

PRSN Administrative Review Tool

Date: _____

Pre-site activities:

- Review recent QRT recommendations, WSH & CLIP reports; review last Administrative Review Summary Report and CAPs
- Review recent chart review trends
- Request current organization chart or staff phone directory- identify all DMHPs and recently hired (direct and non-direct) staff members
- Request list of designated DMHPs

Scoring range: 1-absent, 2-partially developed, 3-meets minimum requirements, 4- exceeds minimum requirements, 5- consideration for regional model

#	ITEM	SCORE	COMMENTS
1. Administrative Services			
a	Participation in local emergency/ disaster events Measure- Local FEMA Coordinator/ coordination efforts		
b	Comply with PRSN Medicaid Fraud and Abuse Plan Measure- Review agency Plan/ staff training		
c	Reports of allegations of Medicaid Fraud or Abuse from agency/ staff in the past 12 months Measure- Review agency training, internal tracking/ investigation system, tracking log, and interview question # 11.		
d	Comply with PRSN Grievance Policy Measure- Review agency complaint policy and complaint file for responsiveness		
e	Comply with “all applicable state and federal laws”. Measure – Audit contract compliance and review policies and procedures for language.		
f	Comply with state and federal non-discrimination policies (such as Title IV or the Civil Rights Act of 1964, Age Discrimination Act of 1965, Rehabilitation Act of 1973, Title II and II of American with Disabilities Act) and DSHS Administrative policies. Measure – Review provider administrative policies and procedures for specific references to Acts		
g	Review DMHP safety policy; comply with state contract Marty Smith safety outreach protocols. Measure- Review agency policy		
h	Review agency process for segregating DSHS and non-DSHS data/ information. Measure- Agency policy and process for “flagging” payor source (frequency of verifying payor such as monthly, by whom at the agency, ect)		
i	Review agency policies, verify updated and reflect current practice/ acronyms (DBHR, Profiler, delete Ex. N reporting requirements, PCPC coordination, ect) Measure- Review agency RSN-related policies		

#	ITEM	SCORE	COMMENTS
2. General Services			
a	Purchase State Plan services, if the contractor is unable to provide the medically necessary mental health service. Measure- Review chart(s) of example(s)- such as crisis/ respite or diversion beds		
b	Provide written Interpreter Services notifications in prevalent languages (PRSN Rights) Measure- Staff Interview #1		
c	Mechanism to ensure enrollee notification/implementation of applicable (direct service related) changes in state law. Measure- Review agency policy and evidence (if applicable)		
d	Advanced Directives written information is available (42 CFR 438.6.i.3, PRSN Rights) Measure- Review written information in clinical chart, how information is made available/ distributed and internal agency tracking system.		
e	Psychological assessments and services are made available. Measure- Review chart(s) of examples, verify staff specialists list for internal resources		
f	Maintain agency call logs that track date of call, type of call (information, requesting services, complaint/ grievance) and date of attempted resolution. Measure- Evidence of agency call log		
g	Comply with PRSN Seclusion and Restraint policy Measure- Review agency outpatient, residential, and inpatient policy (as applicable). Review agency incident reports for events that result in seclusion or restraint		
h	Comply with PRSN Residential Services Plan Measure- Review agency residential plan, if applicable.		
i	Medicaid clients, only: Evidence of client notification of primary clinician terminated (no longer employed at agency) in clinical chart, within 15 days of separation. Measure- Review chart(s) of examples, verify written or verbal notification provided. (includes plan for re-assignment, new contact provider name, and who to contact with questions).		
3. Crisis Services			
a	Regardless of funding sources, provides crisis response services Measure- CMHC random data pull		
4. HIPAA			
a	Comply with PRSN Privacy Statement/ Practices and agency HIPAA security policies Measure- Review agency policy and procedures, PRSN Privacy Statements made available (see HIPAA checklist)		
b	Demonstrate HIPAA privacy practices Measure- Private interview rooms, front reception privacy reminders, computer monitor privacy screens, conducted/ completed risk assessment (see HIPAA checklist)		

#	ITEM	SCORE	COMMENTS
5. Quality Assurance Activities			
a	Quality Management Plan is present and reflects applicable WACs and Contract terms. Measure- Review of agency QMP (see QA checklist)		
b	Participate in an on-going PRSN and agency Quality Management process to ensure continued assessment and improvements in the agency, and measure overall system effectiveness (42 CFR 438.240.a.2) Measure- Participation on the QUIC, and other PRSN committees, evidence that related WAC and Contract terms are put into practice (see QA checklist)		
c	Ensure provider is responsible for collecting Critical Incident information and Sentinel Events, per PRSN Reporting Policy and form Measure – Review of Provider Critical Incident file for past 12 months for required documentation and analyze submitted reports to PRSN for trends		
6. ADA Compliance			
a	Ensure ADA building accessibility compliance (PRSN Rights) Measure- Review Agency ADA self-assessment		
7. Enrollee Rights (Clinical Chart documentation)			
a	Second opinion appointments occur within 30 days, when requested. • 2nd Intakes for non-Medicaid, within available resources. Measure- Evidenced by sample of clinical charts and staff interview # 4		
b	Choice and change of providers is provided, when requested. Measure- Evidenced by sample of clinical charts and staff interview # 10		
c	Clients have access and right to review their clinical file. Measure- Evidenced by sample of clinical charts		
d	Agency policy on individual requesting/ accessing medical records Measure- Agency policy		
e	Release of Confidential information- how is disclosure documented? Measure- Review agency policy and mechanism		
8. State Hospital And Ancillary Services Liaison			
a	CLIP: Participate in the transition/ discharge planning, resource management and written Working Agreements with each CLIP facility an enrollee resides. Measure- Interview agency CLIP liaison and facility		
b	WSH: Participate in the transition/ discharge planning, resource management and written Working Agreements with WSH. Measure- Interview agency WSH liaison		

#	ITEM	SCORE	COMMENTS
9. Regional Projects & PIPs			
a	Participate in the development/ implementation of PRSN under and over-utilization protocols. Measure- Data pull and QUIC participation		
10. Posted Information and Walk-through Activities (remains an active item)			
a.	Ombuds Information available Measure- Brochures and/or flyer in reception/ main lobby, space used for Day Treatment/ Clubhouses, and out-stations		
b	Posted "Point to Your Language" sign Measure- Posted in reception/ lobby		
c	Posted Advance Directive information Measure- Posted in reception/ lobby (new PRSN brochure dated 2/08)		
d	Posted general enrollee rights in all prevalent languages. Measure- Posted in publicly accessed areas		
e	PRSN or agency brochure / information explaining available benefits. Measure- Available benefits information is made available.		
f	Request medical records to explain/ walk through process when an individual requests to review their own medical record. Reference PRSN policy 2.12 Measure- Staff explain process		
g	Confirm contractor maintains all necessary licenses, certifications and/or permits as required by law. Measure - Provider will produce current licenses/ certifications (Case Management, E&T, Boarding House) and other applicable documents as requested.		
h	(KMHS, only) E&Ts walk- through for : <ul style="list-style-type: none"> • Posted Client Rights- OP and InPt • HIPAA Privacy Practices – private interview rooms, privacy screens, ect. • Ombuds Information – brochures or flyer posted • Security and Safety- review unit inpatient policy 		
11. Personnel			
a	Ensure number of qualified agency personnel, age appropriate, sufficient number, and access/ travel standards Measure- Review caseload numbers, Access to Specialists (kids, older adult), use of minority Specialists		
b	Neither employ or contract with person excluded from participation in Federal Health Care programs. Measure- Random review of 10% of personnel files of recently hired staff for website check (see Personnel checklist)		
c	Verify monthly exclusion process; agency monthly attestation letters Measure- Interview personnel staff involved in monthly process, review monthly back-up names (such as for names reviewed each month)		

#	ITEM	SCORE	COMMENTS
d	Random sample review of agency employee files for training and/or evaluation plans Measure- Random review of 10% of recently hired staff (see Personnel checklist)		
e	Verify primary source verification for education and credentials (state licensure can substitute primary source documents)		
f	Signed statements are maintained on file acknowledging understanding and agreement to abide by HIPAA requirements. Measure – Random review of 10% of recently hired staff (see Personnel checklist)		
g	Agency staff have received HIPPA training. New staff receive training within 30 days of start date. Measure – Random review of 10% of recently hired staff (see Personnel checklist)		
h	Verify Medicaid fraud and abuse training. Measure – Random review of 10% of recently hired staff (see Personnel checklist)		
i	Verify Safety and Violence Prevention training occurs annually. Measure- Random review of 10% of recently hired staff & DMHPs (see Personnel checklist)		
j	DMHPs only: Evidence of deputized date in personnel file. Measure – Random review of 10% of DMHPs (see Personnel checklist)		
k	Random sample of Exit Interviews from recently departed staff (within the past 12 months) Measure- Random review Exit Interviews for trends		Remains active on tool
l	Verify no Physician Incentive Plan(s) Measure- Random review of Physician personnel records (FTE staff and contractors)		
m	Staff interviews (see attached, staff interview questions) Measure- Conduct Staff interviews with 10% of direct service staff		

Agency Staff Interview Questions

Staff interviewed: _____

Team assigned: _____

PRSN staff: _____

1. Do you know how to access Interpreters/ Hearing Impaired services?
2. How and when (frequency) would you access a minority Specialists consultation, such as an African American specialists?
3. If a Medicaid client or family member requested a second opinion, what are the next steps?
4. What is the role of the Ombuds?
5. When you are reviewing treatment pace and realize you are nearing the maximum number of authorized hours for the timeframe, what are the next steps?
6. When requesting an authorized episode of care (PRAT), how are you given opportunity to advocate for a Medicaid client so that they are not denied, limited, or discontinued medically necessary mental health services?
7. What are the two PRSN Practice Guideline diagnoses for FY 11?
 - A. Do you know where to find them?
 - B. Do you know how the PRSN monitors?
 - C. Can you give me one example of a guideline requirement.
8. If you have a YIU/AIU or WSH/ CLIP client assigned to your caseload, how do you participate on their treatment/ transition planning?
9. If a client requested a change of providers, what are the guidelines listed on the client rights form?
10. Are you aware of your roles, responsibilities, and communication channels when you are concerned of agency or staff Medicaid Fraud and Abuse?
 - A. Provide an example of a concern that you may encounter.
11. True or False: Network providers and subcontractors can file an informal or formal complaint against the PRSN.
12. What is the intent of an Advance Directive? What do you tell people about Advance Directives?
13. What kind of supervision do you receive? Do you think it is adequate?
14. What does your agency do that promotes recovery, rehabilitation, and reintegration?
15. What are the state requirements for becoming a certified Peer Counselor?

Score: _____	Items of concern:
--------------	-------------------