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How States Can Respond Intelligently To 4 Critical Challenges Coming In 2022

November 9th at 1:30 pm

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The American Rescue Plan Act (ARPA) provides a unique opportunity for states to enhance, expand, or strengthen Medicaid home and community-based services (HCBS).

NASDDDS provided technical assistance, member education, and topical analyses to assist members.

Members can find topical briefs in the Knowledge Center of our website at www.nasddds.org.
How does it work?

• States are presented in alphabetical order with a short musical introduction
• If you are the representative from your state, when your state slide is displayed, please unmute and present for no more than 5 minutes on your slide content
• You will be notified when there is one minute remaining
• Please adhere to time limits
Let's Get Started!

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Alaska

Supporting State I/DD Systems from State Capitols to the Nation's Capitol
Alaskans share a vision of a flexible system in which each person directs their own supports, based on their strengths and abilities, toward a meaningful life in their home, their job and their community. Our vision includes supported families, professional staff and services available throughout the state now and into the future.
Arizona
1. Allocate upfront funding to providers at the beginning of each year to address staffing issues and increasing expenses
   • Payment in early to mid 2022 will be one year’s worth of funding up front to vendors
     • Estimating payment for each vendor would be equivalent to 12% of their utilization for DSP-driven services
     • Estimating payment for each vendor would be equivalent to 15% of their utilization for Nursing services
     • Estimating payment for each vendor would be equivalent to 10% of their utilization for Therapies services
   • Attestation agreement on the use of funding-
     • Minimum 70% of funding will be required for the following uses:
       • Increase current wages for DSPs and supervisors
       • Incentive bonuses for DSP/Supervisor staff (hiring, retention)
     • Agree to maintain service delivery levels
       • Understanding that future payments will be based on maintaining or increasing number of members served, and additional incentives will be provided for serving members with higher levels of care.
     • Agree to submit quarterly reports to obtain needed data
       • E.g. turnover rates data per service line, wages per classification, etc.

2. Strengthen workforce of BH Professionals with I/DD knowledge to improve BH service delivery to the I/DD population
   • Funding incentives to bring BHTs into the network
   • Specific I/DD training provided to BHTs
   • Funding to incentivize development of residential settings that meet the needs of individuals w/ complex behaviors

3. Additional initiatives being considered:
   • Funding for provider training / IT infrastructure costs associated with new IT systems
   • I/DD Health Equity Research, Recommendations, and Implementation of strategies to improve equity outcomes
   • Electronic Health Record to be used by the Division and Vendors
   • Expand Affordable Housing Options
Delaware
Delaware DDDS One Slide Challenge

**Build the Workforce of the Future**
Focusing efforts on three areas: expanded recruitment opportunities; investing in professionalization; and increasing the social visibility of our workforce and the individuals they support

**Enhance Behavioral Health Supports across the Lifespan**
Developing enhanced behavioral health supports for individuals that can be accessed in the home and across the community; building teams to provide this care; expanding access for children with dual-diagnoses who need this care earlier in life
Deliver accessible urgent care through DDS Telehealth Project to address health disparities of people with I/DD which often resulting in increased ER visits and hospitalizations.

Recognize, invest and strengthen our direct care workforce of 5,800 through retention, recruitment and bonus payments.

Build stakeholder capacity through telehealth technical assistance, health literacy education and direct care worker training.

District of Columbia Department on Disability Services

STRENGTHENING HOME AND COMMUNITY BASED SERVICES THROUGH THE AMERICAN RESCUE PLAN ACT (ARPA) ENHANCEMENTS

Transform tech acquisition by piloting an online platform that automates matching people with I/DD to the best tech suited for their needs, capabilities and preferences.

Expand the availability of self-directed supports and services through the HCBS waiver.

Increase knowledge through high-quality studies of provider rates, COVID impact and customer satisfaction.

Increase access to health services and technology utilization through DDS’s Remote Support, Patient Monitoring and Enabling Technology initiatives.

Modernize critical IT infrastructure to streamline processes and handle increased data processing as part of telehealth expansion.

Fund innovative pilots and programs identified by community stakeholders focused on systemic impact.

Learn more about the plan at https://dhcf.dc.gov/page/arpa-hcbs-planning
Supporting State I/DD Systems from State Capitols to the Nation’s Capitol

Georgia
Georgia: Two Enhancements related to ARPA funding

While Georgia’s Initial Spending Proposal has several initiatives, two related to DBHDD and IDD services are:

**Temporary Rate Enhancements for specific services (aka the quick strike)**
- Community Residential Alternative
- Community Living Support Services
- Skilled Nursing Services- RN
- Community Access Individual

**Rate Study (aka the long game)**
- Support Coordination
- Community Living Supports
- Community Residential Alternative (refresh)
- Fiscal Intermediary
- Supported Employment
- Community Access

In addition, DBHDD is exploring options for several workforce initiatives (e.g. professionalizing and incentivizing the DSP)

Note: Georgias initial spending plan has received partial approval and is pending full approval from the CMS.
Hawaii
Hawaii’s Spending Plan Crown Jewels

WORKFORCE DEVELOPMENT

• Service quality, continuity and skills is #1 priority of families and providers
• DSP training & credentialing/certification framework and tiered reimbursements
• Short term:
  • Two grant programs
    • Reimburse providers for costs incurred
    • Financial incentives for employers and DSPs to complete training/certification
  • Stakeholder-informed process
    • Research
    • Engage
    • Design
    • Implement
• Long term:
  • Secure sustainable funding beyond ARPA

NEW WAIVER SERVICES

• Family Peer Mentoring
  • Peer to peer connections to enhance individual and family resilience
  • Navigation
  • Support planning
• Positive Approaches Service- individuals with challenges
  • Trauma and evidence-informed
  • Start in a residential setting
  • Advanced teaming and skills
  • Highly individualized; focus on community integration/family engagement
  • Leverage Positive Approaches training initiative
    • “Strengthen understanding of the impact of trauma and stress and the need for providing safety and trust, and build the necessary knowledge, skills, and practices that shift difficult interactions into healing relationships.”
Louisiana
Louisiana’s ARPA One Slide Challenge

- **Infrastructure Standup for Technology First Initiative**
  - Louisiana intends to utilize ARPA funds to cover upfront costs associated with the purchase of remote technology equipment for use with remote supports, virtual visits, and electronic sharing of information for waiver participants.
  - The initiative was recommended with the support of family and providers stakeholders.
  - The Technology First Initiative will increase opportunities for community integration and access to the broader community.

- **Bonus Payments for Direct Support Workers (DSW) Stabilization**
  - Louisiana plans to use ARPA funds to help providers retain and recruit DSW and Support Coordination staff.
  - The initiative would provide “one time” bonus payments to DSWs for every month worked from March 2020 - March 2024.
  - Bonus payments of $125 per month will be paid to the provider, of which at least $100 shall go directly to the employee.
Missouri
Missouri Division of Developmental Disabilities successfully partnered in the eLTSS Connect-a-Thon

- Key players included HIE-IT type actor, supported employment, case management and clinical care providers
- Successfully exchanged eLTSS person-center plan of care across clinicians, social service provider for care coordination during an HL7 FHIR Connect-a-thon
- Financial support from Office of the National Coordinator of Health IT and Technical Assistance from EMI Advisors
- Next Steps: Encourage adoption of eLTSS standards, develop a three-year HCBS VBP Roadmap, and utilize ARPA funds to implement interoperability
New Mexico
New Mexico-Jennifer Rodriguez, DDSD Deputy Director

- **Upgrading Critical Incident Management Reporting Systems**: Implement Syncronys: NM’s Health Information Exchange, which will identify all hospital admissions and emergency department visits, as well as provide DDSD access to the longitudinal clinical record for HCBS participants.

- **Member Level Technology Investment**: Provide each participant with a tablet and develop trainings to encourage electronic means of document submission and reduce paper processing.

- **Transition Services Increase**: Raise limits on Community-Based Transition Services from $3,500 to $4,000 every 5 years.
  - Supports participants returning to the community from a Nursing Facility.
  - Improves system rebalancing.
Oklahoma
IT'S ALL ABOUT TECHNOLOGY AND PARTNERSHIPS IN OKLAHOMA

Employment
Remote Supports
Data Management
Communication
Grants
Community Integration
Innovation
Enabling Technologies
Living Better

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Washington
Connecting our clients with peer mentors

- Paid with ARPA Funds
- Supports a resident while transitioning to a Home and Community-Based Setting
- Peer Mentor Program’s target implementation date is July 1, 2022
- Builds on the success of our Family Mentor Program
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