



# NASDDDS

National Association of State Directors  
of  
Developmental Disabilities Services

[WWW.NASDDDS.ORG](http://WWW.NASDDDS.ORG)

**JULY 1, 2022–JUNE 30, 2023**  
**ANNUAL IMPACT REPORT**



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

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**NASDDDS**  
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# NASDDDS OVERVIEW

## 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:

- + 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.



# REFLECTIONS FROM



**MARY BROGAN**  
NASDDDS BOARD OF DIRECTORS PRESIDENT



**MARY P. SOWERS**  
NASDDDS EXECUTIVE DIRECTOR



Dear NASDDDS Members,

The past year has continued to take our state systems to new levels of history and action. All of you have contributed mightily to collective learning of best practices and innovation through your work on the American Rescue Plan Act spending. Your collective investments have spurred movement on the perniciously low wages among the Direct Support Professionals that make our systems possible, and have spotlighted strategies that can improve our ability to attract strong candidates to our field from all walks of life. Your investments have created pathways to evolving technology use that promises to arm individuals and their families with greater autonomy and choice in their day-to-day lives. Your investments of both financial and precious state human resources have also tackled some of the ongoing greatest challenges that face state I/DD systems, including identifying ways to support individuals who also have mental health challenges or who experience medical complexity.

Your collective successes in these areas are due to your ingenuity and commitment to helping individuals with I/DD have good lives in their homes and communities - but there is a growing recognition that you cannot do this work alone. Through partnerships across state agencies and with providers, advocates and families, NASDDDS members have made great strides in overcoming barriers of our siloed systems of supports. We are seeing your leadership in deepening relationships at the state level among your sister agencies in aging, Medicaid, mental health, substance use, child welfare, justice and others as a means to create a truly person-centered system that meets people where they are. This work is paying dividends at the federal level, too.

Following your lead, NASDDDS has forged unprecedented partnerships with our sister state associations of ADvancing States, NAMD, NASHIA, NASMHPD and NASADAD to build impactful projects that support our collective memberships. We are working hard to build lasting relationships with other key partners, such as NADD, GMSA, ASAN, CommunicationFirst and others

“Your collective successes... are due to your ingenuity and commitment to helping individuals with I/DD...”



with whom we share a vision for meaningful integration. We are working to ensure that we take every opportunity to let every potential partner know of your strong work and to elevate issues that are key to your work. To that end, we have broadened our federal engagement approach to include all agencies with potential impacts on people with I/DD and their families, including ACL, SAMHSA, ACF and others, in addition to our longstanding partner in CMS.

The next year promises to be one of (more) tremendous change in home and community based services, and the work you are doing will position our collective community well to meet those challenges with great vigor. NASDDDS stands beside you in this work and we look forward to forging this road with all our members and partners in the years ahead.

*Mary Brogan*

Mary Brogan  
President, NASDDDS Board of Directors

*Mary P. Sowers*

Mary P. Sowers  
NASDDDS Executive Director



# NASDDDS BOARD OF DIRECTORS



Mary Brogan  
President



Jordan Scheff  
Vice President/  
President Elect



Valerie Huhn  
Secretary/Treasurer



Bernard Simons  
Past President



Julie Foster Hagan  
Member-at-Large



Ronald Wakefield  
Member-at-Large



Vacant  
Member-at-Large



Vacant  
Member-at-Large

## BOARD CHANGES DURING FY 2022-2023

The 2022-2023 year encountered a number of board changes. Lilia Teninty resigned from the board effective November 1, 2022 as she was leaving her position with Oregon DHS / ODDS. Jason Cornwell was elected to the Member-at-Large position vacated by Lilia Teninty, but resigned from the board effective March 21, 2023 as he left his position with New Mexico DDSD.

The board underwent further change when Lee Grossman resigned from the board effective June 13, 2023, as he moved to another position within the Wyoming state government with Medicaid. Julie Foster Hagan was elected to the Member-at-Large position vacated by Lee Grossman. Valerie Huhn was confirmed as Secretary/Treasurer at the June 2022 business meeting.

# 2023 ALUMNI ASSOCIATION

The NASDDDS Alumni Association is open to individuals who have served as the director of a state program for people with intellectual and developmental disabilities.

Alex Bartolic

Laura Brackin

Barbara Brent

Beverly A. H.  
Buscemi, PhD

Stan Butkus

Jason Cornwell

Jim DeBeaugrine

Roger Deshaies

Kathryn DuPree

Steven Eidelman

David Evans

Mary Lee Fay

Jodi Fenner

Jane Gallivan

Roy Gerstenberger

Claudia Johnson

Dan Lusk

Novelene Martin

Darryl Millner

Gerry Morrissey

James Nicholson

Laura Nuss

Peter O'Meara

Barbara Ramsey

Lorene Reagan

Kenneth Ritchey

Wanda Seiler

Lilia Teninty

Nancy Thaler

Ric Zaharia

Kerri Zanchi





# NASDDDS STAFF



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# NASDDDS DIVERSITY, EQUITY, AND INCLUSION COMMITMENT



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 System Innovations. NASDDDS has continued our commitment to Diversity, Equity and Inclusion (DEI) through successful membership education opportunities and bi-monthly DEI Roundtables. We are striving 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 in 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.

Our work continued in 2022 and 2023 with the creation and launch of the Embedding DEI Tool. This tool is used to examine an organization's current work and potential needs to ensure that they are aligning and implementing their health equity work to the National Cultural and Linguistically Appropriate Services Standards. Two of our membership states are on board to use the tool and provide feedback related to its use. Those states are Louisiana and Maryland. We are excited to receive their input and recommendations so that we can modify, improve, and continue to share best practices.

“ We are looking forward to another year as we embed DEI into our work and support our members to embed these principles and values throughout their work.

NASDDDS also launched a DEI Subcommittee of the NASDDDS Board to support DEI related efforts both internally and externally. This group meets quarterly and contributes to our initiatives.

For two years in a row we hosted DEI Intensives at the NASDDDS conferences. We experienced robust attendance and we will continue to highlight outcomes of that work through the DEI affinity group's discussions.

Further, Regina Sisneros was fortunate to attend the inaugural CMS Equity Conference at Howard University in June. This event boasted over 700



attendees in person and 3,000 attendees virtually. Regina presented with Dr. Hirah Mir, the Chief Equity Officer of New York State Office for People with Developmental Disabilities. As a team, they presented on the Embedding DEI Tool with state specific examples of how to align health equity work with national initiatives.

As result of the aforementioned outreach, Regina was invited by a collaboration of CMS and CDC's Offices of Minority Health to attend a Chief Equity Officer Summit for two days. The summit offered presentations from organizations on their health equity efforts and included a formal debrief of experiences and learnings from the two events. This information was intended to support Federal DEI Policies as well as considerations for future events.

Additionally, NASDDDS was selected to participate in the Pursing Equity program offered through the Institute for Healthcare Improvement. NASDDDS staff attended Groundwater trainings to learn about the root causes of health disparities and the team continues to attend monthly sessions to learn about best practices in Health Equity work. Regina will represent NASDDDS at their National Pursing Equity Conference in December.

Ongoing efforts are taking place to support members and their teams to address state specific health inequities, to train their staff, and to support them as they establish equitable outcomes for individuals with I/DD. We are looking forward to another year as we embed DEI into our work and support our members to embed these principles and values throughout their work.



# NASDDDS POSITION ON EQUITABLE WAGES FOR PEOPLE WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES



**ISSUED ON JULY 28, 2021**

**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.

# INFLUENCING NATIONAL POLICY



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.

NASDDDS continues to help lead a national policy conversation about the future of Home and Community- Based Services, spurred by the burgeoning workforce crisis and learnings from the COVID-19 pandemic. We engage with our federal partners in a continual reimagining of successful, high quality, individualized services that support individuals with intellectual and developmental disabilities to participate fully in their communities.

## **FEDERAL POLICY AND THE HCBS WORKFORCE**

NASDDDS continues to sound the alarm to the Administration and Congress about the state of the Direct Support Professional (DSP) workforce, sharing data from the NCI State of the Workforce Survey with legislators and calling for federal legislation that would provide additional tools and resources to states to address the crisis. We have engaged with CMS and other federal agencies to ensure that all policy decisions, from enforcement of the HCBS rule to approaches to restructuring HCBS quality expectations, took the workforce context into consideration. In 2023, this engagement has included providing extensive comments, deeply informed through consultation with NASDDDS membership, in response to a significant CMS proposal of new policies intended to expand access to HCBS.

## **ASSISTING MEMBERS TO IMPLEMENT FEDERAL POLICY**

The Association worked with our members, CMS, and other stakeholders to inform implementation of major federal HCBS policy, including the enhanced FMAP percentage for HCBS contained in the American Rescue Plan Act, the final implementation deadline for the HCBS Rule, and the transition away from Appendix K flexibilities. This includes providing input to CMS in its ongoing policy development around these initiatives, delivering technical assistance to state agencies, and developing products that ensure that members have up-to-date and complete information about national trends.

## **COALITION LEADERSHIP**

Dan Berland, NASDDDS Director of Federal Policy, is a member of the board of the Consortium for Constituents with Disabilities (CCD), the nation's largest coalition advocating for the rights and services for people with all disabilities, and 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.

# SUPPORTING MEMBER STATES

The association's primary role and mission is to assist member state agencies in building person-centered systems of support for people with intellectual/developmental disabilities (I/DD) and their families. NASDDDS achieves this mission in a variety of ways including formal technical assistance; one on one support; educational opportunities; and networking events.

## TECHNICAL ASSISTANCE

One of the association's essential 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 2022-2023

### ACL Grant for The Link Center: Bridging I/DD and Mental Health Systems

In September 2022, NASDDDS was awarded a grant from the Administration for Community Living to launch and operate a national resource center for people with I/DD and co-occurring mental health conditions. The Link Center is led by three national associations whose state and professional members are essential to systems change in this area - NASDDDS, the National Association of State Mental Health Program Directors (NASMHPD) and the National Association for the Dually Diagnosed (NADD). The Link Center provides an opportunity to elevate best practices in policy, clinical, and workforce capacity designed to increase and sustain self-determination, empowerment, and quality of life for people with I/DD and MH conditions. The Link Center's work is guided by a Steering Committee comprised of individuals who are experts in their path of living with a disability from diverse cultural and linguistic backgrounds.



NASDDDS is joined by additional partner organizations in this important work - Green Mountain Self Advocates (GMSA), the Autistic Self Advocacy Network (ASAN), CommunicationFirst, the National Association of State Head Injury Administrators (NASHIA), The Ohio State University Nisonger Center, the University of Arizona Sonoran Center for Excellence in Disabilities, and the National Center for START Services at the University of New Hampshire's Institute on Disability.





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


NASDDDS staff continue providing 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 assisting states with making changes to current DD 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.

Jeanine Zlockie is assigned as the HCBS TA lead. NASDDDS staff provided more than 1,000 hours of HCBS technical assistance to Alaska, California, Connecticut, Illinois, Maine, Nebraska, Oklahoma, Rhode Island (two different engagements), Virginia and Washington under this contract. Topics included technology within waiver service definitions; self-direction models; supporting people with intensive support needs; developing waiver performance measures, building quality improvement strategies; conflict-free case management; examining different Medicaid authorities to realize a state’s goals; and organized health care delivery systems.

In addition, NASDDDS prepared several webinars for CMS. Mary Sowers and Jeanine Zlockie developed webinars for the CMS Education Series on the topics of: Needs Based Criteria and Target Group Criteria within 1915(i) SPAs and 1915(c) waiver unduplicated number of participants (Factor C), limitation on the number of participants served at any point in time (point in time limit), and reserved waiver capacity. Laura Vegas and Jeanine Zlockie also prepared a webinar for CMS to provide during the HCBS conference titled “Person Centered Service Planning in HCBS.”

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 155 hours of PASRR TA during the contract year on a variety of topics including overall PASRR program improvements, questions about the federal requirements for specialized services and exempted hospital discharge and the mechanics of Level I screenings and Level II evaluations. California, Kansas, and New Mexico received support as part of extended TA engagements over the course of the TA year. Colorado, Indiana, Michigan, Minnesota, Missouri, Montana, North Carolina, Oklahoma, and South Dakota received support as part of TA requested directly or through the PASRR Technical Assistance Center (PTAC) website. NASDDDS staff provided TA to all states in the CMS Central PASRR region as part of quarterly TA calls, in addition to supporting PASRR TA members with facilitating quarterly calls for the other three PASRR regions.

**FOCUS ON MEMBERS: NASDDDS TECHNICAL ASSISTANCE BY THE NUMBERS:**

<b>1,000+ HOURS</b> HCBS technical assistance/contract year		<b>155 HOURS</b> PASRR technical assistance/contract year
<b>78 HOURS X 51 PASRR PROGRAMS</b> 78 hours of TA provided to all 51 PASRR programs nationwide		



NASDDDS also leads the management and development of all PASRR training and education sessions, which resulted in 78 hours of TA provided to all 51 PASRR programs nationwide. NASDDDS collaborated with other members of the PASRR TA team to develop and present webinars entitled “State PASRR Program Improvement Considerations” and “Collaborative Partnerships: The Key to an Effective PASRR Program.” Regina Sisneros joined in PASRR training development to create the webinar “Applying Cultural and Linguistic Competency Standards to PASRR.”

### **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.

## **MAJOR TECHNICAL ASSISTANCE PROJECTS FOR FY 2022-2023**

### **Arnold Ventures Grant for I/DD Dual Eligibility Policy Change**

With the generous support of the Arnold Ventures Foundation, NASDDDS is undertaking a multi-phased approach to ascertain and elevate strong practices to support individuals with I/DD who are dually eligible for Medicare and Medicaid. The project’s goal is to improve care coordination and health care access while optimizing both programs for individuals with I/DD and their families. The two-year grant includes state roundtable discussions, a series of training sessions, targeted technical assistance to states, and development of a state toolkit and policy recommendations.

### **ARPA HCBS Technical Assistance Collective**

NASDDDS partners with ADvancing States and three independent consultants to provide short duration, intense technical assistance to states on the implementation of their selected ARPA initiatives. This work is funded by the generous support of four foundations: the John A. Hartford Foundation, the Care for All with Respect and Equity (CARE) Fund, the SCAN Foundation, and the Milbank Memorial Fund.

### **Department of Labor, Office of Disability and Employment Policy (ODEP)**

NASDDDS serves as a State Intermediary Organization providing subject matter expertise and assistance in the development of a statewide framework for improvement of competitive integrated employment outcomes under the National Expansion of Employment Opportunities Network (NEON) project.

### **University of Massachusetts Boston**

NASDDDS supports the work of the Institute for Community Inclusion Field Initiated Research to explore innovation in employment and payment rates within HCBS waivers.

### **University of Minnesota RISP and RRTC**

NASDDDS enjoys a long-standing collaboration with the University of Minnesota on the Residential Information Systems Project (RISP), ensuring the RISP survey is a well-structured, value-add tool for participating states. Additionally, the University of Minnesota collaboration includes financial support for the NASDDDS Research Committee as an advisory body to its Project of National Significance and Rehabilitation Research and Training Center.





## State Focus:

### Hawaii

In conjunction with the Developmental Disabilities Division's efforts to embrace a Culture of Quality, NASDDDS partners with the Council on Quality and Leadership (CQL) to assist Hawaii with training HCBS providers on the principles and practices of continuous quality improvement.

### 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 Medicaid options and opportunities, the role and financing Case Management and transition related services for children and adults, supporting children and adults with complex support needs, and other issues related to a robust HCBS service system.

### Maryland

NASDDDS supports various system improvement efforts in Maryland through pre-paid technical assistance. A recent focus for Maryland supported by the NASDDDS team is work regarding diversity and equity along with complex care planning for Maryland's system of supports for youth and young adults.

### Minnesota

NASDDDS, as a subcontractor to HSRI, is supporting Minnesota's initiative to build a quality improvement strategy that enhances new approaches to its service delivery models.

### Missouri

NASDDDS supports various system improvement efforts in Missouri through pre-paid technical assistance. A recent focus for Missouri supported by the NASDDDS team is working with shared living providers and analyzing the Medicaid service definitions for that service to determine if any improvements to those service delivery models, or policy clarifications were needed to increase the use of the service.

Additionally, NASDDDS is a subcontractor to Mercer on the Division of Developmental Disabilities efforts to explore improvements to workforce and self-directed services employing policy and value-based payment strategies.

### New York

NASDDDS, as a subcontractor to Airam 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.





### **Ohio**

NASDDDS, as a partner contractor with Deloitte, works with Ohio on two different engagements. The first with the Ohio Department of Medicaid focuses on policy and operational considerations for long-term care options for individuals with I/DD. The second effort is with the Ohio Department of Developmental Disabilities to inform operations and policy decisions for the administration of the state's I/DD HCBS waivers.

### **Pennsylvania**

NASDDDS collaborates on two different efforts for the Commonwealth of Pennsylvania's Office of Developmental Programs (ODP). The first engagement is as a subcontract with Mercer to provide policy and strategy technical assistance as the PA ODP explores various approaches to improve group residential and supports coordination services to the Commonwealth's citizens with developmental disabilities. The second engagement is subcontract collaboration with Deloitte to support PA ODP's quality assurance and improvement of its HCBS waiver programs.

### **Virginia Commonwealth University**

NASDDDS supports the state's Living Well grant project to organize and facilitate the network of partners serving on the Project Living Well Leadership Team.

### **Virginia No Wrong Door (NWD)**

NASDDDS collaborates with the Virginia NWD team on a wide array of governance and improvement projects, including facilitation of its Resource Advisory Council and planning for NWD sustainability.

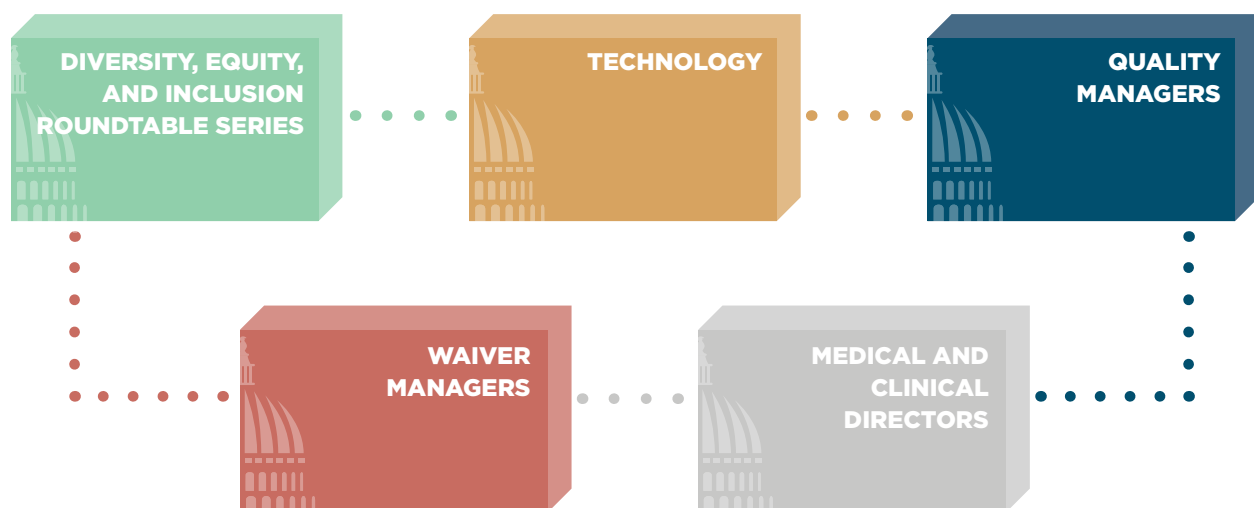


# ADVANCING THE FIELD

## 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:



## CONFERENCES AND MEETINGS

### 2022-2023 National Core Indicators® Annual Meeting

August 3-4, 2022

### 2022 State Employment Leadership Network Annual Meeting

October 4-6, 2022

### 2022 NASDDDS Directors Forum and Annual Conference

November 2 Directors and State Staff Forums  
November 3 and 4 Annual Conference  
Alexandria, Virginia

### 2023 Directors Forum and Mid-Year Conference

June 14 Directors and State Staff Forums  
June 15 and 16 Mid-Year Conference  
Portland, Oregon

Dan Berland presented at “**Tackling the Medicaid Unwinding Challenge**” National Council of State Legislatures (NCSL) Summit 2023. With Mary Brogan, Administrator of the Hawaii Developmental Disabilities Division and Julie Foster Hagan, Assistant Secretary of Louisiana’s Office for Citizens with DD. The group informed a national conference of state legislators about the opportunities and challenges of transitioning appendix k flexibilities into ongoing waiver authorities.





## LISTSERV

NASDDDS hosts a ListServ for state intellectual and developmental disabilities services directors and their staff. The ListServ reaches over 900 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 Caring Families: Paying Family Caregivers Topic Brief

Family caregiving has been evolving as the foundation of Long-Term Services and Supports (LTSS) in the U.S. for many years, stabilizing supports and providing essential care to family members. In response to this evolution, NASDDDS fielded a survey among its members in the spring of 2023. This survey sought to gain information on the practices active among states for paying relatives to deliver supports and services through home and community-based services (HCBS) programs, and which of those practices the states expect to continue beyond the end of the Public Health Emergency (PHE).





### State DEI Toolkit

Demographics in the United States are shifting, and the multicultural trends are expanding the racial and ethnic disparities in health and long-term services and supports. States are supporting greater numbers of people with disabilities in home and community-based settings, which has contributed to the need for a diversified workforce of direct support professionals. Increasingly, state I/DD systems are using qualitative and quantitative data to understand their service delivery systems and their impact on individuals with I/DD and their families – both those served and unserved by the state I/DD system. Unsurprisingly, these efforts reveal that individuals with I/DD and their families may experience disparities based on race, culture, language, ethnicity, disability, and/or geographic location. These may be disparities in access to information and services and/or culturally and linguistically appropriate service providers.

#### The State DEI Toolkit Features:

- Steps for an Action-Oriented DEI Plan
- Scoring Tool for Embedding Cultural & Linguistic Competency
- Embedding Cultural & Linguistic Competency Implementation Strategies
- Appendix of Common Definitions and Terms (available at request)

### 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 2022-2023:

#### 2022-2023 Topic Areas Include:

Promoting Self-Advocacy in Policy Development

Community of Practice: Supporting Families Across the Lifespan

Disability Employment Roundtable

Medicaid 101

DEI Demonstration

DSP Workforce: Getting From Policy to Solutions

Getting Techy! The Role of Technology in the I/DD Field

Complex Support Needs: Emerging Innovations

Value Based Payments: Effective Approaches

NASDDDS Replay



# FOCUSING EFFORTS



## NATIONAL CORE INDICATORS (NCI)<sup>®</sup>

NCI kicked off the 2022-2023 year with the Annual Meeting in Baltimore, Maryland in August 2022 by celebrating providing 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.



In July of 2022, the Centers for Medicare and Medicaid Services (CMS) released, for the first time, a recommended HCBS Quality Measures Set. The intent of the HCBS Quality Measure Set is to promote more common and consistent use, among states and across states, of nationally recognized quality measures in HCBS programs, and to create opportunities on a national and state level to have comparative quality data on HCBS programs. This application of this Measure Set is expected to support states with improving the quality and outcomes of HCBS. The NCI National Team worked very closely with CMS partners to ensure that several NCI-IDD In Person Survey measures are included in the measure set. While the use of the recommended measures is voluntary, CMS communicated the intent to incorporate their use for reporting requirements in several waiver authorities in the future including 1915(c). This announcement is very exciting for NCI and continues to demonstrate the importance of NCI data in determining quality of supports and services in the IDD system. NCI plans to work with member states to help understand and implement the use of the HCBS Quality Measure set.

A key decision was made to move the State of the Workforce (SoTW) survey to a stand-alone product offering under the NCI umbrella for the 2023-2024 year. State I/DD systems continue to work amid a massive Direct Support Professional (DSP) crisis that has direct impact on the quality of services provided through HCBS. The SoTW provides, on a state-by-state and national perspective of the issues, innovations, and challenges faced by I/DD service delivery systems. NCI plans to continue to develop this survey in order to support a variety of populations and service delivery modes.

**A total of 48 states and the District of Columbia have been members of NCI. We look to continue partnering with member states to work through the proposed changes from CMS for state reporting about outcomes and quality as well as reporting on the workforce.**

**48 STATES + DC**  
HAVE PARTICIPATED  
IN NCI



## 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)

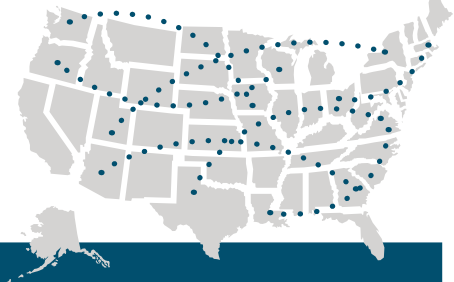
## STATE EMPLOYMENT LEADERSHIP NETWORK



The National Association of State Directors of Developmental Disabilities Services (NASDDDS) continues to work with the Institute for Community Inclusion (ICI) at the University of Massachusetts Boston. In partnership with ICI, the project staff provides a forum for member states to collaborate and build interstate relationships. The SELN also provides individualized member technical assistance to develop policies and strategies and implement services that prioritize competitive integrated employment. The SELN is now entering its 18th year with 25 states.

The annual SELN meeting occurred October 6-8, 2022, focusing on how states are innovating their employment service design and delivery as we exit the public health emergency. The impact of remote supports, provider capacity challenges, and methods for championing system change were among the topics discussed. Equitable access and outcomes for underserved communities were also a through line throughout the event.

### SELN IS NOW ENTERING ITS 18TH YEAR WITH 25 STATES



### HIGHLIGHTS INCLUDE:

- **Indiana rejoined the SELN**
- **A number of refinements to the program’s internal processes (knowledge capture, synthesis, and dissemination) to enhance the member experience**
- **272 case managers from 15 member states participated in SELN Case Management E-Learning Curricula**
- **NASDDDS began an in-depth exploration of Pre-vocational services through a multi-state think tank**

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 exists to enhance and drive policy, practice, and system transformation to support people with intellectual/developmental disabilities within the context of their families and communities.



### **Highlights of the Year Include:**

- Incorporating the National Agenda for Supporting Families into guidance, objectives, and conversations with all CoP member states
- Continued support for the National Collaborative for Supporting Families which began with a summit in May 2022. The National CoP established a quarterly best practice webinar series covering important national topics, starting with “Expanding Operationalization of Family Support in September 2023
- Continued focus on diversity, equality, and inclusion, with dedication to honor all family and community structures, incorporating plain language, and translating and trans-creating material to optimize communication across cultures
- Some of the systems change efforts noted in states are members of the CoP for Supporting Families include peer-to-peer and family-to-family support as a paid service within the service delivery system, embedded the values and principles of Supporting Families 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.
- Expanding state CoP teams to broaden reach and include additional departments and bureaus in the work of supporting families across the lifespan
- Outreach to partner agencies such as behavioral health, Medicaid, aging systems, and child welfare
- NASDDDS in partnership with UMKC will be hosting the National Supporting Families Collaboration Steering Committee





# 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 accessing health care, which is sensitive to the unique needs of this community. It is a great honor to review each submission and understand how lives are changing due to this work. A well-deserved congratulations to Ohio for their thoughtful efforts in creating space for positive advancement in their state with advocates at the helm.”

Mary Sowers, NASDDDS  
Executive Director





### Ohio's Improving Health Outcomes for People with Disabilities

Selected from an extensive list of applicants, the second annual award recipient, Ohio's Improving Health Outcomes for People with Disabilities (Improving Outcomes), is a collaboration of individuals and organizations led by the Ohio Association of Health Plans (OAHP) and the Ohio Center for Autism and Low Incidence (OCALI). Using a collective impact framework, Improving Outcomes' goal is to equip Ohio's health care partners with knowledge, tools, confidence, and resources to address inequities and disparities and improve the health of people with disabilities across the lifespan. They do this through educational opportunities, such as round tables and innovative pilot projects.

Improving Outcomes is unique in that the intended audience is health care. Even more unique is the fact that health care payors have led this effort alongside people with disabilities to improve health care outcomes and social determinants of health of people with disabilities. This partnership can serve as a model in terms of the partners, use of collective impact, content of roundtables, and learnings from the pilots.

Over 200 people from around the world attended the 2022 roundtable series live, and viewers continue to access the content online. The collaboration partners are also conducting quarterly follow-ups with attendees to measure impact and practice change. A large percentage of registrants were medical students and directors of education programs at medical colleges. The partnership is impacting current and future practitioners, and this is only through one of multiple outreach efforts.





## **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.

### **SCHOLARSHIP RECIPIENTS:**

#### **Hetal Jani**

Hetal Jani is the Social Services Chief Administrator for Delaware Department of Health and Social Services/Division of Developmental Disabilities Services (DE DHSS/DDDS). She started her career ladder from being Administrative Specialist in 2012 for DE DHSS/Division of Social Services (DSS) and moving up to Fiscal Management Analyst (FMA) position with DHSS/Division of Medicaid and Medical Assistance (DMMA). As a FMA she was responsible for Tracking and Reporting Medicaid Expenditures. During her tenure with DMMA, she learned about Medicaid program, state and federal match, expenditure reporting requirements and various waivers offered under Medicaid. Her passion is to analyze, reconcile and report Medicaid expenditures as per the Federal and State rules. She is Bachelor in Advanced Accounting and Auditing from India and immigrated to US in 2011.

#### **Miranda Hutchison**

Miranda Hutchison is the Business Analyst for Oklahoma Developmental Disabilities Services (OK DDS). She began her career with OK DDS as a case manager in 2002 and then transitioned to fill the roles of Program Field Representative and Programs Manager II where she was responsible for supporting case management and quality assurance. In January 2022 she accepted her new role as the Business Analyst for OK DDS where she oversees continuous improvement initiatives and project management. Miranda developed and launched the remote support and enabling technology programs for OK DDS. She is passionate about helping people to be their best selves. Miranda is a certified Six Sigma Green Belt, is a LifeCourse Ambassador, Hope Navigator, and received her Grow with Google Project Management Certificate. Miranda holds a bachelor's degree in Criminal Justice from Oklahoma City University and a master's degree in Criminal Justice from Pennsylvania State University.

# NASDDDS MEMBERSHIP

## 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.

### 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*

#### 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](http://www.nasddds.org/state-agencies)

## ALABAMA

Kathy Sawyer  
Associate Commissioner  
Division of Developmental Disabilities  
Alabama Department of Mental Health

## ALASKA

Tony Newman  
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

## DELAWARE

Jody A. Roberts, Ph.D.  
Acting Director  
Developmental Disabilities Services  
Delaware Health and Social Services

## DISTRICT OF COLUMBIA

Andrew Reese  
Director  
D.C. Department on Disability Services

## FLORIDA

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

Tonya Piephoff  
Director  
Division of Developmental Disabilities  
Illinois Department of Human Services

## INDIANA

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

## IOWA

Zach Rhein  
Director  
Division of Mental Health and Disability Services  
Iowa Department of Human Services





**KANSAS**

Laura Howard  
Secretary

Kansas Department for Aging and Disability Services

**KENTUCKY**

(vacant)  
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**

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Senior Deputy Director

Behavioral and Physical Health and  
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**MINNESOTA**

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Disability Services Division  
Minnesota Department of Human Services

**MISSISSIPPI**

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Mississippi Department of Mental Health

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**MISSOURI**

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**NEBRASKA**

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Director

New Hampshire Division of Long Term Supports  
and Services

**NEW JERSEY**

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Division of Developmental Disabilities  
New Jersey Department of Human Services

**NEW MEXICO**

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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**

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Director  
North Carolina DMH/DD/SAS

**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  
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Developmental Disabilities Services  
Oklahoma Department of Human Services

**OREGON**

Anna Lansky  
Interim 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**

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**

Constance Holloway  
Interim State Director/General Counsel  
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**

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Vermont Department of Disabilities, Aging, and  
Independent Living

**VIRGINIA**

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Assistant Commissioner  
Division of Developmental Services  
Virginia Department of Behavioral Health and  
Developmental Services

**WASHINGTON**

Tonik Joseph  
Interim 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**

Elizabeth Forslund  
Administrator  
Home and Community Based Services Section  
Division of Healthcare Financing  
Wyoming Department of Health



# NASDDDS FINANCIALS



	Annual Budget	Current Month Actual	Year To Date Actual	Variance YTD vs Annual Budget	% of Annual Budget
<b>Revenue</b>					
Membership Dues	1,140,963.00	23,764.00	1,143,697.13	2,734	100 %
Project Fees	2,979,936.00	92,582.00	2,976,387.31	(3,549)	100 %
Grant/Contract Income	1,140,051.00	135,276.28	1,331,219.19	191,168	117 %
Investment Income	35,000.00	10,447.36	82,612.88	47,613	236 %
Other Income	2,000.00	6,527.22	7,973.96	5,974	399 %
Registrations	274,600.00	123,926.78	498,290.43	223,690	181 %
<b>Total Revenue</b>	<b>5,572,550.00</b>	<b>392,523.64</b>	<b>6,040,180.90</b>	<b>467,631</b>	<b>108 %</b>
<b>Expenses</b>					
<b>Personnel</b>					
Salaries	1,743,727.00	184,532.15	1,759,891.02	16,164	101 %
Payroll Taxes	125,732.00	10,625.32	131,451.93	5,720	105 %
Health & Dental Insurance	163,061.00	16,012.64	178,920.74	15,860	110 %
Life & Disability Insurance	17,817.00	1,544.77	18,624.79	808	105 %
Retirement Benefits	102,869.00	7,918.30	102,996.70	128	100 %
Workers Comp	8,000.00	465.83	5,303.22	(2,697)	66 %
LTC Insurance	12,588.00	279.86	839.58	(11,748)	7 %
<b>Total Personnel</b>	<b>2,173,794.00</b>	<b>221,378.87</b>	<b>2,198,027.98</b>	<b>24,234</b>	<b>101 %</b>
<b>Services</b>					
Contractual Services	2,423,359.00	185,032.78	2,631,208.88	207,850	109 %
Accounting Services	119,558.00	8,272.29	117,445.53	(2,112)	98 %
Audit Fees	24,000.00	0.00	25,600.00	1,600	107 %
Payroll Fees	7,480.00	462.00	5,815.00	(1,665)	78 %
Legal Fees	7,500.00	0.00	5,333.00	(2,167)	71 %
IT Support	25,000.00	785.25	11,374.25	(13,626)	46 %
Time Tracking Fees	750.00	0.00	0.00	(750)	0 %
FSA/HR Fees	1,200.00	(261.00)	1,100.41	(100)	92 %
<b>Total Services</b>	<b>2,608,847.00</b>	<b>194,291.32</b>	<b>2,797,877.07</b>	<b>189,030</b>	<b>107 %</b>



	Annual Budget	Current Month Actual	Year To Date Actual	Variance YTD vs Annual Budget	% of Annual Budget
<b>Travel &amp; Meeting</b>					
Hotel Expenses	96,000.00	39,257.76	161,480.01	65,480	168 %
Speaker/ Consult. Fees	4,000.00	0.00	8,600.00	4,600	215 %
AV rental & other meeting	34,900.00	31,709.75	60,814.30	25,914	174 %
Board / Comittee Travel	5,000.00	4,551.70	8,784.22	3,784	176 %
Speaker / Consult. Travel	2,000.00	0.00	0.00	(2,000)	0 %
Business Sponsored Meals	3,000.00	4,106.49	11,722.44	8,722	391 %
Steering Committee Travel & Suppo	59,300.00	450.00	7,350.00	(51,950)	12 %
Conference IT Platforms	44,500.00	0.00	31,195.30	(13,305)	70 %
Staff Travel	86,915.00	40,054.13	146,548.30	59,633	169 %
<b>Total Travel &amp; Meeting</b>	<b>335,615.00</b>	<b>120,129.83</b>	<b>436,494.57</b>	<b>100,880</b>	<b>130 %</b>
<b>Other Expenses</b>					
Office Supplies	7,300.00	1,218.98	9,020.34	1,720	124 %
Small Equipment	1,000.00	0.00	1,851.13	851	185 %
Server / Web Maintenance	10,240.00	724.48	5,386.81	(4,853)	53 %
Printing (service & material)	6,300.00	0.00	6,025.97	(274)	96 %
Postage	800.00	104.18	1,305.38	505	163 %
Internet Fees (DSL)	6,220.00	1,489.23	6,413.14	193	103 %
Telephone	9,850.00	748.15	7,731.20	(2,119)	78 %
Conference Calls	8,783.00	726.99	9,422.58	640	107 %
Graphic and Design	5,192.00	361.39	1,108.32	(4,084)	21 %
Bank Fees	30,200.00	2,434.56	30,357.07	157	101 %
Dues, Fees & Registrations	40,523.00	344.99	24,789.99	(15,733)	61 %
Subscription / Publications	500.00	416.67	1,799.12	1,299	360 %
Insurance - Prof Liab/Hazard	19,717.00	1,474.91	17,299.54	(2,417)	88 %
Rent Expense	67,688.00	4,927.89	56,543.01	(11,145)	84 %
Parking	6,901.00	701.64	7,213.62	313	105 %
Cleaning / Maintenance	2,712.00	216.00	2,592.00	(120)	96 %
Miscellaneous Expense	1,000.00	82.77	1,883.81	884	188 %
Racial Equity and Social Justice	10,000.00	0.00	3,047.00	(6,953)	30 %
Staff Professional Development	4,000.00	2,437.89	3,659.47	(341)	91 %
Photography services	0.00	4,800.00	10,494.00	10,494	0 %
Depreciation	20,435.00	1,532.72	19,357.90	(1,077)	95 %
Real Estate & Property Taxes	3,700.00	0.00	1,306.71	(2,393)	35 %
<b>Total Other Expenses</b>	<b>263,061.00</b>	<b>24,743.44</b>	<b>228,608.11</b>	<b>(34,453)</b>	<b>87 %</b>
<b>Total Expenses</b>	<b>5,381,317.00</b>	<b>560,543.46</b>	<b>5,661,007.73</b>	<b>279,691</b>	<b>105 %</b>

	Annual Budget	Current Month Actual	Year To Date Actual	Variance YTD vs Annual Budget	% of Annual Budget
Net Income From Operations	191,233.00	(168,019.82)	379,173.17	187,940	198 %
Unrealized Gain/Loss	0.00	123,868.30	(91,630.08)	(91,630)	0 %
Realized Gain/ Loss	0.00	(30,273.62)	279,759.30	279,759	0 %
Total Gain/Loss	0.00	93,594.68	188,129.22	188,129	0 %
Excess Revenue Over Expenses	191,233.00	(74,425.14)	567,302.39	376,069	297 %

## FY 22-23: Sources of Revenue

Membership	\$1,650,867.24
Technical Assistance	\$1,281,249.98
NCI	\$1,133,765.76
SELN	\$1,084,021.25
CoP Expansion	\$432,600.30
IDD/MH	\$280,000.00
Administration	\$84,736.84
Publications	\$46,939.52
Culture of Quality	\$46,000.00
<b>TOTAL</b>	<b>\$6,040,180.89</b>

