

**Alta California Regional Center
Targeted Case Management and
Nursing Home Reform
Monitoring Review Report**

Conducted by:

Department of Developmental Services

April 13-15, 2009

TABLE OF CONTENTS

EXECUTIVE SUMMARY.....	page 3
SECTION I: TARGETED CASE MANAGEMENT.....	page 4
SECTION II: NURSING HOME REFORM.....	page 6
SAMPLE CONSUMERS	page 7
ATTACHMENT I: TCM AND NHR DISTRIBUTION OF FINDINGS.....	page 8

EXECUTIVE SUMMARY

The Department of Developmental Services (DDS) conducted a federal compliance monitoring review of the Targeted Case Management (TCM) and Nursing Home Reform (NHR) programs April 13-15, 2009 at Alta California Regional Center (ACRC). The monitoring team selected 50 consumer records for the TCM review. A sample of ten records was selected for consumers who had previously been referred to ACRC for a NHR assessment. The period of review was from February 1, 2008 – January 31, 2009.

Purpose of the Review

Case management services for regional center consumers with developmental disabilities were added as a medical benefit to the Medi-Cal State Plan in 1986 under Title XIX of the Social Security Act. TCM services are those “. . . services which will assist individuals in gaining access to needed medical, social, educational, and other services.” DDS implemented the TCM program statewide on July 1, 1988.

The NHR Pre-Admission Screening/Resident Review (PAS/RR) program involves determining whether an individual in a nursing facility with suspected developmental disabilities is developmentally disabled and requires specialized services.

Overview of the TCM/NHR Compliance Monitoring Protocol

The review criteria for the TCM and NHR programs are derived from federal and state statutes and regulations and the Centers for Medicare & Medicaid Services guidelines relating to the provision of these services.

Findings

Section I – Targeted Case Management

Fifty consumer records, containing 3,060 billed units, were reviewed for three criteria during the period of review. The sample records were 100% in compliance for criterion 1 (TCM service and unit documentation matches the information transmitted to DDS), 96% in compliance for criterion 2 (TCM service documentation is consistent with the definition of TCM service), and 100% in compliance for criterion 3 (TCM service documentation is signed and dated by appropriate ACRC personnel).

Section II – Nursing Home Reform

Ten consumer records were reviewed for three criteria. The sample records were 100% in compliance for all three criteria.

SECTION I TARGETED CASE MANAGEMENT

Criterion

1. The Targeted Case Management (TCM) service and unit documentation matches information transmitted to the Department of Developmental Services (DDS).

Findings

ACRC transmitted 3,060 TCM units to DDS for the 50 sample consumers. Documentation supporting all of these units was found in the sample consumer records.

Recommendations

None.

2. The TCM service documentation billed to DDS is consistent with the definition of TCM service.

Allowable TCM units are based on services which assist consumers to gain access to needed social, educational, medical or other services and include the following components: 1) assessment and periodic reassessment to determine service needs; 2) development and periodic revision of an individual program plan (IPP) based on the information collected through the assessment or reassessment; 3) monitoring and follow-up activities, including activities and contacts that are necessary to ensure that the IPP is effectively implemented and adequately addresses the needs of the consumer; and 4) referral and related activities to help the consumer obtain needed services. However, it is important to note that TCM does not include the direct provision of these needed services.

Findings

The sample of 50 consumer records contained 3,060 billed TCM units. Of this total, 2,934 (96%) of the units contained descriptions that were consistent with the definition of TCM services. One hundred twenty-six of the billed TCM units had descriptions of activities, such as quality assurance monitoring of service providers that were not consistent with the definition of TCM services or were not sufficient to determine if the activities could be considered case management. Detailed information on these findings and the actions required will be sent under a separate cover letter.

Recommendation	Regional Center Plan/Response
ACRC should ensure that the time spent on the identified activities that are inconsistent with TCM claimable services (sent separately) is reversed.	ACRC reversed all the 126 units that were inconsistent with TCM claimable services as recommended.

3. The TCM documentation identifies the service coordinator recording the notes and each note is dated.

Findings

The TCM documentation in the 50 sample consumer records identified the service coordinator and the date the service was provided.

Recommendations

None.

SECTION II NURSING HOME REFORM

Criterion

1. There is evidence of dispositions for the Department of Developmental Services' (DDS) Nursing Home Reform (NHR) referrals.

Findings

The ten sample consumer records contained either a Pre-Admission Screening/Resident Review (PAS/RR) Level I document or NHR automated printout.

Recommendations

None.

2. The disposition is reported to DDS.

Findings

The ten sample consumer records contained either a PAS/RR Level II document or written documentation responding to a Level I referral.

Recommendations

None.

3. The regional center submitted a claim for the referral disposition.

Findings

The billing information for the ten sample consumers had been electronically transmitted to DDS.

Recommendations

None.

SAMPLE CONSUMERS
TCM Review

#	UCI	#	UCI
1	XXXXXXXX	26	XXXXXXXX
2	XXXXXXXX	27	XXXXXXXX
3	XXXXXXXX	28	XXXXXXXX
4	XXXXXXXX	29	XXXXXXXX
5	XXXXXXXX	30	XXXXXXXX
6	XXXXXXXX	31	XXXXXXXX
7	XXXXXXXX	32	XXXXXXXX
8	XXXXXXXX	33	XXXXXXXX
9	XXXXXXXX	34	XXXXXXXX
10	XXXXXXXX	35	XXXXXXXX
11	XXXXXXXX	36	XXXXXXXX
12	XXXXXXXX	37	XXXXXXXX
13	XXXXXXXX	38	XXXXXXXX
14	XXXXXXXX	39	XXXXXXXX
15	XXXXXXXX	40	XXXXXXXX
16	XXXXXXXX	41	XXXXXXXX
17	XXXXXXXX	42	XXXXXXXX
18	XXXXXXXX	43	XXXXXXXX
19	XXXXXXXX	44	XXXXXXXX
20	XXXXXXXX	45	XXXXXXXX
21	XXXXXXXX	46	XXXXXXXX
22	XXXXXXXX	47	XXXXXXXX
23	XXXXXXXX	48	XXXXXXXX
24	XXXXXXXX	49	XXXXXXXX
25	XXXXXXXX	50	XXXXXXXX

NHR Review

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

**ATTACHMENT I
 TCM DISTRIBUTION OF FINDINGS**

CRITERION PERFORMANCE INDICATOR Sample Size: 50 Records Billed Units Reviewed: 3,060	# OF OCCURRENCES			% OF OCCURRENCES	
	YES	NO	NA	YES	NO
1. The TCM service and unit documentation matches the information transmitted to DDS.	3,060			100	
2. The TCM service documentation billed to DDS is consistent with the definition of TCM service.	2,934	126		96	4
3. The TCM service documentation is signed and dated by appropriate regional center personnel.	3,060			100	

NHR DISTRIBUTION OF FINDINGS

CRITERION PERFORMANCE INDICATOR Sample Size: 10 Records	# OF OCCURRENCES			% OF OCCURRENCES	
	YES	NO	NA	YES	NO
1. There is evidence of dispositions for DDS NHR referrals.	10			100	
2. Dispositions are reported to DDS.	10			100	
3. The regional center submits claims for referral dispositions.	10			100	