

Indicators and Data Sources by Assurance

Level of Care

Assurance Component	Performance Indicators	Discovery Activities/ Processes/ Responsible Party	Cross Cutting Indicators				Frequency of Measurement/ Sample Size	Responsible Party for data aggregation/ frequency	Nature of Remediation Reports	Quality Improvement
			NH WW	MF CCP	RA CCP	HC CP				
An individual evaluation for level of care (LOC) is provided to all applicants for whom there is reasonable indication that services may be needed in the future	Proportion of new enrollees whose LOC completion date predates waiver enrollment Average number of days from initial contact to completion of eligibility Average number of days from eligibility (or funding approval) to start of services	Certified at ICF or SNF LOC prior to admission documented; initiated by Waiver CM; Certified by prt's MD	DHS Form 1147	DHS Form 1147E			Ongoing/ 100%	DHS-SSD QA Dept prepares Findings Reports for each provider agency, and presents Findings Trends quarterly to the joint DHS Quality Monitoring and Improvement Committee. For RACCP: Community Ties of America (CTA) conducts annual QA review of selected participants.	List of individual problems, analysis of trends, and when corrected	DHS Quality Monitoring and Improvement Committee
The LOC of enrolled participants is reevaluated at least annually or as specified in the approved waiver	Proportion of participants whose LOC is reevaluated prior to the 365 th date of the previous LOC	LOC re-authorized annually & as needed; initiated by Waiver CM; certified by prt's MD	DHS Form 1147	DHS Form 1147E			Ongoing/ 100%	DHS-SSD QA Dept prepares Findings Reports for each provider agency, and presents Findings Trends quarterly to the joint DHS Quality Monitoring and Improvement Committee. For RACCP: Community Ties of America (CTA) conducts annual QA review of selected participants.	List of individual problems, analysis of trends, and when corrected	DHS Quality Monitoring and Improvement Committee

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The process and instruments described in the approved waiver are applied to LOC determinations	<p>Proportion of participants whose initial LOC was conducted using the correct instruments</p> <p>Proportion of participants for whom the initial LOC outcome was appropriately determined</p> <p>Proportion of participants whose initial and/or subsequent LOC was denied appropriately</p>	LOC completed by the waiver participant's physician; re-authorization approved; Case Management Waiver monitoring and reassessment tools; Clinical records from physician	DHS Form 1147; HSAG	DHS Form 1147E			Ongoing/ random representative sample	DHS-SSD QA Dept; quarterly. For RACCP: Community Ties of America (CTA) conducts annual QA review of selected participants.	<p>List of individual problems and when corrected</p> <p>List of individual problems and when corrected</p> <p>List of individual problems and when corrected</p>	

Service Plan (SP)

Assurance Component	Performance Indicators	Discovery Activities/Processes/ Responsible Party	Cross Cutting Indicators				Frequency of Measurement/ Sample	Responsible Party for Data Aggregation/ Analysis	Nature of Remediation Reports	Quality Improvement/ Next Steps
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SPs 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	Proportion of participants whose plan includes services and supports that are consistent with needs identified in the comprehensive assessment	Waiver CMs (RN and SW); Waiver CMA Supervisors review SPs prior to implementation; SP identifies all actual or potential problems, develops measurable goals and appropriate interventions based on problems/needs identified, and respects the participant's personal preferences and goals.	X	X	X	X	Ongoing/ random representative sample	DHS-SSD QA Dept; quarterly. For RACCP: Community Ties of America (CTA) conducts annual QA review of selected participants. Providers conduct the survey and collect the data, report it to the DHS/SSD/C&MU QA Staff	List of individual problems, plans of corrections entered, and when remediation completed.	
	Proportion of individuals reporting their plans reflect their preferences and needs.		X	X	X	X	Annual Consumer Satisfaction Survey/ 100%			
	Proportion of individuals reporting their needs are met (e.g., personal care, household tasks, transportation etc.)		X	X	X	X	Annual Consumer Satisfaction Survey/ 100%			
The state monitors SP development in accordance with its policies and procedures.	Proportion of participants who received assessments in accord with state policy	Providers use standardized assessment tools-Needs assessment, Social and Home assessment, and Health assessment;	X	X	X	X	Ongoing/ random representative sample	DHS-SSD QA Dept; quarterly. For RACCP: Community Ties of America (CTA) conducts annual QA review of selected	List of individual problems, plans of corrections entered, and when documented completed.	

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	Proportion of individuals reporting they participate in planning	Verified against provider records of participant attendance at service planning meetings	X	X	X	X	Annual Consumer Satisfaction Survey/ 100%	participants. Providers conduct the survey and collect the data, report it to the DHS/SSD/C&MU QA Staff	Identify problem areas, reasons for participant lack of participation, and remediation taken.	
Service plans are update/revised at least annually or when warranted when there are changes in the participants needs	Proportion of participants who received at least an annual reassessment in accord with state policy	Waiver CM reassesses every 6 months as required.	X	X	X	X	Ongoing/ random representative sample	DHS-SSD QA Dept; quarterly. For RACCP: Community Ties of America (CTA) conducts annual QA review of selected participants.	List of individual problems, plans of corrections entered, and when documented completed.	
	Proportion of participants whose plans were rewritten in a timely fashion	Waiver CM reviews and updates SP as required	Q 6 Mon	Q 3 Mon	Q 6 Mon		Ongoing/ random representative sample		List of individual problems, plans of corrections entered, and when documented completed.	
	Proportion of participants whose plans were updated as needs changed	Waiver CM reviews and updates SP sooner if needed	X	X	X	X	Ongoing/ random representative sample		List of individual problems, plans of corrections entered, and when documented completed.	
	Proportion of individuals reporting they were able to change their services when their needs changed	Provider agency reviews survey results	X	X	X	X	Annual Consumer satisfaction Survey/ 100%	Providers conduct the survey and collect the data, report it to the DHS/SSD/C&MU QA Staff	List of individual problems, plans of corrections entered, and when documented completed.	

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Services are delivered in accordance with the SP, including in the type, scope, amount, duration, and frequency specified in the SP.	Proportion of participants who are receiving the services and supports as specified in their plans	CM provides ongoing assessment of the quality and adequacy of services provided with monitoring calls (MC) and reassessment home visits (HV). Providers ensure documentation of all interventions.	MC Q Mon HV: Q 6 Mon	N/A HV: Q Mon	N/A HV: Q Mon		Ongoing/ random representative sample	DHS-SSD QA Dept; quarterly. For RACCP: Community Ties of America (CTA) conducts annual QA review of selected participants	List of individual problems, plans of corrections entered, and when documented completed.	
Participants are afforded choice: between waiver services and institutional care, and between/among waiver services and providers	Proportion of waiver participants with documentation they were offered the choice of waiver versus institutional care	CM ensures clients are given a choice in selecting HCBS as an alternative to institutional placement.	DHS Form 1680				Ongoing/ random representative sample	DHS-SSD QA Dept; quarterly. For RACCP: Community Ties of America (CTA) conducts annual QA review of selected participants	List of participants who were not offered choice and the way in which compliance was achieved	
	Proportion of individuals reporting they have a choice of providers.	CM provides information and support to help prts make informed selections among service options and qualified providers, and documents appropriately.	Client Choice of Providers form						List of participants who were not offered choice and the way in which compliance was achieved	
	Proportion of individuals reporting they have a choice of workers/staff.	Providers conduct mailed satisfaction surveys	X	X	X	X	Annual Consumer Satisfaction Survey/ 100%	Providers report results of Consumer Satisfaction Survey to DHS/SSD/C&MU QA staff	Problems identified and remediation completed	
	Proportion of		X	X	X	X	Annual Consumer	Providers report results of Consumer Satisfaction		

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	<p>individuals reporting they would be interested in self-directing their services.</p> <p>Proportion of applicants reporting they receive easily understood information on services available to help them make choices (P)</p>		X	X	X	X	<p>Satisfaction Survey/ 100%</p> <p>Annual Consumer Satisfaction Survey/ 100%</p>	<p>Survey to DHS/SSD/C&MU QA staff</p> <p>Providers report results of Consumer Satisfaction Survey to DHS/SSD/C&MU QA staff</p>		

Qualified Providers

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The state verifies that providers, initially and continually, meet required licensing and/or certification standards and adhere to other standards prior to their furnishing waiver services	Proportion of providers that meet required licensing, certification and other state standards prior to provision of waiver services by provider type	Providers rendering waiver services to the client have a current contract agreement in place and State licensure or certification requirements as applicable	X	X	X	X	Ongoing/100%	DHS-SSD QA Dept; quarterly. For RACCP: Community Ties of America (CTA) conducts annual QA review of selected participants	List of agencies applying to provide waiver services, reasons why organizations were denied, and steps that should be taken to reapply	
	Proportion of waiver providers that continue to meet required licensing, certification and other state standards	Each provider was required to submit evidence to demonstrate 100% compliance with the standards.	X	X	X	X	Ongoing/100%	DHS-SSD QA Dept; annually. For RACCP: Community Ties of America (CTA) conducts annual QA review of selected participants	List of organizations that were reviewed, compliance issues uncovered, and corrections made.	
	Proportion of licensing deficiencies (reported by provider type, major category of deficiency and including repeat deficiencies)		X	X	X	X	Ongoing/ random representative sample	DHS-SSD QA Dept; annually. For RACCP: Community Ties of America (CTA) conducts annual QA review of selected participants	List of organizations that were reviewed, compliance issues uncovered, and corrections made	
	Proportion of providers that have been sanctioned (reported by type of		X	X	X	X	Ongoing/100%	DHS-SSD QA Dept; annually. For RACCP: Community Ties of America (CTA) conducts annual QA review of selected	List of organizations that were sanctioned, compliance issues uncovered, and	

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	<p><i>sanction)</i></p> <p>Proportion of providers with an approved quality management plan</p>		X	X	X	X	Ongoing/ random representative sample	<p>participants</p> <p>DHS-SSD QA Dept; annually. For RACCP: Community Ties of America (CTA) conducts annual QA review of selected participants</p>	<p>corrections made.</p> <p>List of organizations that were reviewed, compliance issues uncovered, and corrections made.</p>	
The state monitors non-licensed/non-certified providers to assure adherence to waiver requirements	Proportion of non-licensed/non-certified providers that meet waiver requirements	Consumer Directed Personal Assistance: 1. Reviewed job description for personal assistance. 2. Verification of the PA 2 provider's skills and competence. 3. Recommended requirements for PA2 completed (TB clearance, BBP training, CPR and First Aid Training).	X	N/A	N/A	X	Ongoing/ random representative sample	DHS-SSD QA Dept; quarterly. For RACCP: Community Ties of America (CTA) conducts annual QA review of selected participants		

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		If provider requirements for PA2 not completed, client choice is documented.								
The state implements its policies and procedures for verifying that provider training has been conducted in accordance with state requirements and the approved waiver	Proportion of providers that meet training requirements in the waiver Proportion of direct service providers and support coordinators in compliance with staff training requirements	QA Reviewers examine providers' Personnel training records. QA Reviewers examine providers' Personnel training records.	X X	X X	X X	X X	Ongoing/ random representative sample Ongoing/ random representative sample	DHS-SSD QA Dept; quarterly. For RACCP: Community Ties of America (CTA) conducts annual QA review of selected participants	List of organizations that were reviewed, compliance issues uncovered, and corrections made	

Health and Welfare

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The state, on an on-going basis, identifies, addresses and seeks to prevent instances of abuse, neglect and exploitation	Number and proportion of incidences of reported abuse, neglect, exploitation	Providers report adverse events.	CM	CM	CM	CM	Ongoing monitoring. 100%	Providers: ongoing monitoring w/ quarterly trend analysis; DHS C&MU: ongoing monitoring with quarterly trend analysis	List of individual problems, interventions for remediation, and when documented completed.	
	Number of incidents of abuse, neglect, or exploitation that are reported within the required timeframe	Verbally: (24) hours or the next business day of the adverse event, Written: report within (72) hours.	CM; DHSC &MU	CM; DHSC &MU	CM	CM	Ongoing monitoring. 100%			
	Number of incidents of abuse, neglect, or exploitation in which the internal review was completed within the required timeframe	Appropriate authorities (such as APS,CPS, police), are notified in the event of suspected abuse and/or neglect;	X	X	X	X	Ongoing monitoring. 100%			
	Number and proportion of substantiated abuse, neglect and exploitation	APS sends reports of confirmed and unconfirmed abuse or neglect to ACCS-PD and reviewed to determine whether a household member, caregiver or contracted provider/agency was involved and determine the need for additional intervention. Communication	X	X	X	X	Ongoing monitoring. 100%			

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	<p>Number and proportion reported critical incidents (including mortality, injuries, client on client altercation)</p> <p>Proportion of people who report that they are treated with dignity</p> <p>Proportion of people who feel safe in their homes, and neighborhood</p> <p>Proportion of people who report that they know their rights</p> <p>Proportion of residential staff that report that they know</p>	<p>between the Child Welfare Services (CWS) PD staff and the ACCS-PD staff occurs when there is a CPS report on a NHWW waiver child to assure continued or enhanced service delivery.</p>								

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	<p>about client rights</p> <p>Proportion of individuals that report concerns by type</p> <p>Rate of avoidable hospital/health care emergency room admissions (<i>e.g., acute care, psychiatric</i>)</p> <p>Rate of emergency room use</p> <p>Proportion of individuals whose plan includes a health and safety risk assessment</p>	<p>Review of Claims Data</p> <p>Review of Claims Data</p> <p>Review of participant records</p>					<p>Ongoing monitoring. 100%</p> <p>Ongoing monitoring. 100%</p>			

Administrative Authority

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The Medicaid agency retains ultimate authority and responsibility for the operation of the waiver by exercising oversight over the performance of waiver functions by other state and local/regional non-state agencies (if appropriate) and contracted entities		DHS engages in routine, ongoing oversight of the NHWW waiver program through the C&MU which is organizationally located in the Social Service Division (SSD)/ Medicaid Waiver Section (MWS).	X	X	X	X	Annually or more frequently as needed. DHS/SSD/ C&MU QA staff reviews a random selection of prts annually,	DHS/SSD/C&MU is responsible for waiver contracts administration and monitoring the quality of the State's home and community based waiver programs. All providers have annual QA reviews conducted by the C&MU, which include: A participant satisfaction survey; Reviews of policy and operational manuals, personnel records, and participant records; Site visits; An exit conference; and a corrective action plan if needed	DHS/SSD/ C&MU QA staff prepares Findings Reports for each provider agency, and presents Findings Trends quarterly to the joint DOH/DHS Quality Monitoring and Improvement Committee	

Financial Accountability

Assurance Component	Performance Indicators	Discovery Activities/ Processes	Cross Cutting Indicators				Roles & Responsibilities	Frequency of Measurement / Sample	Responsible Parties for Data Aggregation/ Analysis	Nature of Remediation Reports	Quality Improvement/ Next Steps
			NH WW	MF CCP	RA CCP	HC CP					
State financial oversight exists to assure that claims are coded and paid for in accordance with the reimbursement methodology specified in the approved waiver.	The proportion of paid claims that are coded and paid in accord with policies in the approved waiver.	Waiver CM prior authorizes all waiver services on Prior Authorization Form (PAF); provider submits billing to SSD/MWS/ Fiscal and Information Unit (F&I) via HPMMIS.	X	X	X	X	The MWS/F&I conducts electronic audits of expenditure reports and claims files for all the HPMMIS payments.	Ongoing	The MWS/F&I conducts electronic audits of expenditure reports and claims files weekly, monthly, quarterly, and annually, for all the HPMMIS payments.	F&I staff reconcile PAs submitted by Waiver CMs with claims data submitted by providers.	
	Percent of claims paid where services were authorized and delivered		X	X	X	X		Ongoing			