SUPPORTING STATE I/DD SYSTEMS FROM
STATE CAPITALS TO THE NATION’S CAPITAL

JULY 1, 2021–JUNE 30, 2022
ANNUAL IMPACT REPORT

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NASDDDS
National Association of State Directors
of Developmental Disabilities Services

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NASDDDS
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MISSION STATEMENT
The NASDDDS mission is to assist member state agencies in building person-centered and culturally and linguistically appropriate systems of services and supports for people with intellectual and developmental disabilities and their families.

ASSOCIATION GOAL
The association's goal is to promote and assist states in developing effective, efficient service delivery systems that furnish high-quality, equitable services and supports to people with lifelong intellectual and developmental disabilities in a respectful and responsive manner.

GUIDING PRINCIPLES
State service systems should be based on the principle that people with intellectual and developmental disabilities have the same rights as all people which include rights to:

1. be treated with respect and dignity;
2. be independent and make individual choices;
3. participate in family, community, and work life;
4. have opportunities to maximize their full potential;
5. receive outcome-based, person-centered services and supports; and,
6. receive effective, equitable, understandable, and respectful quality care community services, medical, and behavioral health supports services that are responsive to diverse cultural beliefs and practices, preferred languages, health literacy, and other communication needs.
STRATEGIC PLAN
The association’s Strategic Plan connects our mission and guiding principles to priorities for action, research, and policy development. The Strategic Plan is a dynamic document that adapts to changing expectations and new challenges.

Member Benefits Include:
+ Member benefits include:
+ Technical assistance and support;
+ Diversity, equity, and inclusion initiative development strategies;
+ Timely analyses of federal statutory and regulatory policies;
+ A forum for development of state and national policy initiatives;
+ Leadership development;
+ Innovative projects addressing the needs of I/DD systems;
+ Networking and peer support opportunities; and,
+ Dissemination of cutting edge information on state-of-the-art programs and service delivery practices.
Descriptors such as unprecedented challenges, multi-faceted problems, and insurmountable difficulties are inadequate to relate what we have collectively experienced over the last several years. Yet time and again, our state systems supporting individuals with intellectual and/or developmental disabilities (I/DD) have demonstrated unmatched tenacity and grit in navigating the COVID-19 pandemic. Together with our partners, we found new ways to ensure health, safety, and service continuity for those we serve, leveraging every trick in the book to address both existing and never previously imagined crises. To say I am immensely proud to have you all as colleagues is a huge under-statement.

Over the past year, NASDDDS members continued to come to this work with grace and determination. Across the nation, we are addressing catastrophic workforce capacity shortages along with disparities pervasive in our health and long-term services and supports systems for underserved and marginalized communities—all while designing and deploying strategies for the most significant investments in HCBS systems in history. Any one of these challenges is mind-boggling on its own, but the NASDDDS membership has shown time and again an ability to act with persistence and creativity, always with an eye toward supporting individuals with I/DD and their families to have the lives they choose in the community.

This determination bodes well for the future of the nation’s I/DD services and support systems. Leveraging the resources made available through the American Rescue Plan Act, we are making investments in diversity, equity, and inclusion initiatives; workforce development; infrastructure expansion; service delivery reforms; and quality improvement strategies that will influence the trajectory of our work for years to come.”
diversity, equity, and inclusion initiatives; workforce development; infrastructure expansion; service delivery reforms; and quality improvement strategies that will influence the trajectory of our work for years to come. These efforts will enable states to move beyond the status quo toward more inclusive, adaptive systems that support the evolving needs and expectations of individuals and families.

Our efforts are stronger and more sustainable through rich partnerships, especially those partnerships between people with I/DD and their families. By strengthening our relationships with people with disabilities, and foremost growing leaders within the I/DD community from diverse backgrounds, we will solidify our commitment to equitable, accessible, and innovative systems of supports for people with I/DD and their families throughout the nation.

Thank you for allowing me to share these words with you and for making our communities strong.

Me ke aloha pumehana,

Mary Brogan
President, NASDDDS Board of Directors
Mark Thomas departed from the Louisiana state agency on June 8, 2022 resigning from his position on the NASDDDS board after many years of distinguished service. Mary Brogan assumed the presidency moving from Vice President/President-Elect. Jordan Scheff took on the role of Vice President/President-Elect having served as Secretary/Treasurer. Based on seniority of service on the board, Lee Grossman moved to fill the position of Secretary/Treasurer.

Jordan Scheff and Lee Grossman were confirmed as officers of the board and Ronald Wakefield was confirmed to the Member-at-Large position during the business meeting held at the June 2022 member conference. The association will seek nominations for the Member-at-Large position vacated by Lee Grossman which will then be voted on at the November 2022 business meeting.
The NASDDDS Alumni Association is open to individuals who have served as the director of a state program for people with developmental disabilities.
As I reflect on the past year, I continue to be amazed at the strength and determination of our state partners. We remain in the midst of a historic time in home and community-based services – historic for both the opportunities that abound and the challenges that persist. All of you are making unprecedented investments into strengthening HCBS while simultaneously supporting individuals and families in the midst of the most acute staffing shortage of our time.

State investments made possible through the American Rescue Plan promise to shore up key foundational aspects of the HCBS system nationally with investments in information technology; quality improvement activities; increased rates for services; and, expanded access to HCBS. Despite the significant infusion of funds – including a massive national effort to increase the wages of direct support professionals (DSPs) - the workforce is still not sufficient to support the needs of all of the individuals served. This results in both access and quality challenges for state systems and an unsustainable level of effort provided by the dedicated direct support professionals who come to work each day. This adversity is driving innovation. States are more intent than ever to devise meaningful career pathways for DSPs. States are exploring ways to address key social determinants of health – not just for the individuals served and their families, but also for DSPs and their families. States are exploring the use of technology to leverage additional strategies to support individuals as they live, work, and play in their communities. States are devising

“NASDDDS stands ready to support states in all of these endeavors. We are developing and deploying resources to help states in their pursuit of solutions to the most stymying challenges of our time and commit to you that we will share all successes so that no wheel is recreated. Our members are our greatest strength and the innovations you are undertaking at this juncture in time will bring along the whole of our service system for years to come.”
financing strategies that pay for outcomes rather than service volume, enabling the creative attainment of goals and objectives both for the system as well as individuals and families. I am optimistic that these innovations will create lasting and sustainable change for our systems of support.

Importantly, our members and our Federal partners are also making investments of time and financial resources to improve equity within I/DD service delivery systems. These investments aim to reduce disparities that continue in our systems on the basis of race, ethnicity, disability, sexual orientation, gender identity, socioeconomic status, geography, preferred language and communication strategy, and other factors.

States are recognizing these issues of disparity are often compounded for individuals with disabilities, including those with multiple and complex support needs. States, continuing to wrestle with how best to support individuals with multi-system involvement, including children in foster care, children and adults with mental health and substance use support needs, individuals with forensic involvement and others, are forging unprecedented partnerships in acknowledgment of the fact that individuals with I/DD experience the same level of diversity and complexity in life as individuals without disabilities.

Sincerely,

Mary P. Sowers
Executive Director, NASDDDS
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In June of 2020, in a **Statement on Racial Inequities**, NASDDDS made a public Pledge to Action. That action started with a collaborative strategic plan completed by both NASDDDS Board members and NASDDDS staff. In addition, in November of 2021, Regina Rodriguez Sisneros joined NASDDDS as the Director of Equity Initiatives and Systems Innovations. NASDDDS has continued our commitment to Diversity, Equity and Inclusion (DEI) through successful membership education opportunities and bi-monthly DEI Roundtables. We are working daily to embed DEI into our collective work and to ensure that our team identifies opportunities of inclusion for diverse voices to produce equitable outcomes. From the Strategic Plan, we have modified our vision and mission to incorporate a strong equity commitment and we have established goals as part of each staff person’s responsibilities to incorporate DEI into each facet of their work which includes identifying gaps to services, implementing cultural and linguistic accommodations, and ensuring that our partners have the resources necessary to embed DEI within their organizations and work. These efforts are ongoing, our commitment is strong, and our team dedication to DEI continues daily.
The National Association of State Directors of Developmental Disabilities Services (NASDDDS) calls for the repeal of Section 14 (c) of the Fair Labor Standards Act. In acknowledgment of and respect for individuals with disabilities, the NASDDDS Board of Directors believes the time has come to move away from the practice of allowing people with intellectual and developmental disabilities and other significant disabilities to be paid less than minimum wage. This practice is currently enabled by Section 14(c) of the Fair Labor Standards Act.

At this juncture in our history, as we undertake efforts to ensure real and meaningful community integration for all individuals with disabilities, we must renounce practices that have the impact of systematic marginalization of individuals with disabilities. Our goal is for individuals with disabilities to be paid a living wage commensurate to pay for similar work by individuals without disabilities, at or above minimum wage. Fair compensation enables workers to achieve economic stability, safeguards their health, and assists in planning their future. All individuals, regardless of disability, have a right to be paid the federal or state minimum wage, whichever is greater, or the prevailing wage for the work performed.

We recognize it will take dedication, focus, time, and resources to adapt our service delivery systems to move away from those structures that have relied upon subminimum wages. Therefore, NASDDDS calls for federal action and resources to develop the infrastructure and capacity at all system levels to increase competitive integrated employment and the supplemental services people with disabilities need to maintain employment.

Federal action and resources must be available to ensure appropriate resources for government-funded, competitive, integrated employment services and a broad array of Medicaid Home and Community Based Services (HCBS) supports for people to live full lives in their communities when they are working and when they are not.

Advancing competitive integrated employment for people with disabilities requires coordinated and adequate resources across Medicaid HCBS programs, vocational rehabilitation, education, and workforce development systems.

NASDDDS stands committed to assisting states through this journey. Several states have already successfully ended the use of subminimum wages and have expanded the service capacity of their provider networks to deliver services and supports that lead to the inclusion of individuals with disabilities in the economic and social fabric of their communities. We can learn from these early adopters and NASDDDS will facilitate this peer-to-peer learning.
NASDDDS is the voice of the states in the nation’s capital, ensuring that members’ perspectives are heard. NASDDDS works closely with executive branch agencies; educates federal lawmakers; and, provides member states with timely analysis of federal statutory and regulatory policies.

This year, NASDDDS continued to lead a national policy conversation about the future of Home and Community- Based Services, spurred by the COVID 19 pandemic and the burgeoning workforce crisis. NASDDDS’ expertise also focused on informing legislation aimed at providing states the resources they need to effectively redesign their employment service systems to remove any reliance on subminimum wages.

FEDERAL POLICY AND THE HCBS WORKFORCE

NASDDDS has consistently sounded the alarm to the Administration and Congress about the state of the Direct Support Professional (DSP) workforce. We regularly share data from the NCI State of the Workforce Survey with legislators. We also helped to develop federal legislation that would provide additional tools and resources to states to address the crisis, and while that work is ongoing, we have pushed federal agencies to find ways to address the issue. In addition, the Association worked with our federal partners to make sure that all policy decisions, from enforcement of the HCBS rule to approaches for restructuring HCBS quality expectations, took the workforce context into consideration.

ARPA SECTION 9817

The Association worked closely with our members, CMS, and other stakeholders to inform federal implementation of the enhanced FMAP percentage for HCBS contained in the American Rescue Plan Act. After providing input into the crafting of Section 9817 and playing a lead role in advocating for its inclusion in ARPA, NASDDDS worked with CMS in its ongoing policy development, delivered technical assistance to state agencies, and monitored the landscape of ARPA spending plans to develop products that ensure members have up-to-date and complete information about national trends in the use of these funds.
HCBS RULE
As the final effective date of the HCBS Rule nears, NASDDDS has engaged with the Administration on policy developments, tracked CMS enforcement activities, and assisted members with up to the minute information.

THE FEDERAL RESPONSE TO THE COVID-19 PANDEMIC
As the pandemic continued to disrupt state I/DD service systems, NASDDDS worked closely with Congress and with Biden Administration to provide expert guidance to support the federal response for people with intellectual and developmental disabilities. We engaged with executive branch agencies on several fronts and led efforts to secure new funding for HCBS programs.

COALITION LEADERSHIP
Dan Berland, NASDDDS Director of Federal Policy, is a member of the board of the Consortium for Citizens with Disabilities (CCD), the nation’s largest coalition advocating for the rights and services for people with all disabilities. On that consortium, Dan serves as the Co-Chair of CCD’s Long-Term Supports and Services Task Force. Dan also leads NASDDDS’ participation in the Collaboration for the Promotion of Self-Determination (CPSD). Leadership roles in these organizations help ensure that the federal policy priorities of these effective disability stakeholder coalitions are fully informed by the knowledge and perspective of the state I/DD agencies.
One of the association’s primary functions is to provide technical assistance to state agencies. Technical assistance (TA), as a standard membership service, includes responding to telephone and email inquiries from members. NASDDDS technical assistance may also require more in-depth engagements with states that could include reviewing and commenting on draft proposals or plans; supporting the state in devising approaches to serve people with significant support needs; identifying effective financing strategies; and, linking members to other states and organizations that can be of assistance. NASDDDS staff respond to state agency representatives daily to offer specialized technical assistance.

**FEDERAL TECHNICAL ASSISTANCE PROJECTS FOR FY 2020-2021**

**Partnership with the Human Services Research Institute (HSRI)**

HSRI has a contract with the Administration for Community Living (ACL) to organize technical assistance to states focused on person-centered planning. NASDDDS is a subcontractor to HSRI to assist with the promotion and dissemination of contract work to state I/DD operating agencies. NASDDDS staff provided direct technical assistance to two NCAPPS grantees. Colorado received support to learn about states’ approaches to Human Rights Committees and Ombudsman programs for I/DD and cross-population, as well as on evaluating existing trainings to embed diversity, equity, and inclusion. Delaware was also supported to gather background information and develop a strategic plan focused on the delivery of culturally and linguistically competent, person-centered, and equitable services.

**ACMS Technical Assistance Project HCBS/PASRR (New Editions)**

NASDDDS staff continue to provide CMS-funded Home and Community Based Services (HCBS) and Preadmission Screening and Resident Review (PASRR) Technical Assistance (TA) as a subcontractor under the New Editions Contract.

“**The Kansas Department for Aging and Disability Services has worked with New Editions developing service definitions and performance measures over the past year. New Editions has provided valuable guidance and resources as we work to renew and amend our waivers.”**

Michele Heydon, HCBS Director
KDADS
States are thoughtful about how they plan to continue working through the effects of the COVID-19 pandemic, but at the same time, have been working tirelessly to make positive changes in system structures, services, and supports. This is evidenced by TA requests to New Editions on 1915(c) waivers, 1915(i) state plan, and 1115 demonstrations.

NASDDDS staff provided more than 1000 hours of HCBS technical assistance under New Editions to Alaska, California, Indiana, Kansas, (two different engagements with Kansas), Rhode Island (two different engagements with RI), South Carolina, Virginia and Washington under this contract. Topics included waiver service definition development and unbundling; self-direction models and supporting policies and procedures; developing waiver performance measures; building quality improvement strategies; conflict-free case management; provider licensing processes; and, implementing an Organized Health Care Delivery System.

In addition, Wesley Anderson and Jeanine Zlockie also prepared a webinar for CMS to provide during the HCBS conference titled “Employment through the Authorities.”

States consistently look for opportunities to improve PASRR programs so that there is fidelity to the core tenet of PASRR to be a tool for nursing facility diversion and transition. Teja Stokes is assigned as the PASRR TA lead for the CMS central region providing support to Colorado, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Montana, Nebraska, North Dakota, Ohio, South Dakota, Utah, Wisconsin, and Wyoming.

NASDDDS staff provided 154 hours of PASRR TA during the contract year, which included direct TA to states and peer TA through regional call facilitation, as well as leadership of intensive TA with Indiana and Kansas and collaboration on intensive TA to California and New Mexico.

NASDDDS leads the management and development of all PASRR training and education sessions, which resulted in 34 hours of TA provided to all 51 PASRR programs nationwide. The webinar series for the year included:

• System Changes and Public Financing to Support Specialized Services
• PASRR Assessors and Evaluators: The Importance of a Person-Centered Perspective
• A Closer Look at PASRR Implementation Challenges
MAJOR TECHNICAL ASSISTANCE PROJECTS FOR FY 2021-2022

Illinois
NASDDDS continued its partnership with the Illinois Council on Developmental Disabilities (ICDD) and the state Division of Developmental Disabilities, by providing technical assistance on many facets of the systemic redesign underway, including Medicaid options and opportunities, eligibility, person-centered planning strategies, infrastructure considerations, and other issues related to a robust HCBS service system. This contract also includes participation in the State Employment Leadership Network work (SELN) assisting Illinois in efforts to improve integrated employment outcomes.

Minnesota
NASDDDS, as a subcontractor to HSRI, is supporting Minnesota’s initiative to assume aggregate budget management at the state level. Consultation by the NASDDDS team informs the budget methodology development and analytics and recommendations for policy and operations changes to implement individual budgets and ensure strong approaches to quality assurance and improvement.

New York
NASDDDS, as a subcontractor to Ariam Actuarial Consulting and Deloitte is supporting an initiative by the New York Department of Health and Office of People with Developmental Disabilities to revise certain provider payment rate methodologies. NASDDDS’ consults on a national policy perspective and strategies to ensure that financial structures support the state’s overall aims to increase independence and autonomy for individuals with I/DD and their families. This work includes an exploration of alternative payment models to incentivize outcomes.

Pennsylvania
NASDDDS collaborates with Mercer to provide policy and strategy technical assistance as the Pennsylvania Office of Developmental Programs explores various approaches to improve group residential and supports coordination services.
AFFINITY GROUPS

Joining an affinity group is an effective way for members to get involved with NASDDDS. Affinity groups center around topic areas of interest to specific segments of our membership and meet to share best practices and explore innovations in the field. These workgroups can be short-term or ongoing depending upon member needs. The groups are driven by the interests of state I/DD systems in real-time.

Current affinity groups include:

- **DIVERSITY, EQUITY, AND INCLUSION ROUNDTABLE SERIES**
- **RESIDENTIAL SUPPORT SERVICES FOR INDIVIDUALS WITH COMPLEX SUPPORT NEEDS**
- **QUALITY MANAGERS**
- **WAIVER MANAGERS**
- **MEDICAL AND CLINICAL DIRECTORS**

CONFERENCES AND MEETINGS

**2021-2022 National Core Indicators® Annual Meeting and 25th Anniversary**
August 3-4, 2022

**2020 State Employment Leadership Network Annual Meeting**
October 5-7, 2021

**2021 NASDDDS Directors Forum and Annual Conference**
November 8 Directors and State Staff Forums
November 9 and 10 Annual Conference
Virtual

**2022 Directors Forum and Mid-Year Conference**
Partnerships Reimagined
June 15 Directors and State Staff Forums
June 16 and 17 Mid-Year Conference
Alexandria, Virginia
LISTSERV

NASDDDS hosts a ListServ for state intellectual and developmental disabilities services directors and their staff. The ListServ reaches over 800 key decision-makers in the field facilitating networking, peer support, and national coordination.

NASDDDS PUBLICATIONS

- **Federal News Briefs**
  Weekly publication
  Writer and Editor Dan Berland

- **State News Briefs**
  Biweekly publication
  Writer and Editor Carrie McGraw

- **Community Services Reporter**
  News about state developments
  Writer and Editor Carrie McGraw

- **Federal Perspectives**
  News about federal policy
  Writer and Editor Dan Berland

TOPICAL BRIEFS AND PAPER HIGHLIGHTS

The American Rescue Plan Act of 2021 (ARPA) Support

ARPA was signed into law on March 11, 2021, and provides billions in additional funding for state and local governments. Section 9817 of the ARPA provides states with a temporary 10-percentage point increase to the federal medical assistance percentage (FMAP) for certain Medicaid HCBS from April 1, 2021 through March 31, 2022 to improve HCBS under the Medicaid program. The Centers for Medicare & Medicaid Services (CMS) issued guidance on how states can receive enhanced funding, provided through the American Rescue Plan Act of 2021, to increase access to home and community based services (HCBS) for Medicaid beneficiaries. CMS required states to submit HCBS spending plans describing the activities that the state intends to implement through the increased FMAP funding to enhance, expand, or strengthen HCBS under the Medicaid program.

NASDDDS developed two briefs to assist members in responding to the request for ARPA plans. NASDDDS also organized a compendium of the contents of state ARPA spending plans related to state I/DD service systems based on an analysis of 49 states and the District of Columbia. The compendium is divided into nine tabs reflecting the most common themes across all state ARPA plans.

ARPA Briefs:

- States Focus On Quality: ARPA Spending Plan Topical Analysis
- State Workforce Initiatives: ARPA Spending Plan Topical Analysis
Supporting State Electronic Case Management & Critical Incident Management Systems Design & Development
Many NASDDDS members are in the process of building new or making improvements to existing case management and incident management systems. To assist our members in ensuring the best possible products, NASDDDS offers the attached briefs. In partnership with Alissa Halperin from Halperin Butera Consulting and Anne Jacobs from Riverstone Health Advisors, NASDDDS consulted with states and reviewed RFPs and contracts to identify strong practices for building systems or customizing off-the-shelf solutions. While these briefs are specifically about case management and incident management systems, many of the practices are translatable for any procurement and/or contract management.

Brief One: Recommendations for State eCMS and eCIMS Design Processes, Features, and Functionality

Brief Two: Recommendations for State eCMS and eCIMS RFP and Contract Drafting

Community Supports in Crisis: No Staff, No Services
June 2022 Authors: Institute on Community Integration (ICI), University of Minnesota Julie Bershadsky, PhD Amy Hewitt, PhD Human Services Research Institute (HSRI) Valerie Bradley, MA Alexandra Bonardi, MS OT, MHA National Association of State Directors of Developmental Disabilities Services (NASDDDS) Laura Vegas, MS Mary Sowers, BA

COVID-19 And People With I/DD Final Report
The findings of this report highlight the wide variation across states in efforts to detect and prevent COVID-19 infection, and to collect COVID-19 vaccination data. During the COVID-19 PHE, states established data collection strategies with haste and urgency. The data collection strategies were influenced by existing state-level relationships and data infrastructure, and resulted in a variety of strategies that may inform future approaches to data collection and information sharing. The findings from this report also highlight the state-level collaboration necessary for a successful pandemic response for individuals with ID/DD.NASDDDS prepared this brief for the U.S. Department of Health and Human Services Office of the Assistant Secretary for Planning and Evaluation Office of Behavioral Health, Disability, and Aging Policy by NASDDDS and RTI International. COVID-19 And People With I/DD Final Report

Using NCI-IDD and NCI-AD Data to Assess Progress with Person-Centered Requirements in the CMS Settings Rule A Hypothetical Case Study
Prepared November 2021 by: Valerie J. Bradley, Dorothy Hiersteiner, Stephanie Giordano, Alexandra Bonardi, and Bevin Croft- Human Services Research Institute, Laura Vegas-National Association of State Directors of Developmental Disabilities Services, April Young-ADVancing States
WEBINARS AND TELECONFERENCES
NASDDDS holds webinars and teleconferences for member state agencies on topic areas of interest at least monthly including the following topic areas in 2021-2022:

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<tr>
<th>2021-2022 Dates</th>
<th>Topic</th>
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<tr>
<td>August 2021</td>
<td>Social Media For Introverts</td>
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<td>September 2021</td>
<td>DSP Workforce Strategies</td>
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<tr>
<td>October 2021</td>
<td>Dual Diagnosis and the I/DD Population</td>
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<td>December 2021</td>
<td>NASDDDS 2021 Recap</td>
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<td>January 2022</td>
<td>Medicaid 101</td>
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<td>February 2022</td>
<td>DEI Initiatives</td>
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<td>February 2022</td>
<td>DSP Workforce Strategies</td>
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<td>March 2021 and Sept-</td>
<td>Director Coffee Connections</td>
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<td>ember 2021/2022</td>
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<td>March 2022</td>
<td>Federal Quick Hits Live</td>
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<td>April 2022</td>
<td>Support Paradigms in the Time of Social Distancing</td>
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<td>Using Data to Enhance Quality</td>
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<tr>
<td>May 2022</td>
<td>Dual Diagnosis</td>
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CULTURE OF QUALITY

The Culture of Quality initiative is an opportunity for NASDDDS members to explore and establish more integrated and holistic models of quality improvement, built on the foundation of current practice and in consideration of person-centered systems of support. It is the infusion of quality within and among a state’s existing initiatives and priorities, establishing a specific framework for a strong culture of quality that moves away from exclusively defining quality as compliance with minimum standards. The Culture of Quality Initiative will continue with the overall aim to infuse a culture of quality in each aspect of service design and operation by providing opportunities for states to participate regardless of where they are in their quality journey.

NASDDDS convened and facilitated a State Quality Leadership Affinity Group for I/DD Quality Directors and managers to share and learn about promising practices, network, and form relationships with people who have similar jobs across the nation. The Quality Affinity group will continue to meet quarterly.

NATIONAL CORE INDICATORS (NCI)

NCI celebrated 25 years of ongoing leadership in the area of national quality measurement for I/DD programs by getting a refreshed branding scheme and updated website. The NASDDDS-HSRI partnership collaborates with participating state agencies to gather in-depth information on key system performance indicators and outcomes essential for effective policy planning, program operations, and system development. NCI data inform state agencies on the experience of people most directly impacted by the extensive system of services and supports available. NCI continues to provide member states with annual comparative reports inclusive of the results from all states participating in data collection through in-person surveys, family surveys, and the instrument for collecting workforce and staff stability data.

Both Montana and North Dakota became NCI member states in 2021-2022 bringing the total of states that have participated in NCI up to 48 plus DC. In addition to bringing in additional states and publishing the traditional annual NCI data reports, NCI published special reports using supplemental data collected by some states with the aim of understanding the experience...
of people with I/DD, their families, and DSPs during the COVID-19 pandemic. The NCI Staff Stability Survey using data from 2020 was released and garnered wide interest and used by NASDDDS and partners to elevate the DSP crisis to the federal level including the White House, Congress, other national advocacy partners.

OTHER PROJECTS

In addition to work with UMN among others, NASDDDS contributes to myriad national efforts and projects of national significance. We are a proud partner supporting several efforts, including:

- National Center on Advancing Person-Centered Practices and Systems (NCAPPS)
- ARPA TA Collaborative in partnership with ADvancing States, Ventech, and others
- The Ohio State University’s Nisonger Center RRTC on Health Function for Individuals with I/DD
- Living Well – Model Approaches for Enhancing Quality, Effectiveness, and Monitoring (selected states)
- RISP (Residential Information Systems Project)

STATE EMPLOYMENT LEADERSHIP NETWORK

Emphasizing Competitive Integrated Employment as a Priority Outcome

The State Employment Leadership Network (SELN) is a learning community comprised of state intellectual and developmental disabilities agencies committed to revising employment policy, strategies, and expectations to generate opportunities and enhance services that increase the number of individuals with I/DD engaged in their communities and working in competitive integrated jobs. Leading through a culture of quality, research, and knowledge translation, NASDDDS and The Institute for Community Inclusion UMass Boston (ICI UMass Boston) jointly support this learning community. During the 2021-22 membership year, the project staff supported 25 state intellectual and developmental disabilities agencies and their partners in system improvement.

Guided by the Higher Performing States Model and a healthy sense of urgency, SELN member states are sharing knowledge and actively collaborating across states and state agencies. New methods of service delivery, through the use of technology, brought innovative opportunities with employers and employment direct support professionals to support individuals with I/DD to maintain and even access new remote competitive integrated jobs.
During the 2021-2022 membership year, twenty-three (23) SELN member states participated in the launch of an SELN e-learning curriculum for case managers to enhance their knowledge and skills to assist individuals in making informed employment decisions. To date eight hundred forty (840) case managers have taken the course, successfully demonstrating knowledge gained and receiving certificates of completion.

For more information on the SELN read the SELN accomplishments reports: [www.selnhub.org/accomplishments](http://www.selnhub.org/accomplishments).

**SUPPORTING FAMILIES COMMUNITY OF PRACTICE ACROSS THE LIFESPAN**

The Community of Practice for Supporting Families (CoP) is based on a strong partnership between NASDDDS and the University of Missouri, Kansas City. In concert with 22 member states, the CoP remained centered on the CoP’s core purpose to embed the values-based Charting the LifeCourse Framework to influence current and future state policy, practice, and systems change to support people with disabilities in the context of their families.

**Highlights of the Year**

Increased understanding and dedication to diversity, equality, and inclusion, with a focus on the need to go beyond multiple languages to include plain language information and strategies to honor all family structures in CoP endeavors as part of DEI.

Moving beyond training and using LifeCourse tools to systems change endeavors. The grassroots efforts continue, but systems change in state agencies has proven key to sustainability. More CoP states have included peer-to-peer support as a waiver service, embedded the framework into developmental disabilities council five-year plans, redesigned other waiver components, policies, support coordination competencies, changed their state’s individual support planning process, and significantly strengthened family involvement in policy and other decision-making discussions. One state has embarked on what quality measures might be for the CoP, triangulating data with waiver performance measures and family satisfaction surveys.

Outreach to partner agencies such as behavioral health, Medicaid, aging systems, and child welfare.

**Supporting Families Summit**

The accomplishments of the CoP were foundational to the Supporting Families Summit, held on May 3-4, 2022, in Washington, DC. Held 10 years since the development of “Wingspread”, the key event leading to the CoP, 65 key national and state stakeholders, representing 54 organizations convened to celebrate the supporting families movement accomplishment and identify needed changes. The Summit was hosted by the National CoP partners-NASDDDS and UMKC, in partnership with the Administration of Community Living.
RECOGNIZING OUTSTANDING ACHIEVEMENT

CATHY ANDERSON AWARD FOR PUBLIC-PRIVATE PARTNERSHIP

The Cathy Anderson Award for Public-Private Partnership is a collaborative effort between NASDDDS and PCG. It was named in memoriam of Cathy Anderson who is recognized for her impactful public service career in support of people with intellectual and developmental disabilities. Anderson held leadership roles in state agencies supporting people with I/DD and was responsible for the organization and management of statewide service systems.

During her career, Anderson was the program director of I/DD services in Nebraska and the District of Columbia. In Iowa, she served as the chief deputy director for the Department of Human Services where she supervised the divisions of Medicaid, Mental Health, Child Welfare, Economic Assistance, Developmental Disabilities, and Policy. She was also a past president of the NASDDDS Board of Directors.

In addition to her work in public service, Anderson served in the private sector, providing consultation and technical assistance to states in her role at PCG. In this capacity, Anderson demonstrated the power of public-private partnerships to achieve significant, lasting systems change to improve the lives of people with disabilities.

The Cathy Anderson Award for Public-Private Partnership recognizes collaborations that embody the promise and possibility that can emerge from strong partnerships. It also highlights the power of bringing public and private expertise to the table to support people with I/DD, so they can have fulfilling lives in their communities.

“I can think of nothing more fitting to honor the legacy of Cathy Anderson than to have an opportunity to recognize the true power of collaborative efforts across the public and private sphere to support those with I/DD in living their best lives; finding employment of their choosing; and enjoying all of the responsibilities and benefits of community life.”

Mary Sowers, NASDDDS Executive Director
New Mexico Advisory Council on Quality (ACQ)

Selected from an extensive list of applicants, inaugural award recipient, the New Mexico Advisory Council on Quality (ACQ), is New Mexico’s public-private community advisory board that focuses on fulfilling both federal quality improvement strategy obligations and statutory requirements. ACQ provides a venue for community members and advocates to communicate meaningful program needs to state officials, so the State of New Mexico can better prioritize the requirements of the community. Through the influence of ACQ, New Mexico self-advocates contribute to positive changes to the state’s budget; state policies and procedures; COVID-19 regulations; and community education.

Specifically, over the past two years, ACQ moved forward with substantial cultural developments that involved increasing ACQ board and leadership membership to increase the direct representation of people with I/DD. Updates were also made to the council’s meeting structure and process that resulted in improved dialogue between ACQ and state staff.

The work of ACQ and other organizations committed to serving people with I/DD is what makes the Cathy Anderson Award for Public-Private Partnership possible.
THE GARY SMITH SCHOLARSHIP FOR PUBLIC MANAGERS

The Gary Smith Scholarship for Public Managers was established by the NASDDDS Board of Directors in honor of Gary Smith, an extraordinary leader in the intellectual and developmental disabilities (I/DD) field who was intensely committed to making state government disabilities agencies effective at delivering good service and achieving positive outcomes for people. Gary served in senior management positions in the states of Illinois and Colorado. As the Director of Special Projects for NASDDDS from 1987 to 2001 and an expert in state operations and the use of Medicaid to fund services, Gary was well known for confronting state agencies with respectful criticism and the challenge to perform better and helping them do so.

Recognizing the importance of public professionals to receive leadership training and for other participants to be involved with state leaders during leadership training, the NASDDDS Board of Directors approved an annual contribution to the Gary Smith Scholarship Fund to support the participation of participants from state government at the National Leadership Consortium on Developmental Disabilities, held twice yearly. The scholarship fund in Gary Smith’s name is a legacy to support others who work for state, local, or the federal government in their pursuit to improve the lives of people with disabilities and their families.

Jason Cornwell (2022)

Jason Cornwell is a Human Services Professional that has served persons with disabilities and their families in a variety of capacities throughout his professional career. He strives to advance systems of care to be more responsive, flexible, and person-centered. All people have the right to self-determination as they define it.

With values firmly rooted in his experiences as a Direct Support Professional in NM, IN, IL and NY- he has played integral parts in nearly every facet of service provision at both large and small community based providers as well as government. Experience in Case Management, Health Services, Respite and After-school Services, Family Support Services, Clinical Services, Service Coordination, Staff Development and Training, Leisure Services, Residential Services, Quality Assurance and Quality Improvement, Customized Community Supports and Customized Integrated Employment Services, Marketing and Fundraising, Board Development, Facilities Maintenance, and Strategic Development.

Currently, as Director of the Developmental Disabilities Supports Division for the State of New Mexico, he is honored to lead a division comprised of 180 dedicated professionals statewide who serve over 8000 New Mexicans living with IDD and their families by contracting with, regulating, and monitoring the service provision of over 200 community based providers.
Jennifer Garabedian (2022)
Jennifer Garabedian has over 20 years of experience in human services. Her career began in Vermont’s Developmental Disabilities Services system and then transitioned to a role working supporting children with special health needs, where she oversaw the Children's Personal Care Services program with the Vermont Department of Health for approximately 15 years. Then, she transitioned to a position with the state’s Fiscal Employer/Agent, managing the Medicaid Fiscal Management Services (FMS) division.

This afforded her the opportunity expand her understanding of self- and surrogate-management and deepen her commitment to ensuring Vermonters’ access to the supports to have the most robust lives possible in their homes and communities.

Erin McCollum-Hreczuch (2022)
Erin McCollum-Hreczuch is a Chief Health Program Evaluator at the Department of Behavioral Healthcare, Developmental Services and Hospitals (BHDDH) for the State of Rhode Island. Erin is the Chief of the Office of Quality Improvement at BHDDH. Erin is responsible for designing, planning, and implementing performance improvement systems that integrate quality practices for the states agencies licensed by BHDDH. She ensures that regulations are followed and that safety protocols are in place; developed the quality improvement team and the process within the Office of Quality Improvement; and, ensures data collected is effectively used to support continuous improvement throughout divisions.

Sandy Hunt (2022)
Sandy Hunt joined the New Hampshire Department of Health and Human Services (DHHS) in June, 2015 as the Administrator of Medicaid Care Management. In June, 2016 Sandy served as Interim Director at the Bureau of Developmental Services (BDS). Sandy was appointed Deputy Director of BDS in October, 2016. In October, 2017 The Division of Long Term Supports and Services was created and Sandy was appointed the Bureau Chief at BDS within the new Division.

Before joining DHHS, Sandy spent 15 years as a Vice President with LifeShare Management Group, a community based organization for adults and children with Developmental Disabilities, Acquired Brain Disorder and Mental Illness which was operational in 9 states across the East Coast.

In Sandy’s current role as Bureau Chief at the Bureau of Developmental Services, she is responsible for the budget management, contract oversight, policy development, regulatory development and other statewide activities related to the delivery of Developmental Services within New Hampshire. She is responsible for the oversight and provision of services to people in New Hampshire who qualify for Waiver Services through 3 of NH’s 1915 (c) Home and Community Based Services: The Acquired Brain Disorder, Developmental Disability or In Home Supports Waivers.
MEMBERS WHO SERVE

NASDDDS is appreciative of the input and participation of all our members. We extend a special thank you to our Board of Directors and members of the below workgroups who provide specialized expertise in areas of specific interest to the association and its members.

Alumni Mentor Group
Roger Deshaies
David Evans
Mary Lee Fay
Gerry Morrissey
Ken Ritchey
Alexandra Bartolic

Medical and Clinical Director Workgroup
Dr. Gregory Cherpes, MD, Pennsylvania-Chair
Dr. Sienna Go, MD, California-Chair
Dr. Debra Pinals, MD, Michigan-Chair

National Policy Work Group
Lee Grossman, (Chair) Wyoming
Barbara Palmer, Florida
Julie Foster Hagan, Louisiana
Theodore Kastner, New York
Jeff Davis, Ohio
Beth Scrutchins, Oklahoma
Curtis Cunningham, Wisconsin

Research Committee

Association Members
Mary Brogan (Chair), Hawaii
Kristin Ahrens, Pennsylvania
Zane Ramadan, Arizona
Andrew Reese, District of Columbia
Bernard Simons, Maryland
Ron Wakefield, Georgia
Jason Cornwall, New Mexico

Non-Association Members
Valerie Bradley, HSRI
John Butterworth, Ph.D., U Mass Boston
Amy Hewitt, Ph.D., University of Minnesota
NASDDDS STATE MEMBERS

Contact information and links to the state agencies are available on the NASDDDS website at www.nasddds.org/state-agencies

ALABAMA
Terry Pezent
Associate Commissioner
Division of Developmental Disabilities
Alabama Department of Mental Health

ALASKA
Tony Newman
Acting Director
Senior & Disabilities Services
Alaska Department of Health & Social Services

ARIZONA
Zane Garcia Ramadan
Assistant Director
Division of Developmental Disabilities
Arizona Department of Economic Security

ARKANSAS
Melissa Stone
Director
Division of Developmental Disabilities Services
Arkansas Department of Human Services

CALIFORNIA
Nancy Bargmann
Director
California Department of Developmental Services

COLORADO
Bonnie Silva
Director
Office of Community Living
Colorado DHCP&F

CONNECTICUT
Jordan Scheff
Commissioner
Connecticut Department of Developmental Services

DELWARE
Marissa Catalon
Director
Developmental Disabilities Services
Delaware Health and Social Services

DISTRICT OF COLUMBIA
Andrew Reese
Director
D.C. Department on Disability Services

FLORIDA
Barbara Palmer
Director
Florida Agency for Persons with Disabilities

GEORGIA
Ronald Wakefield
Director
Division of Developmental Disabilities
Georgia DBHDD

HAWAII
Mary Brogan
Administrator
Developmental Disabilities Division
Hawaii Department of Health

IDAHO
Chad Cardwell
Deputy Administrator
Family & Community Services
Idaho Department of Health and Welfare

ILLINOIS
Sarah Myerscough-Mueller
Interim Director
Division of Developmental Disabilities
Illinois Department of Human Services

INDIANA
Kelly Mitchell
Director
Disability & Rehabilitative Services
Indiana Family & Social Services Administration

IOWA
Marissa Eyanson
Administrator
Division of Mental Health and Disability Services
Iowa Department of Human Services
KANSAS
Laura Howard
Secretary
Kansas Department for Aging and Disability Services

KENTUCKY
Claudia J. Johnson
Director
Division of Developmental and Intellectual Disabilities
Kentucky Cabinet for Health & Family Services

LOUISIANA
Julie Foster Hagan
Assistant Secretary
Office for Citizens with Developmental Disabilities
Louisiana Department of Health

MAINE
Elizabeth Hopkins
Director
Office of Aging and Disability Services
Maine Department of Health and Human Services

MARYLAND
Bernard Simons
Deputy Secretary
Developmental Disabilities Administration
Maryland Department of Health

MASSACHUSETTS
Jane Ryder
Commissioner
Massachusetts Department of Developmental Services

MICHIGAN
Farah Hanley
Chief Deputy Director for Health
Michigan Department of Health and Human Services

MINNESOTA
Natasha Merz
Director
Disability Services Division
Minnesota Department of Human Services

MISSISSIPPI
Craig Kittrell
Director
Bureau of Intellectual Disabilities
Mississippi Department of Mental Health

MISSOURI
Jessica Bax
Director
Division of Developmental Disabilities
Missouri Department of Mental Health

MISSOURI
Valerie Huhn
Director
Missouri Department of Mental Health

MONTANA
Lindsey Carter
Bureau Chief
Developmental Disabilities Program
Montana Public Health and Human Services

NEBRASKA
Tony Green
Director
Division of Developmental Disabilities
Nebraska Department of Health & Human Services

NEVADA
Dena Schmidt
Administrator
Nevada Aging and Disability Services Division

NEW HAMPSHIRE
Melissa Hardy
Director
New Hampshire Division of Long Term Supports and Services

NEW JERSEY
Jonathan Seifried
Assistant Commissioner
Division of Developmental Disabilities
New Jersey Department of Human Services

NEW MEXICO
Jason Cornwell
Director
Developmental Disabilities Supports Division
New Mexico Department of Health

NEW YORK
Kerri E. Neifeld
Acting Commissioner
New York State Office for People with Developmental Disabilities

NORTH CAROLINA
Deepa Avula
Director
DMH/DD/SAS
North Carolina Department of Health and Human Services

NORTH DAKOTA
Tina Bay
Director
Developmental Disabilities Division
North Dakota Department of Human Services
OHIO
Kim Hauck
Director
Ohio Department of Developmental Disabilities

OKLAHOMA
Beth Scrutchins
Director
Developmental Disabilities Services
Oklahoma Department of Human Services

OREGON
Lilia Teninty
Director
Developmental Disability Services
Oregon Department of Human Services

PENNSYLVANIA
Kristin Ahrens
Deputy Secretary
Office of Developmental Programs
Pennsylvania Department of Human Services

PUERTO RICO
Suzanne Roig-Fuertes, MSW, MS
Director
División de Servicios a Personas con Discapacidad Intelectual (DSPDI)
Departamento de Salud de Puerto Rico

RHODE ISLAND
Kevin Savage
Acting Director
Division of Developmental Disabilities
Rhode Island DBHDDH

SOUTH CAROLINA
Michelle G. Fry, J.D., Ph.D.
Director
South Carolina DDSN

SOUTH DAKOTA
Joey Younie
Director
Division of Developmental Disabilities
South Dakota Department of Human Services

TENNESSEE
Brad Turner
Commissioner
Tennessee Department of Intellectual and Developmental Disabilities

TEXAS
Haley Turner
Associate Commissioner of IDD Services
Texas IDD and Behavioral Health Services

UTAH
Angella Pinna
Director
Division of Services for People with Disabilities
Utah Department of Human Services

VERMONT
Jennifer Garabedian
Director
Developmental Disabilities Services Division
Vermont Department of Disabilities, Aging, and Independent Living

VIRGINIA
Heather Norton
Assistant Commissioner
Division of Developmental Services
Virginia Department of Behavioral Health and Developmental Services

WASHINGTON
Debbie Roberts
Assistant Secretary
Developmental Disabilities Administration
Washington Department of Social and Health Services

WEST VIRGINIA
Randall Hill
Director
Home & Community Based Services
Bureau for Medical Services
West Virginia DHHR

WISCONSIN
Curtis Cunningham
Deputy Administrator
Division of Long Term Care
Wisconsin Department of Health Services

WYOMING
Lee Grossman, MPA
Administrator
Developmental Disabilities Section
Division of Healthcare Financing
Wyoming Department of Health
### NASDDDS Financials

<table>
<thead>
<tr>
<th></th>
<th>Annual Budget</th>
<th>Current Month Actual</th>
<th>Year To Date Actual</th>
<th>Variance YTD vs Annual Budget</th>
<th>% of Annual Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenue</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Membership Dues</td>
<td>1,111,059.00</td>
<td>0.00</td>
<td>1,116,827.00</td>
<td>5,768</td>
<td>101 %</td>
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<tr>
<td>Project Fees</td>
<td>2,361,718.00</td>
<td>500,718.50</td>
<td>2,491,682.11</td>
<td>129,964</td>
<td>106 %</td>
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<tr>
<td>Grant/Contract Income</td>
<td>508,822.00</td>
<td>87,765.27</td>
<td>684,550.51</td>
<td>175,729</td>
<td>135 %</td>
</tr>
<tr>
<td>Investment Income</td>
<td>35,000.00</td>
<td>9,788.16</td>
<td>101,811.68</td>
<td>66,812</td>
<td>291 %</td>
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<tr>
<td>Other Income</td>
<td>7,250.00</td>
<td>411.48</td>
<td>3,748.89</td>
<td>(3,501)</td>
<td>52 %</td>
</tr>
<tr>
<td>Registrations</td>
<td>290,000.00</td>
<td>93,901.99</td>
<td>259,694.05</td>
<td>(30,306)</td>
<td>90 %</td>
</tr>
<tr>
<td>Publication Sales</td>
<td>200.00</td>
<td>0.00</td>
<td>0.00</td>
<td>(200)</td>
<td>0 %</td>
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<tr>
<td><strong>Total Revenue</strong></td>
<td>4,314,049.00</td>
<td>692,585.40</td>
<td>4,658,314.24</td>
<td>344,265</td>
<td>108 %</td>
</tr>
</tbody>
</table>

| **Expenses**         |               |                      |                     |                              |                   |
| **Personnel**        |               |                      |                     |                              |                   |
| Salaries             | 1,498,166.00  | 133,496.31           | 1,534,449.70        | 36,284                       | 102 %             |
| Payroll Taxes        | 108,207.00    | 9,357.30             | 108,011.24          | (196)                        | 100 %             |
| Health & Dental Insurance | 103,572.00  | 10,281.21            | 108,106.19          | 4,534                        | 104 %             |
| Life & Disability Insurance | 17,393.00  | 1,287.63             | 15,794.74           | (1,598)                      | 91 %              |
| Retirement Benefits  | 87,485.00    | 6,978.46             | 86,305.79           | (1,179)                      | 99 %              |
| Workers Comp         | 7,500.00      | 370.25               | 4,266.00            | (3,234)                      | 57 %              |
| **Total Personnel**  | 1,822,323.00  | 161,771.16           | 1,856,933.66        | 34,611                       | 102 %             |

<p>| <strong>Services</strong>         |               |                      |                     |                              |                   |
| Contractual Services | 1,746,364.00  | 149,980.70           | 1,912,662.97        | 166,299                      | 110 %             |
| Accounting Services  | 97,120.00     | 6,911.93             | 94,906.87           | (2,213)                      | 98 %              |
| Audit Fees           | 24,300.00     | 2,300.00             | 21,967.60           | (2,332)                      | 90 %              |
| Payroll Fees         | 5,120.00      | 456.00               | 5,771.00            | 651                           | 113 %             |
| Legal Fees           | 5,000.00      | 0.00                 | 6,773.00            | 1,773                         | 135 %             |
| IT Support           | 21,623.00     | 777.50               | 23,470.00           | 1,847                         | 109 %             |
| FSA/HR Fees          | 0.00          | 592.48               | 4,132.50            | 4,133                         | 0 %               |
| <strong>Total Services</strong>   | 1,899,527.00  | 161,018.61           | 2,069,683.94        | 170,157                       | 109 %             |</p>
<table>
<thead>
<tr>
<th></th>
<th>Annual Budget</th>
<th>Current Month Actual</th>
<th>Year To Date Actual</th>
<th>Variance YTD vs Annual Budget</th>
<th>% of Annual Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Travel &amp; Meeting</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hotel Expenses</td>
<td>84,000.00</td>
<td>54,671.10</td>
<td>75,455.26</td>
<td>(8,545)</td>
<td>90 %</td>
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<tr>
<td>Speaker/ Consult. Fees</td>
<td>4,000.00</td>
<td>0.00</td>
<td>1,200.00</td>
<td>(2,800)</td>
<td>30 %</td>
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<tr>
<td>AV rental &amp; other meeting</td>
<td>32,000.00</td>
<td>43,864.31</td>
<td>51,009.03</td>
<td>19,009</td>
<td>159 %</td>
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<tr>
<td>Board / Comittee Travel</td>
<td>8,000.00</td>
<td>658.65</td>
<td>658.65</td>
<td>(7,341)</td>
<td>8 %</td>
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<tr>
<td>Speaker / Consult. Travel</td>
<td>1,500.00</td>
<td>0.00</td>
<td>0.00</td>
<td>(1,500)</td>
<td>0 %</td>
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<tr>
<td>Business Sponsored Meals</td>
<td>1,200.00</td>
<td>1,039.39</td>
<td>2,193.88</td>
<td>994</td>
<td>183 %</td>
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<tr>
<td>Staff Travel</td>
<td>50,866.00</td>
<td>10,552.45</td>
<td>37,103.16</td>
<td>(13,763)</td>
<td>73 %</td>
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<tr>
<td><strong>Total Travel &amp; Meeting</strong></td>
<td>181,566.00</td>
<td>110,785.90</td>
<td>167,619.98</td>
<td>(13,946)</td>
<td>92 %</td>
</tr>
<tr>
<td><strong>Other Expenses</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Office Supplies</td>
<td>6,300.00</td>
<td>2,506.23</td>
<td>7,668.49</td>
<td>1,368</td>
<td>122 %</td>
</tr>
<tr>
<td>Small Equipment</td>
<td>650.00</td>
<td>0.00</td>
<td>1,661.98</td>
<td>1,012</td>
<td>256 %</td>
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<tr>
<td>Server / Web Maintenance</td>
<td>16,680.00</td>
<td>13,341.51</td>
<td>16,324.24</td>
<td>(356)</td>
<td>98 %</td>
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<tr>
<td>Printing ( service &amp; material)</td>
<td>5,800.00</td>
<td>0.00</td>
<td>5,607.73</td>
<td>(192)</td>
<td>97 %</td>
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<tr>
<td>Postage</td>
<td>200.00</td>
<td>264.19</td>
<td>1,033.54</td>
<td>834</td>
<td>517 %</td>
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<tr>
<td>Internet Fees ( DSL)</td>
<td>6,100.00</td>
<td>995.55</td>
<td>6,117.79</td>
<td>18</td>
<td>100 %</td>
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<td>Telephone</td>
<td>8,200.00</td>
<td>621.27</td>
<td>8,437.34</td>
<td>237</td>
<td>103 %</td>
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<tr>
<td>Conference Calls</td>
<td>6,706.00</td>
<td>205.49</td>
<td>8,367.15</td>
<td>1,661</td>
<td>125 %</td>
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<tr>
<td>Graphic and Design</td>
<td>2,192.00</td>
<td>280.83</td>
<td>3,211.80</td>
<td>1,020</td>
<td>147 %</td>
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<tr>
<td>Bank Fees</td>
<td>30,800.00</td>
<td>2,062.23</td>
<td>27,766.64</td>
<td>(3,033)</td>
<td>90 %</td>
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<tr>
<td>Dues, Fees &amp; Registrations</td>
<td>43,073.00</td>
<td>33.00</td>
<td>19,595.84</td>
<td>(23,477)</td>
<td>45 %</td>
</tr>
<tr>
<td>Subscription / Publications</td>
<td>1,000.00</td>
<td>119.99</td>
<td>375.15</td>
<td>(625)</td>
<td>38 %</td>
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<tr>
<td>Insurance - Prof Liab/Hazard</td>
<td>16,991.00</td>
<td>1,569.26</td>
<td>17,233.10</td>
<td>242</td>
<td>101 %</td>
</tr>
<tr>
<td>Rent Expense</td>
<td>59,124.00</td>
<td>4,927.92</td>
<td>59,783.04</td>
<td>659</td>
<td>101 %</td>
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<tr>
<td>Parking</td>
<td>8,477.00</td>
<td>558.33</td>
<td>6,886.26</td>
<td>(1,591)</td>
<td>81 %</td>
</tr>
<tr>
<td>Cleaning / Maintenance</td>
<td>2,770.00</td>
<td>216.00</td>
<td>2,576.00</td>
<td>(194)</td>
<td>93 %</td>
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<tr>
<td>Interest Expense</td>
<td>0.00</td>
<td>150.00</td>
<td>150.00</td>
<td>150</td>
<td>0 %</td>
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<tr>
<td>Indirect Fee</td>
<td>1.00</td>
<td>0.00</td>
<td>0.00</td>
<td>(1)</td>
<td>0 %</td>
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<tr>
<td>Miscellaneous Expense</td>
<td>1,000.00</td>
<td>499.86</td>
<td>1,062.84</td>
<td>63</td>
<td>106 %</td>
</tr>
<tr>
<td>Racial Equity and Social Justice</td>
<td>20,000.00</td>
<td>0.00</td>
<td>3,412.19</td>
<td>(16,588)</td>
<td>17 %</td>
</tr>
<tr>
<td>Conference IT Platforms</td>
<td>40,549.00</td>
<td>7,199.50</td>
<td>47,856.03</td>
<td>7,307</td>
<td>118 %</td>
</tr>
<tr>
<td>Proposal Development</td>
<td>0.00</td>
<td>1,250.00</td>
<td>2,750.00</td>
<td>2,750</td>
<td>0 %</td>
</tr>
<tr>
<td>Staff Professional Development</td>
<td>3,000.00</td>
<td>2,500.00</td>
<td>2,500.00</td>
<td>(500)</td>
<td>83 %</td>
</tr>
</tbody>
</table>
### Annual Budget

<table>
<thead>
<tr>
<th>Description</th>
<th>Annual Budget</th>
<th>Current Month Actual</th>
<th>Year To Date Actual</th>
<th>Variance YTD vs Annual Budget</th>
<th>% of Annual Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depreciation</td>
<td>25,179.00</td>
<td>2,194.25</td>
<td>21,874.56</td>
<td>(3,304)</td>
<td>87 %</td>
</tr>
<tr>
<td>Real Estate &amp; Property Taxes</td>
<td>3,500.00</td>
<td>0.00</td>
<td>1,110.42</td>
<td>(2,390)</td>
<td>32 %</td>
</tr>
<tr>
<td>Total Other Expenses</td>
<td>308,292.00</td>
<td>41,495.41</td>
<td>273,362.13</td>
<td>(34,930)</td>
<td>89 %</td>
</tr>
<tr>
<td>Total Expenses</td>
<td>4,211,708.00</td>
<td>475,071.08</td>
<td>4,367,599.71</td>
<td>155,892</td>
<td>104 %</td>
</tr>
<tr>
<td>Net Income From Operations</td>
<td>102,341.00</td>
<td>217,514.32</td>
<td>290,714.53</td>
<td>188,374</td>
<td>284 %</td>
</tr>
<tr>
<td>Unrealized Gain/Loss</td>
<td>0.00</td>
<td>(147,888.21)</td>
<td>(378,874.41)</td>
<td>(378,874)</td>
<td>0 %</td>
</tr>
<tr>
<td>Total Gain/Loss</td>
<td>0.00</td>
<td>(147,888.21)</td>
<td>(378,874.41)</td>
<td>(378,874)</td>
<td>0 %</td>
</tr>
<tr>
<td>Excess Revenue Over Expenses</td>
<td>102,341.00</td>
<td>69,626.11</td>
<td>(88,159.88)</td>
<td>(190,501)</td>
<td>(86) %</td>
</tr>
</tbody>
</table>

### FY 20–21: Sources of Revenue

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Membership</td>
<td>$1,377,946.05</td>
</tr>
<tr>
<td>SELN &amp; Employment</td>
<td>$1,030,301.00</td>
</tr>
<tr>
<td>NCI</td>
<td>$1,061,831.11</td>
</tr>
<tr>
<td>Technical Assistance</td>
<td>$548,270.68</td>
</tr>
<tr>
<td>CoP Expansion</td>
<td>$399,550.00</td>
</tr>
<tr>
<td>Culture of Quality</td>
<td>$0.00</td>
</tr>
<tr>
<td>Administration</td>
<td>$102,710.57</td>
</tr>
<tr>
<td>Publications</td>
<td>$137,704.83</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$4,658,314.24</strong></td>
</tr>
</tbody>
</table>

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