



Sharpening Expectations

New Directions in Quality at CMS

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Background

- Two waivers
 - Community Pathways
 - 11,100 “slots”
 - Provider-Managed
 - New Directions
 - 300 “slots”
 - Participant-Directed
- Renewal July 1, 2008
- “It’s not easy being green...”
 - Technical Assistance



Bringing People Together




- 2 Day “Retreat”
- Facilitated by HSRI
- Self-Advocates, Family Members, Providers, Advocacy Organizations, Resource Coordinators (case managers), Office of Health Care Quality, Medicaid, Developmental Disabilities Regional Offices, Protection & Advocacy System, Developmental Disabilities Council

The Brainstorm

DOMAINS/ OUTCOMES	PERFORMANCE INDICATORS	CMS Assurance (Key Below)	DATA/ INFORMATION SOURCES <i>(resp. party, freq., sample)</i>	Remediation <i>(resp. party, freq.)</i>	DATA/ INFORMATION SOURCE GAPS/ISSUES
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- Over 60 Outcomes
 - People are healthy
 - People make choices about where they live
- 1-4 Indicators per Outcome
 - Proportion of medical issues identified where there was not timely follow-up
 - Proportion of people who report that they chose where they live
- 1-3 Data Sources per Indicator
 - OHCQ and Quality Assurance Team Surveys
 - Ask Me! Survey
- Remediation Strategies
 - Training and Technical Assistance
 - Citations/Plans of Correction
 - License Revocation



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- If quality means different things to different people, do our systems have the integrity to support (and encourage) those differences?

in·teg·ri·ty

1 : firm adherence to a code of especially moral or artistic values : incorruptibility

2 : an unimpaired condition : soundness

3 : the quality or state of being complete or undivided : completeness

synonyms see honesty

Narrowing It Down



■ Administrative Authority

□ 3 Measures

- DDA will submit to the Office of Health Services an annual HCBS Waiver Review Report on waiver quality performance measures including aggregate data, trends, remediation efforts, and system improvements.

■ Level of Care

□ 4 Measures

- On a biannual basis, DDA will monitor a sample of initial LOC determinations from each regional office for appropriateness.
- On a biannual basis, DDA will monitor the number of LOC determinations revised as a result of Medicaid Fair Hearings and Department of Human Resources (DHR) Disability Review Team assessments.

**Time Sampling, Disproportionate Sampling, 100% Reviews



Narrowing It Down

■ Health and Welfare

□ 5 measures

- Number of incident reports involving unauthorized or inappropriate use of restraints.
- Number of direct care staff that receive training on positive behavior supports.

■ Financial Accountability

□ 3 measures

- Number of licensed providers with completed annual independent audits.




And for Participant Direction?

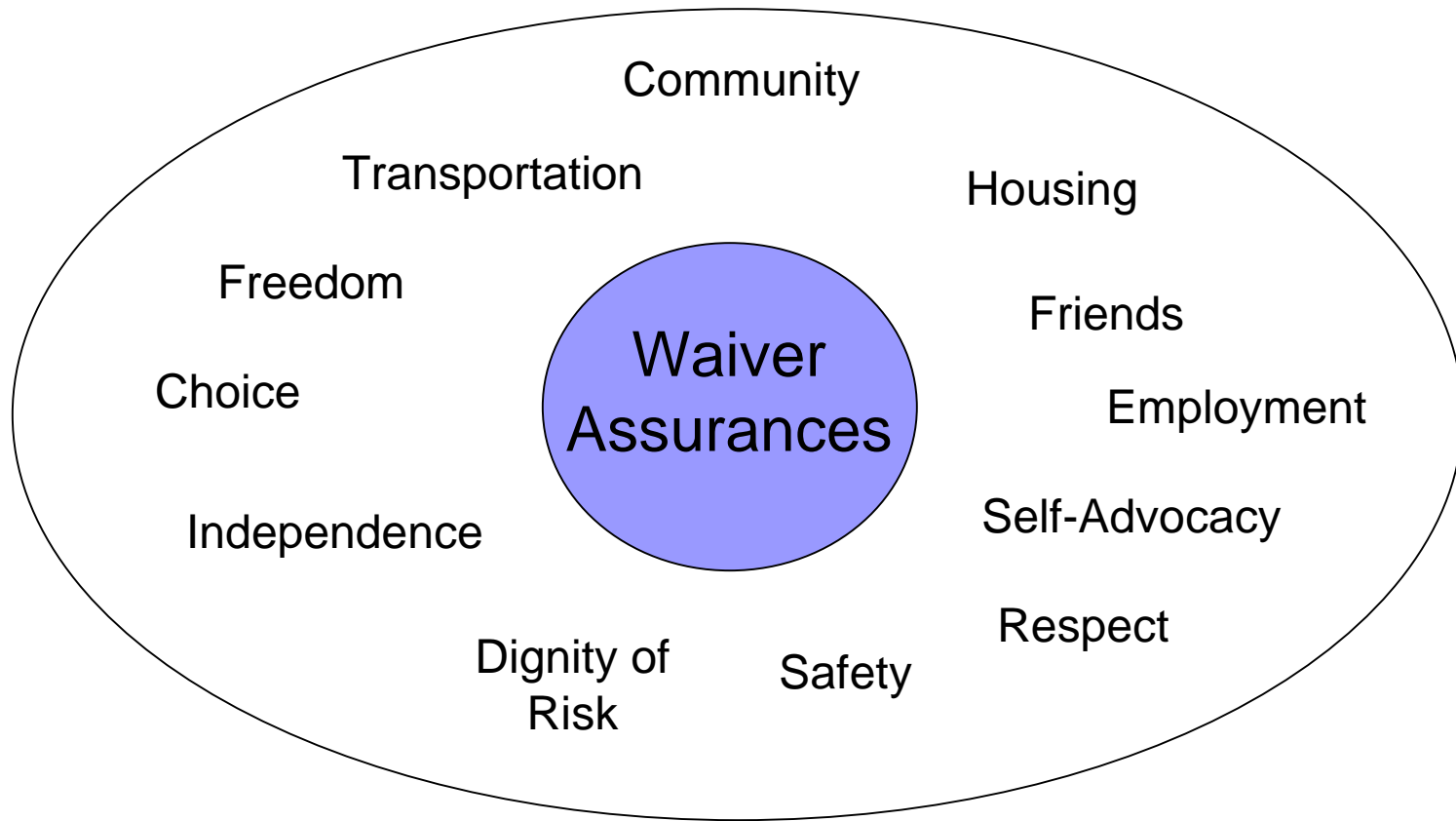
- Health and Welfare

- Individuals receive the nursing care specified in their IP&Bs. • Percent of nursing care used based on budget utilization.

- Financial Accountability

- Fiscal Management Services (FMS) are responsible for completing all CMS 1500s in accordance with the DDA-approved Individual Plan and invoices/timesheets received.

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- Ask Me!
 - Resource Coordination/Case Management
 - Licensing
 - Quality Assurance Plan system
 - Training and Technical Assistance
 - Policy on Reportable Incidents
 - Office of Health Care Quality Survey
 - DDA Quality Assurance Review Team Site Visit
 - Complaint System
 - Stakeholder Input
 - Financial Audits
 - Internal Audits/Sampling





And as part of Systems Change...

- How do you reduce restraints becomes
how do you eliminate the use of restraint?
- How do you ensure people are supported
to receive follow-up medical care becomes
how do we promote health in all aspects of
people's lives?
- How do we give people choices becomes
how do we empower people?



... It is a tool... a logic model

- That we can apply beyond our waiver quality measures
- That will help us examine our own processes as we undertake strategic planning
- That helps us create systems within which people can define what quality means in their own lives...



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