Ready Set Go:
Supporting States in Preparation for the Access Rule

Critical Incident Management

July 15, 2024

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2	Considering the Access Rule
3	Oklahoma's Experience
4	Delaware's Goals
5	Lessons Learned

Agenda

Doing Critical Incident Management Better

Updated health and welfare assurance, with increased focus on critical incident management in 2014

OIG and GAO audits beginning in 2015

OIG/ACL/GAO joint report in 2018

More funding available through ARPA 9817

Requirements of the Access Rule finalized

Provisions of Access Rule Supporting Critical Incident Management

Minimum critical incident definition

Electronic incident management system

Cross-agency collaboration and the requirement to separately investigate incidents as needed

Required reporting on incident investigation and incident resolution timeliness
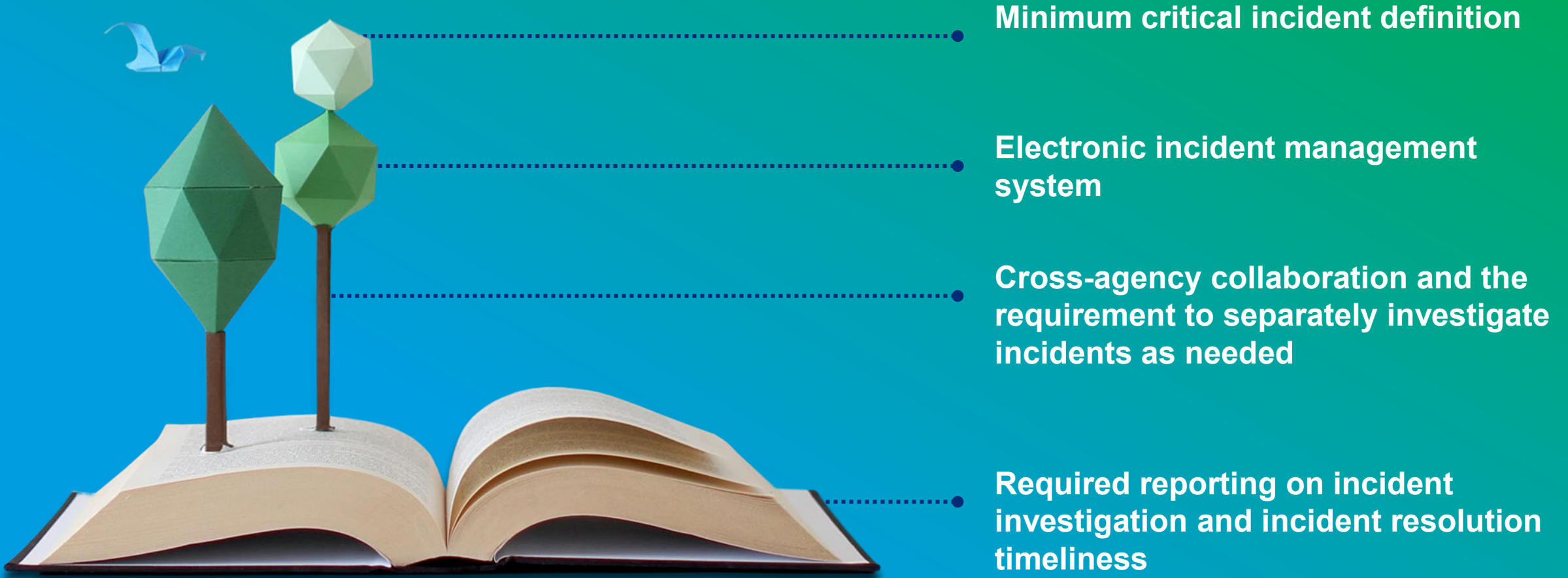
Best Practices for a Critical Incident Management Technology Solution

Dr. Keith Ewell, Vice President Solution Architecture
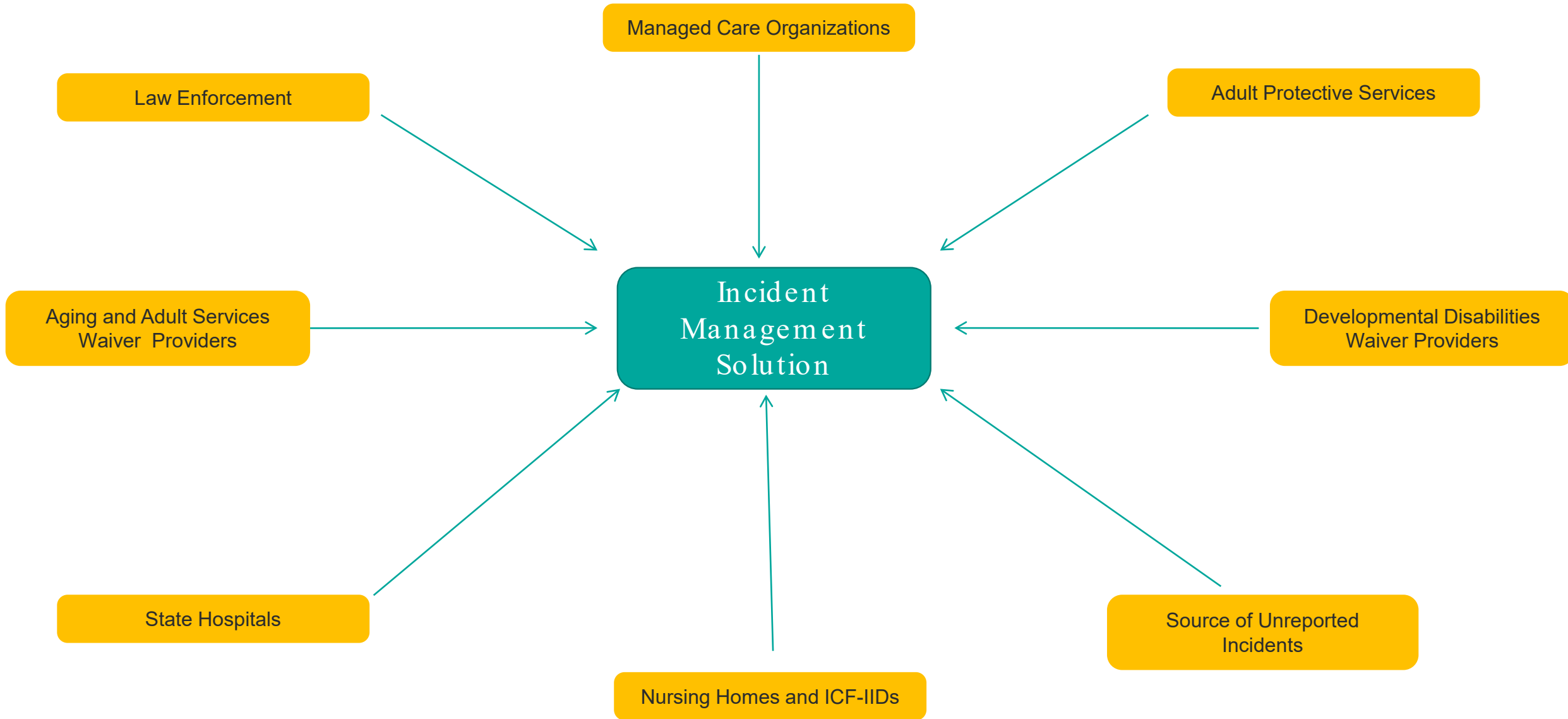
WellSky Human and Social Services Division
How we Support States

- 30-year focus on providing state human services agencies with purpose-built, cloud-based software to manage aging and disabilities services programs.

- 35+ states use WellSky for statewide case management for Medicaid and/or non-Medicaid funded human services programs and related federal reporting compliance.

- Most widely used software for adult protective services nationally (Abuse/Neglect/Exploitation —A/N/E data).

- Modular platform for:
  - Waiver management
  - Quality monitoring/Program oversight:
    - Provider monitoring
    - Critical incident management
    - Grievance processes

Best Practices in a Critical Incident Management Solution

- System must be capable of accommodating a complex ecosystem.
  - Integrations other sources of incident reports (e.g., APS) and with tools for identifying unreported incidents (e.g., Pulselight).

Incident Reporting — Complex Ecosystem

Managed Care Organizations

Law Enforcement

Adult Protective Services

Aging and Adult Services Waiver Providers

Incident Management Solution

Developmental Disabilities Waiver Providers

State Hospitals

Source of Unreported Incidents

Nursing Homes and ICF-IIDs

Best Practices in a Critical Incident Management Solution

- System must be capable of accommodating a complex ecosystem:
  - Integration of other sources of incident reports (e.g., APS) and with tools for identifying unreported incidents (e.g., Pulselight).
- **System should feature a single, online reporting form, dynamic enough to handle incident reports of different types from different sources.**

Single, Dynamic Online Incident Reporting Form Used Across Divisions

Best Practices in a Critical Incident Management Solution

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  - Integration of other sources of incident reports (e.g., APS) and with tools for identifying unreported incidents (e.g., Pulselight).
- System should feature a single, online reporting form, dynamic enough to handle incident reports of different types from different sources.
- **System should allow the flexibility and configurability to accommodate differing levels of incident management workflow by Division/Department.**

Example of an Aging Waiver Incident Workflow
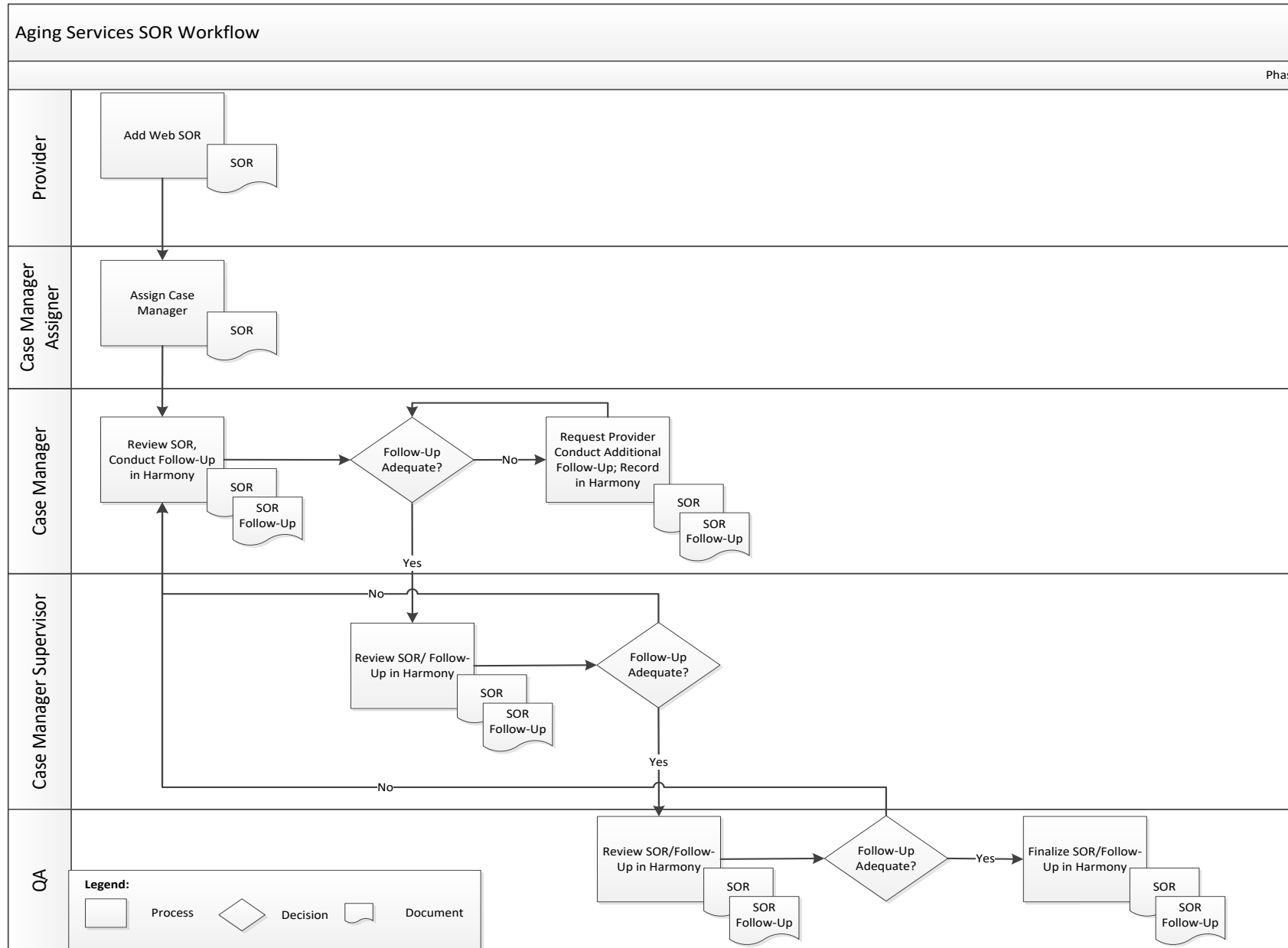
Example of an IDD Waiver Incident Workflow

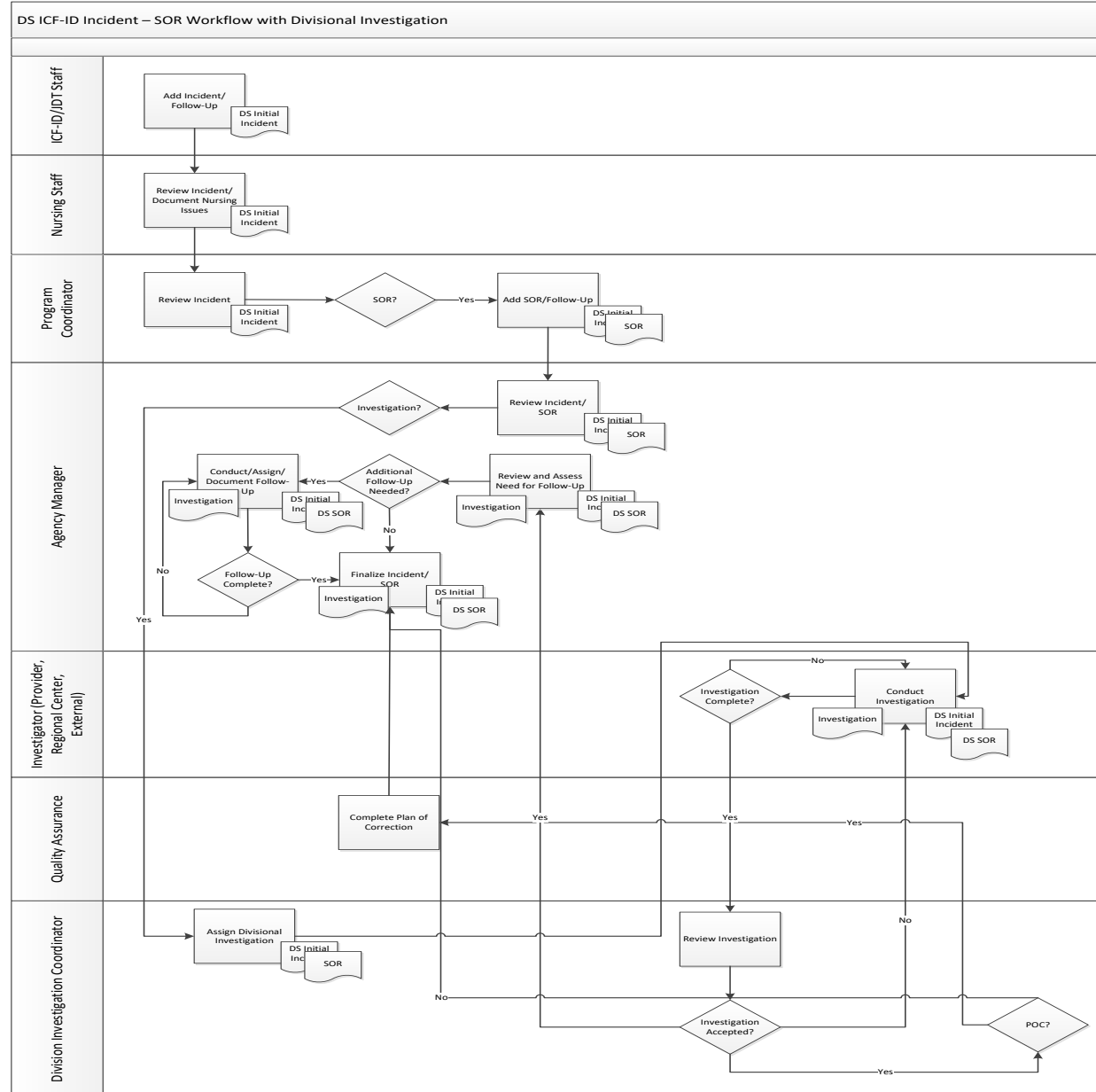DS ICF-ID Incident – SOR Workflow with Divisional Investigation

Best Practices in a Critical Incident Management Solution

- System must be capable of accommodating a complex ecosystem:
  - Integration of other sources of incident reports (e.g., APS) and with tools for identifying unreported incidents (e.g., Pulselight).
- System should feature a single, online reporting form, dynamic enough to handle incident reports of different types from different sources
- System should allow the flexibility and configurability to accommodate differing levels of incident management workflow by Division/Department.
- **System should aggregate all incident data in a single database to facilitate operational reporting as well as trend analysis, benchmarking, and predictive analytics.**
- System should support dashboards for agency executives, managers, and providers.

Population Level View by Provider Organization

Population level view showing:

- **Metrics**
- **Performance indicators**

Oklahoma's Landscape

OKLAHOMA Human Services

Oklahoma Health Care Authority
- Oklahoma Human Services
  - Developmental Disabilities Services
    - OK In-Home Supports Waiver for Children
    - OK In-Home Supports Waiver for Adults
    - OK Homeward Bound Waiver
    - OK Community Waiver
  - Division of Aging Services
    - OK ADvantage Waiver
    - State Plan Program
- OK Medically Fragile Waiver

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Oklahoma's Experience

The Old Days

- Incident management was a paper-based process for providers, which contributed to:
  - Incidents being faxed or mailed in, which delayed action
  - Incident resolution being hard to track
  - Having unclear follow-up actions
  - No data available to identify systemic issues
  - No incident trends being identified
- Incidents and other case documentation (i.e., person-centered service plans) were entered into a homegrown system:
  - System was not configurable
  - Once the people who built the system retired, no updates

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Oklahoma's WellSky Human Services System

Accepts intakes from all providers

Incident notifications are sent automatically to case managers

Case managers complete the investigation within 10 days

State staff review the incident and the investigation to ensure appropriate action was taken

Incidents are trended for systemic improvement

Oklahoma's WellSky System

Beyond Incident Management

- The system captures additional data, not just incidents:
  - Access requests
  - Service delivery system issues
  - General questions
  - Suggestions for improvement
- Non-incidents are routed to the correct group for action depending on role/status.

Oklahoma's Landscape of Systems
Silos

CCM

- **Oklahoma Community Waiver**
- **Oklahoma Homeward Bound Waiver**
- **Oklahoma In-Home Supports Waiver for Adults**
- **Oklahoma In-Home Supports Waiver for Children**

WellSky Human Services

- **Oklahoma Advantage Waiver**
- **Oklahoma Medically Fragile Waiver**
- **Medicaid State Plan**
- **Money Follows the Person**

AVA

KIDS

Additional Considerations in Oklahoma

- Continued gaps in visibility into statewide trends due to existing silos between program offices.
- Concerns about incident underreporting led to investigating use of an interface to improve this transparency:
  - Match claims data to identify unreported incidents
- Ensuring incident categories align with the minimal critical incident definition in the Final Access Rule.
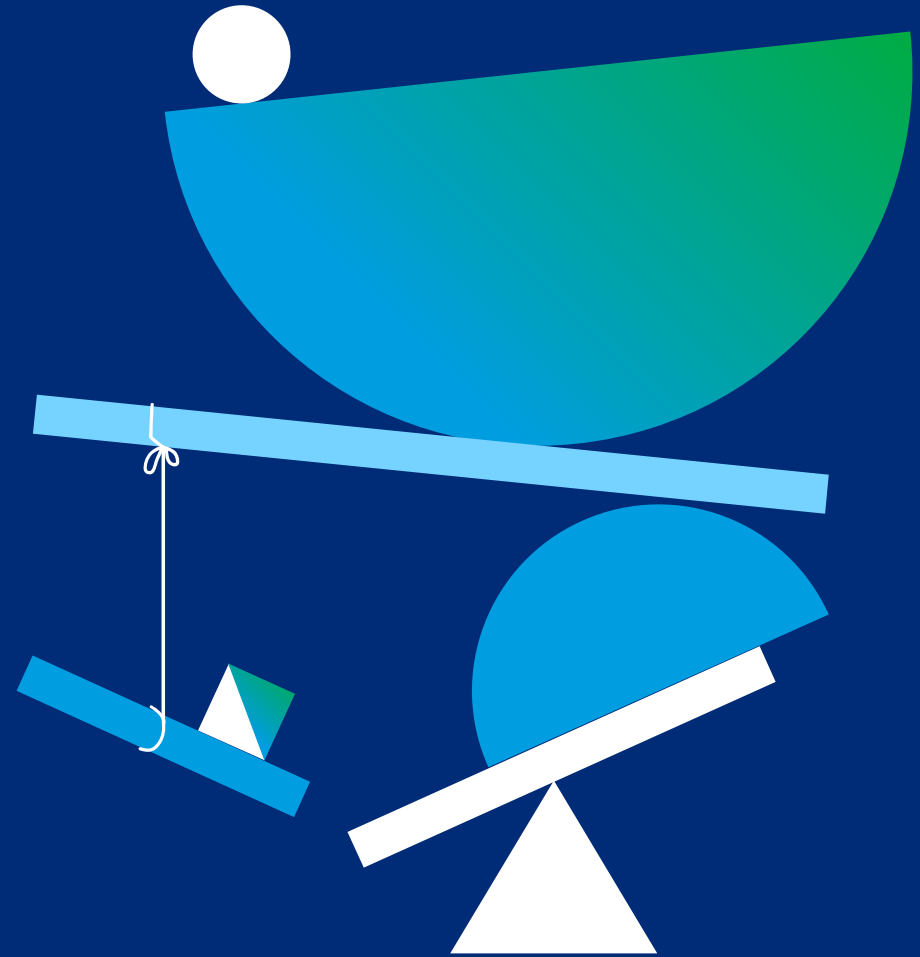
Lessons Learned in Oklahoma

OKLAHOMA Human Services

Take your time

- What are the problems we're trying to solve?
- Does what we're proposing close those gaps?
- Do we have the opportunity to do additional iterations of improvements?

Make sure you close the gap in notifications

- People who need to respond to incidents need to know that they occurred.

Identify opportunities to close silos

- Is there an opportunity to facilitate collaboration within the system?

Lots of ways to do what you need to manage incidents within the system

- What works for Oklahoma in the system build may work differently for another state.

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Delaware Program Landscape

Department of Health and Social Services

- **Division of Medicaid and Medical Assistance**
  - MLTSS under 1115 Demonstration
- **Division of Substance Abuse and Mental Health**
  - State-Funded Services
  - PROMISE Program under 1115 Demonstration
- **Division of Developmental Disabilities Services**
  - 1915(c) Lifespan Waiver
  - 1915(i) Pathways Program
- **Division of Health Care Quality**
  - Licensure Agency

Evolution of the Delaware Project

Phase 0: Incident Definition Alignment (2020)

ARPA 9817 Funding for Phase 1: Critical Incident Management Workgroup (2022–2023)

Phase 2: WellSky System Design and Configuration (2023–2024)

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Current Work

Mercer continues to provide assistance with project management, and policy and operations support.

Phase 2 is a joint project with Mercer and WellSky working in partnership

WellSky is providing IT project management, solution-mapping, design and configuration, and training services as part of their scope of work.

Current Work

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Workgroup .... **Ensure cross-Divisional collaboration, as joint decisions about the system need to be made**

Policy Analysis .... **Identify policy gaps or other necessary changes to policy that will need to be addressed as the system goes live**

Goals for Data .... **Facilitate conversations on how to use the data and address systemic improvements once the system is live**

DDDS

State Experience

Already Live

DDDS has used the WellSky Human Services platform for critical incident management since 2017.

Collaboration

DDDS is collaborating with the other three divisions on the integrated system.

Improve Their Experience

DDDS is using this as an opportunity to strengthen its own process workflow and data collected to support better reporting.

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Lessons Learned

Simple is better

Do not overthink.

Definitions/allegations should be clear.

Consider impact on the data when you are not consistent.

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DDDS
Lessons Learned

DELAWARE HEALTH AND SOCIAL SERVICES

What data are you missing?

What do you do with that data?

What data are you tracking now?

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DMMA Goals for the Integrated System

As the State Medicaid Agency, DMMA has the ultimate responsibility for reporting critical incidents to federal partners.

Currently, data is not streamlined, and much of the analysis to identify a problematic pattern is manual.

WellSky Human Services platform will have a positive impact on reporting capacity and transparency on incidents, including from a health equity perspective.
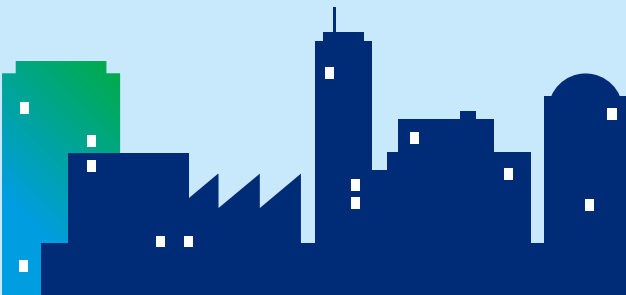
Once the electronic integrated system is complete and data is flowing, trends will be more readily identified.
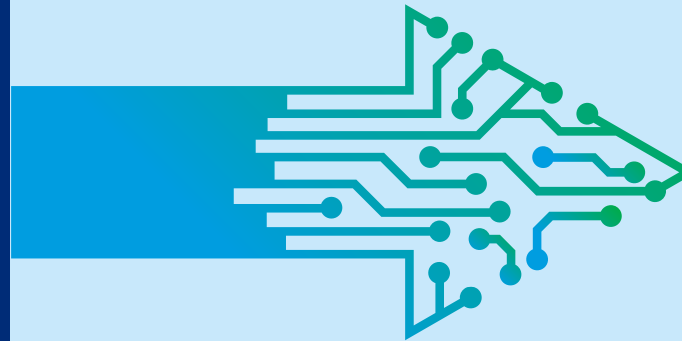
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Goals for Aggregate Reporting

Delaware is a small state, so provider agencies and DSPs can be shared across programs.

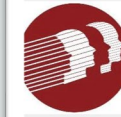**Aggregate reporting should be able to identify incident trends at:**

Provider-level: "Shady Dr. Smith" or "Problem DSP"

Member-level: Sally Sue may need an updated service plan

Incident-level: Increase in aspiration across programs may indicate a mandatory retraining of providers is needed

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Cross-Divisional Goals

Once a trend is identified that impacts more than one division, all divisions collaborate to ensure that the trend is addressed.

....

Data will then be reviewed again to ensure the intervention has addressed the trend.

Project Lessons Learned

DELAWARE HEALTH AND SOCIAL SERVICES

- Everyone has good ideas.

- Different divisions need different things out of the system.

- Some conversations are more challenging than others.

- Setting expectations and predicting the challenges helps everyone remain engaged.
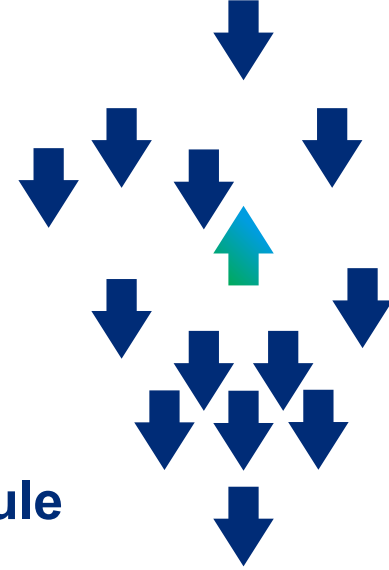
- Start by writing down the process.

- Respect people's time.

- Have an open mind!
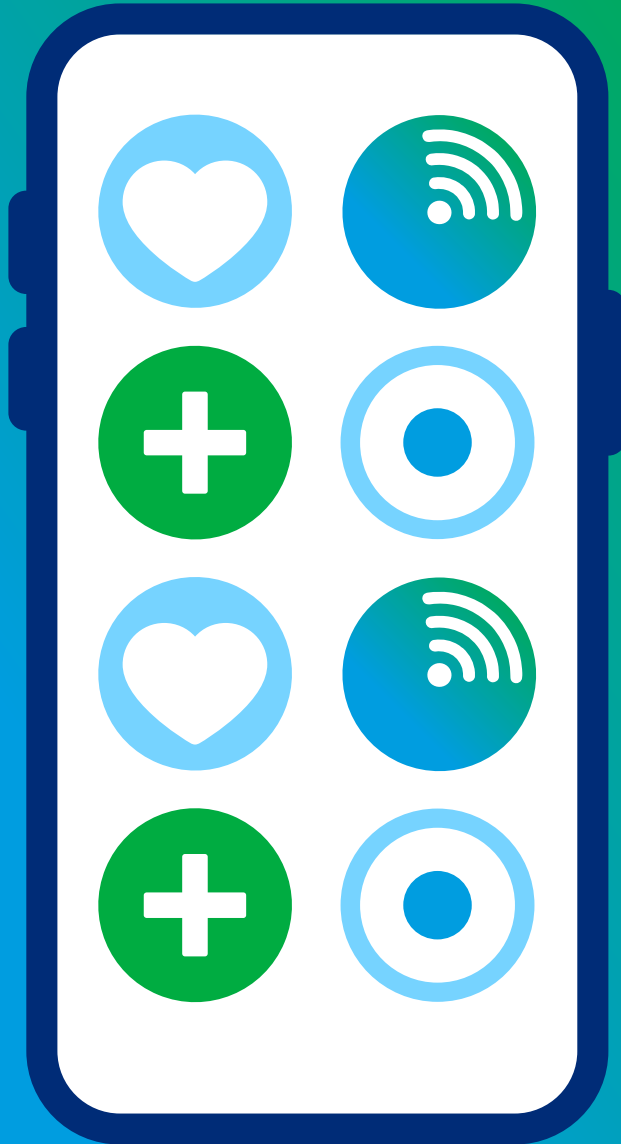
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Additional Considerations

- **The recently released final Access Rule requires the following:**
  - Grievance system for fee-for-service HCBS
  - Critical incidents identified when providers are not delivering services as expected
  - This will be highlighted in future discussions as the system is configured
- **Other systems to capture underreporting:**
  - May need to consider how the WellSky system will interface with other systems to ensure underreporting is identified and addressed

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Questions?

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