Developmental Disability Waiver Activities

The following figures reflect waiver activities thus far in state fiscal year 2019 - 2020 (July 1, 2019 – June 8, 2020):

<table>
<thead>
<tr>
<th>WAIVER</th>
<th>Offers # *</th>
<th>Linkages # **</th>
<th>Certifications</th>
</tr>
</thead>
<tbody>
<tr>
<td>NOW</td>
<td>0</td>
<td>29</td>
<td>28</td>
</tr>
<tr>
<td>Children’s Choice</td>
<td>466</td>
<td>432</td>
<td>355</td>
</tr>
<tr>
<td>Supports</td>
<td>557</td>
<td>480</td>
<td>290</td>
</tr>
<tr>
<td>ROW**</td>
<td>0</td>
<td>245</td>
<td>219</td>
</tr>
</tbody>
</table>

* This is the number of unique individuals made an offer or final offer during this time period.
** An individual made a CC or Supports offer may request an exception and be linked to the ROW or NOW.

The following figures reflect total waiver numbers as of June 08, 2020:

<table>
<thead>
<tr>
<th>WAIVER PROGRAM</th>
<th>Total # of Slots Allocated</th>
<th>Linked/Filled</th>
<th>Total # of Certifications</th>
<th>SLOTS W/O CERTIFIED RECIPIENT</th>
<th>VACANT SLOTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mixed I/DD Waivers</td>
<td>14,184</td>
<td>13,703</td>
<td>12,954</td>
<td>384</td>
<td>481</td>
</tr>
</tbody>
</table>

Source: SRI Certifications Report – 6/08/2020

Request for Services Registry (RFSR)

- Developmental Disability (DD) RFSR = 13,436
  - Individuals with urgent/emergent unmet needs (SUN score 3/4) = 0 (offers made to all as screened and identified 3 or 4—2,092 in process)
  - Individuals with current needs met (SUN score 0/1/2) = 10,303
  - Individuals with no identified unmet needs = 6,518 [estimates based on previous information available and information available in Louisiana Service Reporting System (LaSRS)]
  - Individuals in process of scheduling / receiving screening = 6,519

Request for Services Registry Screening

- A total of 13,654 Screening of Urgency of Need (SUN) tools have been completed (as of 6/9/2020) **Note 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**

**Intellectual / Developmental Disabilities Waivers**
OCDD requested that CMS grant exceptions to the rules and regulations in the four I/DD Home and Community Based Waivers during the COVID-event. These exceptions are as follows:

- Allow participant and worker to live in the same home.
- Allow legally responsible relatives to be paid direct support staff.
- Suspend background checks for immediate family members who live in the home and become temporary paid staff.
- In ROW / NOW, allow for sharing of staff when needed.
- Convert day habilitation hours to in-home hours when needed.
- Add Monitored In-Home Caregiving (MIHC) as a service in the ROW and NOW.
- For NOW, waive rule of requirement of a service every 30 days.
- Allow 16- and 17-year olds to be paid staff, when no other worker available.
- Allow 20 hours / week above capped hours in Children’s Choice Waiver and 20 hours of respite in Supports Waiver.
- Allow 90-L to remain in place until the conclusion of the epidemic.

**Monitored In-Home Caregiving (MIHC)**
As noted above, OCDD added Monitored In-Home Caregiving (MIHC) to both the ROW and the NOW for the duration of the emergency. Monitored In-Home Caregiving are services provided to a participant living in a private home with a caregiver (can be the legally responsible relative or a family member). The goal of this service is to provide a community-based option that provides continuous care, supports, and professional oversight. This goal is achieved by promoting a cooperative relationship between a participant, a principal caregiver, the professional staff of a Monitored In-Home Caregiver agency provider, and the participant’s support coordinator. The principal caregiver is responsible for supporting the participant to maximize the highest level of independence possible by providing necessary care and supports that may include:

1. Supervision or assistance in performing activities of daily living.
2. Supervision or assistance in performing instrumental activities of daily living.
3. Protective supervision provided solely to assure the health and welfare of a participant.
4. Supervision or assistance with health related tasks (any health related procedures governed under the Nurse Practice Act) in accordance with applicable laws governing the delegation of medical tasks/medication administration.
5. Supervision or assistance while escorting / accompanying the individual outside of the home to perform tasks, including instrumental activities of daily living,
health maintenance or other needs as identified in the plan of care, and to 
provide the same supervision or assistance as would be rendered in the home.
6. Extension of therapy services to maximize independence when the caregiver has 
been instructed in the performance of the activities by a licensed therapist or 
registered nurse.

Monitored In-Home Caregiving providers must be agency providers who employ 
professional nursing staff and other professionals to train and support caregivers to 
perform the direct care activities performed in the home. The agency provider must 
assess and approve the home in which services will be provided, and enter into 
contractual agreements with caregivers who the agency has approved and trained. The 
agency provider will pay a per diem stipend to caregivers. The agency provider must 
capture daily notes electronically and use the information collected to monitor participant 
health and caregiver performance. The agency provider must make such notes available 
to support coordinators and the state, upon request. LDH will reimburse for Monitored In- 
Home Caregiving based on a two tiered model which is designed to address the 
participant’s acuity.

**New Opportunities Waiver (NOW) Fund**
For Fiscal Year (FY) 2021, the Division of Administration has advised that the State will 
need to utilize funding from the NOW fund to “annualize” (cover a full year’s cost) for the 
four approved initiatives: IFS Night rate increase, 650 waiver slots, complex care add-on, 
and waiver rate restoration. Due to anticipated reduced state revenue for FY21, the 
utilization of money from the NOW fund is necessary to assist with covering the costs of 
the Intellectual/Developmental Disability (I/DD) waiver so that reductions in waivers /rates 
are not necessary. Consistent with the Council’s previous request, the Division of 
Administration has agreed to keep a minimum of $1,000,000 in the NOW fund to allow 
for funding of additional waiver slots if there is a risk of re-constituting the waiver waiting 
list. A formal communication of this agreement will be shared with the Council.

**Pinecrest Supports and Services Center (PSSC) - Transition Status**
The following figures reflect transition activities from January 1, 2020 thru June 12, 2020:

- The census of Pinecrest Supports and Services Center to date is 415.
- In calendar year 2019, PSSC admitted 47 individuals and discharged 33. So far in 
calendar year 2020, 16 people have been admitted and 14 people have been 
discharged.
- Seventeen participants are currently planning for a transition from the center.
  - Five people are anticipated to transition within the next 30 days.
  - Four people are anticipated to transition within the next quarter.

**EarlySteps**
- As of June 1, 2020, the EarlySteps program was providing services to 5,170 
children and their families. COVID-19 led to a decrease in child count due to some 
families requesting closure of their child’s case and a 30% decrease in referrals in 
April and May. Referrals have increased since May when physician offices re-
opened for well child care.
- Changes implemented for the duration of COVID-19:
All services, included initial contacts with families occurring through virtual meetings or teletherapy.

Suspension of the family cost participation requirement for families with financial impact such as lost income.

EarlySteps staff work from home.

Children who reached their 3rd birthday in March, April, or May for whom local education agencies (LEAs) had not completed eligibility evaluations or IEPs (after schools closed in March) continued services until the end of the LEAs’ original school year end date.

- The EarlySteps advisory council, the State Interagency Coordinating Council (SICC), had a virtual meeting on May 21, 2020 at 1:00pm since the April meeting was cancelled. The next virtual meeting will be Thursday, July 9 at 1:00, the regularly scheduled meeting date.

- On June 23, Office of Special Education Programs (OSEP) with the United States Department of Education will issue its determination of Louisiana’s Part C Annual Performance on the federally established performance indicators. EarlySteps received “Meets Requirements,” the highest performance level for the second year in a row.

- In May, the application for federal funds was submitted to OSEP. The 2020-2021 allocation is $7,021,584, a $6,407 increase compared to 2019-2020.

**INITIATIVES**

**Employment**

- OCDD had planned to host a Vocational Redesign Workgroup meeting in April, however, due to the COVID-19 event, the meeting was not held. Another meeting will be scheduled during the next quarter to continue working towards the service redesign.

- OCDD has received the report regarding the recommendations for our state from the State Employment Leadership Network (SELN). OCDD is working with the SELN to establish a plan of action to begin moving forward with recommendations. One recommendation is establishing an SELN Team for our state that includes stakeholders. The SELN and OCDD are working to establish a date in July to present the report the stakeholders via webinar.

- OCDD and the Local Governing Entities (LGEs) continue to work with vocational providers to provide technical assistance to help with moving into compliance with the HCBS Settings Rule. OCDD reviewed and compiled all of the surveys and transition plans. Because all Day Program facilities are closed due to the COVID-19 event and OCDD is unsure when they will be reopened, we have not been working directly with the providers in regards to compliance. OCDD will use Zoom webinars, and other virtual methods, to work with the LGEs regarding moving forward with trainings and providing technical support, as well as various other technical guidance needed to assist providers with compliance.
• OCDD continues to work with the Governor’s Office of Disability Affairs on the Employment First Team, and continues to work on the State as a Model Employer Team initiatives. OCDD recently participated in the virtual training *The Community of Practice Training on Customizing Employment* led by subject matter expert Abby Cooper, which was held in June.

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

The Statewide Transition Plan (STP) was posted for public comment through March 31, 2020. No comments were received in the OCDD. LDH submitted the STP to CMS for final approval on June 15, 2020.

OCDD continues to work with providers to come into compliance.

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

Initially, My Place transitions were scheduled to stop on December 31, 2018 in accordance with CMS Money Follows the Person Demonstration Program rules. However, the Federal government allowed states (like Louisiana) with remaining grant funds to continue all operations (including transitioning new participants). In May 2020 LDH received budget approval to continue transitions through December 2020. The funding sources can be drawn from three possible sources:

- Funding remaining under the state’s 2016 award,
- New funding made available under the Medicaid Extenders Act of 2019 for MFP programs, or
- A combination of both.

OCDD has transitioned 5 individuals into the community since January 2020, bringing the total number of transitions to 518 between 2009 and 2020. The Office of Aging and Adult Services (OAAS) also participates in the MFP program. OAAS and OCDD have transitioned a total of 3,207 individuals through the life of the program.

**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 2020 calendar year (covering the period of January 1, 2020 - June 12, 2020). 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 12, 2020.

- Between January 2020 and June 2020 there were 59 crisis referrals. Diversion efforts for 27 (46%) of crisis referrals are underway, so these cases remain open and will not be included in the Resource Center consultation or resolution data report. The remaining 32 (54%) cases have reached resolution; 12 (38%) of these individuals have required admission to Pinecrest Supports and Services Center (PSSC).
- 17 out of 32 cases (53%) received a crisis consultation from the Resource Center, with the ability to divert 65% of these individuals from long-term institutionalization.
As noted prior, since some cases are still open and diversion efforts are underway these cases are not included in this analysis. However, the Resource Center remains engaged in the cases to assure that no diversion efforts are missed.

- Over the last four years individuals being referred to the Resource Center were referred from more intensive and institutional-type settings (a trend that has continued for the period noted above) with 73% of referrals coming from institutional/acute care settings. Further breakdown within these settings reveals that at the point of referral: 47% were from psychiatric hospital settings, 12% were for individuals who were incarcerated, 34% were supported in ICF/IID settings, 5% were in an acute care setting, and 2% of individuals were in a nursing facility.

- 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. This period’s data revealed that 219 individuals are receiving follow-up by the local oversight team. During this quarter’s reporting, there were no subsequent incidents of NSB.

OCDD continues to partner with the Office of Behavioral Health (OBH) on the Transformation Transfer Initiative (TTI) grant 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 TTI grant activities are entering the final phases. The following outcomes have been achieved to date:

- The initial participating LGE achieved the Basic Training and Education Designation, and increased capacity in accepting and serving youth and adults with IDD and mental health needs. This LGE has also launched an in-house study option for their new clinicians to establish a continued learning base of new staff. This option involves a partnership between the LGE Behavioral Health division, in conjunction with the LGE’s Developmental Disability office and Resource Center staff.

- The didactic training series for the selected Psychiatric Residential Treatment Facility (PRTF) provider was also completed, and collaboration remains active. Because limited numbers of new admissions met with grant requirements, OBH and OCDD are working on ways to continue the partnership with the Psychiatric Residential Treatment Facility (PRTF) post grant sunset.

- An additional LGE completed all three phases of the project and achieved a Basic Education and Training Designation, and has implemented the self-study option as well. Didactic Training was completed with a third LGE but other activities could not be completed due to the public health emergency.

- The didactic training series was also completed in three areas of the state for private clinicians interested in pursuing an Individual Clinician Basic Training Designation, and all participating clinicians received the designation with competency checks completed.

Additional TTI grant activities for the remainder of the fiscal year include:

- OCDD and OBH are evaluating self-study options, and their use in other areas of the system beyond the formal grant activities.
Educational information and opportunities for all LGEs, health plans, and LDH facilities are underway to help build foundational knowledge across the Behavioral Health System. This includes purchasing diagnostic manuals, as well as copying and binding self-study materials for distribution to the noted entities.

- A webinar training series from The Center for START Services—a nationally-recognized program for serving individuals with IDD and co-occurring mental health needs—titled *MHIDD Mobile Crisis Response Webinar Training Course* was offered for Louisiana providers of crisis response.
  - The 6-session training course was designed to expand skills needed to support individuals with co-occurring mental health and developmental disability needs who are experiencing crisis.
  - There are 40 slots allocated, and training has been scheduled for three time periods during 2020: April, June, and October.
    - The April event has occurred and six individuals participated in this training series.
    - There are 17 participants in the June training, for a combined total of 23 participants.