North Los Angeles County Regional Center Targeted Case Management and Nursing Home Reform Monitoring Review Report

Conducted by:

Department of Developmental Services

August 8-11, 2016

TABLE OF CONTENTS

EXECUTIVE SUMMARYpa	age 3
SECTION I: TARGETED CASE MANAGEMENTpa	age 4
SECTION II: NURSING HOME REFORMpa	age 6
SAMPLE CONSUMERSpa	age 7
ATTACHMENT I: TCM AND NHR DISTRIBUTION OF FINDINGS	age 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 from August 8-11, 2016, at North Los Angeles County Regional Center (NLACRC). The monitoring team selected 50 consumer records for the TCM review. A sample of 10 records was selected for consumers who had previously been referred to NLACRC for an NHR assessment.

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 3,506 units, were reviewed for three criteria. The sample records were 100 percent in compliance for criterion 1 (TCM service and unit documentation matches the information transmitted to DDS), 97 percent in compliance for criterion 2 (TCM service documentation is consistent with the definition of TCM service), and 100 percent in compliance for criterion 3 (TCM service documentation identifies the individual who wrote the note and the date the note was completed).

Section II – Nursing Home Reform

Ten consumer records were reviewed for three criteria. The 10 sample records were 100 percent in compliance for criterion 1 (records contain evidence of DDS' NHR referrals), 100 percent in compliance for criterion 2 (reporting disposition of referrals to DDS), and 100 percent in compliance for criterion 3 (submission of billing claims forms).

SECTION I TARGETED CASE MANAGEMENT

Criterion

1. The TCM service and unit documentation matches information transmitted to DDS.

Finding

NLACRC transmitted 3,506 TCM units to DDS for the 50 sample consumers. All of the recorded units matched the number of units reported to DDS.

Recommendation

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 50 sample consumer records contained 3,506 billed TCM units. Of this total, 3,413 (97 percent) of the units contained descriptions that were consistent with the definition of TCM services. Ninety-three of the billed units had descriptions of activities that were not consistent with the definition of TCM services. Detailed information on these findings and the specific actions required will be sent under a separate cover letter.

Recommendation	Regional Center Plan/Response
NLACRC should ensure that the time spent on the identified activities that are inconsistent with TCM services (sent separately) is reversed.	The importance of billed TCM units being consistent with the definition of TCM services was discussed at the 8/18/16 supervisors' meeting. Units identified as inconsistent with TCM services will be reversed or reduced. The responses are outlined in the TCM chart under separate cover letter. To ensure future compliance, continuing targeted retraining will be provided to service coordinators and staff. Supervisors to review requirements in monthly unit meetings.

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

Finding

The TCM documentation in the 50 sample consumer records identified the service coordinator who wrote the note and the date the service was completed.

Recommendation

None

SECTION II NURSING HOME REFORM

Criterion

1. There is evidence of dispositions for DDS' NHR referrals.

Finding

The 10 sample consumer records contained a copy of the PAS/RR Level I form, or NHR automated printout.

Recommendation

None

2. The disposition is reported to DDS.

Finding

The 10 sample consumer records contained a PAS/RR Level II document or written documentation responding to DDS' request for a disposition.

Recommendation

None

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

Finding

The billing information for all 10 sample consumers had been entered into the AS 400 computer system.

Recommendation

None

SAMPLE CONSUMERS TCM Review

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

NHR Review

#	UCI
51	XXXXXX
52	XXXXXX
53	XXXXXX
54	XXXXXX
55	XXXXXX
56	XXXXXX
57	XXXXXX
58	XXXXXX
59	XXXXXX
60	XXXXXX

ATTACHMENT I

TCM DISTRIBUTION OF FINDINGS

CRITERION PERFORMANCE INDICATOR Sample Size: 50 Records Billed Units Reviewed: 3,506	# OF OCCURRENCES			% OF OCCURRENCES	
billed Utill's Reviewed: 3,506	YES	NO	NA	YES	NO
The TCM service and unit documentation matches the information transmitted to DDS.	3,506			100	
The TCM service documentation billed to DDS is consistent with the definition of TCM service.	3,413	93		97	3
The TCM documentation identifies the service coordinator recording the notes and each note is dated.	3,506			100	

NHR DISTRIBUTION OF FINDINGS

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