Central Valley Regional Center
Targeted Case Management and
Nursing Home Reform
Monitoring Review Report

Conducted by:

Department of Developmental Services

September 17 – 20, 2012
March 28, 2013

Mr. Robert Riddick  
Executive Director  
Central Valley Regional Center  
4615 North Marty Avenue  
Fresno, CA 93722

Dear Mr. Riddick:

Thank you for submitting Central Valley Regional Center’s (CVRC) response to the Department of Developmental Services’ (Department) Home and Community-based Services Waiver, Targeted Case Management and Nursing Home Reform draft reports for the monitoring review conducted from September 17 – 28, 2012.

The Department has approved CVRC’s responses to the recommendations made in the draft reports. CVRC’s responses are incorporated in the final reports to be sent to your Board of Directors.

If you have any questions, please contact Shelton Dent, Manager, Residential Services and Monitoring Branch at (916) 654-2140.

Sincerely,

[Signature]

JIM KNIGHT  
Assistant Deputy Director  
Community Operations Division

cc: Holly Lovett, CVRC  
John Shen, DHCS

"Building Partnerships, Supporting Choices"
March 28, 2013

Craig Costi, Board President
Central Valley Regional Center, Inc.
4615 North Marty Avenue
Fresno, CA 93722-4186

Dear Mr. Costi,

Enclosed are the final reports from the joint Department of Developmental Services' (DDS) and Department of Health Care Services' (DHCS) monitoring review of the Home and Community-based Services (HCBS) Waiver, Targeted Case Management and Nursing Home Reform programs conducted from September 17 – 28, 2012, at Central Valley Regional Center (CVRC). The period of review was from July 1, 2011, through June 30, 2012.

The reports discuss the criteria reviewed, along with any findings and recommendations and include CVRC’s responses. DDS has approved CVRC’s responses to all of the recommendations. If there is a disagreement with the findings of the enclosed reports, a written “Statement of Disputed Issues” should be sent within 30 days of the receipt of the reports to:

Department of Developmental Services
Attn: Shelton Dent, Manager
Residential Services and Monitoring Branch
1600 Ninth Street, Room 320, MS 3-9
Sacramento, CA 95814

The cooperation of CVRC’s staff in completing the monitoring review is appreciated. If you have questions, please contact Shelton Dent, at (916) 654-2140.

Sincerely,

Jill Knight
Assistant Deputy Director
Community Operations Division

Enclosures
cc: see next page

"Building Partnerships, Supporting Choices"
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EXECUTIVE SUMMARY

The Department of Developmental Services (DDS) conducted a federal compliance monitoring review of the Targeted Case Management (TCM) and Nursing Home Reform (NHR) programs from September 17 – 20, 2012, at Central Valley Regional Center (CVRC). The monitoring team selected 50 consumer records for the TCM review. A sample of ten records was selected for consumers who had previously been referred to CVRC for a NHR assessment.

Purpose of the Review
Case management services for regional center consumers with developmental disabilities were added as a medical benefit to the Medi-Cal State Plan in 1986 under Title XIX of the Social Security Act. TCM services are those “. . . services which will assist individuals in gaining access to needed medical, social, educational, and other services.” DDS implemented the TCM program statewide on July 1, 1988.

The NHR Pre-Admission Screening/Resident Review (PAS/RR) program involves determining whether an individual in a nursing facility with suspected developmental disabilities is developmentally disabled and requires specialized services.

Overview of the TCM/NHR Compliance Monitoring Protocol
The review criteria for the TCM and NHR programs are derived from federal and state statutes and regulations and the Center for Medicare & Medicaid Services guidelines relating to the provision of these services.

Findings

Section I – Targeted Case Management
Fifty consumer records, containing 4,258 billed units, were reviewed for three criteria. The sample records were 100% in compliance for criterion 1 (TCM service and unit documentation matches the information transmitted to DDS), 99% in compliance for criterion 2 (TCM service documentation is consistent with the definition of TCM service), and 100% in compliance for criterion 3 (TCM service documentation identifies the individual who wrote the note and the date the note was completed).

Section II – Nursing Home Reform
Ten consumer records were reviewed for three criteria. The ten sample records were 100% in compliance for criterion 1 (records contain evidence of DDS’ NHR referrals), 100% in compliance for criterion 2 (reporting disposition of referrals to DDS), and 100% in compliance for criterion 3 (submission of billing claims forms).
SECTION I
TARGETED CASE MANAGEMENT

Criterion

1. The Targeted Case Management (TCM) service and unit documentation matches information transmitted to the Department of Developmental Services (DDS).

Finding

CVRC transmitted 4,258 TCM units to DDS for the fifty sample consumers. All of the recorded units matched the number of units reported to DDS.

Recommendation

None

2. The TCM service documentation billed to DDS is consistent with the definition of TCM service.

Allowable TCM units are based on services which assist consumers to gain access to needed social, educational, medical or other services and include the following components: 1) assessment and periodic reassessment to determine service needs; 2) development and periodic revision of an individual program plan (IPP) based on the information collected through the assessment or reassessment; 3) monitoring and follow-up activities, including activities and contacts that are necessary to ensure that the IPP is effectively implemented and adequately addresses the needs of the consumer; and 4) referral and related activities to help the consumer obtain needed services. However, it is important to note that TCM does not include the direct provision of these needed services.

Findings

The 50 sample consumer records contained 4,258 billed TCM units. Of this total, 4,209 (99%) of the units contained descriptions that were consistent with the definition of TCM services. Forty-nine of the billed units had descriptions of activities that were not consistent with the definition of TCM services. Detailed information on these findings and the actions required will be sent under a separate cover letter.

Recommendations

<table>
<thead>
<tr>
<th>Recommendations</th>
<th>Regional Center Plan/Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>CVRC should ensure that the time spent on the identified activities that are inconsistent with TCM claimable services (sent separately) is reversed.</td>
<td>All Units have been reversed in both the UFS and SANDIS systems.</td>
</tr>
</tbody>
</table>
3. The TCM documentation identifies the service coordinator recording the notes and each note is dated.

Finding

The TCM documentation in the fifty sample consumer records identified the service coordinator or other individual who wrote the note and the date the note was completed.

Recommendation

None
SECTION II
NURSING HOME REFORM

Criterion

1. There is evidence of dispositions for the Department of Developmental Services’ (DDS) Nursing Home Reform (NHR) referrals.

   Finding

   The ten sample consumer records contained a copy of the Pre-Admission Screening/Resident Review (PAS/RR) Level I form, or NHR automated printout.

   Recommendation

   None

2. The disposition is reported to DDS.

   Finding

   The ten sample consumer records contained a PAS/RR Level II document or written documentation responding to DDS’ request for a disposition.

   Recommendation

   None

3. The regional center submitted a claim for the referral disposition.

   Finding

   The billing information for all ten sample consumers had been entered into the AS 400 computer system.

   Recommendation

   None
### SAMPLE CONSUMERS
#### TCM Review

#### ATTACHMENT I

#### TCM DISTRIBUTION OF FINDINGS

<table>
<thead>
<tr>
<th>CRITERION PERFORMANCE INDICATOR</th>
<th># OF OCCURRENCES</th>
<th>% OF OCCURRENCES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sample Size: 50 Records</strong> Billed Units Reviewed: 4,258</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. The TCM service and unit documentation matches the information transmitted to DDS.</td>
<td>4,258</td>
<td>100</td>
</tr>
<tr>
<td>2. The TCM service documentation billed to DDS is consistent with the definition of TCM service.</td>
<td>4,209</td>
<td>99</td>
</tr>
<tr>
<td>3. The TCM documentation identifies the service coordinator recording the notes and each note is dated</td>
<td>4,258</td>
<td>100</td>
</tr>
</tbody>
</table>

### NHR DISTRIBUTION OF FINDINGS

<table>
<thead>
<tr>
<th>CRITERION PERFORMANCE INDICATOR</th>
<th># OF OCCURRENCES</th>
<th>% OF OCCURRENCES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sample Size: 10 Records</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. There is evidence of dispositions for DDS NHR referrals.</td>
<td>10</td>
<td>100</td>
</tr>
<tr>
<td>2. Dispositions are reported to DDS.</td>
<td>10</td>
<td>100</td>
</tr>
<tr>
<td>3. The regional center submits claims for referral dispositions.</td>
<td>10</td>
<td>100</td>
</tr>
</tbody>
</table>