A. Waiver Administration and Operation: Administrative Authority of the Single State Medicaid Agency

Assurance: The Medicaid Agency retains ultimate administrative authority and responsibility for the operation of the waiver program exercising oversight of the performance of waiver functions by other state and local/regional non-state agencies (if appropriate) and contracted entities.

Performance Measure

A1. Number and percent of satisfactory Medicaid-initiated operating agency and contractor (i.e. DBHDS, Xerox & PPL) evaluations.

Data Source: DMAS Annual Medicaid contractor and operating agency evaluation reports

Performance Measure

A2. Number and percent of DBHDS provider memorandums pertaining the waiver approved by DMAS prior to being issued by DBHDS.

Data Source: DMAS Operating Agency/ Contract Monitor performance monitoring

Sub-assurance: The process and instruments described in the approved waiver are applied appropriately and according to the approved description to determine participant level of care.

Performance Measure

A3. Number and percent of slots allocated to CSB's in accordance with the standardized statewide slot assignment process.

Indicators ND

N: Number of satisfactory Medicaid–initiated operating agency & contractor evaluations.

D: Total number of Medicaid initiated operating agency & contractevaluations

Indicators ND

N: # waiver provider memorandums issued by DBHDS that were approved by DMAS prior to being issued

D: Total # of waiver provider memorandums issued by DBHDS.

Indicators ND

N: # of slots assigned statewide according to the standardized proc

Data Source: DBHDS Operating Agency/Slot Allocation Reports-RSS

Performance Measure

	D: # of slots assigned statewide	
	Indicators ND	

B. Level of Care	
Assurance: The state demonstrates that it implements the processes and instrument(s) specified in its approved waiv	ver for evaluating
Sub-assurance: An evaluation for LOC is provided to all appliants for whom there is reasonal	ble indication tha
Performance Measure	
B1. Number and percent of all new enrollees who have a level of care evaluation prior to receiving waiver services	N: # of new en
	D: total # of ne
Data Source: DBHDS WaMS	
Performance Measure	
B2. The number and percent of VIDES (LOC) completed within 60 days of application for those for whom there is a reasonable indication that services may be needed in the future.	N: # of new enr
	D: total # of ne
Data Source: DBHDS WaMS	
a. Sub-assurance: The processes and instruments described in the approved waiver are applied appropriately and acco	ording to the ap
Performance Measure	
B3. Number and percent of VIDES determinations that followed the required process, defined as completed by a qualified CM, conducted face-to-face with individual and those who know him (if needed)	N: # of VIDES
	D: : total # of n needed in the fu
Data Source: DMAS QMR	
Performance Measure	
B4. Number and percent of VIDES determinations for which the appropriate number of criteria were met to enroll or	N: # of VIDES
maintain a person in the waiver	the waiver
	D: total # VIDE
Data Source: DMAS QMR	

ing/reevaluating an applicant's/waiver participant's level of care
that services may be needed in the future.
Indicators ND
enrollees who have a level of care evaluation prior to reeiving waiver services
f new enrollees
Indicators ND
enrollees who have a level of care evaluation prior to reeiving waiver services
f new enrollees

pproved description to determine the initial participant level of care.

Indicators ND

ES completed within 60 days for new applicants

f new applicants for whom there is a reasonable indication that services may be future.

Indicators ND

S determinations that use criteria appropriately to enroll or maintain a person in

DES forms reviewed

C. Qualified Providers

Assurance: The state demonstrates that it has designed and implemented an adequate system for assuring that all waiver services are provided by qualified providers

Performance Measure	Indicators ND
C1. Number and percent of licensed/certified waiver provider agency enrollments for which the appropriate lic./certif. was obtained in accordance with waiver reqmts prior to service provision.	N: :# of lic./certif. waiver agency provider enrollments for which the appropriate lic./certif. was obtained in accordance with waiver reqmts prior to service provision
	D: total # of waiver agency provider enrollments
Data Source: DMAS Xerox Claims Data	
Performance Measure	Indicators ND
C2. Number & percent of licensed/certified waiver provider agency staff who have	N: : # of lic./certif, waiver provider agency DSPs who have criminal background checks as specified in
criminal background checks as specified in policy/regulation with satisfactory results.	D: total # licensed/certified provider agency DSP records reviewed.
Data Source: DMAS QMR	
Performance Measure	Indicators ND
initial enrollment.	initial enrollment
	D: total # licensed/certified provider agencies.
Data Source: DMAS QMR	
Sub-Assurance b) The State monitors non-licensed/non-certified providers to assure adherence to waiver requirements.	
Performance Measure	Indicators ND
C4. Number and percent of non-licensed/non-certified provider agencies that meet waiver provider qualifications.	N: Total # non-licensed/non-certified provider agencies that meet waiver provider qualifications.
C4. Number and percent of non-incensed/non-certified provider agencies that meet warver provider quarmeations.	N. Total # non-meensed/non-certified provider agencies that meet warver provider quarmeations.
	D: total # of non-licensed/non-certified provider agencies
Data Source: DMAS QMR	

Performance Measure	
C5. Number & percent of nonlicensed	N: # of 1
/noncertified provider agency DSPs who have criminal background checks as specified in policy/regulation with satisfactory results.	policy/re D: total #
Data Source: DMAS QMR - Provider Enrollment Form	
Performance Measure	
C6. # of new consumer-directed employees who have a criminal background check at initial enrollment	N: : # of
	D: Total
Data Source: DMAS Fiscal Agency Reports	
Performance Measure	
C7. # of consumer-directed employees who have a failed criminal background who are barred from employment	N: # of
	employn
	D: : tota
Data Source: DMAS Fiscal Agency Reports	
Sub-assurance: The State verifies that providers initially and continually meet required licensure andor certification of the state verifies that providers initially and continually meet required licensure and or certification of the state verifies that providers initially and continually meet required licensure and or certification of the state verifies that providers initially and continually meet required licensure and or certification of the state verifies that providers initially and continually meet required licensure and or certification of the state verifies that providers initially and continually meet required licensure and or certification of the state verifies that providers initially and continually meet required licensure and or certification of the state verifies that providers initially and continually meet required licensure and or certification of the state verifies that providers initially and continually meet required licensure and or certification of the state verifies that providers initially and continually meet required licensure and or certification of the state verifies that providers initially and continually meet required licensure and or certification of the state verifies that providers initially and continually meet required licensure and or certification of the state verifies that providers initially and continually meet required licensure and or certification of the state verifies that providers initially and continually meet required licensure and or certification of the state verifies that providers initially and continually meet required licensure and or certification of the state verifies that providers initially and continually meet required licensure and or certification of the state verifies that providers initially and continually and	ication stan
Performance Measure	
C8. Number and percent of provider agency staff meeting provider orientation training requirements	N: # pro
	D: total
Data Source: DMAS QMR Reports	
$\mathbf{D}_{\mathbf{r}}$	
Performance Measure	N. #
C9. Number and percent of provider agency direct support professionals (DSP's) meeting competency training requirements	N: # pro

Data Source: DMAS QMR

Performance Measure

C10. # of services facilitators meeting training requirements and passing competency testing

Indicators ND

f nonlic./noncertif provider agency DSPs who have criminal background checks as specified in regulation with satisfactory results.

l # nonlic./noncertif. provider agency DSP records reviewed.

Indicators ND

of new consumer-directed employees who have a criminal background check at initial enrollment

tal # new consumer-directed employees enrolled.

Indicators ND

f consumer-directed employees who have a failed criminal background who are barred from ment

tal # consumer-directed employees who have a failed criminal background check

indards and adhere to other standards prior to their furnishing waiver services.

Indicators ND

rovider agency staff meeting provider orientation training requirements

al # of provider agency staff reviewed

Indicators ND

provider agency DSP's who meet competency training requirements as specified in regulation

D: total # provider agency DSP records reviewed

Indicators ND

N: # of services facilitators meeting training requirements and passing competency testing

	E	D: total
Data Source: DMAS Training Verification Records		

al # of services facilitators reviewed

D. Service Plan	
Assurance: The state demonstrates it has designed and implemented	an effective system for reviewin
Sub-assurance a) Service plans address all participants assessed needs (including health ar	nd safety risk factors (and person
Performance Measure	
D1. Number and percent of individuals who have Plans for Support that address their assessed needs,	
capabilities and desired outcomes.	N: # of individuals who have F
	D: total # of individuals' record
Data Source: DMAS QMR	
Performance Measure	
D2. Number and percent of individual records that indicate that a risk assessment was completed as	
required.	N: # of records that indicate the
	D: total # of individual records
	D. total π of marvidual records
Data Source: DMAS QMR	
Performance Measure	
D3. Number and percent of individuals whose Plan for Supports includes a risk mitigation strategy	
when the risk assessment indicates a need.	N: # of individuals whose Plan
	D: total # of individuals' record
Data Source: DMAS QMR	
Performance Measure	
D4. Number and percent of service plans that include a back-up plan when required for services to	
include in home supports, personal assistance, respite, companion, and shared living.	N: # of service plans that inclu
	respite, companion, and shared
	D: = total # of service plans rev
	1
Data Source: DMAS QMR	
Sub-assurance: c) Service plans are updated/revised at lea	st annually or when warranted by
Performance Measure	

ing the adequacy of service plans for waiver participants.

onal goals, either by the provision of waiver services or through other means.

Indicators ND

Plans for support that address their needs, capabilities, and desired outcomes

ds reviewed

Indicators ND

hat a risk assessment was completed as required.

ds reviewed.

Indicators ND

an for Supports includes a risk mitigation strategy when the risk assessment indicates a need.

rds reviewed whose risk assessment indicates a need for a risk mitigation strategy.

Indicators ND

lude a back-up plan when required for services to include in home supports, personal assistance, d living.

reviewed that require a back-up plan

by changes in the waiver participant's needs.

Indicators ND

D5. Number and percent of service plans reviewed and revised by the case manager by the individual's annual review date. (completed 365 days or less from lass Individual support Plan)	N: # service plans reviewed ar
	D: total # service plans review
Data Source: DMAS QMR	
Performance Measure	
D6. Number and percent of individuals whose service plan was revised, as needed, to address changing needs (Individual Support Plan was updated/revised when individual's needs changed)	N: # individuals whose servic
	D: total # individual service p
Data Source: DMAS QMR	
Sub-assurance: d) Services are delivered in accordance with the service pl	an, including the type, scope, a
Performance Measure	
D7. Number and percent of individuals who received services in the frequency specified in the service	
plan	N: : # individuals who receive
	D: # service plans reviewed
Data Source: DMAS QMR	
Performance Measure	
D8. Number and percent of individuals who received services in the duration specified in the service	ST //····
plan	N: # individuals who received
	D: service plans reviewed
Data Source: DMAS QMR	
Performance Measure	
D9. Number and percent of individuals who received services in the type specified in the service plan	N: # individuals who received
	D: service plans reviewed
Data Source: DMAS QMR	
Performance Measure	

nd revised by the case manager by the individual's annual review date

ved

Indicators ND

ce plan was revised as needed, to address changing needs

plans reviewed that needed to be revised due to changed needs

mount, duration and frequency specified in the service plan.

Indicators ND

ed services in the frequency specified in the individual service plan

Indicators ND

l services in the duration specified in the service plan

Indicators ND

l services in the type specified in the service plan

Indicators ND

D10. Number and percent of individuals who received services in the scope specified in the service plan	N: # individuals who received
	D
	D: service plans reviewed
Data Source: DMAS QMR	
Performance Measure	
D11. Number and percent of individuals who received services in the amount specified in the service plan	N: # individuals who received
	D: service plans reviewed
Data Source: DMAS QMR	
Sub-assurance: e) Participants are afforded choice: Between/among waiver services and providers.	
Performance Measure	
D12. Number and percent of individuals whose case management records documented that choice of	
waiver providers was provided to and discussed with the individual.	N: # of case management reco
	D: $=$ total # of records reviewed
Data Source: DMAS QMR	
Performance Measure	
D13. Number and percent of individuals whose case management records contain an appropriately	
completed and signed form that specifies choice was offered among waiver services	N: = # of case management rec
	D: = total $\#$ of records reviewed
Data Sauraa DMAS OMD	
Data Source: DMAS QMR	

l services in the scope specified in the service plan

Indicators ND

d services in the amount specified in the service plan

Indicators ND

ords that contain documentation that choice of waiver providers was offered to the individual

ed

Indicators ND

cords that contain documentation of choice among waiver services

ed

G. Health and Welfare	
Assurance: The state demonstrates it has designed and implemented an effective system for assuring waiver participant health and welfare	
Performance Measure	Indicators ND
G1. Number and percent of closed cases of abuse/neglect/exploitation for which DBHDS verified that the investigation conducted by the	N: # number of closed cases of abuse/neglect/exploitation verified that the investigation was conducted in accordance with
provider was done in accordance with regulations.	regulations
	D: number of closed cases of abuse/neglect/exploitation that were reviewed
Data Source: DBHDS OHR Retrospective review	
Performance Measure	Indicators ND
G2. Number and percent of substantiated cases of abuse/neglect/exploitation for which the required corrective action was verified by	N: = number of substantiated cases of abuse/neglect/exploitation for which the required corrective action was verified as bei
DBHDS as being implemented	implemented within 90 days
	D: = number of substantiated cases of abuse/neglect/exploitation
Data Source: DBHDS CHRIS system via Data Warehouse	
Performance Measure	Indicators ND
G3. # and pecent of unexpected deaths where the cause of the death/factor in the death, was potentially preventable & some intervention	N = # of unexpected deaths where the cause of death/a factor in the death, was potentially preventable & some intervention to
to remediate was taken	remediate was taken
	D: # of unexpected deaths where the cause of death/a factor in the death, was potentially preventable
Data Source: DBHDS Mortality Review Committee Data Tracking	
Performance Measure	Indicators ND
G4. Number and percent of individuals who receive annual notification of rights and information to report ANE	N: Number of records containing documentation confirming notification of rights and how to report ANE
g and the rest of	
Data Source: DMAS QMR	D: = Total number of records received
Sub accurate on The State demonstrates on an encoder short it identifies addresses and a	also to measure instances of almost product and instances along the death
Sub-assurance: The State demonstrates on an ongoing basis that it identifies addresses and se	eks to prevent instances of abuse, neglect, exploitation and unexplained death.
Performance Measure	Indicators ND
G5. Number and percent of critical incidents reported to the Office of Licensing within the required timeframes as specified in the	N: = Number of critical incidents reported to the Office of Licensing within the required timeframe.
approved waiver.	
	D: = Number of critical incidents reported to the Office of Licensing regarding individuals receiving DD waiver services
Data Source: DBHDS CHRIS system via Data Warehouse	
Daufaurean as Massaure	Indiastans ND
Performance Measure	Indicators ND N: # of licensed DD providers that administer medications not cited for failure to review medication errors at least quarterly
G6. # and % of licensed DD providers that administer medications that were not cited for failure to review medication errors at least quarterly.	in. # of needsed DD providers that administer medications not clied for failure to review medication errors at least quarterly
4 ···· ··· · · · ·	

	Indicators ND
у	N: = number of substantiated cases of abuse/neglect/exploitation for which the required corrective action was verified as bei
	implemented within 90 days
	D: = number of substantiated cases of abuse/neglect/exploitation
	Indicators ND
ntion	N= # of unexpected deaths where the cause of death/a factor in the death, was potentially preventable & some intervention to
	remediate was taken
	D: # of unexpected deaths where the cause of death/a factor in the death, was potentially preventable
	D. # of unexpected deaths where the cause of death/a factor in the death, was potentially preventable

Indicators ND	
N: Number of records containing documentation confirming notification of rights and how to report ANE	
D: = Total number of records received	

	Indicators ND	
t	N: # of licensed DD providers that administer medications not cited for failure to review medication errors at least quarterly	
	D: # of licensed DD providers that administer medications that were reviewed by Office of Licensing in the quarter	

Data Source: Office of Licensing data regulation

Performance Measure

G7. Number and percent of individuals reviewed who did not have unauthorized restrictive interventions.

Data Source: DBHDS QSR contractor alerts

Performance Measure

G8. Number and percent of individuals who did not have unauthorized seclusion.

Data Source: DBHDS CHRIS critical incident reports Report

Performance Measure

G9. Number and percent of participants 20 years and older who had an ambulatory or preventive care visit during the year.

Data Source: DMAS NCQA Data

Performance Measure

G10. Number and percent of participants 19 and younger who had an ambulatory or preventive care visit during the year.

Data Source: DMAS NCQA Data

Indicators ND	
N: = number of individuals reviewed who did not have unauthorized restrictive interventions.	
D: = number and percent of individuals reviewed	
·	
Indicators ND	
N: = number of individuals who did not have unauthorized seclusion	
D: = number of abuse allegations + complaints submitted via CHRIS	
Indicators ND	
N: Number of participants 20 years and older who had an ambulatory or preventive care visit during the prior year.	
D: = Number of participants 20 years and older	
Indicators ND	
N: Number of participants 19 and younger who had an ambulatory or preventive care visit during the prior year.	
D: = Number of participants 19 and younger	

I. Financial Accountability		
Assurance: State financial oversight exists to assure that claims are coded and paid for in accordance with the reimbursement methodology specified in the Sub-assurance: a) The State provides evidence that claims are coded and paid for in accordance with the reimbursement methodology specified in the approved waiver and only for services rendered.		
Performance Measure	Indicators ND	
I1. Number and percent of adjudicated waiver claims that were submitted and reimbursed using the correct rate in accordance with the approved DMAS rate schedule.	N: Number of adjudicated claims reimbursed using the approved rate	
	D: Total number of adjudicated claims	
Data Source: DMAS MMIS Claims		
Performance Measure	Indicators ND	
I2. Number and percent of adjudicated waiver claims that were submitted using the correct procedure codes	N: I2.Total number of adjudicated claims that were submitted using the correct procedure codes.	
	D: Total number of adjudicated claims.	
Data Source: DMAS MMIS Claims	D: Total number of adjudicated claims.	
Sub-assurance: The process and instruments described in the approve	D: Total number of adjudicated claims. ed waiver are applied appropriately and according to the approved description to articipant level of care.	
Sub-assurance: The process and instruments described in the approve	ed waiver are applied appropriately and according to the approved description to	
Sub-assurance: The process and instruments described in the approve determine p	ed waiver are applied appropriately and according to the approved description to articipant level of care.	

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