



#### Developmental Disabilities Administration (DDA) Waiver Amendments #3 2020

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Welcome

## **Today's Purpose**

- To share update on LTSS*Maryland* Transition
- To share the purpose of Waiver Amendments #3 2020
- To share examples of language being added, reorganized, and proposed changes
- To share information related to the public comment process



#### **Waiver Introduction**



## Overview What are the DDA Waivers?

The Developmental Disabilities Administration administers the following Waiver Programs on behalf of Maryland Medicaid:

Family	Community	Community
Supports	Supports	Pathways
Waiver (FSW)	Waiver (CSW)	Waiver (CPW)
<ul> <li>Children birth to 21 years</li> <li>Various Support Services</li> <li>Service Cap of \$12,000 initially</li> </ul>	<ul> <li>Children and adults</li> <li>Meaningful Day and Support Services</li> <li>Service Cap of \$25,000 initially</li> </ul>	<ul> <li>Children and adults</li> <li>Meaningful Day, Support, and Residential Services</li> </ul>



# Overview Medicaid Waiver Application Components

Main	Purpose of HCBS Waiver Program, Amendment, and Transition Plan
Appendix A	Waiver Administration and Operations
Appendix B	Participant Access and Eligibility (Target group, number of participants, Medicaid eligibility, and LOC)
Appendix C	Participant Services (Scope, requirements, limits, service delivery models, and provider qualifications)
Appendix D	Participant-Centered Service Planning and Delivery
Appendix E	Participant-Direction of Services
Appendix F	Participant Rights (Medicaid Hearing, CRC, and Complaints)
Appendix G	Participant Safeguards (Medications, Restraints, Restrictions)
Appendix H	Quality Improvement Strategy
Appendix I	Financial Accountability (Payment methods, Audits)
Appendix J	Cost-Neutrality Demonstration



#### **DDA Amendment #3 Purpose**



Purpose:

- Update LTSS*Maryland* transition
- Update Waiver Program application language
- Reorganize information for better understanding
- Update program slots and streamline eligibility
- Review and enhance service options
- Update rates, units, and add geographical differential



Purpose and Waiver Administration and Operations

## Main and Appendix A



LTSS*Maryland* Transition Update:

- Until services are transitioned, participants will receive a combination of new services and equivalent legacy service to ensure that their needs and preferences, as documented in the person-centered plan (PCP), are met
- Until the DDA billing and payment system is fully transitioned into LTSSMaryland, the DDA will be operating in two systems: LTSSMaryland and the legacy Provider Consumer Information System (PCIS2)
- Person-centered plans will be completed and approved in LTSSMaryland, and services will be authorized and billed through PCIS2 until they are transitioned



Participant Access and Eligibility

#### **Appendix B**



Eligibility Updates:

- Updates to language
- Reorganize information for better understanding
- Updates to targeting criteria
- Update information to reflect LTSS*Maryland* processes
  - For example: LTSSMaryland provides alerts and generates reports related to status of annual LOC re-evaluations



Eligibility Updates:

- Remove cost cap for Family Supports and Community Supports Waiver
- Focus each wavier for a targeted group
  - Family Supports Waiver Children up to age 21
  - Community Supports Waiver Individuals 18 years of age and older
  - Community Pathways Waiver Individuals 18 years of age or older in need of residential services

Note: All current participants, regardless of age, will remain in their current Waiver program. This new eligibility criteria will only apply to new applicants as of the effective date for the Waiver amendments



Waiver Program Slots:

- Updated Community Supports and Community Pathways Waiver program's slots based on utilization
- Increased Transitioning Youth slots for Community Supports Waiver



Participant Services

Appendix C



All Services

• Language clarified and reorganized to inform for example:

"Assistive technology and services includes: 1. Assistive technology needs assessment 2. Acquisition of assistive technology 3. Installation and instruction on use of assistive technology; and

4. Maintenance of assistive technology"



• Language clarified and reorganized to inform for example:

"If the requested Behavioral Support Services, or Behavior Plan, restricts the participant's rights, as set forth in Title 7 of the Health-General Article of the Maryland Annotated Code or COMAR Title 10, Subtitle 22, then the need for the restriction must be set forth in the participant's behavior plan in accordance with applicable regulations and policies governing restrictions of participant rights, behavior plans, and positive behavior supports"



• Language clarified and reorganized to inform for example:

*"This Waiver program service includes provision of* 

- 1. Direct support services, for provision of services as provided in Sections A-G above; and
- 2. The following services provided in combination with, and incidental to, the provision of this Wavier program service:
  - *a.* Transportation to and from and within this Waiver program service;
  - b. Delegated nursing tasks, based on the participant's assessed need;
  - c. Behavioral support services, based on the participant's assessed needs;
  - d. Personal care assistance, based on the participant's assessed need."



• Language clarified and reorganized to inform for example:

*"If direct support staff perform delegated nursing tasks as part of this Waiver program service, then:* 

- 1. The participant must receive Nurse Case Management and Delegation services under this Waiver program service; and
- 2. The delegated nursing tasks:
  - a. Must be provided by direct support staff who are currently certified as a Medication Technician by the Maryland Board of Nursing; and
  - b. May not compromise the entirety of this Waiver program service."



- Language clarified and reorganized to inform for example:
  - Service with transition dates where updated

"Until the service transitions to the LTSSMaryland system, Community Development Services daily service units are not available:..."

• Nursing services references were updated



• Language clarified and reorganized to inform for example:

**Community Development Services** 

"The level of staffing and meaningful activities provided to the participant under this Waiver program service must be based on the participant's assessed level of service need. Based on the participant's assessed need, the DDA may authorize a 1:1 and 2:1 staff-to-participant ratio."



• Language clarified and reorganized to inform for example:

"The level of staffing and meaningful activities provided to the participant under this Waiver program service must be based on the participant's level of service need.

- 1. Based on assessed needs, dedicated hours may be authorized for 1:1 and 2:1 staff supports.
- 2. Dedicated hours can be used to support more than one participant if it meets their assessed needs and the following requirements are met:
  - a. The participants are retired, transitioning from one meaningful day service to another, recovering from a health condition, or receives less than 40 hours of meaningful day services;
  - b. Support is documented in each participant's Person-Centered Plans and provider implementation plan; and
  - c. Dedicated hours are billed for only one participant."



• Language clarified and reorganized to inform for example:

*Under the Self-Directed Services Delivery Model:* 

When a relative, legally responsible person, or legal guardian is providing direct services, a written agreement will be used to identifies people, beyond family members, who will support the participant in making his or her own decision.



Remote Supports

- Added as a service delivery option within some services based on Appendix K experiences
- May be used in combination with in-person direct supports
- Must not isolate the participant from the community or interacting with people without disabilities
- Must be agreed to by the participant and their team
- Must not be used for the provider's convenience



Remote Supports

- Must be delivered using a live, real-time audio-visual connection that allows the staff member to both see and hear the participant
- Must comply with the requirements of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) applicable regulations to protect the privacy and security of the participant's protected health information
- Must not comprise the entirety of the service



Services during hospital or short-term stay added

 "Direct Support Professional services may be provided in an acute care hospital or during a short-term institutional stay for the purposes of supporting the participant's personal, behavioral and communication supports not otherwise provided in that setting. Services may not be duplicative of hospital or short-term institutional services."

Added for the following services: Community Development Services, Day Habilitation, Personal Supports, Supported Living, Community Living – Group Home, and Community Living – Enhanced Supports



Nursing Service Updates:

- Consolidation of current nursing services under one service
- Includes same components as noted under Nurse Consultation, Nurse Health Case Management, and Nurse Case Management and Delegation Services



Employment Services Updates: (Proposed effective July 2021)

- Employment Services' Job Development, Ongoing Job Supports and Follow Along Supports will transition to valued based outcome payments
- Job Development will transition to a one-time job placement milestone payment
- All supports following job placement will be provided under Follow Along Supports (i.e., Ongoing Job Supports and Follow Along Supports will be merged)



Employment Services Updates: (Proposed effective July 2021)

- Follow Along Supports will remain a monthly payment with three different payment levels. These three levels are based upon the number of compensated hours for the participant per month and considerations of significant supports needed
- Participants with significant support needs receive more supports including given up front and throughout their employment. Participants who have a Health Risk Screening Tool (HRST) score of 4 or higher or a Behavioral Plan are considered to have significant support needs



Participant-Centered Planning and Delivery

## **Appendix D**



Participant-Centered Planning and Delivery Updates:

- Updates to language
- Reorganize information for better understanding
- Certification of Coordination of Community Services providers instead of licensing
- Update information to reflect LTSS*Maryland* transition



- During the transition period to LTSSMaryland, the Person-Centered Plan (PCP) detailed service authorization section will identify Waiver program services in LTSSMaryland that meet the individual's goals, needs, and preferences
- Once those services are selected, the Cost Detail Tool is completed, which lists the comparable legacy services that are available through PCIS2, including amount, duration, and scope for the PCP plan year



- For new participants with no service provider selected, the Coordinator of Community Services (CCS) completes the Cost Detail Tool
- For individuals with selected providers, the provider completes the Cost Detail Tool and submits it to the CCS
- For individuals using the self-directed service delivery model, the CCS completes the Cost Detail Tool in addition to the self-directed budget.
- After the CCS reviews and confirms with the individual that the Cost Detail Tool meets their needs and preferences, they upload it in the PCP documentation section so that it is included with the PCP for submission to the Regional Office through LTSS*Maryland*



Participant-Direction of Services

#### **Appendix E**



Participant-Direction of Services Updates:

- Update and reorganization of information for better understanding
- Employer authority added for Participant Education, Training and Advocacy Supports
- Update to Involuntary Termination of Participant Direction to include when:
  - The participant's PCP and/or self-directed services budget has not been submitted to DDA (for DDA's review and approval) in a timely manner and this failure is attributable to the participant or their designated representative;



Participant-Direction of Services Updates:

• Participant-Directed Budget

The following approach must be used for determining a participant's selfdirected budget until the budget process is transitioned to the LTSSMaryland detail service authorization process noted below:

1. The Coordinator of Community Services (CCS) and Team will assess the needs of the participant through a person-centered planning process.;

2. The CCS and Team will develop a Person-Centered Plan to meet those needs and service request (expressed in service units and cost reimbursement services).



Participant-Direction of Services Updates:

Participant-Directed Budget

3. The CCS will complete and submit the DDA Cost Detail Tool with the PCP. The Cost Detail Tool includes all available services and associated rate based on the traditional service delivery model. Annually, if approved by the General Assembly, the DDA applies a Cost of Living Adjustment (COLA) to traditional service rates which is updated in the Cost Detail Tool. The required use of the Cost Detail Sheet for both participants using the selfdirected and traditional service delivery models ensure fair and equitable funding regardless of the service model chosen



Participant-Direction of Services Updates:

• Participant-Directed Budget

4. The CCS submits the Person-Centered Plan with the Cost Detail Tool to the DDA Regional Office for approval.; and

5. Once the PCP and Cost Detail Sheet is approved by the DDA, the participant can then create or finalize their self-directed budget sheet and determine pay rates based on reasonable and customary program standards



Participant-Direction of Services Updates:

Participant-Directed Budget

Effective January 1, 2021, during the initial, revised, and annual PCP planning processes, the participant's self-directed budget will be determined based on the approved LTSSMaryland PCP detailed service authorization. The LTSSMaryland PCP detailed service authorization form includes all available services and associated rate based on the traditional service delivery model. The required use of the LTSSMaryland PCP detailed service authorization for participants, enrolled in either the self-directed services or traditional services delivery models, ensure fair and equitable funding regardless of the service model chosen.



Participant Rights

Appendix F



Participant Rights Updates:

• Update and reorganization of information for better understanding

Upon making a decision affecting an individual's receipt of services funded by the Waiver program, MDH provides a written letter notifying the individual of its adverse decision, including Notice: Medicaid Fair Hearing Rights, as further described below. A copy of the final, signed notice is retained in the individual's file in LTSSMaryland.



Participant Safeguards

## **Appendix G**



Participant Rights Updates:

• Update of information for better understanding

Any method or technique that deprives a participant of any basic right specified in Title 7 of the Health-General Article of the Maryland Annotated Code or other applicable law, (e.g., access to a telephone; right to share room with a spouse; visitors; access to clothing and personal effects; vote; receive, hold, or dispose of personal property; and receive services), except as permitted in regulations.



Quality Improvement Strategy

## **Appendix H**



Quality Improvement Strategy Updates:

• Update of information for better understanding

The DDA Quality Advisory Council is composed of various stakeholders including Waiver program participants, family members, providers, advocacy organizations, and State representatives.



Financial Accountability

## **Appendix I**



Financial Accountability Updates:

- Update of information for better understanding
- Add geographical differential for the following counties: Calvert, Charles, Frederick, Montgomery, and Prince George's County
- Changing all hourly service units to 15-minute units
- Changing the monthly unit for Live-In Caregiver Supports, Support Broker Services, and Employment Services - Co-Worker
   Employment Supports to an Upper Pay Limit



*Cost-Neutrality* 

## **Appendix J**



Financial Accountability Updates:

- Update rates, units, and user estimates
- Add information for Job Development Milestone and Follow Along value-based payments



# **Meaningful Day Rates**

Service	Billing Unit	Star	ndard Rate	Geo	ographical Rate
Community Development Service 2:1 Staffing Ratio	15 minute	\$	18.07	\$	23.25
Community Development Service 1:1 Staffing Ratio	15 minute	\$	11.79	\$	14.77
Community Development Service: Group - (2-4)	15 minute	\$	7.52	\$	9.68
Day Habilitation 2:1 Staffing Ratio	15 minute	\$	18.86	\$	24.26
Day Habilitation 1:1 Staffing Ratio	15 minute	\$	12.31	\$	15.41
Day Habilitation Small Group (2-5)	15 minute	\$	6.45	\$	8.29
Day Habilitation Large Group (6-10)	15 minute	\$	5.59	\$	7.19
Employment Services - Job Development	Upper Pay Limit	\$	4,915.29	\$	5,581.80
Employment Services - Customized Self-Employment	Milestone	\$	474.23	\$	538.54
Employment Services - Follow Along Supports	Monthly	\$	500	\$	500
Employment Services - Ongoing Job Supports	15 minutes	\$	15.88	\$	18.04
Career Exploration Services: Facility Based	15 minutes	\$	5.80	\$	7.62
Career Exploration - Large Group	15 minutes	\$	4.71	\$	5.20
Career Exploration - Small Group	15 minutes	\$	4.90	\$	6.31
Employment Services - Discovery Milestone 1	Milestone	\$	655.37	\$	744.24
Employment Services - Discovery Milestone 2	Milestone	\$	1,966.12	\$	2,232.72
Employment Services - Discovery Milestone 3	 Milestone	\$	1,310.74	\$	1,488.48



## **Support Services Rates**

Service	Billing Unit	Sta	ndard Rate	Ge	ographical Rate
BSS - Brief Support Implementation Services	15 minutes	\$	14.91	\$	17.57
BSS - Behavioral Consultation	15 minutes	\$	30.39	\$	29.97
BSS - Behavioral Plan	Milestone	\$	1,346.64	\$	1,318.14
BSS - Behavioral Assessment	Milestone	\$	1,346.64	\$	1,318.14
Environmental Assessment	Milestone	\$	399.92	\$	430.86
Housing Support Services	15 minutes	\$	14.30	\$	16.24
Nursing - Nurse Case Management and Delegation	15 minutes	\$	21.13	\$	23.22
Personal Supports	15 minute	\$	8.34	\$	11.07
Personal Supports Enhanced	15 minute	\$	10.57	\$	13.23
Respite Care Services - Day	Day	\$	380.12	\$	407.81
Respite Care Services	15 minutes	\$	6.82	\$	6.84



## **Residential Rates**

Service	Billing Unit	Stan	ndard Rate	Geog	raphical Rate
Community Living/Group Home: 1 w/ Overnight Supervision	Day	\$	612.40	\$	787.67
Community Living/Group Home: 2 w/ Overnight Supervision	Day	\$	306.42	\$	394.11
Community Living/Group Home: 3 w/ Overnight Supervision	Day	\$	204.27	\$	262.73
Community Living/Group Home: 4 w/ Overnight Supervision	Day	\$	244.25	\$	314.15
Community Living/Group Home: 5 w/ Overnight Supervision	Day	\$	195.38	\$	251.29
Community Living/Group Home: 6 w/ Overnight Supervision	Day	\$	223.51	\$	287.48
Community Living/Group Home: 7 w/ Overnight Supervision	Day	\$	191.49	\$	246.30
Community Living/Group Home: 8 w/ Overnight Supervision	Day	\$	167.56	\$	215.51
Community Living/Group Home: 1 w/o Overnight Supervision	Day	\$	364.02	\$	468.20
Community Living/Group Home: 2 w/o Overnight Supervision	Day	\$	181.85	\$	233.90
Community Living/Group Home: 3 w/o Overnight Supervision	Day	\$	121.24	\$	155.93
Community Living/Group Home: 4 w/o Overnight Supervision	Day	\$	181.85	\$	233.90
Community Living/Group Home: 5 w/o Overnight Supervision	Day	\$	145.48	\$	187.12
Community Living/Group Home: 6 w/o Overnight Supervision	Day	\$	181.85	\$	233.90
Community Living/Group Home: 7 w/o Overnight Supervision	Day	\$	156.05	\$	200.72
Community Living/Group Home: 8 w/o Overnight Supervision	Day	\$	136.47	\$	175.53
Dedicated Hours for Community Living-Group Home (1:1)	15 minutes	\$	10.00	\$	12.52
Dedicated Hours for Community Living - Group Home (2:1)	15 minutes	\$	15.32	\$	19.71
Community Living - Enhanced Supports: 1 w/Overnight Supervision	Day	\$	909.05	\$	1,138.43
Community Living - Enhanced Supports: 2 w/Overnight Supervision	Day	\$	454.85	\$	569.62
Community Living - Enhanced Supports: 3 w/Overnight Supervision	Day	\$	303.22	\$	379.73
Community Living - Enhanced Supports: 4 w/Overnight Supervision	Day	\$	362.56	\$	454.04
Dedicated Hours for Community Living-Enhanced Supports (1:1)	15 minutes	\$	11.14	\$	13.95
Dedicated Hours for Community Living-Enhanced Supports (2:1)	15 minutes	\$	22.27	\$	27.89



## **Residential Rates**

Service	Billing Unit	Sta	ndard Rate	Geogr	aphical Rate
Shared Living: Level 1	Monthly	\$	3,073.86	\$	3,073.86
Shared Living: Level 2	Monthly	\$	3,528.41	\$	3,528.41
Shared Living: Level 3	 Monthly	\$	4,210.23	\$	4,210.23
Supported Living: 1 w/ Overnight Supervision	Day	\$	591.06	\$	760.23
Supported Living: 2 w/ Overnight Supervision	Day	\$	295.74	\$	380.38
Supported Living: 3 w/ Overnight Supervision	Day	\$	197.15	\$	253.58
Supported Living: 4 w/ Overnight Supervision	 Day	\$	235.74	\$	303.20
Supported Living: 1 w/o Overnight Supervision	Day	\$	351.34	\$	451.89
Supported Living: 2 w/o Overnight Supervision	Day	\$	175.52	\$	225.75
Supported Living: 3 w/o Overnight Supervision	Day	\$	117.01	\$	150.50
Supported Living: 4 w/o Overnight Supervision	Day	\$	175.52	\$	225.75
Dedicated Hours for Supported Living (1:1)	15 minutes	\$	10.00	\$	12.52
Dedicated Hours for Supported Living (2:1)	15 minutes	\$	15.32	\$	19.71



#### **Public Comment Process**



### **Public Comment**

- The official public comments period is from September 1, 2020 through September 30, 2020
- Track change documents regarding the amendment proposals are available on each Waiver program's dedicated Amendment #3 2020 page listed on the next slide
- Public comments can be submitted to <u>wfb.dda@maryland.gov</u> or mailed to DDA Federal Programs at 201 West Preston Street, 4th Floor, Baltimore MD 21201 through September 30, 2020



Family Supports Waiver Amendment #3 – 2020 dedicated page

<u>Community Supports Waiver Amendment #3 – 2020 dedicated page</u>

<u>Community Pathways Waiver Amendment #3 – 2020 dedicated page</u>



#### Next Steps

- Public comment period September 1<sup>st</sup> 30<sup>th</sup> 2020
- Review input and update
- Medicaid final review and approval
- Submission to CMS on November 1<sup>st</sup>
- CMS review -November 1<sup>st</sup> January
- Proposed effective date January 1<sup>st</sup>



## **DDA's Regional Offices**

<b>Region Office</b>	Counties Served	Phone
Nicholas R. Burton Director Central	Anne Arundel County, Baltimore City, Baltimore County, Harford County, Howard County	410-234-8200 TDD: 877-874-2494
Kimberly Gscheidle, Director Eastern	Caroline, Cecil, Dorchester, Kent, Queen Anne's, Somerset, Talbot, Wicomico, and Worcester Counties	410-572-5920 TDD: 1-800-735-2258
Onesta Duke, Acting Director Southern	Calvert, Charles, Montgomery, Prince George's, and St. Mary's Counties	301-362-5100 TDD: 1-888-207-2479
Cathy Marshall, Director Western	Allegany, Carroll, Frederick, Garrett, and Washington Counties	301-791-4670 TDD: 1-888-791-0193



## Questions



