

West Virginia Medicaid Aged and Disabled Waiver
Quality Improvement Advisory Council Meeting Minutes
April 23, 2019

Attendees:

Mark Fordyce	Stephanie Thorn	Jim Brown
Radene Hinkle	Angela Adkins	Teresa Walters
Cecilia Brown	David Maynard	LuAnn Summers
Vanessa VanGilder	Marcus Canady	David Maynard
John Raby	Randy Hill	Casey Wilson
Susan Silverman	Sherry Wooten	Bill Carpenter
Tania Hardy	Helen Snyder	Rosemary Muncy
Terra Muncy	Sara Martin	Arlene Hudson

- I. Welcome. Cecilia Brown welcomed Council members and the group all introduced themselves.
- II. Meeting Minutes. Minutes from the January 2019 meeting were reviewed and approved. Mark Fordyce made a motion to accept the minutes and the motion was seconded by Arlene Hudson.
- III. Take Me Home (TMH) Update. Marcus Canady gave an update on this program. Prior to January 1, 2019, any person who had transitioned through the Take Me Home program will still be supported under the original TMH guidelines through the end of 2019. Anyone who transitions after January 1, 2019 would transition under a demonstration grant into either the Aged and Disabled Waiver (ADW) or Intellectual/Developmental Disabilities Waiver (I/DDW) and will be supported under new parameters overseen by a new Transition Manager and four Transition Coordinators working through the Metro AAA office. In January 2019, Congress approved a three-month Re-authorization of TMH (with available funding of \$112 million plus an additional \$20 million) so CMS asked states to submit program demonstration plans and budgets for an additional two years. CMS approved West Virginia's plan but has yet to approve the budget. In the meantime, Marcus announced that Congress is looking into approving a new five-year MFP demonstration grant; however, specific details are not available at this time. Marcus did say that whatever happens, it will not negate all the work that has been done recently to implement the transition of TMH into the ADW and I/DDW programs.

Other sustainability initiatives:

- a) TeleHealth. The Plan submitted to Commissioner Cindy Beane, BMS, has been approved but funding for this initiative is tied up in the budget awaiting approval by CMS. This will be an 18-month project and the target population involved will be those people who have transitioned through

the TMH program and who also have at least two chronic conditions. Data will be collected in the home on blood pressure, diabetes readings, weight, fall risk, etc. The information will be sent to Medtronic, a medical technology/services company, who will monitor the information and if needed, contact an RN, refer the participant to their Primary Care Physician or possibly the ER.

- b) Online Case Management Pilot. Arlene Hudson gave an overview. The Pilot went live on March 1, 2019 with eight volunteer provider agencies. There are approximately 200 participants in the Pilot as well. All Assessments, Service Plans, Monthly CM Contacts and Notes are entered into the online system and Case Managers and Nurses can communicate via the system. In addition, one of the biggest advantages of the system is the ability to automatically “push” the Risks identified during the Assessment straight to the Service Plan. Marcus, the team at BoSS and the providers will evaluate the feasibility on an online system for statewide use and make their recommendations at the conclusion of the Pilot.
- c) No Wrong Door. Work continues on this initiative with WVU CED. Funds for this project are also tied up in the budget currently under review at CMS.
- d) Housing Initiative. Marcus and his group have drafted a document, in great detail, on how to secure housing, how to manage and complete the modifications that may be needed after transition and also lists the questions that should be asked to secure housing that will have the best outcome for this population. Marcus will share this information with Cecilia Brown so that she can pass it along to the Quality Improvement Council.
- e) Person-Centered Planning. Work continues on this initiative with WVU CED.

IV. TMH Post-01/01/2019 Update. Sara Martin gave a brief update on the numbers for March. There were nine new referrals, ten intakes (Referred from the ADRN, interviewed and eligible for assessment) and 16 qualifying determinations made (case has come to Sara, they are at the point of applying for program and are looking for housing). There have been four transitions which were all for the ADW program. Three to four are scheduled for May.

V. Olmstead Update. Mark Fordyce updated the Council on recent events. The Olmstead Council is looking for a new Coordinator and they hope to begin interviews soon. Work continues on reviewing requests for home renovations. Cecilia Brown explained to new Council members that the Olmstead program assists people in transitioning out of Long-Term-Care Facilities and also funds projects for home renovations/assistive technology that enables people to live safely and independently in their homes.

- VI. Aged and Disabled Waiver Update. LuAnn Summers gave a brief update.
1. BMS has not been keeping anyone on the Managed Enrollment List (MEL), rather they are issuing slot letters weekly to those that qualify. As of last week, 418 slots had been added to our original projection for FY 2019. There were approximately 170 slot offers pending. In May, BMS will review the numbers and may reinstate the MEL once again.
For new members, Cece explained that the ADW Application is revised every five years and we have to project how many people we will serve, how we will determine eligibility, define quality assurance processes, service planning, and performance measures, etc. CMS then has to approve the application, which is then the basis for the Policy Manual for the next five years. Bottom line, the cost of our program must be less than the cost for institutional long-term care.
 2. Conflict-Free Case Management. The stakeholder group has been meeting every other Friday to hammer out the details of this mandate. BMS created an informational flyer that will be sent to all Aged and Disabled Waiver participants explaining the move to conflict-free case management and how the change will affect them. Basically, a participant cannot receive Case Management and Personal Attendant services from the same provider. A survey has also been developed to gather information on how current case management agencies' businesses are set up. This should help with implementation of the new model.
 3. Aged and Disabled Waiver Forums. Eight forums were held across the state to gather information on any changes that providers and/or participants would like to see incorporated in the next Application and ADW Policy Manual which will be effective January 1, 2020. Cece has summarized the feedback received and has given it to BMS. A Policy Committee will begin meeting (first meeting is April 30), to create the document which will become the new Application. Council members were urged to participate. (Cece will forward a copy of the PowerPoint presented at the ADW Forums to Council members, for their information.)
- VII. Quality Work Plan. Cecilia Brown reported on the FY 2019 Quality Work Plan and also went over items to include for FY 2020.
- Goal 1. To reduce staff issues in the ADW program. This Goal was included in the FY 2019 Work Plan, but was on hold; therefore Cece proposed carrying it over to FY 2020. Arlene Hudson and the group concurred.
- Goal 2. To review the mortality review process. Another carryover from FY 2019. CMS is moving towards more thorough investigation by states for suspicious/untimely deaths and incidents overall. Some clarification of CMS's expectation was given at a 2017 NASUED conference but we feel more is needed. BMS and BoSS have a conference call with CMS in early May where they hope to get more information. Carry over to FY 2020.
- Goal 3. To increase capacity in the prevention and management of member incidents in the program. Five of the seven Activities within this Goal were completed. Cece is developing a safety plan for ADW members with risk of

domestic violence which should be completed by June 30, 2019. Conducting an incident management audit and adding incident management to the Continuing Certification process have been added to the policy list for discussion and possible inclusion in the new ADW Policy Manual. Carry over to FY 2020.

Goal 4. To increase stakeholder input in the program. Conducting the statewide forums was a part of this goal and has been completed. Other Activities within this Goal are related to using the data collected at the forums to develop the new ADW Application and Policy Manual. These will be carried over to the FY 2020 Plan. Another part of this Goal was to implement the new Participant Experience Survey. The CATI telephone system was purchased, 1200 letters have been generated and will be mailed to participants to alert them that they will receive a call for the survey and to please participate. BoSS nurses will conduct the survey, which should be complete prior to June 30, 2019.

Goal 5. To create a conflict free environment for case management per CMS requirement. Ownership of this Goal (discussed above in the Aged and Disabled Waiver Update) has been taken on by BMS, so it has been removed from the Quality Council's Work Plan.

Goal 6. To increase health and welfare monitoring in the provider monitoring process, continuing certification and validation reviews. Also discussed above, this Goal will be carried over after receiving further clarification from CMS.

VIII. Issues List. Cece reviewed the 2019 Issues List to see which ones should be kept, which should be added to the FY 2020 Work Plan or if any should be dropped.

1. Stakeholder Input. Include in FY 2020 Work Plan.
2. Incident Management System for Critical, Abuse, Neglect, Exploitation and Mortalities. Include in FY 2020 Work Plan.
3. Provider Monitoring. Include in FY 2020 Work Plan. Specifically want to take Plans of Correction one step further regarding follow-up, for example, BoSS currently approves the provider's written Plan of Correction, but there is no follow-up until the next review in 12 months to see if the actual issues were corrected. Also, take the top five most common review findings and incorporate them into provider training modules.
4. Continuing Certification. See above. Possibly add some form of incident reporting to the Continuing Certification process.
5. Agency Policy. Include in FY 2020 Work Plan. Ensure that providers have adequate complaint policies in place. In addition, create more detailed training on identifying problems and educating them on how to handle them.
6. Health and Welfare Performance Measure. Include in FY 2020 Work Plan.

Cece will create a draft of the FY 2020 Work Plan and distribute to the Council. Multiple issues will likely be within Health and Welfare.

IX. Council Membership. There are currently seven vacancies on the Council and Cece received seven applications for Council membership: Mr. Brown, Terra Muncy,

Angela Adkins, Taniua Hardy, Vanessa VanGilder, Rosemary Muncy and Coleen Linger. Mark Fordyce made a motion to accept all applicants for Council membership and Radene Hinkle seconded.

Next, new officers were elected for Chair and Vice Chair. Per Council By-Laws, people eligible for these positions must have served on the Council for at least one year. The following people were eligible:

- Mark Fordyce
- Radene Hinkle
- Kristin Blackburn
- John Raby
- Rebecca Cline
- Bill Carpenter

Arlene Hudson nominated John Raby for Chair, Vanessa VanGilder seconded. Radene Hinkle nominated Mark Fordyce for Vice Chair, John Raby seconded.

With no further business, John Raby motioned to adjourn, and Arlene Hudson seconded.

Next Meeting: July 23, 2019