

I.

COLORADO DEPARTMENT OF HEALTH CARE POLICY AND FINANCING	DATE: 02/017/09
Eligibility Site Quality Improvement Self-Monitoring of Eligibility Determinations	SUPERSEDES: N/A NUMBER: DATE: N/A APPROVAL:

PURPOSE To provide a methodology and establish basic guidelines for eligibility sites to develop individual quality improvement plans and conduct quality improvement activities in alignment with the Medical Eligibility Quality Improvement Plan (MEQIP). The MEQIP covers the processing of new applications for Medicaid and Child Health Plan *Plus* (CHP+). Quality improvement activities are focused on the continuous evaluation and improvement of processing new applications, by monitoring eligibility determination error rates using three key performance indicators: timely determination, case file documentation and data entry.

II.

DEFINITIONS

- A. Application – The Single Purpose Application or the Application for Medical Assistance. Only ***new*** applications are to be addressed.
- B. Case File Documentation -Case files must have sufficient documentation to support all eligibility determinations
- C. CHP+ -Child Health Plan *Plus*. Individuals who do not qualify for Medicaid, may be eligible and receive health care benefits through CHP+. Applications for individuals who are determined eligible or ineligible for CHP+ are a part of the Medical Eligibility Quality Improvement Plan.
- D. CICP -Colorado Indigent Care Program. Individuals who are eligible for CICP apply through disproportionate share providers. Applications for these individuals are maintained with the provider and are not a part of the Medical Eligibility Quality Improvement Plan.
- E. Department of Health Care Policy and Financing – (the Department). The Department is the single state agency for Colorado Medicaid and CHP+.
- F. Determination Errors – Data entry errors that result in inaccurate medical eligibility determinations.
- G. Eligibility Sites – All county departments of social/human services, medical assistance sites and school based eligibility sites.
- H. Eligibility Site Contact – An individual who is the MEQIP contact for an eligibility site. This individual can be the same person as the Eligibility Site Supervisory Reviewer.
- I. Eligibility Site Supervisory Reviewer – An individual who is the eligibility site supervisor or a qualified individual designated by a eligibility site supervisor. This individual can be the same person as the Eligibility Site Contact.
- J. Foster Care and Subsidized Adoption – Children who are enrolled in the Foster Care or the Subsidized Adoption program are automatically eligible for Medicaid; therefore, no application is submitted. These individuals are not a part of the Medical Eligibility Quality Improvement Plan.
- K. MEQIC -Medical Eligibility Quality Improvement Committee
- L. MEQIP -Medical Eligibility Quality Improvement Plan
- M. SSI -Supplemental Security Income. Individuals who receive SSI are automatically eligible for Medicaid; therefore, no application is submitted. These individuals are not a part of the Medical Eligibility Quality Improvement Plan.

- N. Supervisory Review – Quality reviews conducted by an eligibility site supervisor or a qualified individual designated by the supervisor to perform reviews.
- O. Timely Processing -Applications that exceed the processing guidelines (as established in 42 CFR 435.911)
- P. Performance Measures -Key areas in the eligibility determination process that have been identified for quality improvement strategies.

III. PROCEDURE

A. Eligibility Site Quality Improvement Plan

Eligibility site contacts must submit an annual quality improvement plan to the Department addressing the criteria in the MEQIP Tool Kit, template plan. Eligibility site contacts must submit their 1st Annual Plan by March 2009 for quality improvement activities to begin in April 2009. Sites may use the template plan provided in the MEQIP Tool Kit or their own format that addresses all of the key plan criteria. Eligibility sites are given the opportunity to change their annual plan each year. New annual plans must be submitted by March of each year. If an Eligibility site does not submit a new annual plan by March, the Department will assume the site has no changes to its original annual plan and the existing plan will remain in effect.

B. Random Sampling Methodology

Eligibility Site Contacts must identify the sampling methodology with which they will identify applications to Supervisory Review. The sampling methodology that is identified must be reported in the Annual Plan and used consistently throughout the quality plan year. Any changes or modifications made to the sampling methodology must be approved by the Department prior to the change. The Eligibility Site Contact may use any established statistical sampling methodology or combination of methodologies as long as they contain the following:

- **Sample must be random.** Eligibility site contacts must document their Supervisory Review process for selecting applications and may use statistical software. The worker who processed the application cannot select the applications to be reviewed.
- **Sample must include a minimum of four processed applications per worker in the month the application was processed.** Eligibility Site Contacts must calculate and identify the number of workers and applications to be reviewed.

Eligibility Site Supervisory reviewers who conduct extensive quality review activities with new workers may choose to exclude new worker's applications from the Annual Plan, but must clarify this within the Annual Plan.

- **Sample must exclude individuals approved or denied for medical assistance through SSI, Foster Care, Subsidized Adoption, and CICP.**

C. Review Guide

The MEQIC developed a review guide to offer an additional resource for Eligibility Site

Supervisory Reviewers that do not have existing review tools. Eligibility Site Supervisory Reviewers who choose to utilize a different supervisory review tool to review applications must provide a sample of their review tool with their Annual Plan. All supervisory review tools collected will be shared through a central repository for all eligibility sites to reference and/or utilize.

Eligibility Site Supervisory Reviewers are responsible for monitoring processed, new applications for the three key performance indicators; case file documentation, timeliness, and data entry, as outlined in the MEQIP

Each supervisory review guide must address the three key performance indicators: 1) Was the application processed within established timeframes 2) Was the determination adequately supported with the appropriate documentation and 3) Was the data entry correct to achieve an accurate determination.

Eligibility Site Contacts must document in their Annual Plan the process for utilizing the results of the Supervisory Review, including but not limited to providing feedback, conducting training, and measuring individual performance and overall trending to identify areas for improvement.

Eligibility Site Contacts are encouraged to find efficiencies within the supervisory review process. Supervisory Reviews of applications for joint medical and non-medical programs may also be used.

D. Reporting

i. Standardized Report

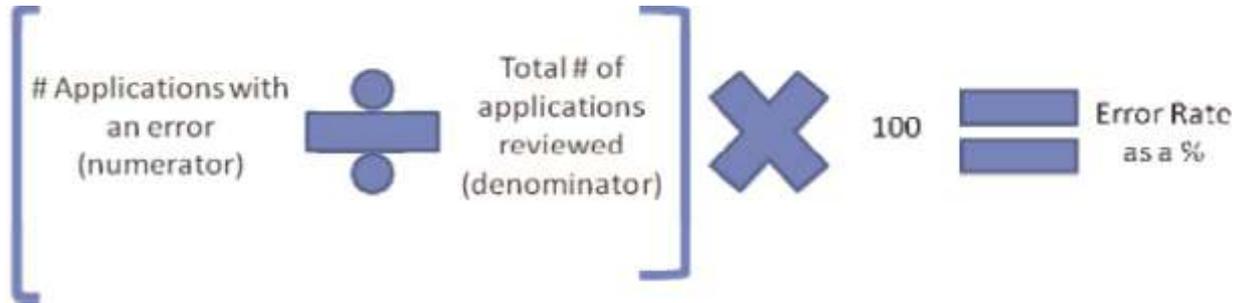
Eligibility Site Supervisory Reviewers are required to compile and submit the results of their Supervisory Reviews to the Department quarterly, in the format provided by the Department by the deliverable dates established in the MEQIP. Please refer to the Standardized Report for detailed instructions on how to complete the report. Eligibility Site Supervisory Reviewers enter applicable data into the report each quarter, and email it to the Department at the following designated email address: MEQIP@hcpf.state.co.us. Eligibility sites that do not submit their report timely may be subject to corrective actions. The Department will notify the eligibility site directors of all eligibility sites that do not meet the deliverable dates.

ii. Calculating Errors

When calculating errors, an error is counted when the application: 1) Is not processed within established timeframes 2) Is missing documentation that is needed to support the eligibility determination or 3) Is data entered incorrectly into CBMS and adversely impacts the eligibility determination.

The Standardized Report will automatically calculate error rates for each performance measure using the following formula:

The Eligibility Site Supervisory reviewer calculates how many workers will be reviewed for each review month and enters that number into the report. The report automatically calculates



the total number of applications to be reviewed (denominator). The Eligibility Site Supervisory Reviewer must review each application for all three (3) key performance indicators to ensure consistency and simplicity.

Once the Eligibility Site Supervisory Reviewer completes the quality reviews for the month, the reviewer documents and calculates the number of applications with errors for each indicator. An application can have an error in more than one of the key performance indicators, and shall be counted once for each indicator. For instance, if an application was not processed timely and lacked necessary documentation, that single application review shall count as two errors, once for each of the two key performance indicators.

iii. Narrative.

Eligibility Site Supervisory Reviewers are required to provide narrative with their quarterly report to elaborate on their quality review findings and improvement efforts, which may include:

- Explaining any outliers,
- Providing updates on implementation of new processes or reinforcing existing processes,
- Describing training efforts,
- Describing recent activities or events that impacted the site, and
- Identifying the party or parties responsible for implementing any quality improvement processes or procedures, if it differs from the Annual Plan.

E. Monitoring and Utilization of Quality Improvement Results

Eligibility Site Supervisory Reviewers are required to utilize the results of the quality reviews to implement and monitor quality improvement initiatives. Eligibility Site Supervisory Reviewers shall provide details on their self-monitoring and quality improvement efforts in the narrative section of the quarterly reports.

F. Record Retention

Eligibility Site Supervisory Reviewers shall maintain a complete file of all records, documents, communications and other material that pertains to the monthly quality improvement application reviews and substantiates the findings. The documentation should clearly demonstrate which applications were reviewed each month and the results of the quality improvement reviews. The documentation shall be specific enough for the Department to conduct its own re-review of the applications reviewed by the eligibility site. The case file review documentation shall be maintained for three (3) years from the month of the reviews unless the Department requests that the records are retained for a longer period.

Eligibility Site Supervisory Reviewers shall ensure that the Department receives a copy of the review files and supporting documentation within ten (10) business days of the Department's request or within the timeframe established in the Department's request. In addition, the Department reserves the right to conduct onsite monitoring of review files without advance notice.