



THE STATE
of **ALASKA**
GOVERNOR BILL WALKER

Department of
Health and Social Services

GOVERNOR'S COUNCIL ON DISABILITIES
& SPECIAL EDUCATION
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Re: Proposed changes to Medicaid waiver performance measures

The Governor's Council on Disabilities and Special Education (GCDSE) fills a variety of federal and state roles, including serving as the State Council on Developmental Disabilities (SCDD) under the Developmental Disabilities Assistance and Bill of Rights Act. As the state DD Council, GCDSE works with Senior and Disabilities Services and other state agencies to ensure that people with intellectual and developmental disabilities and their families receive the services and supports that they need, as well as participate in the planning and design of those services. One of the duties of the state DD Council is providing comments on proposed recommendations that may have an impact on individuals with intellectual and/or developmental disabilities and their families.

The Council is pleased that SDS has embarked upon the task of improving and updating their waiver performance measures. Although several of these measures are about compliance or timely paperwork submission, the Council believes these performance measures are important indicators about the quality of the services being delivered and ensuring that your division responds to issues in a timely manner.

We also wish to congratulate SDS on the change in LOC 3 from Qualified Mental Retardation Professional to qualified state assessor. This change reflects not only a change in language, but expands the types of qualified assessors beyond registered nurses and Qualified Intellectual Disabilities Professionals (QIDPs) to keep up with demand. However, it is unclear exactly what types of professionals are considered "qualified state assessors," so the Council seeks clarification in this document defining which credentials qualify a professional to be in the state assessor category. Additionally, the proposed measures are complex and it is extremely difficult for individuals, families, and caregivers to comprehend these measures, what they change, and the anticipated and/or intended effect. The Council would like to see future SDS policy changes to include the current policy, the proposed new policy, and a "crosswalk" that clearly explains, in layperson's terms for readability considerations, the nature and reason for the changes to the general public.

Several items on the proposed changes document that was released did not include the language used in the current measures, making it difficult to discern the nature and extent of the proposed changes. For example, the current performance measure wording is not provided for HW 27a, but it seems that these central intake reports of abuse, neglect, or exploitation are currently being reviewed by Adult Protective Services. The new performance measure does not mention which division or department will be reviewing these reports in the future, if they are being reviewed at all. Additionally, HW 27b does not provide the language from the current measure; however, it currently includes the language “reviewed by SDS.” Such wording has been omitted in the proposed measure, so it is unclear if these reports will still be *reviewed* by SDS or just *referred* to the Office of Child Services. Also, item HW 30b uses the abbreviation “CIR” which is not defined. It is assumed that this refers to Central Intake Reports, which should be clarified for the reader earlier in the document.

The Council is pleased to see the separation of different types of critical incident reports on HW 26a and 26b, which breaks them out by adults reports and all reports. However, the timeframe for reporting is unclear on 26a and b as that information is missing in the document. 26b reads “... [incidents] that providers submitted within the required ____.” Please specify what the required reporting period is for both 26a and 26b in the new performance measure document. It could be presumed it is one business day as stated in AAC 130.224, but a clear explicit statement of the timeframe is strongly recommended.

The Council also wishes to clarify the change on SP 14 from the number of plans “reviewed and updated” to the number of plans that are “received” by the department. The description for this change indicates that many care coordinators are non-compliant already, so it seems as if these plans would still need to be reviewed and updated rather than just received. Lastly, the Council wishes to include an employment goal in the plan of care, and therefore on the performance measures.

The Council wishes to thank SDS for the opportunity to provide feedback on the waiver proposed performance measure changes. We stand ready to assist in any way that we can, so that Alaskan individuals and their families receive quality services to achieve the best outcomes.

Sincerely,



Dean Gates
Medicaid ad hoc Committee Chair



Jeanne Gerhardt-Cyrus
Developmental Disabilities Committee Chair