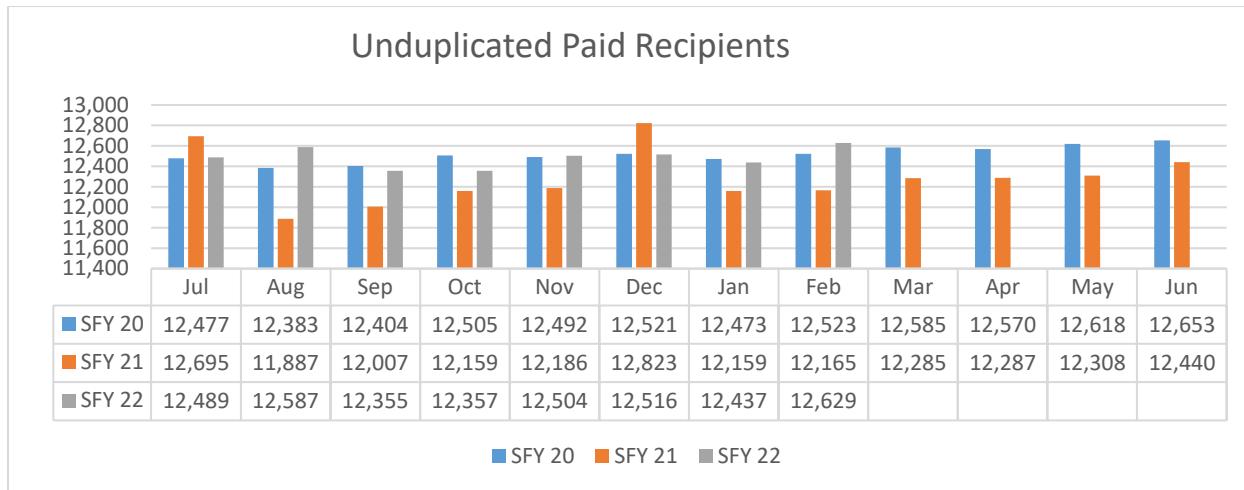


**DEVELOPMENTAL DISABILITIES COUNCIL QUARTERLY
 REPORT FOR THE 1st QUARTER OF 2022**

March 31, 2022

SERVICES DATA

Waiver Participant Data



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

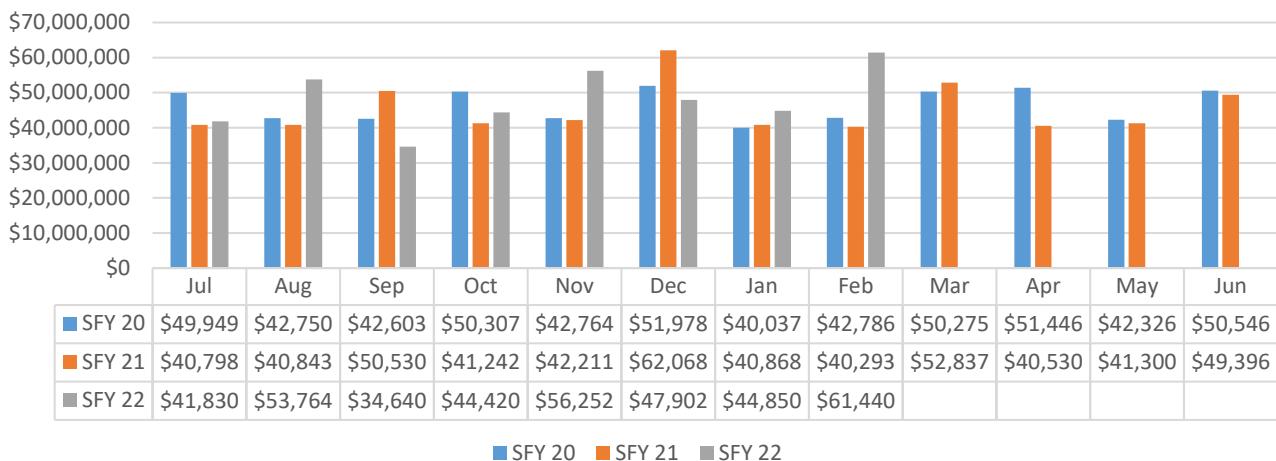
Annual number of waiver individuals receiving paid services

SFY20 – 13,268

SFY21 – 13,154

SFY22 – 13,294

Waiver Service Payments



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

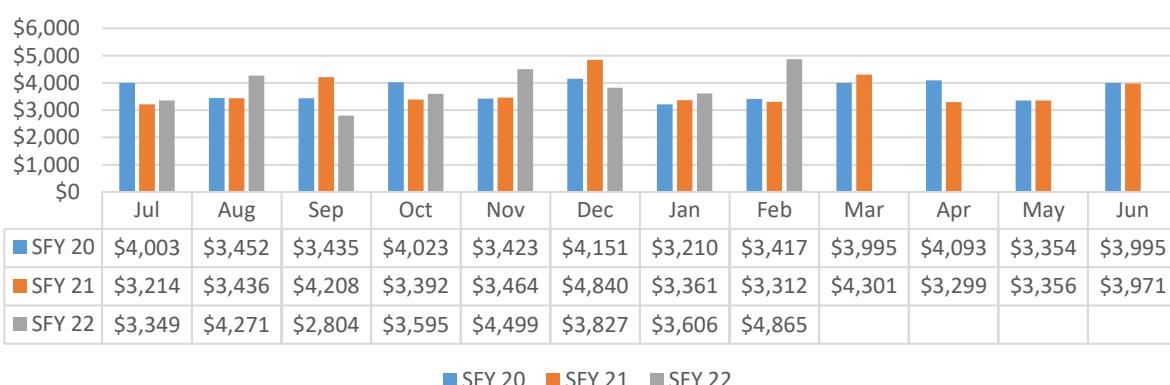
Annual Totals for Waiver Services Payments

SFY20 - \$557,773,523

SFY21 - \$542,922,366

SFY22 - \$385,102,282

Average Cost Per Waiver Recipient



Annual Average Cost of Waiver per Recipient

SFY20 - \$44,552

SFY21 - \$44,154

SFY22 - \$46,225

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 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, January 1, 2022, to March 22, 2021

Total screenings completed	356
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Number of screenings by SUN score	Total
Score of 4, unmet needs at the Emergent level	65
Score of 3, unmet needs at the Urgent level	99
Score of 2, unmet needs at the Critical level	60
Score of 1, unmet needs at the Planning level	19
Score of 0, no identified unmet needs	113
Total	356

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

Reason for Screening	Total
Initials	199
Re-Screens	157
Total	356

EarlySteps Data

- December 1, 2021 Child Count: 5,032

OCDD QUARTERLY ACTIVITIES

Waiver-Related Activities

Employment

- *Supports Waiver*
 - OCDD submitted a Supports Waiver amendment to Centers for Medicare and Medicaid Services (CMS) in response to the Public Health Emergency (PHE) on 12/29/2021. We are currently working to respond to CMS' request for additional information.
 - Once approved by CMS the following additions will 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 comprehensive Dental services to the waiver
 - The Supports Waiver rule changes are in process at this time.
 - Once complete, and approved by CMS, we will outline the details of these waiver changes in the policy and procedures manual for providers, and a training will occur to providers and SCs.
- *Home and Community Based Services (HCBS) Settings rule*
 - OCDD is in process of completing onsite visits with the provider owned/controlled residences. OCDD will update and release The Louisiana Statewide Transition Plan for public comment for 30 days once we finalize the data. We anticipate this will be for the month of April 2022. After the public comment period ends, Louisiana will submit the Statewide Transition Plan to CMS for final approval.
 - Final validation visits for the vocational providers are in process at this time.
 - OCDD will continue to work with providers in providing ongoing technical assistance and will be providing additional trainings around the settings rule.
 - The final date of compliance for the CMS Settings Rule 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 TA.
 - OCDD has been working with the SELN on the redesign of the new employment and day services. However, we are still working to obtain funding for the redesign and alignment across waivers.
 - The addition of 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 public health emergency, are currently in process of being added to the New Opportunities Waiver (NOW), Residential Options Waiver (ROW) and Supports Waiver (SW) amendments.

- The majority of vocational providers are re-open across the state. However, many individuals are still not participating in day services and are continuing to make the choice not to return to the day service program.
- OCDD continues to be an active participant in the Employment First Team, as well as the State as a Model Employer Team, both led out of the Governor's Office of Disability Affairs.

Waiver Updates

- *Summary of any activities within Children's Choice (CC), Residential Options Waiver (ROW), or New Opportunities Waiver (NOW).*
 - CMS is still in the process of reviewing waiver amendments submitted for the ROW to add dental services and post-PHE changes.
 - CMS approved the Children's Choice Waiver amendment submitted regarding post-PHE changes on 3/25/2022.
 - CMS approved the NOW renewal on 3/25/2022. The renewal included changes regarding post-PHE flexibilities. Amendments will be submitted to add dental services for adults in the waiver, consistent with the ROW and the Supports Waiver.
- *American Rescue Plan Act of 2021 (ARPA)*
 - The following activities have been approved by CMS, and OCDD is in the process of developing project management plans for implementation of these activities:
 - 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
 - We are still awaiting CMS approval for the following activities, which will require Appendix K and waiver amendments for implementation, if approved:
 - One time rate increase for Support Coordination, and
 - Direct support workforce and support coordination recruitment and retention.

MyPlace/Money Follows the Person

- 2021 marked 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 that will assist individuals with Intellectual or Developmental Disabilities (I/DD) transition from institutional settings into the community. CMS has made a nationwide policy change, which allows individuals who have been in an institution for 60 days to gain access to the MFP program.
- As of January 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 started its Provider Grant to assist agencies with Settings Rule Compliance with funding from CMS. This grant aims at improving the current infrastructure. MFP Programs

intend to enhance existing technology capabilities, train direct care workers, and assist with compliance to the HCBS Home Settings Rule.

Early Steps

- *Ongoing Response to COVID-19*
 - EarlySteps regularly updates its procedures as changes in COVID-19 occurred since March 2020. Each week, staff continue to review the percentage of positive cases in each parish, almost all parishes are less than 10% positivity so there are no limits to the number of home visits a provider can make. Providers are still required to conduct a telephone screening with families to make sure a home visit is appropriate. Masking and social distancing are still required since children under age 5 are not vaccinated. 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.
 - During the months since the pandemic, there has been a decrease in the number of referrals to EarlySteps and count of eligible children. To improve referral rates and the number of children served, EarlySteps is working with the Office of Public Health (OPH) on an LDH Business Plan Initiative. The focus for OPH is to increase the number of screenings of child development in a physician well-child visit with the expected outcome of increased referrals to EarlySteps. As of January 2022, referrals to EarlySteps have increased by 10% compared to the pre-COVID period.
- *EarlySteps Budget*
 - Federal Application for Funds--The Application for Individuals with Disabilities Education Improvement Act (IDEA), Part C Federal Funds is posted for public comment to the EarlySteps website in the “Important Information” box at [EarlySteps | La Dept. of Health](#). The draft application shows the same budgeted amount of \$7,016,347 as last year since the final Federal Budget was just approved on March 11 and has not been set for each state. The final amount will be issued when the US Department of Education budget is finalized. Comments on the application can be emailed to Brenda Sharp until May 11 at Brenda.sharp@la.gov. Please put “Application Comment” in the subject line.
 - The proposed state budget for EarlySteps includes an increase to cover additional cost of services with the increasing child count and increasing contract costs.
- The State Interagency Coordinating Council (SICC), the advisory council to EarlySteps, will meet on April 14th at 1:00, most likely by Zoom. More information on the meeting details can be obtained from Alishia Vallien, the SICC chair, at 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
414	8	9

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 identifying support needs, as well as developing activities/interventions/products that improve their abilities to achieve positive outcomes for persons who experience 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 second quarter of Fiscal Year (FY) 21-22 (**October 1, 2021 – December 31, 2021**), OCDD Resource Center Clinicians provided consultation and/or direct services that impacted **1251** 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 second quarter of FY 21-22 (**October 1, 2021 – December 31, 2021**), the nurses conducted **1,004** outreach and education contacts/activities.
- The OCDD Resource Center dental coordinator and Registered Nurse Manager, along with OCDD's Clinical Director, 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 second quarter of FY 21-22 (**October 1, 2021 – December 31, 2021**):

- 99 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 Managed Care Organizations (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 initiated collaborative training and education discussions 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.

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 **October 1, 2021 – December 31, 2021**.

- Between **October 1, 2021 – December 31, 2021** there were **29** urgent referrals, and **5 (17%)** of these individuals required admission to Pinecrest Supports and Services Center (PSSC).
- **9 out of 29 cases (31%)** received a consultation from the Resource Center, with the ability to divert **78%** 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 **78%** of referrals coming from institutional/acute care settings. Further breakdown within these settings revealed that **39%** of these referrals were from psychiatric hospital settings, **7%** were for persons who were incarcerated, **21%** were supported in



ICF/DD settings, **7%** were in an acute care setting, **4%** of persons were in a psychiatric residential treatment facility, and **0%** 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 Team (LOT) is following 229 individuals.** This quarter there was one reported subsequent incident of NSB that included direct contact. This incident did not result in legal involvement but Adult Protective Services (APS) was contacted. The individual remains in Waiver and currently resides in his home.