



Developmental Disabilities Administration (DDA) Updates

Bernard Simons, DDA Deputy Secretary

April 29, 2022



Agenda



Opening Remarks

Update on ARPA Resources

National Core Indicators[®] Staff Stability Survey 2022

Appendix K and Reopening Transition Planning

- Individuals and Families
- Providers
- CCS Agencies

COVID-19 Response and Resources



Update on ARPA Resources

- <u>Supplemental Payments</u> to providers present as a possible alternative to ARPA noncompetitive grants pending CMS approval
 - Criteria for these eligible expenditures are being established as required by CMS and will be tracked in GrantVantage
 - Providers will have an opportunity to update their application in accordance with the criteria as needed
- MDH will be developing **Competitive Grant Applications**.
 - Eligibility is for DD community organizations to expand supports and innovative practices and services
 - Grants are being designed with input from members of the DD Coalition





National Core Indicators[®] (NCI) Staff Stability Survey 2022

- The National Core Indicator Staff Stability Survey 2022 will replace your current requirement under the Maryland Health General Code Ann.§ 7-306 that states Providers shall submit a "wage survey" by the latter of:
 - (i) 60 days after the last day of the pay period for which the data is requested; or
 - (ii) 60 days after receipt of a request from the Administration for wage survey information
- Your agency's NCI Staff Stability Survey must be completed by June 30, 2022.
- For questions, contact Leslie Stusiak, Director of Provider Services <u>Leslie.Stusiak@Maryland.gov</u>.



Appendix K Extension to June 30, 2022

- Those flexibilities scheduled to terminate on March 31, 2022 were extended to June 30, 2022
- Current guidance for these flexibilities has been updated on the DDA website: <u>health.maryland.gov/dda/Pages/DDA_Appendix_K.aspx</u>
- While this extension provides more time, planning for the transition remains important and discussions should be occurring now with teams



Deputy Secretary's Update–Appendix K and Reopening Transition Planning

Appendix K and Reopening Transition Planning for:

- Individuals and Families
- Providers
- CCS Agencies



Appendix K and Reopening Transition Planning:

Individuals and Families





What does unwinding Appendix K mean and what is important for me to know about this?

- Appendix K is the approval from CMS to use a number of flexibilities that supported us during the COVID-19 pandemic. We learned a lot through these flexibilities and because of that many were included in the approved Waiver Amendment #3. This means some of these flexibilities will be continued rather than ending on June 30, 2022
- Understanding if the flexibilities you are using are continuing or ending is really important for planning for your supports and any changes after June 30, 2022. Your CCS and providers can help you understand these options
 Reference: Appendix K and Executive Orders Flexibilities - March 31, 2022



What recommendations or advice do you have as I am thinking about services that I or my family member will need after June 30, 2022? Areas that might be important for you to consider as programs and services are

reopening or increasing attendance include:

- What meaningful day activities and services were used prior to and during the pandemic that I would like to continue?
- What flexible weekly meaningful day schedule might work best?
- Did I benefit or enjoy receiving any supports virtually?
- Do I want to continue to receive some of my supports virtually?



If I have hired family members as staff during the pandemic, what do I need to do before the end of Appendix K?

- If you are self-directing your services and want to continue to employ your family members as staff <u>after</u> June 30, 2022, as permitted under the program, you will need to be sure they have all of their *required trainings* <u>and</u> *Family As Staff Form* completed <u>before</u> June 30, 2022
- Training requirements for family members had been waived during Appendix K so this planning is really important to ensure updated/current for payment after June 30, 2022
- Participants can employ a relative after June 30, 2022 for the following services only: Community Development Services; Ongoing Job Supports/Follow Along; Nursing Support Services; Personal Supports; Respite Care Services; Support Brokers Services; Supported Living; and Transportation as permitted by the approved programs

Reference: Self-Directed Services - Family As Staff Form Guidance



Do I need to update my PCP before June 30, 2022 if I want to continue to employ family members hired during the pandemic?

- No. The DDA has updated the Family As Staff form to identify family members. This can be used in place of a plan revision
- This form and guidance can be accessed here: https://health.maryland.gov/dda/Pages/sdforms.aspx
- Annual PCPs due July 1, 2022 and later must have the required form



What do I need to know or do if I am a Transitioning Youth (TY) on the Autism Waiver and want to be considered for the DDA services?

- Individuals who are TY eligible for July 2020, July 2021, and July 2022 have until June 30, 2022 to complete and submit the DDA waiver application to be considered for DDA funding services
- If you are TY eligible and have not completed the DDA waiver application process by June 30, 2022, you will be placed on the DDA waiting list for services
- For any questions or assistance, please contact your DDA Regional Office Transitioning Youth lead staff

Reference: Autism Waiver Transitioning Youth Guidance - Revised November 17, 2021



What do I need to know or do if I am a Transitioning Youth (TY) but I am not on the Autism Waiver and want to be considered for the DDA services?

- Individuals who are TY eligible for July 2020, July 2021 and July 2022 have until June 30, 2022 to complete and submit the DDA waiver application to be considered for DDA funding services
- If you are TY eligible and have not completed the DDA waiver application process by June 30, 2022, you will be placed on the DDA waiting list for services
- For any questions or assistance, please contact your DDA Regional Office Transitioning Youth lead staff



Appendix K and Reopening Transition Planning:

Providers





If a person does not want to return to in-person services after June 30, 2022, are they able to use virtual supports through the waiver as the sole method of service delivery?

- No. The DDA's Waiver Amendment #3 specifies that virtual support cannot comprise the entirety of the service to promote community engagement and the goals of the HCBS setting final rule
- The PCP for each person should identify how they want to receive services including the amount of virtual supports they prefer to complement in-person supports provision. There is no set minimum amount of in-person services.



Post-Appendix K, what is required for submitting or updating a Program Service Plan (PSP)?

- Providers who are interested in continuing some or all of the retained service modalities permitted under Amendment #3, must ensure that they have these approved by updating and submitting their PSP to the DDA Provider Services
- These requests <u>must</u> be submitted <u>before</u> June 30, 2022 in order to continue these after the Appendix K. The DDA remains committed to working with providers through this process for providers who submit by this due date. <u>Examples of required PSP updates</u>: Shared/dedicated hours, virtual supports and supports during an acute care hospital stay



What happens after June 30, 2022 when a person receiving residential supports also wants virtual day supports? Can they get two waiver services at the same time?

- Meaningful day service and residential dedicated supports <u>cannot</u> be provided at the same time
- Waiver Amendment #3 provides the use of dedicated supports/shared hours or add-on hours prior to and after meaningful day virtual supports
- If the use of dedicated supports/shared hours or add-ons is not in a person's plan, these services do need to be included and approved by completing a revised PCP

Reference: <u>Residential Services: Use of Dedicated Supports During Meaningful Day Hours</u>



Is the flexibility for billing less than the minimum hours of meaningful day service for the full day continuing or when will this end?

- The current emergency regulation and the Appendix K provides the authority for providers to deliver fewer than the minimum hours required for billing for meaningful day services
- This flexibility, which requires a <u>minimum of</u> **3** hours as of April 1, 2022, will end on June 30, 2022. Transition planning should be occurring to best support individuals



Can Appendix K residential retainer days be accessed through June 30, 2022 and used for absences due to vacation?

- In response to provider requests for residential retainer days post-December 31, 2021, MDH is aligning the expiration date consistent with other Appendix K flexibilities
- MDH is also seeking guidance from CMS to expand the definition of residential retainer days to include vacation days
- Pending approval for this expanded definition, providers should record absences using Vdays or C-days in PCIS2 to delineate the absences
- Residential retainer days are limited to a total of 60 days as well as the federal requirements associated with the guardrails

Reference: DDA Residential Retainer Day extension through June 30, 2022



Appendix K and Reopening Transition Planning:

Coordinators of Community Services





Appendix K and Reopening Transition Planning: Coordinators of Community Services

Do all plans need to be revised to remove Appendix K flexibilities after they expire?

- No. Appendix K flexibilities that will no longer apply should be removed in the next Revised or Annual PCP, whichever occurs first, if not already reflected
- People self-directing and providers will not be able to pay or bill for Appendix K flexibilities that will no longer apply after June 30, 2022
- PCP updates should be prioritized for situations where there is a new health and safety assessed need for services or when providers are being added to ensure authorization for these changes



Appendix K and Reopening Transition Planning: Coordinators of Community Services

For individuals who want to continue with virtual supports as part of how they receive services, after June 30, 2022, is a full plan revision required?

- No. Individuals should be supported by confirming this interest and this can be updated by the provider in the individual's Service Implementation Plan (SIP)
- At the annual PCP, this interest would be reflected in the plan as well as in the SIP
- Virtual supports are available to complement in-person supports but cannot comprise the entirety of the service

Appendix K and Reopening Transition Planning: Coordinators of Community Services

To support reopening and transition planning, are full team meetings expected before June 30, 2022?

- No, unless there are significant changes anticipated.
- Through monthly monitoring visits and contact, individuals should be supported around how they are using various flexibilities that may be ending with the Appendix K.
- In addition, individuals should be supported around considerations for resuming services and programs that are reopening or for considering other interests.



Maryland Department of Health

LTSS*Maryland* - DDA Module Transition Update



LTSS*Maryland* - DDA Module Transition Update

How many providers have or will be transitioning into LTSS*Maryland*-DDA Module this spring?

- 11 providers in April, 6 providers in May, 5 providers in June
- Providers from each region are represented in the transition
- This represents approximately 3,000 people across 18 different services

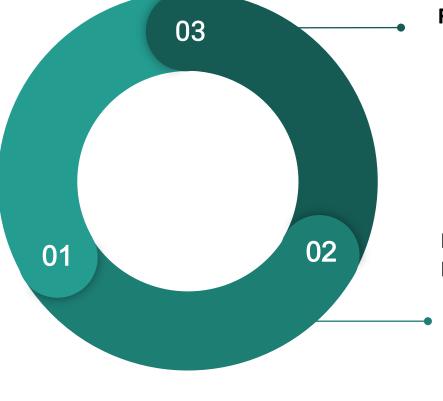


LTSS*Maryland* - DDA Module Transition Update

How is the MDH supporting providers to transition?

Providers Assess Interest and Readiness to Transition

- LTSSMaryland- DDA
 Module Playbook
- Providers completed a Pilot Interest Survey
- Providers and Regional Offices work in partnership to set transition scope and timeline



Feedback Loops with Transitioning Providers

- Early Adopter Group monthly meetings
- Regional Offices weekly meetings
- LTSS*Maryland* operations workgroup
- Launching in May LTSSMaryland Lunch and Learns

MDH Structures to Support Provider Readiness

- 4 Workstreams to Support Readiness
- Non-EVV Billing Training for Piloting Providers
- MPS and DDA Team-Approach to Troubleshooting

LTSS*Maryland* - DDA Module Transition Update

Do residential providers need to document or validate their use of all residential shared hours in order to request and be approved for dedicated supports?

- No. Dedicated hours to support *medical or behavioral support needs or daytime residential support needs* may be approved, utilized and billed regardless of the use of shared hours in the home
- Providers do not need to demonstrate the use of all residential shared hours to request dedicated supports with the one exception of dedicated supports for additional community integration supports (non-clinical requests)

Reference: <u>Residential Services Policy</u>



COVID-19 Booster

- DDA Booster data 6,182 people supported
 - CMRO-3,095
 - ESRO-478
 - SMRO-1,949
 - WMRO-660
 - Increase of 482 since the last webinar in March



- Local Health Departments for testing and Personal Protective Equipment (PPE) supplies
- Find a vaccination site and make an appointment near you <u>here</u> at covidvax.maryland.gov or call 1-855-MD-GOVAX



Upcoming Monthly Webinars

Please join us for all of our 1:00 p.m. Friday webinars: To register for Monthly Webinars with Deputy Secretary Bernie Simons:

May 27 June 24 July 29 August 26 September 30 October 28 November 17 December 16

https://attendee.gotowebinar.com/registe r/6873417036092171790

After registering, you will receive a confirmation email containing information about joining the webinar.



Questions



