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DDSD-DDW Numbered Memo 2021-02

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To: All DD Waiver Providers and Case Management Agencies

From: Scott Doan, DDS D Deputy Director



Subject: **DDW Standards Chapter 22.2: QI Plan and Key Performance Indicators (KPI)**

The purpose of this memo is to inform you that the KPIs established and included in Chapter 22 Quality Improvement Strategy (QIS) of the 2018 DD Waiver Service Standards will remain the same through December 2021. Additionally, this memo provides guidance on how to report the KPIs in the required Provider Annual Report.

As required by the DD Waiver Service Standards, your agency is required to have a system in place to consistently collect and analyze data as part of your quality assurance/quality improvement process and to report the findings to DDS D in the Provider Annual Report.

When reporting data in your Provider Annual Reports, to report a rate include both the numerator and denominator. Please see the examples below¹ and refer to the DD Waiver Service Standards and technical assistance guide for additional information. The provider and case management technical assistance guides are included with this memo.

DDS D expects to see an impact on these three KPIs due to the COVID-19 pandemic and will take this into consideration when reviewing the 2021 data.

DDS D will be releasing an annual report template that is required for all DDW provider agencies when submitting annual reports on 2-15-2022. This template is currently being finalized and will be sent out at a later date.

The following KPI applies to the following provider types: Living Supports service providers (Supported Living, Family Living and Intensive Medical Living), Customized In-Home Supports, Community Inclusion service providers and Case Management agencies (only required KPI are #1 ISP Implementation and #3 CCS in a Non-Disability Specific Setting).

1. Percent (%) of individuals whose Individual Support Plans (ISP) are implemented as written.
 - The numerator is the total number of ISPs that are implemented.
 - The denominator is the total number of ISPs at an agency.
 - The rate is the numerator divided by the denominator x 100.

¹ Numerators and denominators are modified for case management agencies. See case management technical assistance guide for more information

The following KPI applies to the following provider types: Living Supports service providers (Supported Living, Family Living and Intensive Medical Living), Customized In-Home Supports and Case Management agencies.

2. Percent (%) of appointments attended as recommended by medical professionals (physician, nurse practitioner or specialist).
 - The **numerator** is the total number of appointments attended.
 - The **denominator** is the total number of appointments recommended by the healthcare provider.
 - The **rate** is the numerator divided by the denominator x 100.

The following KPI applies to the following provider types: Customized Community and Case Management agencies.

3. Percent (%) of individuals accessing Customized Community Supports in a non-disability specific setting.
 - The **numerator** is the total number of people accessing the service in a non-disability specific setting.
 - The **denominator** is the total number of people in these services at a provider agency.
 - The **rate** is the numerator divided by the denominator x 100.

If you have any questions, please contact Chris Futey at (505) 216-8691 or Christopher.futey@state.nm.us.