Protecting the Health and Welfare of the Long Term Services and Supports Population

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Agenda

- How Texas APS gained authority to investigate abuse, neglect and exploitation by Medicaid HCBS providers
- How Texas APS implemented programmatic changes
- Lessons learned along our journey
The Problem

- APS’s enabling statute had not kept up with evolving service delivery changes and changes in contracting arrangements.
- To comply with CMS requirements for health and welfare of Medicaid recipients, Texas needed to amend APS’s enabling statute.
Working Through a Solution

1. Holding informal meetings
2. Bringing together a cross-agency workgroup
3. Gaining buy-in from the top
4. Engaging stakeholders
5. Drafting a bill
6. Obtaining legislative sponsors
7. Shepherding the bill
SB 1880, 84th RS

1. Expanded the authority of APS to investigate all home and community-based service providers whether providing services in a traditional or managed care service delivery model,

2. Clarified and addressed the gaps and inconsistencies that resulted from evolving service delivery changes and changes in contracting arrangements, and

3. Updated statutory language and requirements related to provider and agency responsibilities.
Now for the hard part ...

- Statute
- Rule
- Policy
- Practice
40 TAC §711.25. What affect do Senate Bill (SB) 1880 and SB 760 (84th Texas Legislature, Regular Session) have on the jurisdiction of Adult Protective Services (APS) to investigate allegations of abuse, neglect, or exploitation of individuals receiving services from certain providers?

(a) SB 1880 and SB 760 expanded the authority of APS to investigate allegations of abuse, neglect, or exploitation of individuals receiving services from certain providers. Until further rules can be proposed and adopted relating to SB 1880 and SB 760, the purpose of this transitional rule is to define the new APS jurisdiction and clarify how to apply current APS rules to the new jurisdiction.

(b) For purposes of this rule, "provider", as further defined in Human Resources Code §48.251, includes the following ....
(c) APS may investigate allegations of abuse, neglect, or exploitation involving ....

(d) APS shall not investigate allegations if the provider alleged or suspected to have committed the abuse, neglect, or exploitation is operated, licensed, certified, or registered by a state agency that has the authority to investigate a report of abuse, neglect, or exploitation of an individual by the provider.

(e) Unless otherwise clarified in this section or unless the context clearly indicates otherwise, all rules in this chapter apply, as appropriate, to investigations described by this section.

(f) This rule expires on September 1, 2016, unless repealed sooner.
What really happened?

- Some investigations moved from APS In-Home to APS Provider which added:
  - Upfront notifications of allegations
  - Time-bound investigation processes
  - Release of investigation reports
  - Different due process rights
- Some populations were added to APS Provider.
1. Intake Identification & Notification
2. Investigation
4. Appeal of Findings
Implementation Highlights

- Bill passage (May)
- Stakeholder meetings #1 (June) and #2 (August)
- Train field staff on temporary rule and comprehensive policy memo (July & August)

Summer 2015

- Bill effective date
- Temporary rule effective date
- Comprehensive policy memo effective date

September 2015

- Policy memo: Conducting and Documenting Telephone Interviews with Collateral Witnesses
- Stakeholder meeting #3

October 2015

- Stakeholder meetings #4 (January) and #5 (February)

Winter 2016

- Policy memo: Time Saving Policies for Provider Investigations

May 2016

- Policy memo: Conducting Alleged Perpetrator Interviews By Telephone in Certain APS Provider Investigations

June 2016

- Policy-in-a-Box training released to field staff
- Stakeholder meeting #6

August 2016

- Permanent rule effective date
- Policy handbook overhaul effective date
- Post-PIAB follow-up meetings

September 2016
Results

- Compliance with CMS requirements for the health and welfare of Medicaid recipients
- Equitable service for alleged victims
- Better communication and information to providers
- Goodwill and trust from stakeholders
- More people care about APS investigations
- Up-to-date statutes
Lessons Learned

1. Don’t assume agency partners know what you do
2. Engage stakeholders early and often
   - Gain agreements from internal partners
   - Seek input from external stakeholders
   - Stakeholders can help you work through problems and overcome obstacles
3. Help your legislative sponsors
   - Craft a clear message
   - Legislation will be highly technical
   - Be able to speak on the big picture and the minutiae
Lessons Learned

4. Beware of what you ask for
   - We sought out this change
   - Forcing us to re-evaluate our practices

5. Intakes will rise more than you expect
   - What gets measured gets moved
   - Stakeholders will over-report

6. You can’t train staff enough, but you can try

7. You won’t get everything right the first time
Thank You!

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