



Senior & Long Term Care Division Community Services Bureau Big Sky Waiver Policy Manual

Title: BSW 608-1
Section: ADMINISTRATIVE REQUIREMENTS
Subject: Quality Assurance Communication
Reference: 42 CFR 441.302; ARM 37.40.1401; 37.40.1406 and 37.40.1430
Supersedes: BSW 608-1 (01/01/2017)

- DEFINITION** A Quality Assurance Communication (QAC) is a method of communicating compliance or noncompliance of Big Sky Waiver policy with Case Management Teams (CMTs).
- PURPOSE** The purpose of a QAC is to concisely and objectively communicate information to a CMT regarding compliance with program policy and provide remediation strategies when appropriate.
- CRITERIA** A QAC is issued when a CMT fails to comply with Big Sky Waiver policy or when a CMT performs above and beyond program standards. QACs are issued in the following circumstances:
1. When the Regional Program Officer (RPO) or Program Manager (PM) identifies that the CMT has failed to comply with program policy;
 2. When the RPO/PM requires the CMT to investigate an issue;
 3. When paid claims indicate that services were not provided in type, scope, amount, duration and frequency as indicated in the service plan;
 4. When the CMT fails to complete Quality Improvement Plan (QIP) requirements; or
 5. When the RPO/PM commends the agency on positive performance.
- NONCOMPLIANCE**
- PROCESS** RPO/PMs will issue a QAC(s) within ten days following a Quality Assurance Review (QAR) exit conference. The CMT will receive an email notification from QAMS when the QAC(s) have been submitted. The CMT must respond to the QAC(s) in QAMS within 30 days from the date the QAC(s) are issued.
- QAC CONTENT** A QAC is considered a part of the legal record and will be used as evidence, in various situations, including fair hearings. A QAC must contain the facts of the non-compliance including the policy or ARM reference. Positive QACs must include facts and evidence which

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represent compliance with policy and exceptional (above average) work by the CMT. The standardized language of a QAC generally includes:

1. Who provided the information about noncompliance including a detailed summary of the noncompliance standard or policy issue;
2. What facts about noncompliance are available including specific date(s) when CMT was found noncompliant;
3. What services are affected by the policy noncompliance;
4. When did the noncompliance occur; and
5. The date the response from the CMT is required to be completed.

CMT RESPONSE The response from the CMT must include a remediation plan to address the issue discovered in the QAC, except for QACs that commend positive performance by the CMT.

If the CMT's remediation plan does not adequately address the issue, the RPO/PM will meet with the CMT (either in person or by telephone) and provide guidance in the development of a remediation plan. The CMT must submit an updated remediation plan within five days from the date of the meeting with the RPO/PM.

FAILURE TO RESPOND

If a CMT fails to respond to a QAC or fails to submit an acceptable remediation plan, the RPO/PM will issue a written notice which will include a timeline for imposition of one or all of the applicable corrective actions:

1. Training requirements (either from RPO/PM or CMT);
2. Provider prepared standard review requirements (either from RPO/PM or CMT);
3. QIP to address the issue (developed either by RPO/PM or CMT);
4. Possible repayment for improper payments; or
5. Suspension or termination of contractual relationship between the Department and CMT.

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CLOSURE

The RPO/PM will close the QAC in QAMS when the CMT has provided adequate information regarding the necessary action needed to remediate the issue.