

**QUARTERLY DEVELOPMENTAL DISABILITIES (DD) COUNCIL REPORT**  
**(Submitted for the 3<sup>rd</sup> Quarter 2021)**

October 07, 2021

**SERVICES**

**Developmental Disability Waiver Activities**

For the **state fiscal year 2021-2022** (July 1, 2021-October 5, 2021). Linkages and certifications for the state fiscal year are:

<b>WAIVER</b>	<b>Offers # *</b>	<b>Linkages # **</b>	<b>Certifications</b>
<b>NOW</b>	0	21	15
<b>Children's Choice</b>	181	112	50
<b>Supports</b>	240	146	66
<b>ROW</b>	0	115	86

\* Waiver **linkage** is when person has been **screened** through the Office for Citizens with Developmental Disabilities (OCDD) Screening Urgency of Need (SUN) screening process, **an offer** for the most appropriate waiver is made, and the person **accepts that offer**.

\*\*Waiver **certification** occurs when a person has **completed the entire process** (i.e. Medicaid eligibility, appropriate medical documentation) and has been **determined to be eligible** to receive the waiver services.

\*\*\* An individual who has been extended a Children's Choice Waiver (CC) or Supports Waiver (SW) offer may request an exception to be linked to the Residential Options Waiver (ROW) or New Opportunities Waiver (NOW).

The following figures reflect **total waiver numbers as of October 6, 2021**:

<b>WAIVER PROGRAM</b>	<b>Total # of Slots Allocated</b>	<b>Linked/Filled</b>	<b>Total # of Certifications</b>	<b>Slots Without Certified Recipient</b>
<b>Mixed I/DD Waivers</b>	14,184	14,373	13,354	830

Source: SRI Certifications Report – 10/04/2021

**Request for Services Registry (RFSR) (Current Quarter) 7/1/2021 to 9/30/2021**

- Developmental Disability (DD) RFSR = **12,414**
  - Individuals with urgent/emergent unmet needs (SUN score 3/4) = **0** (offers made to all as screened and identified 3 or 4)
  - Individuals with current needs met (SUN score 0/1/2) = **498**
  - Individuals with no identified unmet needs = **169** [estimates based on previous information available and information available in Louisiana Service Reporting System (LaSRS)]
- **PLEASE NOTE: The RFSR numbers may fluctuate depending on how many people are added to the registry, or drop off the registry (due to acceptance of a waiver, death, loss of eligibility).**

## **Request for Services Registry Screening**

- A total of **20,276** Screening of Urgency of Need (SUN) tools have been completed (as of 10/06/2021)
- **This number does not include the individuals who were closed on the Developmental Disabilities Request for Services Registry (RFSR) for any reason (e.g. acceptance of a waiver off, no current Statement of Approval (SOA), declination of services).**
- OCDD continues to screen everyone on the RFSR who can be located and who is willing to participate in the screening, including people who newly move onto the Registry and people who have a change in status. Additionally, routine re-screenings for people with previous SUN scores of 2/1/0 are being conducted.

## **HOME AND COMMUNITY BASED WAIVER SERVICES**

### **Direct Service Worker Wage Floor and Rate Increase**

- During the 2021 Regular Legislative Session the Legislature appropriated \$16,316,695 from the NOW Fund (\$51,191,468 with the Federal match) to help stabilize the direct support force.
- OCDD published an emergency rule to enact the changes on September 20, 2021. We also submitted the regular rule to the Legislative Fiscal Office on September 20, 2021.
- OCDD announced the change in a memorandum dated September 23, 2021, and held an informational webinar on September 28, 2021 to explain the changes. You can access the OCDD Memorandum, Rate Sheet, Frequently asked Questions, and the Webinar at the [OCDD homepage](#).
- On October 1, 2021 the OCDD, the Louisiana Department of Health (LDH), and the Bureau of Healthcare Financing (Medicaid) implemented a DSW wage floor of \$9.00/hour, and a waiver rate increase in the four intellectual and developmental disabilities (I/DD) Waivers:
  - New Opportunities Waiver (NOW)
  - Children’s Choice Waiver (CC)
  - Supports Waiver,
  - Residential Options Waiver.

### **COVID-19 Flexibilities**

- The Office for Citizens with Developmental Disabilities (OCDD) requested that CMS grant exceptions to the rules and regulations in the four Intellectual and Developmental Disabilities (I/DD) Home and Community Based Services (HCBS) Waivers during the COVID-event. These exceptions will continue **until 6 months after the expiration of the Public Health Emergency**.
- OCDD has received feedback from a variety of stakeholders that consideration should be given to extending some of the flexibilities present. As a result, OCDD will be sponsoring “working” focus group meetings on the 3 main areas of concern that have been expressed: Family members as paid caregivers (specifically legally responsible relatives and family members living in the home); use of virtual technology for some services; and the “16 hour rule” for direct support workers. OCDD is requesting the people register for participating in each of these working

groups. Each group will be limited to 25 participants to allow for dialogue, and OCDD will ensure there is diversity in the representatives.

- The first working group session will be the week of 10/25/2021, and the meeting agenda will be to share applicable federal and state regulations pertaining to the topic, discuss what was in place prior to COVID and under Appendix K, provide OCDD current plan of action and reason for the plan of action, and then an open dialogue on with participants on feedback, concerns, alternate suggestions, etc. OCDD will do additional review and research pertaining to all recommendations.
- The second working group session will be the week of 11/1/2021, and this session will focus on all relevant research found and development of a plan of action that is within all regulations and meets the needs of waiver participants.
- A large stakeholder meeting will be held the week of 11/8/2021, at which time all interested stakeholders will be able to join and hear presentation of plan of action for these 3 focus areas, as well as plan of action for all exceptions following the end of the public health emergency. All stakeholders will have an opportunity to submit questions and concerns about the plan of action to OCDD via e-mail notification.
- Following these stakeholder meetings, OCDD and Medicaid staff will draft “waiver amendments” with the goal of completing these by early January to post for the 30 day public comment period. Then, the waiver amendments will be sent to CMS for review and consideration, and CMS has 90 days to review and respond. Therefore, the changes will all be in place prior to the 6 months after the end of the public health emergency.

### **New Opportunities Waiver (NOW)**

All of our OCDD Home and Community Based Waivers must be “renewed” every five years, which means that the entire waiver must be reviewed, updated, and submitted to CMS for review and consideration. The New Opportunities Waiver is due for “renewal” in January of 2022; and the waiver must be published for public comment and sent to CMS a minimum of 90 days before it expires. The NOW renewal was published for public comment in August, and it was submitted to CMS in September. OCDD is awaiting final approval of the NOW waiver at this time, and we do anticipate having amendments to the waiver in early January, as noted above, based on feedback from stakeholders.

### **Residential Options Waiver (ROW)**

**ROW Amendment:** Centers for Medicare and Medicaid Services (CMS) approved the ROW amendment on October 6, 2020. The notice of Intent was published on July 20, 2021 to reflect the approved language and service changes. The ROW Program Manager continues to implement approved changes to the ROW. These improvements include:

- The ROW Mobility Process is being added to the Tiered Waiver Process, allowing ROW participants to exceed their individually assessed ROW acuity/budget to prevent institutionalization on a case-by-case basis.

- The ROW Provider Manual was updated, and is currently being reviewed by Medicaid Policy and Compliance/Medicaid Administrative Unit (MAU). Section 38.1- Covered Services, and Section 38.6- Provider Requirement, were published on 10/01/2021. A review of remaining chapter section is ongoing, with a goal of completion and publication by end of year.

### **Pinecrest Supports and Services Center (PSSC) Transition Status**

The following figures reflect transition activities from January 1, 2021 thru October 1, 2021

- The census of Pinecrest Supports and Services Center to date is 420.
- In calendar year 2020, PSSC admitted 82 individuals and discharged 37. The large number of admissions in 2020 were primarily due to admission of 48 individuals from the former Robinswood School that closed unexpectedly following Hurricane Laura. In calendar year 2021, 14 people have been admitted and 53 people have been discharged.
- Twenty-two (22) participants are currently planning for a transition from the center.
  - Zero (0) people are anticipated to transition within the next 30 days.
  - One (1) is anticipated to transition within the next quarter.

### **EarlySteps**

- As of October 1, 2021, the EarlySteps program has 4,955 children and their families enrolled. The COVID-19 related decrease in child count began to turn around in May, with slight monthly increases since then until a small drop in the count of about 100 children that occurred in September. This count drop could be temporary, and caused by delays in data entry by the single points of entry (SPOEs) during Hurricane Ida. The SPOES had difficulties enrolling new children due to hurricane impacts on families, and/or having evacuated staff after the storm.
- Current COVID-19 service delivery guidance for Phase 3 was updated again after June 1 when the Delta Variant positivity rates increased throughout the state. As a result, the number of daily home visits is limited to 4 per day in parishes with  $\geq$  10% positivity rate. Regional coordinators send out each parish's positivity rate each Wednesday to their regional listserv. The rates have decreased in the past 2-3 weeks. If this trend continues, we will revisit the guidance at the end of October when the current Executive Order expires. The priority for making face-to-face visits remains if a family meets the telephone screening requirements for a home visit, and they request a preference for a home visit.
- EarlySteps received a \$3,037,137 allocation in American Rescue Plan Act (ARPA) funds. EarlySteps submitted the budget for the ARPA funds to the Office of Special Education Programs (OSEP) in August. EarlySteps accepted stakeholder recommendations for use of the funds through July 15.
- The following table shows the budget that was submitted to the Office of Special Education Programs:

ARPA Funds	Number	Cost	Total	Explanation
<b>Evaluation Materials</b>	200	\$ 1,230.00	\$ 246,000.00	Includes costs for new test kits, forms and training in new BDI version
<b>PD Platform</b>			\$ 150,000.00	Estimate to build PD platform to track PD activities and practice improvement
<b>Tech for families</b>				
laptop	750	\$ 500.00	\$ 375,000.00	Estimated costs for laptops and tablets
tablet	500	\$ 500.00	\$ 250,000.00	
<b>Tech for agencies</b>				
laptop	200	\$ 500.00	\$ 100,000.00	Estimated costs for laptops and tablets
tablet	200	\$ 500.00	\$ 100,000.00	
<b>ZOOM Accounts</b>	150	\$ 200.00	\$ 30,000.00	Estimated costs for zoom accounts/year
<b>DocuSign accounts</b>	15	\$ 495.00	\$ 6,164.00	Est. costs for electronic signature accounts
<b>Incentive Payments</b>	1065	\$ 1,000.00	\$ 1,065,000.00	Incentive payments to providers with authorizations last year.
<b>Brochures</b>	4900	\$ 100.00	\$ 490,000.00	Est. printing costs for outreach materials
<b>Subtotal</b>			<b>\$ 2,812,164.00</b>	
Indirect cost @8%			\$ 224,973.12	
<b>Total</b>			<b>\$ 3,037,137.12</b>	

## INITIATIVES

### Employment

- OCDD continues to participate with the State Employment Leadership Network (SELN) in monthly group webinars, as well as monthly one-on-one technical assistance (TA). OCDD has been working with the SELN on the redesign of the new vocational services and rates.

- OCDD and the LGEs have been meeting with vocational providers to provide technical assistance to help them with moving into compliance with the HCBS Settings Rule. All vocational providers had to update their updated transition plans by 6/30/2021. Due to the pandemic, the date of initial compliance has been pushed back a year, and providers are working to be in compliance by 3/17/2022.
- Vocational Providers are beginning to reopen and will continue to do so over the remainder of this year. Providers continue to have staffing shortages, and this has hindered them from opening to full capacity. Vocational providers have stated that there are still some individuals who are making the choice to not return to the program until they feel safe from COVID-19.
- OCDD continues to be an active participant in the Employment First Team, as well as the State as a Model Employer Team, which are both being led out of the Governor's Office of Disability Affairs.

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

Louisiana is still working to receive final approval of the Statewide Transition Plan.

OCDD still needs to complete onsite visits with the provider owned/controlled residences and due to COVID 19, we are unable to do so at this time. Once we are able to make visits to all of these residences, we will complete updates in the addendum, and the state will be able to resubmit for final approval.

OCDD is currently working on finalizing the process of ensuring ongoing compliance of providers once they are in compliance. We are also looking to ensure that participants are receiving both the services they desire, and that those services are person-centered.

OCDD will continue to work with providers to providing ongoing technical assistance, and will provide additional trainings about the settings rule in the coming months.

### **Money Follows the Person (MFP) Rebalancing Demonstration (My Place Louisiana)**

2021 marks a year of anticipated growth in the OCDD MFP program. CMS approved the program to continue receiving funding through at least 2024. CMS has additionally offered a substantial amount of money for Capacity Building. OCDD MFP has started planning to implement several initiatives that will assist individuals with I/DD transition from institutional settings into the community. CMS has made a nationwide policy change, and individuals do not need to be in an institution for 90 days to gain access to funds—new policy allows individuals who have been in an institution for 60 days to gain access to the MFP program. In March of 2021, OCDD hired a new MFP Program Manager, Scott Tuma, who is spearheading this exciting time in the MFP program. As of October 2021, MFP has expanded its workforce by adding an administrative coordinator and transition coordinator to increase our capacity for transitions.

MFP is also participating in a Capacity Building Grant from CMS. This grant aims at improving the current infrastructure. MFP Programs intend to enhance existing technology capabilities, train direct care workers, and improve transportation access for participants. MFP has secured this funding and is beginning the implementation of this Grant.

## **Access to Behavioral and Medical Intervention in the Community**

The following information outlines Resource Center (RC) activities, including crisis referrals and trends associated with placement requests to OCDD Central Office for the **2021** calendar year (covering the period of **April 1, 2021 – June 30, 2021**). Additionally, it provides a current update on the Resource Center and Local Governing Entity (LGE) collaboration on the Non-Consensual Sexual Behavior (NSB) process as of June 2021.

- Between **April 1, 2021** and **June 30, 2021** there were **14** crisis referrals, and **3** (**21%**) of these individuals required admission to Pinecrest Supports and Services Center (PSSC).
- **7** out of **14** cases (**50%**) received a crisis consultation from the Resource Center, with the ability to divert **100%** of these individuals from long-term institutionalization. While the Resource Center is available to the Human Services Districts/Authorities to offer clinical guidance to assure that no diversion efforts are missed, there are several factors which can impact the ability to engage in crisis consultation:
  - timeframe once person is referred for consultation: if the referral is not received until a person's ability to remain in the current living option is exhausted, and there are no viable community living alternatives, the ability to divert with clinical consultation would be unlikely;
  - timeframe and status for persons referred from psychiatric hospital settings does not routinely allow for diversion consultation (i.e., clinical activity related to this more often involves a commitment evaluation);
  - the individual/family declines to receive consultation, and/or;
  - lack of an existing clinical provider to receive consultation.

Given these factors, it is important to focus on the diversion percentage instead of the number of persons receiving a crisis consultation, as this is a more accurate indicator of persons for whom there was some ability to receive and potentially benefit from diversion efforts.

- Since 2011, there have been more persons referred from more intensive and institutional-type settings as opposed to the community. This trend continues for the current reporting period, with **86%** of referrals coming from institutional/acute care settings. Further breakdown within these settings revealed that **36%** of these referrals were from psychiatric hospital settings, **7%** were for persons who were incarcerated, **36%** were supported in ICF/DD settings, **0%** were in an acute care setting, **7%** of persons were in a psychiatric residential treatment facility, and **0%** were in a nursing facility at the point of referral.

The Resource Center has worked to ensure that individuals with a history and/or current challenges related to non-consensual sexual behavior (NSB) continue to have access to needed supports. Local Oversight Teams (LOT) are following 207 individuals. This quarter there was one reported subsequent incident of NSB which included direct contact (this incident did not result in legal involvement but APS was contacted). The individual remains in Waiver and currently resides in his home.