QUALITY COUNCIL MEETING MINUTES
9:00 a.m. – 4:00 p.m.
Thursday July 25, 2024

Type of meeting:
Quality Council Meeting

Facilitator(s):
Theresa Skidmore

Members:
John Collins, Self-Advocate
Michelle Tolini, Agency Representative
Veronica Gomez, Agency WSC
Jill MacAlister, CDC+ Consultant
Dina Justice, The ARC of Florida
Paula James, Family Care Council
Courtney Swilley, FARF
Matthew Dyal, Self-Advocate
Yesenia Ramirez, Self-Advocate
Kimberly Houston, Agency Representative

Absent Members:
Latosha Obry, Self-Advocate
Yesenia Leyva, Self-Advocate
Adrienne Dissis, Family Member
Sherona Bryant, Disability Rights Florida
Mary Jo Pirone, Self-Advocate
Theresa Wyres, Small Agency Provider

APD Attendees:
Lukas Tubeck
Meghan Torres
Lynne Daw

AHCA Attendees:

None

Qlarant Attendees:

Bob Foley

Theresa Skidmore

Charlene Henry

Robyn Tourlakis

Kristin Allen

Janet Tynes

Christie Gentry

Dr. Katy Glasgow

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 April 2024 meeting held in Tallahassee. Motion to approve the minutes was made by Dina Justice and a second given by Michelle Tolini. Please see the April 2024 minutes for details.

AHCA Updates
Suzi Kemp, Government Operations Consultant III – Agency for Healthcare Administration (AHCA)

There were no updates to provide at this time.

APD and iConnect Updates
Lukas Tubeck – Agency for Persons with Disabilities (APD)

General APD Update - APD aims to increase opportunities to serve and provide seamless service delivery. The organization aims to do this through programs like Hope, Unique Abilities Business Program (UABP), Adult Pathways, and DDMC (Developmental Disabilities Managed Care). APD got $2.2 billion, which includes $64.8 million for crisis, $55.7 pre-enrollment (categories 1-5, also category 6 that are those with a sibling in category 1-5). UABP – helps those with employment goals connect with the organization closely or directly related to their path. Managed Care – offering services similar to iBudget Waiver. There is an online application and improved materials to know how to better apply for services. Jill asked if there is a plan to move people to managed care program from the waiver and how are people getting information about the programs mentioned. Matthew asked what it means when you say Managed Care. Lynne Daw responded managed care is another option for those who are previously on the waiting list; currently managed care is in the pilot phase and not the enrollment process right now. Jill asked if there is a plan to expand the staff in the Consumer Directed Care (CDC+) office.
A guest mentioned trying to get Department of Health (DOH), Department of Children and Families (DCF) and APD together to resolve the determination issues as it affects many different areas.
John asked would those with disabilities be hired as experts for the UABP program.
Lynne said UABP is an employment program with organizations that need to hire and linking available persons in APD to those organizations.
Jill said training WSCs about the new initiatives so they can spread the word and be able to educate people getting services would be a good idea.

Bob explained what managed care means versus the traditional care model; right now Florida does fee-for-service (traditional).

Lukas and Lynne answered questions submitted by members.

Could we further evaluate the State Office's approval process for both BASE and Cost Plans to determine if these could be expedited in any way? APD Response: State office is looking into this to see if they can do anything to move this along.
Regarding CDC+ the long wait for approvals to quick updates, Purchasing Plans, and customer service support. APD Response: The delay is due to inaccurate information being submitted. CDC+ will have to request additional information in these cases.
Regarding WSC supervisor being included in all CDC+ correspondence and having access to submit requests when a consultant is out or if there is a vacancy and a new consultant is being trained. APD Response: APD will be exploring options to accomplish this.
Updates related PROVIDER ADVISORY #2024-012 ADDITIONAL GRACE PERIOD FOR ICONNECT FUNCTIONALITY. APD Response: More guidance is in Provider Advisory 2024-027. Qlarant also put out interim review guidance.
PROVIDER ADVISORY #2024-014 APD ANNUAL GROUP HOME CLIENT MEDICAL REVIEW INITIATIVE: Are there any plans to do medical reviews for individuals in supported living? APD Response: This is limited to individuals who live in licensed homes only.
Will APD provide a directory of state office employees and their associated responsibilities/ department? APD Response: There has been recent reorganization and they are working on getting something posted. Currently, no timeline on this.
Background screening updates and requirements? Response: Theresa said Qlarant could work with APD and AHCA experts to do a webinar for providers and CDC+ Representatives on background screening.
What is the intersection of Qlarant, medical review, relicensing, and monthly monitoring going to look like?

APD Response: Lynne said all of these are different. Qlarant's role is more about compliance; Licensing is focusing on compliance with 65G-2 that is residential environment specific, medical reviews will focus on the specific medical situation of the individual. Medical review is not about provider compliance. There will be reports if there are items that need to be followed-up on. There are also Centers for Medicare and Medicaid Services (CMS) Reviewers who go in prior to annual licensure.
What is the status of Medicaid disenrollment and is any data being collected to determine the fallout for service recipients? APD Response: APD is still working with DCF and Qualified Organizations (QOs) to assist them with access to check on individuals' status in the system. Susan Nipper has been working with DCF to get these reviews expedited. State Office is meeting with a group of QOs about this regularly. Jill said she has wanted to get a specific DCF contact per Region across the whole state. Lynne said they have asked for this, but they have not been able to get this done for each Region. Redetermination for DCF kicked in when people went from SSI to SSDI after the pandemic ended; there are many people in the queue right (waiver and non-waiver) now who need this done.
Are there any updates on the managed care pilot since a provider was selected? How are the individuals being offered the opportunity to try the pilot being selected? Have offers been sent out? Will Qlarant have any role in evaluating the success or Quality Assurance of the pilot? APD Response: The organization Florida Community Care has a contract that is pending execution. Letters to go out to potential enrollees once contract has been executed. APD will send the interest letters to those on the waiting list only in the specific counties. No answer to Qlarant's role in evaluating pilot at this time.

iConnect Update – launched worker portal functionality since last meeting. June 4th launched the rate increases for July 1. Tickler notifications rolled out on June 4th. The provider needs to set up a one-time notification for their billing agent to gain access. June 28th launched some new reports in the system. There are job aids for each iConnect report. There probably will not be an advisory for each updated functionality. There will likely be an excel job aid put out to assist people with sorting and filtering.

Veronica noted there seems to be data erased each time there is update in iConnect; she plans to send her data regarding lost data in Support Plans and Progress Notes to Margaret Halle, Region iConnect Trainer. Paula asked about the timeline for the consumer portal launching will be. Lukas said it is not on the current list for items soon to come. Kimberly asked about a different way to post transportation entries in iConnect. Lukas said they are looking at opportunities

to enhance the system to address this issue; he said it is a common request. He said submit an enhancement request ticket. Michelle asked what subject should be used from the drop down list. Lukas said pick iConnect then a second dropdown would be enhancement but if you use the phrase "enhancement" it will get will to where it needs to go. Veronica mentioned about more efficiencies for Support Plan signature page. For example, a way that you would not need to create a Note for the page itself and then a secondary Note for provider signature page. Lukas said this is something they are currently looking at. A guest talked about an enhancement need related to the current Cost Plan. There is an issue with Therap interfacing with the iConnect system. The GPS portion of EVV has improved. There is an issue with Adult Day Training and other services (if a service is being provided and another is split in the same day).

Critical Incident Reporting and Management
Meghan Torres - APD

It has been 1 year in the updated incident management system. There have been 16,841 incidents reported in total; the table also shows the number reported timely (2067) and not timely (344) for a grand total. Meghan went over incident count by region and covered critical incident categories. Data is following the historic trend. Northeast is showing more life-threatening incidents of 458, while rest of regions are showing much less. Meghan said she thinks that Region is erring on the side of caution. The State APD staff are working with the Region on the reporting for this category (parsing out what is truly life threatening).
Incidents by Location. Categories 10% or above are licensed home (1372/40%); family home (832/24%); Other (558/16%); Supported Living (326 / 10%). Locations including ADT, Community Based, Crisis Stabilization, School, Skilled Nursing and Hospital are under 10%.
Yesenia asked if there is a difference in the reporting requirement for CDC+, Meghan said there is no difference. Jill commented she does not think CDC+ staff are trained like others about incident reporting. Michelle asked about submitting additional reports when a report has been sent by the WSC. Meghan said State APD staff have been told to add any duplicative reports received to the existing report filed for a person. Michelle asked for additional data to show how many people are served in a region next to the incident reports shown for the region.
Purple Alerts – Florida Department of Law Enforcement (FDLE) has a new alert; it is tailored for people with mental health conditions and those with IDD who are missing or at risk. It has been in place for less than 2 years and APD noted a good success rate with locating people once the alert gets issued. APD is keeping track of purple alerts issued – Meghan has data on those who have gone missing (655 total) and the number of purple alerts issued by region. There have been 14 purple alerts issued in last year. There was discussion about how long it

takes before alerts get issued. John asked about the training provided to law enforcement. Meghan said the training for law enforcement is about when to issue the purple alert; it is not sensitivity training - how to handle the person, once they find them. Meghan said the purple alert training is not mandated for law enforcement. Guests mentioned agencies that do help support efforts to locate people when they go missing. Jill said she has concern over the number of people missing in Suncoast (145) versus the next highest in Central (39). Jill will send additional questions, as she would like more information on via email. One possibility is the use of the Crisis Intervention – Mobile Response Unit in Suncoast. This could be a possible future topic/presentation.

Qlarant Data Presentation
Dr. Katy Glasgow - Qlarant

Katy discussed Provider Discovery Reviews by going over a snapshot of Fiscal Year (FY) 24, Q1-Q3, Qualifications & Training, Background Screening, Service Specific Record Reviews and Alerts. Katy discussed Person Centered Reviews breaking down the topics by giving a FY24 Q1-Q3 Snapshot, then talking about Record Reviews, Stability, Preventative Care in the Health Summary, and the My Life Interview (MLI) Outcomes and Supports. Lastly, Katy went over Outcomes for People Living in Licensed Residential Homes (LRH). She discussed these outcomes by FY, Age, Primary Disability, Region and Indicator.
There was discussion regarding age groups related to the data for those in LRH. Consider changing current group 18-21 to age group, 18-25 & then 22-44 to age group 26-44. Breaking down the data into the regions for slide 38 & 39.

Please see presentation slides for more details.

Qlarant Updates
Theresa Skidmore – Qlarant

Theresa talked about the Interim Guidance Document. She referenced the advisory in the development of the document. Michelle noted the document clearly defined the expectation. Theresa discussed more about what is on the bottom of pages 3 and 4 and gave examples about what these mean. APD does not want providers to step back from using iConnect. Kimberly asked about reports in iConnect and on paper. Kristin noted this is allowed right now; she noted to make sure reports have dates including month/day/year. Theresa said for the grace period noted in the APD Advisory, Qlarant will accept paper or iConnect version of the document with the exceptions of Medicaid Waiver Eligibility Worksheets (MWEW) and Support Plans. The Support Coordinator must still use the correct iConnect MWEW and Support Plan forms but these will be accepted in iConnect or on paper. The advisory goes through June 30, 2025; Qlarant's guidance goes through December 31, 2025.

As discussed in prior meetings, Qlarant is working with AHCA and APD to reduce the number of questions in the interview tools. It has been expressed that at times there are too many questions and some are repetitive. This will be ready by 10/1/2024.

Quality Council Follow-Up & Next Steps
Theresa Skidmore – Qlarant

A location and date for the October meeting will need to be determined.

<u>**Attachments:**</u>

Meeting Agenda

Qlarant Data Presentation