

ODP Updates

December 14, 2021

ISAC Annual Report for 2021

- Published in draft for ISAC review
- Web meeting set up for review

ISAC Action Plan for Preventing Sexual Abuse

- Timing for status review
- Training Plan for self-advocates

ODP Funding Priorities for ARPA Funds

I. Address staffing issues – shortages and quality

- Short-term to address unprecedented staff vacancies, restore services
- Long-term to address retention and quality of service provision

II. Supporting Individuals and Families on the Waiting List

III. Increasing the access to and use of technology

- Accelerator contract
- One-time funds for purchase and implementation

IV. Strengthen ODP's HCBS infrastructure

- AE/county staffing
- Continue improvements in incident management

V. Serve More People in the Community

Priority I: Addressing Staffing Shortages and Quality Service Provision

Provide Funding to Address High Staff Vacancy and Turn Over Rates

- One time funding for COVID-19 related staffing expenses, recruitment and retention of Direct Support Professionals or Supports Coordinators to include funding for hazard pay, costs of recruitment efforts, sign-on bonuses and other incentive payments.
- Provided as a supplemental payment under Appendix K
- Request form for one-time funds published 12/2/22
- Up to 5% of prior year revenue (2% for AWC) for related expenditures between April 1, 2021 and March 31, 2022
- Estimated total funding: \$200M

Updating Fee Schedule Rates

- Implementing the regulatory required data update for ODP fee schedule rates prior to when it's required by regulation (October, 2022)
- Anticipate proposed changes in fee schedule to be published in December for a 30 day public comment period and implemented in late January or early February, 2022.
- Rate changes for waiver services will be retroactive to July 1, 2021 for the AAW and January 1, 2022 for the ID/A waivers.
- Proposed fee schedule includes increases in all *regular* fee schedule rates (*exception -temporarily enhanced fee schedule rates for CPS and Transportation Trip*).
- Estimated fiscal impact of the proposed rate changes for ODP programs is approximately \$400M annually (*proposed rate updates still in the final stages of review so this number may change*)

Provide Funding for Staff Training, Credentialing and Business Associates Programs for Employment

- One time funding up to \$50,000 or 1% of provider annual revenue whichever is greater for the following types of activities: agency adoption of CMS core competency training for Direct Support Professionals, DSP National Association for Dual Diagnosis certifications, agency completion of National Association for Dual Diagnosis Accreditation, establishing business associate program in industry to promote employment for people with disabilities, Lifecourse Ambassador program.
- Timeframe: March 1, 2021 through March 31, 2024
- Estimated total funding \$23M

Priority II: Supporting Individuals and Families on the Waiting List

Respite and Family Support Funds for Individuals on the Waiting List for ID/A

- Funding available for one-time family support grants for individuals and families on the ODP waiting list for purchase of respite and other eligible family support services
- Timeframe: March 1, 2022 through March 31, 2024
- Estimated funding: \$12M

Priority III: Increasing Use of and Access to Technology

Provide Funding for Technology that Enhances HCBS Provision

- One time funding for **Providers** to support activities including: purchase of assistive and/or remote support technology, purchase and implementation of new software/technology for electronic health records, quality or risk management functions, technology for professional credentialing identified in ODP provider qualifications
- One time funding for purchase of technology for **Supports Coordination Organizations** to improve capacity to conduct remote monitoring of individuals; improve efficiency of Supports Coordinators including maximizing time in the field; obtain or enhance secure inter-office communications or implement technology dependent quality improvement strategies
- Timeframe: 3/1/2022 - 3/31/2024
- Estimated funding: \$13.5M

Technology Accelerator Resources

- Initiative is shared with OLTL.
- Contractor to work with ODP and stakeholders to accelerate adoption of technology through consultation, information dissemination, and training to agencies seeking to adopt remote supports and other technology solutions to support individuals receiving HCBS.
- Includes funding for 2 statewide technology summits.
- Training and materials developed will be available electronically and through ODP's learning management system to provide access after the funding period.
- Timeframe: July 1, 2022 through March 31, 2024

Priority IV: Strengthen ODP's HCBS Infrastructure

Additional Staff to Support Intake, Eligibility of New Populations, Waiver Capacity and Risk Management

- Funding for approximately 80 additional county staff for the following: intake and eligibility for new populations in ODP HCBS waivers; waiver capacity management to accommodate program growth; provider risk audits; monitoring and analysis of health risk screen screening data; conduct independent certified investigations; and capacity building for specialty providers.
- Funding through ARPA available through March 31, 2024. Will require annual appropriations for ODP's HCBS waiver programs to sustain.
- Timeframe: January 1, 2022 through March 31, 2024
- Estimated funding: \$25M

Incident Detection and Incident Reporting Fidelity System:

- Purchase development and implementation of dashboards/software pairing claims data and incident reports to evaluate provider incident reporting fidelity and detect unreported incidents of abuse and neglect.

Develop and Implement Selective Contracting:

- Purchase time limited consultation to support the Department to develop and implement selective contracting and alternative payment methods for selected HCBS services for complex populations to improve quality of service provision. Systems improvement will provide for aligning payment with performance measures and outcomes.

Priority V: Serve More People in the Community

Training to Address Pandemic Related Needs and Promote Initiatives

- Peer-to-peer training for individuals and families on topics related to re-engaging in community, addressing trauma and wellness; promoting self-directed services and use of technology/remote services; develop marketing materials to promote life sharing and supported living models.
- Training and materials developed will be available electronically and through ODP's learning management system to provide access after the funding period.
- Timeframe: March 1, 2022- March 31, 2024
- Estimate funding: \$4M

Purchase of Emergency Preparedness Kits

- Provision of emergency preparedness kits to non-residential HCBS participants
- Estimate funding: \$520k

Provide Funding to Support Housing for Individuals Transitioning from Institutional or Congregate Settings

- One-time funding targeted to residential providers for housing adaptations and purchase for individuals transitioning from public or private ICF, children transitioning from congregate care, medically complex adults when cost effective and to avoid placement in a nursing facility, and to support adults to age in place or transition to supported living or life sharing.
- Timeframe: February 1, 2022 through March 31, 2024
- Estimate funding: \$15M

Transfers from Private Intermediate Care Facility to Community

- Additional Consolidated Waiver capacity for the transfer of 25 individuals from facility care to HCBS
- Timeframe: January 1, 2022 through June, 2023
- Estimate funding: \$5M

Next Steps for ARPA Funding

- Implementation of each of the funding areas
- Important to remember there is some fluidity to the spending plan
 - Estimated timeframes
 - Actual spend, total drawdown & reinvestment
 - Additional CMS approvals required for some funding items
- Quarterly updates to CMS for any changes in funding plan

Service Loss Review

- Reviewed claims by individual FY18-19, FY19-20 and FY20-21
- CPS Findings:
 - 4,650 >75% decrease in units of CPS*
 - 7,427 >50% decrease in units of CPS*
 - 9,647 >25% decrease in units of CPS
 - 865 people no change or increase in CPS units
- In-Home and Community/Companion
 - 984 >75% decrease in units of IHCS-C*
 - 1,999 >50% decrease in units of IHCS-C *
 - 3,349 >25% decrease in units of IHCS-C
 - 6,334 people no change or increase in IHCS-C units

**duplicate individuals from lower percentages included*

Service Loss Review (cont.)

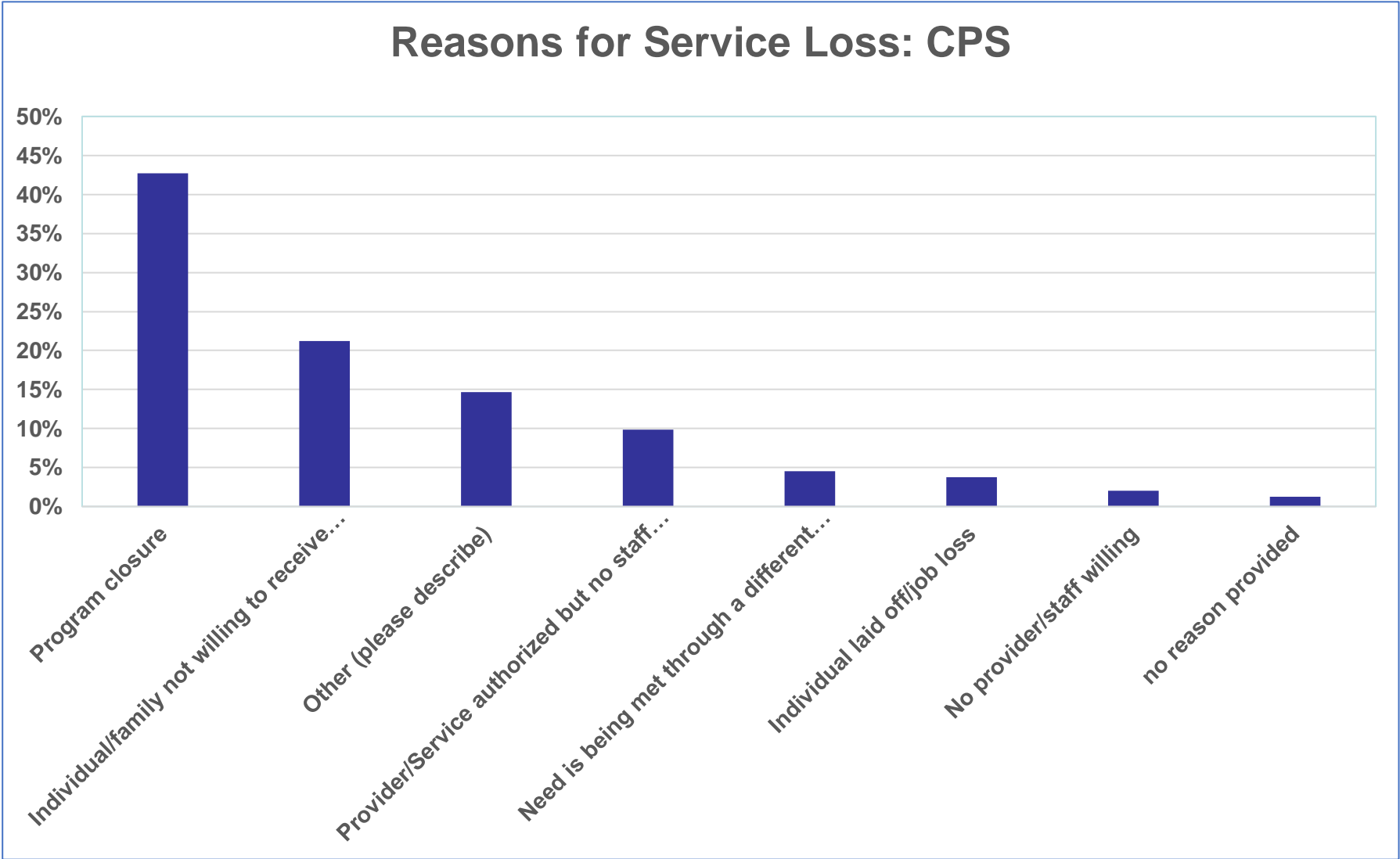
- Employment Services:
 - 562 >75% decrease in units of Employ Services*
 - 959 >50% decrease in units of Employ Services *
 - 1,345 >25% decrease in units of Employ Services
 - 1,203 people no change or increase in Employ Services
- Respite
 - 297 >75% decrease in units of Respite*
 - 516 >50% decrease in units of Respite *
 - 670 >25% decrease in units of Respite
 - 543 people no change or increase in Respite units

**duplicate individuals from lower percentages included*

Service Loss Review (cont.2)

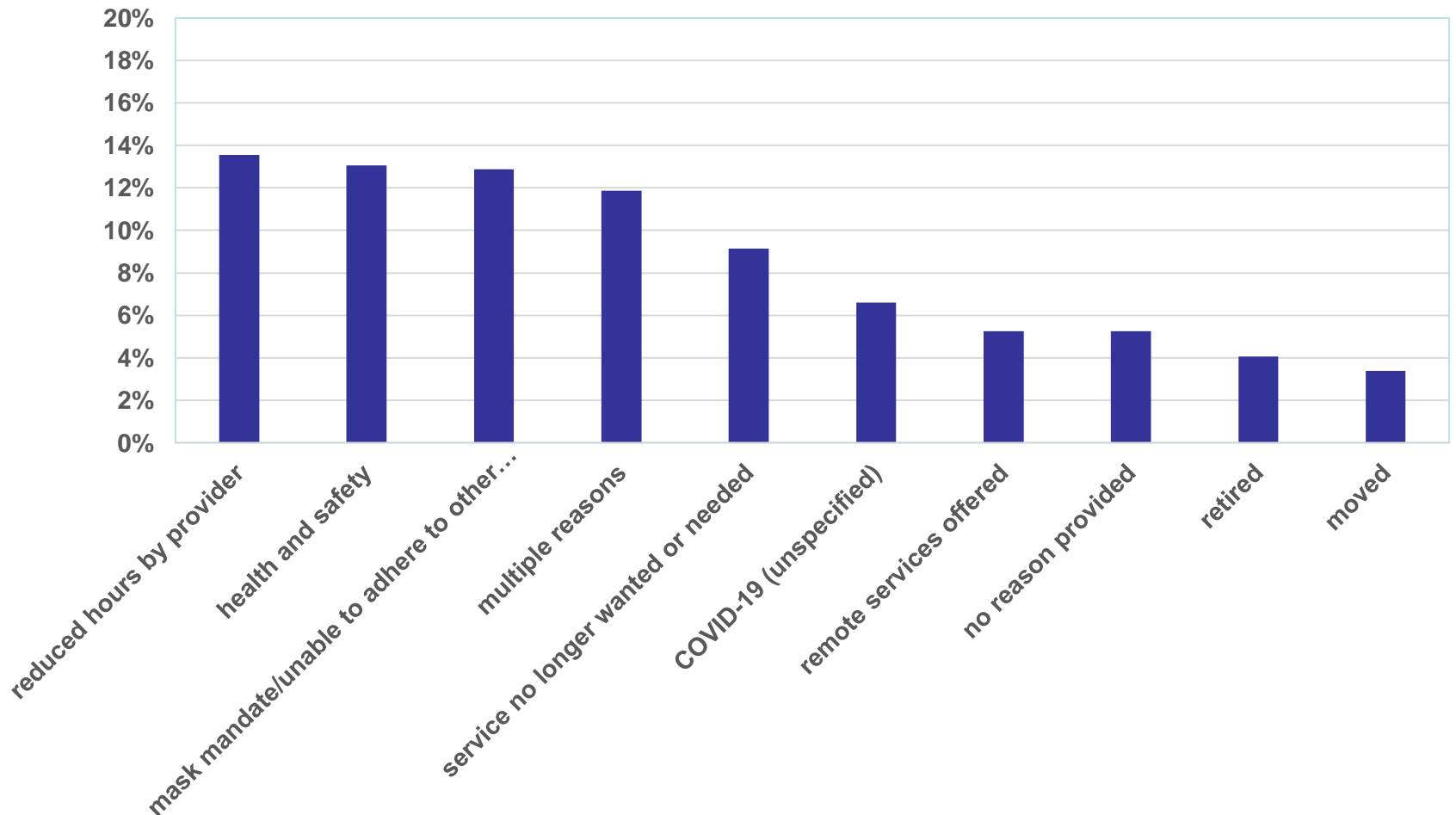
- Claims review doesn't tell us *why*
- ODP surveyed SCs to get a picture of the reasons behind service loss in particular categories
- In November 2021, SCs completed surveys for each individual with 75% or greater loss of CPS, Employment, IHCS-Companion and Respite
 - 95% completion rate by SCs

CPS SERVICE LOSS DATA



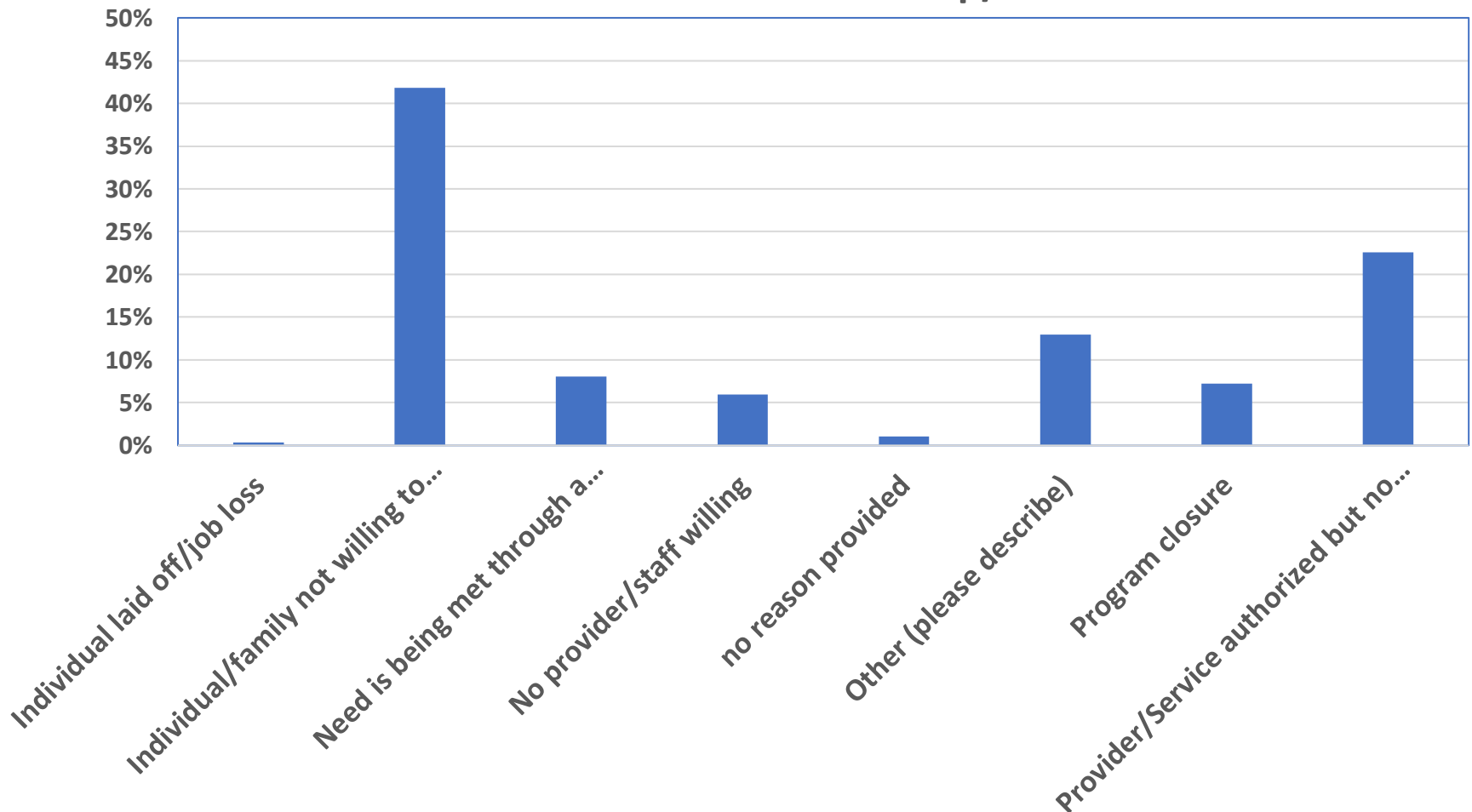
CPS SERVICE LOSS DATA (cont.)

"Other" Reasons for CPS Service Loss (Top 10)

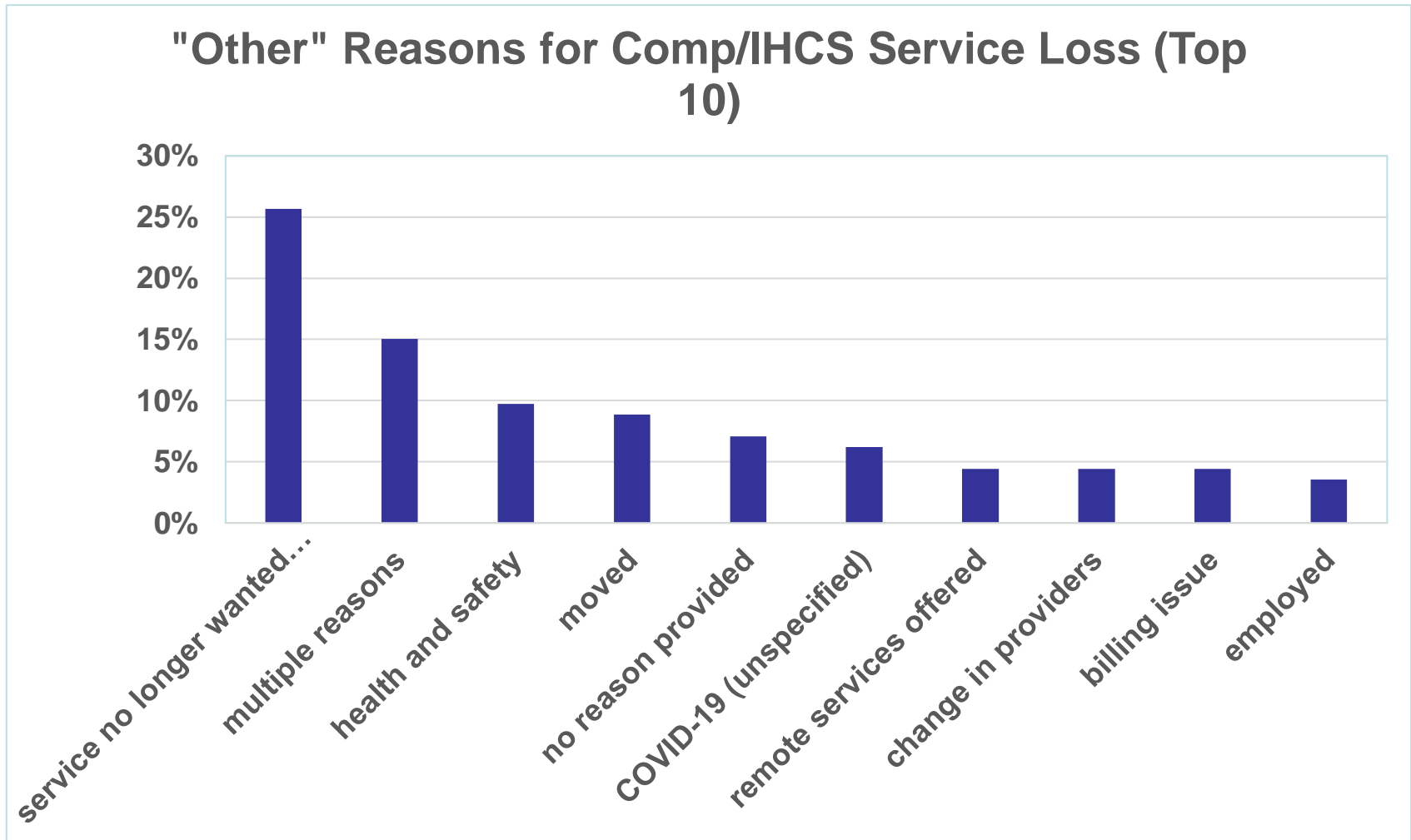


COMPANION AND IHCS SERVICE LOSS DATA

Reasons for Service Loss: Comp/IHCS

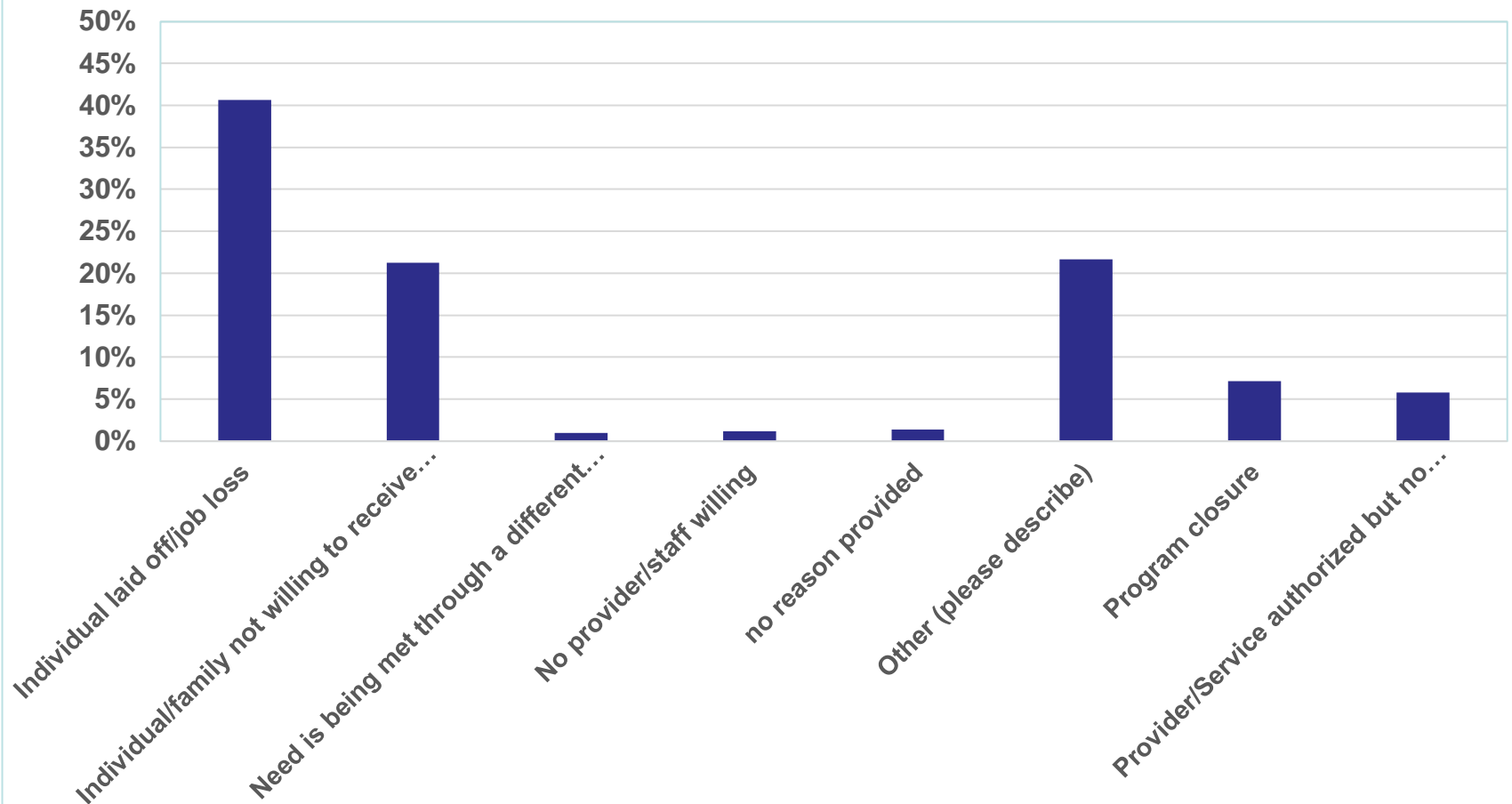


COMPANION AND IHCS SERVICE LOSS DATA (cont.)



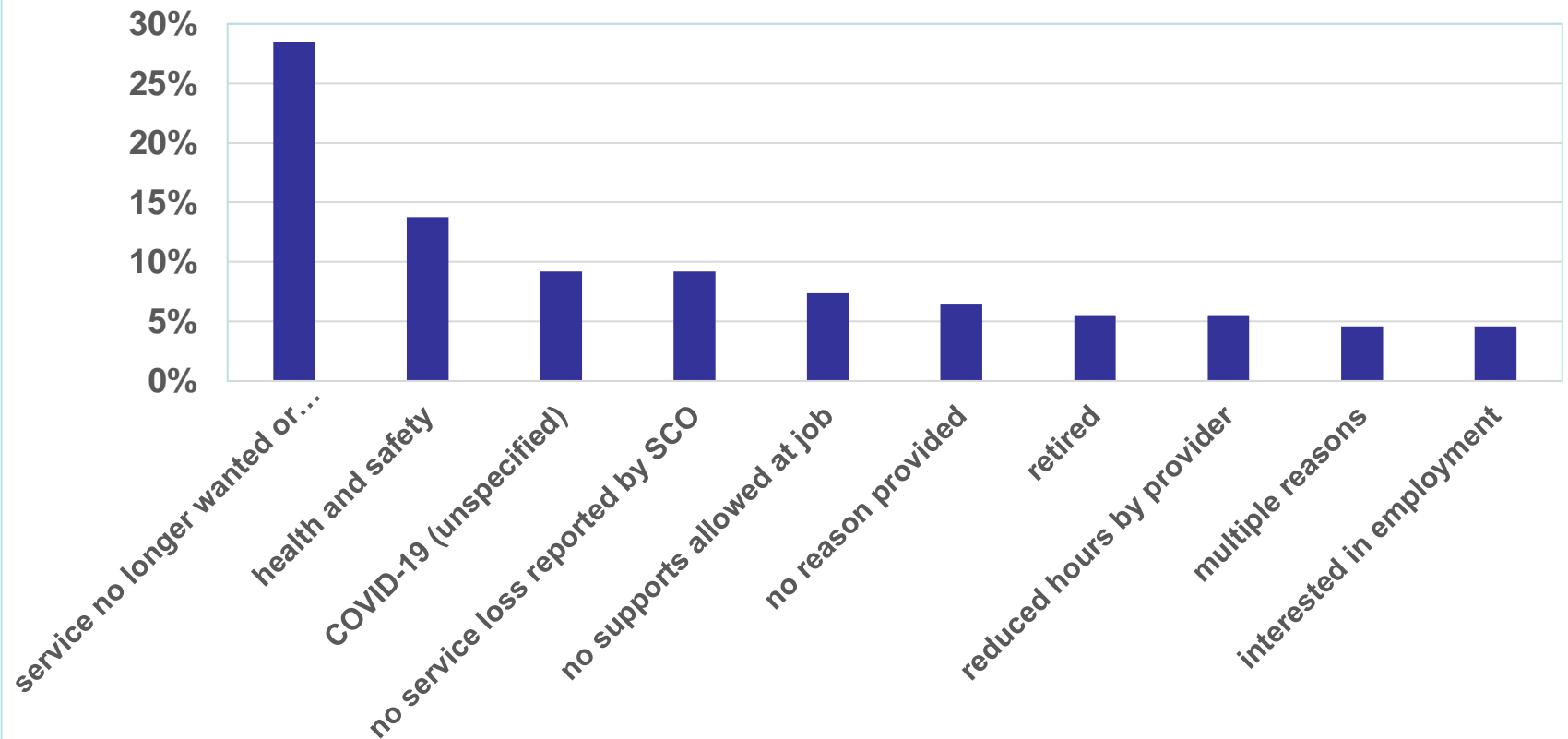
EMPLOYMENT SERVICE LOSS DATA

Reasons for Service Loss: Employment

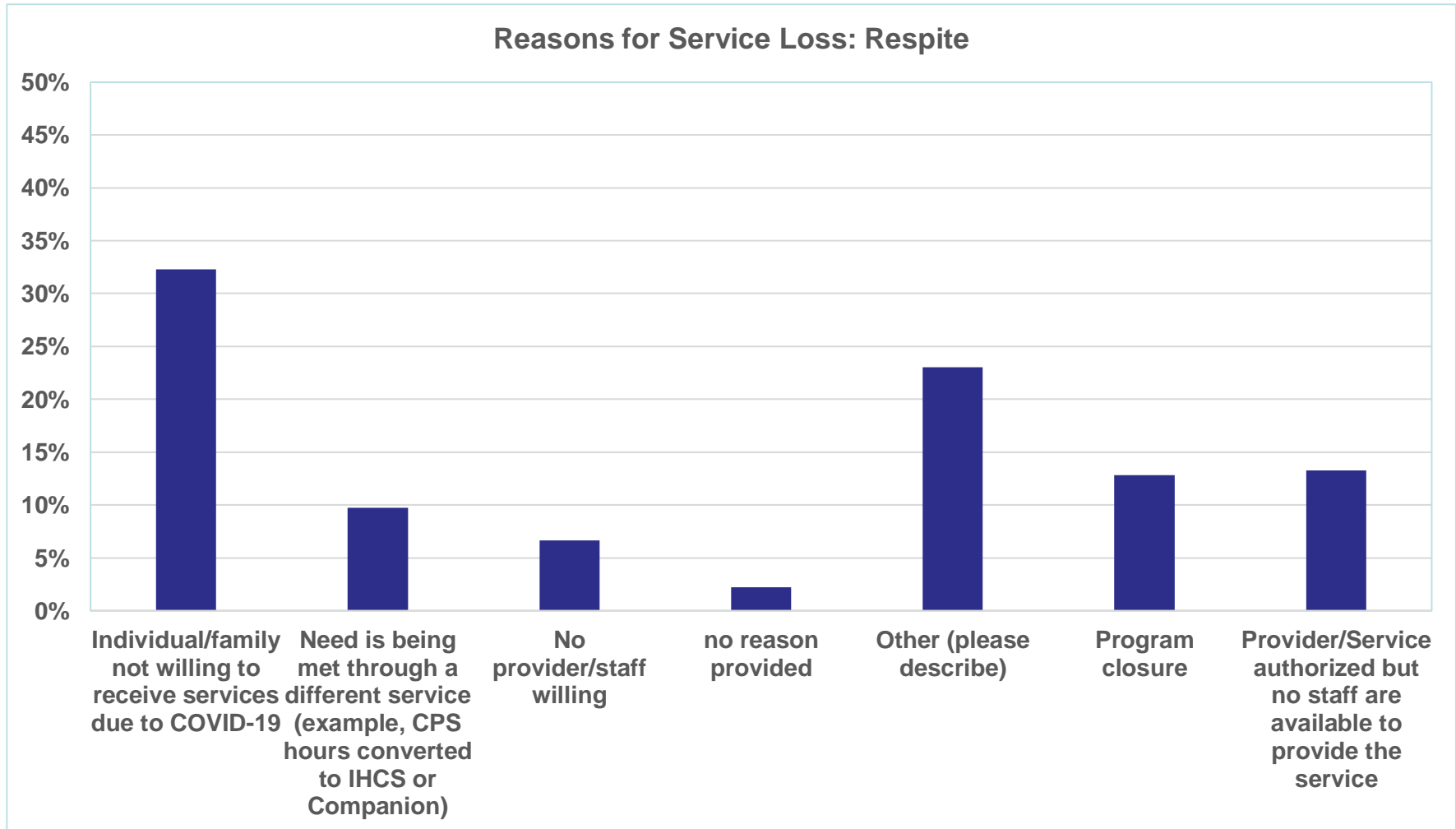


EMPLOYMENT SERVICE LOSS DATA (cont.)

"Other" Reasons for Employment Service Loss (Top 10)



RESPITE SERVICE LOSS DATA



RESPITE SERVICE LOSS DATA (cont.)

"Other" Reasons for Respite Service Loss (Top 10)

