Office for Citizens with Developmental Disabilities (OCDD)

QUARTERLY DD COUNCIL REPORT
(Submitted for 2nd Quarter 2015)
June 23, 2015

SERVICES

Developmental Disability Waiver Activities
The following figures reflect waiver activities from 7/01/14 thru 6/05/15:

New Opportunities Waiver (NOW):
- offers - 743
- linkages - 539
- certifications - 407

Children’s Choice (CC) Waiver and CC-425:
- offers - 591
- linkages - 360
- certifications - 316

Supports Waiver:
- offers - 888
- linkages - 279
- certifications - 180

Residential Options Waiver (ROW):
- offers - 0
- linkages - 0
- certifications - 0

Request for Services Registry (RFSR) as of 6/18/15
- New Opportunities Waiver (NOW): 12,952
- Supports Waiver: 1,705

Pinecrest Supports and Services Center (PSSC) - Transition Status
- The census of Pinecrest Supports and Services Center to date is 406.
- In 2015, PSSC has admitted 19 participants and discharged 16 participants.
- Additionally, 35 participants are planning for a transition from the center.
- Five participants are projected to move to waiver supports or private Intermediate Care Facility (ICF) supports within the next quarter.
- The overall satisfaction rate for individuals leaving PSSC assessed one year post-discharge is 92 percent.
EarlySteps

- The EarlySteps program is currently providing services to 4,332 children.
- The statewide staff and stakeholder planning team, including State Interagency Coordinating Council (SICC) members, participated in a daylong meeting on 4/7/15 at the Claiborne Building followed by the SICC workgroups and SICC meeting the following day. The purpose of the meetings was to address the requirements for Phase II of the State Systemic Improvement Plan (SSIP) and to set the priorities for the three SSIP workgroups for 2015. Phase II requirements include: in-depth infrastructure analysis; development of the components to support local improvement activities; and an evaluation plan which will be used to measure the success of the improvement activities. Central Office staff received positive, informal feedback on the Phase I plan which was submitted in April 2015. The Office of Special Education Programs (OSEP) was particularly impressed with the process for stakeholder involvement that EarlySteps used in the development of the Phase I Plan. OSEP will issue the state’s determination of the entire Annual Performance Report (APR) including the SSIP in June 2015. Due to OSEP using a new measurement process for issuing determinations, the State is not expecting to receive the highest level of Meets Requirements as it has for the past four years.
- The 2015-16 application for the Individuals with Disabilities Education Act (IDEA), Part C funds was submitted to OSEP in April 2015. The state will receive $6,587,144 in Federal funds, which is a decrease of $126,095 compared to the current year funding level. The state expects to receive the award by 7/1/15.

Children’s Choice (CC) Waiver

- The Children’s Choice (CC) Waiver continues to operate under the five-year renewal which occurred on 6/27/14.
- The Self-Direction option for Family Support services in the Children’s Choice (CC) waiver began in February 2014. Currently, there are twenty-eight CC waiver participants enrolled in Self-Direction across the state.
- Provider enrollment continues to be ongoing.
- Therapeutic services (aquatic therapy; art therapy; music therapy; sensory integration; and hippotherapy/therapeutic horseback riding) continue to be implemented through the CC waiver.
- The CC Program Manager has completed updates to the Children’s Choice Provider Manual and Children’s Choice waiver documents, which are posted on OCDD’s website. Waiver related documents and forms are available for download. Related links:
  - [http://www.lamedicaid.com/provweb1/Providermanuals/CCW_Main.htm](http://www.lamedicaid.com/provweb1/Providermanuals/CCW_Main.htm)
  - [http://dhh.louisiana.gov/index.cfm/page/218](http://dhh.louisiana.gov/index.cfm/page/218)

Residential Options Waiver (ROW)

- ROW Rule - Permanent Supportive Housing services:
  - Rulemaking has been submitted to the Medicaid policy section, and the Notice of Intent is anticipated to appear in the July 2015 Louisiana Register in reference to the addition of two Permanent Supportive Housing (PSH) services
to the ROW Waiver which have been approved by Center for Medicare & Medicaid Services (CMS):

- Housing Transition Services – Assists participants who are transitioning into a PSH unit, including those transitions from institutions to secure their own housing, and
- Housing Stabilization Services – Assists participants to maintain their own housing as described in their plan of care.

**ROW Emergency Rule Re-write:**
- OCDD has submitted rule edits to the Medicaid policy section and the Notice of Intent is anticipated to appear in the July 2015 Louisiana Register. This rule proposes to finalize the current emergency rule, amending the Residential Options Waiver (ROW) rule to:
  - revise the provisions governing the allocation of waiver opportunities and the delivery of services in order to provide greater clarity;
  - revise the allocation of waiver opportunities in order to adopt criteria for crisis diversion, revise the provisions governing the individuals who may be offered a waiver opportunity, and clarify the provisions governing the Developmental Disabilities Request for Services Register;
  - clarify adult dental services accessible to participants;
  - clarify expectation of host home provider/host family to inspect/report significant changes, which may impact ROW participants; and
  - include person-centered language edits [i.e., revise all Mentally Retarded/Developmentally Disabled (MR/DD) facility language to Intermediate Care Facilities for Persons with Intellectual Disabilities (ICF/ID), and revise Individual Support Plan (ISP) to Plan of Care (POC) for language consistency across HCBS waivers].

**ROW Manual Revisions in draft:**
- The ROW Program Manager will be working on the related revisions to the ROW Provider manual and business rules to allow for PSH service utilization.

**ROW Conversion:**
- OCDD is continuing its discussion with Intermediate Care Facilities for Persons with Developmental Disabilities (ICF/DD) providers who have voiced interest in the conversion from ICF/DD to ROW.
  - One provider has continued to communicate interest and plans to convert one ICF/DD home to ROW opportunities. The provider has run into a delay with renovating the property and project leadership changes; however, the provider expressed a plan of moving forward.
  - OCDD staff will be meeting with the statewide Executive Directors and other leadership of a second ICF/DD provider to clarify ROW Conversion training during the month of June 2015 to provide information regarding ROW conversion.

**ROW Provider Enrollment :**
- The ROW Program Manager has continued to focus efforts on supporting Medicaid-qualified providers to enroll as ROW providers. This effort will
continue next quarter to ensure ROW participants have greater freedom of choice.

- **ROW Amendment draft:**
  - The ROW Program Manager is in process of drafting an amendment to the ROW waiver in preparation of the anticipated transition of OCDD eligible Office of Aging and Adult Services (OAAS) participants to the ROW waiver.

**INITIATIVES**

**Employment First/Supports Waiver**

- The Supports Waiver amendment is still waiting final approval from CMS. This amendment includes the addition of Transition from School to Work opportunities (slots) and the Priority Slots along with changes to units for billing for some services to allow flexibility for participants.
- One-on-one technical assistance has started to occur with providers and will continue throughout the year as requested by providers. OCDD has also begun hosting 'round tables' with vocational providers in each region to further provide technical assistance throughout the year.
- Meetings with families are continuing to occur to help them understand the changes that will be occurring with individual employment opportunities, the vocational programs, and how their individuals will be affected by all of the changes. These meetings will continue as requested.
- Overall training has occurred in order to educate Support Coordinators, Providers, and Local Governing Entities (LGEs) on the changes that will be occurring in order to come into compliance with CMS regulations. Training will be ongoing and the next scheduled training will be for providers on the Provider Self-assessment that they must complete. This training is taking place during the month of July.
- OCDD is continuing to work with Louisiana Rehabilitation Services to draft a Memorandum of Understanding (MOU) that will contain information from the Workforce Innovation Opportunities Act (WIOA), which will improve employment outcomes for individuals with developmental disabilities. This MOU will be a joint MOU that also includes Office of Behavioral Health and Medicaid services.
- Improving opportunities for employment for individuals with developmental disabilities continues to be one of OCDD’s top priorities.

**Money Follows the Person (MFP) Rebalancing Demonstration (My Place Louisiana) as of 6/10/15**

- MFP activities provided:
  - Pre- and post-transition assistance requests total 242 with 140 My Place participants receiving assistance (some participants made multiple requests)
  - Direct Service Worker (DSW) Specialization Training for 260 provider staff and family members
- Housing Relocation Assistance Program (HRAP) activities included:
  - 56 referrals for HRAP
  - 41 people receiving lists of appropriate housing options for their review
34 families or individuals have moved into housing located by the contractors

- Total of 239 people have transitioned to the community with My Place supports:
  - New Opportunities Waiver (NOW): 204 individuals
  - Children’s Choice (CC) Waiver: 26 children
  - Residential Options Waiver (ROW): 9 children

**System Transformation**

System Transformation activities completed in the second quarter of 2015:

- Focused work has continued with the System Transformation Core Stakeholder Advisory Committee on the proposed system for prioritization of persons on the Request for Services Registry (RFSR). The prioritization system draft was finalized with the Core Stakeholder Advisory Committee. A webinar was held on 4/28/15 to outline the draft process and the tool that will be utilized; all OCDD stakeholders were invited to participate. The prioritization process will be included in the 1115 waiver application. There were no significant concerns expressed by stakeholders regarding this process. Therefore, OCDD is in the process of developing a manual to operationalize the prioritization.

- In addition to the above, System Transformation activities related to data system improvements were continued this past quarter. A Request for Proposal (RFP) for a new incident management system was finalized and is currently with Division of Administration (DOA) for approval. This new data system will incorporate improvements to incident reporting and tracking proposed in 2014 as a part of System Transformation. In addition, the Participant Services Database has been fully reconciled, and any out-of-date or missing information is being addressed by OCDD and Local Governing Entities (LGEs). This may involve contacting individuals to update statement of approval information or contact information. This is an important component in readying the OCDD system for MLTSS. This RFP also includes implementation of a No Wrong Door system within the OCDD and Office of Aging and Adult Services (OAAS) populations.

- OCDD Assistant Secretary Mark Thomas and his executive team completed visits to all regions across the state, providing up-to-date information on the Bayou Health opt in, the Louisiana Behavioral Health Partnership (LBHP) integration, which will occur later this year, and MLTSS to providers, support coordination agencies, families, and LGE staff.

- OCDD continues to encourage providers to submit voluntary information utilizing the established provider questionnaire so that individuals and families can have a resource to assist in selecting a provider through Freedom of Choice. To date, 58 providers have submitted a questionnaire that is included on OCDD’s webpage. A recent memorandum was sent to all providers strongly encouraging that they submit this information to OCDD.

**Medication Administration**

- The DHH/Louisiana State Board of Nursing workgroup meeting is scheduled for June 2015 to review the online training for medication administration for staff working with individuals in self-direction. If approved by both parties, implementation in the self-direction program will begin in July 2015.
The pilot project that another medication administration workgroup is working on is the assessment tool that will help to determine whether or not someone requires medication administration training. The project ends 6/30/15, and this group will meet again this summer to review the implementation of the assessment tool. A date for this meeting has not been set.

Certified Medication Attendant (CMA) Program

- The emergency rule that extended the CMA program from a one-year program to a two-year program was renewed for another 120 days (effective 6/27/15), and will be published in the 6/20/15 edition of the Louisiana Register. Providers should review the changes and take steps to ensure the CMA Guidelines are being followed.
- Per the emergency rule change, certificates for CMAs entering the program after 10/30/14 are being issued with expiration dates that are two years from the last day of the month the CMA passed the state exam. It is incumbent upon providers to have a system in place to track expiration dates for their CMAs and to ensure the requirements for recertification are met before the expiration dates. Providers must also ensure that annual competency checks (the 25 Skills Checklist) are completed.
- The changes to the program, as outlined in the emergency rule have required extensive changes to the CMA database to reflect the impact on CMA expiration dates. The OCDD is working with the Division of Administration IT programming staff to develop and implement the changes required within the database.
- The state office CMA staff members have input a backlog of initial certification records processed in the previous certification year into the CMA database, while continuing to process recertification requests and initial certification requests received on an ongoing basis. To date, there are over 4,500 active CMAs statewide. This is a significant increase from the 2,000 active CMAs that existed prior to the discontinuation of physician delegation.
- The OCDD offered two CMA Instructor training sessions for new instructors. A session was held 6/19/15 in Pineville, LA at Pinecrest Supports and Services Center and another session held 6/22/15 in Baton Rouge, LA at the Bienville Building. There was no cost to attend this training, but instructors had to meet minimum qualifications and pre-register for the event.

Access to Behavioral and Medical Intervention in the Community

The following information outlines Resource Center activities inclusive of crisis referral and trends associated with placement requests to OCDD Central Office, as well as provides an update on the Resource Center and Local Governing Entity collaboration on the Non-Consensual Sexual Behavior (NSB) process for the first quarter of 2015 (1/1/15 – 3/31/15). (Note: Reporting is on last full quarter.)

- Within the first quarter there have been 40 crisis referrals, with 30% of these individuals requiring admission to Pinecrest Supports and Services Center (PSSC).
• Last year’s trend relative to persons being referred from other more intensive and institutional-type settings has continued for the first quarter of 2015, with 58% of referrals coming from institutional/acute care settings. Further breakdown within these settings reveals that 56% of these referrals were from psychiatric hospital settings, 13% of persons were in a psychiatric residential treatment facility at the point of referral, 13% were for persons who were incarcerated, 13% were supported in ICF/DD settings, and 5% of persons were in an acute care hospital.

• Thirty-five out of forty cases (88%) referred for admission received a crisis consultation from the Resource Center, with the ability to divert 69% of these individuals from long-term institutionalization.

• Efforts toward assuring that persons with a history and/or current challenges related to non-consensual sexual behavior (NSB) have access to the needed supports remain ongoing. This quarter’s data revealed that 195 persons are receiving follow up by the local oversight team. Since the initiation of the NSB process, only six persons have had a subsequent incident of NSB, and all had waiver supports at the time of the incident. For these six persons, not all incidents involved direct contact. Three of these individuals remained in the waiver (although one has a pending court hearing). For the other three individuals, one person was then incarcerated; one person was admitted to a forensic hospital; and one individual was admitted to PSSC and then transitioned back into waiver within a seven month timeframe. It should be noted that on average, between 5% and 20% of known adult sex offenders will be re-arrested for a new sex crime within three to six years of follow up [Association for the Treatment of Sexual Abusers (ATSA), 2010]. Given that the NSB process encompasses a broader definition than just persons arrested for sex offenses (e.g., NSB includes sexual behavior that jeopardizes the safety of another, and/or places an individual at risk for contact with law enforcement, and/or includes persons whose needs require a level of oversight to reduce the risk to others), the 3% rate of a subsequent NSB event is still lower than the reported average re-arrest rate. Review of this quarter’s NSB data revealed that involvement of the local oversight team has allowed for enhanced responsiveness in several situations as the individual’s NSB-related support needs increased.

In terms of collaboration across entities relative to the behavioral health needs of persons with intellectual and developmental disabilities, the Office continues to actively meet with representation from the Office of Behavioral Health and Medicaid relative to the merger of persons currently receiving services within the Louisiana Behavioral Health Partnership (LBHP) into Bayou Health. Identified behavioral health enhancements will be included in the transition to MLTSS. Additionally, more active triaging and coordination is occurring across Offices to address cases with complex support needs.