CMS Medicare Managed Care Auditing Report

Auditing Review Results (Initial Report)-Public Website Version

Date Report Generated: 9/30/2008

Category: All, Element: All, Finding:NOT MET, Reviewer:All

Findings: NOT MET

Review ID: 11777

Region: 01 Boston

Contract Number / Name: H2223 ELDER SVC PLN/E BOSTON HEALTH CENTER

Auditing Guide Version: PACE Audit Guide, Version 1

Auditing Element: CTS01

Review Type: Routine

Review Status: Confirmed

MCO Response Received Date:

Element Accepted Date: 09/10/2008

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CAP Released Date:09/10/2008

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CAP Accepted Date:09/10/2008

Audit Closed Date: 09/10/2008

Element Projected Completion Date:

MCO Response Due Date: 08/13/2008

Requirement:

(a)General rule. The PACE organization must have a written contract with each outside organization, agency, or individual that furnishes administrative or care-related services not furnished directly by the PACE organization except for emergency services as described in 460.100. (b) Contract requirements. A contract between a PACE organization and a contractor must meet the following requirements (1)Contract only with an entity that meets all applicable Federal and State requirements" including Medicare and Medicaid requirements" (2) A contractor must be accessible to participants, located either within or near the PACE organization"s service area. (3) A PACE organization must designate an official liaison to coordinate activities between contractors and the organization (d)Content of contract. Each contract must be in writing and include the following information: (1) Name of contractor (2) Services furnished (including work schedule if appropriate). (3)Payment rate and method. (4) Terms of the contract, including beginning and ending dates, methods of extension, renegotiation, and termination. (5)Contractor agreement to do the following: (i)Furnish only those services authorized by the PACE interdisciplinary team (ii) Accept payment from the PACE organization as payment in full, and not bill participants, CMS the State administering agency, or private insurers. (iii) Hold harmless CMS, the State, and PACE participants if the PACE organization does not pay for services performed by the contractor in accordance with the contract. (iv)Not assign the contract or delegate duties under the contract unless it obtains prior written approval from the PACE organization. (v) Submit reports required by the PACE organization. (vi) Agree to perform all the duties related to its position as specified in this part. (vii) Participate in interdisciplinary team meeting as required. (viii) Agree to be accountable to the PACE organization. (ix) Cooperate with the competency evaluation program and direct participant care requirements specified in 460.71. (e) Contracting with another entity to furnish PACE Center services. (1) A PACE organization may only contract for PACE Center services if it is fiscally sound as defined in 460.80(a) of this part and has demonstrated competence with the PACE model as evidenced by successful monitoring by CMS and the State administering agency. (2) The PACE organization retains responsibility for all participants and may only contract for the PACE Center services identified in 460.98(d).

Deficiencies:

The PACE organization must have a written contract with each outside organization, agency, or individual that furnishes administrative or care-related services not furnished directly by the PACE organization except for emergency services as described in §460.100. Written contracts must contain all regulatory required elements specifically detailed in 42 CFR §460.70. New England Courier (NEC) does not have a valid contract with Elder Service Plan (ESP), East Boston Neighborhood Health Center. Their business arrangement has existed through an "Agreement Between Carrier and Shipper" and does not contain the necessary contractual requirements set forth in §460.70. NEC is contracted to handle the weekend and off hour pick up and delivery of participant prescriptions from Walgreen's Pharmacy in East Boston to PACE participants living in the surrounding areas of East Boston. Walgreen's fulfills all classes of prescription medications for ESP participants. The presciptions are packaged and labeled with the patient's contact information with the name of the prescription(s)which are affixed to the outside of the bag. In addition to the primary finding of §460.70, Contracted Services, we have determined that the specific labeling of each package violates the participants' rights, specifically §460.112(f): Specific Rights to Which a Participant is Entitled, Confidentiality of Health Information. Each participant has the right to the confidentiality of his or her protected health information (PHI). The manner in which each package is labeled, violates the confidentiality of the PACE participant's PHI. In summary, the primary finding of §460.70:Contracted Services highlights the regulatory requirements of having a written contract but also identifies a violation the confidentiality of health information found at in §460.112(f). Corrective action measures must address both regulations.

Corrective Action Required:

The PACE organization must execute a valid contract with New England Courier that meets all regulatory requirements of §460.70, with specific sections noted above. The PACE organization must submit the executed contract between New England Courier and ESP, EBNHC for review by CMS and the State. All policies and procedures related to HIPAA privacy and security must be updated to reinforce the protection of a participants' confidentiality of health information. The PACE organization must develop a process to ensure that all individually identifiable health care information is protected with pharmacy partners, couriers and other appropriate contractors. Conduct an in-service with all contractors to reeducate partners on the importance of protecting individually identifiable health care information. Develop a process to maintain the integrity of prescription drugs delivered to participants. This process should not impair the participant's ability to open the package.

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Review ID: 11777

Region: 01 Boston

Contract Number / Name: H2223 ELDER SVC PLN/E BOSTON HEALTH CENTER

Auditing Guide Version: PACE Audit Guide, Version 1
Auditing Element: ENV02
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Requirement:

(a) Standard procedures. The PACE organization must follow accepted policies and standard procedures with respect to infection control, including at least the standard precautions developed by the Centers for Disease Control and Prevention. (b) Infection control plan. The PACE organization must establish, implement, and maintain a documented infection control plan that meets the following requirements: (1) Ensures a safe and sanitary environment. (2) Prevents and controls the transmission of disease and infection. (c) Contents of infection control plan. The infection control plan must include, but is not limited to, the following: (1) Procedures to identify, investigate, control, and prevent infections in every center and in each participant's place of residence. (2) Procedures to record any incidents of infection. (3) Procedures to analyze the incidents of infection to identify trends and develop corrective actions related to the reduction of future incidents.

Deficiencies:

This auditing element, ENV02 is not met in the sample of employee and contract direct care staff records reviewed for the 2 year period. CFR Section 460.74 reguires that the PACE Organization follow accepted and internal policies with respect to infection control. 2 of 10 employee records lacked hepatis B documentation. PPD testing on one individual was incomplete. Several questions involving health or background checks were resolved by ESP staff producing additional documentation. Orientation and training documentation was inconsistent. There was no clear accountability and coordination across departments for maintenance and internal audit of all parts of these staff records. See NOTE for ESP pre-audit actions to address these inconsistencies. Initial data from these actions was collected for 1Q2008, and was not yet available during the monitoring visit. Ongoing CMS monitoring to assess outcome improvements is required.

Corrective Action Required:

The PACE Organization will analyze implementation of the new Infection Control/HR/Employee Health/Direct Care Oversight process, and send results, showing outcomes, trends and actions to CMS for 1, 2, and 3Q2008 at a minimum. Plese submit these materials quarterly, to be completed by 10/31/2008. Data is required to demonstrate sustained improvement. Include, at a minimum: 1. Clearly articulated ESP thresholds and timeframes for adherence to all relevant Policies and Procedures. 2. Rates of completed orientation and annual performance reviews for all ESP staff and contracted direct care workers due this period. Include rate of completion for all required training. 3. Rate of completeion of PPD testing, or documentation. 4. Rate of full doucmentation of hepatitis B status, vaccination, declination. 5. Rate of unlicensed staff competencies evaluated prior to starting work with participants, and per Policies and Procedures. 6. Any ESP action taken to address problems, or intended to make process more efficient/effective overall, by discipline, by Center, etc.