- DHCF has delegated the operational responsibility of HCBS Waivers both IDD and IFS to the Department on Disability Services (DDS).
- This delegation includes DDS meeting the assurances and sub-assurances for Level of Care, Participant Centered Planning and Service Delivery, Qualified Provider, and Health and Welfare.
- DHCF, the Single State Medicaid agency has the oversight responsibility for both the IDD/IFS Waivers including the aforementioned assurances, as well as the Administrative Authority and Financial Accountability.



# Performance Measures Under Each Waiver Assurances

- ▶ Level of Care-2
- ▶ Participant-Centered Planning and Service Delivery-6
- ▶ Qualified Provider-6
- ▶ Health and Participant's safeguards-15
- ▶ Administrative Authority-3
- ▶ Financial Accountability-4



# Performance Measures below 86% Compliance as of June 30, 2023

## **Administrative Authority:**

- Percentage of providers that met oversight compliance

## **Qualified Providers:**

- Provider's correct identified deficiencies cited during certification reviews
- Certified providers train staff according to DDS policies and procedures

## **Financial Accountability:**

- Percent of claims reviewed by Program Integrity audits that fail standards
- Percentage of claims paid with people's person-centered plan authorizations



# IDD Qualified Provider Review

- ▶ Select random cases of individual/providers from expenditure report
- ▶ Review MCIS to obtain a snapshot of the person's ISP and waiver services
- ▶ Review claims data for the period under review
- ▶ Contact the provider to schedule the monitoring visit
- ▶ Documentation review at the provider site



# Qualified Provider Monitoring Tool Indicators

- ▶ Is there documented evidence of service provision in alliance with provider billing?
- ▶ Is there any discrepancy in documentation?
- ▶ Was the staffing ratio maintained?
- ▶ Are waiver services overlapping?
- ▶ Is the provider delivering the service as authorized?





# Non-Compliant Findings from Oversight Monitoring

- ▶ Progress notes missing start and end dates
- ▶ Copying and pasting of notes
- ▶ Missing signatures on documentation such as quarterly and daily notes
- ▶ No documentation of goals being addressed
- ▶ Timesheets are not matching the service and support provided to the waiver participant



## Monitoring Tool Indicators and the 86% CMS Standard

- ▶ Less than 86% score on any indicator and/or overall score will trigger the issuance of an Opportunity For Improvement Plan (OFIP)
  - Triggers the need for further analysis to determine the cause of performance problems
  - Based on further analysis, if DHCF determines problem is systematic, then a Quality Improvement Project must be developed and reported to CMS.



# Opportunity For Improvement Plans

- ▶ Submitted for each indicator below 86%
- ▶ Plan/strategy to be created and continuously used to prevent a reoccurrence of indicators with a score below 86%
- ▶ OFIP must be returned to DHCF within 5 business day of receipt of findings
- ▶ OFIP is reviewed and acknowledged
- ▶ Data is shared with DDS thru quarterly reports



# Points to remember when developing an OFIP

- ▶ What corrective action(s) the agency will implement to address the identified deficient areas?
- ▶ What continuous quality improvement (CQI) interventions will be implemented to ensure the deficient practices will not be repeated?
- ▶ How the CQI will be monitored to ensure these findings will not recur, (i.e., what type of quality assurance program will be implemented by the agency?)

and

- ▶ Anticipated completion / completion date for each remedial action



# Links for Approved IDD and IFS Waivers and Regulations

## District of Columbia Municipal Regulations Chapter 29-19

- <https://www.dcregs.dc.gov/Common/DCMR/RuleList.aspx?ChapterNum=29-19>
- <https://dcregs.dc.gov/Common/DCMR/RuleList.aspx?ChapterNum=29-90&ChapterId=5381>

## Approved IDD and IFS Waivers

- <https://dds.dc.gov/release/new-waiver-and-amendments-enhance-support-services-people-disabilities-2022>



# Questions

