



**CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR MEDICAID SERVICES**

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**Department for Medicaid Services (DMS) Centralized Quality Management (CQM)
Advisory Subpanel**

June 12, 2019, 1:00pm-3:00pm

Meeting Summary

Meeting: CQM Advisory Subpanel – Meeting #3

Date: June 12, 2019

Location: CHFS Building, 2nd Floor Executive Directors Conference Room, 275 East Main Street, Frankfort KY 40601

AGENDA TOPICS AND KEY DISCUSSION POINTS

I. Advisory Panel Meeting Overview

- a. The CQM chairperson provided a summary of the HCBS Advisory Panel (HCBS – AP) meeting held on May 9, 2019.
- b. The HCBS-AP meeting focused on policy changes regarding legally responsible individuals as participant directed services (PDS) employees

II. Updates Related to Incident Reporting

- a. DMS presented an updated timeline for the rollout of the revised incident reporting process.
- b. DMS presented a listing of activities that DMS is developing/updating to support internal processes related to incident management.
- c. Panelists provided positive feedback regarding the updated incident reporting materials.

III. Incident Reporting Training

- a. DMS reviewed panelist requests for additional incident reporting training.

- b. Based on panelist feedback, DMS will develop and provide a training regarding incident prevention.
 - i. Several panelists indicated that service providers need a better understanding of which incident types the regulating agency considers to be “preventable”.
 - ii. One panelist noted that some incidents may not be preventative since the incidents relate to the waiver participant’s behavior.
 - iii. One panelist suggested that DMS’s training identify probing questions that the reporter should ask to identify and address preventable incidents.
- c. Panelists requested additional clarification related to the following critical incident reporting situations:
 - i. Individual responsible for entering incident information into the Medicaid Waiver Management Application (MWMA) in long-term solution.
 - ii. Requirements for reporting incidents to participants not served by his or her agency.
 - iii. Definition for minor injury and if subcategories could be utilized to provide additional clarity.
 - iv. Support brokers role in the incident reporting process.

IV. Participant Surveys

- a. Navigant provided an overview of the national survey that DMS plans to implement (if available funding) to assess participant outcomes/experience.
- b. Navigant identified which existing participant surveys would be replaced by the national survey.
- c. Additional discussion is needed by DMS leadership to determine whether it has available funding to implement a national survey.

V. Provider Certification

- a. Navigant summarized next steps related to streamlining and improving the provider certification process.
- b. Navigant provided an overview of the current provider certification process used across the Cabinet.
- c. Panelists highlighted the following regarding the provider certification process:
 - i. Audits should be conducted more frequently than every two years. Agencies would like to know if there are deficiencies, so they have the opportunity to correct.
 - ii. Pre-certification training is critical to educate providers on expectations, the populations they will service, regulatory requirements and funding sources.
 - iii. The checklist the Department for Behavioral Health, Developmental and Intellectual Disabilities (DBHDID) provides to agencies during the application process that outlines what is required for submission is useful for providers. Several panelists requested that Department for Aging and Independent Living (DAIL) and DMS provide a checklist.

- iv. Initial site visit by regulating agencies should occur close to when services begin.
- v. Provider agencies would like dedicated regulating agency staff to assist with the application process.

VI. Next Steps

- a. No assignments were given to panelists.
- b. The next subpanel meeting date will be on July 17, 2019.