

CCCW QUALITY COMMITTEE

Meeting Minutes

DATE: January 27, 2010

PLACE: Community Care of Central Wisconsin-Stevens Point, Meeting Room 319

TIME: 1:00 – 2:30 p.m.

PRESENT: Ann Stevens, Laura Goetz, Linda Michalewicz, Lawrence Schroda, Pam Ironside, Bill Pyke, Cheryl Aspenson, David Thewes, Patrick Puyleart, Gina Germ, Bonnie Cherwinka, Dana Cyra

1. The meeting was called to order at 1:05 p.m. by Linda Michaelwicz, Committee Chair.
2. Motion to approve minutes of November 25, 2009 without revisions by Schroda; second by Puyleart. Approved.
3. The CCCW Membership Report was distributed. The reports shows an overall increase of 29 members during the month of December, after accounting for new enrollments and disenrollments. The ADRC of Central Wisconsin is no longer tracking wait list numbers separately for those who were on the waiting list prior to Family Care implementation and those who have been added to waiting lists since that time. CCCW staff hope to continue receiving reports of the number of people on waiting lists in each county. This will be important information for planning.
4. The CCCW Internal Quality Review was distributed with the agenda, in advance of the meeting. The report covers a one year period beginning with the 4th quarter of 2008 (10/1/2008) and ending after the 3rd quarter of 2009 (9/30/2009). Information used to evaluate quality and identify future areas for improvement was gathered from multiple sources including the Quality Committee and Councils, CCCW staff in all departments, the Provider Network survey, the Member Satisfaction Surveys completed between November 2008 and June 2009, Quality Indicator reports, and results of the external review completed by Metastar in March of 2009. Members were encouraged to provide feedback regarding the quality review to Dana Cyra via email or telephone.

Bonnie Cherwinka questioned whether the last bullet on page 3 of the report indicates that CCCW has a method in place for determining the quality of providers. Cyra confirmed that there is currently no such system in place. The bullet will be re-worded to clarify that the Residential Placement Manager assists with matching members with residential service providers who have the capacity to meet the member's needs and outcomes in a manner that is effective and cost-effective. Clarification was provided in regard to the goals and process involved in having a Residential Placement Manager. The primary goal of the position is to ensure that CCCW Service Coordination staff and members are aware of, and have opportunities to explore, all residential options available to meet a member's needs. CCCW had noticed a tendency for staff to make referrals for residential services on the basis of their past experience with providers, as opposed to a full exploration of all available options. With the increased number of residential service options, it was very difficult for staff to be knowledgeable about all providers and potential openings. The new system ensures consideration of all potential options throughout the region.

The Residential Placement Manager is gathering and compiling information about residential service options to ensure appropriate matching. When staff are working with a member who wishes to explore residential options, staff complete a form detailing the member's needs and preferences. The Residential Placement Manager uses the form to identify providers with a profile that seems to match the needs and preferences of the member. From that list, the Residential Placement Manager identifies providers who currently have openings. The list is shared with Service Coordination staff who can discuss and follow-up with members to explore options the member is most interested in.

Cherwinka initiated a discussion of things residential service providers across the state are hearing and doing. Residential service providers have requested an audit of Family Care statewide. Cyra confirmed that advocacy groups (The Survival Coalition of Wisconsin Advocacy Groups) have contacted the state to recommend an audit of Family Care statewide. While the request acknowledges provider concerns, an overriding concern is the financial viability of Family Care. There is a great deal of concern about whether the Family Care program is adequately funded and, if not, the impact that may have on Wisconsin's publicly-funded long term care system in terms of both providers and members. When available, updates regarding the status of the recommendation for an audit will be provided.

Additional concerns surround recent changes in the provider rates associated with implementation of the acuity-based system for determining rates for residential service providers, and other changes associated with guardianship fees. Residential service providers are hearing that member guardians are upset and many are choosing IRIS instead of Family Care. In some instances, providers are encouraging guardians to transition to IRIS because the IRIS program has not implemented any form of rate setting structure related to residential services.

Cyra noted two distinct issues related to the concerns expressed. One is a change in regard to guardianship fees and the impact that guardianship fees may have on the amount of money available to a member for personal spending. NOTE: Cyra followed up with Nancy Gear from CCCW's business office after the meeting and received the following clarification: The Wisconsin Department of Health Services (DHS) is implementing a standardized process for calculating a member's room and board charges for Family Care. In the past, managed care organizations were able to treat guardianship fees and expenses as special exempt income that might reduce a member's room and board charges. The standardized process for calculating room and board charges does not allow this because it often resulted in DHS paying for guardianship fees and expenses. Unfortunately, this change will have a significant impact on corporate guardians who, in order to receive payment for the services and expenses, may reduce the spending money available to their ward to an amount that is insufficient to meet the ward's personal spending needs. At CCCW, this change will be implemented with the April, 2010 billing for room and board charges. CCCW staff are not sure how this change may or may not apply to those choosing IRIS. However, at this time, the IRIS program may, in fact, have more flexibility in regard to reimbursement of guardianship fees and expenses.

In regard to the second issue, provider reimbursement rates, IRIS may currently be an option with fewer restrictions on residential provider rates. It is unclear how the transition of many people with residential service needs may impact the IRIS program. NOTE: For an individual choosing IRIS, it does appear that the individual desiring residential services would need to have sufficient income to cover room and board costs. The IRIS budget amount (based on acuity) would need to be sufficient to cover service costs.

Providers inquired about the process for members and providers to appeal CCCW decisions. At present, formal processes for providers to appeal MCO decisions (other than those related to payment) are not clear. Members have many appeal rights and Evelyn Heikenen, as CCCW's Member Service Manager, is the primary contact for members who have not been able to resolve issues with their team. Evelyn has been very successful in helping members to resolve issues informally. However, she is able to discuss all options for appeal and to assist members in filing appeals as needed. Members have the right to appeal CCCW decisions at the local level via an appeals and grievance committee and at the state level via the Department of Health Services, and via

the State Fair Hearing Process. A member can appeal at all levels simultaneously and withdraw if the issue is resolved at the local or state level.

Providers may request a change of condition screen for a member living in a residential setting for whom reimbursement does not seem to be appropriate. Providers were encouraged to speak with the member's team. Teams do have the ability to review member screens to determine whether functional limitations have been appropriately captured. If the team reviews the screen and determines that updates are needed, the team will submit an electronic request to the Screen Supervisor and a screener will be assigned to do a change of condition screen for the member. Cyra noted there may be some delays at the present time due to staff turnover and the unanticipated demand for change of condition screens driven by implementation of the new rate setting structure. CCCW is in the process of hiring two additional screeners; one in the Stevens Point office and another in the Wausau office. Providers were encouraged to discuss such concerns related to the accuracy of member screens with the member's team.

Staff who administer the long term care functional screen are responding to provider concerns expressed at a previous meeting in regarding the protocol and process related to completing screens. During her first week on the job, Penny Bartelt (the new Screen Supervisor) and Dana Cyra met with each screener to discuss future initiatives aimed at improving consistency among screeners in terms of both process and protocol. The screeners plan to develop a list specific to each provider that indicates the preferred protocol related to screener. This will include who to contact, staff who should be consulted, and any provider-specific requests related to scheduling appointments for member screens. The screeners will also work to ensure consistency in regard to information and sources of information that must be accessed in completing a screen.

Providers noted there are many factors driving service costs which are not captured by the functional screen. CCCW staff and supervisors have expressed the same concern and efforts are underway to identify additional factors that may be incorporated into the rate structure. While the adult long term care functional screen hasn't changed much in recent years, there is a screen for mental health services. Some elements of this screen may be incorporated as "add-ons" to the rate setting tool if deemed appropriate indicators of additional costs to providers. It is hoped that providers will assist with identifying cost drivers to be incorporated in residential rate setting methods.

There was some discussion of the different ways in which various MCOs have chosen to implement the rate setting tool. Some MCOs are including additional services such as transportation in the residential service rate and other are not. At CCCW, there was an effort to make sure one unit of residential services included the same services, regardless of the provider selected. Otherwise, it was very difficult for members and staff to compare costs. Providers indicated that various MCOs also have different "per point" reimbursement rates. This has become very confusing to providers who serve members of various MCOs and must track and bill for services in different ways, depending on the specific MCO they are dealing with. So, the issue currently facing providers (in regard to variation among MCOs) is similar to the issue previously faced by Service Coordinators when trying to compare provider rates when the rates didn't include the same services. Cyra indicated that Julie Strenn is very knowledgeable about what is transpiring with other MCOs and may be able to provide an update at a future meeting.

Pam Ironside noted that the Internal Quality Review references a member satisfaction survey that is not attached. The member satisfaction survey referenced in the document was distributed at an earlier meeting and is a composite of survey results for each county. The regional member satisfaction survey for 2009 was just recently completed. A report of survey results will be compiled

and distributed for discussion at a future meeting. Overall, the results are quite positive in regard to standardized questions all MCOs are required to ask. Obtaining very positive results isn't very helpful to CCCW staff in identifying problem areas. Responses to open-ended questions will be analyzed more fully this year to identify things members particularly like and areas for suggested improvement.

5. Committee members received a handout of 2010 Performance Improvement Objectives. Quality Management staff will likely need to focus very specifically on completing objectives identified via Metastar's external review while providing support to staff working on objectives identified via the internal Quality Review process. CCCW is also required to complete a health related performance improvement project each year. Based on information obtained about member falls, the Falls Prevention project will need to carry over to full implementation in 2010.

6. A tentative agenda was distributed for the external quality review visit by Metastar in March. Committee members were invited to participate in the Quality Compliance Review scheduled for March 10th, 8:30 to noon, in Rm 319. David Thewes and Bonnie Cherwinka expressed interest in attending. Those interested in participating are encouraged to contact Dana Cyra in advance to ensure adequate seating and room arrangement.

7. Updates for Member and Provider Quality Councils. The Member Quality Council is working on revisions to the CCCW Member Handbook that will make it more user-friendly. There was significant discussion about the need to clarify the process and different avenues for member appeals, roles of various staff members have contact with, and appropriate staff contacts for member-specific issues. The Provider Quality Council is working on a policy related to ensuring provider compliance with the requirement to complete caregiver background checks on staff who have direct contact with CCCW members.

8. Future agenda items include presentations from designated staff in regard to: Self-Directed Supports, Provider Network Update on Residential Rate tool, Service Coordination Discussion of Strengths-Based Assessment and Care Planning, and Screen Supervisor presentation regarding the Long Term Care Functional screen.

7. Next meeting date: March 24, 2010

8. Motion to adjourn by Schroda, second by Thewes. Approved.

Respectfully submitted by Dana Cyra, CCCW Director of Quality Management.