



## INCLUDE, RESPECT, I SELF-DIRECT (IRIS) DATA REPORTING REQUIREMENTS FOR FISCAL EMPLOYER AGENTS (FEAS)

### Background

The Center for Medicare and Medicaid Services (CMS) requires the reporting of performance measures for all Home and Community-Based (HCBS) 1915(c) waivers (e.g., IRIS). The Department of Health Services (DHS) and the IRIS program must collect and report performance metrics annually via the CMS 372 report.

The table below details the reporting requirements for Fiscal Employer Agent (FEAs) providers. Unless specified, the designated reporting period is quarterly.

**NOTE:** The Wisconsin DHS reserves the right to change performance measures and data reporting requirements to maintain compliance with the regulations governing HCBS 1915(c) waivers.

<b>Metric / Data reported to DHS</b>	<b>Method (Numerator &amp; Denominator, if applicable)</b>
Number and percent of new providers for which the FEA ensured the existence of a signed Medicaid provider agreement, prior to provision of services.	<i>Numerator:</i> Number of new providers on the FEA payroll with a signed Medicaid provider agreement prior to provision of services. <i>Denominator:</i> Number of new service providers on the FEA payroll within the designated reporting period.
Number and percent of licensed/certified providers employed directly by the participant with completed criminal background and caregiver registry checks.	<i>Numerator:</i> The number of licensed/certified providers employed directly by the participant with completed criminal background and caregiver registry checks. <i>Denominator:</i> Total number of providers employed directly by the participant on the FEA's payroll.
Number and percent of paid waiver service claims authorized in the participant's service plan.	<i>Numerator:</i> Number of authorized, submitted claims on the participant's Individual Support and Service Plan (ISSP). <i>Denominator:</i> Total number of claims submitted during the reporting period.
Number and percent of providers continuing to meet required licensure or certification standards as confirmed by the FEA, every four years.	<i>Numerator:</i> Number of providers employed directly by the participant with licensure/certification, confirmed every four years. <i>Denominator:</i> Number of providers employed directly by the participant, serving IRIS participants for four years or more.
Number and percent of paid waiver service claims coded incorrectly.	<i>Numerator:</i> Number of claims coded incorrectly (i.e. adjustments). <i>Denominator:</i> Total number of claims processed during the reporting period.
Number and percent of claims held with resolution prior to payment.	<i>Numerator:</i> Number of claims pended with resolution prior to payment. <i>Denominator:</i> Total number of claims during the reporting period.
The number and percent of FEA monthly encounter data submissions accepted and certified timely (within 30 days).	<i>Numerator:</i> Number of FEA monthly submissions accepted timely (within 30 days). FEAs provide dates of encounter submissions. <i>Denominator:</i> Total number of submissions (N=12).
Monthly expenditure reports. Monthly expenditures by service code and target group.	Total monthly expenditures paid, aggregated by target group and by the service code and modifier combination.
Monthly Self-Directed Personal Care (SDPC) Enrollment Reports	Count of total participants enrolled in Self-Directed Personal Care (SDPC) on the last day of the month and provided to the DHS on the first of each month. "Enrolled" is defined as having SDPC authorized on the participant's ISSP. Enrolled status does not require that the participant submitted claims for SDPC services.
Monthly Participant-Hired Worker Counts (active, total, new)	Total participant-hired workers refer to any participant-hired worker with a signed Medicaid provider agreement, meeting the certification/licensure requirements. "Active" refers to the worker providing services within the month.
Funding Files for each two week payroll period	Every two weeks, the FEA submits funding files to DHS for participant-hired worker payroll claims.