

Waiver Review Initiative Report  
White Earth Band of Ojibwe

June 2012



Minnesota Department of **Human Services**

Prepared with the assistance of

the **ImproveGroup**<sup>™</sup>

## Acknowledgements

This report was prepared by the Minnesota Department of Human Services with assistance from the Improve Group. The findings presented in this report are based on a comprehensive review process made possible through the help and assistance of the White Earth.



### ABOUT THE MINNESOTA DEPARTMENT OF HUMAN SERVICES

The Minnesota Department of Human Services helps people meet their basic needs by providing or administering health care coverage, economic assistance and a variety of services for children, people with disabilities and older Minnesotans. The Minnesota Department of Human Services touches the lives of one in four Minnesotans with a variety of services intended to help people live as independently as possible. DHS is the state's largest agency, with an annual budget of approximately \$8 billion and 6,600 employees located throughout Minnesota.



### ABOUT THE IMPROVE GROUP

The Improve Group is an independent evaluation and planning firm with the mission to help organizations deliver effective services. The research design, data collection, analysis and reporting expertise of the Improve Group particularly emphasizes building the capacity of local organizations to make information meaningful and useful.

## Executive Summary

In April 2012, the Minnesota Department of Human Services conducted a review of the White Earth Band of Ojibwe's ("Tribe") Home and Community Based Services (HCBS) programs. White Earth Indian Reservation is located in northwestern Minnesota. Its Tribal Health department is located in White Earth and the Reservation has 36 townships. According to the 2010 Census, White Earth's population was approximately 9,562 and it served 70 people through the HCBS programs.

Tribal Health encompasses two agencies, Tribal Home Health and Tribal Mental Health. Tribal Home Health is the lead agency on all EW, AC, CADI and BI cases, providing case consultation and completing the assessments for these programs. Tribal Mental Health will assist on CADI and BI cases where mental health needs are to be assessed.

### Introduction and Methods

The primary goal of the Waiver Review Initiative is to support the assurances that the Minnesota Department of Human Services (DHS) makes to the Centers for Medicare & Medicaid Services (CMS) about Home and Community Based Services. The HCBS programs, including five waivers (EW, CAC, CADI, BI and DD) and the Alternative Care program, are overseen by the Minnesota Department of Human Services. When developing the Waiver Review Initiative, DHS intends to both monitor compliance with state and federal regulations and identify successful practices that improve the quality of service to HCBS participants.

The Waiver Review Process employed seven methods for collecting data to substantiate the State's assurances: (1) participant case files; (2) contracts held by White Earth Band of Ojibwe for services; (3) policies developed by White Earth to guide it in administering the HCBS programs; (4) a survey instrument completed by Tribe staff; (5) interviews with administrative and supervisory staff; and (6) a focus group of staff working across the EW, AC, CADI and BI HCBS programs. White Earth Band of Ojibwe did not have any participants in the CAC and DD programs at the time of the review, therefore no results are presented for these programs. Twenty-one (21) case files and four (4) provider contracts were examined during the White Earth visit. The systematic way the data was collected during this review has been used in other lead agency waiver reviews over the past several years. Much of the data was collected on-site through a two-day site visit process during which participant records and contracts were reviewed and staff participated in interviews and the focus group.

The HCBS quality framework developed by the Centers for Medicare & Medicaid Services<sup>1</sup> was used as a guiding force for this review and includes the following seven framework areas: (1) Participant Access; (2) Person-Centered Planning and Delivery; (3) Provider Capacity and Capabilities; (4) Participant Safeguards; (5) Participant Rights and Responsibilities; (6) Participant Outcomes and Satisfaction; and (7) System Performance.

## Waiver Review Findings- Strengths and Promising Practices

The following findings around White Earth Band of Ojibwe promising practices and strengths are drawn from discussions and surveys with the Tribe's staff, reviews of participant case files and provider service contracts and observations made during the site visit.

- Data from multiple sources indicate that quality case management services are a key strength in White Earth. The case managers build relationships with families and advocate for participants. Case managers are experienced and have backgrounds in a variety of disciplines, which allows them to navigate easily across programs within the agency to provide seamless services for participants. Case managers are responsive to changing participant needs. Case managers are knowledgeable about resources and informal supports in the communities they serve, and in neighboring communities. Case managers are in frequent contact with their HCBS participants regarding their needs, demonstrating an emphasis on their participant focused case management practices.
- Case managers are well-known throughout the community and are connected with the community and other professionals. Tribal staff are well connected with neighboring counties and throughout the region. These community connections allow the staff to identify participants eligible for HCBS programs earlier, and be more proactive in securing informal and formal supports to meet their needs. Staff participates in community team meetings and advisory councils. Staff provides outreach about HCBS programs through families and elder networks in the Tribe.
- The care plan format used for both the elderly and CCB programs is consistently completed thoroughly and in a timely manner. All elderly and CCB care plans meet documentation expectations for goals and outcomes and most elderly and CCB care plans exceed or meet documentation expectations of health and safety. All elderly and

<sup>1</sup> [http://www.cms.hhs.gov/HCBS/04\\_CMSCommunications.asp#TopOfPage](http://www.cms.hhs.gov/HCBS/04_CMSCommunications.asp#TopOfPage)

CCB care plans were completed within ten days of the assessment and were signed and dated within the last year. All elderly and CCB care plans have complete documentation of all needed services to be provided.

- Participant case files were generally well-organized and complete. All elderly and CCB cases have complete documentation of OBRA Level One and informed consent in the case file. Most of the elderly and CCB cases had complete documentation of participants' rights in the case file.

## Waiver Review Findings- Barriers and Areas for Improvement

The following findings around White Earth's barriers and areas for improvement are drawn from reports by the Tribe's staff, reviews of participant case files, and provider service contracts and observations made during the site visit.

- None of the CADI or BI cases reviewed had a back-up plan included in the care plan. Additionally, half of the CADI cases did not include emergency contact information. It is required that all participants in CCB programs have a back-up plan and emergency contact information as part of a participant's care plan.
- Some of the EW, AC, CADI and BI cases had below the expected level of documentation of participant needs in the care plan.

## Recommendations and Corrective Action Requirements

The following are recommendations and required corrective actions developed by the Waiver Review Team. The recommendations are intended to be ideas and suggestions that could help the Tribe's work toward reaching their goals around HCBS program administration. Corrective action requirements are areas where the Tribe was found to be inconsistent in meeting state and federal requirements and will require a response by the Tribe. Correction actions are cited when it is determined that a pattern of noncompliance is discovered. There may be needed follow-up with individual participants when the noncompliance is more incidental in nature.

### Recommendations

The following recommendations would benefit the Tribe and its HCBS participants.

- Consider training adult mental health case managers about HCBS program requirements to provide more streamlined services for participants. Participants with mental health needs may have two case managers; one for the waiver case management and one for the mental health case management. Cross-training would allow each person to have just one case manager. Also consider developing a single integrated plan of care for persons receiving both waiver and mental health services. The plan of care would include both the mental health treatment and the waived services needed by the participant. Blue Earth County could be contacted for an example of a care plan format that meets all requirements for waiver participants that receive Rule 79 case management. This will help streamline services for participants across multiple programs.
- Consider modifying the current LTC care plan format to include a back- up plan and emergency contact information and expand the participant needs section to allow for a more complete documentation of participant needs.
- Continue to work with neighboring counties to help in providing resources as the Tribe continues to build up capacity in HCBS waiver programs, particularly in building capacity in delivering the DD program. Neighboring counties have expertise and experience that can assist the Tribe as it seeks to build capacity in delivering waiver services and expanding service capacity throughout the community.
- Develop a plan to strengthen the relationships between Public health and social services. Expand efforts to share nursing and social work responsibilities across waiver programs, especially as the disability waiver programs serve individuals with higher medical needs. Encourage them to work together to consult with each other to provide comprehensive perspectives to meet participant needs, assess their health and safety and support one another and use each other as resources.

### Corrective Action Requirements

The following are areas in which the Tribe will be required to take corrective action.

- Include a back-up plan and emergency contact information in the care plan of all CAC, CADI and BI participants.<sup>2</sup> All care plans must be updated with this information within six months. This is required for all CCB programs to ensure health and safety needs are being met in the community. Within the Tribe, none of the CADI or BI cases had a back-up plan included in the care plan. Additionally, half of the CADI cases did not include emergency contact information.

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<sup>2</sup> A sample back-up plan with emergency contact information can be accessed at:  
[http://www.dhs.state.mn.us/main/groups/county\\_access/documents/pub/dhs\\_id\\_048151.pdf](http://www.dhs.state.mn.us/main/groups/county_access/documents/pub/dhs_id_048151.pdf)

