

# Qlarant Medical Peer Review Process

Quality Council

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# Session Purpose

- Introduction of Medical Nurse Reviewer and Quality Assurance Reviewer
- Current Qlarant Contract Requirements for Medical Peer Review
- New Medical Peer Review (MPR) Process
- Review of the Health Summary
- Reviewer Role in the process
- Examples and Practical Application
- Questions and Answers

Once upon a time when dinosaurs  
roamed the earth....

Introduction of Nancy Jordan, Medical Peer Reviewer &  
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# Qlarant Medical Peer Review Process

A Medical Peer Review (MPR) is conducted by the Qlarant Nurse Reviewer on all Person-Centered Reviews (PCR) completed

- It is a contractual requirement of the Qlarant contract with the Florida Agency for Health Care Administration (AHCA).
- The focus is to evaluate the adequacy and appropriateness of treatment and services.
- It is designed to identify the physical, dental and behavioral health care status and needs of people currently receiving services on the iBudget Waiver and CDC+ program.

# Qlarant Medical Peer Review Process

- It captures health risk and safety concerns and identifies interventions designed to promote the health and safety of the person.
- It allows for the identification of critical incidents and potentially life-threatening situations.
- It identifies environmental risks and recommendations, as needed, for modifications that may promote safety and independence for the reviewed individual.

# Key Components of a Medical Peer Review

## **Person Centered Review Interview (PCR)**

- Person Centered Reviews assess outcomes and support delivery systems from the perspective of persons receiving services.

## **Comprehensive Health Summary**

- The Health Summary is the tool used during the Person-Centered Review to assess the health status of the individual being interviewed for the past twelve months.

## **Discovery**

- This is where items from the PCR process that are documented as Follow-Up or Informational are identified. Follow-Up items then become a part of the Qualified Organizations (QO) APD Plan of Remediation.

# Medical Peer Review Process

The MPR process begins with the PCR interview conducted by the Qlarant Quality Assurance Reviewer (QAR). The Nurse Reviewer is available for real time consultation with the QARs, people interviewed, families, and providers as health and safety questions or concerns arise.

Subsequent to the PCR interview, the following activities occur as part of the MPR process:

- Review of information collected in the Comprehensive Health Summary by the QAR and if needed, from the central record in APD iConnect (i.e. Person-Centered Support Plan and other documentation as available)
- When available, review of Medicaid (FMMIS) claims data which includes institutional, medical and pharmacy claims for the 12-month period prior to the review
- Review of the observational data collected by the QAR during the PCR interview and noted in the discovery statements.
- Review of incident report data as applicable and when available.

# Review of the Comprehensive Health Summary

- **Basic Demographic Information** about the Person being Interviewed which includes:  
Name, age, gender, primary and secondary disabilities and their living situation
- **Medical Preventative Care** provided in the past twelve months. These are the Center for Disease Control (CDC) recommended preventative care based on the age and gender of the person. The Health Summary indicates any of the following that have been provided:
  - Physical Exam (Annually)
  - Flu Vaccine (Annually)
  - Pneumonia Vaccine (Age 60+)
  - Zoster (Shingles) Vaccine (Age 50+, given once)
  - Colorectal Cancer Screening (Age 50+)
  - Female preventive health care: mammogram (Female only, Age 40+)
  - Female preventive health care: pap smear or other exams such as ultrasound (Female only, Initial age 21 then every 3 years up to age 65)
  - Bone Density Scan (Age 40+)
  - Vision Exam (Every 2 years)
  - Dental Exam (Annually)



# Review of the Comprehensive Health Summary

- **Occurrence of Any Medical Events** in the past twelve months including details and explanations as available:
  - Unplanned weight loss/gain of 10 lbs. or more
  - Two or more falls
  - Problems with skin breakdown (primarily concerned with decubitus & chronic issues)
  - Choking episodes
- **Health Concerns** – if they have them, are they being addressed?
- **Any Physicians and Medical Specialist** that they have visited in the past twelve months
- **Urgent Care Visits** in the last twelve months
- **Emergency Room Visits** in the last twelve months
- **Hospital Admissions** in the last twelve months
- **Baker Acts Admissions** in the last twelve months
- **Reactive Strategies** in the last twelve months

# Review of the Comprehensive Health Summary

- **Medications** including over-the counter drugs being used
- **Needed Therapies** (if any)
- **Needed Assessments** for Therapies (if any) - includes behavioral therapy
- Use of **Adaptive Devices & Equipment**
- The working condition of their **Adaptive Devices & Equipment**.
- Do they have an **Emergency Plan**?
- Do they have **Medicare**?
- Do they have **Private Insurance**?
- Have they private paid for any **Health Care Services** in the past twelve months?
- Note all **Sources used by the Reviewer**?
- **Information** about who to contact for follow up any questions and/or clarification and how they can be contacted.

# Medical Peer Review Process

All PCRs begin the MPR process as a Level One. Following review of the available information the MPR process is completed as a Level One or Level Two.

## Level One

- Components of a Level One Review include, at a minimum, review of the PCR report, Comprehensive Health Summary, available incident report information, and Medicaid claims data. The MPR Nurse may access APD iConnect to obtain additional information or documentation.
- The MPR Nurse may contact others for additional information or clarification, as needed. This could include calls to any of the following; the Person, Family/Caregiver, Qlarant Reviewer, Qlarant Medical Director, WSC, Providers, APD Medical Case Manager and/or APD Senior Behavior Analyst. Every attempt will be made to obtain additional information necessary for clarification.
- If review of available information and additional inquiries (when indicated) satisfy concerns, health related discoveries are noted in the PCR and the MPR is closed as a Level One.

# Medical Peer Review Process

## Level Two

- If the MPR Nurse inquiries do not produce a satisfactory result and concerns persist the PCR is elevated to a Level Two. A Level two review is triggered when circumstances dictate formal communication with the APD State office, and AHCA. The Regional Medical Case Management Lead and Regional CBA may also be contacted.
- The MPR Nurse will document in a case summary the concerns that elevated the PCR to a Level Two. The MPR Nurse may also consult with the Qlarant Medical Director as needed.
- A “Qlarant Medical Peer Review Level Two Communication Note” including a summary of activities and findings will be completed and posted to the Qlarant portal/secure website.
- APD State office and AHCA are notified that a Level Two Review report is posted for their review, and a copy is shared with the QO/WSC via Kiteworks. The MPR is concluded and closed as a Level Two report.

# Examples of Practical Applications

## Level One Example:

A 32-year-old male with diagnoses of autism and intellectual disabilities who lives in his family home. He had most of his preventive care and reported that he had “good” health. He had no Urgent Care visits, ER visits or hospitalizations in the past year. His medications were consistent with his diagnosis, and he was under the care of what appeared to be appropriate specialists (Psychiatrist/Neurologist/Primary Care)

## Potential Concerns Noted:

- Preventive care
  - No flu vaccination in the past year – addressed in Discovery
  - No vision exam in the past 2 years – addressed in Discovery
  - No dental care in the past year – addressed in Discovery

❖ **Review closed as a Level One**

# Examples of Practical Applications

## **Level Two Example:**

An 83 year-old competent female with a diagnosis of intellectual disability who lives independently in her own trailer home. No preventive health care in the past year by the individual's choice. No reported medications.

## **Potential Concerns Noted:**

- It has been reported that she may have some untreated mental health concerns which may explain some of her behaviors.
- Multiple types of preventive health care that are recommended to preserve health status are not being accessed which could lead to a decline in her health.
- Individual uses a wheeled walker and is reported to walk along the side of the road for long distances in all kind of weather situations, including high summer heat. This puts her at risk for road accidents and dehydration and heat exhaustion/stroke.
- Multiple interactions with Adult Protective Investigators for self-neglect related to her habits (walking long distances and eating out of cans) and her unsanitary living situations.

# Examples of Practical Applications

## Level Two Example continued:

### Potential Concerns Noted:

- Individual smokes cigarettes and may pose both health and safety risks to herself when smoking.
- No known family support
- Paid supports are working diligently with her to try to assist her in any way that she will accept.
- Reviewed available reports & spoke to QAR and WSC who both shared my concerns
- APD Medical Case Management notified and reviewed with Qlarant Medical Director
- Medical Peer Review Level Two Communication Note completed and sent to AHCA, APD and QO

❖ Review closed as a Level Two

# Training Conducted in Other States

- Assisting Individuals To Learn About Their Medications
  - Focus is on how staff can help educate individuals about their medications
- Empowerment Through Education to Promote Health and Wellbeing
  - An overview on how staff can support individuals to learn and be more involved in their healthcare and medical treatment.
- Assisting Individuals to Learn About Their Common Health Conditions
  - Similar to the above training - Looks at how to support the person to play a more active role in their own healthcare.



# Questions/Discussion Time