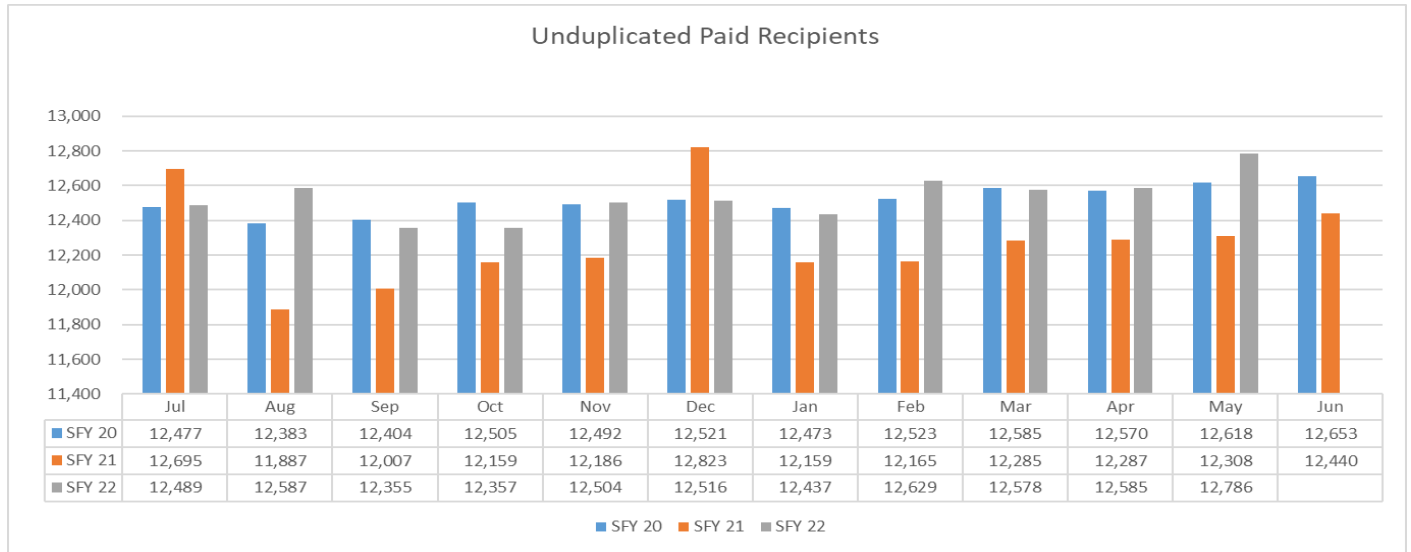


**DEVELOPMENTAL DISABILITIES COUNCIL QUARTERLY  
 REPORT FOR THE 2<sup>nd</sup> QUARTER OF 2022**

**July 1, 2022**

**SERVICES DATA**

**Waiver Participant Data**



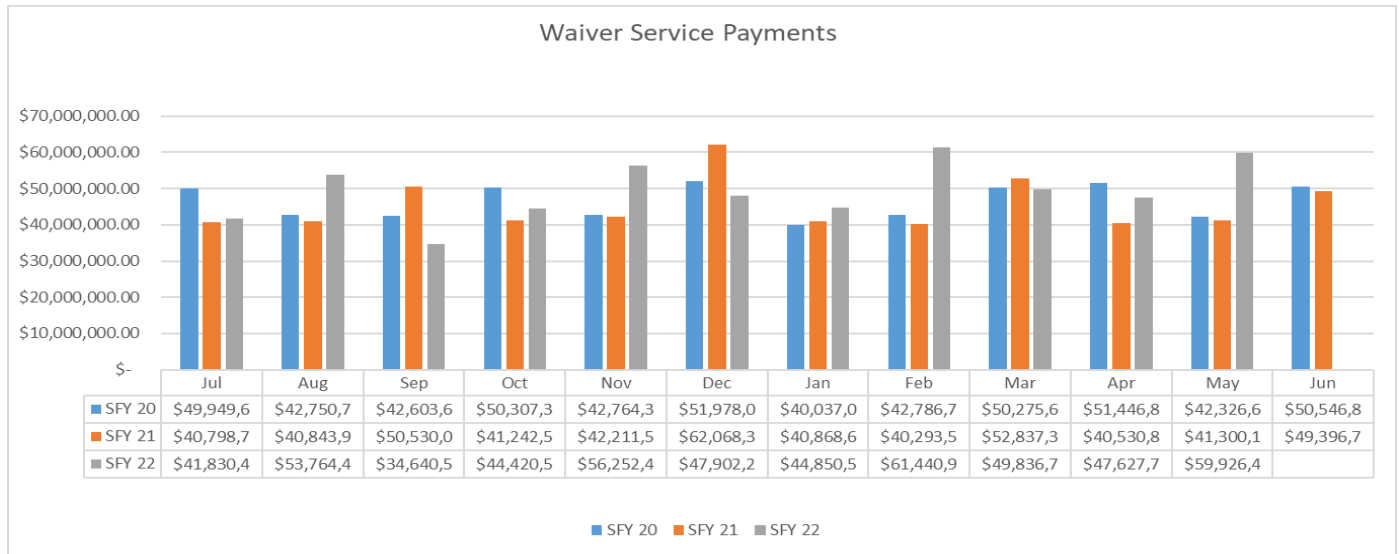
**\*Unduplicated Paid Recipients – monthly total of people who received a paid waiver service (by date of payment).**

**Annual number of waiver individuals receiving paid services**

**SFY20 – 13,268**

**SFY21 – 13,154**

**SFY22 – 13,323**



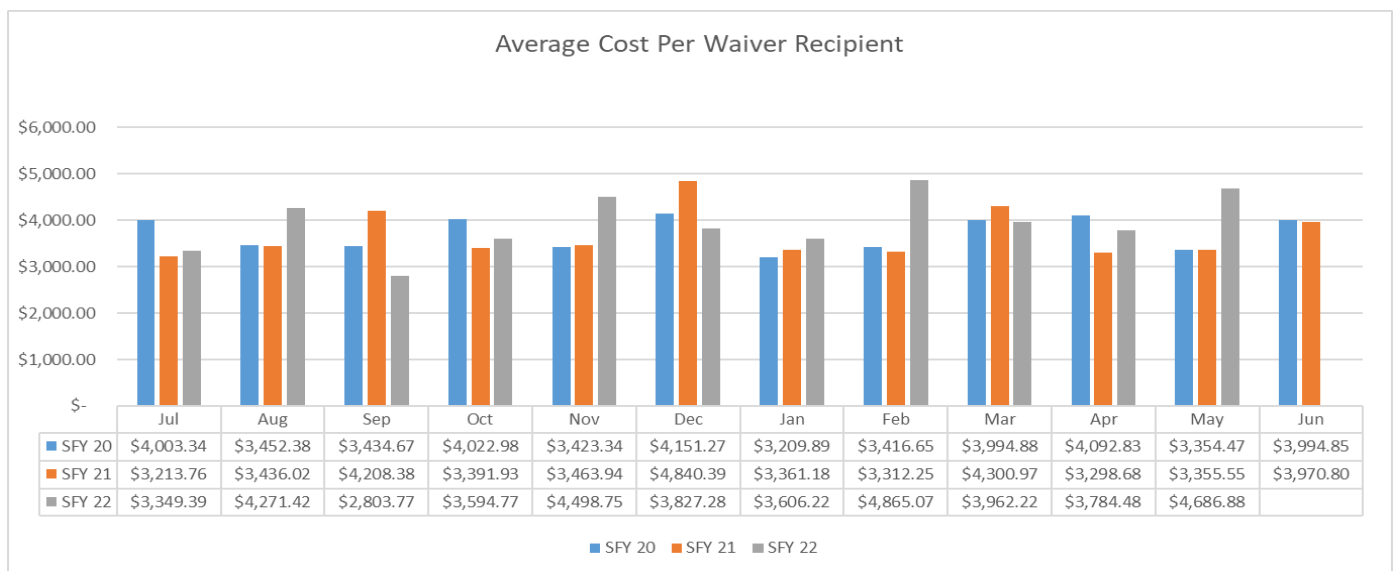
**\*Waiver Services Payments – the amount paid for all waiver services for each month (by date of payment).**

**Annual Totals for Waiver Services Payments**

**SFY20 - \$557,773,523**

**SFY21 - \$542,922,366**

**SFY22 - \$542,493,226**



**Annual Average Cost of Waiver per Recipient**

**SFY20 - \$44,552**

**SFY21 - \$44,154**

**SFY22 - \$47,182**

## OCDD Participant Data

### Screening for Urgency of Need (SUN)

The Office for Citizens with Developmental Disabilities (OCDD) uses the Screening for Urgency of Need (SUN) to identify if an individual with a Statement of Approval has unmet needs for support that can be met through Home and Community Based Waiver services and to connect individuals and families with services for which they may qualify. If an individual has urgent or emergent unmet needs, then they receive an offer for a Home and Community Based Waiver. An initial SUN screening is completed with all individuals who are eligible for OCDD services and who request waiver services unless the individual/guardian does not respond or declines to participate. In addition, follow-up SUN screenings/re-screenings are completed for two reasons:

- Systematic follow-up for individuals with previous SUN scores of 0, 1, or 2; and
- The individual has requested a re-screen due to a change in status.

In the past, OCDD asked for a certain number of “waiver slots” per year. Now that we have shifted to the tiered (most appropriate) waiver process OCDD now offers waiver services based on the identified budget. At this time, OCDD continues to be able to offer waiver slots to all individuals who are identified as having urgent or emergent unmet waiver needs. OCDD closely monitors the budgeted dollar amount and expenses to ensure that we are able to continue to offer waiver slots to these identified individuals.

### Current Quarter Data, April 1, 2022, to June 26, 2022

Total screenings completed 671

Number of screenings by SUN score	Total
Score of 4, unmet needs at the Emergent level	81
Score of 3, unmet needs at the Urgent level	254
Score of 2, unmet needs at the Critical level	121
Score of 1, unmet needs at the Planning level	98
Score of 0, no identified unmet needs	117
<b>Total</b>	<b>671</b>

The table below indicates the totals for initial screenings and re-screenings.

Reason for Screening	Total
Initials	347
Re-Screens	324
<b>Total</b>	<b>671</b>

### EarlySteps Data

- June 1, 2021 Child Count: 5,291

## **OCDD QUARTERLY ACTIVITIES**

### **Waiver-Related Activities**

#### **Employment**

- *Supports Waiver*
  - The Centers for Medicare and Medicaid Services (CMS) approved a Supports Waiver (SW) amendment in response to the Public Health Emergency (PHE). The effective date is July 1, 2022.
  - The following additions will now be included in the SW:
    - Allow virtual delivery of day habilitation, prevocational and supported employment follow along services,
    - Allow support coordinators to make two virtual visits a year,
    - Add Dental services to the waiver in response to legislation this past year.
  - The Supports Waiver rule changes have been updated to reflect the changes to the waiver listed above.
  - The details of these waiver changes will be outlined in the policy and procedures manual for providers, and OCDD will hold trainings for providers and support coordinators.
  
- *Home and Community Based Settings rule*
  - OCDD submitted The Louisiana Statewide Transition Plan to CMS for final approval on 6/8/2022.
  - Final validation visits for the day and employment providers are in process at this time.
  - We will complete all validation visits by 10/31/2022.
  - OCDD continues to provide ongoing technical guidance and assistance and offer trainings in regards to the Home and Community Based Services (HCBS) Settings Rule.
  - The final date of compliance for all states with CMS is 3/17/2023.
  
- *Employment Update*
  - OCDD continues to participate with the State Employment Leadership Network (SELN) in monthly group webinars and monthly one on one technical assistance (TA) regarding employment and community engagement.
  - OCDD has been working with the SELN on the redesign of the new employment and day services. We are still working to obtain funding for the redesign and alignment across waivers.
  - OCDD added Community Life Engagement/Day Habilitation and Community Career Planning/prevocational services (small group services in a ratio of 1:2-4), and virtual delivery of services—all from the Appendix K from the PHE—to the New Opportunities Waiver (NOW), Residential Options Waiver (ROW) and Supports Waiver (SW) effective July 1, 2022.

#### **Waiver Updates**

- *Summary of any activities within Children’s Choice (CC), Residential Options Waiver (ROW), or New Opportunities Waiver (NOW).*
  - The Center for Medicare and Medicaid Services (CMS) approved an amendment to add dental services in the adult waivers on June 13, 2022.
  - The rules for the dental amendments were published in the June 20, 2022 [Louisiana Register](#). Medicaid and OCDD are working to amend the Waiver Manuals to reflect the recent changes.
  - OCDD published new procedure codes for some services in the Waivers that will be affective on July 1, 2022. (*Updated Procedure Code Changes*, OCDD-P-22-020, OCDD-SC-22-011)
- *Post-Public Health Emergency (PHE) Changes*
  - *American Rescue Plan Act of 2021 (ARPA)* The following activities were submitted and have been approved by CMS:
    - START (systemic, therapeutic, assessment, resources, and treatment) model assessment and pilot.
    - Infrastructure Standup for Technology First Initiative (remote supports).
    - Implementation of Value Based Payment (VBP) Model
    - Community Practitioners Training
    - Temporary rate increase for Support Coordination, and
    - Direct support workforce and support coordination recruitment and retention bonus
  - OCDD is in the process of developing an implementation strategy for the CMS approved activities.
  - OCDD is in the process of programming the necessary updates for the CMS approved activities.
    - The effective date for the temporary rate increase for support coordination is January 1, 2022.
    - The effective date for the direct support workforce and support coordination recruitment and retention is April 1, 2021.

### **MyPlace/Money Follows the Person**

- 2022 continues as a year of growth in the OCDD Money Follows the Person (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 to assist individuals with Intellectual or Developmental Disabilities (I/DD) in transition from institutional settings into the community. CMS has made a nationwide policy change, allowing individuals who have been in an institution for 60 days to access the MFP program.
- As of June of 2022, the MFP demonstration is fully staffed and eager to assist transitioning participants with Intellectual or Developmental Disabilities back into a community setting.
- MFP participants range from children born with complex needs to teens and adults diagnosed with intellectual or developmental disabilities.
- MFP assists participants move from qualified institutions into a family home or community-based living setting, such as a house or an apartment.

## Early Steps

- *Ongoing Response to COVID-19*
  - EarlySteps has regularly updated its procedures since March 2020 as changes in COVID-19 guidance has occurred. . COVID-19 rates declined significantly in Spring 2022, and as a result, guidance was updated to remove the limits to the number of daily home visits a provider could make. However, as of June 2022, the rates started increasing so staff are reviewing the percentage of positive cases in each parish again and imposing some daily limits. Masking and social distancing are still required since children under age 5 were not vaccinated. Now that vaccinations are approved for children 6 months to 5 years of age, some of these requirements may be removed as well. The priority for making face-to-face visits remains when a family meets the telephone screening requirements for a home visit and they express a preference for a home visit, services should be provided face-to-face.
- *EarlySteps Budget*
  - Federal Application for Funds—The Application for Individuals with Disabilities Education Improvement Act (IDEA), Part C Federal Funds was submitted to the Office for Special Education Programs (OSEP) in May 2022. Just prior to the submission date, the office received its allocation for 2022-23 of \$7,123,564 an increase of \$107,217 compared to last year. In addition, OSEP notified the state that a supplemental award for 2021-22 of \$373,302 is available for current year funds bringing the total allocation to \$7,389,649. The additional funds were available due to unallocated Part C funds at the federal level.
  - Rate Increase—EarlySteps providers were successful in advocating with the legislature for a rate increase. There has not been a rate increase in over 10 years. As a result, OCDD will receive an additional \$3,135,357 to cover the increase and Medicaid will receive an additional \$1,621,567 (to be matched with federal Medicaid funds) for a 30% rate increase across all services and raising the reimbursement for support coordination to a flat rate of \$169 per month. Staff are working with Medicaid and the Central Finance Office contractor to make the necessary changes.
- *Annual Performance Report*
  - On June 22, EarlySteps received its determination of “needs assistance” from OSEP based on the performance results for its Annual Performance Report (APR) submitted on February 1. This is the second year we received this determination, the second highest of the four rankings for a state’s APR.
- The State Interagency Coordinating Council (SICC), the advisory council to EarlySteps, will meet on July 14, 2022 at 1:00. The meeting will most likely be face-to-face at the Claiborne Building with an option to participate by Zoom. You can obtain more information on the meeting details from Alishia Vallien, the SICC chair, at [alishia.vallien@la.gov](mailto:alishia.vallien@la.gov).

**Public Intermediate Care Facilities for Individuals with I/DD (ICF/IIDs)**

**Pinecrest Supports and Services Center**

Current Census	2022 Admissions	2022 Discharges
415	25	27

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

**Community Capacity Building to Serve Individuals with Complex Medical and Behavioral Health Needs**

**OCDD Resource Center Activities**

The mission of the OCDD Resource Center is to collaborate with private providers/clinicians to assist with identification of support needs, as well as develop activities/interventions/products that improve their abilities to achieve positive outcomes for persons who experience intellectual or developmental disabilities (IDD). The Resource Center services are designed to assist individuals who experience IDD to have greater access to needed medical and behavioral health services so that they are able to remain living, working and involved in their community.

- The OCDD Resource Center clinicians provide consultations to private providers and clinicians to enhance their ability to support and/or provide treatment to individuals who experience IDD. When necessary, the Resource Center clinicians may provide direct services to individuals as a service of last resort. Through the third quarter of FY 21-22 (**January 1, 2022 – March 31, 2022**), OCDD Resource Center Clinicians provided consultation and/or direct services that impacted **1,649** individuals who experience IDD. Over **97%** of all individuals receiving consultative or direct services from the Resource Center were able to remain living, working and involved in their community, and over **98%** report satisfaction with services provided. These consultations and services were across nursing, therapy, and behavioral health clinicians.
- The OCDD Resource Center Nursing staff provide needed outreach and education to all HCBS provider nurse consultants. In the third quarter of FY 21-22 (**January 1, 2022 – March 31, 2022**), the nurses conducted **1,787** outreach and education contacts/activities.
- The OCDD Resource Center dental coordinator and RN Manager, along with OCDD’s Clinical Director also participate in the State Dental Taskforce and are working collaboratively with the taskforce to address the educational components of the efforts to expand access to needed dental services for individuals who experience IDD.

**OCDD Clinical Training and Education Activities**

OCDD's Clinical Services division including the Resource Center clinicians provide training and other educational resources to individuals who experience IDD and their families, clinicians across disciplines and IDD providers. The following activities occurred in the third quarter of FY 21-22 (**January 1, 2022 – March 31, 2022**):

- **108** training events with clinicians
- University level training for undergraduate and graduate level students at 4 Louisiana University programs
- OCDD's nursing staff continue to partner with LSU Medical School for Operation House Call which is focused on training medical residents to better support individuals who experience IDD.
- OCDD's Clinical division developed 7 core white papers on adaptations to mental health treatment approaches for individuals who experience IDD. These white papers have been provided to all 5 MCOs in Louisiana and have been shared with colleagues in other states per requests. OCDD's Clinical division along with other OCDD leadership staff began quarterly meetings with the MCO behavioral health medical directors to enhance collaboration, education and training.
- OCDD's Clinical division continued collaborative training and education events with developmental disability service agencies in Missouri and Washington, DC. The primary goal is to share learning and educational resources across states to improve understanding of and access to appropriate mental health services and supports and improved wellness.
- OCDD's Clinical division reinitiated formal CE offerings during the last quarter with 2 large CE events, with one on nursing responsibilities in HCBS and another partnering with AAIDD on pandemic impacts on BH needs for individuals with IDD
- OCDD is working collaboratively as part of a grant the Arc of Louisiana secured focusing on dual diagnosis. Initial project focus is on developing a clinician Guide to Accessible BH services for Individuals with IDD. The collaborative project also includes membership from OBH, community clinicians, and CSoC.

### **Urgent Triage and Diversion Activities**

OCDD continues to receive and triage urgent referrals impacting an individual's ability to remain living in their home/community. Trends associated with placement requests to OCDD Central Office for the **2022** calendar year (covering the period of **January 1, 2022 – March 31, 2022**).

- Between **January 1, 2022 – March 31, 2022** there were **37** new urgent referrals made to OCDD
- During this quarter, **30** urgent cases were resolved, with **12** of the **30** cases (**40%**) receiving a consultation from the Resource Center, with the ability to divert **91%** 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 an urgent 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 current reporting period, with **69%** of referrals coming from institutional/acute care settings. Further breakdown within these settings revealed that **29%** of these referrals were from psychiatric hospital settings, **13%** were for persons who were incarcerated, **15%** were supported in ICF/DD settings, **6%** were in an acute care setting, **4%** of persons were in a psychiatric residential treatment facility, and **2%** were in a nursing facility at the point of referral.

The Resource Center also continues to work 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. **210** individuals are being followed by the Local Oversight Team (LOT). This quarter there were no reported subsequent incidents of NSB.