



Department for Aging
and Disability Services

CAP Program

1915 c Waivers

1915 c Waivers are required to contain the following information:

1. Administrative Authority
2. Level of Care
3. Qualified Providers
4. Plan of Care
5. Health and Welfare
6. Financial Accountability

1915 c Waivers

Agency comments on CMS Request:

1. All of the issues identified by CMS were a result onsite audits of the MCOs conducted by KDADS in 2015 and reports submitted to CMS by KDADS with findings.
2. The CMS request is based on findings for the time period of 2014, during the 2015 KDADS audit of the MCO.
3. KDADS had indicated areas of improvement and the MCOs immediately proceeded with remediation.
4. CMS did not indicate any substantiated cases of harm to participants. Rather they indicated there were operational shortcoming offering the opportunity for improvement.

Administrative Authority

Area of Opportunity: Submission of quality reports from KDADS to KDHE.

– **What is being done:**

- KDADS implemented an HCBS quality review policy beginning in early 2016, which specifically outlines timelines, responsibilities and deliverables in providing oversight of the MCOs and Functional Assessors that provide direct support to HCBS participants.
- KDHE also approved the KanCare policy that identifies expectations of the MCOs as part of the ongoing review process.

– **Timeline to address:**

- KDADS will finish all past-due reports by September 2017. Thereafter quarterly reports will be submitted to KDHE and CMS by appropriate due date.



Administrative Authority

Area of Opportunity: Submission of monthly HCBS status reports to KDHE's Long Term Care (LTC) meeting

- **What is being done:** HCBS Staff are required to attend meetings to provide program updates or submit status reports. Internal management practices have created accountability.
- **Timeline to address:** This area has been addressed. In January 2017 LTC meeting 100% of required reports were submitted.

Levels of Care

Area of Opportunity: Level of Care (LOC) reassessments are done annually.

- CMS indicated this as a performance issue despite a March 12, 2014 official notification from CMS specifically stating this was no longer required.
- Despite the March 12, 2014 official notification KDADS has taken the following steps to improve performance:
 - Hired an Aging and Disability Resource Center Program Manager to provide additional oversight to three HCBS populations (FE, PD and TBI).
 - Identified HCBS participants who have not utilized waiver services at the frequency required by the waiver.
 - Submitted lists to the assessing entity for all wavier participants who have a level-of-care assessment older than 12 months.
 - Established quarterly reports to provide oversight of assessing entities and ensuring level-of-care assessments are completed in accordance with waiver standards.

Levels of Care

Area of Opportunity: LOC assessments not performed by qualified assessors.

- **What is being done:** KDADS as established a new process that will increase the frequency of verifying assessor qualifications. **Timeline to address:** KDADS has implemented the new process beginning January 2017. All assessing entities have submitted their provider qualification data in January 2017. This will continue quarterly.
- It should be noted that on the performance measure regarding the accurate application of level-of-care assessments displayed a 90 percent accuracy rate when averaged across waivers.

Qualified Providers

Area of Opportunity: KDADS lacked a reporting mechanism to capture provider qualifications.

- The State was unable to provide data concerning qualified provider for most HCBS waivers.
- **What is being done:** KDADS performed on-site reviews of MCOs on provider qualifications in January 2017. KDADS is in the process of analyzing ~~this data~~ the findings to identify current gaps and solution options.
- **Timeline to address:** KDADS expects to have an on-site assessment report complete by April 2017 which will provide the project plan to address these issues. This will be followed by policy to specifically remediate the area of opportunity noted.

Plan of Care

- **Areas of Opportunity:** Plan of Care process does not adequately address federal requirements and performance measure present in the HCBS waivers.
- Key findings:
 - 9 of 13 performance measures scored above 80%. For compliance CMS requires 87%
 - 85% of plans of care address the participants assessed needs as indicated in the assessment.
 - 93% of waiver participants received services in the type, scope, amount, duration and frequency specified in service plans.

Plan of Care

What is being done: KDADS is evaluating the current planning process for plans of care and creating a gap assessment against federal requirements and wavier performance measures. The result of this gap assessment will be a policy which develops a standardized and streamlined approach.

- **Timeline to address:** Final plan of care policy by August 2017.

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- **Area of Opportunity:** KDADS lacks a comprehensive system to track critical incidents.
 - The state has relied on a coordinated approach to tracking and following critical incidents; DCF and the MCOs follow up on critical incidents.
 - It should be noted that CMS has not shown conclusive evidence that the state is failing to address critical incidents, but rather that we lack a standardized centralized reporting system.
 - **Plan to address:** KDADS, KDHE, MCOs and DCF have worked together to develop a centralized system. The base system is currently in operation. A cross-agency IT project plan is being developed to enhance the current system capabilities and share information across agencies in a timely and efficient manner.
 - **Timeline to completion:** KDADS is currently capturing critical incidents via the current system. A more automated approach for cross-agency sharing of information is tentatively targeted to be completed by August 2017.