



National Forum for Background Checks

AHFSA Annual Conference
Background Screening Interest Track
September 23-26, 2018

Best Practices/New Initiatives

SESSION LEADER: Taylor Haddock

PRESENTERS: David Ostrander, GA; CaraLee Starnes, CNA; Meghan Shears, WV; Jane Lengel, OH



BEST PRACTICES/NEW INITIATIVES

- ▶ **Objective:** This session will showcase two NBCP innovative projects that seek to enhance safety and quality of care for vulnerable populations while creating effective and efficiency in a background screening program.

- ▶ **Questions from interested States:** Our conference goal is dialogue. In this session, representatives from interested States are encouraged to ask questions; describe their challenges of effectiveness, efficiency and equity; and exchange information.

Best Practices/New Initiatives: Topics and States



- ▶ GA – Caregivers Registry
- ▶ CNA/WV/OH – MED File Project
- ▶ Roundtable with States

Best Practices/New Initiatives: Georgia – Caregiver Registry



David Ostrander, Inspector General
Department of Community Health

- ▶ **Goal:**
 - ▶ Expand screening requirements to include
 - ▶ State/national fingerprinting
 - ▶ Rap Back
 - ▶ Create a Caregivers Registry

Best Practices/New Initiatives: Georgia – Caregiver Registry



- ▶ In the 2018 Legislative session, SB 406 was introduced to totally revamp existing law in regards to background checks of long-term care facilities. SB 406:
 - ▶ Required direct access employees at almost all long-term care facilities to have a **State and federal fingerprint check** as well checks of the various registries such as the sex offender, nurse aide and HHS OIG Exclusions List.
 - ▶ Addressed the exploitation of the elderly who receive services in a residential setting by **creating a Caregivers Registry** that allows private employers to check a public registry to determine if their current employee or a job applicant is eligible or ineligible for employment.
- ▶ The main purpose of the **Caregivers Registry** is to protect the health and safety of Georgia's elderly citizens and to ensure they are not subject to abuse, neglect and/or financial exploitation.

Best Practices/New Initiatives: Georgia – Caregiver Registry



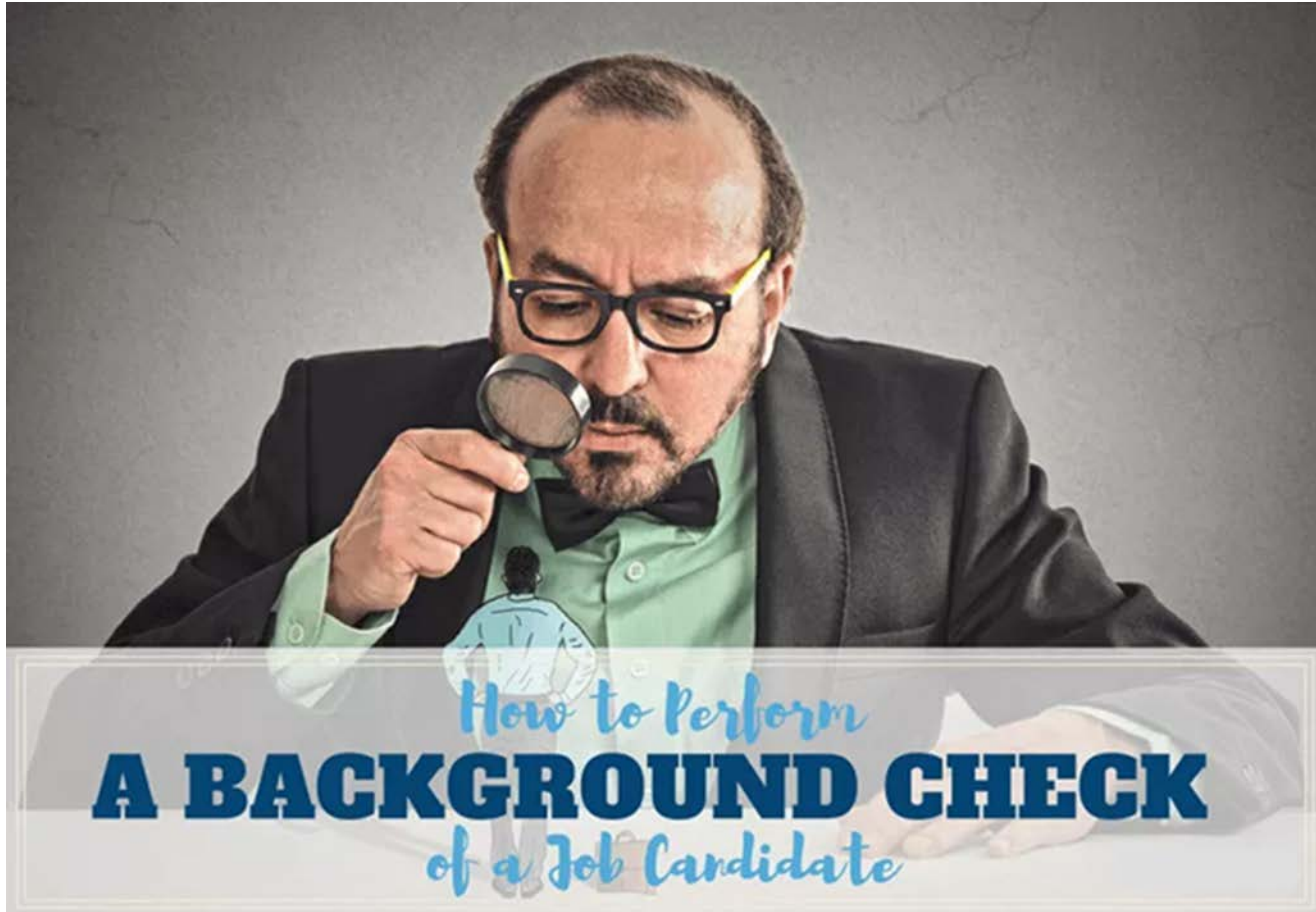
- ▶ If the individual was not found on the Caregivers Registry, the applicant could then go through a similar background check process as the one for our long-term care facility applicants.
- ▶ The data for the Caregivers Registry comes from not only background checks for private employers, but also includes data from direct access employees for long-term care facilities.
- ▶ Individuals must give consent to have their names placed on the Caregivers Registry.
- ▶ The Federal Bureau of Investigation approved the language for the Caregivers Registry.

Best Practices/New Initiatives: Georgia – Caregiver Registry



- ▶ The Caregivers Registry is not based on criminal history alone but also includes the results of the Sex Offender, Nurse Aide and HHS OIG Exclusions registries.
- ▶ With the approval of CMS, Georgia was able to use the LTC National Background Check's Technical Assistance provision to build the Caregivers Registry and the platform to be used by private employers for conducting background checks.
- ▶ The legislation goes into effect October 1, 2019.
- ▶ A special thank you to CMS, CNA and Innovative Architects for assisting us with this project.

Questions from States?



Best Practices/New Initiatives: MED File Project



CaraLee Starnes, State Liaison
CNA – NBCP

▶ **GOAL:**

- ▶ To provide a more efficient and effective process for checking (and rechecking) the OIG List of Excluded Individuals and Entities (LEIE) through the use of the **Social Security Number (SSN) based MED File.**

Best Practices/New Initiatives: MED File Project



- ▶ States awarded the NBCP are charged with developing processes to include a search of the LEIE.
- ▶ CMS NBCP Project Officer worked with the CMS Office of Enterprise Data and Analytics and the CMS Center for Program Integrity (owners of the Medicare Exclusion Database (MED File))
- ▶ Through NBCP Technical Assistance, CMS approved a pilot to implement a fully automated approach to searching the LEIE through the use of the MED File.

Best Practices/New Initiatives: MED File Project



- ▶ Selecting Pilot Participants:
 - ▶ The NBCP grantee must:
 - ▶ Be active (not a graduated State)
 - ▶ Be located within the State's Medicaid Agency
 - ▶ Have a background screening system in production
 - ▶ Agree to participate in the pilot

- ▶ Pilot began – June, 2017

- ▶ Pilot States
 - ▶ Georgia – implemented November 2017
 - ▶ West Virginia – implemented May 2018
 - ▶ Minnesota – in process
 - ▶ Ohio – expanded process

Best Practices/New Initiatives: MED File Project



- ▶ Steps to implementing the MED File
 - ▶ Engaging **State Medicaid Contact**
 - ▶ Amending the **Data Use Agreement (DUA)** to include Background Screening contact (must include justification for access; template available)
 - ▶ Submit to CMS for approval
 - ▶ Develop **access to the File**
 - ▶ State's IT must **locate file access** and place in accessible location
 - ▶ **Import process**, matching logic and File Watch (allows for file rechecking upon monthly update)

Best Practices/New Initiatives: MED File Project



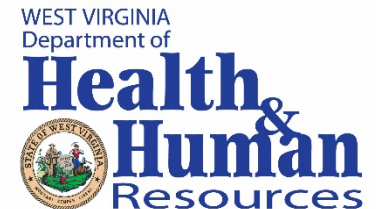
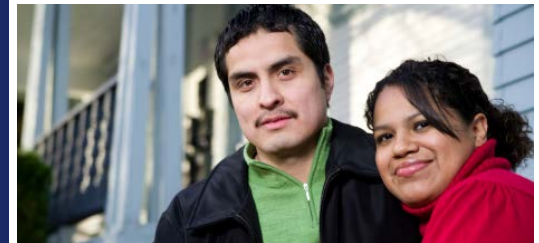
▶ Pilot Outcomes

- ▶ Evaluation - June 2018
 - ▶ Available on BGCheckInfo website
- ▶ Time to implement varied from State to State
- ▶ Automation versus manual look-up
 - ▶ Reduction in false positives by using SSN versus name based
- ▶ Added Protections for vulnerable populations
- ▶ Automated FileWatch ensures monthly recheck is completed.

WV CARES

WV Clearance for Access: Registry and Employment Screening MED File Pilot

Meghan Shears
Director, WV CARES
September 24, 2018
2018 AHFSA Conference



WVCARES – MED File

- ▶ Steps to obtain access
 - Bureau for Medical Services (BMS) – WV’s Medicaid agency
 - Receiver of MED File
 - Worked with CMS representative and BMS to amend Data Use Agreement (DUA)

WVCARES – MED File

▶ Struggles

- BMS's fiscal agent Molina receives MED File
- Establishing which department receives file
- Establishing process to upload to WVCARES

WVCARES – MED File

▶ Benefits

- Searching by SSN v. name
 - Fewer false positives
- Catching matches that may have been missed through SSN verification

Best Practices/New Initiatives: MED File Project - Ohio



Jane Lengel – NBCP Project Director
Ohio Department of Medicaid

- ▶ **MED (Medicare Exclusion Database) File**
 - ▶ Implemented in 2014
 - ▶ Automated Recheck every 30 days
- ▶ **Two Additional Exclusion Lists:**
 - ▶ **Ohio Exclusion List –**
 - ▶ Implemented October 2018
 - ▶ Compiled by Ohio Medicaid and updated weekly
 - ▶ **All States Termination List**
 - ▶ Compiled by CMS and updated every two weeks
 - ▶ Requires an amended DUA and approval by CMS

Best Practices/New Initiatives: MED File Project - Ohio



STATISTICS

- ▶ From its inception in May 2014, the MED File has prevented 237 false positive OIG LEIE matches
- ▶ ODM chose to get a separate DUA for the NBCP
- ▶ Using a separate DUA provides the NBCP direct control to monitor, modify, or renew.
 - ▶ The DUA for the MED File was modified to include the All States Termination List

Questions from States?

