

Enhancing Health and Welfare of Individuals Receiving HCBS: Federal Efforts and State Emerging Practices

HCBS Conference

August, 2019

Speakers

- **OIG**

- Richard S. Miller, CPA, Senior Auditor
- Shawn Dill, Senior Auditor

- **CMS**

- Ralph Lollar, Director of Division of Long Term Services and Supports, Disabled and Elderly Health Program Group, Center for Medicaid and CHIP Services

- **ACL**

- Jennifer Johnson, Ed.D., Director, Office on Intellectual and Developmental Disabilities, Administration on Disabilities

Speakers - ACL Living Well Project

- Technical Assistance Center
 - Val Bradley, Human Services Resource Institute
- New Hampshire
 - Linda Bimbo, Project Director, Institute on Disability, University of New Hampshire
 - Mary St. Jacques, Project Director, Institute on Disability, University of New Hampshire,
- Virginia
 - Parthenia Dinora, PhD., Associate UCEDD Director, Partnership for People with Disabilities, Virginia Commonwealth University
- Missouri
 - Michelle Reynolds, Ph.D., Director of Individual Advocacy and Family Support, UMKC Institute for Human Development, UCEDD
 - Jenny Turner, LCSW, Project Director, UMKC Institute for Human Development UCEDD

Shared Interest in Health and Welfare





Joint Report: Ensuring Beneficiary Health and Safety in Group Homes Through State Implementation of Comprehensive Compliance Oversight – January 2018





Why We Did These Audits

- Congressional request:
 - Prompted by media reports regarding abuse and neglect of individuals residing in group homes.
- Performed audits in CT, MA, NY, ME and AK
- Reviews focused on Medicaid beneficiaries
 - Criteria: HCBS Waiver Participant Safeguards
 - Data matching with ER visits & incident reports





What We Found

- The State agencies did not comply with Federal waiver and State requirements on reporting and monitoring critical incidents.
- State agencies did not ensure that:
 - All critical incidents were reported.
 - All critical incident data was analyzed to detect unreported incidents.





Recommendations

- We made several recommendations to the Medicaid State agencies including:
 - Develop and provided training on critical incident reporting.
 - Update their policies and procedures.
 - Provide access to Medicaid claims data.





Inter-Agency Partnership

- Provide multiple perspectives and depth of expertise across knowledge areas.
- Members include representatives from:
 - HHS OIG
 - HHS Office of Civil Rights
 - HHS Administration for Community Living
 - Department of Justice
- Coordination with CMS and outreach to national organizations





Model Practices: A Roadmap for States

- 4 Model Practices:
 - Incident Management and Investigations
 - Quality Assurance
 - Mortality Reviews
 - Incident Management Audits
- Key Goals of the Model Standards:
 - Identify, Investigate, Remedy, Transparency and Accountability





Resources

State audit reports, joint report, Eye on Oversight video, and panel discussion available at:

oig.hhs.gov/grouphomes



Updates on Collective Strategies to Strengthen Health and Welfare in
HCBS

OIG



A Resource Guide for Using Diagnosis Codes in Health Insurance Claims To Help Identify Unreported Abuse or Neglect





What We Learned

- Our work has shown that Medicare and Medicaid beneficiaries are being treated for injuries in hospital emergency rooms that may be the result of abuse or neglect and these events are not always reported as required.
- It has also shown that claims data can be used to identify critical incidents involving Medicaid beneficiaries in group homes and nursing homes.
- Our work has also demonstrated that health insurance claims submitted to programs such as Medicare and Medicaid can be used to identify thousands of beneficiaries who are the victims of abuse or neglect.





What We Developed

- OIG has developed an approach that uses the medical diagnosis codes included in Medicare and Medicaid claims data to target medical records for review.
- For example, the CMS Could Use Medicare Data to Identify Instances of Potential Abuse or Neglect report identified
 - more than 30,000 Medicare claims that explicitly indicated potential abuse or neglect and,
 - almost 30 percent of those incidents had not been reported to law enforcement.





Why We Developed the Guide

- OIG created this guide because we are committed to supporting our public and private sector partners in their efforts to curtail this ongoing problem.
- This guide can be used to help identify
 1. unreported instances of abuse or neglect,
 2. beneficiaries or patients who may require immediate intervention to ensure their safety,
 3. providers exhibiting patterns of abuse or neglect, and
 4. instances in which providers did not comply with mandatory-reporting requirements.





What is Included

- The guide includes
 1. flow chart showing key decision points in the process,
 2. detailed lessons that the OIG has learned using this approach, and
 3. technical information, such as examples of medical diagnosis codes.





Resources

The full guide is available at:

<https://www.oig.hhs.gov/compliance/compliance-resource-portal/abuse-neglect-guide/>



Updates on Collective Strategies to Strengthen Health and Welfare in
HCBS

CMS

CMS Three Pronged Approach to

- **CMS States and Associations HCBS Quality Workgroup:** Restructured to consider factors contributing to health, safety and welfare across Medicaid authorities and evaluate measure options and reporting opportunities.
- **National Incident Management Survey:** In July 2019, CMS issued a survey to states nationwide on approaches to obtain information regarding how states organize their incident management system to best respond to, resolve, monitor, and prevent critical incidents in their waiver programs.
- **Health and Welfare Special Review Team:** In an effort to be responsive to a recent OIG recommendation, CMS developed a team that would assist states with their implementation of a system of evaluating and addressing issues in their oversight of the health and welfare systems on a proactive basis.

Fiscal Components Improving Health and Welfare

- Addressing Fraud, Waste and Abuse to improve Outcomes for the people we support in the Community
- Addressing Abuse, Neglect and Exploitation to improve Outcomes for the people we support in the Community

Updates on Collective Strategies to Strengthen Health and Welfare in
HCBS

ACL

Living Well-Model Approaches for Enhancing the Quality, Effectiveness and Monitoring of Home and Community Based Services for Individuals with Developmental Disabilities

- Eight 5-year grants
- Focused on building the capacity of HCBS systems and enhancing community monitoring to prevent abuse, neglect, and exploitation.
- Projects are developing and testing one or more model approaches of a coordinated and comprehensive system that includes two interrelated core components:
 - (1) Community Monitoring and
 - (2) Community Capacity Building.

Two inter-related core components for enhancing and assuring the independence, integration, safety, health, and well-being of individuals living in the community:

Community Monitoring:

Reduce abuse and neglect of people with developmental disabilities

Community Capacity Building:

- *Supporting DSPs*
- *Leadership of individuals with ID/DD & families*
- *Evidence-based & promising practices*

Current grants

- 2017 Grantees
 - The University of New Hampshire
 - The University of Virginia
 - The University of Georgia
- 2018 Grantees
 - Wisconsin DD Council
 - ALASKA DD Council
 - UMKC UCEDD
 - Idaho UCEDD
 - Indiana Family and Social Services

Living Well Grants

NEW HAMPSHIRE

Quality
Indicators
Self-
Assessment
Tool

FOR SERVICES AND SUPPORTS FOR PEOPLE WITH INTELLECTUAL
AND DEVELOPMENTAL DISABILITIES

Living Well – NH Quality Frameworks Project

University of New Hampshire Institute on Disability/UCED

Purpose

The LW grants seek to strengthen HCBS systems and promote the health, safety, independence, and participation of people with disabilities. Grantees are expected to work with a broad coalition of state stakeholders to:

- Support professionals working directly with people with disabilities;
- Promote the leadership of self-advocates and families;
- Promote the use of evidence-based and promising practices such as supportive decision making, person-centered planning, and competitive integrated employment;
- Address abuse and rights violations in the HCBS delivery system; and
- Increase the capacity of states to provide HCBS in integrated settings

QI Self- Assessment Tool Elements



Key Components of Health and Safety Compliance Oversight (2018) from the *Joint Report: Ensuring Beneficiary Health and Safety in Group Homes Through State Implementation of Comprehensive Compliance Oversight*



Selected NH HCBS waiver subassurance performance indicators



Selected participant Quality of Life Outcomes from the National Core Indicators



Key Provisions of the HCBS Settings Rule (2014)



Review and input from Project Team and NH Quality Council



Where appropriate, sections and some sub-sections of the tool include an icon indicating a cross walk with the domains the *Charting the Life Course*

Self- Assessment Tool – Indicators

Person-Centered Planning

- Plan Elements and Procedures
- Planning Process

Participant Outcomes

- Employment
- Community Inclusion and Relationships
- Choice
- Rights
- Data Collection, Analysis, Quality Improvement

Health and Wellness

Self- Assessment Tool – Indicators cont'd

4. Incident Management

- Reporting and Response
- Closing the Loop
- Trending and Reporting
- Quality Improvement and Prevention

5. Mortality Review

- Reporting and Response
- Closing the Loop
- Trending and Reporting
- Quality Improvement and Prevention

6. Provider Qualifications

7. Fiscal Integrity

Contact Information

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Living Well Grants

MISSOURI



Charting the LifeCourse: Mo Living Well Project

HCBS Conference Session

Sheli Reynolds, PhD

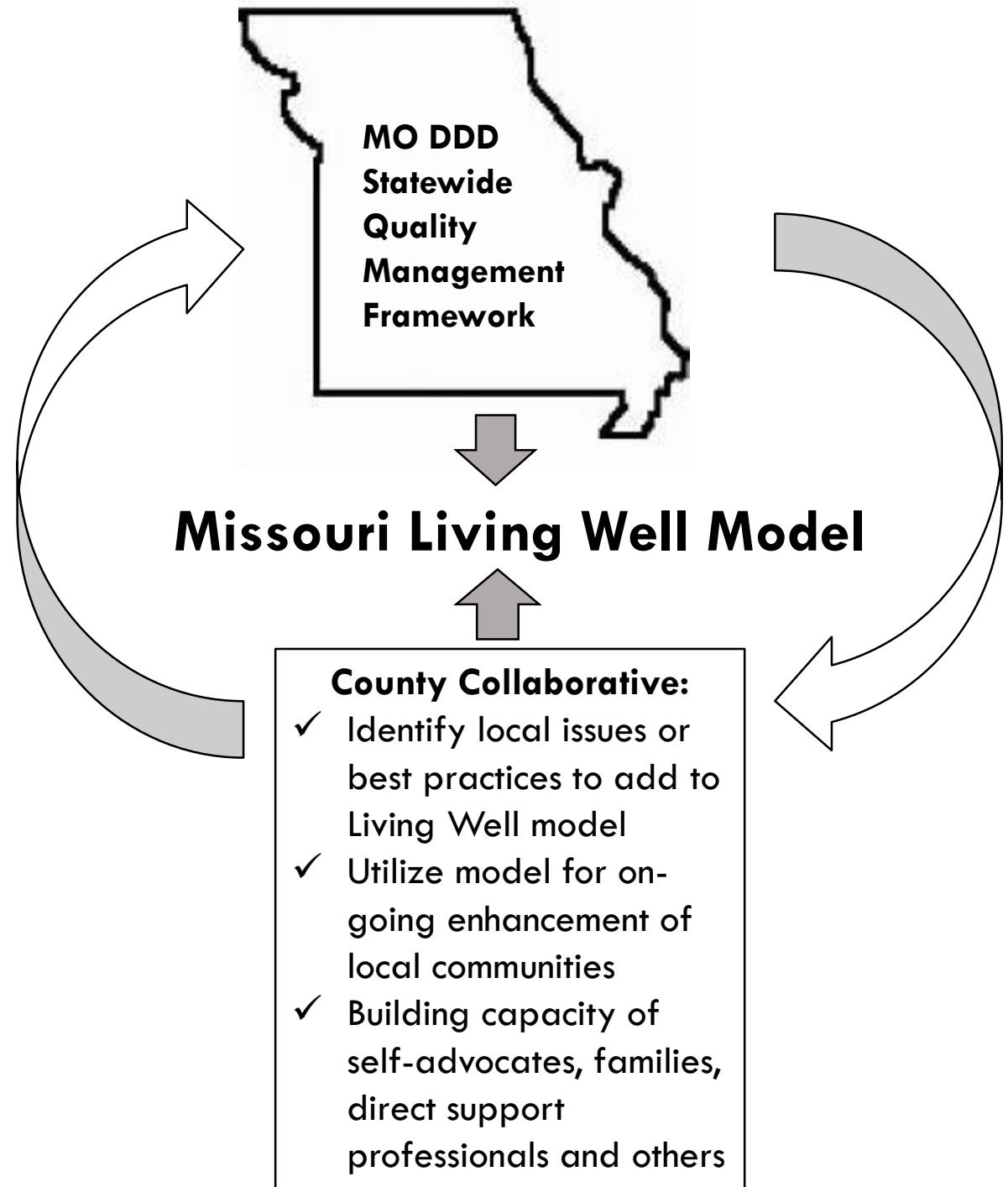


Mo Living Well Initiative

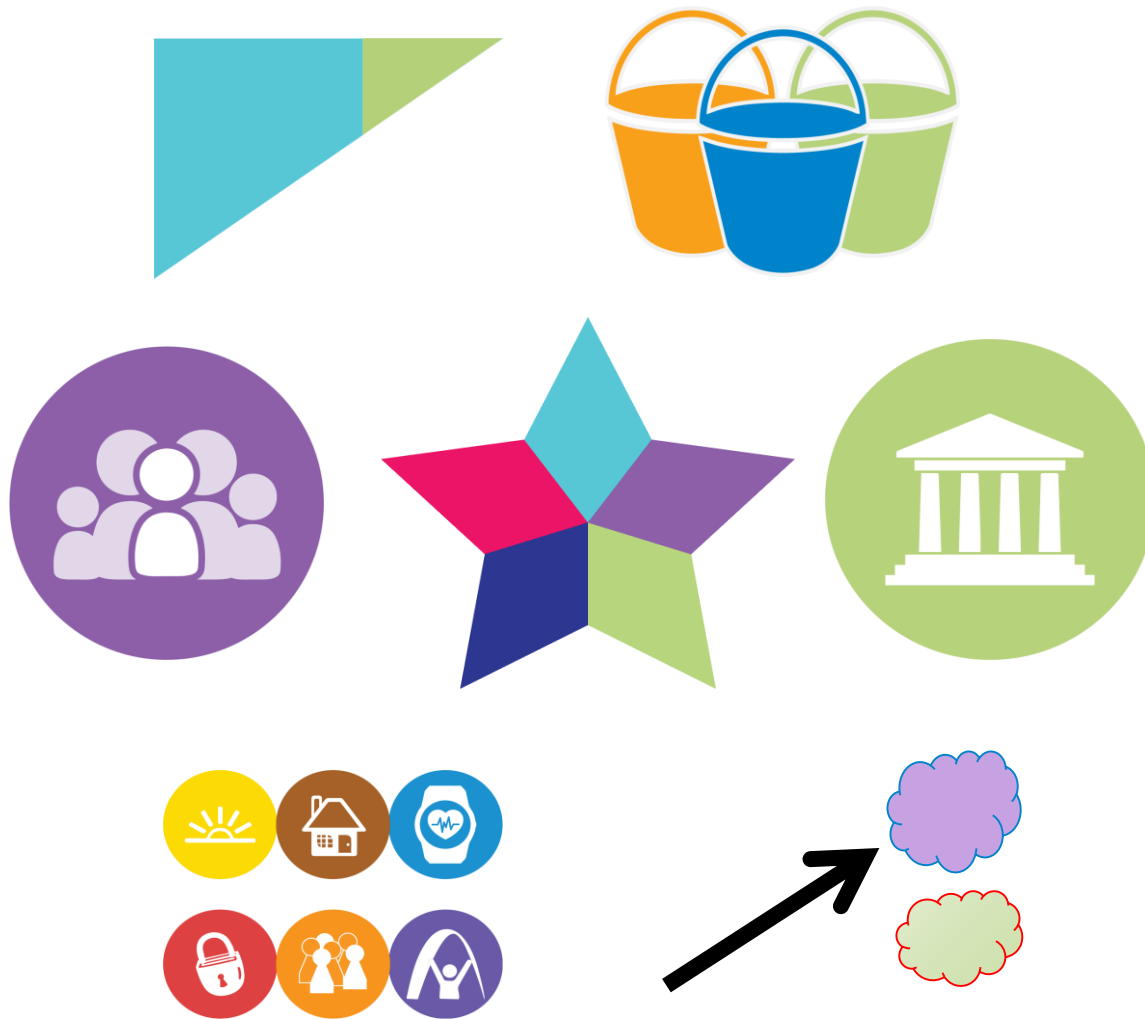
Enhance state and **county level structures** for monitoring and capacity-building and shape decision-making to benefit of people with IDD.

Build on current quality assurance initiatives being conducted by UMKC-IHD with the Missouri DDD and other state agencies nationwide.

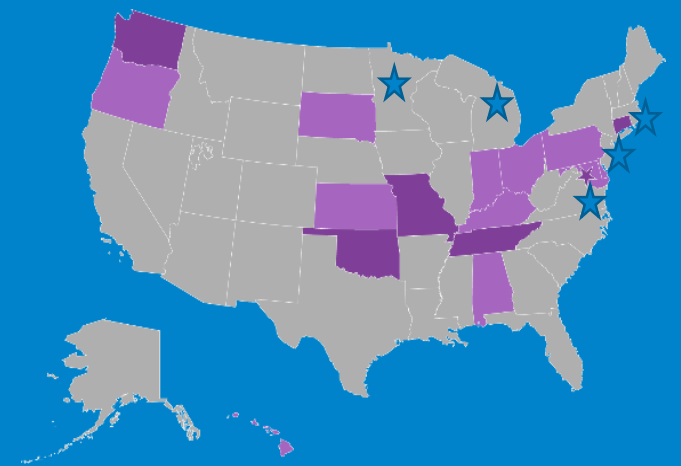
Establish a usable statewide dashboard of county level data that **integrates social determinants of health and state DD HCBS requirements** for making local decisions.



Charting the LifeCourse Framework



National
Community of Practice
on Supporting Families

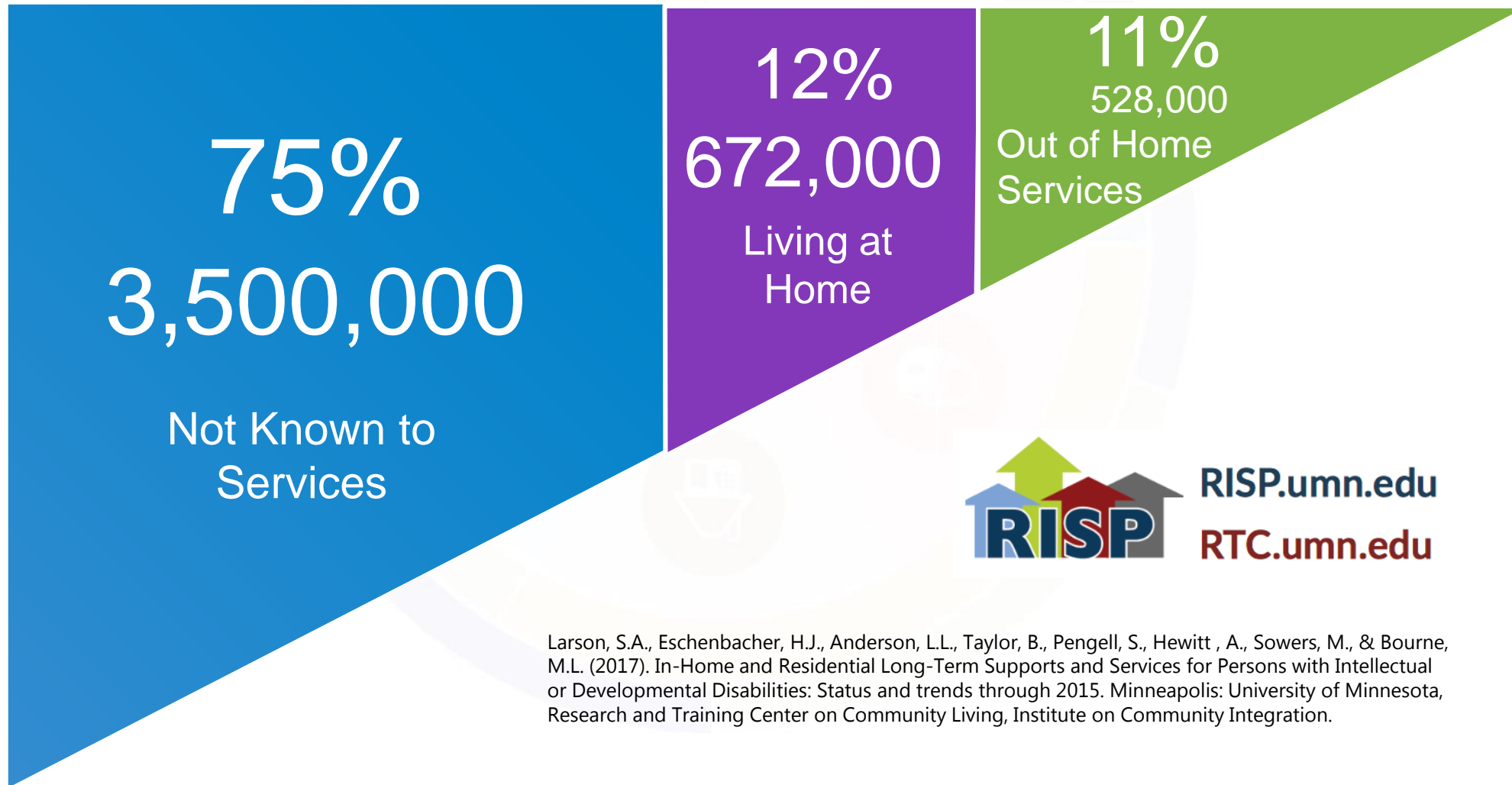


Lead By:
NASDDDS
&
UMKC-IHD, UCEDD



Focusing on Universal Strategies

4.7 million estimated People with Developmental Disabilities*

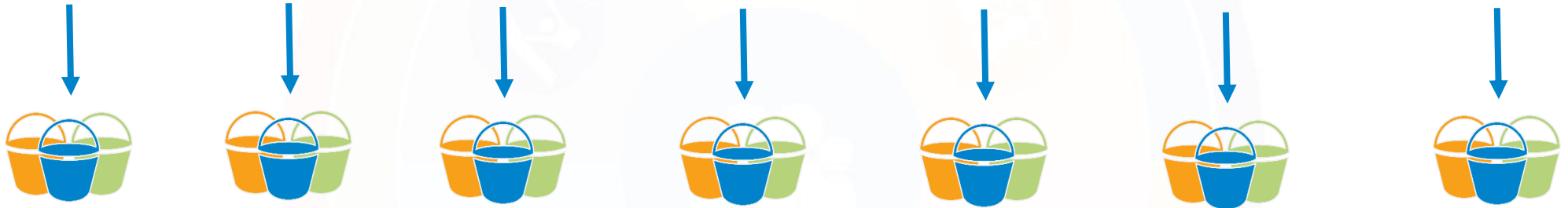


Larson, S.A., Eschenbacher, H.J., Anderson, L.L., Taylor, B., Pengell, S., Hewitt, A., Sowers, M., & Bourne, M.L. (2017). In-Home and Residential Long-Term Supports and Services for Persons with Intellectual or Developmental Disabilities: Status and trends through 2015. Minneapolis: University of Minnesota, Research and Training Center on Community Living, Institute on Community Integration.



LTSS Person Centered Touch Points

Human Needs of Person and their Family



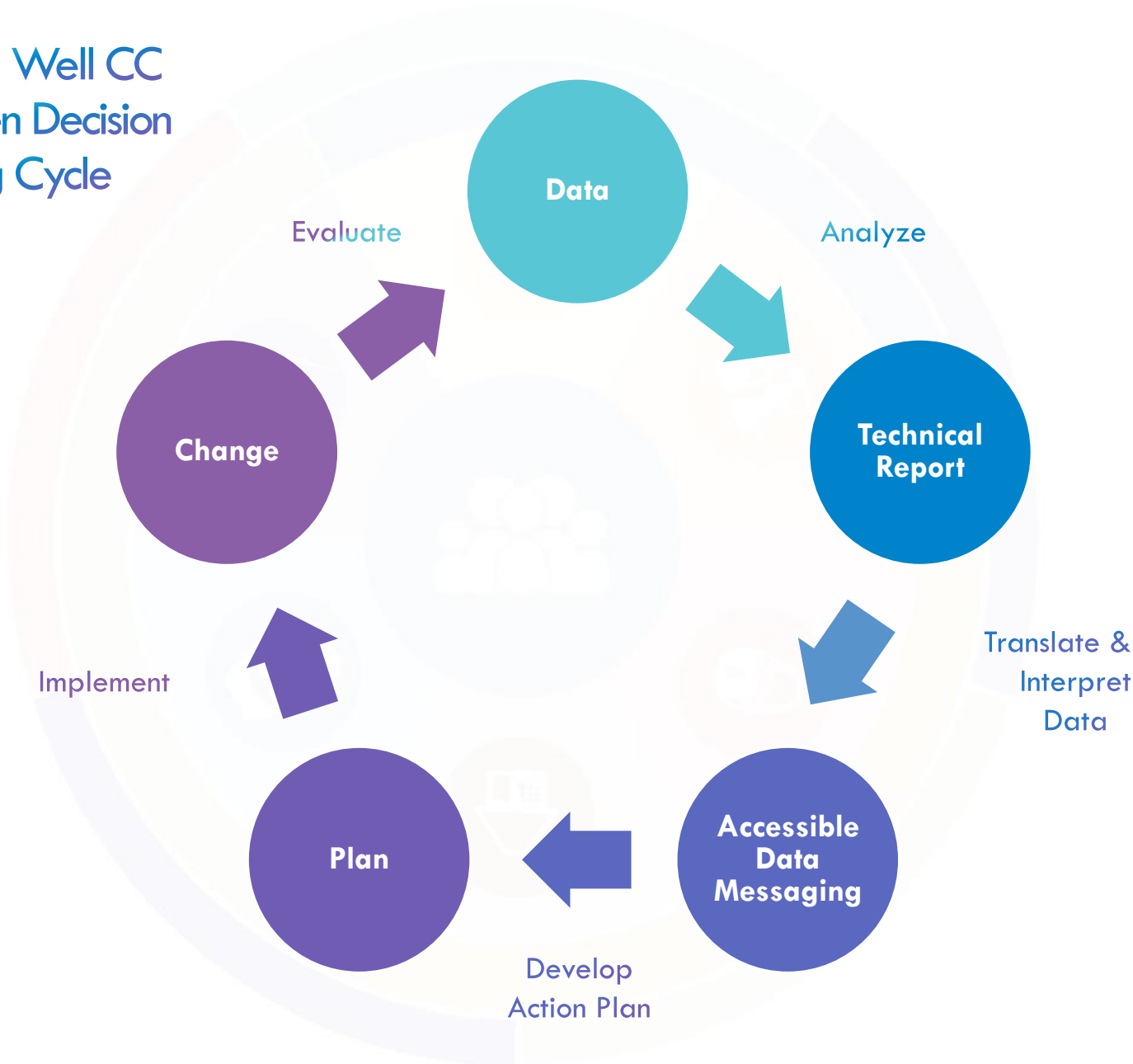
Touchpoints between Person/Family and LTSS



System Requirements (Federal, State, Organizational)



MO Living Well CC Data Driven Decision Making Cycle



Coordinated Monitoring	Project Structure	Capacity Building
<p>Y1: Overall</p> <ul style="list-style-type: none"> Map current monitoring structures and data within and outside state DD system Develop a structure the organizes and integrates into user-friendly formats 	<p>Leadership Council</p> <ul style="list-style-type: none"> Quarterly Meetings <p>Development Team</p> <ul style="list-style-type: none"> Monthly Calls 	<p>Y1: Overall</p> <ul style="list-style-type: none"> Identify key target areas and topics for capacity building <p>Y1 Q4: County Collaborative</p> <ul style="list-style-type: none"> Ambassador Series for Local Leadership Team
<p>Y2-5: County Level Teams</p> <ul style="list-style-type: none"> Learn about how use for local data reports Develop local objectives based on areas of need 	<p>Y1-2 5 County Collaborative</p> <p>Y3-5 6 new counties</p>	<p>Y2-5:</p> <ul style="list-style-type: none"> Community Wide Training Events Using local data, identify key target groups for training Provide local training to local target group Train-the-Trainer



Contact Information

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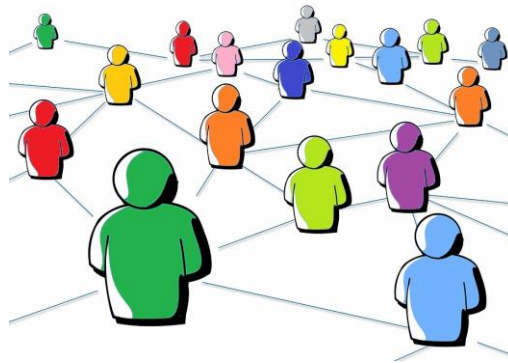
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Project Living Well

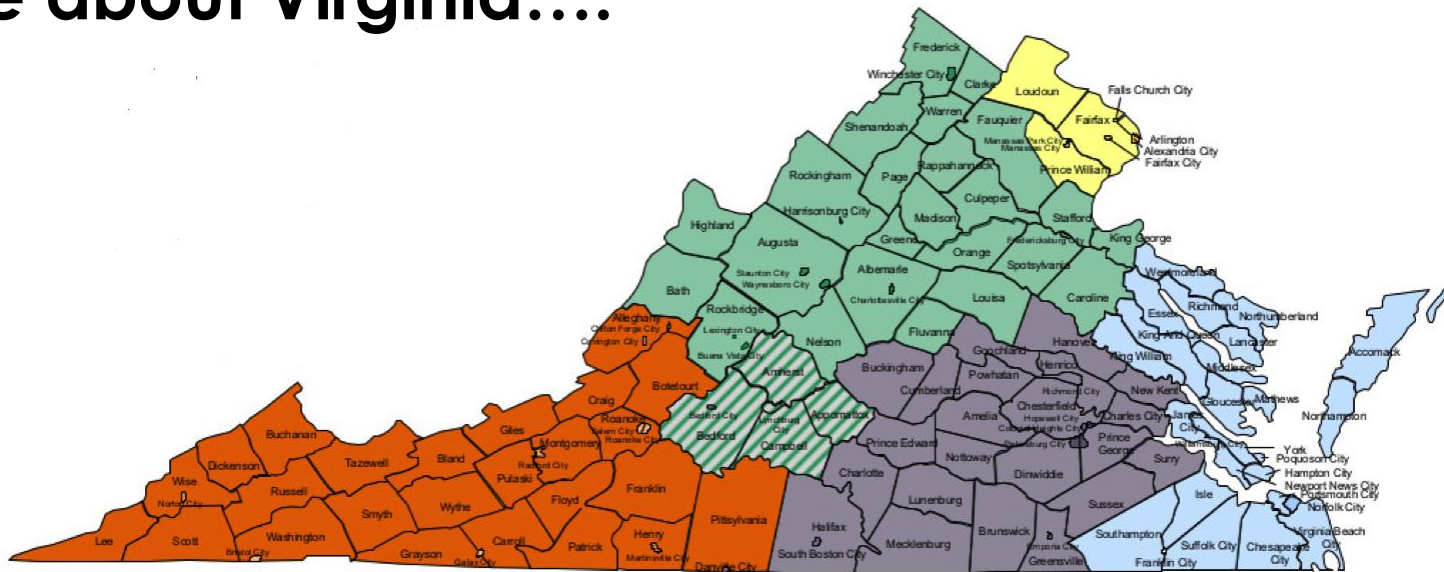
Virginia

Parthy Dinora, PhD.

**Partnership for People with Disabilities
Virginia Commonwealth University**

Context

A little about Virginia....



.... and a DOJ consent decree

Overall Model Activities



Vision

Exploration

Installation

Initial
Implementation

Full
Implementation

Replicable
Systems
Change
Model



Three Main Focus Ideas

Capacity-building



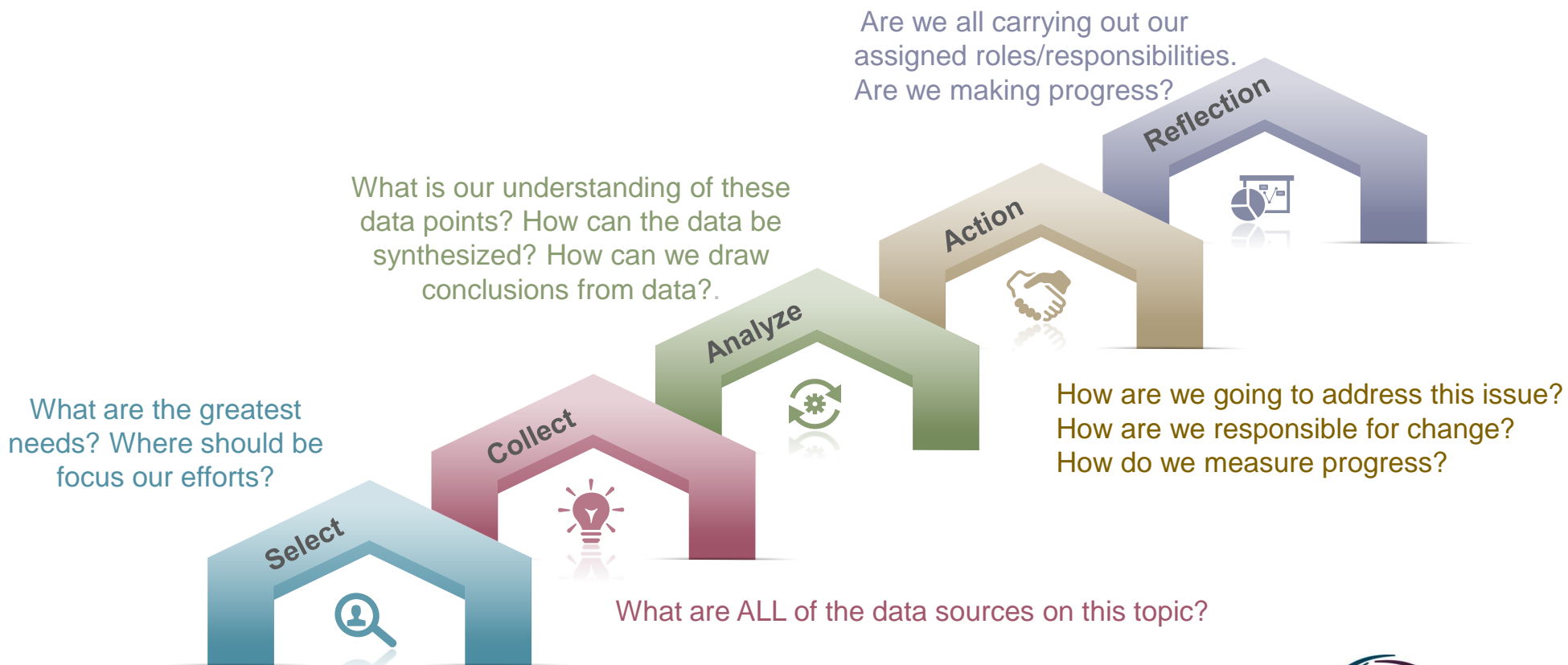
Monitoring



Alignment



Building Capacity for Community Monitoring

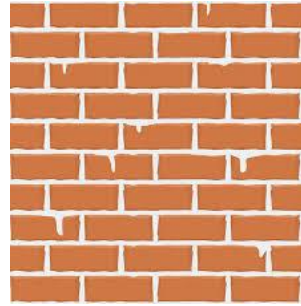






Catalysts

- **Expert Facilitation**
- **Dedicated Time!**
- **People/agencies putting real/tangible chips into the pot**
- **Trying to align actions/activities so that they are mutually beneficial**



Barriers/Challenges

- **Time/Attention**
- **Climate**
- **Competing Priorities**
- **Leadership Turnover**

Questions/Discussion

Thank you