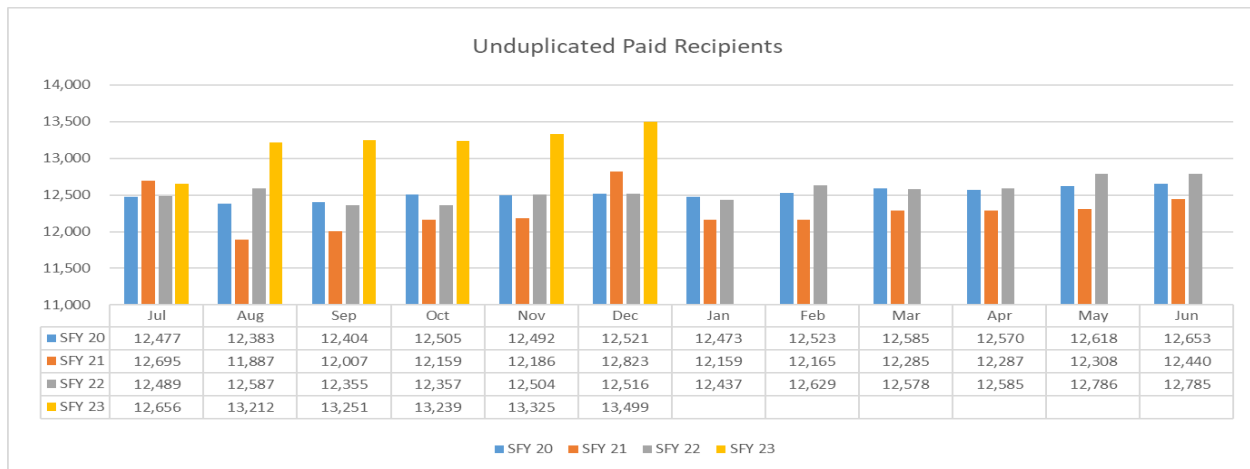


## DEVELOPMENTAL DISABILITIES COUNCIL QUARTERLY REPORT FOR THE 4<sup>th</sup> QUARTER OF 2022

**January 6, 2023**

### 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**

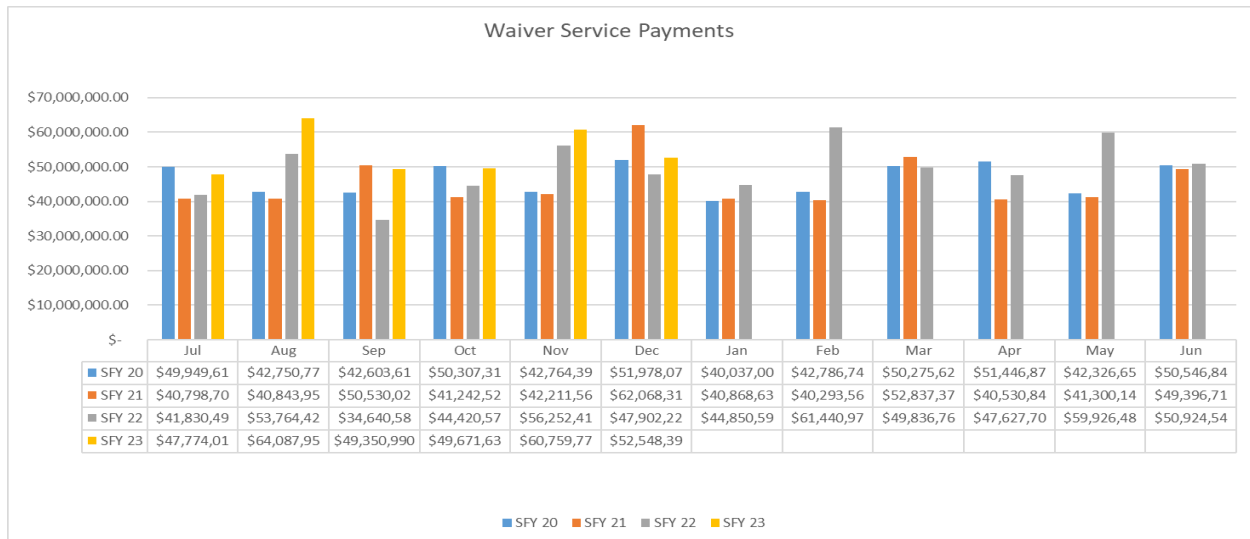
**SFY22 – 13,323**

**SFY23 – 13,803**

### Waiver Individuals Receiving Paid Services by Race

REGION	AMERICAN INDIAN OR ALASKAN NATIVE	ASIAN INDIAN	ASIAN UNKNOWN	BLACK OR AFRICAN AMERICAN	CHINESE	JAPANESE	NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER	OTHER ASIAN	OTHER PACIFIC ISLANDER	OTHER UNSPECIFIED	VIETNAMESE	WHITE	Grand Total
1	1	5		625		1				144	6	199	980
2	1	19		942	1			1		245	24	696	1,929
3	19	3		427					1	144	17	700	1,311
4	8	5	1	791						313	15	1,234	2,367
5	1	4		193			1			90	6	463	758
6	4	1		301						106	3	441	856
7	3	2		556						142	17	442	1,162
8	1	3		616				1		115	14	507	1,257
9	4	3		354				1		262	17	1,105	1,746
10	2	9	2	480						287	13	643	1,436
<b>Grand Total</b>	<b>44</b>	<b>54</b>	<b>3</b>	<b>5,285</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>3</b>	<b>1</b>	<b>1,849</b>	<b>132</b>	<b>6,430</b>	<b>13,803</b>

**\*Note: The breakdown of race in this table reflects those categories for which there is an identified member. There are some duplicates, as some people self-report to be in more than one category.**



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

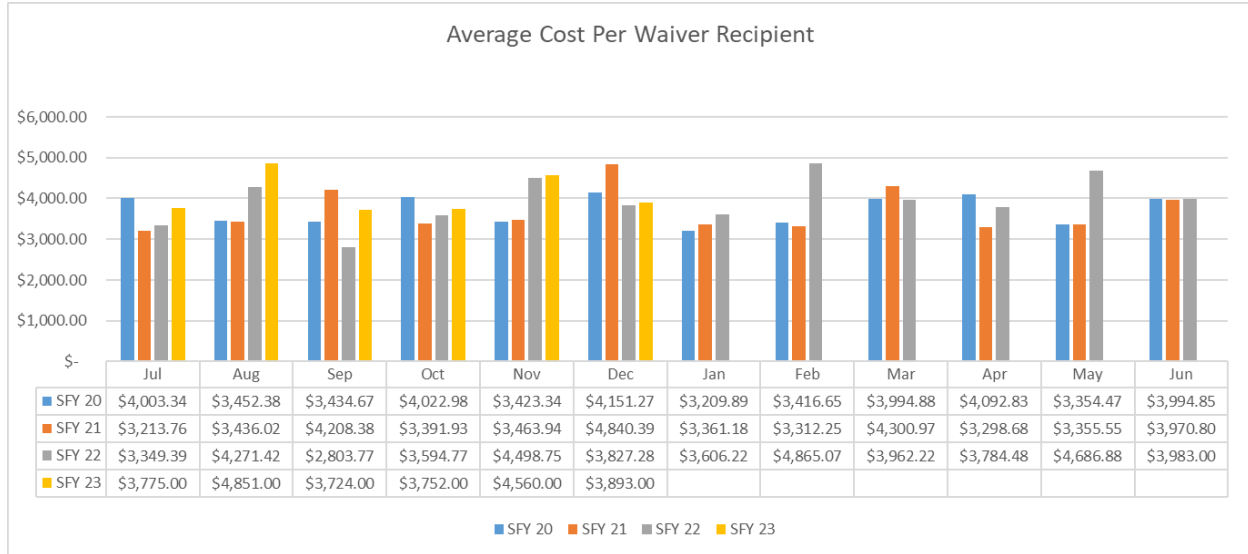
### Annual Totals for Waiver Services Payments

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

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

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

**SFY23 - \$324,192,762**



### Annual Average Cost of Waiver per Recipient

**SFY20 - \$44,552**

**SFY21 - \$44,154**

**SFY22 - \$47,182**

**SFY23 - \$49,019**

### 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.

**Current Quarter Data, October 1, 2022, to December 31, 2022**

Total administrations completed

761

<b>Number of administrations by SUN score</b>	<b>Total</b>
Score of 4, unmet needs at the Emergent level	168
Score of 3, unmet needs at the Urgent level	251
Score of 2, unmet needs at the Critical level	108
Score of 1, unmet needs at the Planning level	88
Score of 0, no identified unmet needs	146
<b>Total</b>	<b>761</b>

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

<b>Reason for Screening</b>	<b>Total</b>
Initials	511
Re-Screenings	250
<b>Total</b>	<b>761</b>

As of December 31, 2022, the current total number of individuals listed in the DD Request for Services Registry (Registry) is 12,698<sup>1</sup>.

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<sup>1</sup> The total number of individuals listed in the Registry will fluctuate due to new additions, closures, and post-closure re-opens. Reasons for closures include no response to SUN contact attempts; no response to validation contact attempts; loss of eligibility; confirmed out-of-state for reasons not related to military, treatment unavailable in Louisiana, or disaster displacement; no response to out-of-state letter; death; individual request; no response to waiver offer after second attempt; declining a waiver offer; and accepting a waiver offer. Records closed due to no response will maintain their waiver request date in the event of a post-closure re-open.

## **OCDD QUARTERLY ACTIVITIES**

### **Waiver-Related Activities**

#### **Employment**

- *Supports Waiver*
  - OCDD submitted the Supports Waiver amendment to CMS on December 6, 2022.
  - The following is included in the SW amendment:
    - Transportation as a separate billable service for onsite day habilitation, community life engagement, onsite prevocational, community career planning and individual and group supported employment services;
    - Addition of Community Life Engagement Development, which is a new service that provides habilitation services in the community rather than in a facility;
    - Amending service definition for individual supported employment and including 5 separate billable services, which will assist more individuals to have individual jobs rather than group employment/jobs;
    - Changes to the way that services are billed, which is shifting to have all 3 adult waivers with the same services and billing system.
  - OCDD will outline the details of these waiver changes in the policy and procedures manual for providers, and a training will occur to providers and support coordinators upon approval from CMS.
- *Home and Community Based Settings Rule*
  - The Louisiana Statewide Transition Plan received CMS final approval on October 4, 2022.
  - Due to the pandemic, CMS has allowed states to request to be placed into corrective action. Louisiana submitted a corrective action plan on December 1, 2022. We are awaiting CMS' response and guidance.
  - OCDD continues to provide ongoing technical guidance and assistance and offer trainings in regards to the HCBS Settings Rule to all waiver providers.
  - At this time, there are approximately 25 day and employment providers who are still working towards compliance with the HCBS Settings Rule.
  - The final date of compliance for all states with CMS is March 17, 2023.

#### **Waiver Updates**

- *Summary of any activities within Children's Choice (CC), Residential Options Waiver (ROW), or New Opportunities Waiver (NOW).*
  - The ROW was due for a 5-year renewal. OCDD submitted the ROW renewal to CMS in December 2022.

- OCDD is in the process of amending the CC and the NOW to reflect changes to the waiver in response to stakeholders and advocates.
- When CMS approves the changes, OCDD will make the required changes to our rules and manuals.
- *American Rescue Plan Act of 2021 (ARPA)* The following activities have been approved by CMS, and we must spend the funds on these activities by March of 2025:
  - START (Systemic therapeutic assessment resources and treatment) model assessment and pilot. This activity will allow Louisiana to bring in a team of experts to do an assessment to identify gaps in services for people with co-occurring behavioral health needs and intellectual / developmental disabilities. This assessment will begin in February. Once this assessment is completed, we will do set up a pilot program based on the feedback we receive to support individuals in crisis.
  - Infrastructure Standup for Technology First Initiative. The funding in this activity will help us purchase the equipment that is needed to begin using technology supports in our waiver. We will be meeting with stakeholders to help inform what these supports look like before we spend any of the money in this activity.
  - Implementation of Value Based Payment (VBP) Model. VBP is a way that states can pay providers who are able to provide quality supports to people. We will be developing a set of measures or indicators, and providers who meet specific targets will be eligible to receive a payment that is a reward for the quality services they provide. We will be meeting with stakeholders to get feedback on what measures we should consider for this model and payment to providers.
  - Community Practitioners Training. We will use this funding to support training opportunities for dental practitioners to better know how to support people with I/DD in their dental practices. Continuing education units for dentists were offered at the Louisiana Dental Association Conference in December, which focused on how to best support people with I/DD in dental practices.
  - Temporary rate increase for Support Coordination. This rate increase was initiated. While funding is available, we will use this to give a 30% rate increase to our current support coordination rate.
  - Direct support workforce and support coordination recruitment and retention bonus. This funding will be used to give bonus payments to direct support workers. LDH has made changes to how these bonus payments will be made, and we are awaiting CMS approval for these changes. Communications on how these payments will be made will be provided upon CMS approval.

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

- Money Follows the Person demonstration is an addition to services that helps people with disabilities move, or *transition*, from an institution into a home and community-based setting, such as a home or apartment.

- The OCDD My Place or Money Follows the Person (MFP) program has continued to grow through 2022. CMS approved the program to continue receiving funding through 2027.
- MFP participants range from children born with complex needs to teens and adults diagnosed with intellectual / developmental disabilities currently living in a nursing facility, specialty hospital, or an intermediate care facility for 60 consecutive days.
- OCDD MFP has started planning to implement several initiatives to assist individuals with intellectual/ developmental disabilities 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.
- In 2022, MFP assisted in over 55 successful participant Transitions.
- In 2023, MFP will provide training on My Place on enrolling in our demonstration, an overview of potential participants, and the benefits of My Place participation to anyone who requests them.

## **Early Steps**

- *Ongoing Response to COVID-19*
  - The last year-to-date changes in home visiting guidance was issued in October 2022, when the statewide positivity rates were very low. The telephone screening, which identifies potential risk for a home visit, was simplified and regional staff are not currently tracking parish positivity rates. Masking and social distancing are still required since most children under age 5 are not vaccinated. For EarlySteps services, the priority for making face-to-face visits continues when a family meets the telephone screening requirements for a home visit and they express a preference for a home visit, then services should be provided face-to-face.
- *EarlySteps Budget*
  - Rate Increase—The 30% rate increase for EarlySteps services is fully in effect for both Medicaid-paid and non-Medicaid paid services. Family Support Coordination agencies are able to bill in units, the equivalent of the \$169 flat rate, but the process for flat-rate billing takes more time to install and requires collaboration between the Medicaid fiscal intermediary and the EarlySteps Central Finance Office contractor and the process to make the changes begins in January.
- EarlySteps received an additional state general fund allocation to support the rate increase. Service expenditures are also impacted by the increase in the number of children enrolled as of December 1: 5,914 children, an increase of 283 children since September. The increase in child count results from the activities implemented last year to improve developmental screening rates in health care settings, which resulted in increased referrals. This is the highest child count in the history of the program.
- EarlySteps is experiencing staff changes:

- Lizbeth Raque, region 1/10 regional coordinator left in November to take a job with LSU Health Sciences Center
- Leona White, Provider Specialist and Tracy Crump, region 8 regional coordinator are retiring in January
- Brenda Sharp, Program Manager, is retiring in February.

All positions have been posted to fill the vacancies.

- EarlySteps has been selected for monitoring by the US Department of Education, Office for Special Education Programs (OSEP) as part of its regular monitoring cycle. The process with OSEP actually begins in 2024, but EarlySteps staff will complete activities during 2023 in preparation for the engagement with OSEP. The process called, Differentiated Monitoring and Support (DMS) 2.0, has a stakeholder involvement component, so EarlySteps will be reaching out to stakeholders for input and participation.
- The State Interagency Coordinating Council (SICC), the advisory council to EarlySteps, will meet on January 12, 2023 at 1:00. The meeting will be face-to-face at the Claiborne Building with an option to participate by Zoom. More information on the meeting details can be obtained from Alishia Vallien, the SICC chair, at [alishia.vallien@la.gov](mailto:alishia.vallien@la.gov).

## **Public Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IIDs)**

### **Pinecrest Supports and Services Center**

Current Census	2022 Calendar Year Admissions	2022 Calendar year Discharges
422	13	8

## **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 identifying support needs, as well as developing 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 first quarter of fiscal year (FY) 22-23 (**July 1, 2022 – September 30, 2022**), OCDD Resource Center Clinicians provided consultation and/or direct services that impacted **1150** individuals who experience IDD. Over **95%** 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 first quarter of FY 22-23 (**July 1, 2022 – September 30, 2022**), the nurses conducted **1,359** 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 first quarter of FY 22-23 (**July 1, 2022 – September 30, 2022**):

- 165 training events with clinicians
- University level training for undergraduate and graduate level students at 4 Louisiana University programs, which are:
  - Southeastern Louisiana University
  - Louisiana State University (LSU) Health Sciences Center
  - LSU Eunice
  - Louisiana College
- 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 is currently working with colleagues in Missouri and the National State Directors of Developmental Disability Services to build brief training modules and videos for use nationally in clinician training.
- OCDD's Clinical division along with other OCDD leadership staff began quarterly meetings with the managed care organization (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 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 continued providing formal CE offerings during the last quarter.
- OCDD worked collaboratively as part of a grant the Arc of Louisiana secured focusing on dual diagnosis. Initial project focused on developing a clinician Guide to Accessible Behavioral Health Services for Individuals with IDD. This Guide has been completed and is being readied for dissemination. The collaborative project also includes membership from the Office of Behavioral Health (OBH), community clinicians, and Coordinated System of Care (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 **July 1, 2022 – September 30, 2022**).

- Between **July 1, 2022 – September 30, 2022** there were **44** urgent referrals made too OCDD.
- During this quarter, **54** urgent cases were resolved, with **24** of the **54** cases (**44%**) receiving a 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 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 **84%** of referrals coming from institutional/acute care settings. Further breakdown within these settings revealed that **32%** of these referrals were from psychiatric hospital settings, **11%** were for persons who were incarcerated, **25%** were supported in Intermediate Care Facility for Individuals with Intellectual



Disabilities (ICF/IID) settings, **11%** were in an acute care setting, **2%** 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. The Local Oversight Teams (LOT) are following **212 individuals**. This quarter there were **two** reported subsequent incidents of NSB, **one** incident included direct contact (this incident did not result in legal involvement but adult protective services (APS) was contacted). Both individuals remain in Waiver and currently reside in their homes.