



MENTAL RETARDATION BULLETIN

COMMONWEALTH OF PENNSYLVANIA-DEPARTMENT OF PUBLIC WELFARE

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April 5, 2006

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SUBJECT:

Provider Qualification Pilot Program

BY:

A handwritten signature in black ink, appearing to read "Kevin T. Casey".

Kevin T. Casey
Deputy Secretary for Mental Retardation

SCOPE:

County Mental Health/Mental Retardation Administrators
Supports Coordination Entities
Administrative Entities
Community Home Directors
Family Living Directors
Adult Training Facility Directors
Vocational Facility Directors

PURPOSE:

The purpose of this bulletin is to explain how agencies and professionals providing licensed and unlicensed eligible Medicaid Mental Retardation Waiver services can volunteer to become participants in the Office of Mental Retardation's (OMR) pilot program to evaluate the statewide provider qualification process for Consolidated and Person/Family Directed Support (P/FDS) Waiver service providers.

BACKGROUND:

Historically, counties have been responsible for the qualification of Waiver providers using the process and standards in the approved Waivers. In March 2005, in response to the request for a renewal of the Consolidated Medicaid Waiver, OMR received correspondence from the Centers for Medicare and Medicaid Services (CMS) asking for evidence that Waiver service providers are qualified statewide using criteria in the approved Waivers. CMS requires that Waiver service providers be qualified using consistent statewide standards, that people who receive Waiver services have the opportunity to obtain services from any willing and qualified provider, and that qualified providers have the opportunity to enroll as Waiver service providers.

To promote consistency among Consolidated and P/FDS Waiver service providers, OMR developed a set of qualification standards based on stakeholder workgroup recommendations. The workgroup recommended that in order to be qualified, all providers of licensed and unlicensed services should meet licensing and Waiver requirements, submit staff training and quality management plans to OMR, and show proof of financial viability to provide salary and services for 90 days.

DISCUSSION:

The implementation of the Provider Qualification Pilot Program is expected to begin on June 1, 2006. Effective July 1, 2007, the process will become mandatory for Consolidated and P/FDS Waiver service providers utilizing a phase-in plan that will be developed based upon the pilot experience.

Providers interested in volunteering for the pilot program will submit Attachment # 2 – *OMR Provider Qualification Pilot Program Application* by May 15, 2006. OMR anticipates completing the selection of pilot providers by May 30, 2006. In order to obtain a diverse sample of providers for the pilot program, OMR will manage the selection of volunteers based upon a variety of provider characteristics, such as:

- Length of time as a provider of Waiver services
- Status as profit or not-for-profit agency
- Agencies providing licensed and/or unlicensed services (includes Agency with Choice Intermediary Service Organizations (ISOs))
- Individual professionals providing licensed services
- Family members who are also providers
- Geographical area served (includes providers outside of Pennsylvania)
- Number of people served through Waiver funding
- Funding amount received from Pennsylvania MR system for Waiver services
- Types of services offered

Providers in the pilot program will be offered technical assistance. Training materials will be available to assist providers in completing the application.

PROCESS TO QUALIFY:

Application – Providers interested in volunteering for the pilot program will submit Attachment #2 – *OMR Provider Qualification Pilot Program Application*. Providers selected to participate in the pilot program will later submit an electronic application via the Home and Community Services Information System (HCSIS).

Submission of Documents - Supporting documentation will be submitted to OMR via regular mail or e-mail during the pilot process. The processing status of the application will be stored in HCSIS. See Attachment #1 – *Provider Qualification Pilot Program Supporting Documents*.

Standardized Review Process - The review process will be a standardized consistent method of examining the application and submitted documents. OMR will use this process to determine provider qualification based upon the standards outlined in this bulletin. After the application and supporting documents are reviewed, the provider will be notified of the result of the review process and/or offered technical assistance.

QUALIFICATIONS:

The following criteria will be the primary method of gathering information for qualification determination in HCSIS. These questions will be grouped into the following six areas:

Service-Related Training Criteria - identify the knowledge and skills that provider personnel must possess to provide quality services. Providers must produce an annual training plan that is specific to the services provided and the individuals served, includes core competencies and health and safety criteria, promotes the principles of *Everyday Lives*, and identifies staff to be trained and the topics and frequency of training.

Quality Management Criteria - provide a Quality Management (QM) framework that includes the mission/vision/values of the organization, the scope of services, a statement of accountability and responsibility for QM within the organization, and the methodology for QM. Providers must submit an annual Quality Improvement Plan that identifies quality goals/outcomes, and their associated objectives and indicators. These outcomes should align with OMR's QM priorities. Providers may also identify additional outcomes that they determine are important for their agencies.

Operations Data Management - establish the mechanisms providers should have in place to support continued fiscal stability. Providers must submit specific financial documentation based upon their business status that demonstrates their viability to provide salary and services for 90 days. Please note that this is a test of the liquid assets which includes lines of credit, cash, short-term investments and other liquid assets. See Attachment #1 - *Provider Qualification Pilot Program Supporting Documents* for the list of required documents.

Affidavits and Assurance Criteria - allow providers to agree to standard conditions of doing business as a provider in Pennsylvania.

Staff and Agency Qualification and Certification Criteria - indicate the minimum standards that must be met by people to perform a given service.

Policies and Procedures Criteria - establish the baseline policies and procedures that providers must have in place to provide services in the Commonwealth.

CONCLUSION:

The Provider Qualification Pilot Program will afford participating providers with opportunities to offer input and feedback, gain status as one of the first qualified providers under the new process, and be grandfathered into the statewide program if no additional criteria are added to the mandatory process. The pilot program will provide OMR with an opportunity to test and evaluate the recently developed statewide provider qualification process and standards with a diverse group of providers as a step in developing a consistent method of qualifying providers statewide. To assist in the evaluation, OMR will convene an external workgroup representative of all interested stakeholders. The end result and ultimate benefit for individuals and families is that the new provider qualification process will enable them to make more informed choices based upon statewide standards for qualified Waiver providers.

Until the provider qualification process becomes mandatory, the County MH/MR Programs will use the existing established process and standards in the approved Consolidated and P/FDS Waivers to qualify all providers, including those in the pilot program.

Attachments:

Attachment #1 - Provider Qualification Pilot Program Supporting Documents

Attachment #2 - OMR Provider Qualification Pilot Program Application