



QIS Program Review Remediation Instructions

About the Remediation Workbook

- Client data was pulled in early September 2015 from the Program Review tool, MMIS and the BUS. **You may have more up to date information** since this data was collected.
- Some columns and rows may be hidden to focus the spreadsheet on clients and deficiencies that require your agency’s attention. You have the option to un-hide these rows and columns if you want more information about a deficiency or want to see clients who have no deficiencies.

How to Read the Spreadsheets

- **Performance measures** are listed by column. **Clients** are listed by row showing data about their assessments and service plans.
- Deficiencies are indicated with the cell **highlighted in yellow** and **require your attention** (clients that had a deficiency but are no longer receiving services on the waiver may be hidden and do not require any action.)

Summary 29-33 Q28_LOC_3C ULTC assessments not applied appropriately. This is a summary of Q29-31.	Not accurately scored on ULTC (Summary 32-33) Q31_LOC_3CA This is a summary of Q32-33.	ULTC 100.2 Due To Scores not Justified in Comment Section Q32_LOC_3C3 All "Due To" scores must be sufficiently justified in the comment section. This is a summary of the CMA reviewer responses from the QIS Program Review Tool Questions 27-34.
Q28_LOC_3C	Q31_LOC_3CA	Q32_LOC_3C3
0	0	0
0	0	0
4. Deficiency Remains	4. Deficiency Remains	4. Deficiency Remains
4. Deficiency Remains	4. Deficiency Remains	4. Deficiency Remains

- There **are at least two worksheets (tabs) for each waiver** – one for Performance Measure deficiencies and one for Service Plan to Utilization deficiencies. **Note:** CMHS and EBD waivers will include tabs for Mental Health and/or Alternative Care Facility Provider Contacts. The tabs are color coded by waiver.

CMHS	CMHS SP-Utilization Comparison	CMHS-MH Contacts PM	EBD	EBD SP-Utilization Comparison	EBD-ACF Contacts PM
------	--------------------------------	---------------------	-----	-------------------------------	---------------------

What is a Deficiency?

- Items that have **not been completed** according to the performance measures in the level of care assessment and the service plan based on State and Federal regulations.

Performance Measure Worksheet: Your Task

To **review each Performance Measure (PM) deficiency** for each client, **click in the yellow highlighted cell** (drop-down box appears), **determine/select appropriate code** based on current remediation status.



Remediation Status Codes:

- 1 – Corrected at CSR
 - *Use of this code indicates that the issue existed in previous service plan, however, issue no longer exists in service plan following a CSR.*
- 2 – Corrected NOT at CSR
 - *Use of this code indicates that the issue existed in previous service plan but has been resolved either during a SP revision, unscheduled review, or upon receipt of medical records or additional client documentation.*
- 3 – Will be Corrected at Next CSR
 - *Use of this code indicates the intention that this issue will be corrected at the next CSR*
- 4 – Deficiency remains
 - ***Do not use this code. All deficiencies must be remediated.***
- 5 – No deficiency/Data Error/Reviewer Error
 - *Use of this code indicates a potential data entry error or reviewer error,*
- 6 – No Longer on Waiver
 - *Use this code to indicate the client's services on the waiver have ended. State staff utilized this code during preliminary analysis; CMAs may use this code if they have more up-to-date information about a client ending services.*

Example: Performance Measure Deficiency Remediation

What You Will Receive

What You Need To Return

Example: PM Deficiency Remediation:			Example: PM Deficiency Remediation:	
Medicaid ID	A00000	<p>Click in this cell to enable drop down box below. Select appropriate code. (Cells change color with selection.)</p>	Medicaid ID	A00000
Waiver	EBD		Waiver	EBD
CMA	ACCESS		CMA	ACCESS
Case Manager Name	Jane Doe		Case Manager Name	Jane Doe
Q27_LOC_3B Professional Medical Information Page (PMIP) does not meet HCPF requirements	4. Deficiency Remains		Q27_LOC_3B Professional Medical Information Page (PMIP) does not meet HCPF requirements	1. Corrected at CSR
	<ul style="list-style-type: none"> 1. Corrected at CSR 2. Corrected NOT at CSR 3. Will be corrected at next CSR 4. Deficiency Remains 5. No Deficiency/Data Error/Reviewer Error 6. No Longer on Waiver 			
Example: PM Deficiency Remediation:			Example: PM Deficiency Remediation:	
Q34_SP_1A [SP does not demonstrate that the needs identified by ULTC 100.2 reflect services authorized in SP	4. Deficiency Remains		Q34_SP_1A SP does not demonstrate that the needs identified by ULTC 100.2 reflect services authorized in SP	6. No Longer on Waiver
	<ul style="list-style-type: none"> 1. Corrected at CSR 2. Corrected NOT at CSR 3. Will be corrected at next CSR 4. Deficiency Remains 5. No Deficiency/Data Error/Reviewer Error 6. No Longer on Waiver 			
Example: PM Deficiency Remediation:			Example: PM Deficiency Remediation:	
Q36_SP_1C SP does not appropriately addresses personal goals identified in Service Goals and Personal Goals sections of the SP	4. Deficiency Remains	<p>If deficiency still needs to be corrected by your agency select:</p> <p>3. Will be corrected at next CSR.</p>	Q36_SP_1C SP does not appropriately addresses personal goals identified in Service Goals and Personal Goals sections of the SP	3. Will be corrected at next CSR
	<ul style="list-style-type: none"> 1. Corrected at CSR 2. Corrected NOT at CSR 3. Will be corrected at next CSR 4. Deficiency Remains 5. No Deficiency/Data Error/Reviewer Error 6. No Longer on Waiver 			
			<p>Please do not select Deficiency Remains. All deficiencies must be remediated.</p>	

Service Plan-Utilization Worksheet: Your Task

To review each Utilization deficiency for each client, click in the yellow highlighted cell (drop-down box appears), determine/select appropriate code based on current remediation status.

Plan of Correction Codes:

- 1 – Corrected at CSR
 - *Use of this code indicates that the issue existed in previous service plan, however, HCBS services have been adjusted to reflect the client's assessed and actual needs following a CSR.*
- 2 – Corrected NOT at CSR
 - *Use of this code indicates that the issue existed in previous service plan, however, HCBS services have been adjusted to reflect the client's assessed and actual needs following a SP revision or an unscheduled review.*
- 3 – Deficiency Remains
 - ***Do not use this code. All deficiencies must be remediated.***
- 4 – No deficiency/Data Error/Utilization Appropriate
 - *Use of this code indicates a potential data entry error or is appropriate if the client experiences a lapse of services due to situations including hospitalization, family caregiving, lag time before initial services, etc.; but SP services accurately reflect the client's assessed needs outside of these circumstances.*
 - ***Over-utilization is never appropriate and needs to be marked by one of the other codes***
- 5 – No Longer on Waiver
 - *Use of this code indicates the client's services on the waiver have ended. State staff utilized this code during preliminary analysis; CMAs may use this code if they have more up-to-date information about a client ending services.*
- 6 – Provider Capacity
 - *Use of this code indicates the client is not able to access services in the amount or frequency designated in the Service Plan due to provider limitations.*
- 7 – Utilization Appropriate (HCPF USE ONLY)
 - ***This code is only to be used by HCPF staff only. State staff utilized this code during preliminary analysis; CMAs may indicate appropriate utilization by using code 4 (above) and including an explanation.***

Example: Service Plan to Utilization Deficiency Remediation

What You Will Receive

What You Need To Return

CLIENT ID	
WAIVER	
SERVICE NAME	Personal Care
TOTAL PAID UNITS	850
TOTAL UNITS FROM SERVICE PLAN	1165
RATIO OF PAID UNITS TO PLANNED UNITS	73%
QIS CMA	XXXX
CM FIRST NAME	XXXX
CM LAST NAME	XXXX
SP EVENT NUMBER	1
SP START DATE	7/1/2014
SP END DATE	6/30/2015
REMEDIATION CODE	<div style="border: 1px solid black; padding: 5px;"> <ul style="list-style-type: none"> 1. Already Corrected at CSR 2. Corrected Not at CSR 3. Deficiency 4. No Deficiency/Data Error/Utilization appropriate 5. No longer on waiver 6. Provider Capacity 7. Utilization Appropriate (State Use Only) </div>

CLIENT ID	
WAIVER	
SERVICE NAME	Personal Care
TOTAL PAID UNITS	850
TOTAL UNITS FROM SERVICE PLAN	1165
RATIO OF PAID UNITS TO PLANNED UNITS	73%
QIS CMA	XXXX
CM FIRST NAME	XXXX
CM LAST NAME	XXXX
SP EVENT NUMBER	1
SP START DATE	7/1/2014
SP END DATE	6/30/2015
REMEDIATION CODE	4. No Deficiency/Data error/Utilization appropriate

1. Click in this cell to enable drop down box below. Select appropriate code.

4. Indicates data entry error or underutilization due to temporary lapse in services.
Note: Over utilization is never appropriate.

Example: Utilization Deficiency Remediation

What You Will Receive

What You Need To Return

CLIENT ID	
SERVICE NAME	Electronic Monitoring
TOTAL PAID UNITS	1
TOTAL UNITS FROM SERVICE PLAN	6
RATIO OF PAID UNITS TO PLANNED UNITS	17%
QIS CMA	XXXX
CM FIRST NAME	XXXX
CM LAST NAME	XXXX
SP EVENT NUMBER	1
SP START DATE	7/1/2014
SP END DATE	6/30/2015
REMEDIATION CODE	<div style="border: 1px solid black; padding: 5px;"> <p>If deficiency still needs to be corrected by your agency select:</p> <p>2. Corrected Not at CSR.</p> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <p>1. Already Corrected at CSR 2. Corrected Not at CSR 3. Deficiency 4. No Deficiency/Data Error/Utilization appropriate 5. No longer on waiver 6. Provider Capacity 7. Utilization Appropriate (State Use Only)</p> </div>

CLIENT ID	
SERVICE NAME	Electronic Monitoring
TOTAL PAID UNITS	1
TOTAL UNITS FROM SERVICE PLAN	6
RATIO OF PAID UNITS TO PLANNED UNITS	17%
QIS CMA	XXXX
CM FIRST NAME	XXXX
CM LAST NAME	XXXX
SP EVENT NUMBER	1
SP START DATE	7/1/2014
SP END DATE	6/30/2015
REMEDIATION CODE	<div style="border: 1px solid black; padding: 5px;"> <p>2. Corrected Not at CSR</p> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <p>2. Indicates issue existed in previous Service Plan, but has been corrected with a Service Plan revision or unscheduled review.</p> </div>

Please do not select
Deficiency Remains.
**All deficiencies must
be remediated.**

Submission Instructions

Send an encrypted email with the following to: Elaine.Osbment@state.co.us

- Completed Remediation Workbook (Excel spreadsheets), and
- Completed Plan of Action response to the Trend Report

All completed materials must be received by March 23, 2016.

Find additional resources and QIS Remediation Training Webinar recording online at:

www.colorado.gov/hcpf/long-term-services-and-supports-training under the QIS heading.