

# Case Manager Certification Renewal Guidance Document

Compliance Area	Chapter Reference	Total Points Available	Where to find and What to Look for	Points Awarded Guidance
<b>Employee File Review</b>				
All direct services staff are over the age of 18	<b>Chapter 45, Section 5, a(i): All direct service staff are over the age of 18</b>	<b>1</b>	Where to find: Employee File What to look for: Proof of date of birth. This can be on the application for employment or identification card (driver's license, state issued ID, ect).	0- Any direct service worker not over the age of 18- R 1- All direct service workers reviewed over the age of 18-C
All direct services staff have current CPR and First Aid Certification	<b>Chapter 45, Section 5, a(ii): All direct service staff have current CPR and First Aid Certification</b>	<b>3</b>	Where to find: Employee File What to Look For: Certified by either the American Red Cross or American Heart Association. Expiration date should be visible. *If provider has taken the class but has not received their card yet, the provider will need to get a letter from the entity they completed training from stating they have completed training and the new expiration date. *Basic Life Saving (BLS) through the American Heart Association courses are acceptable for First Aid.	0- Any direct service worker without CPR/First Aid-R 3-All Direct Service Workers reviewed have CPR/First Aid-C
Staff providing services that require Case Management (8 hours annually)	<b>Chapter 45, Section 9, (III)(C): A case manager shall obtain and provide evidence of eight (8) hours of continued education relating to the delivery of case management services during each year of certification</b>	<b>3</b>	Where to Find: Employee File What to Look for: Documentation that supports 8 hours of continuing education on an annual basis that directly relates to case management services	0- 0-50% of staff did not have required training-R 1- 51%-70% of staff reviewed did not have required training year 1-TA (after year 1 -R) 2- 71%-95% of staff reviewed did not have required training-TA 3- 100% of staff reviewed have required training-C

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All employees providing waiver services as outlined in Section 14 (a) successfully passed a Wyoming Department of Family Services Central Registry Screening, Office of Inspector General's Exclusions Database, and successfully passed a state and national fingerprinted criminal history check	<b>Chapter 45, Section 14, (a): All Employees providing waiver services must pass a Wyoming Department of Family Services Central Registry Screening, not be in the Office of Inspector General's Exclusion Database, and pass a state and national fingerprinted criminal history check.</b>	5	Where to find: Employee File What to Look For: The Department of Health cover page that states Applicant Meets requirements. The provider should also have a copy of the OIG Exclusion List check. This can be done online by the provider and provider can print this out to keep in the file.	0- Of any employees reviewed, no evidence of successful passing of a Wyoming Department of Family Services Registry, Office of Inspector General's Exclusion Database, and a state and national fingerprinted criminal history check - R  5- Of all employee reviewed, evidence of successful passing of a Wyoming Department of Family Services Registry, Office of Inspector General's Exclusion Database, and a state and national fingerprinted criminal history check -C
All persons aged eighteen (18) or older who live in the provider home passed a DFS and fingerprint background screening	<b>Chapter 45, Section 14, (k): All person aged eighteen or older who live in the provider home passes a Wyoming Department of Family Services Central Registry Screen and state and national fingerprint criminal history check.</b>	5	*Only for those providers who are providing services in their home. Where to find: Provider's Files What to Look for: The Department of Health cover page that states the Applicant Meets requirements.	0- Any persons 18 older living in the provider home did not have evidence of passing a DFS and fingerprint background screening.- R  5- All persons 18 and older who live in the provider home passes a DFS an fingerprint background screening -C
Have documentation that staff are qualified to provide waiver services including completion dates and who provided the training.	<b>Chapter 45, Section 15, (d)(i-x) and (h-i): Provider Training Standards: Documentation that staff are qualified to provide waiver services including completion dates and who provided the training.</b>	3	Where to find: Employee File What to Look For: A Training Log Components needed in a Training Log: Type of training Who provided the training When the training was completed Signatures of the trainer Signature of the person being trained Agenda of the training topics.	0- No documentation that staff reviewed have been trained on all areas including completion dates and who provided the training. -R  1- Documentation that less than 50% of staff have been trained on all areas including completion dates and who provided the training. -TA  2- Documentation that 70% of staff reviewed have trained on all areas including completion dates who provided the training.-TA  3- Documentation that 100% of staff reviewed have trained on all areas including completion dates who provided the training.-C

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<p>All staff qualified to provide waiver services completed training in all of the following areas within one month of hire/provider certification date</p> <p>Participant Choice</p> <p>The rights of participants in accordance with state and federal laws and any rights restrictions for each participant with whom a person works (environmental modification, specialized equipment and homemaker staff are exempt from this)</p> <p>Confidentiality</p> <p>Dignity and respectful interactions with participants</p> <p>Preventing, recognizing and reporting abuse, neglect, intimidation, exploitation, and all other categories listed in the Division’s Notification of Incident form</p> <p>Responding to injury, illness, and emergencies</p> <p>Billing and documentation of services</p> <p>Releases of information</p> <p>Grievance and complaint procedures for participants, guardians, provider employees, and community members</p> <p>Implementing and documenting participant objectives and progress on objectives</p>	<p><b>Chapter 45, Section 15, (d)(i-x) and (h-i):</b></p> <p><b>Provider Training Standards:</b></p> <p><b>Documentation that staff are qualified to provide waiver services including completion dates and who provided the training.</b></p>	2	<p>Where to find: Employee File</p> <p>What to Look For: A Training Log</p> <p>Components needed in a Training Log:</p> <p>Type of training</p> <p>Who provided the training</p> <p>When the training was completed</p> <p>Signatures of the trainer</p> <p>Signature of the person being trained</p> <p>Agenda of the training topics.</p>	<p>0- 0%-75% of staff reviewed have been trained on all areas within one month of hire/provider certification date. -R</p> <p>1- 76%-99% of staff reviewed have been trained on all areas within one month of hire/provider certification date-TA</p> <p>2- 100% of staff reviewed have been trained on all areas within one month of hire/provider certification date-C</p>

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Provider and Provider staff have current certification in CPI, MANDT or other entity approved by the BHD or required documentation of a "no restraint" policy in place	<b>Chapter 45, Section 18, (I): Provider and provider staff have current certification in CPI, MANDT, or other entity approved by BHD (For organizations that perform restraints only)</b>	<b>3</b>	Where to find: Employee File What to Look for: A certificate from either CPI or MANDT with the employee name, date of training, trainer and expiration date.	0-Any of reviewed staff did not have required CPI or MANDT certification- R 3- All reviewed staff have required CPI or MANDT certification- C
All staff implementing a PSBP been given participant specific training on the PBSP and on specific positive de-escalation techniques and interventions prior to beginning work with the participant	<b>Chapter 45, Section 18, (I): Provider and provider staff have current certification in CPI, MANDT, or other entity approved by BHD (For organizations that perform restraints only)</b>	<b>1</b>	Where to find: Employee file What to Look for: Proof of training in the form of a signed training form. Case Managers should be noting this training in their CMMR and include who was trained as well as the date of the training.	0- Staff reviewed have no evidence of being trained on any PBSP used for the participants they serve. -R 1- Staff reviewed have evidence of being trained on any PBSP used for the participants they serve -C
<b>Policy Review</b>				
All written policies and procedures are available upon request and updated or revised with rule or policy changes	<b>Chapter 45, Section 6, (a)(xi)(A-B): All written policies and procedures are available upon request and updated or revised with rule or policy changes</b>	<b>1</b>	Where to Find: Participant Handbook, General Policies and Procedures are examples of where this can be located. Provider will be responsible for providing this directly to Division staff. What to Look for: Provider will give documentation or process that shows that all policies and procedures are available to participants, guardians, and Division staff.	0- Policies and procedures are not available upon request or are not revised with rule or policy changes 1-Policies and procedures are available upon request and are revised with rule or policy changes -C
All written policies and procedures have been reviewed at least annually with all employees.	<b>Chapter 45, Section 6, (a)(xi)(C): All written policies and procedures have been reviewed at least annually with all employees</b>	<b>1</b>	Where to find: Employee File or General Provider Files What to Look For: Evidence of review of all policies and the acknowledgement from staff that they are aware of the policy. This can be in the training log or as a signed form or an agenda for example.	0- No, policies and procedures are not available, updated or revised or reviewed annually with staff-R 1- Yes, policies and procedures are available, updated or revised, and reviewed annually with staff-C

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<p>Have policies and procedures in place to ensure all critical incidents described in Section 20 are reported to the division</p>	<p><b>Chapter 45, Section 20, (e): Providers have policies and procedures in place to ensure all critical incidents described in Chapter 45, Section 20, are reported to the Division.</b></p>	<p>1</p>	<p>Where to Find: Provider Policy and Procedure            What to Look for: Policy and procedure should include all categories of incidents reported to the Division and other authorities, how they are reported, who reports them, when they are reported and who they are reported to.            *Best practice note for providers:</p> <ul style="list-style-type: none"> <li>• Each category be defined for staff using Wyoming state statute from Chapter 45 as a guide.</li> <li>• Have local DFS, P&amp;A, and law enforcement phone numbers and contacts posted for staff for easy access reporting</li> <li>• Ensure specific contact names are reported into the BHD online reporting system whenever possible.</li> </ul> <p>Categories reported to the Division, Department of Family Services, Protection and Advocacy, the case manager, legally authorized representative (if there is one) and law enforcement immediately after health and safety is ensured:            Suspected abuse, suspected self-abuse, suspected neglect, suspected self neglect, suspected abandonment, suspected exploitation, suspected intimidation, sexual abuse and death.            Categories reported to the Division, Protection and Advocacy, the case manager, legally authorized representative (if there is one) within one business day:            Use of restrictive interventions, use of seclusion, injuries caused by restraints, serious injury to the participant, elopement and medication errors.</p>	<p>0- Provider does not have policies and procedures in place to ensure all critical incidents in Section 20 are reported to the Division-R            1- Provider has policies and procedures in place to ensure all critical incidents in Section 20 are reported to the Division-C</p>

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Have a process for the review of internal incident data including the incident, preceding events, follow up, causes of reoccurring critical incidents, other trends, actions taken to prevent similar events from reoccurring, evaluation of actions taken, education of personnel, and internal and external reporting requirements	<b>Chapter 45, Section 20, (e)(i): Providers have a process for the review of internal incident data including the incident, preceding events, follow up, causes of reoccurring, evaluations of actions taken, education of personnel, and internal and external reporting requirements.</b>	1	Where to find: Provider Internal Incident Report Files or the Participant File What to look for: Each of the components are captured in the internal documentation once the incident is filed. It should be what happened before, during and after an incident. Division staff will review a sample of internal incident documentation that correspond with the Participant Files they are reviewing. <i>*Best Practice Note: Keep all participant information together including internal incidents in the Participant File so any team meeting notes or plan of care changes are shown as a result of the incident or incidents.</i>	0- Provider does not have a process for reviewing critical incidents, preceding events, follow up, causes of recurrence, trends, actions taken to prevent similar incidents, evaluation of actions, education of personnel and internal and external reporting requirements. -R 1- Provider has a process for reviewing critical incidents, preceding events, follow up, causes of recurrence, trends, actions taken to prevent similar incidents, evaluation of actions, education of personnel and internal and external reporting requirements. -C
Have a process in place to notify the BHD, Protection and Advocacy, and other governmental agencies such as law enforcement and DFS if you believe a participant's health or safety is in jeopardy	<b>Chapter 45, Section 20, (a): Providers have a process in place to notify the Division, Protection and Advocacy and other agencies if you believe a participant's health or safety is in jeopardy.</b>	1	Where to find: Provider Policy and Procedure What to Look for: Evidence of a policy or procedure that outlines how the provider will contact authorities when they feel a participant's health and safety is jeopardized. <i>*Best Practice Note: Have all incident reporting and emergency reporting in the same policy that is located at all different locations services are provided at so staff caring for individuals have easy access.</i>	0- No process in place for notification of agencies when participant's health and safety are in jeopardy-R 1- Process in place for notification of agencies when participant's health and safety are in jeopardy. -C
Have a system to notify participants and legal representatives (in writing) of any associated costs that are their responsibility	<b>Chapter 45, Section 23, (a): Provider has a system to notify participants and legal representatives (in writing) of any associated costs that are their responsibility.</b>	1	Where to find: Provider Policy and Procedure What to look for: Policy that outlines cost to the participant during services. The costs cannot include anything that would violate HCBS rights of the participant (such as charging a cost to access participant's personal items).	0- No evidence of system to notify participants and legal representatives (in writing) of any associated costs that are their responsibility.-R 1- Evidence of system to notify participants and legal representatives (in writing) of any associated costs that are their responsibility.-C

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Have a conflict of interest policy in place as well as a conflict of interest statement that is updated and signed in conjunction with each certification period.	<b>Chapter 45, Section 5, (D)(III): A Case Manager must meet the following conflict of interest requirements (1-5a.b.c.)</b>	1	Where to find: Employee File What to look for: Policy that discusses conflict of interest. Division conflict of interest statement template signed and dated by each case manager	0- Case manager has not completed an up to date conflict of interest policy and submitted it -R 1-Case manager has completed an up to date conflict of interest policy -C
<b>Provider Standards for Waiver Services</b>				
Have a systematic organization of records and process related to storage, destruction, and retention of participants records to protect participant confidentiality.	<b>Chapter 45, Section 7, (d): Provider has a systematic organization of records and process related to storage, destruction, and retention of participants record to protect participant confidentiality.</b>	1	Where to Find: Provider will need to demonstrate this by showing the staff how they keep records. What to look for: Electronic system that meet requirements Section 8, (d). This system should contain a lock (username and password) to meet HIPAA requirements and the provider will show who has access to the system. Paper System: Must meet HIPAA standards and be in a location with a lock when containing protected health information (PHI). The provider will give the Division staff who has access to this information.	0- Organization of records not apparent and needs improvement-R 1- Organization of records apparent and easily retrieved-C
All service locations have an external inspection within the last 36 months or a "No Services in a provider owned or controll location" form signed and dated	<b>Chapter 45, Section 13, (d)(i-v): All service locations have an external inspection within the last 36 months</b>	1	Where to find: Provider Files What to look for: Inspection that is signed with a date, who conducted the inspection and if there are any deficiencies. If there are deficiencies, they must be corrected within 30 Days. If unable to correct them in 30 days, the provider must have a plan on file to correct the issues. No services can be done in a service location that has uncorrected deficiencies. *Note: Internal inspections are NOT required for participant homes unless owned and controlled by the provider (provider name on the lease, provider or provider staff own the home). *All new service locations must have an external inspection done before services were provided there.	0- Any site reviewed that did not have an inspection the past 36 months-R 1- All sites reviewed have an inspection in the past 36 months-C

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Have emergency plans and procedures as outlined in Section 13 f (i) Fires Bomb Threats Natural Disasters earthquakes, blizzards, floods, tornados, fires Power Failures Medical Behavioral Emergencies Missing Person Safety During Violent or Threatening Situations Vehicle Emergency Supervision for both participants and children under 12	<b>Chapter 45, Section 13, (f)(i-iv): Provider has emergency plans and procedures for the following categories: Fire, bomb threats, natural disasters (earthquakes, blizzards, flood tornados, fire (wild)), power failures, medical emergencies, behavioral emergencies, missing person, safety during violent or threatening situations, vehicle emergency.</b>	3	Where to find: Provider Files What to look for: • Clear record of each type of drill being reviewed annually on EACH shift if providing 24 hours services. Review to include identification of concerns (if any) and follow up to any concerns listed. <b>OR</b> • Clear record of each type of drill being reviewed during working hours if not providing a 24 hour service on EACH shift. Review to include identification of concerns (if any) and follow up to any concerns listed. <b>AND</b> • Clear record of one fire drill per shift having an evacuation of participants annually. Notes: Annually is defined by the beginning of the provider's last certification to expiration date of the certification. Drills must be run during this period of time. ****If a new location is opened within two months of certification expiration, drills must be at least reviewed. Any other new location older than two months old must meet the above requirements for certification.	0- No evidence of all emergency plans and procedures being implemented-R 3- All emergency plans and procedures being implemented-C
Emergency plans includes a plan that assures that there is a continuation of services when emergencies occur	<b>Chapter 45, Section, h (ii)</b>	1	Where to find: Provider files What to Look for: Emergency plans and provider policy and procedures.	0- Any emergency plans reviewed did not have a plan to continue services in an emergency-R 1- All emergencies plans reviewed have a plan to continue services in an emergency-C
<b>Case Management Services</b>				



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Demographics in the plan of care and EMWS appear to be up to date with no noted differences between the master file and EMWS.	<b>Chapter 45, Section 9, (d):It is the case manager's responsibility to maintain the current physical and mailing addresses of the participant and legally authorized representative(s) at all times and update any changes to the Division and other providers.</b>	<b>3</b>	Where to find: EMWS and the participant's master file. What to look for: Participant tab in EMWS the information in this area should match what is in the demographics section of plan of care and any external documents such as an emergency face sheet or cover sheet in the participants master file. Phone numbers and addresses in the contacts section in EMWS should match the demographics page for applicable parties listed on the demographics page.	0- 0-50% of staff did not have required training-R 1- 51%-70% of staff reviewed did not have required training-TA 2- 71%-95% of staff reviewed did not have required training-TA 3- 100% of staff reviewed have required training-C
Transition plans, modifications, terminations and exits are completed as required in EMWS	<b>Chapter 45, Section 9, iii(B): The case manager shall coordinate transition plans when the participant chooses to change, stop, or add providers to his or her individualized plan of care, or exit the waiver.</b>	<b>1</b>	Where to find: EMWS and Improv What to look for: EMWS- look at plan enrollments and review modifications that have been filed. Look for response time to be within seven business days when corrections are requested to meet rule. Look in Document library for transition checklist and supporting documentation. IMPROV- look in the complaints section to determine if any complaints have been filed since the previous certification report.	0 -Transitions/modifications not completed as required and/or complaints have been filed within the past year - R 1- Transitions and modifications are completed as required - C

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Service observations are completed as required and signature is obtained from the provider who was observed.	<b>Chapter 45, Section 9, viii: The case manager shall monitor and evaluate the implementation of the participant's individualized plan of care. Chapter 45, Section 9, vi: If the participant chooses to self-direct services on the waiver, the case manager shall monitor the services of the Financial Management Services utilized by the participant to self direct in accordance with the approved waiver.</b>	5	Where to find: Participant File, EMWS Case Manager Monthly Case Review What to look for: Documentation in the monthly case review of service observations occurring as required for all providers on the participant's plan of care: quarterly for all habilitative services (Services the require a goal) and every six month for all other services. Signed Home Visit and Service Observation Signature form. Any other supporting documentation that the case manager may have.	0-Service Observations are not completed as required and/or signatures are not obtained - R 5- Service Observations are completed as required and signatures are obtained - C
The case manager shall complete and submit the IPC, including all required components, in EMWS at least thirty (30) days before the intended plan start date.	<b>Chapter 45, Section 10, d: The individualized plan of care shall not exceed twelve (12) months and shall be developed in accordance with state and federal rules, which includes the submission of the complete individualized plan of care to the Division at least thirty (30) days prior to the plan start date.</b>	3	Where to find: EMWS What to look for: Plan enrollment. Choose the plan year you are looking for and then check the History tab to determine dates of submission and interactions between the case manager and Division staff.	0- Plan is submitted late with no note in system indicating approval for a late plan by the Division-R 3-Plans are submitted on time in EMWS-C

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The case manager has evidence of completing team meeting notes and participant specific training and notes that providers on the plan received these items as required	<b>Chapter 45, Section 10, c: The case manager shall provide notice of the plan of care meeting to all team members at least thirty (30) calendar days prior to the meeting. The individualized plan of care shall be reviewed at least semi-annually, when the participant's circumstances or needs change significantly or at the request of any team member.</b>	<b>3</b>	Where to find: EMWS and Participant file What to look for: In EMWS documentation in the Case manager monthly review (CMMR) and in the Document library evidence that the team meeting notification has been uploaded at least 30 days in advance of the meeting. Participant file team meeting notes should be present for all team meetings that have been held including the annual team meeting.	0-No evidence in the monthly case review, other documentation or complaints have been filed that providers have not received the listed items- R 3- Evidence that the team meeting notes and participant specific training have been completed as required and supplied to all providers on the plan-C
Monitors and evaluates implementation of the participant's IPC	<b>Chapter 45, Section 9, viii: The case manager shall monitor and evaluate the implementation of the participant's individualized plan of care.</b>	<b>2</b>	Where to find: Participant file, EMWS and Provider Non-compliance forms (if applicable) What to look for: Review Case management monthly review (CCMR) service observation and objective progress section and the Self-Directed Service Observation Billing Documentation section for evidence that objective progress is noted and needed follow up is noted. Review provider unit usage to ensure that the case manager is receiving provider documentation as required and tracking units nad billing to ensure the provider is utilizing the assigned units as agreed upon in the plan of care. If provider documentation is not received look for Provider non-compliance forms submitted and uploaded into IMPROV as well as any other documented follow up.	0- 0-75% of Case Management Monthly Review (CMMR) have the monthly documentation and unit usage complete with follow up notes as applicable EMWS-R 1- 75%-99% CMMR have the monthly documentation and unit usage complete with follow up notes as applicable EMWS-TA 2- 100% CMMR have the monthly documentation and unit usage complete with follow up notes as applicable EMWS-C

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Document all monitoring and evaluation activities, follow-up on concerns and actions completed and make appropriate changes to the plan of care with team involvement	<b>Chapter 45, Section 9, viii(D): Document all monitoring and evaluation activities, follow up on concerns and actions completed, and make appropriate changes to the individualized plan of care with team involvement as needed.</b>	2	Where to find: EMWS and Participant file What to look for: Documentation in CMMR in the following sections: Documentation of Billable services, Discussion topics, Incident Report- areas of concern and Follow up section. Participant file may contain further evidence of follow up as applicable but it should be referenced in the CMMR.	0- 0-75% of CMMR have follow up noted as applicable EMWS-R 1- 75%-9% CMMR have follow up noted as applicable EMWS-TA 2- 100% CMMR have follow up noted as applicable EMWS-C
Monitoring and oversight of medications and PRN usage is present in monthly case review	<b>Chapter 45, Section 9, f: A case manager shall be the second-line monitor for participant receiving medications.</b>	1	Where to find: EMWS and Participant file What to look for: Documentation in CMMR in the following sections: Documentation of Billable services, Discussion topics, Incident Report- areas of concern and Follow up section. Participant file may contain further evidence of follow up as applicable but it should be referenced in the CMMR.	0-CMMR do not have follow up noted regarding medications or PRN usage-R 1- CMMR monthlies have follow up noted for PRN usage and medications-C
Monitoring and oversight of the participant's medical needs are noted in monthly case record	<b>Chapter 45, Section 9, f: second-line monitoring is conducted to help ensure a participant's medical needs are addressed.</b>	2	Where to find: EMWS and Participant file What to look for: Documentation in CMMR in the following sections: Documentation of Billable services, Discussion topics in the Medical/Health section. Participant file may contain further evidence of follow up as applicable but it should be referenced in the CMMR.	0- CMMR do not summarize medical needs as applicable-R 3-CMMR summarized medical needs as applicable-C
<b>Vehicle Inspection Review</b>				
Vehicles are in good repair	<b>Chapter 45, Section 13, m(i): Vehicle are in good repair.</b>	2	Where to find: Inspection of vehicles used for transport. Provider will give a list of vehicles. What to look for: Please use the BHD Vehicle Inspection Form.	0- Any vehicles used by the provider are not in working condition or not legal to operate (example, no working headlights, turn signals, brake lights, not starting, leaking fluids, no seat belts, flat tires etc..)-R 1- Any vehicles are legally operable but are in need of maintenance and repair. This could include any repair to the vehicle body, interior dirty, exterior rust, etc..-TA 2- Vehicles are in good repair-C

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Keep and replenish a first aid kit in the vehicle	<b>Chapter 45, Section 13, m(iii): Keep and replenish a first aid kit in the vehicle.</b>	1	Where to find: Any transporting vehicle. What to look for: basic first aid supplies Best Practice: A fully stocked first aid kit	0- No first aid kit is in the vehicle-R 1- First Aid kit is kept in vehicle-C
Conduct quarterly self-inspections or have the vehicle inspected by a mechanic to ensure the vehicle is operational, safe and in good repair	<b>Chapter 45, Section 13, m(iv): Conduct quarterly self inspections or have the vehicle inspected by a mechanic to ensure vehicle is operational, safe and in good repair.</b>	1	Where to find: Provider Documentation (provider to supply this) What to look for: A self inspection done quarterly or a mechanic report done quarterly	0- No evidence of quarterly self inspection or mechanic inspections for any one of the vehicles used-R 1- All vehicles used have quarterly self inspections or mechanic inspections-C
<b>Monthly Case Review</b>				
Provider has separate records for each participant served	<b>Chapter 45, Section 8, e(ii-)</b>	1	Where to find: EMWS and Participant Master file What to look for: In EMWS that documentation in the CMMR does not contain other participant's information or data and that all information entered is specific to that participant. Participant files that each participant has a separate case record and information in that record only pertain the that participant.	0- Reviewed files are not separate record for each participant-R 1- Reviewed files are separate record for each participant- C
Home visit is completed as required	<b>Chapter 46, Section 7, iii(E)(II-III)Case Managers must provider a minimum of two hours of documented service, with at least one hour of person to person contact with the participant or guardian per calendar month and a home visit.</b>	1	Where to find: EMWS and Participant file What to look for: In EMWS that documentation in the CMMR indicates that a home visit occurred. In the participant file look for verification of the home visit as evidenced by a signed Monthly Home visit and Service Observation Verification form.	0- Reviewed files did not have evidence of the required home visit-R 1- Reviewed files did have evidence of the required home visit-C

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Discussion Topics are completed with enough detail to determine what follow up is needed for the participant to remain at baseline	<b>Chapter 45, Section 9, viii(D): Document all monitoring and evaluation activities, follow-up on concerns and actions completed.</b>	<b>3</b>	Where to find: EMWS What to look for: In EMWS that documentation in the CMMR in the discussion topic section has descriptive detail that would indicate what issues the participant may have that would require follow up to assist them to be at their established baseline. Follow up is noted in the follow up section of the CMMR and resolved as required.	0- Reviewed files did not have discussion topics completed with detail that would indicate follow up needed-R 3- Reviewed files did not have discussion topics completed with detail that would indicate follow up needed -C
Discussion with parent/staff or other team members is noted.	<b>Chapter 46, Section 7, iii(E)(II-III) and Chapter 45 Section 9 and Chapter 45, Section 9, viii(D): Document all monitoring and evaluation activities, follow up on concerns and actions completed.</b>	<b>1</b>	Where to find: EMWS What to look for: In EMWS that documentation in the CMMR has indication of contact with the parent or LAR, staff or other team members and the discussion is noted in the monthly case notes.	0- Reviewed files did not indicate discussion with parent/staff or other team members-R 1- Reviewed files indicate discussion with parent/staff or other team members- C
Follow up on Incident reports is noted	<b>Chapter 45, Section 9, viii(D): Document all monitoring and evaluation activities, follow-up on concerns and actions completed.</b>	<b>1</b>	Where to find: EMWS What to look for: In EMWS that documentation in the CMMR has indication of follow up and review of incident reports and that the Incident Report section of the CMMR is completed to indicate review and follow up.	0- Reviewed files did not have follow up noted as required-R 1- Reviewed files did have follow noted as required- C
Follow up on any previous issues are identified and summarized (Employment, PBSP, Provider or family issues, community resource referral, etc)	<b>Chapter 45, Section 9, viii(D): Document all monitoring and evaluation activities, follow-up on concerns and actions completed.</b>	<b>1</b>	Where to find: EMWS What to look for: In EMWS that documentation in the CMMR Discussion topics sections regarding Employment, PBSP, Provider or family issues and any community resource referral has every category completed and that follow up is summarized as needed to clearly understand the issue and how it was resolved or what is being done to resolve the issue.	0- Reviewed files did not have follow up noted as required-R 1- Reviewed files did have follow noted as required- C

## Case Manager Certification Renewal Guidance Document

Compliance Area	Chapter Reference	Total Points Available	Where to find and What to Look for	Points Awarded Guidance
Provider Billing and documentation review and objective progress is completed	<b>Chapter 45, Section 9, viii(A-B): The case manager shall monitor and evaluate the implementation of the participant's individualized plan of care including a review of the type, scope, frequency, duration and effectiveness of services.</b>	<b>3</b>	<p>Where to find: EMWS</p> <p>What to look for: Documentation in the CMMR in the Service Observation and Objective Progress section and the Self-Direction Service Observation and Billing Documentation section. The case manager should ensure that all 4 boxes are completed in the Service Observation and Objective progress section are completed. Observations should be clearly noted, objective progress must have a quantifiable percentage when applicable and any changes or need for updates should be included in the List of Actions section. Provider unit usage as well as noted concerns should be in the Self-Direction Service Observation and Billing Documentation section. If Provider documentation has not been received notation of the date of the filing of the Notification of Non-compliance should be noted and the case notes section should provide a detailed description of the activities that occurred regarding attempts to receive provider documentation as well as actions regarding the issue.</p>	<p>0- Reviewed files did not have notation of review of provider documentation and objective progress-R</p> <p>3- Reviewed files did have notation of review of provider documentation and objective progress- C</p>
Notes identify in detail work on IPC or IPC meetings that were held	<b>Chapter 45, Section 9, vii(A)(D): The case manager shall monitor and evaluate the implementation of the participant's individualized plan of care. Document all monitoring and evaluation activities, follow-up on concerns and actions completed and make appropriate changes to the individualized plan of care with team involvement as needed.</b>	<b>1</b>	<p>Where to find: EMWS</p> <p>What to look for: Documentation of billable services should indicate a detailed description of work on the plan of care. The amount of time billed for must have documentation that is descriptive and supports the amount of time that is associated with the documentation entry. Team meetings must be captured in the Documentation of billable services. Brief highlights of what occurred in the meeting should be in the documentation entry. "See attached" is not an acceptable entry unless it is applicable to attach notes as supporting documentation and even then there should be enough detail to justify the time associated with the documentation entry.</p>	<p>0- Reviewed files did not note work on IPC or IPC meetings being held-R</p> <p>1- Reviewed files did not work on IPC or IPC meeting being held - C</p>

## Case Manager Certification Renewal Guidance Document

Compliance Area	Chapter Reference	Total Points Available	Where to find and What to Look for	Points Awarded Guidance
Participant specific training is noted including who was trained	<b>Chapter 45, Section 15, h(ii): All case managers shall train one employee from each provider on the individualized plan of care. Training shall occur before the IPC start date and before each employee provides services.</b>	1	Where to find: EMWS and Participant files What to look for: Documentation in the Documentation of Billable services section of the CMMR indicating the date and time that training occurred as well as who was trained or the case manager can keep a copy of the Participant specific training form on file in the participant file as evidence but should still make a notation in the Documentation of Billable services section that Participant Specific Training was done.	0- Reviewed files did not show evidence of participant specific training including who was trained-R 1- Reviewed files did show evidence of participant specific training including who was trained- C
Services meet service definitions and are pursuant to participant's Plan of Care	<b>Chapter 45, Section 8, (I): Services meet service definitions and are pursuant to the participant's Plan of Care:</b>	1	Where to find: Participant's billing, tracking and documentation of services What to look for: If the services provided meet the current service definition.	0- Reviewed files did not show that the services meet service definitions and are pursuant to the IPC-R 1- Reviewed files did show that the services meet service definitions and are pursuant to the IPCIC
PBSP review is noted	<b>Chapter 45, Section 17 (xiii)Be reviewed every six (6)months by the provider(s) and the case manager to assess the effectiveness of the plan or more frequently if needed.</b>	2	Where to find: EMWS CMMR and Document library and Participant file What to look for: Indication in the Documentation of Billable Services section that the PBSP was reviewed as well as indications of any changes or updates. Review of the PBSP as applicable in the document library. Team meeting notes in the participant file should also indicate review of the PBSP.	0- Reviewed files did not have evidence of bi-annual PBSP reviews-R 2- Reviewed files did have evidence of bi-annual PBSP reviews- C
Crisis intervention is noted including details regarding what was done and referrals made	<b>Chapter 45, Section 9, viii(D): Document all monitoring and evaluation activities, follow-up on concerns and actions completed.</b>	1	Where to find: EMWS CCMR What to look for: Documentation in the Documentation of Billable Services section of the CCMR. There should be detailed notes regarding and crisis intervention that is occurring including a notation of actions taken as well as referrals that have occurred. Any items needing follow up should be noted in the follow up section of the CCMR.	0- Reviewed files did not indicate crisis intervention when applicable or no follow up was noted-R 1- Reviewed files did indicate crisis intervention when applicable with follow up noted- C



## Case Manager Certification Renewal Guidance Document

Compliance Area	Chapter Reference	Total Points Available	Where to find and What to Look for	Points Awarded Guidance
Identify a back up case manager and meet with them on a quarterly basis	<b>Chapter 45, Section 5, D(1): Identify a back-up case manager from the list of Division certified case managers for each participant. Case Managers shall meet with their designated back-up to review all participant cases on a quarterly basis. The review shall be documented in the case notes.</b>	1	Where to find: EMWS CMMR What to look for: Documentation of Billable Services there should be a notation in the notes section on at least a quarterly basis indicating that a meeting with the back up case manager has occurred and any critical issues or issues that are of high importance are discussed with the back up case manager.	0- Reviewed files did not have evidence of quarterly meeting with the back up case manager-R 2- Reviewed files did have evidence of quarterly meeting with the back up case manager- C
Provide notice of team meetings at least 30 days in advance and upload into EMWS	<b>Chapter 45, Section 10,(c): The Case Manager shall provide notice of the plan of care meeting to all team members at least thirty (30) days prior to the meeting.</b>	1	Where to find: EMWS and Participant file What to look for: Document Library section has the team meeting notice uploaded at least 30 calendar days prior to the meeting being held. Team meeting notes in the participant record has a date that matches the notice in EMWS. Any changes to the date should have a note placed in EMWS with an explanation as to what occurred along with the name of the Division staff who approved the change.	0 - Team meeting notices are not uploaded into EMWS at least 30 days prior to the team meeting 1- Team meeting notices are uploaded into EMWS at least 30 days in advance or the notes section of EMWS has an explanation as to why they could not be uploaded and the Division employee who approved this.
Monthly documentation is submitted in EMWS on or after the last day of the month in accordance with the service definition	<b>Chapter 45, Section 8, (l): Services meet service definitions and are pursuant to the participant's Plan of Care. Current Service Definition for Case Management, Page 5: The monthly unit may be billed on or after the last day of the month.</b>	1	Where to find: EMWS and participant file What to look for: Check processes to determine the date and time of submission of all case notes. If submission is prior to the end of the month check service authorization to ensure that the provider is billing 15 minute units. If they are billing the monthly rate then they must adhere to the rule or not submitting monthly case records on or before the last business day of the month.	0-Reviewed files had CMMR's that were submitted prior to the last day of the month and are billing using the monthly unit - R 1-Reviewed files were either billing the 15 minute unit or all case notes were submitted on the last day of the month or after the last day of the month in which the service was provided.

## Case Manager Certification Renewal Guidance Document

Compliance Area	Chapter Reference	Total Points Available	Where to find and What to Look for	Points Awarded Guidance
Documentation is completed and submitted into EMWS within 60 days of completion of service.	<b>Chapter 45, Section 8, (k): Documentation is legible, retrieved easily, complete and unaltered. Chapter 3, Section 7, (c) Availability of records. Provider Support Call Notes October and November 2017</b>	<b>3</b>	Where to find: EMWS What to look for: Check Processes to determine date and time of submission of all case notes. The provider should not be more than 60 days behind at any given time due to the CMMR being a participant's medical record and the means in which the Division determines delivery of services for waiver participants. Review case notes submitted in EMWS to ensure completion.	0- Reviewed files did not have documentation submitted into EMWS within 60 days-R 3- Reviewed files did have documentation submitted into EMWS within 60 days- C
<b>Total Points</b>		<b>88</b>		