

QIO - HCBS Community Based Case Manager Interdisciplinary Team Ride Along (A-16 Report)

Purpose:

To ensure that the interdisciplinary team (IDT) follows a person-centered planning process and it is individualized to address member specific needs and results in a person-centered service plan based on historical information and future desires and outcomes. The activity is a result of the Special Terms and Conditions for Iowa 1915(b) waivers.

Identification of Roles:

MCO bureau account manager - provides communication to the MCO regarding the review activity.

MCO bureau quality improvement analyst - provides the A-16 report monthly to the HCBS operations manager.

HCBS operations manager - receives the A-16 report and orchestrates the meetings with the HCBS specialists and reports on the activity.

HCBS specialist - attends and completes the review of the IDT meeting.

Performance Standards:

- Observe the service planning process for 5 IDTs from each MCO per month.
- Record findings on approved forms and report findings to HHS on a monthly basis.

Path of Business Procedure:

Step 1: MCO bureau quality improvement analyst submits the monthly A-16 report to the HCBS operations manager.

Step 2: HCBS operations manager reviews the list and determines which regional HCBS specialist should be assigned to the individual IDT.

Step 3: HCBS operations manager sends the list out to the HCBS specialists.

Step 4: HCBS specialists compares dates to their work schedule and contacts the community based case manager to notify them that the specialist will be attending the IDT.

Step 5: The HCBS specialist attends the IDT and completes the first half of the CBCM IDT form.

Step 6: The HCBS specialist saved the completed form to the HCBS shared drive.

Step 7: 30 days after the CBCM IDT was attended the HCBS specialist requests a copy of the CBCM person-centered service plan, the old service plan, notes, and any other information that supports the person-centered planning process.

Step 8: Once the requested information is received, HCBS specialist completes the CBCM IDT form.

Step 9: HCBS specialist saves the completed form to the shared drive.

Step 10: Ten business days after the end of the month HCBS operations manager pulls the information into the CBCM IDT report and submits this to HHS.

Step 11: HCBS operations manager will also compile all results and send the prior months completed results to the MCO account managers for disbursement to the MCOs.

Forms/Reports/Materials:

A-16 (CBCM IDT) Tool

RFP References:

I.3.I.1. E.

<ul style="list-style-type: none"> Does the service plan include evidence that the identified clinical and support needs were addressed? 				
CBCM IDI Comments:				
File Review Comments:				
Overall Comments:				
<ul style="list-style-type: none"> Does the service plan include evidence of individually identified goals and desired outcomes that are observable and measurable? 				
CBCM IDI Comments:				
File Review Comments:				
Overall Comments:				
<ul style="list-style-type: none"> Does the service plan include evidence of interventions and supports needed to meet members' goals and incremental action steps as appropriate? 				
CBCM IDI Comments:				
File Review Comments:				
Overall Comments:				
<ul style="list-style-type: none"> Does the service plan reflect the services, frequency, and supports, both paid and unpaid (natural supports), that will assist the individual to achieve identified goals? 				
CBCM IDI Comments:				
File Review Comments:				
Overall Comments:				
<ul style="list-style-type: none"> Does the service plan include the name of each provider who is responsible for carrying out the interventions or supports included in the service plan? 				
CBCM IDI Comments:				
File Review Comments:				
Overall Comments:				
<ul style="list-style-type: none"> Does the service plan indicate if the member has elected to self-direct services and, as applicable, which services the individual elects to self-direct? 				
CBCM IDI Comments:				
File Review Comments:				
Overall Comments:				
<ul style="list-style-type: none"> Does the service plan include evidence of an emergency plan? 				
CBCM IDI Comments:				
File Review Comments:				
Overall Comments:				
<ul style="list-style-type: none"> Does the emergency plan include evidence of health and safety risks, emergency backup staff, and crisis response? 				
CBCM IDI Comments:				
File Review Comments:				
Overall Comments:				
19 Is there evidence that the case manager made contact with the member according to the requirements listed in contract section 4.4.B? (Monthly)				
CBCM IDI Comments:				
File Review Comments:				
Overall Comments:				
20 Is there evidence that the case manager visited the member in the member's residence face-to-face within the last quarter?				
CBCM IDI Comments:				
File Review Comments:				
Overall Comments:				
21 Is there evidence that service plans are reviewed and revised at least every 12 months, or when there is a significant change in the member's condition?				
CBCM IDI Comments:				
File Review Comments:				
Overall Comments:				
22 Was there evidence that a copy of the service plan was provided to all people involved in the plan?				
CBCM IDI Comments:				
File Review Comments:				
Overall Comments:				
23 Did the service plan contain all signatures of individuals and providers responsible for its implementation?				
CBCM IDI Comments:				
File Review Comments:				
Overall Comments:				
24 Is there evidence that written notice was provided to the member and the provider who initiated the request for any service authorization denial, or authorization of a service in an amount, duration, or scope that is less than requested?				
CBCM IDI Comments:				
File Review Comments:				
Overall Comments:				
25 If the member received COAC is the agreement complete?				
CBCM IDI Comments:				
File Review Comments:				
Overall Comments:				
26 If the member received COAC is the agreement signed?				
CBCM IDI Comments:				
File Review Comments:				
Overall Comments:				