


Plan of Correction

Program Name: Dr. Mark Bontreger	Date Due: 9/3/2021
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Administrative POC-1	
Rule #: 67:61:05:12	Rule Statement: Office of Inspector General Medicaid exclusion list. Each agency shall routinely check the Office of Inspector General's List of Excluded Individuals and Entities to ensure that each new hire as well as any current employee is not on the excluded list. No payment may be provided for services furnished by an excluded individual. Documentation that this has been completed shall be placed in the employee's personnel file.
Area of Noncompliance: Dr. Mark Bontreger did not have evidence of routine checks of the Inspector General's Medicaid exclusion list in personnel files. It is recommended that the Medicaid exclusion list be checked at least annually for each clinical employee.	
Corrective Action (policy/procedure, training, environmental changes, etc.): (1) Developed policy (in attachment); (2) Reviewed with staff; (3) Established a reminder system.	Anticipated Date Achieved/Implemented: Date 08/16/2021
Supporting Evidence: See policy in supplemental attachment	Position Responsible: Director
How Maintained: Policy to be reviewed quarterly	Board Notified: Y <input checked="" type="checkbox"/> N <input type="checkbox"/> n/a <input type="checkbox"/>

Client Chart POC-1	
Rule #: 67:61:07:12	<p>Rule Statement: Tuberculin Screening Requirements. A designated staff member shall conduct tuberculin screening for the absence or presence of symptoms with each client newly admitted to outpatient treatment, intensive outpatient, day treatment, clinically managed low intensity residential treatment, clinically managed detoxification, and intensive inpatient treatment within 24 hours of admission to determine if the client has had any of the following symptoms within the previous three months:</p> <ol style="list-style-type: none"> 1. Productive cough for a two to three-week duration; 2. Unexplained night sweats; 3. Unexplained fevers; or 4. Unexplained weight loss. <p>Any client determined to have one or more of the above symptoms within the last three months shall be immediately referred to a licensed physician for a medical evaluation to determine the absence or presence of active disease. A Mantoux skin test may or may not be done during this evaluation based on the opinion of the evaluating physician. Any client confirmed or suspected to have infectious tuberculosis shall be excluded from services until the client is determined to no longer be infectious by the physician. Any client in which infectious tuberculosis is ruled out shall provide a written statement from the evaluating physician before being allowed entry for services.</p>

Area of Noncompliance: Two out of three applicable outpatient treatment client files did not have evidence of a tuberculin screening.	
Corrective Action (policy/procedure, training, environmental changes, etc): (1) Revised TB Screening policy (see supplemental attachment); (2) Reviewed with staff; (3) Reviewed with staff procedures for filing of related documentation	Anticipated Date Achieved/Implemented: Date 08/16/2021
Supporting Evidence: See supplemental attachment.	Position Responsible: Director
How Maintained: Policy to be reviewed quarterly	Board Notified: Y <input checked="" type="checkbox"/> N <input type="checkbox"/> n/a <input type="checkbox"/>

Signature of Agency Director: 	Date: 08/16/2021
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Please email or send Plan of Correction to:
 Department of Social Services
 Office of Licensing and Accreditation
 3900 West Technology Circle, Suite 1
 Sioux Falls, SD 57106

Email Address: DSSLicAccred@state.sd.us

The Department of Social Services, Office of Licensing and Accreditation has reviewed and accepted the above plan.

Signature of Licensing Staff:	Date:
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Mark Bontreger, Inc.
Supplement to Plan of Correction
Correction Plan Submitted: 8/16/2021

Area of Noncompliance: Dr. Mark Bontreger did not have evidence of routine checks of the Inspector General's Medicaid exclusion list in personnel files. It is recommended that the Medicaid exclusion list be checked at least annually for each clinical employee.

Title: Monitoring Medicaid Exclusion List

Purpose: To ensure routine checking of the Inspector General's Medicaid exclusion list in personnel files.

Procedures:

- (1) The Medicaid Exclusion list will be reviewed annually for each clinical employee.
- (2) The fact of this annual review and the results will be recorded and placed in the personnel file of each clinical employee.
- (3) No payment shall be provided for services furnished by an excluded individual.

Area of Noncompliance: Two out of three applicable outpatient treatment client files did not have evidence of a tuberculin screening.

Title: Tuberculin Screening

Purpose: To assist in the identification of Tuberculosis in clients served, to aid in providing information for treatment, and to protect the other clients served from infection.

Procedures:

- (1) All clients newly admitted to outpatient treatment and intensive treatment will be provided with tuberculin screen for the absence or presence of symptoms within 24 hours of admission to determine if the client has had any of the following symptoms within the previous three months:
 1. Productive cough for a two to three-week duration;
 2. Unexplained night sweats;
 3. Unexplained fevers; or
 4. Unexplained weight loss.
- (2) Any client determined to have one or more of the above symptoms within the last three months shall be immediately referred to a licensed physician for a medical evaluation to determine the absence or presence of active disease. A Mantoux skin test may or may not be done during this evaluation based on the opinion of the evaluating physician.
- (3) Any client confirmed or suspected to have infectious tuberculosis shall be excluded from services until the client is determined to no longer be infectious by the physician.
- (4) Any client in which infectious tuberculosis is ruled out shall provide a written statement from the evaluating physician before being allowed entry for services.
- (5) Completed Tuberculosis screening tests and other related documentation or records will be placed in the client's medical record.
- (6) Tuberculin screening and any related information or records is a part of the closing file checklist to ensure that it has been filed.