

# **State of Kansas**



## **KanCare Program**

### **Medicaid State Quality Strategy**

**September 2014 Version – Final**

## Appendix 10. Performance Measures: HCBS/Frail Elderly program

Frequency of Measuring	Methodology	Benchmark	Data Source
<b>Administrative Authority</b>			
Quarterly / Annually	N=Number of Quality Review reports generated by KDADS, the Operating Agency, that were submitted to the State Medicaid Agency D=Number of Quality Review reports	Number and percent of Quality Review reports generated by KDADS, the Operating Agency, that were submitted to the State Medicaid Agency	QuJuality Review Reports
Quarterly / Annually	N=Number of waiver amendments and renewals reviewed and approved by the State Medicaid Agency prior to submission to CMS D=Total number of waiver amendments and renewals	Number and percent of waiver amendments and renewals reviewed and approved by the State Medicaid Agency prior to submission to CMS	Number of waiver amendments and renewals
Quarterly	N=Number of waiver policy changes that were submitted to the State Medicaid Agency prior to implementation by the Operating Agency D=Number of waiver policy changes implemented by the Operating Agency	Number and percent of waiver policy changes that were submitted to the State Medicaid Agency prior to implementation by the Operating Agency	Presentation of waiver policy changes
Annually	N=Number of Long-Term Care meetings that were represented by the program managers through in-person attendance or written reports D=Number of Long-Term Care meetings	Number and percent of Long-Term Care meetings that were represented by the program managers through in-person attendance or written reports	Meeting minutes
<b>Evaluation / Reevaluation Level of Care</b>			
Quarterly / Annually	N=Number of waiver participants who were determined to meet Level of Care requirements prior to receiving HCBS services D=Total number of enrolled waiver participants	Number and percent of waiver participants who were determined to meet Level of Care requirements prior to receiving HCBS services	Other-Operating Agency's data systems and Managed Care Organizations (MCOs) encounter data

Frequency of Measuring	Methodology	Benchmark	Data Source
Quarterly / Annually	N=Number of waiver participants who receive their annual Level of Care evaluation within 12 months of the previous Level of Care determination D=Number of waiver participants who received Level of Care Care redeterminations	Number and percent of waiver participants who receive their annual Level of Care evaluation within 12 months of the previous Level of Care determination	KDADS Record Reviews
Quarterly	N=Number of waiver participants whose Level of Care determinations used the approved screening tool D=Number of waiver participants who had a Level of Care determination	Number and percent of waiver participants whose Level of Care (LOC) determinations used the state's approved screening tool	KDADS Record Reviews
Annually	N=Number of initial Level of Care (LOC) determinations made by a qualified assessor D=Number of initial Level of Care determinations	Number and percent of initial Level of Care (LOC) determinations made by a qualified assessor	Assessor and assessment records
Quarterly	N=Number of initial Level of Care (LOC) determinations made where the LOC criteria was accurately applied D=Number of initial Level of Care determinations	Number and percent of initial Level of Care (LOC) determinations made where the LOC criteria was accurately applied	KDADS Record Reviews
Quarterly	N=Number of case file reviews reflect eligibility determination was made within six (6) working days of intake D=Total number of files reviewed	Number and percent of participants whose cases were eligibility determination was made within six (6) working days of intake	KDADS Record Reviews
Quarterly	N=Number of participants whose cases were closed appropriately and timely D=Number of waiver participants who lost Medicaid financial eligibility	Number and percent of participants whose cases were closed appropriately and timely due to the loss of Medicaid financial eligibility	KDADS Program Evaluation

Frequency of Measuring	Methodology	Benchmark	Data Source
<b>Qualified Providers</b>			
Continuous ly/Ongoing	N=Number of new licensed/certified waiver provider applicants that initially met licensure requirements, certification requirements, and other waiver standards prior to furnishing waiver services D=Number of all new licensed/certified waiver providers	Number and percent of new licensed / certified waiver provider applicants that initially met licensure requirements, certification requirements, and other waiver standards prior to furnishing waiver services	Managed Care Organization (MCO) reports and KDADS Record Reviews
Continuous ly/Ongoing	N=Number of enrolled licensed/certified waiver providers that continue to meet licensure requirements, certification requirements, and other waiver standards D=Number of enrolled licensed/certified waiver providers	Number and percent of enrolled licensed/certified waiver providers that continue to meet licensure requirements, certification requirements, and other waiver standards	Managed Care Organization (MCO) reports and KDADS Record Reviews
Continuous ly/Ongoing	N=Number of new non-licensed/non-certified waiver provider applicants that have met the initial waiver requirements prior to furnishing waiver services D=Number of all new non-licensed/non-certified providers	Number and percent of new non-licensed/non-certified waiver provider applicants that have met the initial waiver requirements prior to furnishing waiver services	Managed Care Organization (MCO) reports and KDADS Record Reviews
Continuous ly/Ongoing	N=Number enrolled non-licensed/non-certified waiver providers that continue to meet waiver requirements D=Number of enrolled non-licensed/non-certified providers	Number and percent of enrolled non-licensed/non-certified waiver providers that continue to meet waiver requirements	Managed Care Organization (MCO) reports and KDADS Record

Frequency of Measuring	Methodology	Benchmark	Data Source
			Reviews
Continuously/Ongoing	N=Number of providers that meet training requirements D=Number of active providers	Number and percent of active providers that meet training requirements	Managed Care Organization (MCO) reports and KDADS Record Reviews
<b>Service Plan</b>			
Quarterly	N=Number of waiver participants whose service plans address their assessed needs and capabilities as indicated in the assessment D=Number of waiver participants whose service plans were reviewed	Number and percent of waiver participants whose service plans address their assessed needs and capabilities as indicated in the assessment	KDADS Record Reviews
Quarterly	N=Number of waiver participants whose service plans address health and safety risk factors D=Number of waiver participants whose service plans were reviewed	Number and percent of waiver participants whose service plans address health and safety risk factors	KDADS Record Reviews
Quarterly	N=Number of waiver participants whose service plans address participants' goals D=Number of waiver participants whose service plans were reviewed	Number and percent of waiver participants whose service plans address participants' goals	KDADS Record Reviews

Frequency of Measuring	Methodology	Benchmark	Data Source
Quarterly	N=Number of waiver participants whose service plans were developed according to the processes in the approved waiver D=Number of waiver participants whose service plans were reviewed	Number and percent of waiver participants whose service plans were developed according to the processes in the approved waiver	KDADS Record Reviews
Quarterly	N=Number of waiver participants (or their representatives) who were present and involved in the development of their service plan D=Number of waiver participants whose service plans were reviewed	Number and percent of waiver participants (or their representatives) who were present and involved in the development of their service plan	KDADS Record Reviews
Quarterly	N=Number of service plans reviewed before the waiver participant's annual redetermination date D=Number of waiver participants whose service plans were reviewed	Number and percent of service plans reviewed before the waiver participant's annual redetermination date	KDADS Record Reviews
Quarterly	N=Number of waiver participants with documented change in needs whose service plan was revised, as needed, to address the change D=Number of waiver participants whose service plans were reviewed	Number and percent of waiver participants with documented change in needs whose service plan was revised, as needed, to address the change	KDADS Record Reviews
Quarterly	N=Number of waiver participants who received services in the type, scope, amount, duration, and frequency specified in the service plan D=Number of waiver participants whose service plans were reviewed	Number and percent of waiver participants who received services in the type, scope, amount, duration, and frequency specified in the service plan	1. Electronic Visit Verification (EVV) reports 2. KDADS Record Reviews
Quarterly	N=Number of survey respondents who reported receiving all services as specified in their service plan D=Number of waiver participants interviewed by QMS staff	Number and percent of survey respondents who reported receiving all services as specified in their service plan	Customer interviews by KDADS

Frequency of Measuring	Methodology	Benchmark	Data Source
Quarterly	N=Number of waiver participants whose record contains documentation indicating a choice of community-based services D=Number of waiver participants whose files are reviewed for the documentation	Number and percent of waiver participants whose record contains documentation indicating a choice of community-based services v. an institutional alternative	KDADS Record Reviews
Quarterly	N=Number of waiver participants whose record contains documentation indicating a choice of either self-directed or agency-directed care D=Number of waiver participants whose files are reviewed for the documentation	Number and percent of waiver participants whose record contains documentation indicating a choice of either self-directed or agency-directed care	KDADS Record Reviews
Quarterly	N=Number of waiver participants whose record contains documentation indicating a choice of waiver service providers D=Number of waiver participants whose files are reviewed for the documentation	Number and percent of waiver participants whose record contains documentation indicating a choice of waiver service providers	KDADS Record Reviews
Quarterly	N=Number of waiver participants whose record contains documentation indicating a choice of waiver services D=Number of waiver participants whose files are reviewed for the documentation	Number and percent of waiver participants whose record contains documentation indicating a choice of waiver services	KDADS Record Reviews
Quarterly	N=Number of waiver participant files reviewed during the review period for whom the Customer Service Plans started within the Number of specified daysD=Total number of files reviewed during the review period	Number and percent of participants whom the Customer Service Plans started within the Number of specified days	KDADS Record Reviews
Quarterly	N=Number of participants who reported attendants/workers reported on time D=Total number of participants interviewed during that review period	Number and percent of participants who reported attendants/workers reported on time	Customer interviews by KDADS

Frequency of Measuring	Methodology	Benchmark	Data Source
Quarterly	N=Number of customers who are surveyed and report satisfaction during the review period D=Total number of customers who are surveyed during the review period	Number and percent of customers who are satisfied	Customer interviews by KDADS
Quarterly	N=Number of participants who received timely (10 clear calendar days) Notices of Action for adverse actions D=Number of participants who had adverse actions	Number and percent of participants who received timely Notices of Action for adverse actions	KDADS Record Reviews
Quarterly	N=Number of participants who received Notices of Action for Plan of Care updates D=Number of participants who had Plan of Care updates	Number and percent of participants who received Notices of Action for Plan of Care updates	KDADS Record Reviews
Quarterly	N=Number and percent of waiver participants who had assessments completed by the MCO that included physical, behavioral, and functional components to determine the member's needs D=Number and percent of waiver participants who had assessments	Number and percent of waiver participants who had assessments completed by the MCO that included physical, behavioral, and functional components to determine the member's needs	KDADS Record Reviews
<b>Health and Welfare</b>			
Quarterly / Annually	N=Number of unexpected deaths for which review/investigation resulted in the identification of non-preventable causes D=Number of unexpected deaths	Number and percent of unexpected deaths for which review/investigation resulted in the identification of preventable causes	AIR APS or CPS KDADS Record Reviews
Quarterly / Annually	N=Number of unexpected deaths for which review/investigation followed the appropriate policies and procedures as in the approved waiver D=Number of unexpected deaths	Number and percent of unexpected deaths for which review/investigation followed the appropriate policies and procedures	AIR APS or CPS KDADS Record Reviews
Quarterly / Annually	N=Number of unexpected deaths for which the appropriate follow-up measures were taken as in the approved waiver D=Number of unexpected deaths	Number and percent of unexpected deaths for which the appropriate follow-up measures were taken	KDADS Record Reviews



Frequency of Measuring	Methodology	Benchmark	Data Source
Quarterly / Annually	N=Number of waiver participants who have a disaster red flag designation with a related disaster backup plan D=Number of waiver participants with a red flag designation	Number and percent of waiver participants who have a disaster red flag designation with a related disaster backup plan	KDADS Record Reviews
Quarterly / Annually	N=Number of waiver participants who received information on how to report suspected abuse, neglect, or exploitation D=Number of waiver participants interviewed by QMS staff or whose records are reviewed	Number and percent of waiver participants who received information on how to report suspected abuse, neglect, or exploitation	1. KDADS Record Reviews 2. Customer interviews by KDADS
Quarterly / Annually	N=Number of participants' reported critical incidents that were initiated and reviewed within required time frames as specified in the approved waiver D=Number of participants' reported critical incidents	Number and percent of participants' reported critical incidents that were initiated and reviewed within required time frames	Critical incident management system
Quarterly / Annually	N=Number of reported critical incidents requiring review/investigation where the State adhered to the follow-up methods as specified in the approved waiver D=Number of reported critical incidents	Number and percent of reported critical incidents requiring review / investigation where the State adhered to its follow-up measures	AIR APS or CPS KDADS Record Reviews
Quarterly / Annually	N=Number of restraint applications, seclusion or other restrictive interventions that followed procedures as specified in the approved waiver D=Number of restraint applications, seclusion or other restrictive interventions	Number and percent of restraint applications, seclusion or other restrictive interventions that followed procedures as specified in the approved waiver	KDADS Record Reviews
Quarterly / Annually	N=Number of unauthorized uses of restrictive interventions that were appropriately reported D=Number of unauthorized uses of restrictive interventions	Number and percent of unauthorized uses of restrictive interventions that were appropriately reported	KDADS Record Reviews
Quarterly / Annually	N=Number of HCBS participants who received physical exams in accordance with State policies. D=Number of HCBS participants whose service plans were reviewed	Number and percent of waiver participants who received physical exams in accordance with State policies	KDADS Record Reviews

Frequency of Measuring	Methodology	Benchmark	Data Source
Quarterly / Annually	N=Number of participants whom Quality Review staff observed as having no identifiable health or welfare concerns D=Total participants observed by Quality Review staff during the review period	Number and percent of waiver participants whom Quality Review staff observed as having no identifiable health or welfare concerns	Customer interviews by KDADS
<b>Financial Accountability</b>			
Quarterly / Annually	N=Number of provider claims that are coded and paid in accordance with the state's approved reimbursement methodology D=Total number of provider claims paid	Number and percent of provider claims that are coded and paid in accordance with the state's approved reimbursement methodology	DSS/DAI encounter data
Quarterly / Annually	N=Number of clean claims that are paid by the managed care organization within the timeframes specified in the contract D=Total number of provider claims	Number and percent of clean claims that are paid by the managed care organization within the timeframes specified in the contract	DSS/DAI encounter data
Annually	N=Number of payment rates that were certified to be actuarially sound by the State's actuary and approved by CMS D=Total number of capitation (payment) rates	Number and percent of payment rates that were certified to be actuarially sound by the State's actuary and approved by CMS	Rate-setting documentation
Annually	N=Number of providers utilizing EVV D=Total number of providers enrolled	Number and percent of Providers utilize Electronic Visit Verification	KDADS Program Evaluation

Frequency of Measuring	Methodology	Benchmark	Data Source
Annually	<p>N=Number of claims by type received and denied or suspended in accordance with the reimbursement methodology specified in the approved waiver</p> <p>D=Number of claims by type submitted in accordance with the reimbursement methodology specified in the approved waiver</p>	Number and percent of claims not in accordance with the reimbursement methodology are denied / suspended.	KDADS Program Evaluation

## Appendix 11. Performance Measures: Nursing Facility

Indicator LD= Liquidated Damage if not met	Frequency of measuring	Methodology	Benchmark	Data source
Administrative Accountability	Quarterly	Total number of enrolled providers vs. total number of enrolled providers that obtained/maintained appropriate licensure/certification in accordance with State law and other provider qualifications prior to service provision.	100% of sample providers have obtained appropriate licensure/certification	Encounter Data and State Licensure/ Certification/ Enrolled Data
Financial Accountability	Quarterly	Claims received and coded in accordance with the reimbursement methodology specified in the approved State plan vs. claims paid for in accordance with the reimbursement methodology specified in the approved State plan.	100% of claims paid are in accordance with the reimbursement methodology specified in the State plan.	Encounter Data
Financial Accountability	Quarterly	Number of nursing facility claims received that are not denied or suspended vs. number of nursing facility claims not denied or suspended but paid within 14 days.	90% of clean nursing facility claims (claims that do not trigger an edit for denial or suspension) are processed within 14 days.	Encounter Data
Financial Accountability (LD)	Quarterly	Number of nursing facility claims received that are not denied or suspended vs. number of nursing facility claims not denied or suspended but paid within 21 days.	99.5% of clean nursing facility claims (claims that do not trigger an edit for denial or suspension) are processed with 21 days.	Encounter Data
Financial Accountability	Quarterly	Number of nursing facility claims received that are for Medicaid approved resident days vs. number of nursing facility claims for Medicaid approved resident days that are paid within 60days.	100% of valid claims (Medicaid approved resident days) are processed within 60 days.	Encounter Data
Health and Welfare	Annually	Total sample number of nursing facility residents receiving services between October and April vs. number of sample residents with documented flu vaccinations or declination of vaccination.	100% of nursing facility residents are given access to annual flu shots.	Annual Resurveys
Health and Welfare (LD)	Quarterly	Total number of nursing facility discharges vs. total number of nursing facility discharges that also are readmitted to a hospital within 30 days.	Percent of hospital re-admissions within 30 days of nursing facility discharge.	KDADS

Choice	Quarterly	Total number of beneficiaries that transition from a nursing facility placement to a community placement.	Number of beneficiaries that transition from a nursing facility placement.	CONTRACTORS self report
Health and Welfare	Quarterly	Total number of HCBS beneficiaries vs. the total number of HCBS beneficiaries that transfer to a nursing facility.	Percentage of HCBS beneficiaries that transfer to a nursing facility.	CONTRACTORS self report
Health and Welfare (LD)	Annually	Total number of nursing facility days of care vs. total number of nursing facility eligible beneficiaries(excluding temporary stays.)	Average nursing facility utilization for eligible beneficiaries	KDADS Program Evaluation
Health and Welfare	Quarterly	Percent of long-term stay nursing home residents who are receiving an antipsychotic medication, excluding those residents diagnosed with schizophrenia, Huntington's Disease or Tourette's Syndrome	10% annual reduction in utilization rate from MCO experience baseline	KDADS Program Evaluation and MDS data

For measures that are joint KDADS and MCO data sources: MCOs are to generate a data file and transmit to KDADS who will match this data with their data.