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

Conducted by:

Department of Developmental Services

August 13-17, 2018

TABLE OF CONTENTS

EXECUTIVE SUMMARYp	page 3
SECTION I: TARGETED CASE MANAGEMENTp	oage 4
SECTION II: NURSING HOME REFORMp	page 6
SAMPLE CONSUMERSp	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 from August 13–17, 2018, 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 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 2,936 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), 94 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 Targeted Case Management (TCM) service and unit documentation matches information transmitted to the Department of Developmental Services (DDS).

<u>Finding</u>

North Los Angeles County Regional Center (NLACRC) transmitted 2,936 TCM units to DDS for the 50 sample consumers. All of the recorded units matched the number of units reported to DDS.

Recommendation

None

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 2,936 billed TCM units. Of this total, 2,762 (94 percent) of the units contained descriptions that were consistent with the definition of TCM services. Of the billed units, 174 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 9/20/18 and 6/20/19 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, ongoing targeted retraining will be provided to Service Coordinators and Staff. Supervisors will review requirements in monthly unit meetings and individualized supervisions.

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 the Department of Developmental Services' (DDS) Nursing Home Reform (NHR) referrals.

<u>Finding</u>

The 10 sample consumer records contained a copy of the Pre-Admission Screening/Resident Review (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	4986683	26	6220777
2	4986238	27	6093394
3	7806052	28	7868759
4	7812795	29	8120631
5	7810112	30	7841422
6	8134590	31	7891857
7	5732102	32	7843717
8	7894332	33	7874326
9	8121868	34	7849219
10	5970850	35	7601506
11	7873193	36	5729363
12	7876665	37	7882850
13	7878205	38	4870259
14	5858196	39	6819340
15	8192869	40	7501461
16	8205449	41	7893605
17	5025838	42	7859069
18	7883215	43	5345103
19	5640552	44	7897192
20	7825623	45	7926410
21	8135143	46	5028733
22	7828551	47	7870956
23	7888721	48	7864051
24	6039473	49	8110738
25	6633894	50	7864234

NHR Review

#	UCI
51	H004607
52	7899065
53	6002034
54	H004626
55	H004636
56	7818727
57	5532767
58	H004612
59	7812589
60	7842800

ATTACHMENT I

TCM DISTRIBUTION OF FINDINGS

CRITERION PERFORMANCE INDICATOR Sample Size: 50 Records	# OF OCCURRENCES			% OF OCCURRENCES	
Billed Units Reviewed: 2,936	YES	NO	NA	YES	NO
The TCM service and unit documentation matches the information transmitted to DDS.	2,936			100	
The TCM service documentation billed to DDS is consistent with the definition of TCM service.	2,762	174		94	6
The TCM documentation identifies the service coordinator recording the notes and each note is dated.	2,936			100	

NHR DISTRIBUTION OF FINDINGS

CRITERION PERFORMANCE INDICATOR Sample Size: 10 Records	# OF OCCURRENCES			% 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	