

Overview

The Minnesota Department of Human Services (DHS) initiated the Lead Agency Review of Home and Community Based Service (HCBS) programs in 2006 and has, to date, completed two full rounds of reviews for each lead agency that administers HCBS waiver programs. The six HCBS programs examined during the review are:=

- Alternative Care (AC) program
- Brain Injury (BI) waiver
- Community Alternative Care (CAC) waiver
- Community Access for Disability Inclusion (CADI) waiver
- Developmental Disabilities (DD) waiver
- Elderly waiver (EW)

This evaluation process uses a comprehensive, mixed-method approach to review data, much of which is gathered during a multi-day site visit. These methods are intended to provide a full picture of compliance, context and practices within each lead agency, and further explain how individuals benefit from the HCBS programs. Once the final analysis is complete, a customized report is prepared for each lead agency. The data collection methods are intended to glean supporting information, so that when strengths, recommendations or corrective actions are issued, they are supported by multiple sources.

The third round of reviews will take place from the summer of 2015 to the summer of 2018. Many aspects of this review process will remain the same, including: a review of participant case files, interviews and meetings with agency leadership, focus groups with lead agency case managers and assessors, and a survey of providers who work closely with the lead agency.

Enhancements to the review process include an increased focus on each lead agency's:

- Practices screening Lead Agency enrolled providers (if applicable);
- Person centered planning practices;
- Community access and inclusion for persons with disabilities, in accordance with Minnesota's Olmstead Plan; and
- Role in the development and monitoring of Positive Support Transition Plans and person centered plans for Jensen Settlement members (if applicable).

Goals

The overarching goal of the HCBS Lead Agency Review is to determine how HCBS programs are operating and meeting the needs of the people they serve. This evaluation process helps DHS assure compliance by counties and tribes in the administration of HCBS programs, share performance on key measures and outcomes, identify best practices to promote collaboration between lead agencies, and obtain feedback about DHS resources to prompt state improvements. The HCBS Lead Agency Review supports the missions of the newly formed DHS administrations of Continuing Care for Older Adults (CCOA) and Community Supports (CSA). It also helps to ensure that long term care services and supports continue to improve the quality of life of Minnesotans and are sustainable over time.

Data Collection Sources & Methods

The Home and Community Based Services (HCBS) Lead Agency Review uses several methods and sources to conduct a comprehensive evaluation of Home and Community Based Service programs in each lead agency. This mixed method approach helps to provide a full picture of compliance, context and practices within each lead agency, and further explain how individuals benefit from the HCBS programs. Although each data source provides unique information, when fully complied, the data collection methods provide supporting information. When strengths, recommendations or corrective actions are issued, they are supported by multiple sources of data.

Data Source	Purpose
Lead Agency performance summary data (MMIS/MAXIS)	Compares each lead agency to statewide averages and those of similarly sized agencies for select performance and operational indicators gathered from DHS systems.
Individual case files	Identifies compliance with program requirements for AC, BI, CAC, CADI, DD, EW, the Jensen settlement agreement and Positive Support Transition Plans. Assesses the quality of case management services provided by the lead agency.
Provider survey	Gathers feedback from the provider’s perspective on the lead agency’s strengths, areas for improvement, and communication.
HCBS Assurance Plan	A self-assessment for each lead agency to assess its compliance with state and federal requirements.
Case manager & Assessor survey	Gathers feedback from the case manager’s and assessor’s perspective on the lead agency’s strengths, areas for improvement, and relationships with HCBS providers.
Case manager & Assessor focus group	Discusses trends, barriers and opportunities within the community and explores practices that produce positive outcomes.
Supervisor phone interview(s)	Discusses agency policies and procedures for HCBS Waiver program administration.
Supervisor meeting	Shares results from Provider survey, Case manager & Assessor survey, and HCBS Assurance Plan, and also discusses service development and programmatic changes.