

**DEPARTMENT OF CHILDREN AND FAMILIES (DCF)/DIVISION OF CHILDREN'S SYSTEM OF CARE (CSOC)'S QUALITY STRATEGIES FOR THE COMPREHENSIVE MEDICAID WAIVER**

<b>Sub Assurance</b>	<b>Performance Measure</b>	<b>Numerator</b>	<b>Denominator</b>	<b>Source of Information</b>	<b>Sampling Methodology</b>	<b>Frequency</b>
<b>Quality of Life Assurance</b>						
All children that meet the clinical criteria for services through the Department of Children and Families(DCF), Division of Children' s System of Care (CSOC) will be assessed utilizing the comprehensive Child and Adolescent Needs and Strengths (CANS) assessment tool.	Number and Percentage of children who had a Child and Adolescent Needs and Strengths (CANS) completed	Number of children receiving Child and Adolescent Needs and Strengths (CANS) assessment	Total number of new enrollees	Review of Child and Adolescent Needs and Strengths scores  Contracted System Administrator (CSA) Data	100% new enrollees	CSOC will monitor quarterly and report to CMS annually
Youth should show improvement in Child and Adolescent Needs and Strengths composite rating within a year	Number and Percentage of children who show improvement in the Child and Adolescent Needs and Strengths assessment tool within a year	Number of children who improved within one year of admission	Number of children with Child and Adolescent Needs and Strengths assessments conducted 1 year from admission or the last CANS conducted	CSA Data on CANS, Initial and Subsequent Assessments	Number of youth enrolled for at least 1 year, representing a sample size of 95% confidence interval.	CSOC will report to CMS annually CSOC will monitor on a quarterly basis
<b>Level of Care Assurance</b>						
CSOC's Contracted System Administrator (CSA), conducts an initial Level of Care assessment (aka Intensity of Service (IOS)) prior to enrollment for all children.	Number and Percentage of children who had an initial level of care identified by the CSA	Number of children receiving initial level of care determination	Number of new enrollees on the waiver	CSA Data	100% new enrollees	CSOC will report to CMS annually CSOC will monitor on a quarterly basis
The Children's System of Care's Contracted System Administrator (CSA) will utilize Level of Care (aka Intensity of Service (IOS)) criteria to re-evaluate for level of care	Number and Percentage of children who received a level of care re-evaluation based on CSOC policy	Number of children who received a timely level of care re-evaluation as set forth by CSOC policy	Number of children who received LOC determination	CSA Data	Random sample, representing a 95% confidence level	CSOC will report to CMS annually

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<b>Plan of Care Assurance</b>						
The Plan of Care(aka Individual Service Plan (ISP)) is developed based on the needs identified in the Child and Adolescent Needs and Strengths assessment tool and according to CSOC policies	Number and Percentage of Plans of Care that address needs as identified in the Child and Adolescent Needs and Strengths assessment tool	Number of Plans of Care that address participants assessed needs	Number of Plans of Care reviewed	CSA Data on Plans of Care completions, Record Review	Random sample representing a 95% confidence level	CSOC will report to CMS annually CSOC will review of quarterly basis
Plan of Care (ISP) is updated at least annually	Number and Percentage of Plans of Care updated annually	Number of current Plans of Care updated at least annually	Number of Plans of Care reviewed	CSA Data Report	Random sample representing a 95% confidence level	CSOC will report to CMS annually CSOC will review of quarterly basis
Plan of Care (ISP) is updated based on identified needs.	Number and Percentage of Plans of Care updated based on needs	Number of Plans of Care updated based on needs	Number of Plans of Care reviewed	CSA Data Report	Random sample representing a 95% confidence level	CSOC will report to CMS annually CSOC will review of quarterly basis
Services are authorized in accordance with the approved plan of care (ISP).	Number and Percentage of authorized services in accordance with the plan of care	Number of plans of care that had services authorized based on the plan of care	Number of plans of care reviewed	CSA Data Report of Authorizations Record Review	Random sample representing a 95% confidence level	CSOC will report to CMS annually CSOC will review of quarterly basis
Services are delivered in accordance with the approved plan of care (ISP).	Number and Percentage of delivered services in accordance with the plan of care	Number of Services that were delivered	Number of services that were authorized	-CSA Data Report of Authorizations -Claims paid on authorized services through MMIS -Record Review	Random sample representing a 95% confidence level	CSOC will report to CMS annually CSOC will review of quarterly basis

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Youth/Families are provided a choice of providers, based on the available qualified provider network	Number and Percentage of youth/families provided choices among providers	Number of youth/families given a choice of providers as indicated in progress notes	Number of records reviewed	-Record review Statewide -Provider List CSA Data Report	Random sample representing a 95% confidence level	CSOC will report to CMS annually CSOC will review of quarterly basis
<b>Qualified Providers Assurance</b>						
Children's System of Care verifies that providers of waiver services initially meet required qualified status, including any applicable licensure and/or certification standards prior to their furnishing waiver services	Number and Percentage of providers that initially meet the required qualifying standards (including any applicable licensure/certification) prior to furnishing waiver services	Number of new providers that met the qualifying standards prior to furnishing waiver services.	Total number of new providers	Record review	100% Agency	CSOC will report to CMS annually CSOC will review of quarterly basis
Children's System of Care verifies that providers of waiver services continually meet required qualified status, including any applicable licensure and/or certification standards.	Number and Percentage of providers that continually meet the required qualifying standards (including any applicable licensure/certification).	Number of providers that meet the qualifying standards – applicable Licensures/certification	Total number of providers that initially met the qualified status	Provider HR Record Review	100% Agency	CSOC will report to CMS annually CSOC will review of quarterly basis
CSOC implements its policies and procedures for verifying that applicable certifications/checklists and training are provided in accordance with qualification requirements as listed in the waiver	Number and Percentage of providers that are trained in accordance with State requirements and the approved waiver.	Number of providers that are qualified (applicable trainings) to provide waiver services.	Total number of providers that provide waiver services.	Record Review	100% Community Provider Agencies	CSOC will report to CMS annually CSOC will review of quarterly basis
<b>Health and Welfare Assurance</b>						
The State, demonstrates on an on-going basis, that it identifies, addresses and seeks to prevent instances of abuse, neglect and exploitation	Number and Percentage of Unusual Incident Reports (UIRs) that were reported within the required timeframe as specified in NJ policies and procedures	Number of UIRs submitted timely according to State policies	Number of UIRs submitted involving waiver participants	Review of UIRMS database and Administrative policies & procedures	100% of waiver participants enrolled for the reporting period	CSOC will report to CMS annually CSOC will review of quarterly basis

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The State incorporates an unusual incident management reporting system (UIRMS) which reviews incidents and develops policies to prevent further similar incidents.	Number and Percentage of Unusual Incident Reports (UIRs) that were reported and followed up, where appropriate.	The number of incidents that were reported through UIRMS and had required follow up.	Total number of incidents reported that required follow up	Review of UIRMS database and Administrative policies & procedures	100% of waiver participants enrolled for the reporting period	CSOC will report to CMS annually CSOC will review of quarterly basis
The State policies and procedures for the use or prohibition of restrictive interventions (including restraints and seclusion) are followed	State monitors and tracks the number and percentage of unusual incidents reported involving restrictive interventions	Number of unusual incidents reported involving restrictive interventions that were in accordance with policies and procedures	Total number of unusual incidents reported involving restrictive interventions	Review of UIRMS	100% of all allegations of restrictive interventions reported	CSOC will review on a quarterly basis and report to CMS on an annual basis
The State establishes overall healthcare standards and monitors those standards based on responsibility of the service providers as stated in the approved waiver	Number and Percentage of waiver participants who received age appropriate preventative health care	Number of participants that received a well visit	Total number of waiver participants	MMIS Claims/Encounter Data	100% of waiver participants enrolled for the reporting period	State will review on a quarterly basis and report to CMS on an annual basis
<b>Financial Accountability Assurance</b>						
The State provides evidence that claims are coded and paid for in accordance with the reimbursement methodology specified in the approved waiver and only for services rendered.	Number and percent of claims paid as coded within individuals' person centered plan authorizations	The number of claims there were paid according to code within individuals' centered plan authorization	Total number of services rendered	Claims Data, Plans of Care, Authorizations	100% of waiver participants enrolled for the reporting period	CSOC will review on quarterly basis and report to CMS on annual basis
The State provides evidence that rates remain consistent with the approved rate methodology throughout the five-year waiver cycle	Number and percent of provider payment rates that are consistent with rate methodology approved in the approved waiver application or subsequent amendment	The number of provider payment rates that were consistent with the approved methodology	Total number of rates reviewed	Claims Data, documentation from State rate setting unit/division	100% of waiver participants enrolled for the reporting period	CSOC will review on quarterly basis and report to CMS on annual basis