

**QUARTERLY DEVELOPMENTAL DISABILITIES (DD) COUNCIL REPORT**  
**(Submitted for 3<sup>rd</sup> Quarter 2020)**

**October 21, 2020**

**SERVICES**

**Developmental Disability Waiver Activities**

The following figures reflect **waiver activities thus far in state fiscal year 2020 - 2021 (July 1, 2020 – October 19, 2020)**:

<b>WAIVER</b>	<b>Offers # *</b>	<b>Linkages # **</b>	<b>Certifications</b>
<b>NOW</b>	0	33	10
<b>Children’s Choice</b>	144	87	53
<b>Supports</b>	261	185	81
<b>ROW**</b>	0	112	80

\* 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 October 19, 2020**:

<b>WAIVER PROGRAM</b>	<b>Total # of Slots Allocated</b>	<b>Linked/Filled</b>	<b>Total # of Certifications</b>	<b>SLOTS W/O CERTIFIED RECIPIENT</b>	<b>VACANT SLOTS</b>
<b>Mixed I/DD Waivers</b>	14,184	13,731	13,021	317	393

Source: SRI Certifications Report – 10/19/2020

**Request for Services Registry (RFSR)**

- Developmental Disability (DD) RFSR = 13,848
  - Individuals with urgent/emergent unmet needs (SUN score 3/4) = 0 (offers made to all as screened and identified 3 or 4—2,366 in process)
  - Individuals with current needs met (SUN score 0/1/2) = 10,896
  - Individuals with no identified unmet needs = 6,504 [estimates based on previous information available and information available in Louisiana Service Reporting System (LaSRS)]
  - Individuals in process of scheduling/receiving screening = 5,680

**Request for Services Registry Screening**

- A total of 13,848 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.

The exceptions CMS granted are set to expire in January 2021, and the services included in the exceptions will no longer be offered after December 31, 2020. OCDD continues to monitor the situation closely. If CMS extends the exception timelines OCDD will review those extensions and advise participants, providers, and support coordinators as needed. At this time, OCDD has started holding meetings with participants, providers, and support coordinators to discuss the exceptions ending, and service delivery options to keep participants and providers safe.

### **Monitored In-Home Caregiving (MIHC)**

Through the COVID-19 Emergency Rule, OCDD began offering Monitored In-Home Caregiving (MIHC) as a service in the NOW and ROW. This quarter OCDD received approval of the amendment to add MIHC as a permanent service to the ROW. OCDD is working to add MIHC to the NOW. 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. The caregiver is paid a daily per diem rate that is reportable, but is not taxable.

OCDD has one MIHC provider currently, and the service is being used by several participants. OCDD is currently working to identify additional MIHC providers.

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

The following figures reflect transition activities from January 1, 2020 thru October 2, 2020:

- The census of Pinecrest Supports and Services Center to date is 419.
- In calendar year 2019, PSSC admitted 47 individuals and discharged 33. So far in calendar year 2020, 29 people have been admitted and 24 people have been discharged.
- Seventeen participants are currently planning for a transition from the center.
  - Zero (0) people are anticipated to transition within the next 30 days.
  - Six people are anticipated to transition within the next quarter.

### **EarlySteps**

- As of October 2, 2020, the EarlySteps program was providing services to 4,675 children and their families. COVID-19 led to a decrease in child count due to some families requesting closure of their child's case, as well as a 30% decrease in referrals in April and May. Referrals have increased since May when physician offices re-opened for well child care. For example, September referrals were 6% fewer than the average number of referrals usually received in the month of September, as compared to April which had a 45% decrease in referrals compared to the average number in April.
- Changes implemented since beginning of Phase 3:
  - Services in child care centers resumed.
  - Service visits in homes (with a limit for each provider of 2 visits per day) resumed. Priority was given for resuming visits to families who may not have been able to participate in virtual visits from March to September. This model results in a combination of home and virtual visits for each family.
  - Suspension of the family cost participation requirement for families with financial impact such as lost income continues based on family situations and also includes families in the hurricane-impacted areas, primarily in region 5.
  - Quarterly team meetings continue to be conducted virtually.
  - EarlySteps staff continue working from home.
- EarlySteps staff are analyzing data for the Annual Performance Report which is due on February 1, 2021.
- On September 16 and 17, the EarlySteps advisory council, the State Interagency Coordinating Council (SICC), members participated in an orientation activity presented by John Copenhaver, Director of the Technical Assistance for Excellence in Special Education. The goal for this activity was to assist new and ongoing members to understand the role of the SICC and its collaboration with the lead agency and to help establish priorities for its work. The SICC had its

regularly scheduled meeting on October 8, 2020 at 1:00pm conducted virtually. The system improvement workgroups have continued their work virtually and presented their ongoing activities. The next meeting will be Thursday, January 14 at 1:00, the regularly scheduled meeting date.

## **INITIATIVES**

### **Employment**

- OCDD hosted a Vocational Services Redesign Workgroup meeting in October to continue the discussion of services and rates. Another meeting is scheduled in November to further discuss rates.
- OCDD and various stakeholders participated in the SELN annual meeting that was held virtually this year. Lots of information was discussed including virtual services and the HCBS Settings Rule. OCDD continues to participate with the SELN.
- The Office of Public Health, State Health Officer released a memo and guidance on October 2, 2020 which allowed vocational providers (Licensed Adult Daycare Centers) to begin opening on October 5, 2020. OCDD began hosting meetings on October 2, 2020 to answer questions and provide guidance as they begin to reopen and provide services. OCDD will continue to host the meetings every other Friday (the next meeting is October 23, 2020). OCDD is currently working to get approval to allow providers to provide virtual services, and small ratio community day habilitation across waivers.
- OCDD and the LGEs will continue to work with vocational providers to provide technical assistance to help with moving into compliance with the HCBS Settings Rule. Now that providers are beginning to reopen for service, OCDD will be working with the LGEs to begin looking at how we can move forward with trainings and providing technical support, and various other technical guidance needed to assist providers with coming into compliance via Zoom webinars and other virtual methods.
- 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**

OCDD re-submitted the State Transition Plan for final approval in April 2020. In June CMS submitted a set of questions regarding the STP. The state responded to those questions in an addendum that same month. In July 2020 CMS sent additional questions. OCDD had a technical assistance call with CMS regarding those questions in August 2020. OCDD is currently working to answer the latest set of questions from CMS.

In order to resubmit the State Transition Plan, OCDD needs to do onsite visits with all of the residential owned and/or controlled residences. At this time, due to COVID 19, OCDD is unable to do this at this time. Once these visits are complete the state will be able to resubmit the addendum.

## **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 9 individuals into the community since January 2020, bringing the total number of transitions to 522 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 3,255 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 – October 15, 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 September, 2020.

- Between January 1, 2020 and October 15, 2020 there were 95 crisis referrals. Diversion efforts for 22 (24%) 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 72 (76%) cases have reached resolution; 22 (31%) of these individuals have required admission to Pinecrest Supports and Services Center (PSSC).
- 37 out of 72 cases (51%) received a crisis consultation from the Resource Center, with the ability to divert 76% 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 74% of referrals coming from institutional/acute care settings. Further breakdown within these settings reveals that at the point of referral: 39% were from psychiatric hospital settings, 7% were for individuals who were incarcerated, 21% were supported in ICF/IID settings, 5% were in an acute care setting, and 1% 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 222 individuals

are receiving follow-up by the local oversight team. During this quarter's reporting, there were no subsequent incidents of NSB.

The Transformation Transfer Initiative (TTI) grant partnership between OCDD and Office of Behavioral Health (OBH) that provided 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 has concluded. In order to further support educational opportunities post-grant, diagnostic manuals have been purchased, as well as copying and binding self-study materials for distribution to all LGEs, health plans, and LDH facilities.