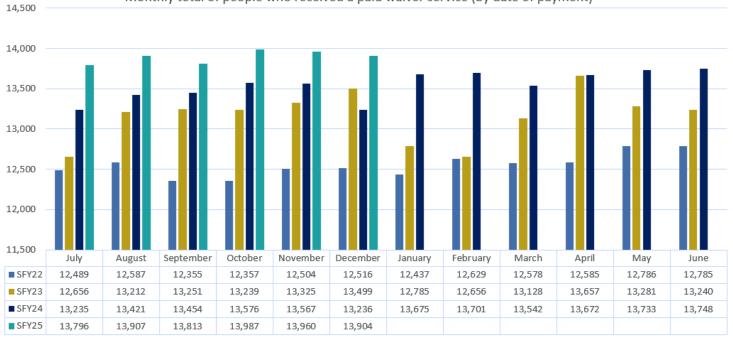


SERVICES DATA

Waiver Participant Data

Unduplicated Paid Recipients

Monthly total of people who received a paid waiver service (by date of payment)



■ SFY22 ■ SFY23 ■ SFY24 ■ SFY25

Annual number of waiver individuals receiving paid services:

SFY22 - 13,649

SFY23 - 14,271

SFY24 - 14,786

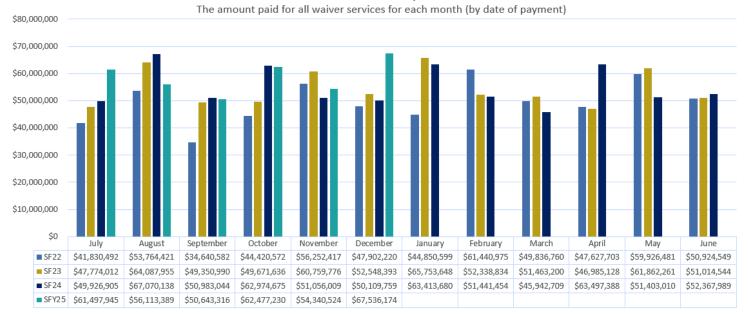


Waiver Individuals Receiving Paid Services by Race

Region	American Indian or Alaskan Native	Asian Unknown	Black or African American	Native Hawaiian or Other Pacific Islander	Other Unspecified	White	Grand Total
1	2	5	658		1	200	866
2	2	19	1,012		2	712	1,747
3	19	4	444			688	1,155
4	9	5	850		1	1,289	2,154
5	1	3	201			472	677
6	5	1	282		1	428	717
7	4	3	549			439	995
8	3	3	552			473	1,031
9	5	4	405	2	2	1,224	1,642
10	4	11	513		5	661	1,194
Total	54	58	5,466	2	12	6,586	12,178

^{*}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. The following races had no participants: Asian Indian, Chinese, Japanese, Other Asian, Other Pacific Islander, and Vietnamese.

Waiver Service Payments



■ SF22 ■ SF23 ■ SF24 ■ SFY25

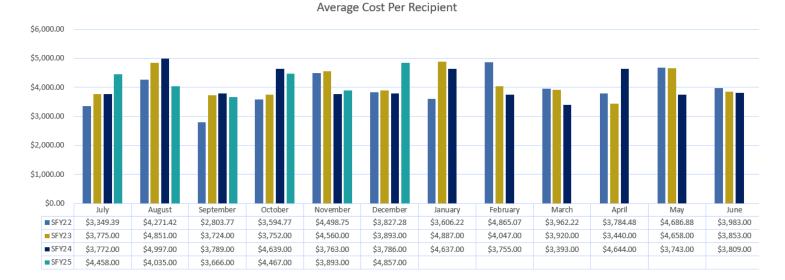
Annual Totals for Waiver Services Payments:

SFY22 - \$593,300,240

SFY23 - \$653,577,703

SFY24 - \$660,098,673





Annual Average Cost of Waiver per Recipient:

SFY22 - \$47,246

SFY23 - \$49,395

SFY24 - \$48,718

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 (HCBS) and to connect individuals and families with other services for which they may qualify. If an individual has urgent or emergent unmet needs, 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 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 needs. OCDD closely monitors the



budgeted dollar amount and expenses to ensure that we are able to continue to offer waiver services to these individuals.

CURRENT QUARTER DATA: OCTOBER 1, 2024 TO DECEEMBER 31, 2024				
Number of administrations by SUN score	Total			
Score of 4, unmet needs at the Emergent level	140			
Score of 3, unmet needs at the Urgent level	206			
Score of 2, unmet needs at the Critical level	91			
Score of 1, unmet needs at the Planning level	85			
Score of 0, no identified unmet needs	353			
Total	875			

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

Reason for Screening	Total	
Initials	558	
Re-Screenings	317	
Total	875	

Waiver offers are made to all individuals with a SUN score of 3 or 4, so no individual with current unmet needs is on the Registry. As of August 31, 2024, the current total number of individuals listed in the DD Request for Services Registry (Registry) is 12,737¹.

EarlySteps Participant Data

Early Steps Participants Data:

• Child count as of December 1, 2023: 6,460

• Child count as of December 1, 2024: 6,090

Referrals for the second quarter:

• Referrals October 2024: 1,392

• Referrals November 2024: 1,113

• Referrals December 2024: 990

¹ 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.



Tillediale abildance	:41-	+:	TECD	(Daggest a.	1 202	4)
Eligible children	with	active	11.25	December	1, 2024	4)

Region	Age 0	Age 1	Age 2	Total
1	55	140	254	449
2	109	325	690	1,124
3	94	207	392	693
4	108	245	406	759
5	27	86	134	247
6	27	73	96	196
7	75	200	313	588
8	55	142	169	366
9	117	341	573	1,031
10	69	216	352	637
Total				6,090

OCDD QUARTERLY ACTIVITIES

Waiver-Related Activities

Employment:

- OCDD will provide trainings around the individual service array to local governing entities (LGEs), providers, and support coordinators to ensure that they are using the services effectively.
- OCDD received funding from the Money Follows the Person (MFP) program to provide the 40-hour core supported employment training to providers, which is required in order to deliver the individual supported employment service array. This training is part of the initiative to increase capacity statewide for supported employment providers.
- OCDD staff attended an in-person annual meeting with the State Employment Leadership Network (SELN) in October. OCDD continues to participate with the SELN in monthly group webinars, monthly one-on-one technical assistance, and an annual meeting, all with a focus on improving employment and community outcomes. The SELN works to provide the necessary guidance for implementation of new policies and procedures around community and employment services.

Supports Waiver (SW):

• LDH released a wavier amendment adding the eight value-based payment incentives for public comment for 30 days and then submitted the amendment to the Centers for Medicare and Medicaid Services (CMS) on December 12, 2024.



Home and Community-Based Services (HCBS) Settings Rule:

- Louisiana's Corrective Action Plan (CAP) for the HCBS Settings Rule with CMS will expire on December 31, 2024.
- All final validation onsite visits have been completed. All Day Habilitation and Employment providers met the minimum compliance level of the HCBS Settings rule.
- A final meeting with CMS will occur in January 2025. Once OCDD has the meeting with CMS to finalize the report and next steps, OCDD will have a meeting with providers.

Updates for the Children's Choice (CC), Residential Options Waiver (ROW), or New Opportunities Waiver (NOW):

• LDH released a wavier amendment adding the eight value-based payment incentives for public comment for 30 days and then submitted the amendment to CMS on December 12, 2024.

American Rescue Plan Act of 2021 (ARPA):

The Centers for Medicare and Medicaid Services (CMS) has approved the activities for spending through Section 9817 of the American Rescue Plan Act (ARPA). Louisiana has received an extension to spend ARPA funds until December 2025. OCDD has been working on the following initiatives during the quarter:

- Systemic therapeutic assessment resources and treatment (START) model assessment and pilot:
 - o Once OCDD finalizes the contract, we will begin to work on recommendations.
- Infrastructure Standup for Technology First Initiative:
 - This year, OCDD will set up technology demonstrations in the LGEs to offer community members the chance to test out different technology supports. OCDD is also creating a video library to highlight the technology.
- Implementation of Value-Based Payment (VBP) Model:
 - Once CMS approves the eight metrics that OCDD submitted for review, OCDD will meet with the VBP workgroup to begin operationalizing the value-based payments. The submitted metrics included:
 - Retention of direct support professionals
 - Use of person-centered practices in hiring workers
 - Technology grants
 - Training for direct support workers through the National Association for the Dually Diagnosed (NADD)
 - Training for support coordinators through SELN
 - Timely closure of critical incidents
 - Completion of NCI Staff Stability Survey
 - Survey results for support coordination
- System modernization to support an electronic individual support plan:
 - o OCDD has finalized the LaPlus assessment and it is ready to be piloted. OCDD will do assessments from January to September 2025.



MyPlace/Money Follows the Person

The My Place Louisiana or Money Follows the Person (MFP) program empowers individuals with disabilities to move from institutional settings into their own homes or apartments, fostering independence and community integration across Louisiana. MFP helps many people, from children with complex needs to teenagers and adults with intellectual or developmental disabilities. Key updates and achievements include:

- Funding extension: CMS has expanded funding for MFP through 2027
- Increased assistance: MFP received additional funding in 2024 to address basic needs such as food, clothing, and housing. In 2025, collaborative partnerships are forming statewide to maximize these resources.
- Transition milestones: In calendar year 2024, My Place Louisiana achieved a record number of transitions since 2018 by successfully helping 58 participants move into the community through the NOW, ROW, and CC waiver programs.
- Marketing campaign: To increase awareness and participation, MFP will launch a comprehensive marketing campaign in 2025. This effort will use television, radio, and social media to build community support and share the program's benefits.
- Value-based healthcare initiative: MFP continues to advance its value-based payment program, designed to improve healthcare quality and reduce costs for Medicaid recipients. By working with healthcare providers, this initiative promotes better-coordinated care and strengthens person-centered planning statewide.

Early Steps

EarlySteps completed an on-site monitoring visit with the U.S. Department of Education,
Office of Education Programs (OSEP) on December 5 and 6. OSEP will provide a formal
report in upcoming months.

<u>Public Intermediate Care Facilities for Individuals with Intellectual</u> Disabilities (ICF/IIDs)

Pinecrest Supports and Services Center:

Current Census	2024 Calendar Year Admissions	2024 Calendar Year Discharges
425	69	32

Access to Behavioral and Medical Intervention in the Community

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 I/DD. The Resource Center services assist individuals who experience I/DD 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 provide treatment to individuals who experience I/DD. When necessary, the Resource Center clinicians may provide direct services to individuals as a service of last resort. Through the fourth quarter of FY 24-25 (July 1, 2024 September 30, 2024), OCDD Resource Center clinicians provided consultation and direct services that impacted 443 individuals who experience I/DD. More than 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 more than 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 fourth quarter of FY 24-25 (**July 1, 2024 September 30, 2024**), the nurses conducted **1,970** outreach and education contacts and activities.
- The OCDD Resource Center dental coordinator and registered nurse 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 I/DD.

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 I/DD and their families, clinicians across disciplines, and I/DD providers. The following activities occurred in the fourth quarter of FY 24-25 (July 1, 2024 – September 30, 2024):

- 81 training events with clinicians and providers
- University-level training for undergraduate and graduate level students at four Louisiana university programs, which are:
 - Southeastern Louisiana University
 - LSU Health Sciences Center
 - LSU Eunice
 - Louisiana College
- OCDD's nursing staff continued to partner with LSU Medical School for Operation House Call, which is focused on training medical residents to better support individuals who experience I/DD.
- OCDD's Clinical Division worked 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. The first set of trainings targeting CBT and DBT
 are available here at the NASDDDS website: https://www.nasddds.org/i-dd-and-mental-health-support-resources/
- OCDD's Clinical Division and other OCDD leadership staff continued quarterly meetings with the managed care organization (MCO) behavioral health medical directors to enhance collaboration, education, and training.
- OCDD's Clinical Division continued providing formal continuing education offerings during the last quarter.



- As part of a grant that the Arc of Louisiana secured focusing on dual diagnosis, OCDD helped develop a clinician guide to accessible behavioral health services for individuals with I/DD as well as a guide for individuals and families to navigate across multiple systems. These guides available on the Arc of Louisiana site at <u>Guides The Arc of Louisiana (thearcla.org)</u>. The collaborative project also includes membership from the Office of Behavioral Health, community clinicians, and Coordinated System of Care.
- OCDD's clinical division began working collaboratively with the Arc of Louisiana to partner with individuals with lived experience and family members on wellness educational offerings. This process resulted in a pilot Wellness Guide initiative with families of youth and adults with living experience.
- OCDD's Clinical Division continued to complete evaluations and consultations as part of the new statewide risk management system.
- OCDD's Clinical Division assigned clinical liaisons to each of the MCOs to assist in the early identification of critical situations to initiate needed behavioral health, medical, allied health, and I/DD services and supports.
- OCDD's Clinical Division is working with the Department of Psychiatry at Ochsner-LSU
 Health in Shreveport to provide didactic training to both psychiatric residents and
 doctoral-level psychology interns. Future plans include clinical consultation from
 Resource Center clinicians, with the adult and child outpatient psychiatric clinics
 associated with Ochsner-LSU Health in Shreveport, and continued didactic training for
 Psychiatry Grand Rounds and Psychology Doctoral interns.
- OCDD contacted the Center for START Services to analyze Louisiana's behavioral health service system for people with developmental disabilities. They submitted their full report with recommendations in June 2024 and a presentation of the findings in July 2024.

Urgent Triage and Diversion Activities:

OCDD continues to receive and triage urgent referrals impacting an individual's ability to remain living in their home and community. The following bullets include trends associated with placement requests to OCDD Central Office for the fourth quarter of FY 24-25 (**July 1, 2024** – **September 30, 2024**).

- Between July 1, 2024 and September 30, 2024, there were **53** urgent referrals made to OCDD.
- During this quarter, 47 urgent cases were resolved, with 16 of the 47 cases (34%) 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 LGEs to offer clinical guidance and ensure that no diversion efforts are missed, there are several factors that can impact the ability to engage in an urgent consultation:
 - Timeframe once someone 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
- 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 60% of referrals coming from institutional/acute care settings. Further breakdown within these settings revealed that 30% of these referrals were from psychiatric hospital settings, 2% were for persons who were incarcerated, 15% were supported in ICF/DD settings, 2% were in an acute care setting, 2% of persons were in a psychiatric residential treatment facility, and 9% were in a nursing facility at the point of referral.

The Resource Center also continues to work to ensure that individuals with either a history of or current challenges related to non-consensual sexual behavior (NSB) continue to have access to needed supports. Through this reporting period, the Local Oversight Team (LOT) has followed 196 individuals. This quarter there were 3 reported subsequent incidents of NSB, 2 of the incidents did not include direct contact. Those individuals remained in waiver and currently reside in their homes. The third individual moved to PSSC due to other behaviors.