

Dear Bob,

Please consider this our response/corrective action plan to the HCBS waiver that was conducted in June 2012.

We are moving forward with looking at the Recommendations and will take them into consideration as we update our next Human Services of Faribault & Martin Cos. Integrated plan.

Following please find the corrective action requirements as well as our plans for addressing these items.

Beginning immediately, ensure that care plans for HCBS participants in all programs include the required documentation of participant health and safety issues. All care plans must be updated with this information. Six out of 11 AC care plans reviewed did not include documentation of health and safety issues. The care plan is the one document that all participants receive. Therefore, it must include information the participant's health and safety needs, along with which services, formal or informal, will be provided to address those needs.

- Immediately after the audit exit interview, our staff reviewed the DHS Community Support Plan and emphasized the need to complete the Health and Safety portion of the DHS CSP. Our staff implemented immediately and have been incorporating it into each plan as they've been in contact with their clients. The Health and Safety documentation has been added to our Case Aides file review checklist and she is auditing a sampling of files each month.

Beginning immediately, include a back-up plan in the care plan of all CADI and participants. All CCB care plans must be updated with this information. This is required for all CCB programs to ensure health and safety needs are met in the event of an emergency. The back-up plan should include three elements: 1) the participant's preferred admitting hospital, 2) emergency contact in event that primary caregiver cannot be reached during an emergency, and 3) back-up staffing plans in event that primary staff are unable to provide needed services. Currently, three out of 16 CADI cases included partial back-up plan documentation meaning the plan included one or two, but not all three required elements.

- Immediately after the audit exit interview, our staff started using the DHS recommended Back Up Plan format. Staff began completing this information immediately and has it available on most CADI clients at this time, and will have it on all CADI clients by January 2013.

Beginning immediately, ensure that each participant case file includes signed documentation that participants have been informed of their right to appeal. It is required that all HCBS participants have a completed documentation of informed rights included in their case file. Three out of 16 CADI cases and two out of 20 EW cases did not have a completed documentation in the case file showing that participants had been informed of their right to appeal within the past year.

- Immediately after the audit exit interview, our staff added a check box to our HCBS care plan with the statement; “I have received my right to appeal.” All clients sign off on the care plan and this statement.

Beginning immediately, ensure that each participant case file includes signed documentation that participants have been informed of the county’s privacy practices in accordance with HIPAA. It is required that all HCBS participants have signed documentation in their case file stating that they have been informed of the county’s privacy practices on an annual basis. Currently, one out of two BI cases and 11 out of 20 EW cases have complete documentation, but it was not current within in the past year. One out of 20 EW cases had partial documentation because the form was not dated.

- Immediately after the audit exit interview, – Our practice was changed to give people their appeal rights in writing annually and to note this with a check box on the Community Support Plan as well as on the MSHO Universal Care Plan. We also discussed with the health plans that DHS requires that we do these forms and requested that the Universal Care Plan be amended to include a check box indicating that appeal rights were given.
- For privacy rights we provide “Your Privacy Rights” (HSB-24) at the initial and annual visits with MSHO clients (in addition to all other clients, which we were already doing). We also began utilizing written authorization forms to gather and release information concerning MSHO clients (HSB-1011). We also advised the health plans that DHS requires that the releases of information and privacy rights be given to all clients including MSHO. This is a change from prior health plans direction to us that Privacy Rights would be covered by them and we did not need to complete these for members on their health plans.

Submit the Case File Compliance Worksheet within 60 days of the Waiver Review Team’s site visit. Although it does not require Faribault and Martin Counties to submit a Correction Action plan on this item, a prompt response to this item is required. The Case File Compliance Worksheet, which was given to the county, provides detailed information on areas found to be non-compliant for each consumer case file reviewed. This report required follow up on 44 cases. All items are to be corrected by September 28, 2012 and verification submitted to the Waiver Review Team to document full compliance. Faribault and Martin Counties submitted a completed compliance report on September 13, 2012.

- Completed 9/13/2012.