Reaching into QA Maturity Level 3 & Beyond

Continuous Improvement Learning Session

Presented by:
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Vanessa Garcia
Arturo Serrano

Purpose of this Learning Session

- County Incentives Contract
- Please submit the names of those attending from your County to Rahem.Mulatu@state.co.us

Introductions

- Rahem Mulatu- County Program Administrator
- Vanessa Garcia - Continuous Improvement Specialist
- Arturo Serrano - Continuous Improvement Specialist

Overview

- Ground Rules & Google functionality
- Recap of 1st Quarter QA Meetings
- QA Learning Session Content
- Post Learning Session Expectations and Due Dates

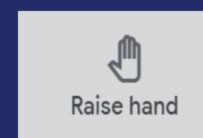
Ground Rules

- Arrive on time.
- Keep your microphone muted.
- If possible remain on video at all times.
- Please do your best to stay engaged during the duration of this Session.
- In Continuous Improvement everyone's voice matters. Please ask questions or share any thoughts/ideas that might come up. We will do our best to address all questions during the Session.

Google Functionality

- At anytime feel free to add a comment or question within the chat feature.

- You can use the Raise hand icon at any time during the Learning Session(bottom right of your screen).



Questions?

Recap of 1st Quarter QA Meeting's

Why we need to improve MA Quality Assurance?

- Ensuring MA timeliness and accurate eligibility determinations for Colorado residents.

- Audit findings with fiscal implications for State & Counties.

Quality Assurance Maturity Model

Optimizing

5 Focus of case review is continuous improvement of eligibility performance.

Managed

4 Performance Measures are developed and case reviews are used to measure eligibility process performance.

Defined

3 Proactive processes established for case reviews with consistent outcomes. Proactive use for the Eligibility Site.

Repeatable

2 Case reviews are conducted at basic level with repeatable steps. Reactive to audits, federal or state requirements.

Initial

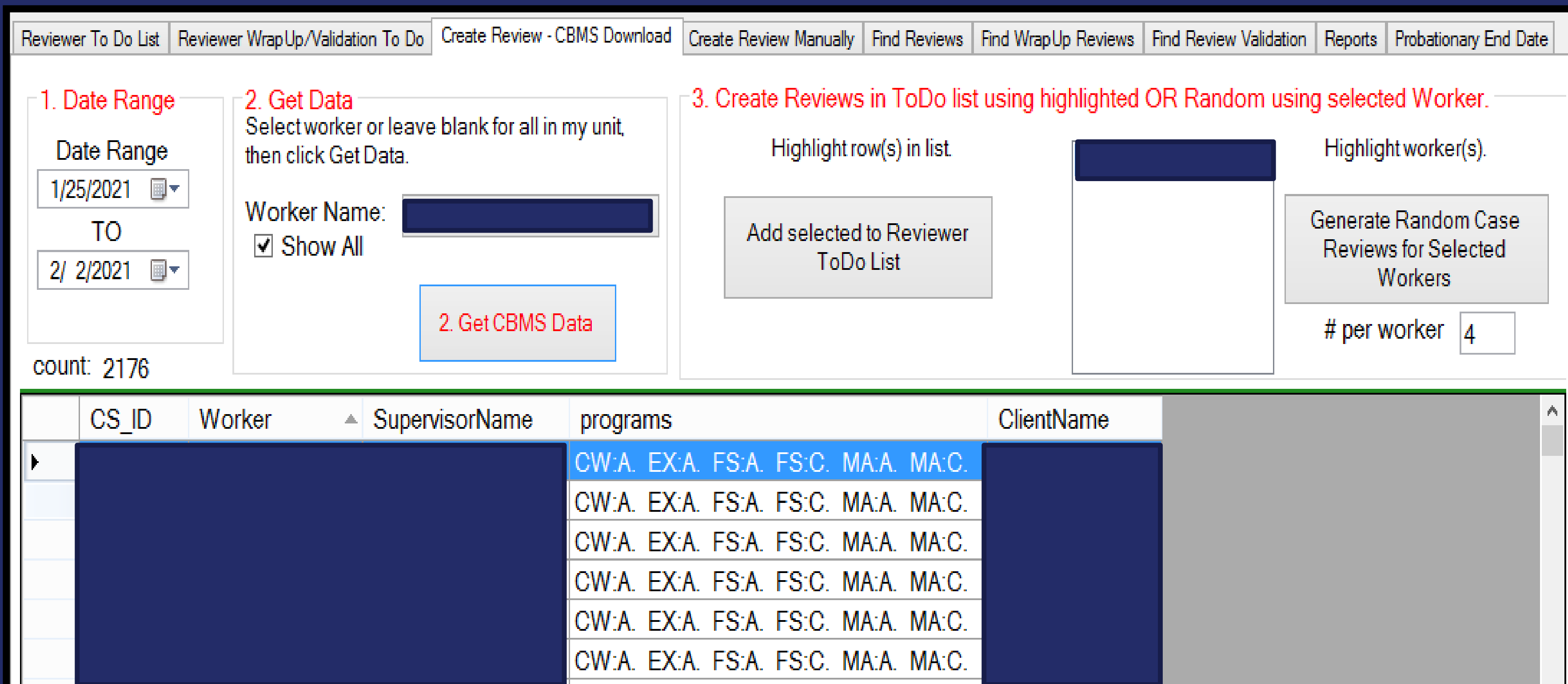
1 Aware of what quality assurance is and may have a basic idea of how to implement. Initial case reviews conducted without consistent data. Unpredictable process that is not yet defined.

How will we improve the County QA process?

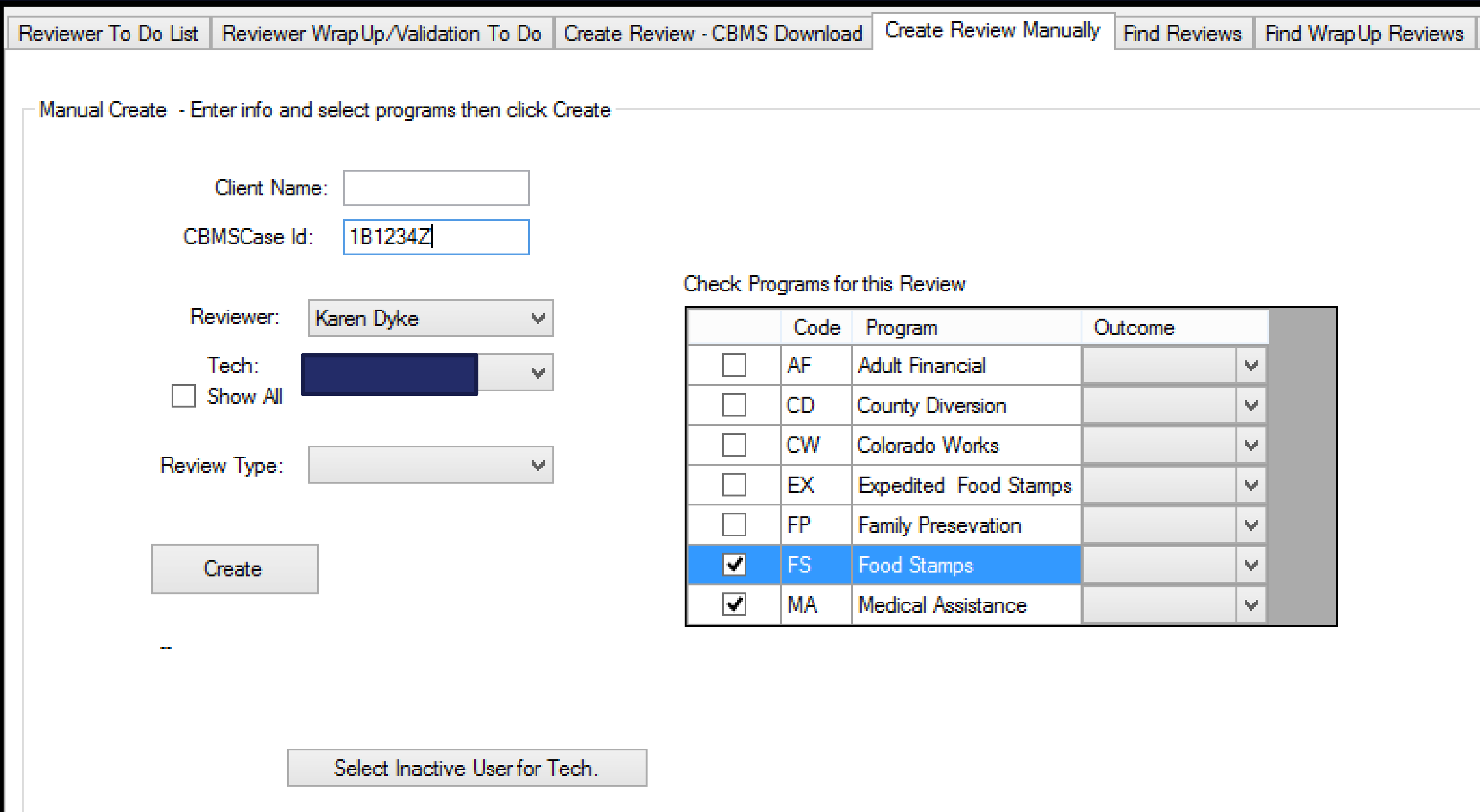
- The Department will be providing tools and resources that will help mature your QA process.
- The Department will share County QA best practices.
- The Department has hired a QA team which will be conducting Statewide QA reviews.

Adams County Quality Assurance

Post -Auth Review



Pre -Auth Review



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How does Adam’s County Quantify Findings and Errors?

Review Guide Sheet

REVIEW ELEMENT	POTIENTIAL ERRORS	WEIGHT	ERROR CITED IF:	Programs
RESOURCES (continued)	All reported resources were not entered in CBMS	Non-Critical	CSS failed to enter or update resources reported by client including bank accounts, vehicles, real estate, life insurance, etc.	AF, EX, FA, MA
	Did not update all fields and/or child screens correctly	Non-Critical	• Non-Critical data entry errors were made on case • Non-mandatory fields were not completed with info provided by the client	AF, EX, FA, MA
	Amount of Balance Considered Current Income not addressed/incorrectly addressed	Non-Critical	• Failed to update Amount of Balance Considered Current Income field • Entered incorrect income amount	AF, MA (non-MAGI)
	Disposition Window was not completed correctly	Non-Critical	• CSS failed to update Disposition window for resources no longer owned by client. • CSS updated Disposition window incorrectly	AF, EX, FA, MA
	Incorrect Effective Begin or End Dates	Non-Critical	CSS failed to correctly update Effective Begin Dates	AF, EX, FA, MA
	Incorrect AF/CW/FA Use Month	Non-Critical	• FA/CW Use Month is incorrect per Simplified Reporting rules • FA Use Month Change was not requested	AF, CW, FA
	Incorrect Fair Market Value	Non-Critical	Fair Market value does not match what client reported or verified	AF, EX, FA, MA
	Newly discovered/questionable info was not addressed properly	Non-Critical	CSS failed to address new information reported by client or discovered via other means (failed to question inconsistent info, request verification or update CBMS with new information)	AF, EX, FA, MA
	Resource incorrectly identified as revocable/irrevocable	Non-Critical	Life Insurance, Burial Policy incorrectly marked as irrevocable when it has a cash surrender value	AF, MA

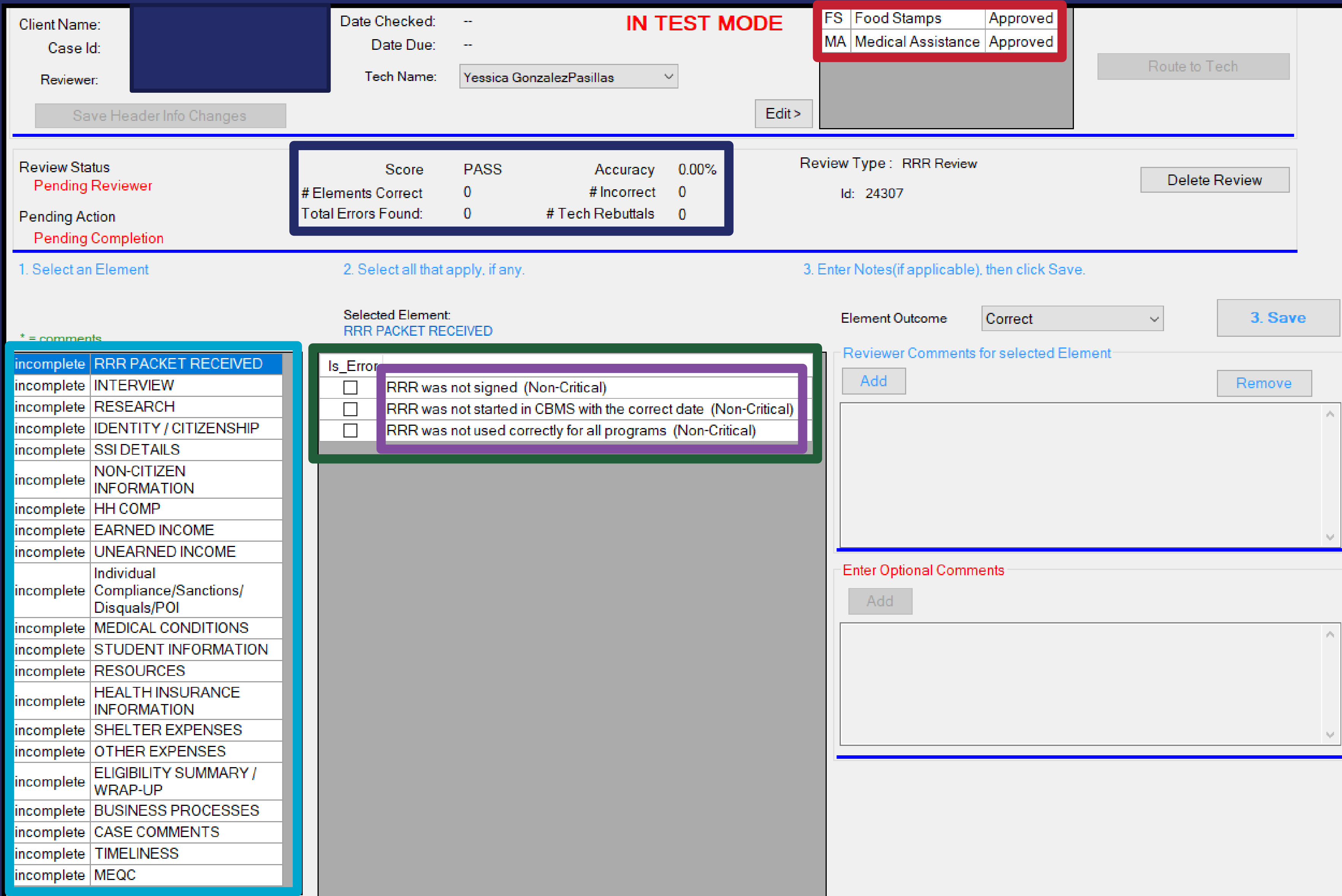
Elements are added to the review based on the case mode, circumstances, and HLPGs on the case. *Accuracy* scores are determined by the number of correct elements divided by total elements reviewed.

"Sub-elements" determine whether the main element will be marked **Correct** or **Incorrect**.

"Critical" errors affect the *Pass/Did Not Pass* score. ***"Non-Critical"*** errors affect the *Accuracy* score.

These are the programs the Review Element and Potential Errors are applicable to.

This is the criteria reviewers use to determine whether to cite an error for the sub-element.


Client Name:
Case Id:
Reviewer:
[redacted]
Save Header Info Changes
Date Checked: --
Date Due: --
Tech Name: Yessica GonzalezPasillas
IN TEST MODE
Edit >
FS Food Stamps Approved
MA Medical Assistance Approved
Route to Tech
Review Status
Pending Reviewer
Pending Action
Pending Completion
Score PASS
Accuracy 0.00%
Elements Correct 0
Incorrect 0
Total Errors Found: 0
Tech Rebuttals 0
Review Type : RRR Review
Id: 24307
Delete Review
1. Select an Element
2. Select all that apply, if any.
3. Enter Notes(if applicable), then click Save.
* = comments
Selected Element:
RRR PACKET RECEIVED
Element Outcome
Correct
3. Save
incomplete RRR PACKET RECEIVED
incomplete INTERVIEW
incomplete RESEARCH
incomplete IDENTITY / CITIZENSHIP
incomplete SSI DETAILS
incomplete NON-CITIZEN INFORMATION
incomplete HH COMP
incomplete EARNED INCOME
incomplete UNEARNED INCOME
incomplete Individual Compliance/Sanctions/ Disquals/POI
incomplete MEDICAL CONDITIONS
incomplete STUDENT INFORMATION
incomplete RESOURCES
incomplete HEALTH INSURANCE INFORMATION
incomplete SHELTER EXPENSES
incomplete OTHER EXPENSES
incomplete ELIGIBILITY SUMMARY / WRAP-UP
incomplete BUSINESS PROCESSES
incomplete CASE COMMENTS
incomplete TIMELINESS
incomplete MEQC
Is_Error
RRR was not signed (Non-Critical)
RRR was not started in CBMS with the correct date (Non-Critical)
RRR was not used correctly for all programs (Non-Critical)
Reviewer Comments for selected Element
Add
Remove
Enter Optional Comments
Add

Client Name: [redacted]
Case Id: [redacted]
Reviewer: [redacted]

Save Header Info Changes

Date Checked: 8/23/2019
Date Due: 8/28/2019
Tech Name: [redacted]

IN TEST MODE

CW	Colorado Works	Approved
FS	Food Stamps	Approved
MA	Medical Assistance	Approved

Route to Reviewer

Once all errors have been acknowledged/corrected and comments have been entered, reviewees route the review back to the reviewer.

Scores for both critical errors (pass/did not pass) and non-critical errors (accuracy) are listed here.

Score PASS Accuracy 80.00%
Elements Correct 8 # Incorrect 2
Total Errors Found: 2 # Tech Rebuttals 0

Review Type : Changes/VCL Review
Id: [redacted]

2. Check Rebuttal to any that apply.

3. Enter Optional Notes or R... ...ck Save.

Reviewers enter their feedback here regarding errors.

3. Save

Selected Element:
UNEARNED INCOME

* = comments

Correct	RESEARCH
Correct	HH COMP
*Correct	EARNED INCOME
Incorrect (1)	UNEARNED INCOME
N/A	Individual Compliance/Sanctions/ Disquals/POI
Correct	SHELTER EXPENSES
Correct	OTHER EXPENSES
Correct	ALL OTHER CHANGES/VERIFICATION
Incorrect (1)	ELIGIBILITY SUMMARY / WRAP-UP
Correct	BUSINESS PROCESSES
Correct	CASE COMMENTS
Correct	TIMELINESS
Correct	MEQC

Is_Error		Rebuttal	SupAck
☐	Did not update all fields and/or child screens correctly (Non-Critical)	☐	☐
☐	Failed to enter all income reported (Non-Critical)	☐	☐
☐	Income entered under incorrect household member (Non-Critical)	☐	☐
☐	Incorrect Effective Begin or End Dates (Non-Critical)	☐	☐
☐	Incorrect FA/CW Use Month (Non-Critical)	☐	☐
☐	Incorrect Frequency (Non-Critical)	☐	☐
☐	Incorrect Gross Income (Non-Critical)	☐	☐
☐	Incorrect Income Type (Non-Critical)	☐	☐
☑	Newly discovered/questionable info was not addressed properly (Non-Critical)	☐	☐
☐	Verification source indicated is not on file (Non-Critical)	☐	☐

Reviewer Comments for selected Element

Add

8/23/2019 [redacted] The VCL on file is not acceptable as it does not have any identifying information. However, we do have access to DOLE and can verify this information that way. I checked and was able to verify that client did in fact apply for UIB. Please pull the UIB application screen and upload to HSC for additional verification. Thanks. .

Enter Corrective Action(s)

Add

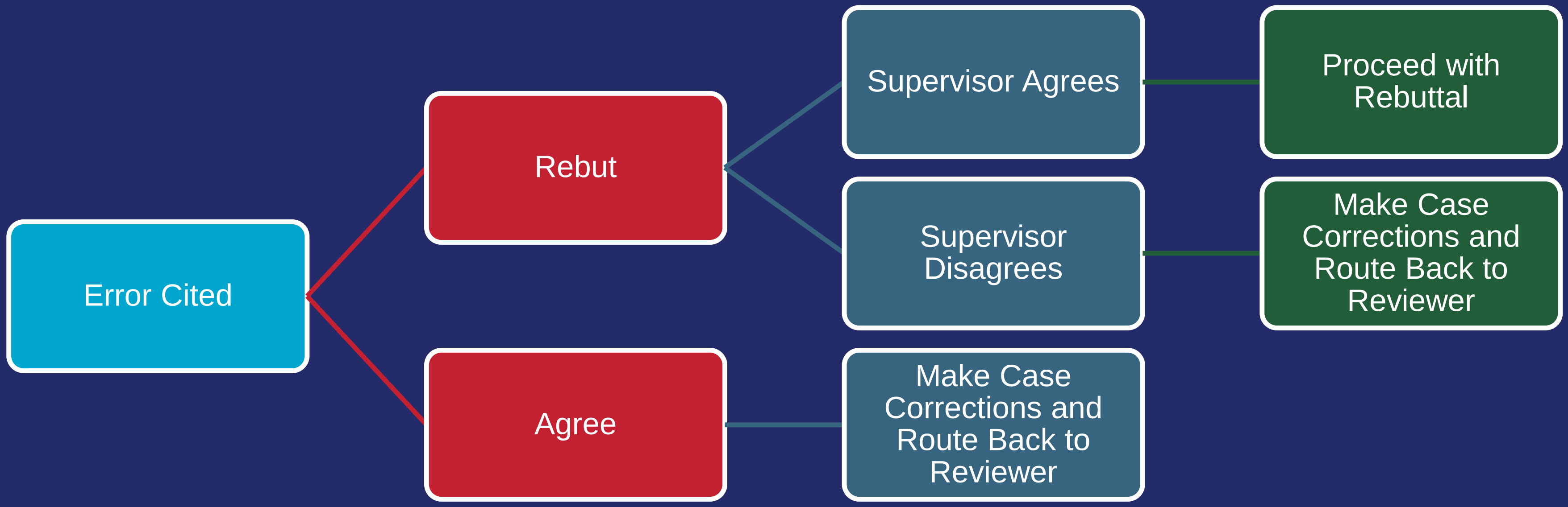
☐ Check to Acknowledge all Corrections have been made in CBMS and/or applicable system(s) for this Element

The list of review elements here is conditional based on review type and programs associated with the case.

These are the "sub elements"/potential errors that could occur under each element. Scores are based on # of correct elements/total elements.

Reviewees enter rebuttal comments/questions/indicate the error has been fixed here.

To Rebut or Not to Rebut?



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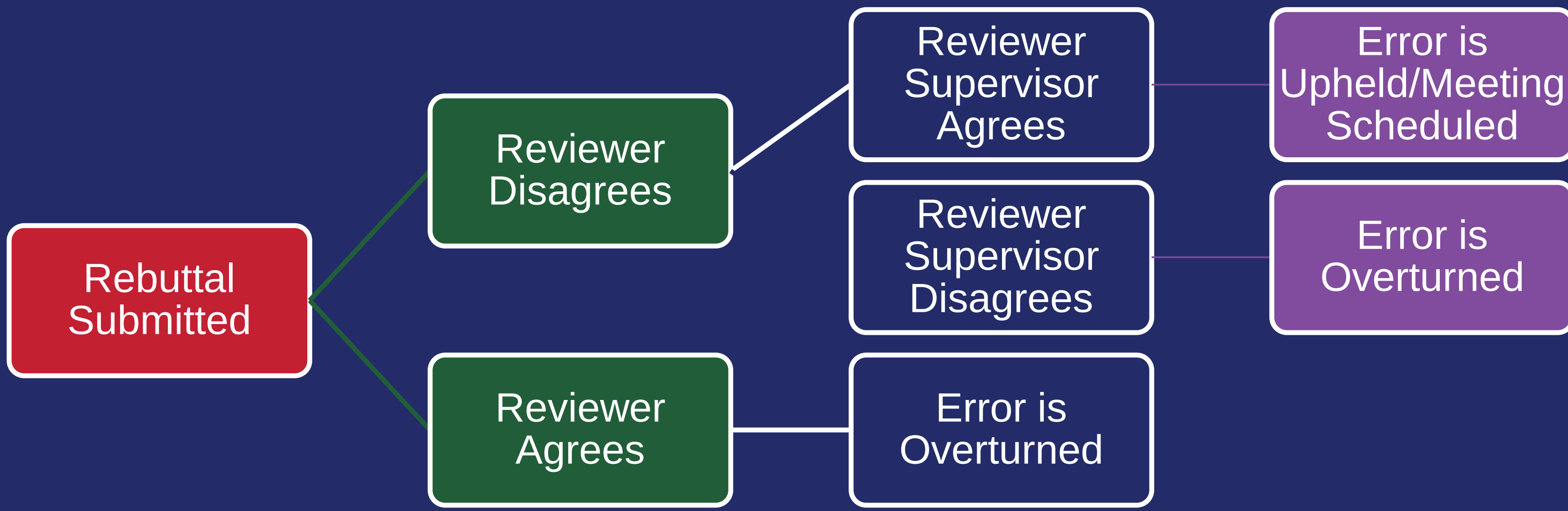
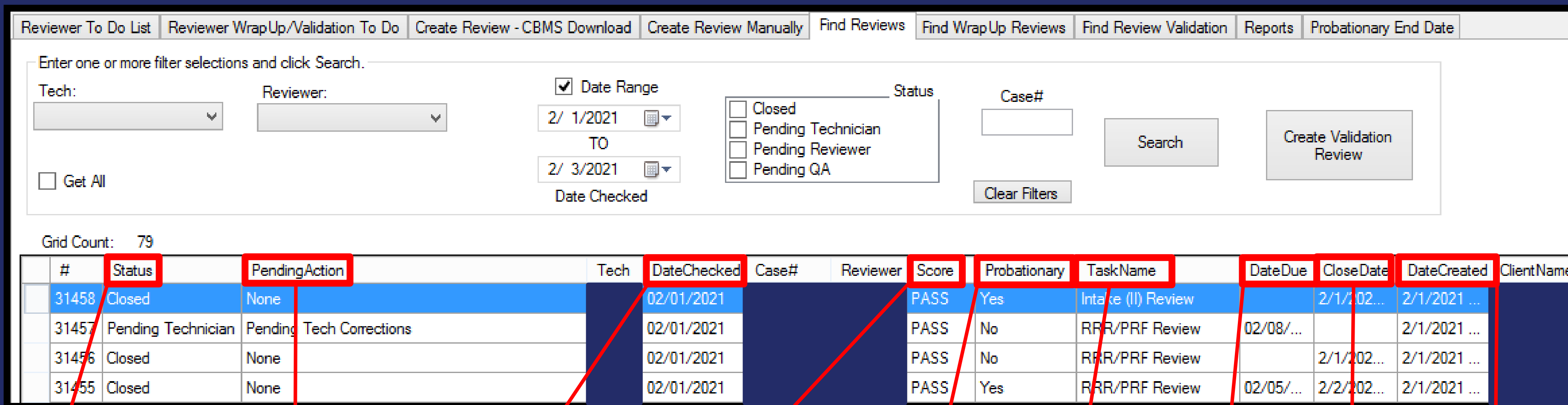
Onward with the Rebuttal!





The ***"Status"*** here indicates where the review is currently routed and which party is responsible for taking action.

"Pending Action" is more specific about what needs to happen next with the review. This can include the reviewee needing to make corrections, the reviewer needing to review corrections made, or supervisors needing to sign off on rebuttals .

This is the date the case review was first routed to the team member.

The score here only pertains to critical errors on the case, which affects the Pass/Did Not Pass score but not the Accuracy score.

"Probationary" is the status given to our "Rookies" who are on 100% sup auth while they learn FA/MA. "Cadets" learning cash programs are not considered probationary.

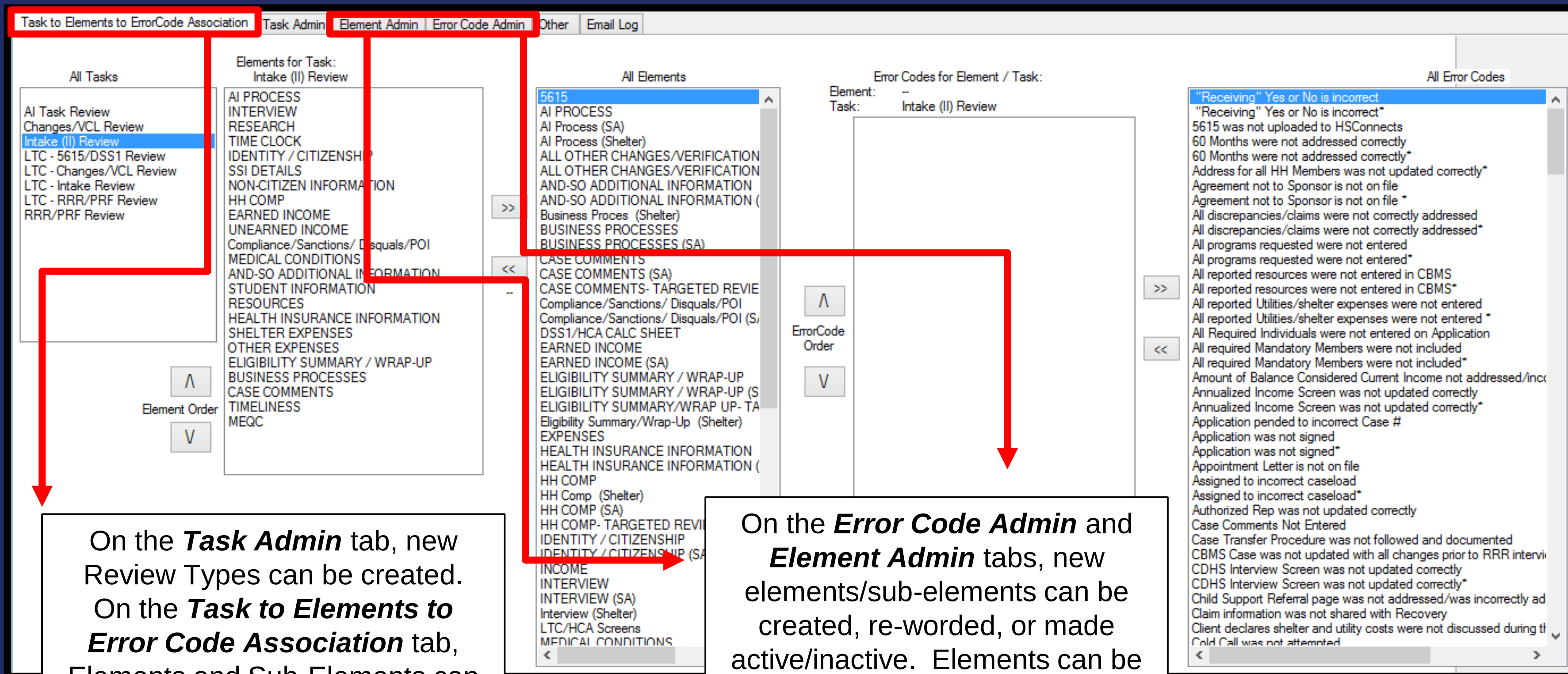
This refers to the case review type- Intake vs RRR vs Changes vs LTC, etc.

Team members have 5 business days to respond to the review once it's routed.

This is the date the review was fully completed by all parties.

This is the date the reviewer began creating the review in the database but not necessarily when the review was sent to the reviewee

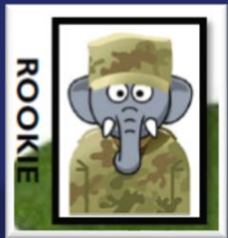
Are Targeted Reviews Conducted?



On the ***Task Admin*** tab, new Review Types can be created. On the ***Task to Elements to Error Code Association*** tab, Elements and Sub-Elements can be added to or removed from each Review Type

On the ***Error Code Admin*** and ***Element Admin*** tabs, new elements/sub-elements can be created, re-worded, or made active/inactive. Elements can be coded as informational or as impacting accuracy.

What are Our Accuracy Benchmarks?



New CSS team members who do not have current CBMS experience will have 4 benchmarks to achieve before being removed from Supervisor authorization. The Sup Authorization requirement will be steadily decreased as they demonstrate increased proficiency.

For Food and Medical Assistance, the following benchmarks must be met:

- **First Benchmark** - CSS will achieve an 80% Pass Rate on a rolling 30 cases
- **Second Benchmark** – CSS will maintain an 80% for one full calendar month. Once they have achieved this, they will be reduced to 50% Supervisor Authorization.
- **Third Benchmark** – CSS will continue to maintain 80% Pass Rate for another calendar month. Once they have achieved this, Supervisor Authorization will be reduced to 25%
- **Fourth Benchmark** – CSS will continue to maintain an 80% Pass Rate for one calendar month. Once they have achieved this, they will be removed from Supervisor Authorization and they will have full access to authorize cases in CBMS. They will also be added to Veteran Review status of four cases reviewed each month.

- Obtain an 80% pass rate over a rolling 45 cases.
- Within the rolling 45 cases, a minimum of 10 ongoing cases must show pass, ongoing includes both changes and redeterminations.
- Within the rolling 45 cases, a minimum of 10 intake cases must show pass.

In addition to meeting the Pass Rate and Accuracy Rate to progress, each CSS will demonstrate their program understanding by being able to maintain the Pass and Accuracy Rates by processing programs across tasks. This means in the three months being monitored for Career Progression purposes:

- A minimum of at least 25% of the cases reviewed will be from the Intake task.
- A minimum of at least 25% of the cases reviewed will be from the Ongoing task.
- In addition to the above expectations, at least 25% of the case reviews completed should be for at least one cash program to progress to a CSS II and both cash programs to progress to a CSSIII.
- Example – Of the 10 cases that are needed for career progression, at least 3 of them should include cash programs, and 3 of them should be of the opposite task (Intake or Ongoing). Three cases may represent both 25% expectations.

Career Progression Matrix

Team Member Level	Norms/Values	Experience Required	Education Required	Pass Rate (Averaged over 3 consecutive months with a minimum of 10 case reviews)	Accuracy Rate (Averaged over 3 months with a minimum of 10 case reviews)	Production (3 consecutive months)	Attendance	Job Technical Skills	Servant Leadership	Notes
Probationary	Meet/Exceed			80%		50%	Adhere to policy	Pass Medical & Food Assessments	Understand Servant Leadership	Production needs to be 50% of CSS I
CSS I	Meet/Exceed	2 years office of clerical or extensive public contact experience	Bachelors or Associates preferred. High School Diploma or GED required.	80-89% (not including any months on sup auth)	90%	95-100%	Adhere to policy	Pass Medical & Food Assessments	Understand Servant Leadership	
CSS II	Meet/Exceed	At least 6 months determining eligibility required.	Bachelors or Associates preferred. High School Diploma or GED required.	90%+ (no including any months on sup auth)	92%	100%	Adhere to policy	CSS I and Pass 1 Cash Assessment	Exhibits Servant Leadership	Able to perform job duties with minimal supervision Intake and Ongoing functions must each be represented in at least 25% of the Case Reviews completed during the review period. In addition, 25% of the reviews completed should include one cash program during
CSS III	Meet/Exceed	At least 2 years determining eligibility required.	Bachelors or Associates preferred. High School Diploma or GED required.	90%+ (not including any months on sup auth)	94%+	100%	Adhere to policy	CSS II, Pass 2 Cash Assessments Pass FA Use Month Test (95%) or (90% plus the 3 supplemental questions correct) within the last year.	CSS II and Assist with training, participate in division/departmental projects--mission focused	Able to perform job duties with minimal supervision Intake and Ongoing functions must each be represented in at least 25% of the Case Reviews completed during the review period. In addition, 25% of the reviews completed should include cash programs with a minimum of one CW and one AF case

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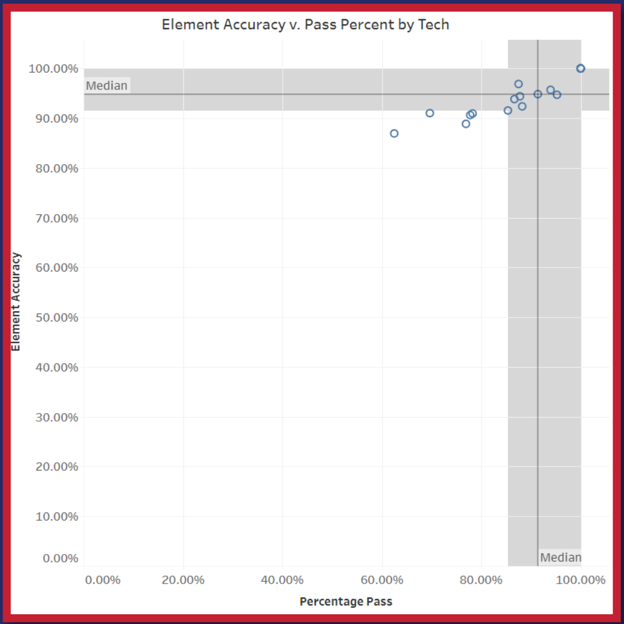
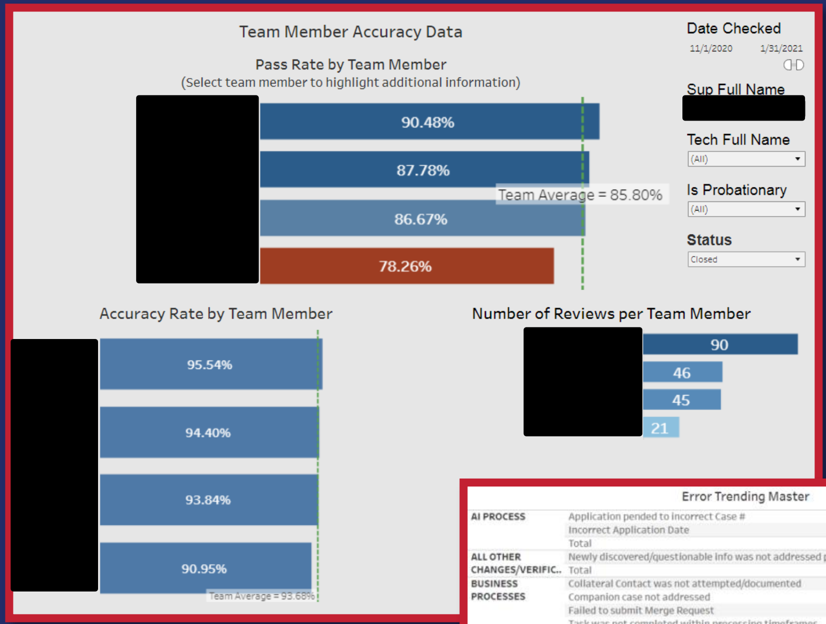
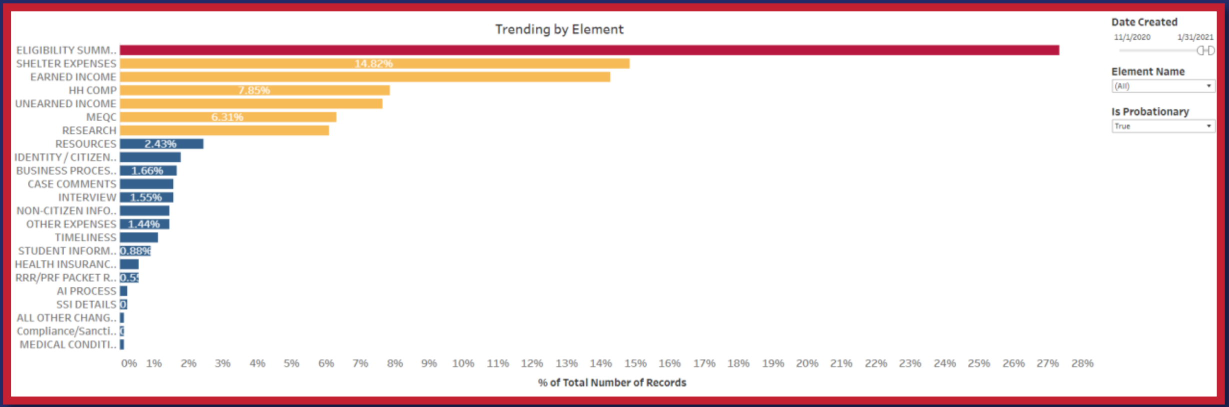
How are Error Trends Shared with Staff?

Print Highlighted Report

#	Name	ReportDescription
1	Agency Summary	Score Summary for all Reviews, excluding any Probationary Reviews, in given date range.
2	Summary By Supervisor	For all Reviews in given date range, excluding any Probationary Reviews. Score Summaries are given by Tech and Supervisor.
3	Probationary Only - Summary By Supervisor	Probationary Reviews Only. Score Summaries are given by Tech and Supervisor.
4	Probationary Only - Agency Summary	Score Summary for all Probationary Reviews in given date range.
5	Element Error Trending - Agency Summary	Summary of Elements with checked Error Codes
6	Accuracy Summary By Review Type	Breaks out Probationaary and Non-Probationary and pulls by Date Closed
7	Program Accuarcy - Single Program	Based on Elements and Errors associated with selected Program.
8	Element Error Trending By Supervisor	Summary of Elements with checked Error Codes
9	Program Accuracy - All Programs	Based on Elements and Errors associated with Program. Also shows Errors codes.
10	Overdue Reviews	Reviews not Closed with Date Due before today's date.
11	Wrap Up Review Summary	Counts and scores of Closed WrapUp Reviews by date.
12	Tech Summary	All Closed Reviews for selected Tech.
13	Wrap Up Error Trending	Count of Errors for Closed Wrap Up
15	Summary by Review Type	Summarizes by Review Type for given date range.
16	Program Accuracy with Error Codes	Based on Elements and Errors associated with Program for both Probationary and non-Probationary Reviews. Also shows Errors codes.
17	Completion Summary by Reviewer	Averages between Start Date, First Routed, and Close Date
18	Accuracy based on ErrorCodes Only	Summary by Tech / Sup computing accuracy by total error codes devided by # error codes incorrect (excluding InAccuracy Elements)

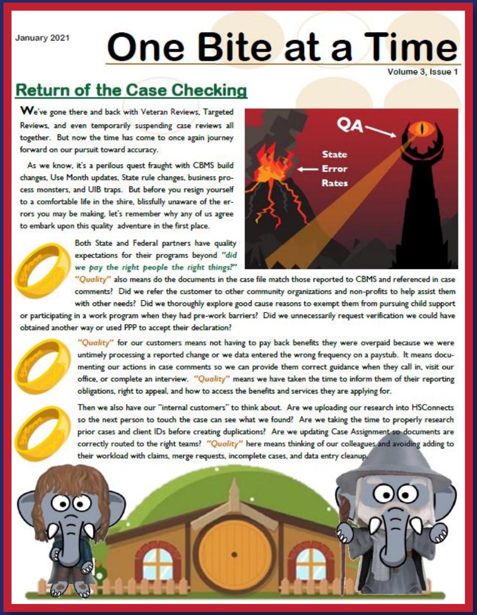






Error Trending Master

AI PROCESS	Application pended to incorrect Case #	1
	Incorrect Application Date	1
	Total	**2**
ALL OTHER CHANGES/VERIFIC..	Newly discovered/questionable info was not addressed properly	1
	Total	**1**
BUSINESS PROCESSES	Collateral Contact was not attempted/documented	5
	Companion case not addressed	2
	Failed to submit Merge Request	6
	Task was not completed within processing timeframes	2
	Total	**15**
CASE COMMENTS	Case Comments Not Entered	3
	Required Case Comment Template not used	3
	VCL User Notes missing	8
	Total	**14**
Compliance/ Sanctions/ Disqual..	Cure/Comply was not updated correctly	1
	Total	**1**
EARNED INCOME	Failed to enter all income reported	15
	Incorrect AF/CW/FA Use Month	1
	Incorrect Check Type (Representative, Non-Representative)	7
	Incorrect Effective Begin or End Dates	30
	Incorrect Employment Begin and End Date	4
	Incorrect Frequency	4
	Incorrect Income Amount Used	9
	Incorrect Monthly Amount Earned or Estimated Average Hours/week	14
	Incorrect Pay Periods or Pay Dates	1
	Newly discovered/questionable info was not addressed properly	35
	Reasonable Compatibility was not correctly addressed	1
	Self-Employed was not updated correctly	3
	Verification source indicated is not on file/does not match CBMS	5
	Total	**129**
ELIGIBILITY SUMMARY / WRAP-UP	All discrepancies/claims were not correctly addressed*	9
	Assigned to incorrect caseload	20
	Case Transfer Procedure was not followed and documented	2
	Employment First referral documentation is not on file	6
	Incorrect Correspondence	6
	Incorrect EF Exemption	11
	Incorrect outcome for EX FA	3
	Incorrect outcome for FA	57
	Incorrect outcome for MA	11


January 2021

One Bite at a Time

Volume 3, Issue 1

Return of the Case Checking

We've gone there and back with Veteran Reviews, Targeted Reviews, and even temporarily suspending case reviews all together. But now the time has come to once again journey forward on our pursuit toward accuracy.

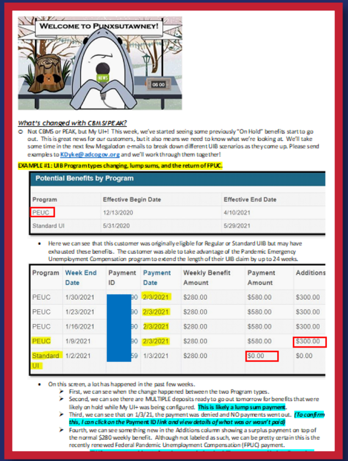
As we know, it's a perilous quest fraught with CBMS build changes, Use Month updates, State rule changes, business process monsters, and UIB traps. But before you resign yourself to a comfortable life in the shire, blissfully unaware of the errors you may be making, let's remember why any of us agree to embark upon this quality adventure in the first place.

Both State and Federal partners have quality expectations for their programs beyond *"did we pay the right people the right things?"* *"Quality"* also means do the documents in the case file match those reported to CBMS and referenced in case comments? Did we refer the customer to other community organizations and non-profits to help assist them with other needs? Did we thoroughly explore good cause reasons to exempt them from pursuing child support or participating in a work program when they had pre-work barriers? Did we unnecessarily request verification we could have obtained another way or used PPP to accept their declaration?

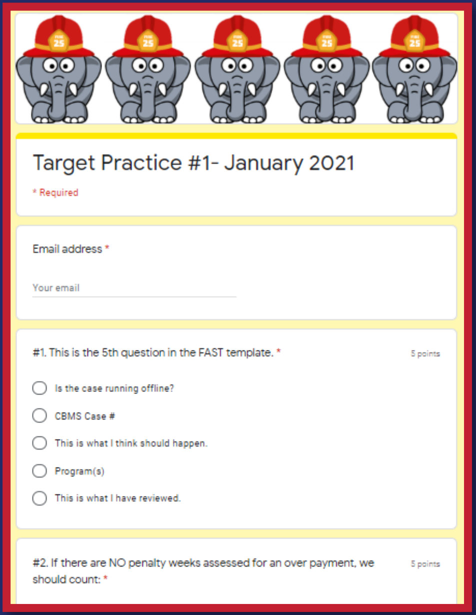
"Quality" for our customers means not having to pay back benefits they were overpaid because we were untimely processing a reported change or we data entered the wrong frequency on a paystub. It means documenting our actions in case comments so we can provide them correct guidance when they call in, visit our office, or complete an interview. *"Quality"* means we have taken the time to inform them of their reporting obligations, right to appeal, and how to access the benefits and services they are applying for.

Then we also have our "internal customers" to think about. Are we uploading our research into HSConnects so the next person to touch the case can see what we found? Are we taking the time to properly research prior cases and client IDs before creating duplications? Are we updating Case Assignment so documents are correctly routed to the right teams? *"Quality"* here means thinking of our colleagues and avoiding adding to their workload with claims, merge requests, incomplete cases, and data entry cleanup.

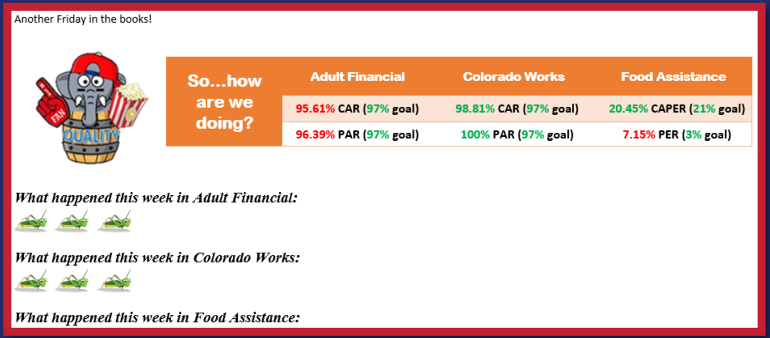
Monthly QA/Training Team Newsletters



Semi-Weekly All Staff Announcements



Monthly Target Practice Quizzes


Another Friday in the books!

So…how are we doing?	Adult Financial	Colorado Works	Food Assistance
	95.61% CAR (97% goal)	98.81% CAR (97% goal)	20.45% CAPER (21% goal)
	96.39% PAR (97% goal)	100% PAR (97% goal)	7.15% PER (3% goal)

What happened this week in Adult Financial:

What happened this week in Colorado Works:

What happened this week in Food Assistance:

Weekly State QA Stats E-mails

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Questions?

Contact info

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Michele King
QA/Training Supervisor
MLKing@adcogov.org

“Lean Tools”

What is Lean?

- Lean is a collection of tools that helps organizations identify bottlenecks and solve problems, create countermeasures that lead to action plans for improvement.

- In a Medicaid eligibility context, Lean identifies steps in the eligibility process that may lead to error, ways to reduce duplication, and ways to improve processing times.

Collection of Lean Tools

- **A3 - 8 Step Problem Solving**
- **Fishbone Tool**
- 5 Whys
- Value Stream Mapping
- 8 Waste & Waste Walk
- **PDCA - Plan, Do, Check, Act**
- Performance Matrix e.g. – XMR charts

What is an A3?

- An A3 is a blank template of paper, split up into eight sections.
- Use an A3 to guide your thinking through the 8-step problem solving method, and to share your ideas, plans and work.

Why an A3?

A3 8-step problem solving worksheet

Problem

Responsible person | People involved | bale

1 Clarify the Problem (Plan)
Current situation:
Desired situation:

2 Breakdown the Problem (Plan)

3 Set the Target (Plan)

4 Root cause analysis (Plan)

5 Develop countermeasure (Plan)

6 Run experiments to validate countermeasures(Do)
Owner | Support people | Dates

7 Monitor results from experiments(Check)

8 Standardize successful countermeasures (Act)

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An A3 captures

A specific problem	Material to help people see where the problem occurs	Targets for improvement	Analysis around the root cause of the problem
A list of possible countermeasures, with prioritization	A detailed plan for an experiment to try out a countermeasure	Status of results from the experiment	Decisions made about what to do after an experiment ends

A countermeasure is a suggested or proposed solution. We don't call them solutions because they're ideas about what might address the problem—you can call it a solution once you know it works.

Why use an A3?

A3 is structured, but flexible. An A3 is completed in a small group.

It is the way you "do" continuous improvement, using the Plan, Do, Check, Act (PDCA) cycle. It is a tool for conversation and building shared understanding.

It is a way to show respect for people by getting everyone involved in problem solving.

It is a snapshot of your thinking about a particular problem that is affecting your work and impeding the delivery of value to your customers.

Questions?

Pulse Check

- Why use an A3?
  - A3 is structured, but flexible. An A3 is great for small groups and gives everyone a voice in the process.

Pulse Check

- What is an A3?
  - An A3 is a blank template of paper, split up into eight sections.

Pulse Check

- Why an A3?
  - Those that developed these steps could capture all the ideas/steps on this A3 – 11 by 17 paper. A part of lean is visual management and they wanted display these plans in the office so that everyone could see the A3 process = the plan/experiment.

Pulse Check

- What does an A3 capture?
  - Analysis around the root cause of the problem

Let's review an A3 step by step for this Learning Session!

Post Learning Session Expectations and Due Dates

- Complete and Finalize the Action Plans.

- Action Plans will be due March 23, 2021!
  - Email: Rahem.Mulatu@state.co.us

- If you need additional assistance with Action Plans, you can call into the optional Countermeasure Action Plan call February 24 @ 1:00 PM-2:00 PM.

Questions?

Contact Info

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Continuous Improvement Webpage
https://www.colorado.gov/pacific/hcpf/continuous-improvement-team

Thank you!