




Member Forum

July 23, 2021

Welcome

- Debbie Bennett, President & CEO, Hillcroft Services, Inc.

Today's Agenda

- DDRS Update – Kim Opsahl, Director, DDRS
 - DSP Rate Increase Implementation Update – Tracy Mitchell, Bradley Associates, CPAs
 - Industry Update - John Barth, Katy Stafford-Cunningham, Brian Carnes and Phillip Parnell, INARF
 - Association Update – Nanette Hagedorn, INARF
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- A decorative graphic at the bottom of the slide consisting of a thick, wavy line that transitions from a light gray color on the left to a bright orange color on the right.

Professional Interest Section Meetings / Professional Development:

- August 3 - Community Supports (10 AM-Noon) / Employment Supports (12:30-2:30 PM)
- August 12 - Financial Management (10 AM-Noon) / Human Resources (12:30-2:30 PM)

Upcoming Member Forum and Board of Directors Meetings:

- August 27 - Member Forum / Board of Directors Meeting - Hybrid - Sheraton Indianapolis Keystone at the Crossing
- September 25 - Member Forum / Board of Directors Meeting - Hybrid - location TBD

Registration for each meeting is available 3 weeks in advance. Recordings and materials will be available on the [INARF Member Portal](#) within 2-3 business days following each meeting.



DDRS Update

Kim Opsahl, Director, DDRS



DDRS Updates

Kim Opsahl, DDRS Director



ALL people are empowered to live, love, work, learn, play and pursue their dreams.





• Before we get started . . .

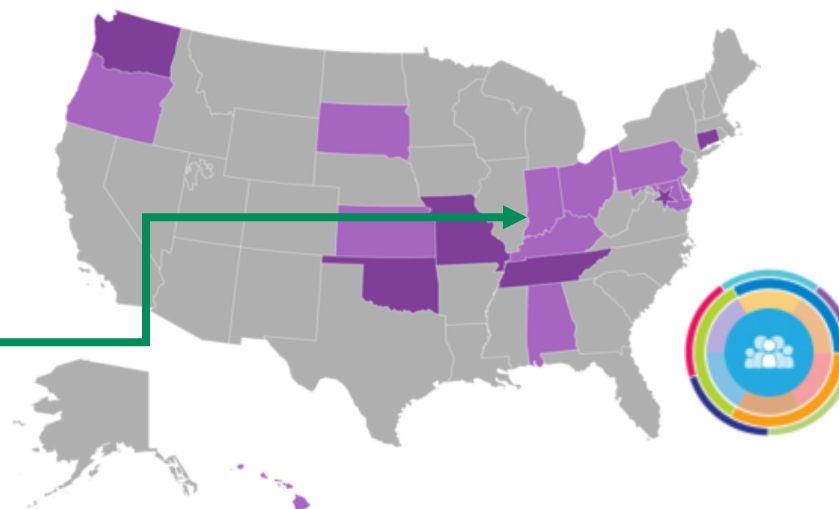
- Appendix K ✓ Approved
- Wage Increase Implementation Guidance ✓ In Development
- Group Home Wage Increase Proposal ✓ Still Under Consideration
- Provider Relief Grants ✓ Update Next Week
- Enhanced FMAP ✓ Hold Tight
- LTSS Reform ✓ DD RS Still NOT Included



•How it Started - 2016



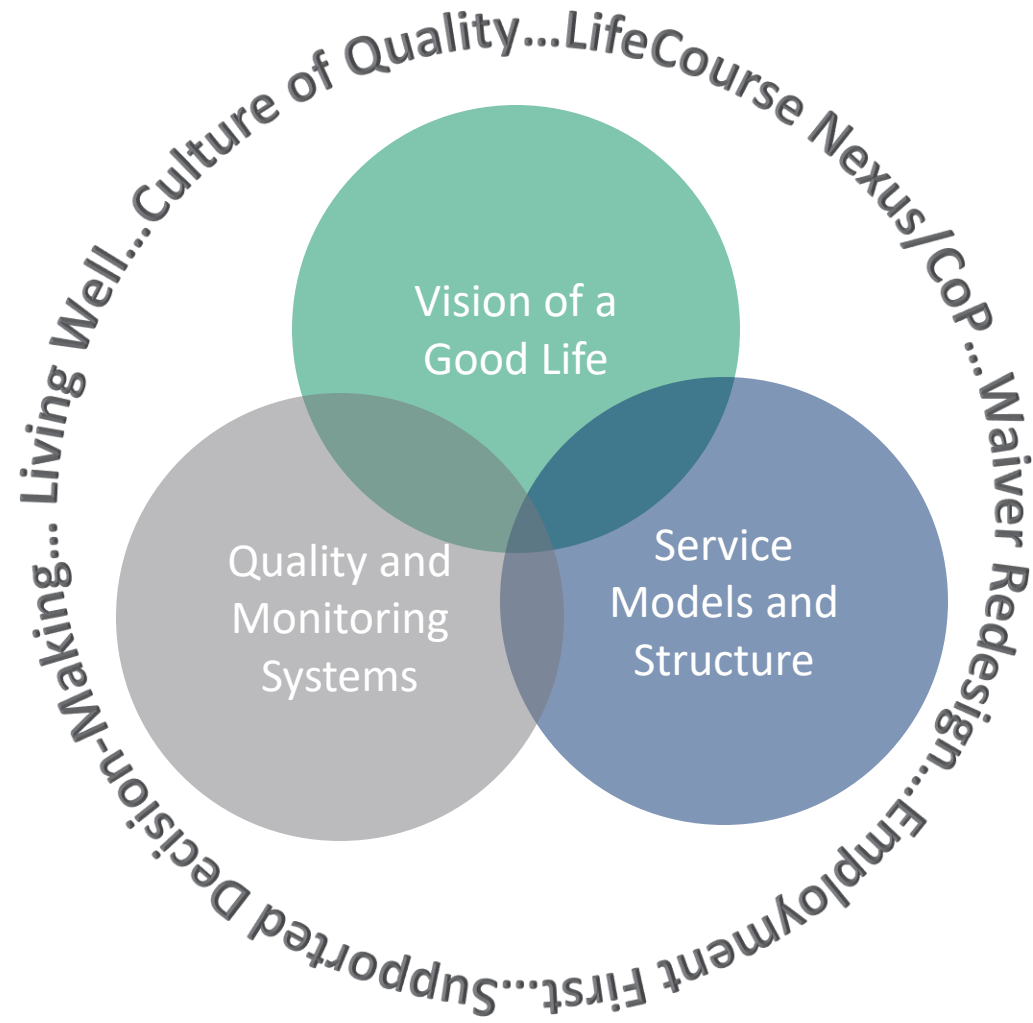
So, We Started Here



SUPPORTING FAMILIES
of individuals with intellectual & developmental disabilities
THE NATIONAL COMMUNITY OF PRACTICE • FUNDED BY THE ADMINISTRATION ON INTELLECTUAL & DEVELOPMENTAL DISABILITIES



• How It's Going





- **So, Where do We Go Next . . .**





I think the biggest thing in self-determination is **listening to what people want** and being able to **help people do what they want** with their lives and to **help them dream** about what it is they want in their life and then being able to **put it into action**

~Betty Williams



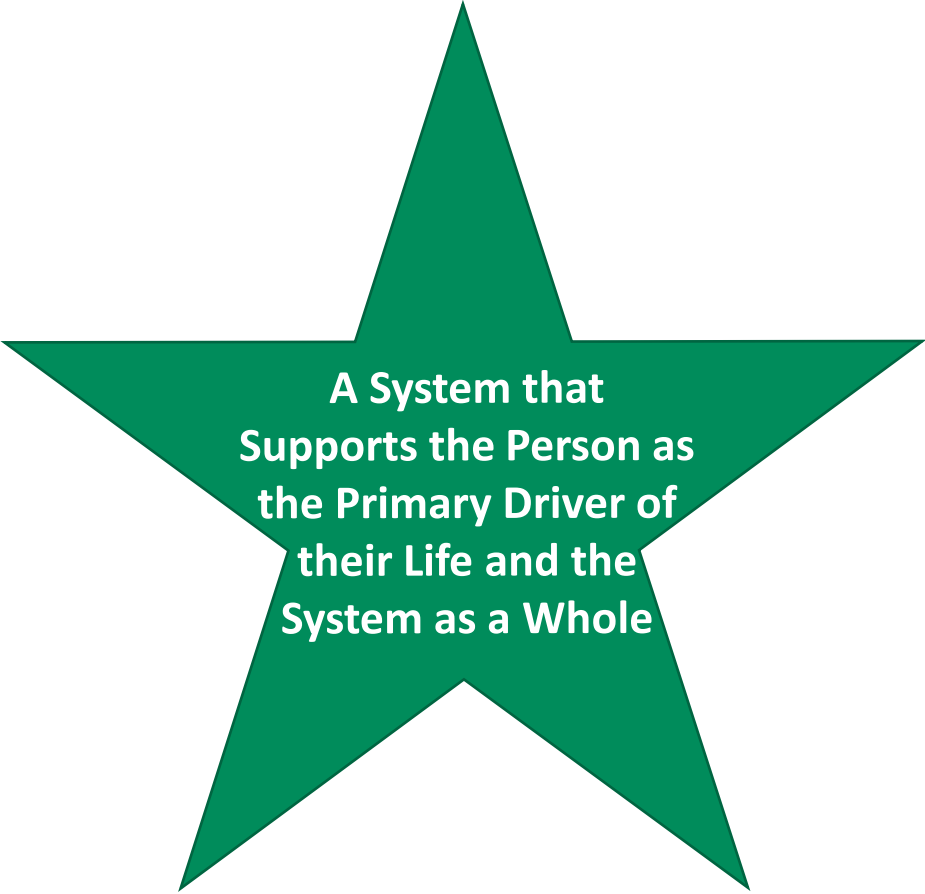


VS





• So, Where do We Go Next . . .



A System that
Supports the Person as
the Primary Driver of
their Life and the
System as a Whole



Self-Advocates' Vision of a Good Life

BE THE CENTER OF OWN LIFE, AS IT RELATES TO PLANNING AND SUPPORTS - IT SHOULD BE ABOUT ME
THINGS THAT CONTRIBUTE TO QUALITY LIFE

DESIGN AN NETWORK AND SUPPORTS THAT SUPPLEMENT WITH PAID STAFF
LIVE WHERE YOU WANT TO LIVE

HOW VARIOUS / PERSONAL OPTIONS FOR INDIVIDUALS WITH DIFFERENT NEEDS, ABILITIES
HAVING HIGH EXPECTATIONS - FROM THE BEGINNING
EXPLORE LEARNING EXPERIENCES / CONTINUING EDUCATION / SUPPORTS AVAILABLE TO ACCESS CONTINUING EMPLOYMENT

OPPORTUNITIES FOR FITNESS, WELLNESS, AND GOOD DIET CHOICES
ACCESS TO TECHNOLOGY INCLUDING ASSISTIVE TECHNOLOGY
ACTUAL CHOICES (VERSUS CONSTRAINT)
LIVE WITH WHO AND WHERE YOU WANT
WAIVER NOT EVERYTHING IN MY LIFE
BEING INCLUDED
ACCESS TO RECREATION
ACCESS TO HEALTHCARE
EDUCATIONAL OPPORTUNITIES BEYOND HIGH SCHOOL
EQUAL AMOUNTS OF EXPERIENCES - BALANCE
SAY WHO PROVIDES SUPPORTS AND HOW
SUPPORT WITH DIFFERENT CHOICES / SUPPORTED DECISION-MAKING
OPPORTUNITY FOR CONTRIBUTION - TO HAVE A VALUED ROLE

JOBS

ACCESS TO COMPETENT STAFF
WE ARE NOT ASKED TO BE THE CENTER OF OUR OWN LIFE - WE ARE ASKED TO BE THE CENTER OF OUR OWN LIFE
WE ARE ASKED TO BE THE CENTER OF OUR OWN LIFE - WE ARE ASKED TO BE THE CENTER OF OUR OWN LIFE
WE ARE ASKED TO BE THE CENTER OF OUR OWN LIFE - WE ARE ASKED TO BE THE CENTER OF OUR OWN LIFE

CHOICES AND OPTIONS
NATURAL, COMMUNITY SUPPORTS
INVOLVED AS MUCH AS POSSIBLE IN THE PERSON CENTERED PLANNING PROCESS

HAVING ROOTS
COMMUNITY MEMBERSHIP - NOT JUST TO BE PART OF THE COMMUNITY
ATTITUDE OF HOPE
ACCESS TO RELIABLE TRANSPORTATION
RELATIONSHIPS - FRIENDSHIPS, PARTNERS
T LOOK ARTIFICIAL
TRANSPORTATION
FRAMEWORK OF REASONABLE EXPECTATIONS
BREAK THE CYCLE OF POVERTY / BUILD ASSETS
EFFECTIVE AND COORDINATED TEAM
DOESN'T LOOK ARTIFICIAL
AUTHENTIC SOCIAL GROUP
ACCESS TO MEDICAL, AND BEHAVIORAL, HEALTH SERVICES
EDUCATED COMMUNITY

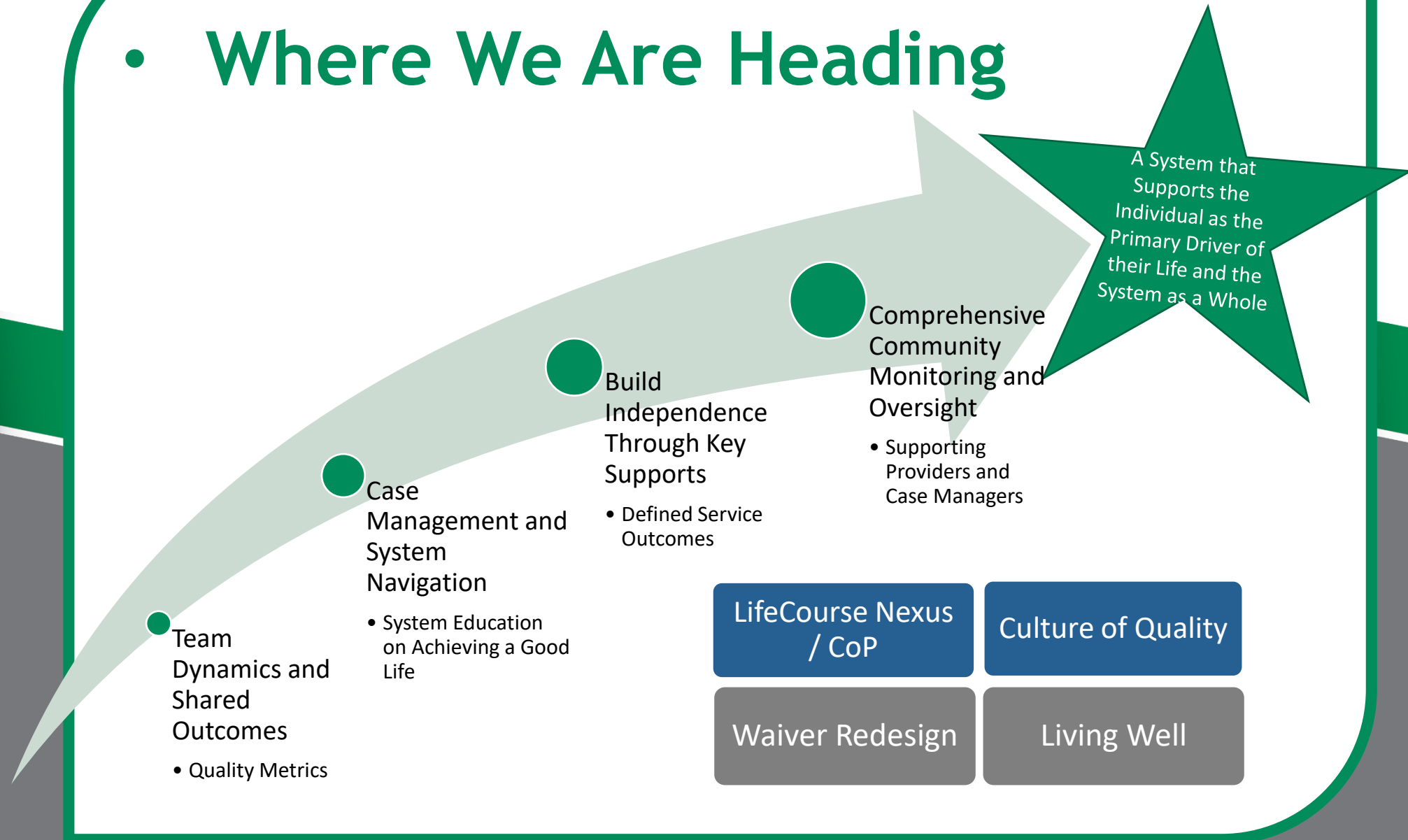


Self-Advocates' Vision of What They Don't Want

LOOKING AT THE DOLLARS AND NOT AT THE PERSON
TO NOT BE TREATED AS A PERSON
DECISIONS DRIVEN BY PROVIDER AND/OR FINANCES
LACK OF CHOICES
ABUSE, NEGLECT, AND EXPLOITATION
LIVING IN A LIFE/UNIVERSE THAT IS PARALLEL TO BUT NOT A PART OF EVERYONE ELSE'S
TURNOVER
INCONSISTENCY IN PAID SUPPORTS
CONGREGATE HOUSING
NOT BEING VALUED AS A HUMAN BEING
FRAZZLED AND STRESSED PARENTS



• Where We Are Heading





- ## The Role of Provider and Case Managers

HCBS Waiver Goals and Objectives:

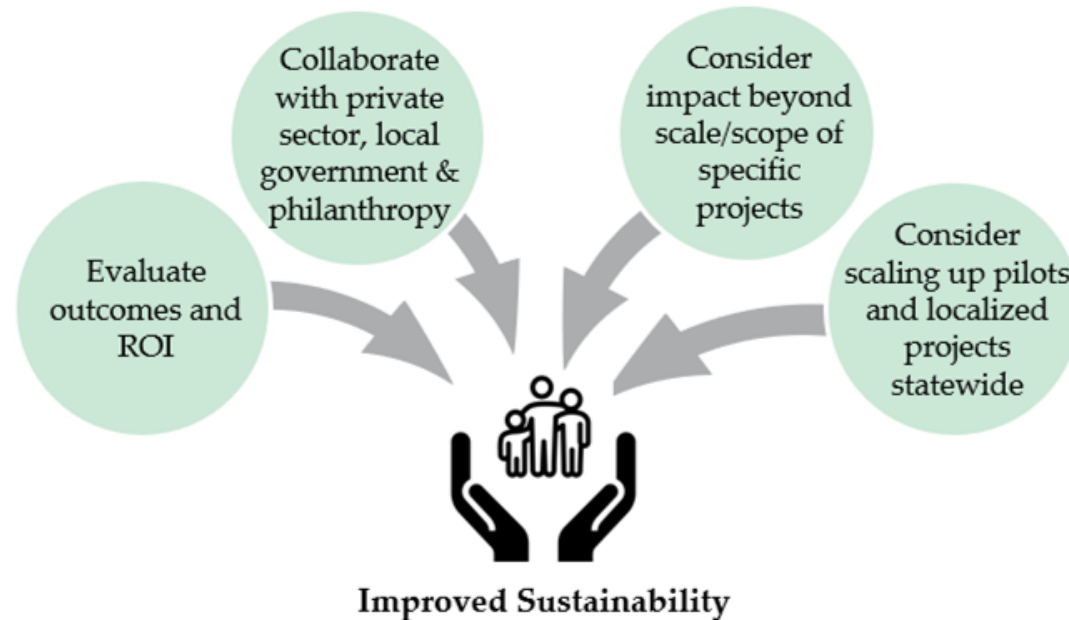
- Provide access to **meaningful and necessary services and supports in the home and community** rather than in an institution
- Seeks to implement services and supports that **respects the participant's preferences, aspirations, and health and safety needs**
- Ensures that services are **cost effective**
- Facilitates the participant's **involvement in the community** where he or she lives and works
- Facilitates the participant's **development of social relationships** in his or her home and work communities
- Facilitates the participant's **independent living**.



FSSA Investment Framework

FSSA established overarching goals for federal funding to enable equitable, effective, efficient, and sustainable supports to improve health outcomes, fill unmet needs, and support all Hoosiers.

Overarching Goals & Considerations





Background: Enhanced FMAP Through the American Rescue Plan Act

Provides a temporary 10% enhanced FMAP on state Home and Community Based Services expenditures from April 1, 2021 through March 31, 2022

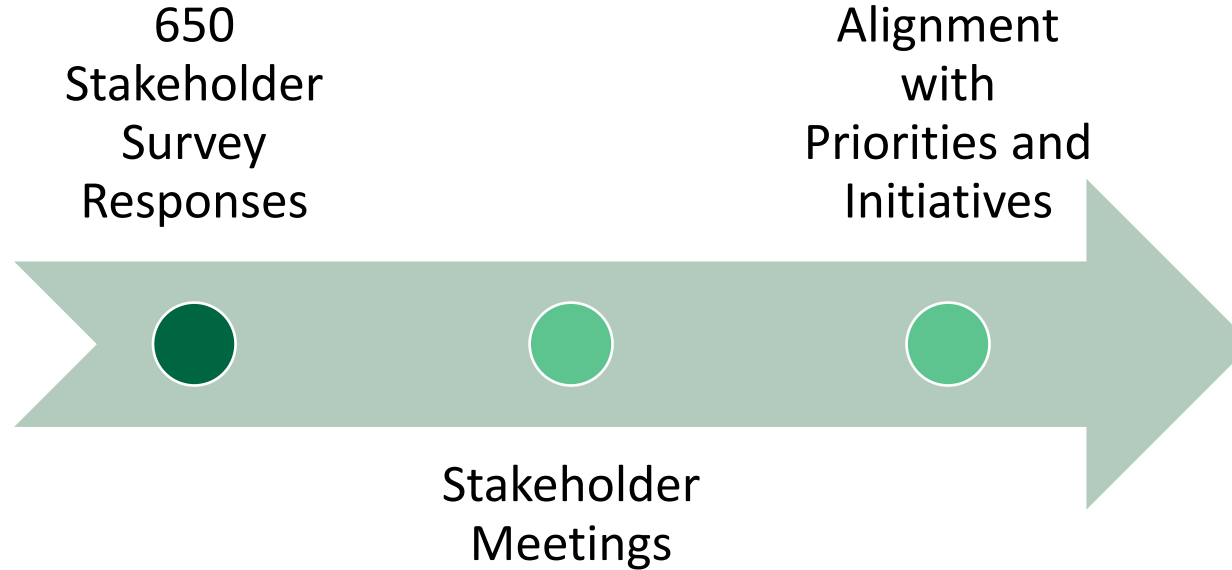
Enhanced funds can be used through March 31, 2024 to enhance, expand, or strengthen Home and Community Based Services

States are required to submit an initial plan for these funds and provide quarterly updates



FSSA's Approach to Enhanced FMAP

FSSA developed a Spending Plan for the use of enhanced FMAP available via ARPA to improve HCBS delivery and health outcomes for all Hoosiers, ensuring alignment with stakeholders, partners, and FSSA divisions.



State of Indiana
Indiana Family and Social Services Administration

Proposed Spending Plan for
Implementation of the American
Rescue Plan Act of 2021, Section
9817

State of Indiana
Submitted to The Centers for Medicare and Medicaid Services

July 9, 2021



HCBS Enhanced FMAP

FSSA developed a Spending Plan for the use of enhanced FMAP available via ARPA to improve HCBS delivery and health outcomes for all Hoosiers, ensuring alignment with stakeholders, partners, and FSSA divisions.

Stakeholder Survey Results	
Respondent Type	Percent
HCBS industry provider	35%
Other	20%
Family Caregiver	17%
Consumer (HCBS recipient or potential recipient)	10%
Direct service professional	9%
Consumer advocate representative	6%
HCBS industry/association representative	3%

Top 5 HCBS Priorities Identified by Respondents	
Workforce Recruitment	49%
Expand HCBS Provider Capacity	45%
Reduce or Eliminate Waiting List/Increase HCBS Waiver Slots	32%
Caregiver Training and Respite	28%
Leave Benefits	24%

Percent of Respondents

Spending Plan Summary	
Plan Component	Percent Allocated
Stabilize Provider Network	20%
Provider & workforce stabilization grants to address COVID-related expenses & bonus pay**	
Workforce Support	25%
Recruit & retain workforce Private Duty Nursing to provide in-home care**	
Enhance HCBS Services	20%
Address social needs by building integrative partnerships with state & community entities Presumptive eligibility model to improve access**	
Build Provider Capacity	30%
Build capacity to deliver HCBS Right-size institutional networks**	
Support Families & Caregivers	5%
Caregiver training for waiver participants families Caregiver survey to understand & address gaps in existing mental health supports**	
Enhanced FMAP Funding Range*	
\$670.6 M - \$877.6 M	

*Estimations based on 0% to 33% of spend in the first year.

**Examples are provided for illustrative purposes and are not an exhaustive list of potential activities and strategies

backhome.indiana@fssa.in.gov



I/DD Industry Fiscal Update

Tracy Mitchell, Bradley Associates, CPAs

DSP Wage Verification

Tracy Mitchell
Bradley Associates
July 23, 2021

DSP Wage Rate Increase

The rate increase of 14% effective July 1, 2021 for certain waiver services is intended to provide wage increases for direct support professionals. The legislature expects us to be able to show that this money got to its intended recipients, direct support professionals!

DSP Wage Rate Increase

The rate increase applies to any of the following services:

- (A) Adult day services – Level 1, 2 and 3.
- (B) Prevocational services.
- (C) Residential habilitation and support (Hourly).
- (D) Respite care services.
- (E) Extended services.

DSP Wage Rate Increase

(F) day habilitation.

(G) Workplace assistance.

(H) Residential habilitation and support (RHS Daily).

(I) Transportation services.

(K) Participant assistance and care, as defined in the family supports Medicaid waiver.

(L) Facility based support.

DSP Wage Rate Increase

The amount of the increase in the reimbursement rate is the reimbursement rate in effect as of June 30, 2019, for the services listed in subsection (b)(2) multiplied by five percent (14%).

Example:

Facility Habilitation Group (6:1) rate currently was \$4.96 per hour. It has increased to \$5.65 per hour.

DSP Wage Rate Increase

The rate increases effective July 1, 2021 were communicated via DDRS Update on June 28, 2021 and updated on July 8, 2021. This includes an increase in the FSW cap to \$19,614.

NOAs are to be revised by August 1, 2021. You should receive new NOAs reflecting new rates and limitations next week if you have not received them already.

DSP Wage Rate Increase

An authorized service provider shall use at least ninety-five percent (95%) of the amount of the increase in the reimbursement rate to increase the wages, payroll taxes and benefits paid to direct care staff who:

- (1) are employed by the authorized service provider to provide services in Indiana; and
- (2) provide support services listed in subsection (c)(2); and
- (3) Are paid on an hourly basis.**

DSP Wage Rate Increase

In the budget language, Wages are defined as total compensation, including paid time off and training, **less overtime and shift differential** for direct care staff providing services to individuals receiving the services described in subsection (c)(2) as reported on the provider's payroll records.

DSP Wage Rate Increase

The budget language also defines “benefits” as: **allowances and services provided by employers to employees as compensation that is in addition to salary and wages, including but not limited to paid time off, health insurance, life insurance, worker's compensation, and qualifying pensions.**

DSP Wage Rate Increase

Providers shall maintain all books, documents, papers, accounting records, and other evidence required to support the reporting of payroll information for increased wages to direct care staff.

DSP Wage Rate Increase

Providers shall make these materials available at their respective offices at all reasonable times and for three (3) years from the date of final payment for the services listed in subsection (c)(2) for inspection by the state or its authorized designees.

Providers shall furnish copies at no cost to the state if requested.

DSP Wage Rate Increase

If a provider does not use at least ninety-five percent (95%) of the rate increase to increase wages, payroll taxes and benefits paid to direct care staff, the office shall recoup part or all of the increase in the reimbursement rate that the provider receives as provided in subsection (h).

DSP Wage Rate Increase

The office may recoup the difference between ninety-five percent (95%) of the amount received by a provider as a result of increased reimbursement rates and the amount of the increase that is actually used by the provider to pay an increase in wages, payroll taxes and benefits to direct care staff.

The remaining five percent (5%) may be retained by the provider to cover administrative and overhead costs.

DSP Wage Rate Increase

Impact of DSP Waiver Increase									
		Current	Current	Current	Current	Current	Current	Current	
		Average	Average	Average	Average	Average	Average	Average	
		Wage	Wage	Wage	Wage	Wage	Wage	Wage	
		<u>\$10 per Hr</u>	<u>\$11 per Hr</u>	<u>St Avg per Hr</u>	<u>\$12 per Hr</u>	<u>\$13 per Hr</u>			
RHS HourlyRate		21.97	21.97	21.97	21.97	21.97			
Rate increase		14%	14%	14%	14%	14%			
New RHS Hourly Rate		25.05	25.05	25.05	25.05	25.05			
Increase in RHS Hourly Rate		3.08	3.08	3.08	3.08	3.08			
95% Threshold		95%	95%	95%	95%	95%			
DSP Wage Spend		2.93	2.93	2.93	2.93	2.93			
Current Hourly Rate		10.00	11.00	11.36	12.00	13.00			
Adjusted Hourly Rate		<u>12.93</u>	<u>13.93</u>	<u>14.29</u>	<u>14.93</u>	<u>15.93</u>			
Percent Increase		<u>29.26%</u>	<u>26.60%</u>	<u>25.76%</u>	<u>24.38%</u>	<u>22.51%</u>			

DSP Wage Rate Increase

An authorized service provider providing services in Indiana shall provide written and electronic notification of its plan to increase wages, payroll axes and benefits to:

- (1) direct care staff employed by the provider; and
- (2) the office of the secretary;

within thirty (30) days after the office implements an increase in reimbursement rates.

DSP Wage Increase Plan Notification

DDRS issued guidance on June 28, 2021 (revised July 8, 2021) including notification requirements of its plan to increase wages. This guidance includes a link to submit the plan via electronic methods similar to how BDDS COVID 19 grants have been submitted.

<https://forms.office.com/Pages/ResponsePage.aspx?id=ur-ZIQmkE0-wxBi0WTPYjd4E1DwnRxtAozu0uf7-cShUOFITTEhKQ041SDZXOURaVU9RQVQxTEVMVi4u>

DSP Wage Increase Plan Notification

The plan components of the electronic submission include:

Section I: Authorized Provider General Information:

- Name of the provider organization;
- Name of person submitting the form on behalf of the organization
- Email of the person submitting the form

DSP Wage Increase Plan Notification

The plan components of the electronic submission include:

- The waiver services the organization provides
- Describe how the organization plans to distribute at least 95% of the amount of the increase in the reimbursement rate to pay payroll tax liabilities and to increase the wages and benefits paid to direct care staff who are employed and paid on an hourly basis.

DSP Wage Increase Plan Notification

The plan components of the electronic submission include:

- Describe how the plan to distribute the increase as described above compares to payroll tax liabilities, wages and benefits paid to direct care staff who are paid on an hourly basis as of the organizations most recent fiscal year ended on or before December 31, 2019

DSP Wage Increase Plan Notification

The plan components of the electronic submission include:

- Describe HOW the organization plans to communicate the increase to their eligible direct care staff as required by the 2021 Budget Bill for this rate increase.
- Please provide the date the organization plans to communicate the increase to their direct care staff.

DSP Wage Increase Plan Notification

The plan components of the electronic submission includes the following attestation:

Please acknowledge receipt and understanding of the following statement by selecting "Yes, I have read and understand" below. The Office of the Secretary of FSSA or its designee may recoup all or a part of the amount paid using the increased reimbursement rates based upon an audit or review of the supporting documentation required to be maintained if the provider cannot provide adequate documentation to support the payment of payroll tax liabilities and the payment of increased wages and benefits to eligible direct care staff.

Plan Notification Interpretations

We will review each required element in Section II and potential responses. **THESE RESPONSES HAVE NOT BEEN DISCUSSED WITH DDORS OR FSSA AUDIT AND ARE NOT AUTHORITATIVE.** These responses are for discussion purposes only and are just our opinion on potential responses that may or may not meet the State's requirements.

DSP Eligible Employees

Eligible employees are not defined except in the legislation that says:

- (1) are employed by the authorized service provider to provide services in Indiana; and
- (2) provide support services listed in subsection (c)(2) and
- (3) Are paid on an hourly basis.

DSP Eligible Employees

Paragraph (2) does not specify how much of an employees time needs to be spent on the listed services. As such, you will need to define your own list of eligible position.

DSP Eligible Employee Examples

Direct Support Professionals that provide day services regardless of the participants of the group they serve (e.g. a 6:1 group that has 4 waiver participants and 2 group home participants) should be considered an eligible employee. We do not believe there is a need to allocate their time or payroll between waiver and other services. In the calculation, we would pick up 100% of their total compensation.

DSP Eligible Employee Examples

Team leaders or supervisors that provide day services and are paid hourly should be eligible assuming they provide a significant amount of direct services. For example, a team leader that has their own group two hours a day and provides intermittent individual hab, we believe could be included.

DSP Eligible Employee Examples

A director of client programs who is on salary and that picks up a few shifts a month due to staffing shortages should not be included. Anyone who is on a salary is not covered by the legislation.

DSP Listed Services

Outline the waiver services outlined in IC 12-15-1.3-18 that the agency provides.

You will just check the box for each service that you provide.

DSP Wage Increase Plan

Describe how the organization plans to distribute at least 95% of the amount of the increase in the reimbursement rate to pay payroll tax liabilities and to increase the wages and benefits paid to direct care staff who are employed and paid on an hourly basis.

We would expect this to be a statement or statements describing how you plan on increasing wages of the direct support professionals. An example might be:

For positions listed above we will be increasing wages by 15% effective October 1, 2021. Additionally, we will be paying bonuses to eligible employees in these positions based upon longevity and other factors (e.g. employment on a certain date) at various points during the year potentially at the end of a quarter or the year or at other times as deemed necessary.

Amount of Increase Received Compared to Payroll Taxes, Wages and Benefits

We would expect this to be a statement or statements describing how you plan to calculate the amount of increase received in comparison the 95% threshold. An example might be:

The Medicaid revenue utilized in this calculation will be from our billing records on an accrual basis for the period that we file the calculation. We have made preliminary calculations of the increase in comparison to our base year ending June 30, 2019 and believe our plan will cover the 95% threshold. We will update our calculations quarterly based upon actual revenue and payroll information. We will make adjustments to our compensation plan as necessary based on that information.

Informing the Direct Care Staff

Identify how the agency will inform direct care staff about the wage increase.

We would expect this to be a statement or statements describing how you plan to communicate your wage increase plan to your staff. An example might be:

On July 10, 2021, we sent e-mails to each staff and also included an insert with their paychecks for the period ended July 16, 2021 regarding the plan to increase wages.

DSP Wage Calculations

Basic Premise of the calculations is that any rate increase received in **aggregate** will be passed through to direct support professionals in **aggregate**.

In other words, the test is not by individual service or employee. Auditors will not be looking to see if any particular employee received a 14% increase but will be looking to see if the rate increase was spent on total compensation to eligible employees.

DSP Wage Verification Process

INARF will be meeting with DDRS and FSSA audit over the next few weeks to discuss the process resulting in the guidance that was issued. A couple of key points we will be seeking clarification:

- An FSSA approved calculation worksheet and instructions to be issued similar to the one developed in 2017.
- Confirming that when FSSA audit performing audits of DSP wage verification calculations that they will be educational/informational.

DSP Wage Rate Increase

Sample Questions

Question:

Are A&D and TBI waivers included in this initiative?

Current Answer:

No. Since paragraph (a) refers specifically to DDRS services provided under rule 6 and paragraph (j) refers specifically to amendments of the FSW and CIH waivers only, we believe the A&D and TBI waivers are not included.

DSP Wage Rate Increase

Sample Questions

Question:

Can I include group home staff in the calculations if I am also giving them a wage increase?

Current Answer:

No. Since paragraph (b) (1) refers specifically to services provided to individuals on the waiver only, group home services are excluded.

DSP Wage Rate Increase

Sample Questions

Question:

Our transportation is primarily provided by 3rd parties.
Do I somehow calculate the worked hours of their staff?

Current Answer:

Contracted third parties were not contemplated by this rule as paragraph (e) requires the wages to be paid to direct care staff who are employed by the authorized service provider.

DSP Wage Rate Increase

Sample Questions

Question:

How can we document waiver service contraction or expansion which will skew our data?

Current Answer:

The calculation should be in aggregate based upon the change in average hourly compensation times current year payroll hours. Expansion or contraction should not affect the computation.

DSP Wage Rate Increase

Sample Questions

Question:

What if I do not want to pass these increases on to my staff because I have already raised their wages significantly over the past couple of years?

Current Answer:

This is a voluntary program so if you would rather not give any increase to your staff and pay back the rate increase to the state that is your choice. In order to keep the rate increase, you must pass through 95% to your staff through wage and compensation increases.

DSP Wage Rate Increase

Sample Questions

Question:

Do you have an example of an acceptable DSP notification document?

Current Answer:

We currently do not have a sample notification available. However, as a part of this presentation we have tried to provide guidance on the specific elements.

DSP Wage Rate Increase

Sample Questions

Question:

Does my plan need to be approved?

Current Answer:

No your plan does not need to be approved. The law only requires you to provide written and electronic notification of your plan to increase wages to your staff and FSSA within 30 days after the increase in rates are implemented which DDRS has said it is due by September 1, 2021.

DSP Wage Rate Increase

Sample Questions

Question:

If my plan changes, do I need to notify FSSA?

Current Answer:

The law has no provisions for updating your plan after the 30 day period. However, we probably would recommend informing FSSA of any significant changes to your plan positively or negatively since they will probably find out about it anyway. Regardless of if your plan changes or not, you will need to pass the 95% threshold to avoid recoupment.

DSP Wage Rate Increase

Sample Questions

Question:

How long of a base wage archive span is sufficient for comparison or will there be a standard base time period for comparison?

Current Answer:

The base period for comparison to the period is your fiscal year ending on or before December 31, 2019. If your fiscal year end is June 30, your base period would be June 30, 2019.

DSP Wage Rate Increase

Sample Questions

Question:

When factoring out OT and shift diff do we just factor out the premium paid for these hours or should we not count the hours at all?

Current Answer:

The intent was to increase base wages and as such we currently believe you would just remove the OT or Shift premium to arrive at the base wage but hours would still count since service was delivered during that time period.

DSP Wage Rate Increase

Sample Questions

Question:

Do Employment Specialists who provide Extended Services count as direct support professionals for these calculations?

Current Answer:

Yes they probably do if they are paid hourly since this is one of the listed services and these employees provide that service directly.

DSP Wage Rate Increase

Sample Questions

Question:

When can I distribute the wage/bonus?

Current Answer:

Anytime after the rate increase is effective
which is July 1, 2021.

DSP Wage Rate Increase

Sample Questions

Question:

I am trying to compute staff raises by program and when I get to Daily rates it gets difficult to compute. What do you recommend?

Current Answer:

The threshold is in aggregate for the whole agency. There is no requirement to compute by person or by program. We recommend computing the 95% threshold you expect to need to pay out in increased wage compensation for your whole agency for the upcoming period (7/1/21 – 6/30/22) then divide by the total compensation (or hours) of eligible employees to determine a rough percentage of the increase (or hourly rate increase) necessary for all employees and adjust accordingly.

DSP Wage Rate Increase

Sample Questions

Question:

Do all employees need to receive the same increase?

Current Answer:

This is an agency by agency decision. You may vary increases however you choose as long as you meet the 95% threshold in total. For example, if you want to give larger increases to more experienced staff that is your choice.

DSP Wage Rate Increase

Sample Questions

Question:

Can I just wait until the end of the year, compute the 95% threshold and then pay that out as bonus to my eligible employees?

Current Answer:

Absolutely not. FSSA audit has said they will be looking for any bonus based upon an unspent threshold as a violation of federal reimbursement guidelines.

DSP Wage Rate Increase

Sample Questions

Question:

Do any wage changes have to be retroactive to July 1st or can any wage changes be done after we submit the plan to BDDS in August?

Current Answer:

There is no requirement to increase wages as of July 1. You may implement at your discretion with any combination of wage increases and bonuses.

DSP Wage Rate Increase

Sample Questions

Question:

Does the money have to be used strictly for currently employed DSPs and Day Service employees, or can money be set aside for projected new hires and spent on those new hires as they are hired?

Current Answer:

New hires will certainly figure in the calculations of the increase in wages and should be part of your computations.



Industry Update

John Barth, Katy Stafford-Cunningham, Brian Carnes, and
Phillip Parnell, INARF

- During the June 30th “Secretary’s Call” Dr. Sullivan reported that she is exiting as Secretary of FSSA after six plus years – making her the longest serving Secretary.
- Secretary Sullivan is leaving Indiana for a new position in North Carolina as a senior leader at a health system.
- Dr. Sullivan has been a key player in the Governor’s response to COVID and we appreciate that she has been accessible and engaged with INARF throughout, meeting with us directly to discuss PPE access, COVID relief funds among other priorities.
- Dr. Dan Rusyniak will become the state's new FSSA leader.
- INARF has established a positive relationship with “Dr. Dan” over his three years at FSSA and we look forward to working with him

American Rescue Plan Update

- FSSA utilized Appendix K authority to ensure a start date of 7/1/21 for the 14% increase.
- System updates have already taken place, and they are planning for **August 1, 2021** or after and retroactively effective to July 1, 2021.
- The Appendix K also proposes an increase in the Family Supports Waiver cap to \$19,614.
- FSSA released their plan for the use of the ARP's increased FMAP for HCBS services on July 9th. Multiple components recommended by INARF included, such as provider grant program continuation.
- FSSA is now working on a more detailed implementation plan.

American Rescue Plan Area of Focus	Point of Contact/Lead
Stabilization Grants	Kim Opsahl, Lisa Davis
Workforce	Peggy Welch, Kelly Mitchell, Geena Lawrence
Family Caregiving	Self Advocates of Indiana
Provider Capacity	Kelly Mitchell, Holly Wimsatt, Kim Cauley

- BDDS COVID Positive Cases – as of 7/11/21
 - CIH: 1462
 - FSW: 1076
 - SGL: 846
 - Total Cases: 3,384
 - Total COVID Related Deaths: 56
- Total number of Staff COVID Positive Cases
 - Waiver: 1399
 - SGL: 640
 - Total Cases: 2039
 - Total COVID Related Deaths: 5

Waiver Amendment Updates

- CIH and FSW amendments will address
 - Case Management
 - Permanently increasing DSP-delivered waiver services by 14%
 - Increase the FSW cap to \$19,614
 - Separate vehicle modifications from environmental modifications, similar to the Aging model (CMS request)
- Public comment period will be in September
- FSSA hopes to submit by October 1
- Proposed effective date will be January 1

Federal OIG Audit of CIH Waiver

- [OIG Audit Report](#)
- Purpose was to determine whether Indiana ensured that the CIH Waiver services were provided in accordance with Federal, State, and waiver requirements
- Methodology
 - Audit covered 487,576 CIH Waiver service claims from 12 selected CIH service providers, totaling approximately \$467.4M from service dates during FFYs 2015 and 2016
 - Based on a sample size of 300 of the 12 service providers' CIH Waiver service claims, with payments totaling \$864,685
- Recommendations
 - FSSA refund \$22.3 million to the Federal Government
 - improve its monitoring of the CIH Waiver program to ensure that service providers comply with Federal, State, and CIH Waiver requirements

Federal OIG Audit of CIH Waiver

- Next Steps
 - FSSA sent comments to the report
 - OIG will send the report to CMS
 - CMS will choose whether or not to take action
 - Could take years to resolve

9-8-8 Coalition

- 9-8-8 is the new number for Suicide Prevention Hotline
 - 1102 Taskforce recommended crisis support
 - DDRS has advised that 9-8-8 will be the response to this crisis recommendation
 - DMHA is coordinating efforts and will have a system implemented by July 16, 2022
- Coalition Workgroups
 - **Mobile Team Workgroup** – Clarify roles and responsibilities of the various mobile teams (law enforcement, mobile integrated health teams, mobile integrated response systems, quick response teams, LOSS teams, mobile crisis assistance teams, etc.)
 - **Crisis Line Workgroup** – Clarify roles and responsibilities (9-1-1, suicide prevention lifelines, domestic violence hotlines, child abuse hotline, 2-1-1/Be Well, warmlines, etc.)
 - **Child and Adolescent Crisis Care Continuum Workgroup** – Identify and/or create crisis care continuum best practices for children and adolescents (call centers, mobile crisis, stabilization units, family and youth peer support, etc.)
 - **Training Workgroup** – Identify and/or create best practice training curricula for those who access any part of the crisis care continuum (call center[s], mobile teams, crisis stabilization units, etc.).

OSHA ETS

- June 21, 2021, OSHA published an Emergency Temporary Standard (ETS) to protect healthcare and healthcare support service workers from occupational exposure to COVID-19
<https://www.osha.gov/coronavirus/ets>
- Many facilities and group homes could be subject to the new ETS if certain medical services are provided. Federal OSHA has created a flow chart to help employers determine if they are covered by the ETS. <https://www.osha.gov/sites/default/files/publications/OSHA4125.pdf>
- We would also encourage members to sign up for the Indiana Department of Labor, IOSHA webinars www.in.gov/dol
- OSHA education division, INSafe, also conducts free safety and health onsite consultations, as well as program reviews and assistance understanding the OSHA standards. To schedule a free consultation, you can visit <https://www.in.gov/dol/insafe-consultation-request-form/>

- Post and pay & audit
- Performance Metrics
 - Total tickets opened has decreased from 331 in January of 2021 to 76 in May
 - May 2021
 - 71% of Sandata records verified
 - 74% of Alt EVV records verified
 - Top Exceptions:
 - Alt EVV
 - Unauthorized Service exceptions
 - GPS Distance Exception
 - Sandata
 - Visits without out-calls
 - Missing service
 - Unknown employees

Request for outstanding EVV Issues from members – 6/30 EVV stakeholder meeting

- Issues reported:
 - Extended delay for Sandata to resolve issues
 - Need to improve communication regarding updates to system
 - Aggregator & other systematic issues
 - Staff challenges and administrative burden for providers
- Requests:
 - Programmatic call for Alt EVV Vendors to retrieve the status information on records
 - Programmatic meeting between Alt EVV Vendors and Sandata
- Since OMPP plans to keep post and pay active through 2021, INARF plans to re-engage OMPP in the fall to discuss EVV policies for next year

Your contributions to the INARF PAC are a critical part of INARF's legislative advocacy efforts. They are used to support elected officials who serve as champions of the provider community.

Please consider supporting the
INARF PAC today.

For more information and to contribute,
visit: www.INARF.org/INARF-PAC





Association Update

Nanette Hagedorn, INARF

Welcome New Associate Member ...



[Keystone Group](#) - one of the most successful and largest privately owned construction and development companies in the Midwest. The Keystone Group team brings decades of experience in construction, development, real estate and property management. Keystone Group is looking to expand their partnerships and consult with Indiana providers to help construct or repurpose new or existing facilities that bring services to Hoosiers with disabilities. We invite you to contact [Jennifer Pavlik](#), Keystone Group, Vice President and Chief of Staff, to learn more or visit their website - www.keystone-corp.com today!

2021 Pre Conference: Early Bird Deadline August 31

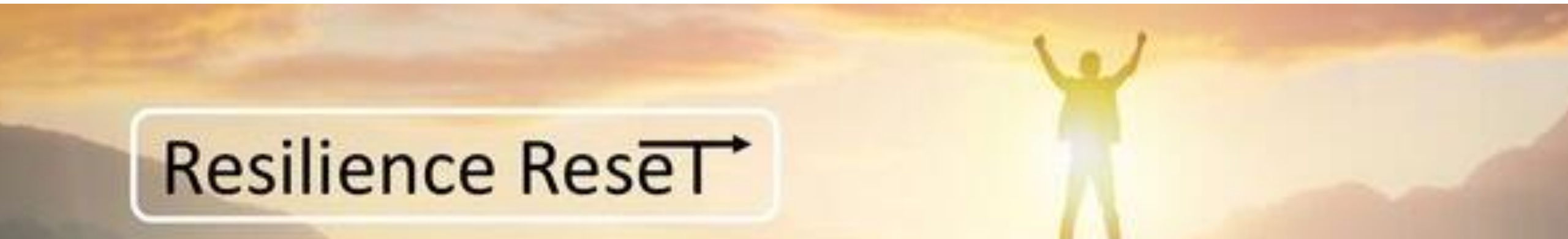
AM - Medicaid Managed Care for LTC & I/DD Populations: Lessons from Other States

Mike Nardone, Health Policy Consultant, The Nardone Group, LLC

PM - A Progressive Evolution of Home and Community Based Services

Laura Brackin, Ph.D., President/Chief Executive Officer, Brackin & Associates, LLC

Learn more at www.inarf.org/2021_pre_conference

A graphic with a warm, orange-toned background showing a silhouette of a person with arms raised in triumph against a bright light. In the foreground, a white rounded rectangle contains the text "Resilience Reset" followed by a right-pointing arrow.

Resilience Reset →

2021 Annual Conference: **Early Bird Deadline August 31**

**The Burnout Factor: 7 Strategies to Sustain
Your Leadership and Your Life**

*Building the Plane While Flying: What We Learned as an
Industry that Can be Used to Improve Service Delivery*

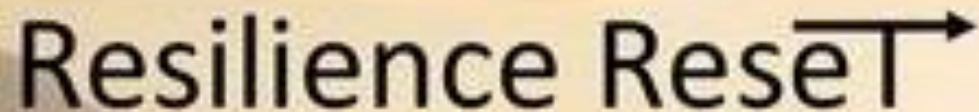
**Out of the Comfort Zone: Using Self
Awareness to Develop Staff**

Bringing the Passion Back to Our Work: Tools for Transformation

Building a Culture of Appreciation

**Public Policy Advocacy: Everything You Need to
Know to be a Powerful Policy Advocate**

Learn more at www.inarf.org/2021_annual_conference

A graphic with the text "Resilience Reset" in a bold, sans-serif font, followed by a right-pointing arrow. The text is enclosed in a white rounded rectangle with a thin black border. The background of the entire slide is a warm, orange-toned image of a person standing on a mountain peak with their arms raised in a 'V' shape, silhouetted against a bright, hazy sky.

Resilience Reset →

2021 DSP Virtual Conference

Line-up -

We Couldn't Get Through this Pandemic without YOU!

Kim Opsahl, Director - Division of Disability & Rehabilitative Services, Indiana Family and Social Services Administration

Person-Centered Practices and the DSP

Gwen Chesterfield, Education & Human Services Consultant, Gwen K. Chesterfield, LLC

Improving Communication with Internal Stakeholders

Jan Breiner Frazier, Managing Partner, and Christine Shepard, Partner, Planning Plus, LLC

Positive Behavior Supports, Perception, and the Pursuit of Happiness

Kelly Hartman, President & CEO, Insights Consulting, Inc.

Being the Best YOU!

Alonzo Kelly, Strategic Leadership Partner & Executive Coach, Kelly Leadership Group, LLC

Registration Tiers - **NEW**



John@inarf.org
Katy@inarf.org
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Brian@inarf.org
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Thank you!

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