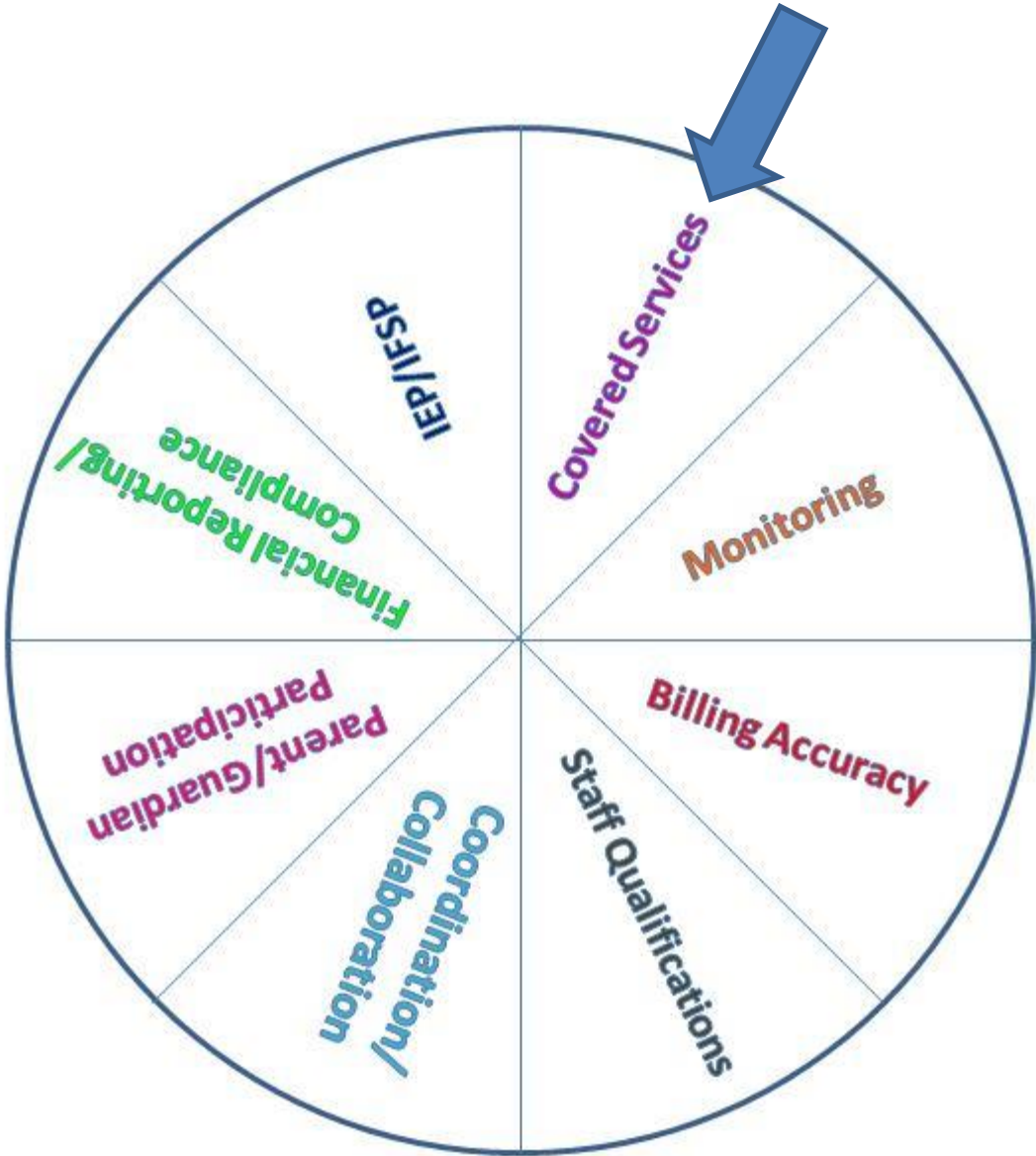# QUALITY ASSURANCE

Presented by Oakland Schools

Quality Assurance Standards required by MDHHS

1) Covered services are medically necessary, as determined and documented through appropriate and objective testing, evaluation and diagnosis.

2) The IEP/IFSP treatment plan identifies which covered services are to be provided and the service frequency, duration, goals and objectives.

3) A monitoring program exists to ensure that services are appropriate, effective and delivered in a cost effective manner consistent with the reduction of physical or mental disabilities and assisting the student to benefit from special education.

4) Billings are reviewed for accuracy.

5) Staff qualifications meet current license, certification and program requirements.

6) Established coordination and collaboration exists to develop plans of care with other providers, including those from local Public Health and DHS, Early and Periodic Screening, Diagnosis and Treatment (EPSDT) providers, Community Mental Health Services Programs (CMHSPs), the student's physician and managed care providers, and from the Medicaid Health Plans (MHPs), Hearing Centers, and Outpatient Hospitals.

7) Parent/guardian and student participation exists, outside of the IEP/IFSP team process, in evaluating the impact of the SBS program on the educational setting, service quality and outcomes."

1) Covered services are medically necessary as determined and documented through appropriate and objective testing, evaluation and diagnosis.

Oakland Schools Covered Services

- Services are rendered in accordance with each student's IEP/IFSP by medical professionals in the school setting.
  - Evaluations are conducted by the Multidisciplinary Evaluation Team (MET)
  - Individualized Education Program (IEP) meeting is scheduled
  - IEP team reviews MET report, as well as other information, and decides whether or not the child is eligible for Special Education services, including medically-related services.
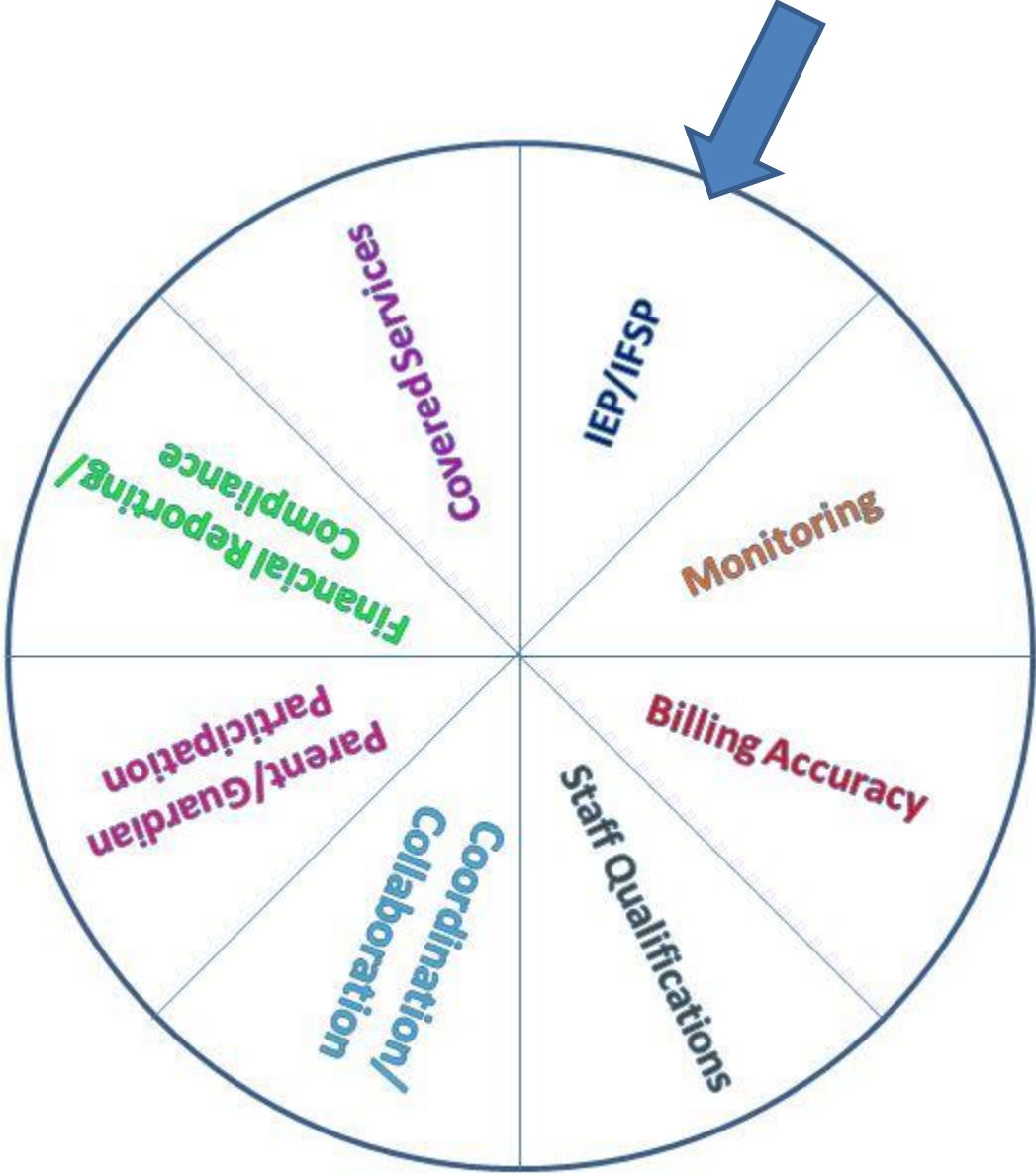
2) The IEP/IFSP treatment plan identifies which covered services are to be provided and the service frequency, duration, goals and objectives.
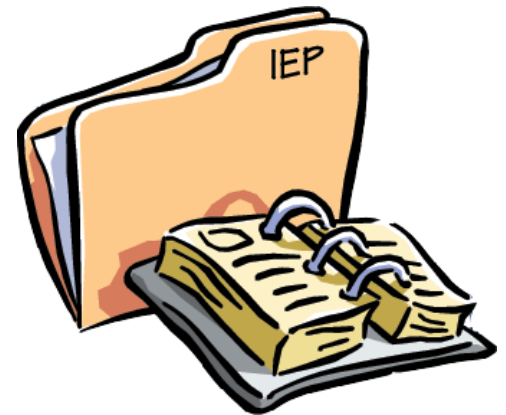
Oakland Schools IEP/IFSP

- District staff, Designated Case Managers and direct service staff, are responsible for monitoring the appropriateness and effectiveness of services provided according to the IEP/IFSP treatment plan.
  - This information is verified on a monthly basis as part of the review for speech referrals, prescriptions for OT and O&M and throughout the year as part of the compliance monitoring process and when researching billing issues.
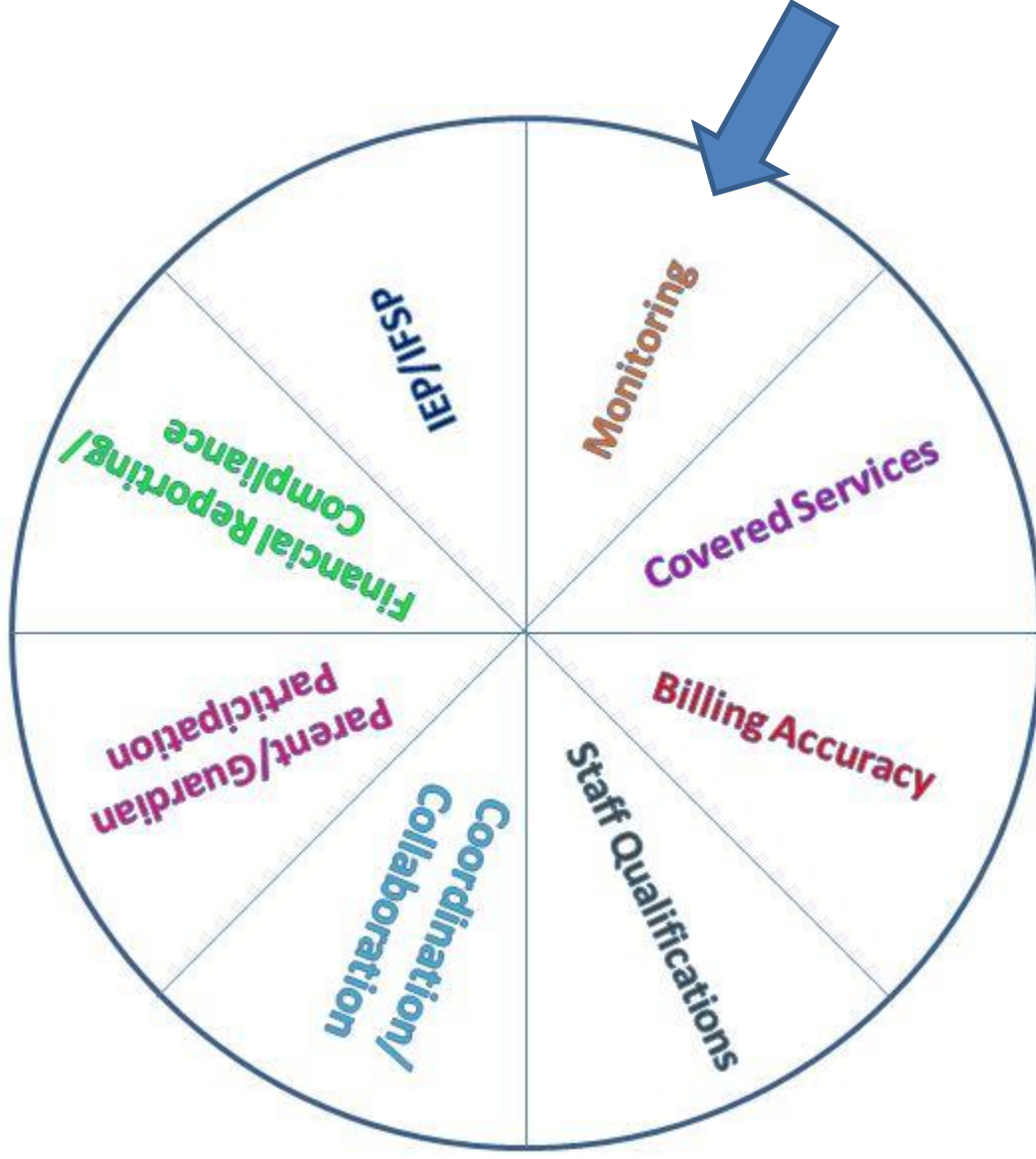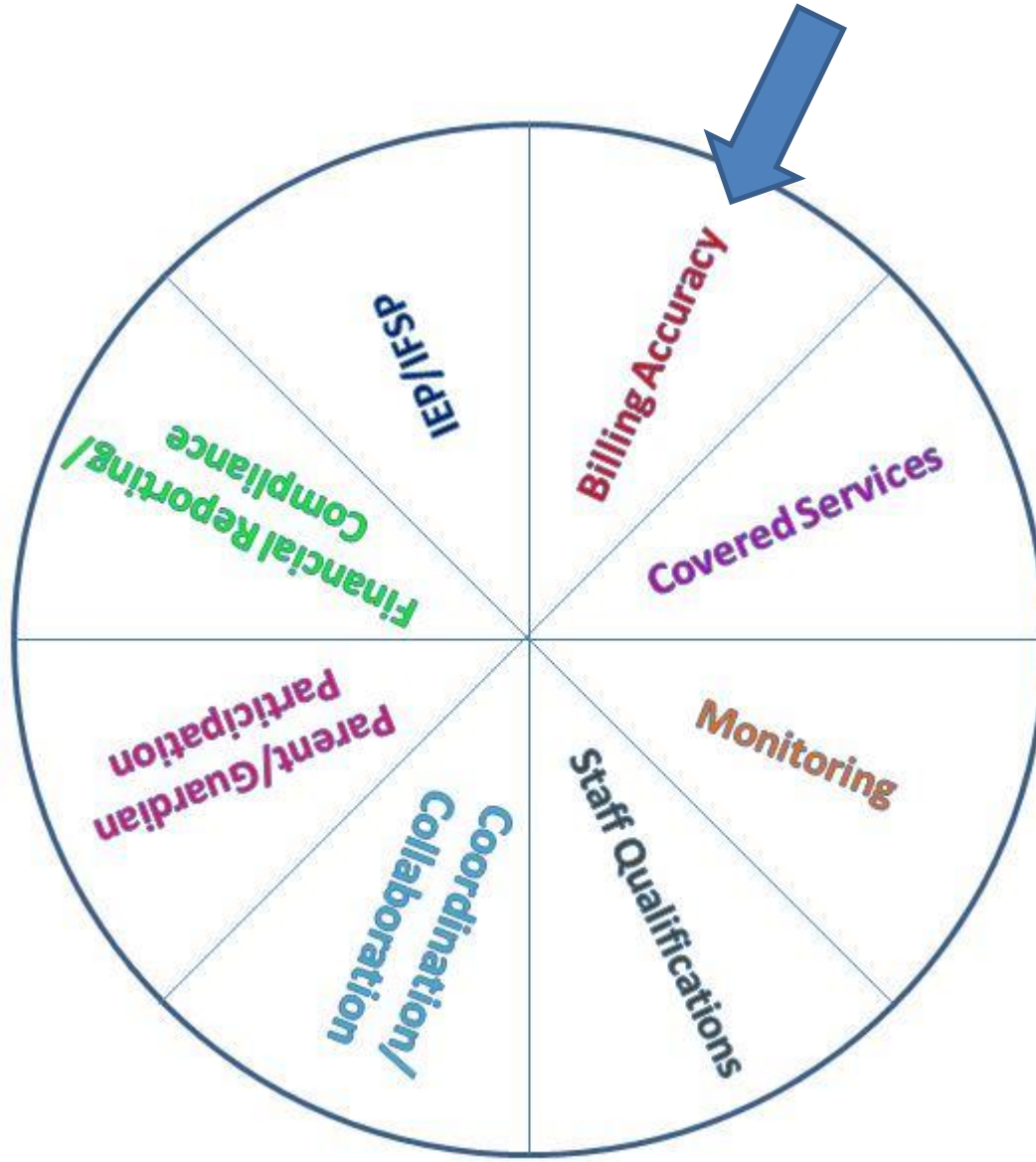
3) A monitoring program exists to ensure that services are appropriate, effective and delivered in a cost effective manner consistent with the reduction of physical or mental disabilities and assisting the student to benefit from Special Education.

Required to be reviewed by Medicaid Policy

- The students' original Multidisciplinary Team Report, the most current Multidisciplinary Team Report and the corresponding Individualized Education Report (IEP) or Individualized Family Services Plan (IFSP) identifying which covered services are to be provided, the service frequency, duration, measurable goals and objectives. The IEP/IFSP is signed and dated with the credentials of participants.

- Evaluations, testing and diagnosis for medical necessity of covered services.

- Current prescriptions/referrals for occupational and physical therapy, orientation and mobility, speech, physician orders for nursing services and current personal care authorizations.

- Service Provider/Clinician notes including recent progress notes that are in addition to the documentation submitted on the electronic claim report.

- The license and/or certification for providers who provided services for the student selected.

- Annual parental consent

- Attendance reports for the student selected and for staff that provided the service for the audit period.

- Transportation Log

Oakland Schools Monitoring Process

- We conduct a <u>monthly</u> quality review process to review all documentation submitted for billing from each district prior to submitting claims to MDHHS.

- District Direct Services staff and Case Managers are responsible for monitoring the appropriateness and effectiveness of services provided according to the IEP/IFSP treatment plan.

- OS Medicaid Department monitors the status of the random moment time studies on a daily basis to ensure the responses are submitted to PCG in a timely manner. We emphasize to staff during training sessions and in our monthly newsletters to complete the RMTS within 48 hours.

- An annual QA Compliance Monitoring process is conducted by the OS Medicaid Department.

- IEP/IFSP
- Billing Accuracy
- Covered Services
- Monitoring
- Staff Qualifications
- Coordination/Collaboration
- Parent/Guardian Participation
- Financial Reporting/Compliance

4) Billings are reviewed for accuracy.

Oakland Schools Quality Review Process

- Each district is reviewed individually
  - Staff members with services in reported are compared to the Staff Pool List to verify they are able to bill services
  - All entries are reviewed to confirm the code matches the daily and monthly progress notes, the correct modifier was used and case management was billed the last school date of the month and contains dates activities were provided on behalf of the student
  - If services pass, they will be pulled and sent to the State
  - If the services are rejected, they are noted and the staff members are notified via secure e-mail of the error and how it can be corrected.
  - Open and Missing reports are run on a monthly basis to follow up on incomplete/rejected services and/or Medicaid Eligible students with missing billings.

Oakland Schools Quality Review Process Cont'd

– Medicaid Eligibility checked the 1ˢᵗ of every month using MPHI

– Obtain copies of IEP's to review and obtain a speech referral or O&M prescription from contracted physician

– Obtain copies of OT and/or PT prescription OR obtain copies of IEP's to review and obtain a prescription from contracted physician

– Obtain copies of physicians orders for Nursing services

Oakland Schools Pre-Billing Filters

- Prebilling Filters – checked by billing system before file is sent.
  - Student has signed Parental Consent
  - Student under the age of 21
  - Speech Referral, OT Script, PT Script or Physicians Order for Nursing on file
 - Transported box for Special Transportation marked per IEP
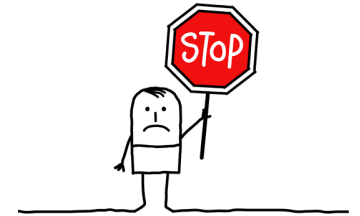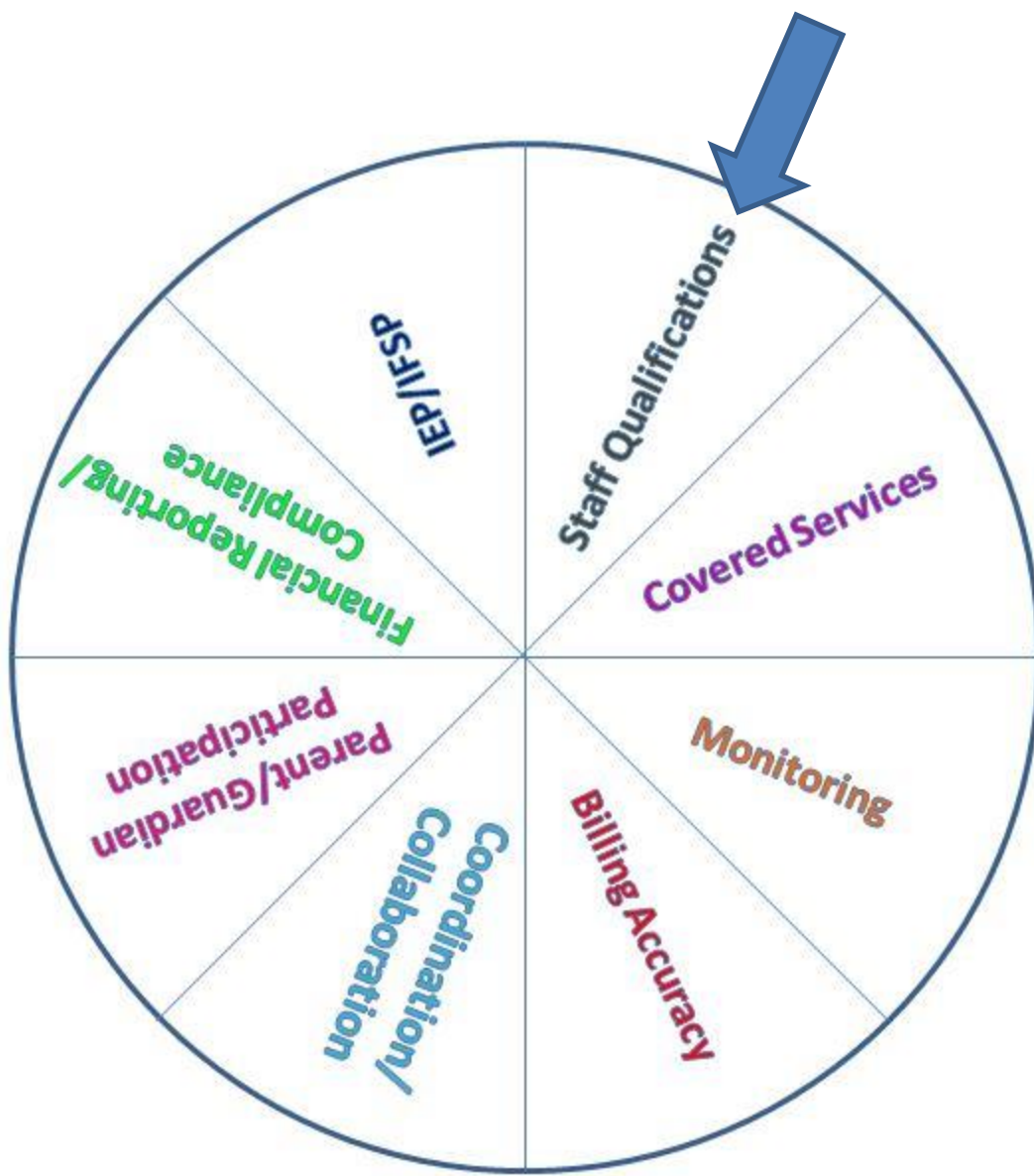
5) Staff qualifications meet current license, certification and program requirements

Oakland Schools License/Certification Verification

- Reviewed and updated quarterly using LARA system and staff pool list in PCG's site

- An Excel spreadsheet is maintained in the Medicaid Billing office including:
  - District
  - Staff Name
  - Job Category
  - Full or Limited License
  - Certification Number
  - Expiration Date
  - Verify Certification Type
  - Name of Staff Member Supervising (if limited)
 - Notes Field (name change, substitutes, moved to AOP, etc.)
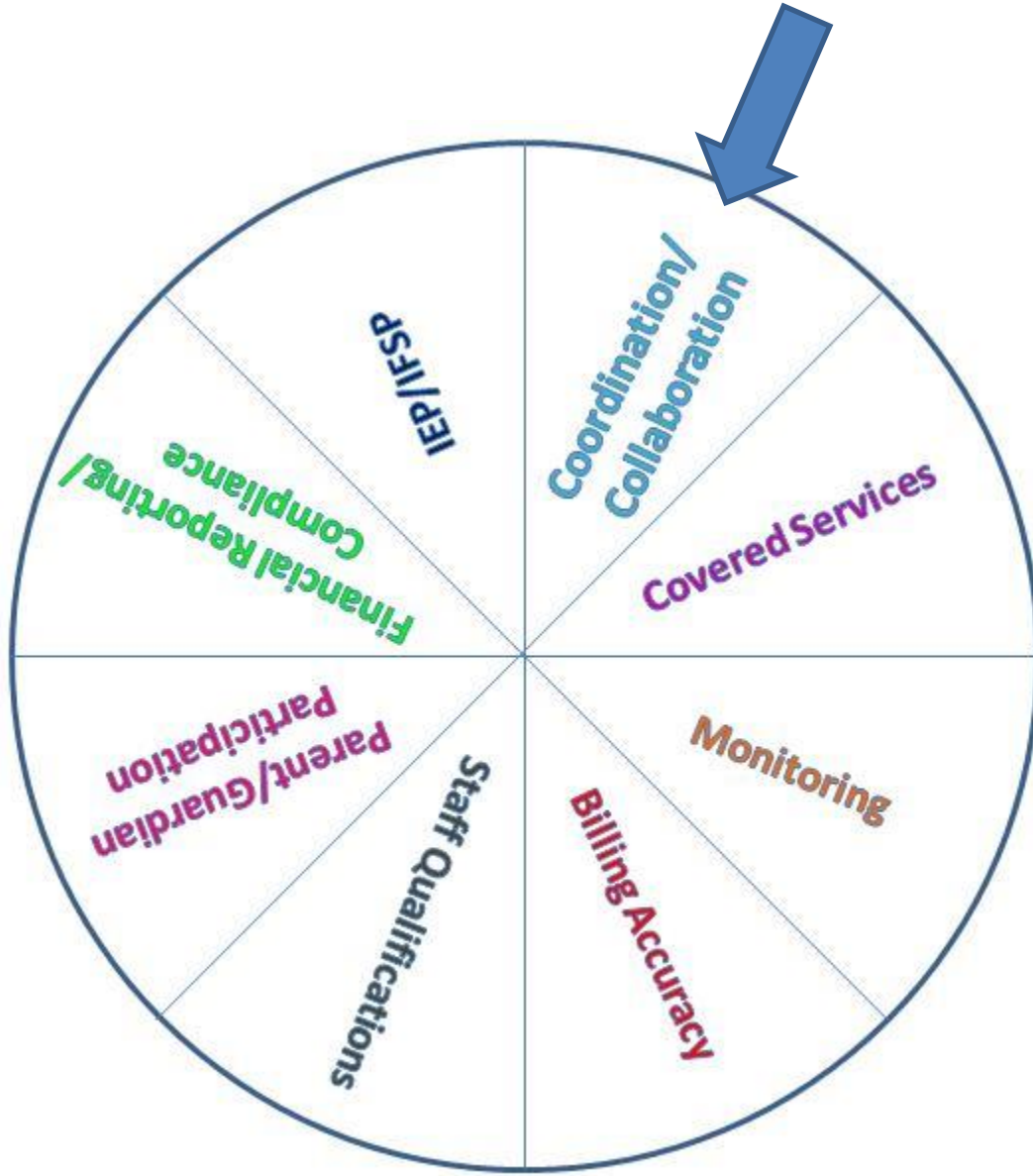
6) Established coordination and collaboration exists to develop plans of care with all other providers, (i.e. Public Health Department of Human Services (DHS), Community Mental Health Services Programs (CMHSP), Medicaid Health Plans (MHP), Hearing Centers and Outpatient Hospitals
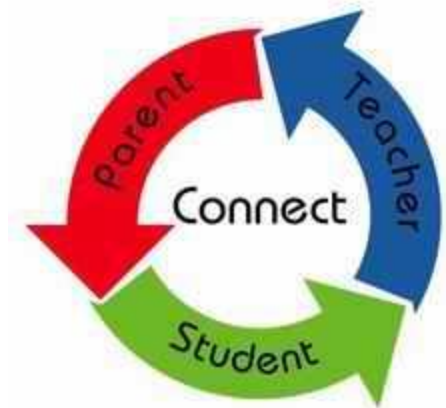
Oakland Schools Collaboration/Coordination

- The districts are responsible for the coordination of student services with outside agencies.
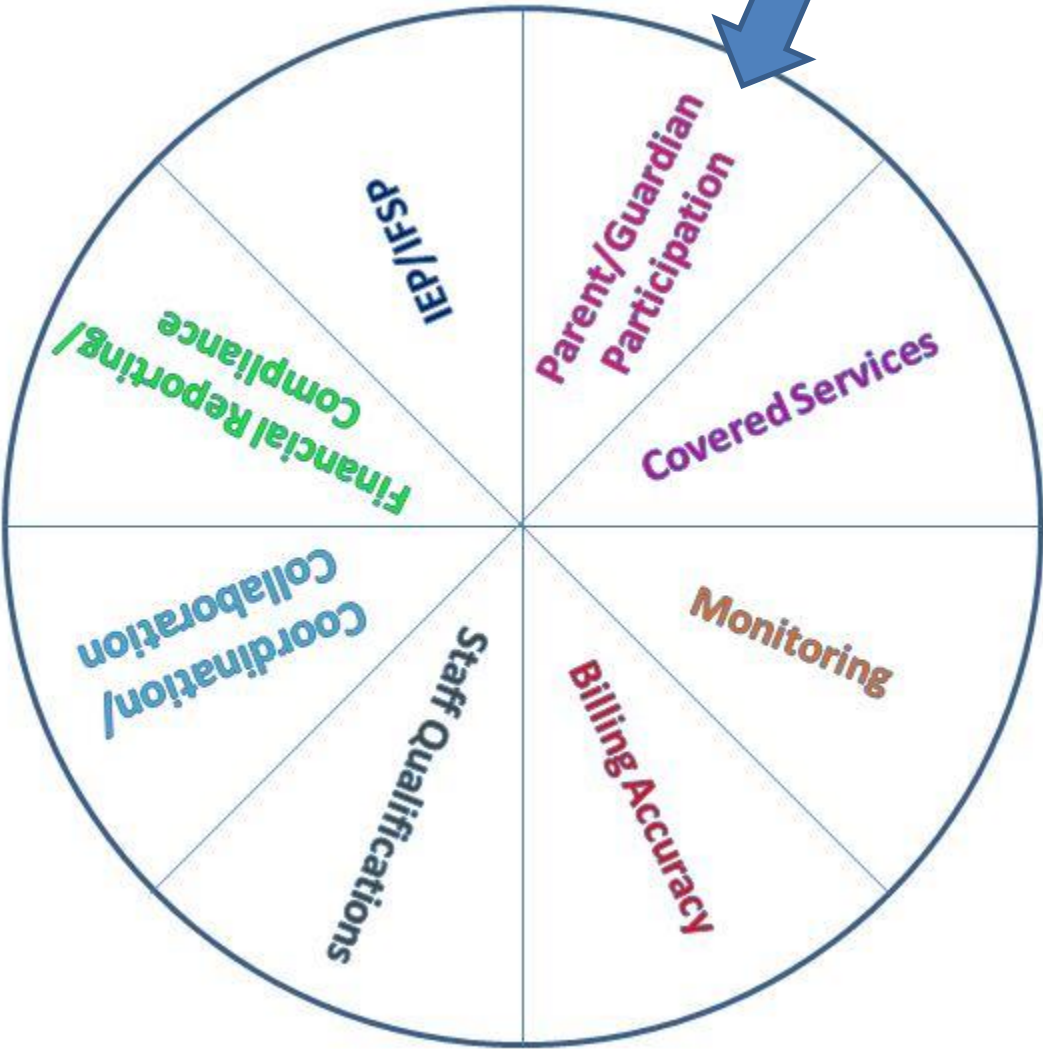
7) Parent/guardian and beneficiary participation exists outside of the IEP/IFSP team process in evaluating the impact of the SBS Program on the educational setting, service quality and outcomes.

Oakland Schools Parent/Guardian Participation

- The districts provide parents with an annual letter explaining the SBS program.

- Progress Reports sent each card-marking
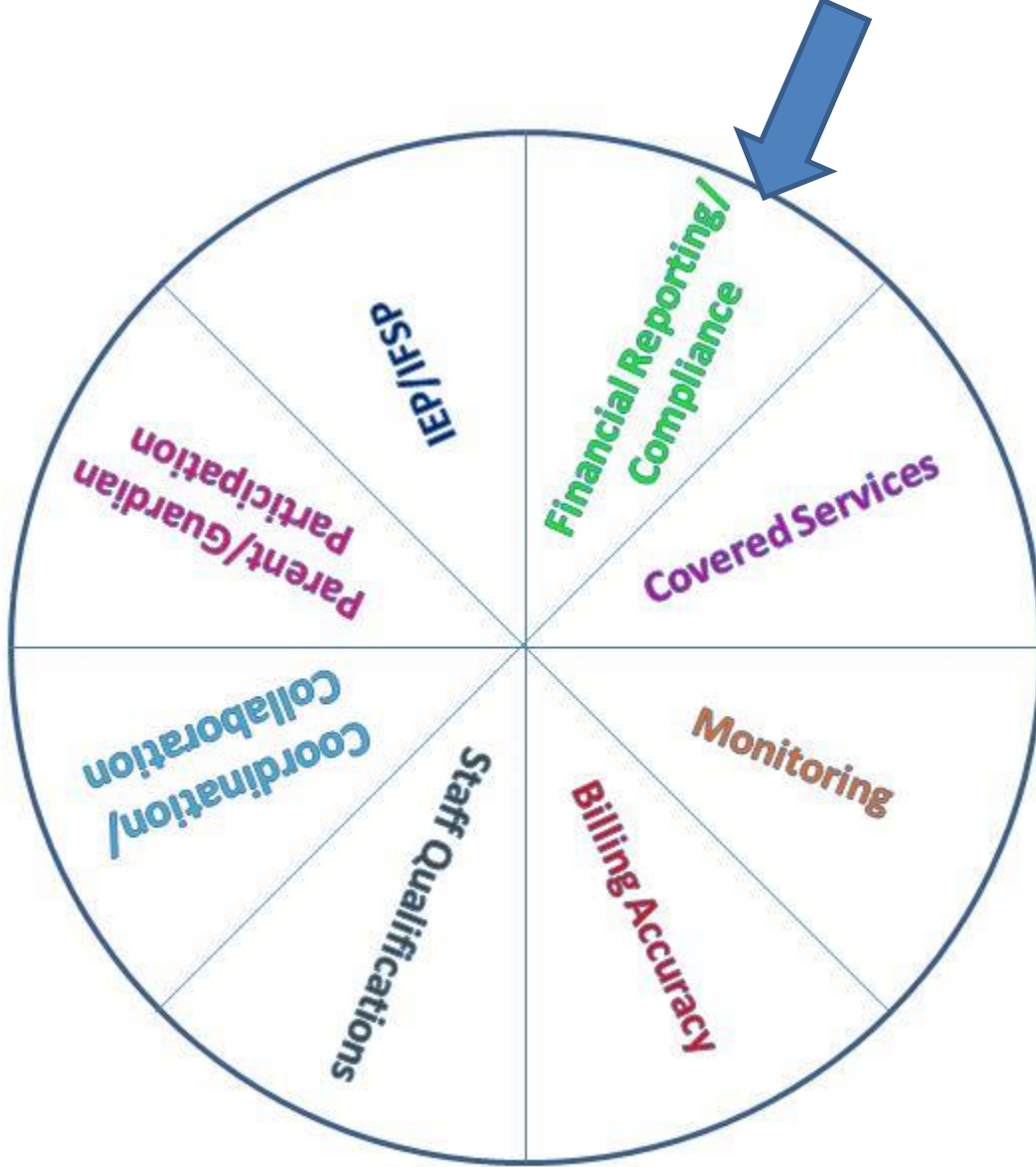
Financial Reporting and Compliance

- "The financial data reported (salaries, benefits, supplies, purchased services, and other expenditures) must be based on actual detailed expenditures from local district's payroll and financial systems. Payroll and financial system data must be applied using generally accepted governmental accounting standards and principles or applicable administrative rules. The expenditures accumulated must correlate to the claiming period."

OS Medicaid Department Plan

- Staff Pool Lists – Updated quarterly by each local district.
- OS Medicaid Department
  - Verify staff on quarterly financials match staff pools lists.
  - Verify district Indirect Cost Rates
  - Verify by random sample that staff listed are reporting services
  - Verify licensure
  - Cost Certification: On a quarterly basis, OS Medicaid Department will request each local district financial staff review the accuracy of the total costs and indirect costs rate reported by PCG approximately 2 weeks before quarter claim is submitted to MDHHS. We require they sign our Quarterly Certification Form to confirm the figures are correct or they will note corrections that we will report to PCG.

OS Plan Cont'd

- MAER – Local districts prepare the Medicaid Annual Expenditure Report and submit via e-mail to OS Billing Department. We along with OS Finance Department will compile and review completed MAER's for reasonableness.
  - Verify staff on quarterly financial match SPL
  - Verify Indirect Cost Rates
  - Verify reasonableness of staff salaries/benefits
    - Compared to SE-4096 reports
  - Verify transportation data
    - Compared to SE-4096 reports
  - Cost Certification OS Medicaid Department compiles and reviews district data for MAER. OS Finance Director certifies Total Computable Public Expenditure form and submits certification to MDHHS.