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INTRODUCTION

As a result of the COVID-19 pandemic, the Office of Developmental Programs (ODP) received approval from the Centers for Medicare and Medicaid Services (CMS) to delay the Quality Assessment and Improvement (QA&I) activities associated to Cycle 2, Year 1 until July 1, 2022. For FY 21-22, ODP will be conducting a second interim review process with several temporarily modified QA&I activities of Administrative Entities (AE), Supports Coordination Organizations (SCO), Providers, including Agency with Choice (AWC) Financial Management Services (FMS) Providers, delivering services and supports to individuals with intellectual disabilities and autism spectrum disorders, as outlined below.

The QA&I Interim Year 2 review process (Interim Year 2) is used to demonstrate outcomes in the following areas: CMS Performance Measures, Information Sharing Advisory Committee (ISAC) recommendations, health and welfare, and ODP priorities. It also serves to validate an entity's adherence with federal and state requirements.

During Interim Year 2, AEs, SCOs and Providers identified in the sample will not receive a traditional onsite review as all activities will occur remotely to include a virtual conference and virtual follow-up meetings if necessary.

This document includes answers to questions received during the QA&I Interim Year 2 Review Process training conducted in July 2021 as well as those received in the QA&I Process mailbox. Any updates to this document will be highlighted in yellow.

GENERAL PROCESS QUESTIONS

Q#	Question	Answer
1.	Who will we be part of the Interim Year 2 review?	During the Interim Year 2 Review Process, ODP will pull core samples of individuals receiving services and supports using the proportionate random representative sampling methodology as described in the Intellectual Disability/Autism (ID/A) Waivers and Adult Autism Waiver (AAW). The AEs to be reviewed during the QA&I Interim Year 2 Review will be based on the individuals selected in the Core Sample. The SCOs and Providers to be reviewed during the QA&I Interim Year 2 Review will be based on the individuals selected in the Core Sample and the SCO(s) and Provider(s) that are authorized in the individual's ISP.
2.	How will we know if we have been selected for a review?	Those entities listed in the "QA&I FY 21-22 Interim Year 2 Review List" spreadsheet, posted on MyODP, will have a review during the QA&I Interim Year 2 Review. If the entity is not listed, it will not be reviewed during the QA&I Interim Year 2 review.
3.	Are self-assessments required during the QA&I Interim Year 2 review?	Yes, during Interim Year 2, AEs, SCOs and Providers that do <u>not</u> receive a virtual review will be required to complete and submit a modified self-assessment of their performance on the provision of services and supports to individuals based on key quality metrics. A spreadsheet detailing the entities who will be required to complete a modified self-assessment will be posted on MyODP in July 2021. On September 1, 2021, each applicable entity's primary contact will receive an email with the QuestionPro link to the modified self-assessment for data entry.
4.	Where are documents (i.e. training tracker, interview questions, tools, excel spreadsheet) for QA&I located?	Documents to be used during the QA&I Interim Year 2 review can be found on www.MyODP.org using the following path: Resources > ODP Information > QA&I Process > Quality Assessment & Improvement Process Resources.
5.	Where can the PowerPoint and webinar be located?	The recording of the webinar and copy of the PowerPoint are posted on MyODP under QA&I resources.
6.	Will this also include Agency with Choice Providers?	Yes, the QA&I Interim Year 2 review will include Agency with Choice Fiscal Management Services. Any questions about QA&I AWC FMS, please email the AWC FMS mailbox at RA-PWAWCMONITORING@pa.gov.
7.	So, some entities will do an "onsite" assessment 3 times in 4 years and some entities may not do it at all for 6 years?	Over the traditional QA&I three-year cycle, an entity will receive an onsite review at least once within that cycle. Unscheduled QA&I reviews may be conducted unrelated to the regular QA&I cycle. Unscheduled QA&I reviews will be designed and implemented by ODP or the AE, as appropriate, dependent upon the circumstances prompting the need for an unscheduled review.

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Resources > ODP Information > QA&I Process > Quality Assessment & Improvement (QA&I) Interim Review Process Resources

Q#	Question	Answer
8.	What is the process for secure transfer of information, is there a specific format?	All QA&I activities must be conducted in accordance with the Health Insurance Portability and Accountability Act (HIPAA) requirements. Electronic distribution of materials is permitted, only if the parties involved have the means to distribute, receive and read information in electronic form, and the electronic distribution of the materials is completed in a secure and protected manner in compliance with HIPAA requirements.
9.	Will provider qualification dates remain the same for providers who would have been due for QA&I this year? If so, they won't line up as they used to? How will this impact providers that were to be qualified as part of Cycle 2, Year 1?	Any questions about the ID/A Provider Qualifications process, please email the Provider Qualifications mailbox at RA-odpproviderqualif@pa.gov.
10.	Some of the Providers assigned to our AE for completing reviews are not located in our region. Can we complete the review at the Provider's local office(s), or would we have to go to the Provider's main office for the review?	For Interim Year 2, the onsite review cannot be done virtually unless otherwise specified in the QA&I Interim Year 2 Process document. The QA&I Process has always been that AEs must go onsite to the Provider's office unless the Provider is not located in PA or a state contiguous to PA. An onsite review can be done at the Provider's local office as long as all of the information needed to complete the onsite review is there and readily available. As of 8/26/21, all QA&I reviews will be done virtually.
11.	How do we update the primary and/or secondary QA&I contacts in MyODP?	Any changes to the primary and/or secondary contacts should be submitted by using the following link: ODP Quality Assessment & Improvement Contact Information Form and can also be found on MyODP. Changes can be submitted throughout the year and ODP will post an updated version of the QA&I Contact List spreadsheet at least every 2 weeks during the months of June-August. As a reminder, it is the responsibility of the entity to ensure that this information remains up to date.
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13.		

INDIVIDUAL SAMPLE QUESTIONS

Q#	Question	Answer
14.	Is there a minimum or maximum number of individuals for the sample per agency?	No, the number of individuals identified for the AE, SCO and Provider will vary with no minimum or maximum.
15.	If an individual in the sample is no longer receiving services from an entity, will the individual be replaced in the sample?	For the QA&I Interim Year 2 review, if an individual stopped receiving services from an entity during the review period, a review will still be completed for the timeframe the individual was receiving services from the entity. If remediation is required for the individual record, remediation by exception should be selected. If an individual meets one of the criteria below after the review period, ODP and the AE must still complete the record review of the individual. If remediation is required for the individual record, remediation by exception should be selected. i. Deceased, ii. Moved out of state, iii. No longer in a waiver or iv. Individual is no longer receiving services from the entity.
16.	If multiple providers are identified in an ISP, will that individual be sent to each provider as part of their sample list?	If an individual receives services and supports from multiple Providers, all Providers authorized in the individual's ISP will be reviewed.
17.	Who will be sending providers their individual sample list?	ODP and AEs will contact entities included in the Interim Year 2 review to request required documentation. ID/A Providers will be receiving their sample from an AE and AAW only Providers will be receiving the sample from BSASP. If an ID/A Provider has not received any information from the AE who is assigned to complete the Interim Year 2 review, please contact the AE. If an AAW only Provider has not received any information from BSASP, please email the QA&I Process mailbox.
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PROVIDER SPECIFIC QUESTIONS

Q#	Question	Answer
20.	Am I understanding correctly that my lead AE may not be the one conducting my review?	Correct, during this Interim Year 2 Review Process, the Assigned AE may be different than the AE identified in the Home and Community Services Information System (HCSIS) for Provider Qualifications.
21.	If one AE will be the lead as assigned based on an individual selected; and if there is a second individual through a different AE, the provider will send all information to the lead? Or to both?	When a Provider is authorized for services with multiple AEs, the Provider will be contacted by the different AEs requesting information pertinent to individuals in the sample selected. The Provider will need to submit the specific documentation requested from each AEs.
22.	On the QA&I Interim Year 2 Review List Provider Tab, there are instances where the words "Record Review Only" are beside a Provider's name. What determines if a Provider will receive a record review only versus a full review?	ODP selects a sample of individuals receiving services and supports using the random sampling methodology described in the ID/A waivers and the AAW. Since the Providers are identified based on this sample of individuals, there could be cases where a Provider was identified and participated as part of the QA&I Interim Year 1 process. If this did occur, ODP reviewed each Provider to determine if a full interim review will be conducted or not. If it was determined that a full review will be conducted, both the data and policy and individual record review questions must be answered. If it was determined that a record review only will be conducted, the individual record review questions must be answered; the data and policy questions will not be answered.
23.	Providers can be included on the QA&I Interim Year 2 List under different AEs correct?	For Providers receiving an Interim Year 2 Review, the Assigned AE listed on the QA&I FY 21-22 Interim Year 2 List may be different than the AE identified in the Home and Community Services Information System (HCSIS) for Provider Qualifications. For Providers completing the modified self-assessment, the Assigned AE listed on the QA&I FY 21-22 Interim Year 2 Self-Assessment List is based on the Assigned AE identified on the HCSIS Provider Qualification screen.
24.		
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TOOL SPECIFIC QUESTIONS

Q#	Question	Answer
26.	Is the voiding of claims applicable only during the QA&I process in general?	For the QA&I training questions, when the overall percentage of the total number of staff reviewed and the total number of staff verified falls between 0% to 85.9%, the issue must be referred to ODP for review of further actions to be taken. ODP will then determine the seriousness, continued or repeated nature, and combination of issues identified to determine appropriate actions through DCAP or sanctions, which may include adjusting of claims.
27.	Does the 25% of staff still hold or is there a maximum number. We have some providers who have over 400 staff which would mean we have to review 100 staff training records, etc.	For the training questions, the reviewer will review 25% of the staff records, but no less than five staff with a maximum of 25 staff.
28.	For the training questions, how should entities submit information to the QA&I Team?	For the training questions, a QA&I training tracker has been created to assist SCOs and Providers in gathering and submitting this information. Entities should review the guidance for each training question along with the instructions included in the applicable training tracker. The QA&I Team will provide and request additional documentation when completing the review of the training questions.
29.		
30.		

INDIVIDUAL INTERVIEW QUESTIONS

Q#	Question	Answer
31.	Who is conducting the QA&I interviews?	Interviews for each individual in the core sample and Base and SC Services Only sample will be conducted by Independent Monitoring for Quality (IM4Q) local programs on behalf of ODP. AEs and ODP staff will not conduct any individual interviews during Interim Year 2. The individual interviews will begin September 1, 2021 and must be completed by December 31, 2021.
32.	Who are required to complete the pre-surveys associated to the Individual Interviews?	As part of the QA&I Interim Year 2 Process, ODP is requesting SCOs to complete the QA&I Individual Interview Pre-Survey for each individual that will be offered an interview. The information collected is similar to the IM4Q pre-survey that SCs currently complete for local programs to use when scheduling IM4Q surveys.
33.	If an individual/family has a complaint about their interviewer, who should the individual/family/SC contact to relay the complaint?	The individual/family should contact the ODP Customer Service at 1-888-565-9435 or ra-customerservice@pa.gov with any concern or complaint regarding the IM4Q local program interviewer.
34.		

MODIFIED SELF-ASSESSMENT QUESTIONS

Q#	Question	Answer
35.	What is the modified self-assessment for Interim Year 2?	The modified self-assessment focuses on CMS Performance Measures where statewide performance fell below the 86% threshold in QA&I Cycle 1, Year 3 (FY19-20). The bullets below provide a breakdown of the number of questions included in the modified self-assessment tool based on the CMS Performance Measures for each entity type: • AE – Ten questions; four Administrative Authority and six Level of Care. • ID/A SCOs – Nine questions; three Qualified Providers (training) and six Service Plan. • AAW SCOs – Seven questions; six Service Plan and one Health and Welfare. • ID/A Providers – One question; Qualified Providers (training). • AWC FMS Provider – One question; Qualified Providers (training). The modified self-assessment tool can be found on MyODP.

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Q#	Question	Answer
36.	In the QA&I Interim Year 2 Provider	For Interim Year 2, ODP did not ask Providers including AWC FMS Providers to
	Self-Assessment Review	select an individual record sample because the questions asked in the Interim
	Spreadsheet, question 43 states that	Year 2 modified Provider self-assessment were based on staff training. For AWC
	AWC FMS Providers should use the	FMS Providers however, the training that must be completed is based on an
	individuals in the record review	individual's ISP which is stated in the guidance for question 43.
	sample to determine the list of new	
	SSPs hired. However, during the	Therefore, for the Interim Year 2 modified Provider self-assessment, AWC FMS
	QA&I Interim Year 2 webinar, ODP	Providers can use the last 25 SSPs that were hired from present and are currently
	did not specify that Providers should	working with individuals when selecting the 25% of SSPs to review and respond
	select an individual record sample;	for question 43. If the AWC FMS Provider has less than 5 SSPs that were hired,
	how should an AWC FMS Provider	the AWC FMS Provider should review all the SSPs but the maximum number is 25
	answer this question?	SSPs.