

MONITORING

For Case Managers of HCBS Waivers

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Our Mission

Improving health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources



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TOPICS

- Overview of Monitoring
- Case Management Regulations
- Waiver Regulations
- Monitoring Scenarios
- Monitoring Log Notes



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MONITOR:

To observe and check the **progress** or **quality** of (something) over a period of time; keep under **systematic review**



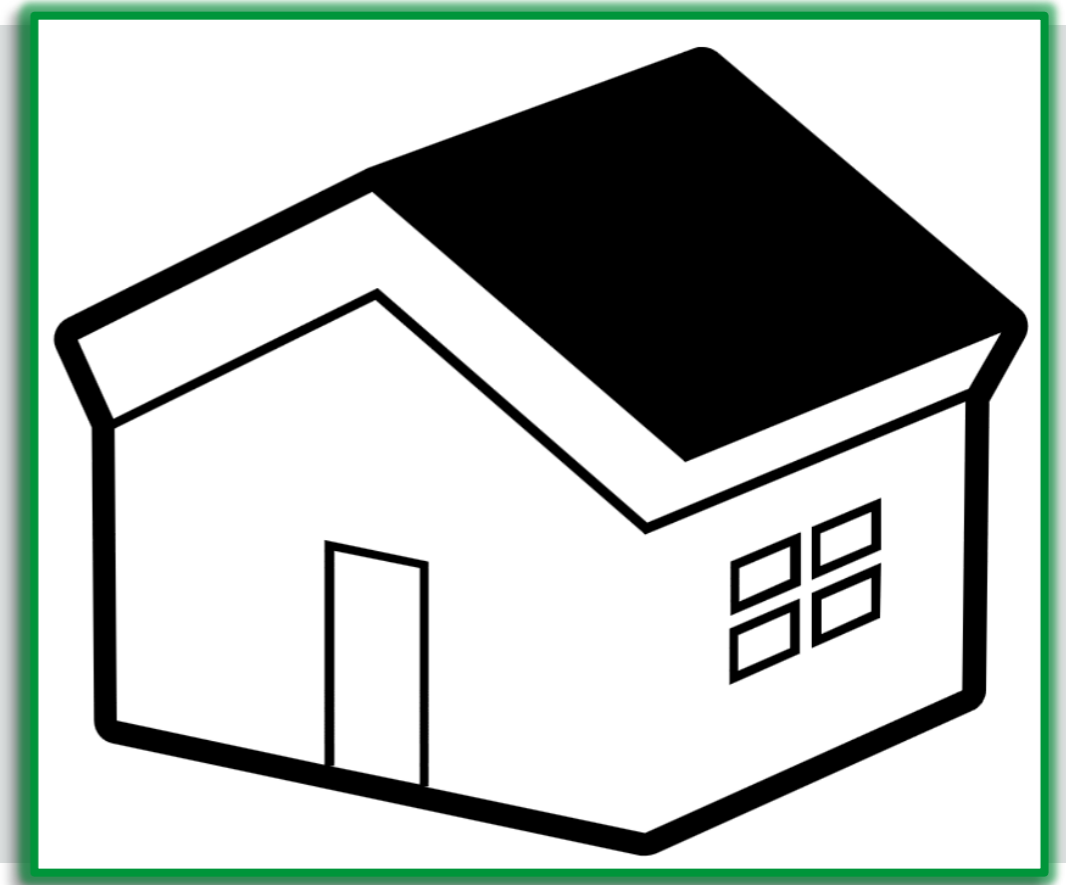
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Service Plan is framework for case management



Monitoring
builds upon
framework's
structure



MONITORING TIPS

- Conversation about services and satisfaction with services
- Review goals from SP and progress toward goals
- Review utilization of authorized services
- Examples of documentation that assist with monitoring:
 - Critical Incident Reports (CIR)
 - Incident Reports (IR)
 - Provider Progress Notes
 - Personal Emergency Response System (PERS) Reports
 - Medical Records / Hospital Admissions



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WHY MONITOR?

- Individual enrolled in HCBS-EBD
- Daughter was Relative Personal Care Provider
- Case manager told by daughter that they were moving
- Case manager did not get new address, unable to reach daughter
- Sent letter to last address to try to make contact
- Case manager received call from former landlord due to letter
- Landlord concerns with condition of home
- Case manager contacted provider agency for new address
- Prompted face to face monitoring
- Individual's residence and provider changed to ensure health and safety



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WHY MONITOR?

- Individual enrolled in HCBS-CMHS
- Continued Stay Review (CSR) held at her mobile home
- Monitoring conducted in person at CSR
- Heating home with pilot light
- Used oxygen and smoked
- Case manager identified supports to address health and safety risks



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WHY MONITOR?

- Individual enrolled in HCBS-EBD
- Only HCBS benefit was Personal Emergency Response System (PERS)
- Case manager monitored PERS report
- Notified PERS not connected
- Completed monitoring with individual in the home
- PERS unplugged
- Reconnected and tested PERS
- PERS used the next day for assistance



SINGLE ENTRY POINT (SEP) CASE MANAGEMENT



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SINGLE ENTRY POINT MONITORING REQUIREMENTS

CASE MANAGEMENT

- Assessment of individuals receiving long-term services and supports
- Development and implementation of service plans
- Referral and related activities
- Coordination and monitoring of long-term service delivery
- Evaluation of service effectiveness
- Periodic reassessment of individuals' needs

10 CCR 2505-10 8.390.1.C.



SINGLE ENTRY POINT MONITORING REQUIREMENTS

FUNCTIONS OF SINGLE ENTRY POINT CASE MANAGER

- Responsible for intake/screening/referral
- Assessment/reassessment
- Development of service plans
- On-going case management
- Monitoring of individuals' health and welfare
- Documentation of contacts and case management activities
- Resource development
- Case closure

10 CCR 2505-10 8.393.1.M.



SINGLE ENTRY POINT CASE MANAGER FUNCTIONS

- Contact individuals at least once each quarterly period
- Review contact with the individual at least every six (6) months
- Face-to-face annual completion of ULTC-100.2

UNLESS more frequent contacts warranted by individual's condition/rules of the program

10 CCR 2505-10 8.393.1.M.



SINGLE ENTRY POINT CASE MANAGER FUNCTIONS (cont'd)

Case managers monitor delivery of services/supports identified within Service Plan / Prior Authorization Request (PAR) including:

- Quality of services and supports provided
- Health and safety of the individual
- Utilization of services with respect to the Service Plan / PAR

10 CCR 2505-10 8.393.1.M.



SINGLE ENTRY POINT ON-GOING CASE MANAGEMENT

Ensure individuals receive authorized services in accordance with Service Plan and monitor service quality

Assure quality of services and supports and individual's health and welfare by monitoring service providers to ensure appropriateness, timeliness, and amount of services provided and to promote individual safety, satisfaction, and quality of life.

At least annually, either at LOC assessment or at six-month face-to-face, observe individual's residence with the individual present to establish it is a safe environment and adjust the ULTC 100.2 and Service Plan accordingly

10 CCR 2505-10 8.393.2.G



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SINGLE ENTRY POINT ON-GOING CASE MANAGEMENT

On-going case management includes but is not limited to:

- Review of individual's service plan and services
- Contact individual to address safety, quality of life and service satisfaction
- Contact service providers to manage services for individual
- Conflict resolution and/or crisis intervention
- Informal assessment of changes in individual functioning
- Informal assessment of service effectiveness, appropriateness and cost-effectiveness
- Notification of appropriate enforcement agencies
- Referral to community resources

10 CCR 2505-10 8.393.2.G



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SINGLE ENTRY POINT ON-GOING CASE MANAGEMENT

- Immediately report overpayment, incorrect payment, or mis-utilization of any public assistance benefit, and cooperate with recovery process
- Contact individual at least quarterly, or more frequently, according to individual's needs or program requirements
- Review ULTC 100.2 and Service Plan with individual every six months
- Complete ULTC 100.2 when individual's condition changes significantly or changes programs
- Contact service providers and individual to monitor service delivery as required by individual's needs or program requirements

10 CCR 2505-10 8.393.2.G



COMMUNITY CENTERED BOARD (CCB) CASE MANAGEMENT



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COMMUNITY CENTERED BOARD MONITORING REQUIREMENTS

CASE MANAGEMENT SERVICES: Each community centered board shall establish agency procedures sufficient to execute case management services according to the provisions of these rules and regulations. Such procedures shall include, but are not limited to:

Monitoring

10 CCR 2505-10 8.607.1.C.5

SERVICE AND SUPPORT COORDINATION: Individualized Plan is reviewed periodically, as needed, to determine the results achieved, if the needs of the person receiving services are accurately reflected in the Individualized Plan, whether the services and supports identified in the Individualized Plan are appropriate to meet the person's needs and what actions are necessary for the plan to be achieved.

10 CCR 2505-10 8.607.3.B.4



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COMMUNITY CENTERED BOARD CASE MANAGEMENT SERVICES

MONITORING

Community centered boards responsible to monitor services and supports

Frequency and level of monitoring shall meet guidelines of program in which individual is enrolled

At minimum, monitoring shall include:

- Delivery and quality of services and supports

- Health, safety and welfare of individual

- Satisfaction with services and choice in providers

- Promotion of self-determination, self-representation and self-advocacy

10 CCR 2505-10 8.607.6



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COMMUNITY CENTERED BOARD CASE MANAGEMENT SERVICES

MONITORING (cont'd)

Review of overall services and supports to determine:

- General satisfaction with services and supports

- Provider's practices regarding health, safety and welfare of individual

- Fiscal compliance related to implementation of Service Plan

- Nature and frequency of complaints regarding service provider

10 CCR 2505-10 8.607.6



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COMMUNITY CENTERED BOARD TARGETED CASE MANAGEMENT

TCM consists of four components:

1. Comprehensive assessment / periodic reassessment of individual needs
2. Development and periodic revision of specific care plan
3. Referral and related activities to help obtain needed services
4. Monitoring and follow-up activities

Targeted case management includes:

Monitoring and follow-up activities that are necessary to ensure service plan is implemented and adequately addresses individual's needs

10 CCR 2505-10 8.761



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COMMUNITY CENTERED BOARD TARGETED CASE MANAGEMENT

Monitoring and follow up actions are performed to address health, safety, and services in service plan

Monitoring activities ensure:

- Services are provided in accordance with service plan

- Services are adequate

- Necessary adjustments are made if the individual's needs have changed

Completed face to face with the individual in a place where services are delivered at least once per quarter for:

- HCBS-DD

- HCBS-SLS

- HCBS-CES

10 CCR 2505-10 8.761



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WAIVER REGULATIONS



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WAIVER REGULATIONS

HCBS-EBD Waiver:	10 CCR 2505-10 8.486
HCBS-DD Waiver:	10 CCR 2505-10 8.500
HCBS-SLS Waiver:	10 CCR 2505-10 8.500.90
HCBS-CES Waiver:	10 CCR 2505-10 8.503
HCBS-CLLI Waiver:	10 CCR 2505-10 8.504
CHCBS Waiver:	10 CCR 2505-10 8.506
HCBS-CMHS Waiver:	10 CCR 2505-10 8.509
HCBS-BI Waiver:	10 CCR 2505-10 8.515.00
HCBS-SCI Waiver:	10 CCR 2505-10 8.517



HCBS-EBD

Single entry point agencies shall comply with single entry point rules at 10 CCR 2505-10 section 8.390, et. seq., governing case management functions, and shall comply with all HCBS-specific requirements in the rest of this section on HCBS-EBD case management functions.

10 CCR 2505-10 8.486.10



HCBS-DD

HCBS-DD providers shall comply with:

Requests by the Case Management Agency to monitor service delivery through targeted case management activities

10 CCR 2505-10 8.500.9.A.8



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HCBS-SLS

HCBS-SLS providers shall comply with:

Requests by the case management agency to monitor service delivery through targeted case management activities

10 CCR 2505-10 8.500.98.B



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HCBS-CES

HCBS-CES waiver service providers shall comply with:
Requests by the case management agency to monitor service delivery through targeted case management activities

10 CCR 2505-10 8.503.90.B



HCBS-CLLI

Case Management means the assessment of an individual receiving long-term services and supports' needs, the development and implementation of a support plan for such individual, referral and related activities, the coordination and monitoring of long-term service delivery, the evaluation of service effectiveness and the periodic reassessment of such individual's needs

10 CCR 2505-10 8.504.1



CHILDREN'S HCBS

Case Management means the assessment of an individual receiving long-term services and supports' needs, the development and implementation of a support plan for such individual, referral and related activities, the coordination and monitoring of long-term service delivery, the evaluation of service effectiveness and the periodic reassessment of such individual's needs. Additional operations specifically defined for this waiver are described in Section 8.506.4.B

10 CCR 2505-10 8.506.3

On a monthly basis, evaluate the effectiveness of the Support Planning document by monitoring services provided to the child. This monitoring may include:

- i. Conducting child, parent(s) or guardian, and provider interviews
- ii. Reviewing cost data
- iii. Reviewing any written reports received

10 CCR 2505-10 8.506.4.B



HCBS-CMHS

The coordination, monitoring, and evaluation of services for HCBS-CMHS clients shall be in accordance with ON-GOING CASE MANAGEMENT in Section 8.393.24.

In addition, the case manager shall:

Contact each client quarterly, or more frequently, as determined by the client's assessed needs. Contact may be at the client's place of residence, by telephone, or other appropriate setting as determined by the client's needs.

Review the ULTC.100.2 and the Service Plan with the client every six (6) months on a face-to-face basis.

10 CCR 2505-10 8.509.32



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HCBS-BI

The requirements at Section 8.393 shall apply to the Case Management Agencies performing the case management functions of the HCBS-BI program

10 CCR 2505-10 8.515.9



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HCBS-SCI

The requirements at Section 8.486 shall apply to the Case Management Agencies performing the case management functions of the Home and Community-Based Services for Persons with Spinal Cord Injury (HCBS-SCI) waiver

10 CCR 2505-10 8.517.8



PARTICIPANT DIRECTED SERVICES

Consumer Directed Attendant Support Services (CDASS)

Case Manager shall:

1. Contact individual/AR once a month during the first three months
2. Contact individual quarterly, after the first three months
3. Contact individual/AR when a change in AR occurs and once a month for three months after change takes place
4. Review monthly FMS reports to monitor client spending patterns and service utilization

10 CCR 2505-10 8.510.14.I.



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PARTICIPANT DIRECTED SERVICES(cont'd)

In-Home Support Services (IHSS)

The Case Manager shall provide information and resources about IHSS to eligible clients, including a list of IHSS Agencies in their service area and an introduction to the benefits and characteristics of participant-directed programs

10 CCR 2502-10 8.552.7.A.



REVIEW



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SEP / CCB COMPARISON

SEP

Can be phone call

Place and time convenient to individual

SEP and CCB

Quarterly

With Individual

Health and Safety

Quality of Services and Supports

Utilization of Services

CCB

Face to Face

Where Services are delivered

Promote self-determination, self-representation and self-advocacy

SEP AND CCB COMPARISON (cont'd)

1. Conducted Quarterly
2. Directly with the individual
3. Health and Safety of Individual
4. Service and Support Quality
5. Service Utilization



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WHAT MONITORING IS NOT



WHAT MONITORING IS



MONITORING TOOLS

- Personal Emergency Response System (PERS) report
- Critical Incident Reports (CIR)
- Incident Report (IR)
- Service Provider Progress Notes
- Utilization of Authorized Services
- PMIP / Medical Records



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SCENARIOS



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SCENARIO #1

Mary, a case manager for an individual on the EBD Waiver, goes to an ACF to complete a CSR with an individual on her caseload.

While there, she sees another individual on her caseload participating in the ACF's morning discussion of current events. She doesn't have the opportunity to speak with the second individual but did see her actively participating with staff and peers.



SCENARIO #1 (cont'd)

Can Mary count the CSR completion as meeting the requirements for Monitoring?

Can Mary count her observation of the other individual discussing current events as meeting the requirements for Monitoring?

SCENARIO #2

Tom receives a Critical Incident Report (CIR) for an individual on his caseload who is enrolled in the CES Waiver. The CIR indicates that the child was admitted to the hospital after expressing thoughts of suicidal ideation. Tom calls the child's mother to follow up on the CIR and discusses with her the discharge goals she and the hospital staff have developed.



SCENARIO #2 (cont'd)

Can Tom count this phone call as meeting the Monitoring requirement for this child?



SCENARIO #3

Sally calls the home of an individual on her caseload who is enrolled in the CMHS waiver. The individual's brother answers and tells Sally that his sister is not home. He also tells Sally that his sister needs more Personal Care services. Sally explains she must speak directly with the individual about any possible revisions to her Service Plan and arranges to call back when his sister will be home.



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SCENARIO #3 (cont'd)

Can Sally document this call with the brother as a Monitoring activity?



SCENARIO #4

Jan is invited to a staff/participant picnic hosted by a Day Program that several adults on her caseload attend. At the picnic Jan sees the individuals on her caseload who are in attendance. Their conversations center around how hot the day is, plans for the rest of the summer, and how good the food is at the picnic. There is no opportunity for individual private conversations at the picnic as everyone is gathered in one area.



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SCENARIO #4 (cont'd)

Did these interactions meet the criteria for a Monitoring activity for those individuals on Jan's caseload?



SCENARIO #5

Pam receives a call from an individual on her caseload who is enrolled in the EBD Waiver. He tells Pam that, although he hadn't fallen in a long time, over the past week he's fallen three times. Pam and he discuss potential options to help him maintain his health and safety. One option chosen is a Service Plan revision adding a Personal Emergency Response System (PERS) to his waiver services. Pam and he also review the other services in his Service Plan, discuss utilization, and whether additional changes are needed. He confirms with Pam that the other services meet his needs and preferences and asks that no other changes be made.



SCENARIO #5 (cont'd)

Has Pam met the requirements of Monitoring for this individual?



SCENARIO #6

Jack is grocery shopping on his day off at his local grocery store. While there, he sees a woman on his caseload who is a Courtesy Clerk at the store. Jack observes her bag groceries and assist a customer with loading the groceries in her car. Jack's pleased to see that she is dressed appropriately for the weather as it is a cold day. Jack decides that, because she is busy and he is not actually working, he will not speak directly with her. However, he decides to call her Job Coach when he gets back in the office to share with him what he observed.



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SCENARIO #6 (cont'd)

Should Jack document this observation as a monitoring event when he gets back to the office?



LOG NOTES



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MONITORING LOG NOTES

Browser address bar: <https://hcltc.hcpf.state.co.us/bus/LognotesAdd.cfm?CalledMe=Add>

Client - Log Notes - chocolate p pudding - ***-**-2222

Main Menu

- Advisement Letter
- Assessment - 100.2
- Client Information
- Transition Assessment & Planning
- Risk Mitigation Plan
- Assessment - HCA
- Case Management
- Case Status
- Critical Incident Reports
- IADL
- Log Notes
 - Add
 - Edit
 - Delete
 - Print One
 - View/Print Range
 - Log Note Search

Log Notes - New

Date of Contact

Time of Contact

Person Contacted

Log Note Units

Type of Contact

Confidential?

Does this log note refer to a New Critical Incident?

Does this log note refer to an Existing Critical Incident?

If New/Existing Critical Incident is YES, Enter CIRS Number:

A log note should only be marked confidential if it could not be viewed by any other agency.

Narrative:

- Case/Family Conference
- Contact at place of employment
- Correspondence
- Email
- Face-to-Face
- FAX
- Financial Eligibility
- Home Visit
- Hospitalization
- IMT Communication
- Intra-Office Communication
- Monitoring Contact-Scheduled
- Monitoring Contact-Unscheduled
- Nursing Facility Placement
- PAR Denial
- Program notes
- Psychiatric Review
- Telephone
- Veterans Representative



LOG NOTE TIPS

Should clearly indicate:

- Direct contact with individual/guardian
- Include details relevant to individual
- Case Management requirements met
- Waiver requirements met
- Follow up activity if appropriate



LOG NOTE EXAMPLES



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HCBS - DD LOG NOTE

Reviewed Paul's file in preparation of quarterly monitoring. Paul receives Residential Services in his apartment and day program services. A review of utilization on the Bridge shows that Paul is utilizing services as expected according to Service Plan - nearly half of his units have billed and he has six months left in his Service Plan. Completed Monitoring at Paul's apartment with Paul present. Upon arrival, the main door to the building was propped open with a phone book. Paul said tenants have been doing that as the buzzer broke yesterday. He said the management office told them it would be fixed that afternoon. I asked Paul how his services are with his new residential service agency. Paul said he likes Casey a lot. She comes to his apartment daily to assist him with his blood sugar monitoring. Paul showed me a chart he and Casey made to help plan meals. We also talked about the other people who help him with keeping his apartment clean and grocery shopping. Paul doesn't remember their names but likes them. He does not want any changes made to his services or with his service providers. Paul said he and his new agency found the emergency exits in his apartment building in case of a fire or other emergency and they practiced going down the stairs so he could see where those doors led. Paul showed me some of his drawings that his provider helped him put in frames so he could hang them on his walls. He said wants to change the pictures every month like a gallery does. While there, Casey arrived to check Paul's blood sugar. She said that she saw someone working on the building's buzzer when she came in. When I left, I noted a sign telling tenants that the buzzer was fixed.

- Quarterly
- Face-to-Face in a place where services delivered
- Health and Safety
- Promote Self-Determination
- Delivery of Services and Satisfaction



HCBS-EBD LOG NOTE

Case manager completed Quarterly-call over the phone with Mary. She reports no recent falls / hospitalizations or medical needs. She is still seeing Dr. Jones. Mary reports that she is happy with her home health services and Lifeline, but is having problems with her Homemaker services. She reports the Homemaker is always in a hurry. Cm asked if she would like to change providers and Mary reported that she would not. Mary would like provider to know to see if that can improve. Mary reports services in SP meet her needs and she is utilizing them as authorized. No further questions or concerns. Case manager called provider and reported above conversation about Homemaker.

- Conducted Quarterly / Directly with Individual
- Health and Welfare of Individual
- Service Delivery Quality
- Service Delivery Utilization



MONITORING LOG NOTE

I saw Jennifer at her Specialized Habilitation site. She was sitting at the craft table and making a bracelet. She had some pretty beads she was using and had separated the ones she wanted to use and put them in a small dish before she started making the bracelet.

Jennifer said that she was going to put them on the bracelet in a pattern so that the beads shaped like flowers would be spread out. They were listening to music at the program and Jennifer and I talked about one of the songs playing. I asked if she knew who was singing and she didn't but said that her favorite singer is Selena Gomez.



MONITORING LOG NOTE

Case manager completed 6 mo monitoring w/ Tammie on phone. Tammie reports no recent falls or hospitalizations. She continues to go to Physical Therapy. Tammie reported no change in physician or address. Tammie reports services are going well. She reported that she has not tested her Lifeline recently. Case manager made collateral contacts with providers: spoke with Anna at A1 who reported services are being provided as scheduled, no questions or concerns at this time. Case manager spoke to Jane who reported Tammie's Lifeline is functioning properly. No questions or concerns at this time.



MONITORING LOG NOTE

Talked to Jake today. We talked about how he is doing. Asked how his apartment is going. He said he wants a new phone but his mother and residential provider told him he doesn't need one and can't afford it. I tried to ask him for more details but he got mad at me and said we are all against him. He refused to talk with me about any subject and left without answering me. I followed up with residential program manager who provided details of when Jake got upset with her. She said that he doesn't like when he is told he doesn't have money for something he wants.



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MONITORING LOG NOTE

Met with Charles for CSR in his apartment. Charles is 79 years old and lives alone. Homemaker was also present for assessment. Home was clean, but cluttered. Building has problems with bugs and they have been spraying regularly. Charles was sitting in wheelchair wearing pants and no shirt as apartment was hot. No significant changes since previous assessment. Continues to need ongoing assist with transfers/bathing/dressing/toileting. Charles uses wheelchair for mobility. He has hospital bed and says he gets in/out of it with extensive assistance. He spends most of day in wheelchair. Charles says vision is getting worse and he may have surgery for cataracts. He wears O2 continuously. He has CNA 2xd to get in/out of bed with skilled transfer/give bath/assist with toileting. Homemaker assisting 4x/week. Charles relies heavily on homemaker to do cleaning/all meal prep (she leaves prepared meals in refrigerator for Charles to warm up). Charles states he tests Lifeline every few months. Charles has no natural supports. Charles' services are required to keep him in the community. Charles and his homemaker report she has been going over hours. Discussed increase of services to meet need. Case manager to increase homemaker by 4 hours per week to meet all of Charles' needs. Verified with agency increase of hours possible and confirmed everything else going well. No problems. Gave increase in hours. She will start them effective Monday.



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MONITORING LOG NOTE

Saw Lucy at the office and said hello to her. She had gotten her eyes checked and wanted to show me her new glasses. Lucy is happy and said that she is doing a good job wearing her glasses every day. I asked how she is doing with her other needs. She said that she is good and healthy. She continues to like going to day program and likes the staff there. I asked if she thinks she is treated well by staff who work with her and she said yes. She feels safe with them. She has no changes in services or supports and does not want any. No concerns at this time.



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MONITORING LOG NOTE

Quarterly completed. Case manager spoke with daughter of Vivian. Daughter is Relative Personal Care Provider. Vivian is an 83 year old woman diagnosed with Diabetes Mellitus and Hyperlipidemia. She is dependent on others to provide Hands on Assistance with most ADLs. Daughter says Vivian still wants to receive EBD waiver services. Daughter reports that Vivian still sees Dr. Smith and has appointment next month. Daughter reports no falls, no hospital visits, and no significant incidents. She is satisfied with the services her mother receives. She said that Vivian wants to stay in her home at this time. No follow up needed.



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SUMMARY



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SUMMARY

Monitoring:

- Quarterly
- Directly with individual enrolled in services
- Review Health and Safety
- Review Service and Supports Quality
- Review Service Utilization
- Meet requirements of individual waivers

Log Notes must:

- Be entered on the BUS as a Summary Report
- Reflect monitoring requirements met



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QUESTIONS?



CONTACT INFORMATION

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THANK YOU!



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