

Office for Citizens with Developmental Disabilities (OCDD)
QUARTERLY DEVELOPMENTAL DISABILITIES (DD) COUNCIL REPORT
 (Submitted for 2nd Quarter 2017)
 June 28, 2017

SERVICES

Developmental Disability Waiver Activities

The following figures reflect **waiver activities thus far in state fiscal year 2016-2017 (July 1, 2016 – June 18, 2017)**:

WAIVER	Offers** #	Linkages #	Certifications
NOW	162	115	217
Children’s Choice/CC-425	253	113	28
Supports	151	54	25
ROW	392***	11	2

*** This is the number of unique individuals made an offer or final offer during this time period.*

**** Includes offers made under the ROW Pilot Project.*

The following figures reflect **total waiver numbers as of June 18, 2017**:

WAIVER	Total # Slots Allocated	Total Participants linked, but not certified	Total # Certifications	Total # Vacant Slots
NOW	9,032	80	8,597	355
Children’s Choice/CC-425	1,475	125	1,085	265
Supports	2,050	53	1,777	220
ROW	210	11	24	175

Request for Services Registry (RFSR) as of May 31, 2017:

- New Opportunities Waiver (NOW): 15,132
- Supports Waiver: 1,251

Children’s Choice (CC) Waiver

A review of the current Children’s Choice rule, policy and application is taking place as the Office moves forward with the necessary changes to align with the Home and Community-Based Services (HCBS) Settings rule and enter into the Tiered Waiver.

Supports Waiver

A review of the current Supports Waiver rule, policy and application is taking place as the Office moves forward with the necessary changes to align with the HCBS Settings rule and enter into the Tiered Waiver.

New Opportunities Waiver (NOW)

The NOW Rule is expected to be issued as a Notice of Intent on July 20, 2017. The Rule has been changed to align with the recent NOW renewal and to incorporate settings language as required by Centers for Medicare & Medicaid Services (CMS).

Residential Options Waiver (ROW)

- **The Residential Options Waiver (ROW) pilot** involving transition of individuals who reside in Intermediate Care Facilities for Persons with Developmental Disabilities (ICF/DD) to Home and Community-Based Services (HCBS) waiver options has continued. To date, approximately 400 offers have been extended across the state. The Local Governing Entities are hand delivering offers to individuals/families and helping them to understand the services/supports offered by the ROW. In addition, local Community Living Ombudsmen are available and are attending meetings to provide additional information to individuals/families if they wish.
 - The goal was to have 50 people transition or be in process of transition by June 30, 2017.
 - While a total of 24 people accepted offers, 14 of those declined subsequently.
 - One (1) person has transitioned and is approved in the ROW.
 - Ten (10) people are currently in the process of transition to waiver certification/approval.
- **ROW Amendment (ROW/Office of Aging & Adult Services transition) Status Update** - The ROW Waiver Amendment (LA.0472.R01.02) was resubmitted again on April 24, 2017 after a number of requests for additional information and/or clarification from CMS. The amendment is pending (CMS) approval.

Pinecrest Supports and Services Center (PSSC) - Transition Status

The following figures reflect transition activities from January 1, 2017 thru June 16, 2017:

- The census of Pinecrest Supports and Services Center to date is 418.
- In 2017, PSSC has admitted 9 individuals and discharged 27.
- Additionally, 45 participants are planning for a transition from the center.
- Thirteen 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 93 percent.
- OCDD and Pinecrest have initiated a transition workgroup to address identified barriers for people moving from PSSC to the community. This workgroup will inform changes to the Transition Manual and other policies/procedures where indicated.

EarlySteps

- As of June 1, 2017, the EarlySteps program is currently providing services to 4,808 children, an increase of 85 children from the last quarter.
- The Annual Application for Federal Individuals with Disabilities Education Act (IDEA) Part C Funds was submitted in April 2017. With the continuing budget resolution passed by Congress in place now, Louisiana received a revised allocation amount of \$6,821,875 for 2017-18, an increase of \$66,024 from last year.
- The EarlySteps advisory council, the State Interagency Coordinating Council (SICC), will have its next orientation for new members on July 13, 2017 at 11:30am preceding its quarterly meeting which begins at 1:00pm. New members have proposed a series of orientation sessions by topic; the topics for July are the Annual Performance Report and the State System Improvement Plan (SSIP).
- In May, the EarlySteps state leadership team, workgroup members, stakeholders, and SICC members participated in a Leadership Retreat to “kick off” Phase III, Year 2 of the SSIP. With the end of Year 1, the state is at a turning point on the focus for its work from infrastructure improvements to implementation of practice improvements. The leadership team reviewed the successes from Year 1 and proposed a revised work structure for Year 2 to focus on the practice areas to be addressed:
 - family assessment,
 - service delivery supporting family priorities, and
 - team-based practice supports.

Next steps are to identify workgroup membership in the three areas and formalize the core practice components of each to identify and address training and practice needs.

- As of the end of the June 2017 Louisiana Legislative Special Session, the proposed budget cut to EarlySteps remained in effect. Staff are developing processes to implement the system changes to reduce expenditures. The changes include:
 - Change in ongoing eligibility for some children who qualified for EarlySteps due to a diagnosis of prematurity, impacting approximately 150 children.
 - Removal of the cap on the monthly maximum rate for family cost participation above 500% of the federal poverty limit, impacting approximately 100 families.
 - Suspension of services for families who have exceeded 120 days of non-payment on their cost participation accounts impacting approximately 170 families.
 - Reduction of the required number of team meetings for children in their second year of services from four to three meetings, impacting approximately 800 meetings per year.

INITIATIVES

Waiver Related Initiatives:

Employment First

- OCDD, with the assistance of the Local Governing Entity (LGE) offices, has completed the 86 onsite reviews at each of the active day programs statewide. Reports are being finalizing for each of the providers, and they will be submitted to providers by July 31, 2017.
- OCDD is in the process of forming an Employment Roundtable in each region to assist providers in planning for employment and allowing open discussions and sharing of ideas among providers in the regions. These roundtables will begin in August 2017 and will assist providers to come into compliance with federal regulations.
- OCDD is represented on the Employment First Work Group that was formed by the Governor's Office of Disability Affairs (GODA). This group is wrapping up the final report regarding employment for people with disabilities, and this report will be submitted to the Governor.
- OCDD began a Lunch 'n Learn series in June 2017. The trainings will occur at least monthly and will be used to provide guidance and assistance to providers, Support Coordinators, LGEs and families which will assist them in coming into compliance with the HCBS Settings Rule. Examples of the trainings include providing information on planning for employment and how the employment discussion should happen. Providers are in the process of making changes in their programs to align with the CMS Settings Rule and are asking for assistance and guidance with the changes. These trainings dates will be shared with everyone as they are scheduled.

Medication Administration

Based on feedback from stakeholders, the Medication Administration training materials available on the Acumen Web site were updated to separate the actual training materials from the test questions and answers so that they can be downloaded in separate documents. Notation was added to the list of recommended trainings advising that the Support Coordinator would notify the participant or their authorized representative if there was a requirement for Medication Administration training and would monitor that training was successfully completed prior to employees administering medication. (Note: The Support Coordinator makes that determination by completing the Assessment of Client Capacity form. If the result of that assessment indicates that the participant is not independent in taking his/her medication and paid staff will be giving medication, then the Medication Administration training is required.)

Electronic Visit Verification (EVV)

The State EVV system (LaSRS) is being piloted for in-home services. There are currently 158 providers enrolled for the pilot, 128 providers trained, and approximately

22 that are using LaSRS for some of their in-home services. Full implementation of EVV for in-home services is currently scheduled for January 1, 2018.

Home and Community-Based Services (HCBS) Settings Rule Activities

On May 9, 2017, CMS issued an informational bulletin announcing an extension of the Home and Community-Based Settings rule until March 17, 2022 allowing states additional time to demonstrate compliance with the Home and Community-Based Settings criteria. CMS has clearly stated that the regulations themselves are not being changed and that only the time frame to move into compliance is being modified. States must have final approval of their Statewide Transition Plan (STP) by the original March 2019 deadline, and the extension is to allow providers time to transition into compliance. In response to this announcement, OCDD has evaluated current timelines to identify areas where additional time might be needed to demonstrate compliance. At this time, OCDD is planning to extend timelines by one year to 2020 in order to come into full compliance with the Settings Rule, which will allow providers additional time to complete their transition planning and will allow the Office to move forward with important systems transformation initiatives.

As of March 3, 2017, Louisiana is one of twenty-five states that received notification that its Statewide Transition Plan (STP) has received initial approval. The following were identified as areas to be addressed in the STP in order to achieve final approval:

- Complete comprehensive site-specific assessments of all Home and Community-Based settings, implement necessary strategies for validating the assessment results, and include the outcomes of these activities within the STP;
- Draft remediation strategies and a corresponding timeline that will resolve issues that the site-specific settings assessment process and subsequent validation strategies identified by the end of the Home and Community-Based Settings rule transition period;
- Outline a detailed plan for identifying settings that are presumed to have institutional characteristics, including qualities that isolate HCBS beneficiaries, as well as the proposed process for evaluating these settings and preparing for submission to CMS for review under Heightened Scrutiny;
- Develop a process for communicating with beneficiaries that are currently receiving services in settings that the state has determined cannot or will not come into compliance with the Home and Community-Based Settings rule; and
- Establish ongoing monitoring and quality assurance processes that will ensure all settings providing HCBS continue to remain fully compliant with the rule in the future.

Louisiana Department of Health / OCDD has set the following targets: October 2017 to complete the above activities, December 2017 to integrate this information into the STP, and February 2018 to submit to CMS for final approval. It should be noted that one of the areas that has been identified is development of draft remediation strategies with corresponding timelines that resolve issues identified during site specific

visits. This activity is well underway in that site visits have been completed or are being completed and where areas of non-compliance have been identified transition plans have been developed or will be developed to address those areas.

As the OCDD has had to adjust some of timelines in the above areas, the Office would like to allow one additional year to demonstrate compliance and extend its timeline for compliance to March 2020.

Additionally, in response to stakeholders, OCDD is working to consolidate its four waivers into one consolidated waiver. This consolidation cannot occur until the Office demonstrates that services/service providers are compliant with the Settings rule. To move forward with a consolidated waiver, OCDD will have to complete a single waiver application. CMS will not allow OCDD to develop a new waiver or to add services that are not in compliance with the Rule. The timeline for the consolidated waiver is 2020.

As the Office moves forward with completing necessary revisions to the STP to address areas identified by CMS for final approval, OCDD will continue to work with all stakeholders in terms of the process. Office staff remain available to provide technical assistance to any LGE office or service provider that requests assistance. Reports and revisions to the STP will be made available to stakeholders for comments/feedback. Any additional time needed by a service provider to implement its transition plan will be evaluated on a case-by-case basis by the LGE office. The LGE office will work collaboratively with OCDD to determine whether additional extensions will be approved.

Request for Services Registry Screening

- A total of 8,206 Screening of Urgency of Need (SUN) tools have been completed; this includes individuals receiving Supports Waiver and those on the Request for Services Registry (RFSR) who are not receiving other waiver services.
- OCDD has a target of December 2017 to screen everyone on the RFSR who can be located and is willing to participate in the screening. OCDD is working with Arc of Louisiana to ensure all efforts are made to locate individuals on the Registry.
 - Based on information available and reporting completed thus far:
 - LGE offices and OCDD have contacted or made at least one attempt to contact 99% of the people on the RFSR;
 - 52% of the persons on the RFSR have had a screening completed;
 - 26% have been identified as not being able to be located;
 - 12% have been identified as persons that the LGE/OCDD are continuing to attempt contact and schedule screenings;
 - 5% have been identified as incarcerated, deceased, not eligible, refused redetermination, requested removal from the RFSR, or moved out of state;
 - 1% identified are currently admitted to a state facility; and
 - 1% have been identified as refusing to participate in the screening process.

- Of the 8,206 screenings completed thus far, the category of support needs are as follows:
 - No unmet needs - 43%
 - Planning needs (supports needed in 2 - 5 years) - 22%
 - Critical needs (supports needed in 1 - 2 years) - 20%
 - Urgent needs (supports needed within 12 months) - 8%
 - Emergent needs (supports needed within next 90 days) - 7%

Other Initiatives:

Money Follows the Person (MFP) Rebalancing Demonstration (My Place Louisiana) as of June 13, 2017

- MFP activities provided:
 - Pre- and post-transition assistance requests total 410 with 223 My Place participants receiving assistance (Note: Many participants have made multiple requests.)
 - Direct Service Worker (DSW) Specialization Training for 285 provider staff and family members
- Housing Relocation Assistance Program (HRAP) activities included:
 - 84 referrals for HRAP
 - 27 families or individuals have moved into housing located by the contractors
 - Another 54 people received lists of appropriate housing options for their review
- Total of 393 people have transitioned to the community with My Place supports:
 - New Opportunities Waiver (NOW): 333 individuals
 - Children's Choice (CC) Waiver: 50 children
 - Residential Options Waiver (ROW – My Place): 9 children
 - Residential Options Waiver Pilot (ROW Pilot): 1 individual

Certified Medication Attendant (CMA) Program

- The statewide Certified Medication Attendant (CMA) Committee is working to update the instructor training materials to ensure alignment with current best practices and the new CMA rule.
- The next CMA training will be conducted once the new materials have been finalized and are ready for distribution. OCDD is currently keeping a contact list so that nurses who wish to attend the next training will be notified as soon as it is scheduled.
- To date, there are 3,985 active CMAs in the CMA database. There are currently 1,546 CMAs whose certificates are expired. 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. All providers are urged to check the CMA expiration dates on their certificates to ensure that they are in compliance with the rule.

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 for the 2017 calendar year (covering the period of January 1, 2017 – June 16, 2017), as well as provides a current update on the Resource Center and Local Governing Entity collaboration on the Non-Consensual Sexual Behavior (NSB) process as of June 16, 2017.

- For the period noted above, there were 52 crisis referrals. Diversion efforts for 38% of these persons are underway, so these cases remain open at the current time and will not be included in the Resource Center consultation or resolution data report. Out of the remaining 34 cases that have reached resolution, 21% of these individuals have required admission to Pinecrest Supports and Services Center (PSSC).
- Thirty-two out of thirty-four cases (94%) referred for admission received a crisis consultation from the Resource Center, with the ability to divert 76% of these individuals from long-term institutionalization. As previously noted, some cases are still open and diversion efforts underway, and the Resource Center remains engaged in the cases to assure that no diversion efforts are missed.
- The last two year's trend relative to persons being referred from other more intensive and institutional-type settings has continued for the period noted above, with 82% of referrals coming from institutional/acute care settings. Further breakdown within these settings reveals that 48% of these referrals were from psychiatric hospital settings, 13% were for persons who were incarcerated, 15% were supported in ICF/DD settings, 4% were in an acute care setting, and 2% of persons were in a psychiatric residential treatment facility at the point of referral.
- 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 period's data revealed that 179 persons are receiving follow up by the local oversight team. Since the initiation of the NSB process, only 28 persons have had a subsequent incident of NSB, and all but three persons had waiver supports at the time of the incident (two individuals were residing in a community home and the other individual was living at home without waiver supports). For these persons, not all incidents involved direct contact. Five of the 28 incidents occurred during the reporting period between (03/18/17-06/16/17). Three of the five incidents involved direct contact. One of the three individuals is incarcerated at this time (although the waiver option is remaining open while the legal process is in play) and the remaining four individuals have been able to maintain existing waiver services.

OCDD continues to collaborate with the Office of Behavioral Health (OBH) and Medicaid relative to triaging and coordinating services for persons with complex

support needs. As noted in the prior update, OCDD in partnership with OBH was awarded a Transformation Transfer Initiative (TTI) grant for FY (fiscal year) 2017 to provide cross-system training and education for clinicians, administrators, and direct-support professionals to develop expertise to support persons with co-occurring intellectual/developmental disabilities (IDD) and mental health needs. The curriculum development phase has been completed and OCDD is actively engaged in the didactic training component with the selected behavioral health providers. As noted in prior update, the selection of providers is concentrated in the southern part of the state across various levels of care. Providers include a Psychiatric Residential Treatment Facility, a Therapeutic Group Home, two Local Governing Entities, and four Mental Health Rehabilitation agencies. The didactic training portion of the project is anticipated to conclude in July, at which point focus will shift to intensive technical assistance and consultation for youth whose needs overlap the IDD and behavioral health systems.

Additionally, the initiative between OCDD and the Developmental Disability (DD) Council to develop training and consultation to build provider capacity to support persons with complex needs continues to progress. The pilot provider has completed all three outlined phases for the yearlong partnership and has achieved significant improvements and outcomes, more than meeting the expectations of the partnership and earning all three incentives. Two additional providers have engaged. One in Monroe began in September 2016 and has completed Phase 1 (training) and Phase 2 (initial Technical Assistance and implementation of recommendations) and has met both of these incentives. This provider is in Phase 3 (intense Technical Assistance), and outcome monitoring will be completed in this phase. The second is in Lafayette and began in January 2017. This provider has completed Phase 1 (training) and received that initial incentive. The provider is nearing the end of Phase 2 (initial Technical Assistance and implementation of recommendations) and is on track to earn this second incentive. Initial pilot provider has agreed to extension; incentives are being negotiated at this time. Additional two engaged providers will be offered same upon completion of year one based upon outcomes. OCDD and the DD Council are working to implement a pilot with use of core modular program to support base knowledge for Direct Support Professionals, evaluate for possible inclusion in routine 16-hour annual training, and extend participation in project to those in self-direction.