



KDADS STANDARD POLICY

Policy Name: Provider Qualification Policy	Policy Number: M2017-171
Commission: Aging and Disability Community Services and Programs	Date Established: 12/19/2017
Applicability: All HCBS Waivers	Date Last Revised: 02/17/2020
Contact: HCBS Quality Assurance Manager	Date Effective: 03/02/2020
Policy Location: https://www.kdads.ks.gov/commissions/home-community-based-services-(hcbs)/hcbs-policies	Date Posted: 03/02/2020
Status/Date: Final Policy	Number of Pages: 3
<i>Revision History 02/17/2020</i>	

Purpose

Pursuant to 42 CFR Part 441 the purpose of this policy is to establish the process by which KDADS shall have oversight and monitoring of the process by which the Managed Care Organizations review and monitor HCBS provider qualifications and associated compliance follow up.

Summary

At a minimum once every 365 days KDADS shall conduct a review of MCOs policies, systems and processes that monitor HCBS provider qualifications and associated compliance follow up. The processes detailed in this policy shall result in data to enable the State to report on the performance measures related to the provider qualification sub assurance.

Entities/Individuals Impacted

- **Kansas Department for Aging and Disability Services (KDADS)**
- **Kansas Department for Health and Environment (KDHE)**
- **Managed Care Organizations (MCOs)**
- **All HCBS Waiver Providers**

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I. Policy

- A. The MCO shall have an internal system, process and/or policy in place to monitor and verify that all providers for each waiver are in compliance with the provider qualifications listed in the current and approved HCBS waiver at the time of the review period.
- B. The MCOs shall have an internal system, process and/or policy in place to address continued non-compliance.
- C. The KDADS Quality team shall review a sample of provider qualifications from each MCO to ensure the MCOs are following their internal system, process, and/or policy.
1. MCO desk or onsite reviews shall occur at a minimum of once per year.
 2. In addition, the KDADS Quality Team may select provider(s) from the sample to complete a full on-site or desk review to include evidence of all waiver(s) service compliance.
 - a) The KDADS quality team shall review evidence of provider qualifications for each provider selected in the review sample. This shall include all services the provider has included in their Kansas Medical Assistance Program (KMAP) enrollment.
- D. The MCO shall produce evidence to show adherence with their internal system, process, and/or policies and are monitoring both compliant and non-compliant providers.
1. KDADS will only accept from the MCO, evidence showing provider compliance with provider qualifications requirements established in the current or approved HCBS waiver at the time of the review period.
 2. MCO records of provider qualification may be provided in either a hard copy or digital format.
- E. The MCOs shall be responsible for updating provider qualification requirements and informing their providers of changes in requirements based on the current approved HCBS waiver at the time of the review period.
- F. The MCOs may operate directly, or indirectly through a single third-party entity, in conducting provider qualification monitoring activities.
1. In the event the MCOs contract with a single third-party entity, such entity shall be known to all HCBS waiver providers across the managed care network throughout the State.
 - a) The third-party entity shall operate in compliance with statutes, regulations, KanCare and HCBS waiver and policy requirements.

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Authority

Approved Kansas 1915(c) HCBS Waivers –

- Autism
- Frail Elderly
- Intellectual / Developmentally Disabled
- Physical Disability
- Serious Emotional Disturbance
- Technology Assisted
- Brain Injury

Federal Authority-

- 42 CFR 441.18
- 42 CFR 441.535
- 42 CFR 441.550
- 42 CFR 441.565
- 42 CFR 441.720
- 42 CFR 441.730

Related Information

HCBS Programs
503 S. Kansas Ave
Topeka, Kansas 66603