

PM #	Rem. Code	Remediation Description	Nov 10		Dec 10		Jan 11		Feb 11		Mar 11		Apr 11		May 11		YTD Total	Remediation Action Outstanding
		<b>Level of Care</b>																
		<i>Waiver applicants for whom there is reasonable indication that services may be needed in the future are provided an individual level of care (LOC) evaluation.</i>																
		<b>Initial Level of Care</b>	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N		
LOC 1		Number and percentage of participants who received initial level of care determination indicating need for institutional level of care prior to receipt of waiver services	6	6														
		<b>Percentage compliant</b>	100.0%															
		<i>Data source: DS3</i>																
		<b>Annual Level of Care</b>	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N		
LOC 2		Number and percentage of participants who received an annual level of care determination within 12 months of initial determination or previous level of care determination.	28	29														
		<b>Percentage compliant</b>	96.6%															
		Level of care determined within 1 week	1															
		<i>Data source: DS3</i>																
		<b>Level of Care Process/Forms</b>	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N		
LOC 3		Number and percentage of level of care determinations completed by a Registered Nurse or Qualified Mental Retardation Professional as required in waiver.	39	39														
		<b>Percentage compliant</b>	100.0%															
		<i>Data source: DS3</i>																
LOC 4		Number and percentage of initial and annual levels of care determined using approved forms.	39	39														
		<b>Percentage compliant</b>	100.0%															
		<i>Data source: DS3</i>																
LOC 6		Number and percentage of initial and annual level of care determination criteria applied correctly.	13	14														
		<b>Percentage compliant</b>	92.9%															
		Missing SDS approval signature - corrected	1															
		<i>Data source: Case Record Review</i>																

PM #	Rem. Code	Remediation Description	Nov 10		Dec 10		Jan 11		Feb 11		Mar 11		Apr 11		May 11		YTD Total	Remediation Action Outstanding
		<b>Service Plan</b> <i>Service plans address all participants' assessed needs (including health and safety risk factors) and personal goals, either by the provision of waiver services or through other means.</i>																
			Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N		
SP 8		Number and percentage of waiver participants who have service plans that were adequate and appropriate based on the needs identified in the assessment.	14	14														
		<b>Percentage compliant</b>	100.0%															
		<i>Data source: Case Record Review</i>																
SP 9		Number and percentage of participants who have documented personal goals identified in the service plan.	14	14														
		<b>Percentage compliant</b>	100.0%															
		<i>Data source: Case Record Review</i>																
SP 10		Number and percentage of waiver participants whose service plans address health and safety factors.	14	14														
		<b>Percentage compliant</b>	100.0%															
		<i>Data source: Case Record Review</i>																
SP 11		Number and percentage of completed service plans submitted to SDS within required regulatory timeframes	1	18														
		<b>Percentage compliant</b>	5.6%															
		Complete service plan received within 1 week	2															
		Complete service plan received within 2 weeks	1															
		Complete service plan received within 3 weeks	1															
		Complete service plan received >= 4 weeks	6															
		Service plan requested from care coordinator	7															
		<i>Data source: DS3</i>																
		<i>The state monitors service plan development in accordance with its policies and procedures.</i>																
SP 12		Number and percentage of service plans that were submitted on approved forms.	20	20														
		<b>Percentage compliant</b>	100.0%															
		<i>Data source: Case Record Review</i>																

PM #	Rem. Code	Remediation Description	Nov 10		Dec 10		Jan 11		Feb 11		Mar 11		Apr 11		May 11		YTD Total	Remediation Action Outstanding	
SP 13		Number and percentage of service plans that include participant signature indicating participation in plan development.	14	14															
		<b>Percentage compliant</b>	100.0%																
		<i>Data source: Case Record Review</i>																	
		<i>Service Plans are updated/revised at least annually or when warranted by changes in waiver participation needs.</i>																	
			Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N			
SP 14		Number and percentage of service plans reviewed and updated as needed prior to the annual redetermination date.	13	15															
		<b>Percentage compliant</b>	86.7%																
		Service plan reviewed and updated within 2 weeks	1																
		Service plan reviewed and updated within 3 weeks	1																
		<i>Data source: DS3</i>																	
SP 15		Number and percentage of participants whose change in needs required a change in their service plan, and whose service plan was appropriately revised to address those changing needs.	14	14															
		<b>Percentage compliant</b>	100.0%																
		<i>Data source: Case Record Review</i>																	
		<i>Services are delivered in accordance with the service plan, including the type, scope, amount, duration and frequency specified in the service plan.</i>																	
			Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N			
SP 16		Number and percentage of participants who received services by type of service.	8	14															
		<b>Percentage compliant</b>	57.1%																
		Provider record review process in development	6																
		<i>Data source: Case Record Review</i>																	
SP 17		Number and percentage of participants who received services in the amount, duration and frequency described in the service plan.	1	14															
		<b>Percentage compliant</b>	7.1%																
		Provider record review process in development	13																
		<i>Data source: Case Record Review</i>																	

PM #	Rem. Code	Remediation Description	Nov 10		Dec 10		Jan 11		Feb 11		Mar 11		Apr 11		May 11		YTD Total	Remediation Action Outstanding
		<i>Participants are afforded choice between waiver services and institutional care and between / among waiver services and providers.</i>																
			Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N		
SP 18		Number and percentage of participant records with an appropriately completed freedom of choice form that specified choice was offered among waiver services.	14	14														
		<b>Percentage compliant</b>	100.0%															
		<i>Data source: Case Record Review</i>																
SP 19		Number and percentage of participant records with documentation that the participant received a list of qualified providers and was provided a choice of providers.	14	14														
		<b>Percentage compliant</b>	100.0%															
		<i>Data source: Case Record Review</i>																
SP 20		Number and percentage of participant records with an appropriately completed and signed freedom of choice form that specified that choice was offered between institutional care and home and community-based waiver services.	14	14														
		<b>Percentage compliant</b>	100.0%															
		<i>Data source: Case Record Review</i>																
		<b>Qualified Providers</b>																
		<i>The state verifies that providers initially and continually meet required licensure and / or certification standards and adhere to other standards prior to their furnishing waiver services.</i>																
QP 23a		Number and percentage of providers who are certified prior to providing waiver services.	871	871														
		<b>Percentage compliant</b>	100.0%															
		<i>Data source: Provider Certification Records</i>																
QP 23b		Number and percentage of providers who continue to meet state certification requirements following the initial certification.	827	828														
		<b>Percentage compliant</b>	99.9%															
		Provider under corrective action plan	1															
		<i>Data source: Provider Certification Records</i>																

PM #	Rem. Code	Remediation Description	Nov 10		Dec 10		Jan 11		Feb 11		Mar 11		Apr 11		May 11		YTD Total	Remediation Action Outstanding
QP 24a		Number and percentage of care coordinators in compliance with required SDS training	343	343														
		<b>Percentage compliant</b>	100.0%															
		<i>Data source: Provider Certification Records</i>																
QP 24b		Number and percentage of providers who are in compliance with critical incident report training requirements.	441	482														
		<b>Percentage compliant</b>	91.5%															
		Training requested via letter and email	41															
		<i>Data source: Provider Certification Records</i>																
		<b>Health and Welfare</b>																
		<i>On an ongoing basis the state identifies, addresses and seeks to prevent instances of abuse, neglect and exploitation.</i>																
HW 25		Number and percentage of participants who received information on reporting abuse, neglect or exploitation.	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N		
		<b>Percentage compliant</b>	85.7%															
		Signature date expired - clerical error - corrected	2															
		<i>Data source: Critical Incident Reporting System</i>																
HW 26		Number and percentage of critical incident reports that were reported by a provider within required timeframes	1	2														
		<b>Percentage compliant</b>	50.0%															
		Reported late - technical assistance provided	1															
		<i>Data source: Critical Incident Reporting System</i>																
HW 27a		Number and percentage of critical incident reports (CIRs) reviewed by Adult Protective Service within one business day of receipt	1	1														
		<b>Percentage compliant</b>	100.0%															
		<i>Data source: Critical Incident Reporting System</i>																

PM #	Rem. Code	Remediation Description	Nov 10		Dec 10		Jan 11		Feb 11		Mar 11		Apr 11		May 11		YTD Total	Remediation Action Outstanding	
HW 27b		Number and percentage of critical incident reports (CIRs) involving children reviewed by SDS within one business day of receipt	1	1															
		<b>Percentage compliant</b>	100.0%																
		<i>Data source: Critical Incident Reporting System</i>																	
HW 29		Number and percentage of critical incident reports received by type of incident.	2	2															
		<b>Percentage compliant</b>	100.0%																
		Law response	1																
		Other	1																
		<i>Data source: Critical Incident Reporting System</i>																	
HW 30		Number and percentage of deaths reviewed by Mortality Review Task Committee	2	2															
		<b>Percentage compliant</b>	100.0%																
		<i>Data source: DS3</i>																	
		<b>Financial Accountability</b>																	
		<i>State financial oversight exists to ensure that claims are coded and paid for in accordance with the reimbursement methodology specified in the approved waiver.</i>																	
			Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N	Compliant	N			
FA 31		Number and percentage of claims that were coded and paid correctly	5041	5041															
		<b>Percentage compliant</b>	100.0%																
		<i>Data source: MMIS</i>																	
FA 32		Number and percentage of claims for services that were prior authorized.	4809	4809															
		<b>Percentage compliant</b>	100.0%																
		<i>Data source: MMIS</i>																	