

Heightened Scrutiny Process for Providers

1. Providers will be identified by TennCare on the 1st of each month or the next business day
2. Selected Providers will be contacted by a DIDD Regional Office Point of Contact via email with a **standard letter** containing the following elements:
 - Separate letters FBD and Non-FBD
 - Date and time for which your review has been scheduled (review should take no longer than 2-3 hours depending on the sample size)
 - Prompts for the provider to complete a Wufoo survey linked in the letter.

**Note that the survey will not let you save data and go back at a later time. It is highly recommended that you collect your data and have it available to populate the questions in the survey. A copy of the survey will be attached to the letter for your convenience to assist in survey preparation and was given to providers when TennCare did their heightened scrutiny presentation back in February and can be found at the found on the TennCare website

Element # 1 Heightened Scrutiny Assessment Tool for FBD:

<http://tn.gov/assets/entities/tenncare/attachments/HeightenedScrutinyAssessmentToolFBDayforProv.pdf>

Element #1 Heightened Scrutiny Assessment Tool for Residential and Adult Day Care Settings:

<http://tn.gov/assets/entities/tenncare/attachments/HeightenedScrutinyAssessmentToolResidentialandADCl.pdf>

- **Providers are asked to not forward the link to other providers.**
The survey data collection is **time sensitive** and provides us with a snapshot in time. Therefore, providers will receive their link when their heightened scrutiny review is coming up.
- Providers will be prompted to provide the following documents ONLY if not included in the previous self-assessment Wufoo submission or if there is new information. This document list can be found on the TennCare website

Element #2 Heightened Scrutiny Documentation Assessment tool:
<http://tn.gov/assets/entities/tenncare/attachments/HeightenedScrutinyDocumentationAssessmentTool.pdf>

- Written mission/vision statement documenting the core values
 - Promotional info such as pamphlets or fundraising materials that describe the services offered
 - Agency policies and procedures
 - ✓ Participant rights and due process
 - ✓ Participant dignity and respect
 - ✓ Grievances and Complaints
 - ✓ Modifications to the HCBS Settings Rule
 - ✓ Staff training related to the P&P listed above
 - The agency's current transition plan and supporting documentation of ongoing activities to meet stated deliverables and timelines in the plan
- Letter states that notification regarding sample size and person-specific documentation will be requested once the Wufoo survey is complete.
 - Now that the pilot sites are out of the way, the pre-planning schedule will generally run 2 months ahead of schedule. For example, providers being reviewed in August will receive notification in June.
3. Providers will complete a Wufoo survey no later than the 20th of the month they are selected for review or the next business day
 - Facility Based Day
 - Non-Facility Based Day
 4. Provider will be contacted with specific criteria for the sample (i.e. people who leave the FBD site, people who never leave the program, people who are employed) for heightened scrutiny review no later than the 25th of the month. The provider will then provide back to DIDD contact the specific people in the sample size.

- There may need to be some back and forth between the reviewer and the agency to ensure the information on the Wufoo survey/Assessment Tool is accurate because that is where the sample will come from.
- Sample size (established per setting site)
 - Agencies serving 30 or fewer — 3 people
 - Agencies serving 31-60 — 4 people
 - Agencies serving 61-100 — 5 people
 - Agencies serving 101 or more — 5% up to a maximum of 15 people

5. Starting on the 25th no later than the next 5 business days, a DIDD point of contact will request documentation on each person in the sample via email letter including instructions for PHI data submission. This will include:

- Most recent month's daily notes (only if they differ from ISC/CC notes) for the sample and if applicable
- Most current ISP
- Individual experience assessments from Wufoo
- Most recent month of other data collection supporting implementation of person's ISP for the sample (if applicable) for example, monthly reviews, staff instructions, BSP data, transportation log, activity data, modification to the rule data, etc.
- Last 6 months of any staff satisfaction surveys or exit surveys (if available)
**PHI cannot be uploaded into the Wufoo database and must be sent electronically in a secure manner.

6. The Provider and/or ISC will submit required documentation to the DIDD reviewer no later than the 15th of the following month.

7. In order to organize the review, DIDD and TennCare reviewers will be assigned people in the sample for whom they will complete a documentation review and interview at the onsite visit.

8. Reviewers (DIDD and TennCare) will prepare for the review

9. **Onsite Assessment** will consist of the following elements: (See Element #3 Documents on the [TennCare Website](#))
- **Onsite Physical Assessment**—Observation of the physical location to make sure that it is not located on the grounds of institutional facilities (Nursing homes, Mental institutions, ICF's) or that the facility itself does not have the qualities of an institutional setting.
 - **Onsite Tour interviews (Facility Tour/Management Interviews)**—while onsite, the HS team will want to tour the setting and observe the qualities and characteristics of the setting. The team will want to talk with management staff about how community integration is encouraged and is evident in the services and supports provided. Other providers have had presentations prepared to show examples of what they are doing.
 - **Person supported interviews**
 - **Staff interviews**
***There will not be an exit interview with the provider following the tour.
10. **Post On-Site Activities**—The review team will need to meet to review and compare information and observations gathered from the on-site review.
- A written summary will be prepared for an outside Advocacy Review Committee. The summary will include:
 - Results of data collection
 - Summary of documentation review
 - Summary of interview responses
 - Possible Transition plan revisions needed based on HS review
 - TennCare is establishing a schedule for ARC to review Tool findings
11. Providers will receive a letter via email from the reviewer of HS review findings with additional instructions for transition plan if needed. This will occur no later than 30 days after the Advocacy Review committee meeting.
12. TennCare and ARC will conclude findings in May of 2017
13. Post a list of HS review sites for public comment June 1-June 30 2017

Additionally, the complete heightened scrutiny training packet can be downloaded from the TennCare website at:

<http://tn.gov/tenncare/topic/transition-plan-documents-for-new-federal-home-and-community-based-services>

The heightened scrutiny resources are under the HCBS Settings Resources heading.

Please contact Kimberly J. Black, Director of Residential Services, with any questions: p. 615-770-6820 kimberly.j.black@tn.gov