

**Alta California Regional Center
Home and Community-based Services Waiver
Follow-up Review Report**

Conducted by:

**Department of Developmental Services
and
Department of Health Care Services**

April 29, 2008

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INTRODUCTION

The Department of Developmental Services (DDS) and the Department of Health Care Services (DHCS) conducted a collaborative federal compliance monitoring review of the Home and Community-based Services (HCBS) Waiver from April 9-20, 2007, at Alta California Regional Center (ACRC). A final report including review findings and ACRC's written responses to the findings was provided to ACRC on September 19, 2007.

DDS and DHCS conducted a follow-up review on April 29, 2008, to ensure that issues raised during the collaborative review had been addressed. The monitoring team selected ten consumer records for the HCBS Waiver follow-up review for the period of February 1, 2007 – January 31, 2008. In addition, the team reviewed a supplemental sample of ten records of consumers who had special incidents reported to DDS during this review period.

Purpose of the Follow-up Review

DDS contracts with 21 private, not-for-profit corporations to operate regional centers, which are responsible under state law for coordinating, providing, arranging or purchasing all services needed for eligible individuals with developmental disabilities in California. All HCBS Waiver services are provided through this system. It is the responsibility of DDS to ensure, with the oversight of DHCS, that the HCBS Waiver is implemented by regional centers in accordance with Medicaid statute and regulations. As stipulated in the HCBS Waiver application approved by the Centers for Medicare & Medicaid Services (CMS), the monitoring review process is a two year cycle, with a collaborative review in the first year, and a smaller, focused review in the second year addressing issues raised during the collaborative review.

Overview of the HCBS Waiver Federal Follow-up Review

The collaborative monitoring review protocol is composed of sections/components designed to determine if the consumer's needs and program requirements are being met and that services are being provided in accordance with the consumer's individual program plan. Specific criteria have been developed that are derived from federal/state statutes and regulations and from CMS directives and guidelines relating to the provision of the HCBS Waiver services.

The DDS and DHCS monitoring report from the April 2007 collaborative review requested ACRC to provide clarification or follow-up to the report findings and recommendations. ACRC submitted a response to DDS on August 30, 2007. Based on the report recommendations and ACRC's response, the follow-up monitoring team evaluated supporting documents to determine the degree and completeness of the implementation process. Specifically, the team reviewed, evaluated and made determinations based on the selected HCBS Waiver eligible consumers' records and discussions with ACRC personnel.

Summary of Follow-up Review Findings

The April 2008 follow-up review indicated that ACRC has implemented the recommendations from the collaborative review for those criteria selected for this review. However, one vendor did not report a special incident to ACRC within the required timeframes and ACRC did not report one special incident to DDS within the required time frames.

SECTION I

REGIONAL CENTER CONSUMER RECORD REVIEW

Summary of the April 2008 Monitoring Review Findings and Recommendations

The April 2007 monitoring review included findings related to appropriately identifying HCBS Waiver level of care qualifying conditions on the “Medicaid Waiver Eligibility Record” (DS 3770.) Specifically, there was either no supporting information in some of the consumers’ records that described the identified qualifying conditions, or the records contained information that conflicted with the determination that the identified conditions were of sufficient severity to meet the level of care requirements. As a result of these findings, a recommendation was made for ACRC to determine what steps were necessary to ensure that level of care determinations are made and documented in accordance with the March 2002, program advisory, and that the review of available information in the record supports the selection of qualifying conditions.

Summary of the April 2008 Follow-up Review Findings.

All ten of the sample consumer records reviewed for this requirement identified qualifying conditions documented on the DS 3770 form that were supported by information elsewhere in the record.

Further Action Needed

None

SECTION II

SPECIAL INCIDENT REPORTING

Summary of the April 2007 Collaborative Monitoring Review

Alta California Regional Center (ACRC) had no issues for follow-up related to the April 2007 review. However, anytime an HCBS Waiver follow-up review is conducted, a review of special incidents is also completed.

Scope of the April 2008 Review

1. Special incident reporting of deaths by ACRC was reviewed by comparing deaths entered into the Client Master File for the review period with special incident reports (SIRs) of deaths received by the DDS.
2. The records of the ten consumers selected for the Home and Community-based Services (HCBS) Waiver sample were reviewed to determine that all required special incidents were reported to DDS during the review period.
3. The records for the ten consumers who had special incidents reported to DDS within the review period were assessed for timeliness of reporting and documentation of follow-up activities. The follow-up activities were assessed for being timely, appropriate to the situation, and resulting in an outcome that ensures the consumer is protected from adverse consequences, and that risks are either minimized or eliminated.

Results of the April 2008 Review

1. ACRC reported all deaths during the review period to DDS.
2. ACRC reported all SIRs in the sample of ten records selected for the HCBS Waiver review to DDS.
3. ACRC vendors reported nine of the ten (90%) special incidents within the required timeframes.
4. ACRC reported nine of the ten (90%) special incidents to DDS within the required timeframes.
5. ACRC's follow-up activities on consumer incidents were appropriate for the severity of the situations.

Findings

Consumer #XXX: The incident occurred on December 18, 2007 and was reported to ACRC on December 19, 2007. However, ACRC did not report the incident to DDS until December 26, 2007.

Consumer #XXX: The incident occurred on January 29, 2008. However, the vendor did not send a written report to ACRC until February 7, 2008.

Further Action Needed

1. ACRC should ensure that the vendor reports special incidents within the required timeframes.
2. ACRC should ensure that special incidents are reported to DDS within the required timeframes.

SAMPLE CONSUMERS

HCBS Waiver Review Consumers

#	UCI
1	XXXXXXXX
2	XXXXXXXX
3	XXXXXXXX
4	XXXXXXXX
5	XXXXXXXX
6	XXXXXXXX
7	XXXXXXXX
8	XXXXXXXX
9	XXXXXXXX
10	XXXXXXXX

SIR Review Consumers

#	UCI	Vendor
20S	XXXXXXXX	XXXXXX
21S	XXXXXXXX	XXXXXX
22S	XXXXXXXX	XXXXXX
23S	XXXXXXXX	XXXXXX
24S	XXXXXXXX	XXXXXX
25S	XXXXXXXX	XXXXXX
26S	XXXXXXXX	XXXXXX
27S	XXXXXXXX	XXXXXX
28S	XXXXXXXX	XXXXXX
29S	XXXXXXXX	XXXXXX