

QUALITY COUNCIL MEETING MINUTES

9:00 a.m. – 4:00 p.m.

Thursday October 19, 2023

Type of meeting:

Quality Council Meeting

Facilitator(s):

Theresa Skidmore

Members:

John Collins, Self-Advocate

Adrienne Dissis, Family Member

Michelle Tolini, Agency Provider Representative

Veronica Gomez, Agency WSC

Matthew Dyal, Self-Advocate

Jill MacAlister, CDC+ Consultant

Patty Houghland, Disability Rights Florida

Kimberly Houston, Agency Provider Representative

Absent Members:

Latosha Obry, Self-Advocate

Mary Jo Pirone, Self-Advocate

Theresa Wyres, Small Agency Provider

Dina Justice, Family Care Council

Courtney Swilley, Florida Association for Rehabilitation Facilities Representative

APD Attendees:

Kimberly Quinn

Regina Sheridan

Alvaro Quintero

Lukas Tubeck

Meghan Torres

AHCA Attendees:

Suzi Kemp

Qlarant Attendees:

Bob Foley
Theresa Skidmore
Charlene Henry
Robyn Turlakis
Kristin Allen
Janet Tynes

Other Attendees:

Sherona Bryant, Disability Rights Florida
Paula James, Family Care Council
Myrna Diaz, Vocational Rehabilitation
Wayne Olson, Vocational Rehabilitation

Scribes:

Charlene Henry, Qlarant

Acronyms:

ABC- Allocation, Budget and Control System
ADT- Adult Day Training
AHCA- Agency for Health Care Administration
ANE- Abuse, Neglect, and Exploitation
APD- Agency for Persons with Disabilities
CDC+-Consumer Directed Care
CMS- Centers for Medicare and Medicaid Services
CMS- Consumable Medical Supplies
DD- Developmental Disability
EVV-Electronic Visit Verification
FARF- Florida Association of Rehabilitation Facilities
FBI-Federal Bureau of Investigations
FCCF- Family Care Council Florida
FDDC- Florida Development Disabilities Council
FDLE- Florida Department of Law Enforcement
FMAP – Federal Medical Assistance Program
FSQAP - Florida Statewide Quality Assurance Program
HHS – Health and Human Services

HCBS-Home and Community Based Services
HSRI- Human Services Research Institute
iBudget- Individual Budget
I/DD- Intellectual and Developmental Disabilities
ICA – Individual Comprehensive Assessment
II- Individual Interview
LSD- Life Skills Development
LRC – Local Review Committee
LOC- Level of Care
MLI – My Life Interview
MWEW – Medicaid Waiver Eligibility Worksheet
NASDDS - National Association of State Directors of Developmental Disabilities Services
NCI- National Core Indicators
NGQSI – Next Generation Questionnaire for Situational Information
PCR - Person Centered Review
PDR - Provider Discovery Review
PS - Personal Supports
QQS - Qlarant Quality Solutions
QA-Quality Assurance
QAR-Quality Assurance Reviewer
QC-Quality Council
QI-Quality Improvement
QO- Qualified Organization
QSI- Questionnaire for Situational Assessment
SAN – Significant Additional Needs
SLC- Supported Living Coaching
SSRR -Service Specific Record Reviews
SC – Support Coordination
TRAIN FL-Training Finder Real-time Affiliate Integrated Network Florida
VR – Vocational Rehabilitation
WSC- Waiver Support Coordinator

Welcome & Introductions

Theresa Skidmore – Qlarant

Beginning at approximately 9:00 a.m., Theresa Skidmore opened the meeting and welcomed all members and guests.

Refresher with Approval of Minutes

Theresa Skidmore – Qlarant

Theresa Skidmore provided a refresher from the July 2023 meeting held in Tampa. A motion to approve the minutes was made by Michelle Tolini and a second given by John Collins. Minutes were approved with an edit – Paula James was present at July meeting. Please see the July minutes for details.

Qlarant Updates & Quality Council Schedule

Theresa Skidmore - Qlarant

Theresa stated there have not been many changes with review tools at this time, but some will be upcoming. We are working closely with APD on monitoring service providers putting documents in iConnect.

There has been turnover in Suncoast; we have hired for the QAR role and the person will begin in late November. Qlarant has an open reviewer position in Southern Region. Qlarant will be providing live virtual training this year. Participants will be able to ask questions in the session.

Quality Council meeting dates for 2024 were discussed. Dates members present agreed upon were 4/4/24 & 7/25/24.

Vocational Rehab (VR) Supported Employment Services

Wayne Olson - VR

Alvaro Quintero – APD

Mirna Diaz – VR

Presenters spoke about the benefits of employment, the agencies' roles to assist people with employment goals, and eligibility parameters. Presenters discussed Pre-ETS services, Employment First Act, Interagency Memo of Agreement

between VR, AHCA and APD, Section 511 of the Rehab Act and the VR Referral Form.

VR uses a Benefits Planner to determine the Social Security benefits for the person and this is usually done on the phone. VR will help the person figure out how much they can work and keep benefits. You have to be referred to get the use of the Benefit Planner. How does VR refer folks to providers to work with? Wayne said providers really have to sell themselves because there are so many more providers out there now. VR and APD cannot assign or recommend people to providers. VR is 80% federally funded and 20% state funded. Who makes determinations about employability? The counselor determines it based upon notes. Counselor does discuss with a supervisor. Wayne said they are turning folks down based on severity less and less. Does VR hire disabled folks to be counselors? Wayne said they are having difficulty hiring people to work for VR in general.

Please see presentation slides for more details.

Critical Incident Reporting and Management

Meghan Torres - APD

Meghan shared the total incident trends statewide for '21-22, '22-23 & '23-24. 2022-2023 Incident Percentage. These indicated nothing out of the norm; staying within the range of 9-11% for critical incidents by Region. Reportable Incident by Location – most reports are coming from the licensed home setting, which is normal due to the providers being required reporters.

ER/hospitalization are the highest reason. Do the hospitals report when the person is an APD client or is it the WSC that reports? Meghan said it is self-reported or WSC reported.

At the federal level, there is a requirement to report certain incidents based on certain medical codes that could lookout for incidents such as Abuse, Neglect, and/or Exploitation (ANE). She talked about unreported incidents. Meghan went over the locations for the incidents.

APD is working in the new incident management system now and noted the system is going well with data collection. Kristin asked about violent crime (critical category) vs. nonviolent crime (reportable). Meghan went through the categories to show the various areas and which were critical vs reportable. Theresa asked could a single incident go into more than one category; Meghan said you could only select one category when reporting the event and you can select the highest priority category for escalation. Meghan explained why media involvement falls in the critical category. Jill asked about data for hospital discharges and transportation as she had an instance where a person sent home in an Uber. Meghan said this is not an isolated issue and the Agency is looking at

the whole system (discharge planning, law enforcement, providers and transportation). APD is looking at better crisis management processes.

APD Updates

Kimberly Quinn – APD

Lukas Tubeck – APD

Lukas provided the iConnect Update for the iConnect department.

Lukas said communication is important and he is facilitating talks with stakeholders (providers) to help resolve issues. APD and Well Sky are on those calls and they are brainstorming to help resolve issues. On 8/21/23, the functionality for Life Skills providers launched. On 10/16/23, Behavioral services providers launched. Therapy providers, CMS, EAA, Transportation, and Residential providers will be next. APD is working on an External Provider Interface (EPI) for providers to be able to upload to iConnect using the systems they already have such as Therap; testing on this coming soon. Later APD will do an interface with Quality Assurance from Qlarant reviews to help with remediation, as well as other APD departments including licensing and mobile forms.

Jill asked is there a plan to do management reports through iConnect? Lukas said there are a few reports in the works such as a Support Plan management report. Lukas asked that people send report type suggestions through helpdesk. Any plans for CDC integration. Lukas said no plans right now. Michelle asked is there a plan for providers to be able to get Support Plans out of iConnect so WSC does not have to send them. Lukas said not at this time.

Can documents that are not required to be in Provider Documentation be put into iConnect some place? Theresa said it could be uploaded to the Note tab. Lukas said to get with the regional iConnect trainer if unable to access the Note tab. Has the day rate issue for PS been fixed within iConnect, so it does not take off two units? Lukas said it is not fixed yet. Best idea is to put start time for one day and the end time for the following day then indicate the real start/end time for each staff. Provider said they are not getting support from helpdesk for disappearing information. Veronica asked how should they document to the helpdesk the disappearing item. Lukas said as much detail as you could give to the helpdesk along with the role the person entering information is in when using iConnect. Is there a way for agency owners to pull helpdesk tickets, from something a former employee reported? Lukas said an agency would need a second person to have permissions within the QO to see everything like the owner. Michelle asked about behavior provider documentation in iConnect for those under 21, noting she will be out of compliance for certain forms.

John commented newer WSCs do not seem to be as well trained as those who have left the career. Adrienne, Jill and Veronica noted various ways they continue training beyond the standard required training.

Patty had comments regarding the personal allowance. Is there a grievance procedure for those who disagree with the room & board rate?

Kim gave an update on the Managed Care Pilot. This will be folks from pre-enrollment (waitlist) categories for APD; it will involve 600. The pilot selection aligns with Statewide Managed Care Regions and regions D & I will be in the pilot. Request was submitted to CMS on 9/1. This will be 1915 A & C waiver. APD/AHCA are responding to questions from the federal government. John asked if someone gets on the pilot and wants to get off could they just get off and go into the waiver. Kim said they could come off and go onto the waiver after being enrolled on the pilot for one year. The intention is to put another person in the slot of the person who leaves the pilot, should that occur. Kim said APD is still in the build-the-program process. AHCA and APD have been directed by legislation on the procurement of a health plan for this pilot, one of the requirements is that the health plan be currently operating in the Statewide Medicaid Managed Care program. At the end of the pilot, there will be an evaluation of the overall program; this evaluation is due to the legislation in 2029. The ITN (Invitation to Negotiate) is anticipated to be released 11/3. For enrollees onto the program offer letters will go out to those in category 3-6, in the designated counties for a pool of 2600-3000 to participate; category 1 & 2 is crisis but these people have already been moved to the waiver so they wouldn't be a part of the pilot. Sherona asked could the pilot help to create more of a direct service provider shortage, if the providers who are enrolled to provide waiver services also serve people under the managed care pilot. Each Region will have one managed care plan but there will be many providers within the plan to serve the pilot. Michelle asked would the pilot Managed Care Plan have to abide by CMS rules; Kim said yes. Will these people lose Medicaid if in pilot; Kim said no. Has the ITN been written and approved? Kim said yes. Suzi said if there are provider enrollment questions related to the pilot, then gather your questions and APD can route them through the proper channel to get an answer. Any further questions regarding the ITN must be directed to the AHCA Procurement Office.

Quality Council Project/Initiative Ideas

Theresa Skidmore – Qlarant

Theresa discussed topics that could be starting points for small groups within the membership to address. Possible topics: recommendations for various processes

to be improved and training/presentation on things for providers to know when working with individuals.

Qlarant Data Presentation

Dr. Katy Glasgow - Qlarant

Katy discussed My Life Interview (MLI) Scores by life area. She noted MLI Outcomes across 2021-2023 wherein safety declined with waiver and social life increased for CDC+. She then talked about FY '23 Lowest Scoring Outcomes. Katy talked about medications: waiver participants – declining scores over '21-'23. She noted it would be good to look at post-interview questions as it relates to MLI scores, next time. Katy went over Outcomes by Region and Quartile, as well as Outcomes by Residential Setting & Quartile. She talked about the percentage of people who received preventive care by FY and PCRs resulting in Level 2 (old designation) Medical Peer Review. Katy reviewed WSC/CDC SSRR Scores by Region and FY, lower scoring SSRR Indicators for WSCs, FY 23 7/2022-6/2023 total numbers, Service Provider & QO PDRs by Region. Katy finished the presentation with a review of Medication Validation, Background Screening Compliance and Alerts.

Please see presentation slides for more details.

Quality Council Follow-Up & Next Steps

Theresa Skidmore – Qlarant

Attachments:

-Agenda

-VR APD Presentation

-Qlarant Data Presentation