



TBI Waiver Program Quality Improvement Advisory (QIA) Council Annual Report 2024

Purpose

The purpose of the TBI Waiver QIA Council is to provide guidance and feedback to the Department of Human Services Bureau for Medical Services (BMS) and its contracted Utilization Management Contractor (UMC) in the development of an ongoing quality assurance and improvement system for the TBI Waiver Program. To this end, the Council's charge is to collaborate with staff to develop and strengthen the TBI Waiver program's ability to:

- Collect data and assess members' experiences to assess the ongoing implementation of the program, identifying strengths and opportunities for quality improvement,
- Act in a timely manner to remedy specific problems or concerns as they arise and
- Use data and quality information to engage in actions that lead to continuous improvement in the TBI Waiver program.

The TBI Waiver QIA Council annual report is designed to provide an overview of the Councils' work plan, goals, objectives, and accomplishments in 2024.

Centers for Medicare and Medicaid Services (CMS) Quality Assurances

The Council works with BMS and the UMC, Acentra Health to ensure that the TBI Waiver supports the desired outcomes outlined in the six (6) focus areas of the Quality Framework developed by CMS. These focus areas include:

§1915(c) CMS Quality Assurances

- **Waiver Administration and Oversight:** The State Medicaid agency is actively involved in the oversight of the waiver and is responsible for all facets of the waiver program.
- **Level of Care Evaluation/Re-evaluation:** Persons enrolled in the waiver have needs consistent with an institutional level of care.
- **Qualified Providers:** Waiver providers are qualified to deliver services/supports.

- **Service Plan:** Participants have a Person-Centered Service Plan that is appropriate to their needs and preference and receive the services/supports specified in the Service Plan.
- **Health and Welfare:** Participants' health and welfare are safeguarded.
- **Financial Accountability:** Claims for waiver services are paid according to state payment methodologies specified in the approved waiver.

Membership Information

The Council started 2024 with full voting membership.

2024 Meetings

The Council met four (4) times during 2024. Meetings were held on February 15, 2024, May 16, 2024, August 15, 2024, and November 21, 2024. The council meeting held in 2024 were held virtually.

Meeting notices are posted on the WV Secretary of State website:

<http://apps.sos.wv.gov/adlaw/meetingnotices/>

In addition, the TBI Waiver QIA Council Meeting Minutes are posted on the BMS website:

[Quality Improvement Advisory \(QIA\) Council \(wv.gov\)](http://www.wv.gov/qualityimprovementadvisory)

Each meeting allows for public comment time to solicit feedback from members using TBI Waiver services and their advocates and allies on the performance of TBI Waiver services. All meetings were open to the public. Meeting minutes were distributed to Council members within one (1) month following the meeting.

Council Quality Management Plan

The Council's Quality Management Plan (QPM) for 2024 included a quarterly review of Service Planning and participant Safety quality performance measures from Provider Quality Reviews. The Council did not have any specific recommendations for service planning and agreed with the UMC stated remediation actions. The Council received a detailed incidents review to determine if any trends were evident. The Council identified no noted trends.

Served/Enrolled/Discharge during the calendar year 2024

Total # of unduplicated slots used as of 12/31/2024: **90**

Total # Newly Enrolled during Calendar Year 2024: **10**

Total # of discharges during Calendar Year 2024: 12

Reason for Discharge	Number
No Services for 180 continuous days	1
Unsafe environment	0
Member noncompliance with program	0
Member no longer desires services	5
Member is deceased	2
Member no longer a WV resident	1
Member no longer medically eligible	0
Member no longer financially eligible	3
Other	0

Program Data

The Council reviewed program data gathered and presented during quarterly meetings. The following reports were presented for review and discussion:

1. Discovery and Remediation
2. Program Activity
3. Incident Management Reports (Reviews and Trend Tracking)
4. Ad Hoc Reports
5. Survey Findings from HBCS CAHPS for 2023

The Council is responsible for identifying trends in the data and formulating recommendations for program improvement.

Council Recommendations for program Improvements to be Implement in 2024

The Council supported the following recommendations from the Survey Findings from HBCS CAHPS for 2023:

1. Add questions to the Person-Centered Assessment Social/Emotional Needs sections that include information about family/friends location, visiting opportunities and address these needs on the Service Plan.

The Stakeholders with lived experiences wanted to continue with a call one week prior to the Council Meeting to review the agenda and reports and discuss the minutes from the previous meeting. The UMC agreed to set up the meeting for those interested in participating.