

QUARTERLY DEVELOPMENTAL DISABILITIES (DD) COUNCIL REPORT (Submitted for the 2nd Quarter 2021)

July 7, 2021

SERVICES

Developmental Disability Waiver Activities

For the **state fiscal year 2020-2021** (July 1, 2020-June 23, 2021) there have been a total of **1,518 waiver offers**. Linkages and certifications for the state fiscal year are:

WAIVER	Linkages # *	Certifications**
NOW	79	44
Children's Choice	470	273
Supports	604	273
ROW***	420	324

^{*} 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**.

The following figures reflect total waiver numbers as of June 30, 2021:

	Total # of Slots		Total # of	Slots Without Certified
WAIVER PROGRAM	Allocated	Linked/Filled	Certifications	Recipient
Mixed I/DD Waivers	14,184	14,369	13,320	864

Source: SRI Certifications Report - 6/30/2021

Request for Services Registry (RFSR) Cumulative From 10/01/2016 to 6/30/2021

- Developmental Disability (DD) RFSR = 12,337
 - Individuals with urgent/emergent unmet needs (SUN score 3/4) = 0 (offers made to all as screened and identified 3 or 4—2,731 in process)
 - Individuals with current needs met (SUN score 0/1/2) = 11,881
 - Individuals with no identified unmet needs = 6,886 [estimates based on previous information available and information available in Louisiana Service Reporting System (LaSRS)
 - Individuals in process of scheduling/receiving screening = 4,103
- 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).

^{**}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).

Request for Services Registry (RFSR) (Current Quarter) 1/1/2021 to 6/30/2021

- Developmental Disability (DD) RFSR = 12,337
 - Individuals with urgent/emergent unmet needs (SUN score 3/4) = 0 (offers made to all as screened and identified 3 or 4—237 in process)
 - Individuals with current needs met (SUN score 0/1/2) = **755**
 - Individuals with no identified unmet needs = 237 [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 19,475 Screening of Urgency of Need (SUN) tools have been completed (as of 6/29/2021)
- 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 rescreenings for people with previous SUN scores of 2/1/0 are being conducted.

HOME AND COMMUNITY BASED WAIVER SERVICES

Intellectual/Developmental Disabilities Waivers

COVID-19 Flexibilities

- On January 7, 2021 the Secretary of the Department of Health and Human Services (HHS) renewed the public health emergency until July 21, 2021. 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. The exceptions will continue <u>until 6 months</u> <u>after the expiration of the Public Health Emergency</u>. 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.
 - o 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.
- OCDD released updated guidance on May 5, 2021 (*Appendix K Exceptions Extended*, OCDD-P-21-018, OCDD-R-21-005, OCDD-SC-21-008). If the public health emergency is extended beyond July 21, 2021 OCDD will release additional guidance.
- OCDD held listening sessions on April 5, 2021 (providers) and April 8, 2021 (families) to discuss continued flexibilities after the end of the pandemic.
- During the 2021 Regular Legislative Session Representative Turner introduced House Bill (HB) 204, aimed at continuing three flexibilities (family as paid staff, suspension of the 16-hour rule, and continued virtual visits). The bill was voluntarily deferred, and OCDD is working to with Representative Turner and providers to allow some of the flexibilities (with reasonable, CMS-approved guardrails) to continue post-COVID-19. OCDD is currently evaluating rule changes, manual changes, and waiver amendments that might be necessary to make those changes (subject to CMS approval).

2021 Regular Legislative Session

The 2021 Regular Legislative Session ended June 10, 2021. During the session OCDD participated in several hearings regarding a range of bills and resolutions aimed at improving the lives of those in the DD Community.

- Representative Butler introduced HB 172, for Medicaid to provide dental coverage to adults aged 21 and older with developmental disabilities. HB 172 was signed by Governor Edwards on June 23, and becomes Act 450.
- Representative Butler introduced House Concurrent Resolution (HCR 34) to request a study regarding means of financing dental care for adult residents of intermediate care facilities (ICFs). Medicaid will be completing a study for presentation to the Legislature ahead of the 2022 Regular Legislative Session.
- Representative Stefanski introduced HB 697, for sports wagering, and places some monies collected in taxes into the Community and Family Support System Fund. HB 697 was signed by the Governor on June 4, and becomes Act 50.
- HB 1 and HCR 127 provided additional appropriations for direct service worker's wages. HB 1 appropriated \$16,316,695 from the NOW fund to help stabilize the direct support worker (DSW) workforce. With the federal match the total funding will be \$51,191,468.
 - OCDD held two meetings with stakeholders, including provider associations and the DD Council, to decide the best way to disburse the money.
 - OCDD and the stakeholders additionally discussed the need to create equal pay across the service delivery system (including support coordination, adult on-set disability waivers, and ICFs).
 - OCDD presented to the Joint Medicaid Oversight Committee on June 25, 2021, stating that the stakeholder groups had agreed to a \$2.50 rate increase for services provided by direct support workers in the OCDD Home and Community Based Services (HCBS) system, with a minimum wage set at \$8.50 for direct support workers, and the remaining \$1.25 to the provider.

 OCDDOCDD will conduct rule making with a public comment period once a final determination on these requirements is made.

Children's Choice Waiver (CC)

The Children's Choice Waiver has added additional therapies (Art, Music, and Therapeutic Horseback Riding) to the waiver. Those LIFTS have been completed, and providers can now apply to provide those services to the public. The application is available on the Louisiana Department of Health Website.

New Opportunities Waiver (NOW)

OCDD is currently working on the NOW renewal. Stakeholders have requested that some of the COVID-19 flexibilities be made permanent. understandsOCDD understands that stakeholders would like many of these flexibilities to remain in place, however OCDD must balance the request with what Centers for Medicare and Medicaid Services (CMS) allows. The NOW renewal will be available for public comment in July.

Residential Options Waiver (ROW)

ROW/Office of Aging and Adult Services (OAAS) Transition: This process has been successfully completed with 245 of 250 recipients successfully transitioned to the Residential Options Waiver services. As of 07/01/2021:

- 245 people have completed the transition and are receiving ROW services.
- 5 cases have been closed for the following reasons:
 - o 2 are deceased,
 - 1 entered a nursing facility,
 - 1 entered an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID), and
 - 1 family refused OAAS and OCDD services.

ROW Amendment 2019: CMS approved the ROW amendment on October 6, 2020. **Notice of Intent was completed for publication (July 2021)** to reflect the approved language and service changes. Changes to the ROW included:

- Monitored In-Home Caregiving (MIHC) has been added permanently as a service in the ROW.
- Transitional Expense Planning and Approval (TEPA) language was clarified.
 TEPA is a one-time payment designed to assist individuals in transitioning from an institution to their own home or apartment in the community of their choice.
- A 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 Manual Appendix E (billing code) was reissued on 06/22/2021, implementing an increased service rate for Companion Support Service (to \$92.02 per diem), and aligning ROW vocational services rate with Supports Waiver and New Opportunity Waiver rates.
- ROW Provider Manual has been updated and submitted for review to replace the manual issued on 12/01/2011. Manual sections are currently being reviewed by Medicaid Policy and Compliance/ Medicaid Administrative Unit (MAU) for publication.

 The ROW Program Manager is working with Gainwell Provider Enrollment to update the initial provider enrollment packets, which must be submitted directly to the Gainwell Provider Enrollment unit. Once the packet is updated, the process will align the initial ROW provider enrollment packets with all other Medicaid waivers provider enrollment process.

<u>Pinecrest Supports and Services Center (PSSC) Transition Status</u>

The following figures reflect transition activities from January 1, 2021 thru June 25, 2021:

- The census of Pinecrest Supports and Services Center to date is 443.
- 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. So far in calendar year 2021, 9 people have been admitted and 25 people have been discharged.
- Twenty-five (25) participants are currently planning for a transition from the center.
 - Zero (0) people are anticipated to transition within the next 30 days.
 - Three (3) are anticipated to transition within the next quarter.

EarlySteps

- As of June 1, 2021, the EarlySteps program has 4,920 children and their families enrolled.
 The COVID-19 related decrease in child count began to turn around in May, and
 enrollment has now increased by 6% since April. Monthly referral totals for the fiscal year
 will approximate those from 2019-20 around 10,200 and approaching the typical preCOVID-19 average rate of 1,000 per month.
- Current COVID-19 service delivery guidance for Phase 3 was updated on June 1. Phase 3 guidance includes:
 - Services in child care centers resumed in September 2020.
 - Removed the daily visit limit regardless of a parish positivity rate unless there are dramatic spikes when making weekly comparisons.
 - Updated and simplified the telephone screening process to determine if a family and/or early interventionist is eligible for a face-to-face home visit.
 - Encouraged all early interventionists to follow family preference for home visits if the telephone screening indicates no risk.
 - Suspension of the family cost participation requirement for families with financial impact (such as lost income) continues based on individual family situations, and also includes families in the hurricane-impacted areas—primarily in region 5.
 - Quarterly provider team meetings can continue virtually based on the family's preference and the telephone screening.
 - Face-to-face visits for intake following referral and eligibility evaluations are expected as well.
- The 2019-20 Annual Performance Report (APR) was submitted to the Office for Special Education Programs (OSEP) for February 1. The final determination for the APR was issued in June, and Louisiana slipped back to needs assistance (the second highest ranking out of four possible). The state received the highest ranking of meets requirements

in the previous two years. The determination change is the result of impacts to the state from COVID-19: specifically a percentage decrease in the number of children for whom outcome scores were available, and for not meeting targets for the child outcome indicator due to a higher percentage of children who exited in the last quarter without exit scores.

- The 2021-22 application for federal funds was submitted on May 1. The allocation will include \$7,016,347 in Part C funds (<\$5,237 from 2019-20) and a \$3,037,137 allocation in American Rescue Plan Act (ARPA) funds. The budget for the ARPA funds is due to OSEP in August. Stakeholder recommendations for use of the funds is being accepted until July 15. EarlySteps is focusing use of the funds in areas that address:</p>
 - Increasing access to early intervention services
 - o Increasing family engagement with early intervention services
 - Improving program quality
 - Reducing or minimizing inequities in the program.

<u>INITIATIVES</u>

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

The state is continuing to work on finalizing the State Transition Plan before it can be resubmitted for final approval from CMS.

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 OCDD is able to make visits to all of the residences, updates will be completed 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 and also how to ensure that participants are

receiving the services they desire and that services are person centered. OCDD will continue to work with providers in providing ongoing technical assistance and will be providing additional trainings around 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 in and 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 will be spearheading this exciting time in the MFP program.

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.

OCDD transitioned 14 individuals into the community in calendar year 2020, bringing the total number of transitions to 526 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 3,311 individuals through the life of the program.

Access to Behavioral and Medical Intervention in the Community

The following information outlines OCDD 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 **January 1, 2021 – March 31, 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 March, 2021.

- Between January 1, 2021 and March 31, 2021 there were 25 crisis referrals, and 2 (8%) of these individuals required admission to Pinecrest Supports and Services Center (PSSC).
- 11 out of 25 cases (44%) received a crisis consultation from the Resource Center, with the ability to divert 90% 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 continued for the 2021 calendar year, with 72% of referrals coming from institutional/acute care settings. Further breakdown within these settings revealed that 61% of these referrals were from psychiatric hospital settings, 17% were for persons who were incarcerated, 11% were supported in ICF/DD settings, 6% were in an acute care setting, 6% of persons were in a psychiatric residential treatment facility, and 0% were in a nursing facility at the point of referral.

The OCDD 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. 211 individuals are being followed by the Local Oversight Team (LOT). This quarter there were three reported subsequent incidents of NSB by 2 individuals. One of these incidents involved direct contact with paid support staff (this incident did not result in legal involvement). The individual who had direct contact completed a psychiatric assessment and subsequently returned to his home with supports in place. The second individual did not engage in direct contact, and remains at home with supports in place.