



# State of Louisiana

Department of Health and Hospitals  
Office for Citizens with Developmental Disabilities

## Quarterly Update to the DD Council

### Office for Citizens with Developmental Disabilities (OCDD)

March 26, 2013

#### **GENERAL UPDATE ON AGENCY INITIATIVES:**

**Transition Status:** Pinecrest Supports and Services Center (PSSC) is the only remaining public Supports and Services Center operating in Louisiana supporting a total of 400 residents on January 1, 2013. Current census to date is 400. During the past quarter, PSSC admitted six people and discharged six people with an additional forty persons planning for transition to an alternate setting with six persons projected to move to waiver supports or private ICF/DD (Intermediate Care Facility for Persons with Developmental Disabilities) supports within the next quarter. OCDD continues to provide Transition and Technical Support Team services to persons transitioning to private supports for a least a one-year period post-discharge. Satisfaction Rates for individuals assessed post-discharge indicate that people are satisfied overall in their new living situations. Baseline rates for those persons surveyed in this quarter noted 84% overall satisfaction, with a 95% satisfaction rate at one year post-discharge (assessed in January 2013). Additionally, 98% of the persons transitioned this fiscal year have remained in their most integrated setting. OCDD also continues to provide oversight for twenty Cooperative Endeavor Agreement homes with private providers. These private providers have full responsibility for delivery of ICF/DD services and facility operations in their current locations. OCDD continues to employ staff to serve as the contract monitors for these facilities, providing support to the new provider and serving as a liaison between the Office and the provider. Three of these locations are the former North Lake Supports and Services Center, Northwest Supports and Services Center, and Acadiana Supports and Services Center. The remaining seventeen Cooperative Endeavor agreements are for small ICF/DD community homes located in six regions throughout the state. In total, there are 531 beds allocated to these agreements.

**Accountability and Implementation Plan (AIP) Quality Partnership Update:** The Human Services Interagency Council approved and signed the proposed changes to the Human Services Accountability and Implementation Plan (AIP) in February 2013. The validation visits to the regions, districts and authorities began in February 2013 for fiscal year 2012-2013. The performance indicators currently in effect are being monitored along with the performance indicators added to the AIP Outcome Measures and Monitoring (Master File) for waiver services. However, the monitoring for the waiver performance indicators is being conducted as

a pilot project. Once the validation visits are completed for this fiscal year, the operational instructions will be revised for full implementation in fiscal year 2013-2014.

**Amending the Children's Choice (CC) Waiver:** OCDD staff has begun the rulemaking process for the amendment to the Children's Choice waiver, which was approved in June 2012. The amendment includes the self-direction option for Family Support services in the Children's Choice (CC) waiver as well as the following six new therapeutic services: applied behavioral analysis; aquatic therapy; art therapy; music therapy; sensory integration; and hippotherapy/ therapeutic horseback riding. In addition to therapeutic services, specialized medical equipment and supplies were also incorporated as an extended state plan service. Included in the amendment are revised Home and Community-Based Services waiver licensing standards; updates of plan of care development and approvals; and selection of entrants to waiver criteria in adherence to Legislative Acts for Military Families. Staff is currently rewriting the Children's Choice waiver rule to include the new services and other program changes. Staff is required to concurrently develop the associated policies and procedures; update the provider manual; develop provider enrollment packets; identify needed system changes for implementation; and develop training for families/recipients, support coordinators and service providers. In an effort to expedite utilization of services, the Self-Direction option for Family Supports services was separated from the larger amendment rule-making process to be submitted as an independent rule. This Notice of Intent was completed and submitted for review on November 8, 2012. After initial review, adjustments were made to rule. Adjustments to the rule will include not only Self-Direction, but all of the new services in the application approved by the Centers for Medicare & Medicaid Services (CMS). The anticipated date of final rule is September 2013.

Evidence of Children's Choice compliance with federal guidelines and assurance in preparation for the Children Choice Waiver renewal application was requested by CMS. The Children's Choice evidentiary report was submitted to CMS on June 1, 2012. After initial review, CMS has requested additional information (evidence) prior to waiver application renewal. OCDD staff will continue to work with DHH's Health Standards Section, Waiver Compliance unit, and OCDD's Quality Section in securing approval of the Children's Choice waiver renewal from CMS; all information has been forwarded to CMS. Children's Choice waiver renewal date is 2/21/14.

### **STATUS OF AGENCY'S ACTIVITIES ON DD COUNCIL PLAN INITIATIVES:**

**Access to Behavioral and Medical Intervention in the Community:** OCDD continues to operate a crisis referral system that requires exploration of all possible community-based and private options prior to admission to a supports and services center (SSC) and facilitates diversion activities and assistance to avoid admissions. Sixty-nine (69) referrals for admission occurred in 2012 which was a decrease from last year. Diversion activities continue to be successful in many instances though they are more challenging, as referrals are more focused on those individuals with the most complex support needs. Admission rate is comparable to diversion rate at this time. Primary presenting problem continues to be focused on behavioral/mental health concerns. OCDD continues to focus on more systematic referral to the resource centers for consultation and assistance in ensuring needed specialty services

were in place. Resource center consultations were secured for 68% of all referrals with a higher adult diversion rate of 61% for adults who received consultation by a Resource Center clinician. Diversion rate for juveniles is not as high, but this may be attributable to lack of available community living options when the home living option is determined not viable.

OCDD continues to work collaboratively with Medicaid to assess options for offering enhanced medical care coordination for waiver recipients to improve coordination among medical professionals. The Office is also working with the Louisiana Behavioral Health Partnership (LBHP) to educate Office of Behavioral Health (OBH) and Magellan Health Services about its transition process and create opportunities for LBHP to become involved with OCDD in integrated transition planning. The Office is also using the LBHP to access behavioral health services for persons who either: (1) have not been able to access or maintain services, and/or (2) have acute psychiatric admissions post transition and can benefit from the continuity of care segment in the LBHP. Several successful collaborations have occurred and are assisting in better informing the referral and support process for individuals with both developmental disabilities and mental health concerns.

OCDD has completed an analysis of current system gaps related to supporting individuals with behavioral and medical needs within community/private living situations and research of other state programs/partnerships/approaches to building community and private provider capacity to support these individuals. The Office is working to develop a more comprehensive approach to increasing quality and access to needed medical and behavioral services within community settings. The Office initiated a statewide workgroup to evaluate the data related to serving individuals with complex needs and to develop recommendations on the role OCDD Resource Centers may be able to play to support community providers and professionals to better serve individuals with complex needs and to support development of local partnerships and improve access to needed services. A small internal workgroup met from August to November 2012 to gather statewide data available and research other state practices. A larger stakeholder workgroup has been routinely meeting since December 2012 to review the data and information from other states and develop recommendations. Currently, the workgroup is piloting initiatives related to local crisis diversion response, triage response and partnerships between OCDD and local entity staff, improved monitoring and support for specific high risk groups, and provider partnerships for improved quality outcomes. These pilots along with the other available data will form the basis for overall recommendations regarding the role of OCDD Resource Centers in enhancing OCDD's ability to support community providers and professionals in this area. OCDD expects to have pilot results and broader recommendations by the end of the fiscal year.

**Residential Options Waiver (ROW) Renewal Status:** The Residential Options Waiver (ROW) Application Renewal was reviewed by Centers for Medicare & Medicaid Services (CMS). A Request for Additional Information (RAI), along with Clarifying Questions, was submitted to the Waiver Assistance and Compliance Section (WCS) for completion. The items in the RAI and Clarifying Questions which pertained to OCDD were completed and re-submitted to WCS for review and re-submission to CMS. Once CMS approval has been obtained, any updates for rule changes and provider manual updates will be made and

submitted to Medicaid for review and processing. CMS has granted a continued extension of the waiver with a requested effective date of 7/01/13 to align with the fiscal year.

**Direct Support Professionals' Training/Certification:**

Use of Technological Solutions to increase access to training opportunities for Direct Support Professionals (DSPs): OCDD worked collaboratively with Health Standards to develop a DSP curriculum and with Essential Learning to convert this curriculum to an electronic learning forum for greater access to needed training for DSPs serving individuals who use self-directed services. DSWs supporting individual who use self-directed services have begun using the electronic training curriculum. OCDD will assess the success of this training option and feasibility of its use beyond self-direction.

Development of Specialized Curricula for DSPs: OCDD has worked through the Money Follows the Person Rebalancing Demonstration - My Place Louisiana (My Place) to develop two specialized curricula specifically to assist in improving DSP skills in supporting individuals with complex needs - Positive Behavior Supports Curriculum and Medical/Therapeutic Supports Curriculum. Both curricula continue to be implemented by OCDD clinicians providing the training to identified providers who are agreeing to support individuals with significant medical and/or behavioral needs moving through the My Place program. The training has been well received by providers and family members and assisted in successful moves for several individuals.

**Money Follows the Person (MFP) Rebalancing Demonstration - My Place Louisiana (My Place):** The My Place staff has continued to provide pre- and post-move supports (i.e., Community Living Training and Support, Transition Maintenance, and other supports) to assist one-hundred five (105) individuals with supports and training totaling \$101,069. Direct Support Worker (DSW) Specialization Training has been conducted for one-hundred ninety (190) provider staff. Training cost for DSW training, travel, and salary reimbursement to date is \$117,110. My Place has paid \$7,000 in Sustainability Bonuses to DSWs who successfully completed the training, passed all demonstration and written assessments and then worked for 365 consecutive days with a My Place participant. To date thirty-three (33) people have been referred to the Housing Relocation Assistance Program (HRAP) and thirty (30) have received lists of appropriate housing options for their review. Currently, twenty-seven (27) families and individuals have moved into housing located by the HRAP contractors and one (1) family has received My Place supports to purchase a home. My Place has spent \$23,117 on this program through March 10, 2013.

As of March 10, 2013 a total of one-hundred sixty-three (163) people have transitioned to the community with My Place supports. Transition numbers for My Place to date are:

- New Opportunities Waiver (NOW) – one-hundred forty (140) individuals;
- Children's Choice (CC) waiver – eighteen (18) children; and
- Residential Options Waiver (ROW) – five (5) children.

One-hundred eleven (111) people have completed their 365 days in the My Place program and continue to receive waiver services. The OCDD My Place program transition Benchmark for 2013 is fifty (50) transitions. At this time, My Place has transitioned two (2) people during the

2013 calendar year. Of the one-hundred sixty-three (163) who have transitioned with My Place support, ninety-two percent (92%) remain in home and community living situations.

**EarlySteps:** Following the implementation of the more restrictive eligibility criteria on May 1, 2012, the EarlySteps program has 3,905 active children as of March 1, 2013. This represents a decrease of 1,668 children since May 1, 2012. As of March 1, 2013, the number of children and families that have received support from EarlySteps this fiscal year is 7,834.

The Annual Performance Report was submitted to the US Department of Education (USDOE) on February 7, 2013. EarlySteps met or exceeded its performance on eight (8) indicators, had the same or improved performance for eleven (11) indicators, and had slight slippage for three (3) indicators. The state will receive its determination from the USDOE based on the state's performance in June. Last year's determination was the highest rating: Meets Requirements. The process for issuing the determinations has been revised and EarlySteps is pleased with its continued improvement for 2011-2012.

The Federal Application for funds is posted to the EarlySteps website for public comment. Included in the application are two proposed changes to the eligibility criteria and the updated Family Cost Participation schedule. Due to the "sequestration" budget cuts which went into effect March 1, 2013, EarlySteps is anticipating a cut of approximately \$320,000 in Federal funds for the 2013-2014 fiscal year. Three public hearings were held in March to accept comments on the proposed changes and comments are being accepted through April 27, 2013. Comments may be submitted to [brenda.sharp@la.gov](mailto:brenda.sharp@la.gov) with "Comments to the Federal Application" in the subject line.

**Employment First/Integrated Individualized Employment:** The Employment First Work Group met on January 23, 2013. At the meeting, two sub-committees were formed (the Data Sub-Committee and the Rate Sub-Committee). The Data Sub Committee has been working to review the data collection document that will be used to collect information on the individuals who are working in integrated community employment. This information will be collected from the Support Coordinators. The Rate Committee will be reviewing rates from other states in comparison to Louisiana's rates for Prevocational and Supported Employment Services. OCDD is currently working in partnership with Louisiana Rehabilitation Services (LRS) and the Advocacy Center to provide training on employment to the Support Coordinators around the state. OCDD continues to provide employment training at the provider quarterly meetings and to other stakeholders around the state. The Employment First Work Group's next meeting will be held on April 23, 2013.