



Member Forum

October 22, 2021

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Board Chair Report

Welcome

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

Today's Agenda

- CMCO RFS Award and Next Steps, Cathy Robinson, Director, BDDS and Heather Dane, Director, HCBS Services
- Association Update - Nanette Hagedorn, INARF
- INARF Board Priorities - John Barth, INARF
- Industry Update - John Barth, Katy Stafford-Cunningham, and Brian Carnes, INARF

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Save the Date

Joint INARF and The Arc of Indiana Critical Issues Forum

- December 1, 2021
- 10 AM – 3 PM
- Marriott East

7202 East 21st Street, Indianapolis, IN 46219



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Upcoming Events

Professional Interest Section Meetings / Professional Development:

- October 28 - Business & Industry / Certified Ability Indiana Organizations (10 AM-Noon)
- November 2 - Community Supports (10 AM-Noon) / Employment Supports (12:30-2:30 PM)
- November 4 - Pieces to the Group Home Financial Puzzle Training
- November 11 - Financial Management (10 AM-Noon) / Human Resources (12:30-2:30 PM)

Upcoming Member Forum and Board of Directors Meetings:

- November 19 - Board of Directors Meeting only - Virtual
- December 17 - 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.



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CMCO RFS Awards and Next Steps

Cathy Robinson, Director, BDDS
Heather Dane, Director, HCBS Services

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Case Management Innovation

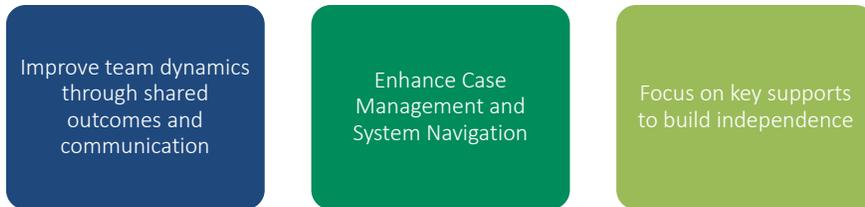
Cathy Robinson
Director, BDDS

Heather Dane
Director, HCBS Services

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Our Current Modified Approach to Waiver Redesign

Synthesis of Stakeholder Feedback and Current Capacity
to Inform Areas of Priority

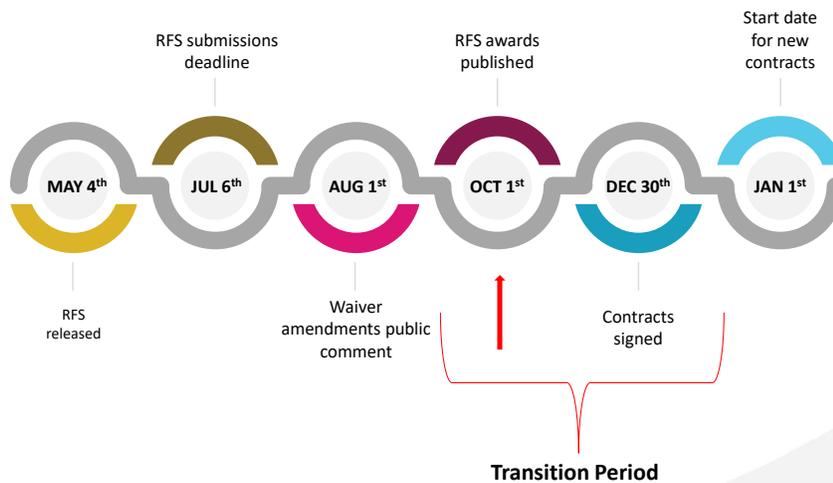


All people have the right to live, love, work, learn, play and pursue their dreams.



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Case Management Innovation Timeline and Status



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Case Management Innovation Awards

October 1, 2021, IDOA announced the awards for the RFS. The following case management organizations will be awarded a contract:

- Indiana Professional Management Group (IPMG)
- Unity of Indiana
- Inspire Case Management
- Columbus Organization
- Connections Case Management
- CareStar of Indiana

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Transition Picture

Case Management Companies Not Selected		
Company	# of Individuals Served	# of Case Managers Employed
CMCO		
CICOA	106	4
Integrated Supports	262	8
Futures	1,564	35
Advocacy Links	3,065	81
	4,997	128

**above graph indicates initial impact on October 1, 2021*

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Case Management Innovation request for services package

If you use assistive technology (such as a Braille reader, a screen reader or TTY) and the format of any material on this website interferes with your ability to access information, please [contact us at this link](#). If you have a complaint about web accessibility or print communications in accessible formats, you may also [contact us via this link](#). To enable us to respond in a manner most helpful to you, please indicate the nature of your accessibility issue, the preferred format in which to receive the material, the web address of the requested material, and your contact information.

- [RFS22-6778 RFS document v2](#)
- [6778 addendum 1](#)
- [6778 addendum 2](#)
- [6778 addendum 3](#)
- [6778 addendum 4](#)
- [RFS 22-67778 AttA SoW](#)
- [RFS 22-6778 AttB sample contract](#)
- [RFS 22-6778 AttC business proposal](#)
- [RFS 22-6778 AttD technical proposal](#)
- [Response to written questions](#)

<https://www.in.gov/idoa/procurement/award-recommendations/>



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RFS Response Areas

Compliance and Approach to Correction

- a. *What measures or steps would you take to address AND prevent corrective actions or findings issued by BOIS?*
- b. *What quality assurance approaches would you employ to identify systemic issues? Please include supervision strategies as well as technical approaches*
- c. *What quality assurance approaches would you put into place to timely address specific, limited situations as they arise?*
- d. *Describe your company's consideration of compliance requirements AND quality services in the delivery of case management.*
- e. *Describe how you plan to provide ongoing comprehensive quality assurance. Please include how you will apply culture of quality concepts and data analysis as part of the quality assurance approach.*
- f. *Provide a description of a proposed quality assurance plan, addressing the points outlined in Section 5.3.1, or provide a preliminary draft of your quality assurance plan.*
- g. *Provide a narrative about your proposed Compliance Officer and the potential activities this role would oversee and/or conduct. Please also attach a resume or CV.*



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RFS Response Areas

Section 5 – Description of the Contractor’s Responsibilities - Overview

- a. Describe how you will support case managers to ensure functional, effective and positive Individualized Support Team dynamics (facilitation, coordination with other providers, collaboration with guardians, etc.) with a focus on working toward shared outcomes for the team in support of individuals’ wants and needs.
- b. Describe how you will support case managers to deliver case management to be strength-based, person-centered, and offer opportunities for integrated supports to individuals in BDDS waiver services, as well as individuals transitioning into waiver services and how you plan to monitor these activities for effectiveness.
- c. Provide specific examples of your proposed incorporation of all life domains and life stages within the context of a person, their family, and community in the delivery of person-centered case management, and the outcomes you believe your approach will have on individuals receiving services.
- d. Provide a summary of how you will ensure complete, accurate and timely data entry into the state’s case management system and your approach for monitoring this.



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Section 5.4 – Training of Case Managers

- a. Provide an overview of how you plan to organize and deliver your training operations, including but not limited to in-person training, on-demand web training, user manuals, and your proposed training schedule.
- b. Describe how you plan to incorporate best practices into the training program and provide examples, specifically addressing team collaboration in working toward shared outcomes, fostering individuals’ independence, overall system navigation, and cultural competency concepts.
- c. Describe how you will coordinate training for Case Managers on additional non-waiver Medicaid services to support Individuals, such as resources to access broader employment supports, housing accommodation needs, and transition services and resources to support successful transition from institutional settings to HCBS settings.
- d. Describe how you will train Case Managers on researching and accessing available community services in their geographic region to support Individuals across life domains and across their lifespan.
 - i. Describe your familiarity with the LifeCourse framework and how you may incorporate the principles and tools in your trainings
- e. Describe your plan to keep training curriculum materials up to date, especially in coordination with BDDS and BQIS, as BDDS and BQIS continually updates resource materials.
- f. Describe your approach to validating that the training operations are yielding desired outcomes associated with principles and concepts associated with and aligned with BDDS’ philosophical approaches to HCBS services.

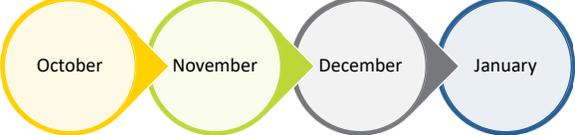


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Transition Supports for Individuals & Families

Awards Announced



January 1, 2022 Implementation

December 14, 2021
Deadline to choose new case management company *if current case management company was not awarded*

Mailings (Oct, Nov, Dec)	Informational Webinars
Meet & Greet Opportunities	Public Meetings
Phone outreach by BDDS	Monthly contact by case manager
Resources developed: Toolkit, Choosing a Case Management Company	

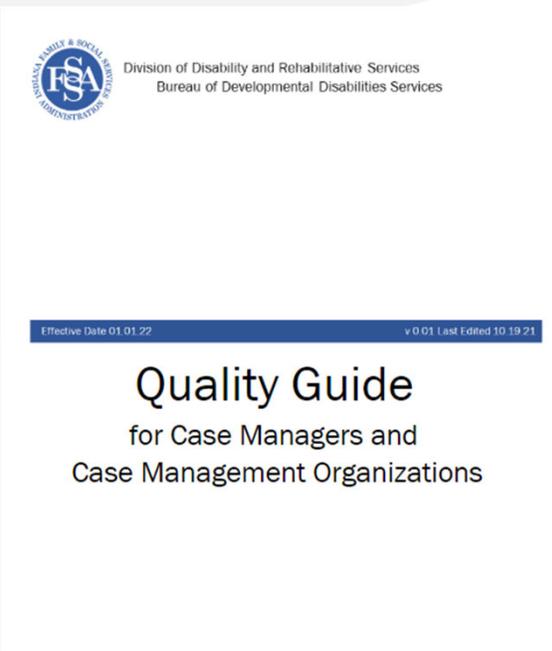
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Transition Supports for Case Management Companies & Case Managers

Toolkits specific to awarded and exiting case management companies	Informational Webinars Specific to Case Managers
Virtual meeting with exiting case management company leadership	In person monthly meetings beginning in Oct with awarded case management companies
Resources to support discussions with individuals	BDDS Portal Resource Page

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Goals of the Quality Guide:

- Serve as a resource capturing all service expectations and best practices for case management
- Create greater alignment and consistency of the service
- Create greater transparency and understanding of service to all stakeholders



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Thank You

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Association Update

Nanette Hagedorn, INARF

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Association Current Initiatives

Leadership Academy: Class of 2022

- ✓ October 6 - Curriculum Unveiling at the Annual Conference
- ✓ October 19 - Call for Applications
 - The Academy will be offered at the Embassy Suites Noblesville Conference Center; will meet four times a year (March, April, May and June), with each session lasting two full days; and Graduation to occur during the June INARF Member Forum.
 - Up to 24 individuals will be selected based on the **quality** and **thoroughness of their essay** balanced with consideration of their **organization's geographical location** and **size**, and the **applicant's position** and **experience** within the industry. Tuition is \$1,095.
- November 16 – Applications due (limit 1 per organization)
- December 13 – Applicant Notification



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Association Current Initiatives

Annual Membership Renewal Campaign

The Process –

- ✓ October 13 – Pre-populated Renewal Commitment Forms (Email) were sent
- ☐ **October 29** – Renewal Agreements are Due
- ☐ December 17 – INARF Member Forum will include a drawing for an INARF Annual Conference Package for all timely renewal commitments. The package includes 1-Full Annual Conference Registration (\$279 value), and 1-Overnight Hotel Reservation at the Embassy Suites by Hilton Noblesville (\$147+).

Get prepared: Begin gathering your revenue from your most recent fiscal year in advance!

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Association Current Initiatives

Thank you to those who have already submitted your 2022 Renewal Agreements:

Cardinal Services, Inc.
 Corvillia, Inc.
 Easterseals Arc of Northeast Indiana
 Easterseals Passages
 Hillcroft Services, Inc.
 Hopewell Center, Inc.
 Kaiser Home Support Services
 Marshall-Starke Development Center, Inc.
 Opportunity Enterprises, Inc.
 Paladin, Inc.
 Putnam County Comprehensive Services
 Southern IN Resource Solutions, Inc.
 Stone Belt Arc, Inc.
 The Arc Noble County Foundations
 The Arc of Evansville
 The Village of Merici

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INARF Board Priorities
Three Year Plan: Final

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2021 - 2024 Board Strategic Priorities

Maintain and Expand INARF Regulatory and Legislative Influence

Staff Focus:

- » Ensure solution-oriented, consulting-focused regulatory relationship with State leaders
- » Increase INARF Member engagement with legislators
 - INARF Member CEO PAC participation & legislative outreach
- » Expand Federal Strategy
 - DC Fly-in
 - Legislative staff relationship building
 - In-District participation

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2021 - 2024 Board Strategic Priorities

Expand INARF's Operational Excellence and Sustainability

Staff Focus:

- » Maintain Financial Stability
- » Member Retention
- » Maintain and expand capacity to pivot and respond to policy environment



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2021 - 2024 Board Strategic Priorities

Advocate for Workforce Enhancement:

Staff Focus:

- » Develop Plan and Advocate for Routine Rate Process
 - Advocate for FSSA to establish a cadence of transparent rate review, assessment, and adjustment
 - Prioritize review by service (e.g. highest priority services addressed first)
 - Routine rate increases become part of the FSSA budget request
- » Development of DSP Profession:
 - » State-developed & controlled standardized DSP competency-based training
 - » Optional state-run certification, with enhanced rate, for DSP position
 - » Advocate for a DSP exclusion list as opposed to a registry



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2021- 2024 Board Strategic Priorities

Advocate for a Strategic Approach to Medicaid Managed Care:

Staff Focus

- » Build Industry Knowledge:
 - » Identify resource to build internal INARF capacity
 - » Provide opportunities to build industry knowledge and experience on MMC (including other state models)
 - » Consider Models for INARF in a MMC environment
- » Prepare Key Positions for Advocacy
 - » Position INARF as a critical thought leader to ensure any model is built with industry guidance
 - » Prepare policy positions for advocacy
 - » Ensure that the industry's priorities are achieved
 - » Expand strategic alliances

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2021- 2024 Board Strategic Priorities

Ensure the Provider Voice in Waiver Redesign

Staff Focus:

- » Advocate for FSSA to increase flexibility and revise service definitions
 - Work to ensure consistent provider feedback and guidance on viability
- » Advocate for FSSA to address the workforce crisis as an integral step in improving service delivery for individuals served

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Industry Update

John Barth, Katy Stafford-Cunningham, Brian Carnes, INARF

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1102 Task Force Meeting

- The Intellectual & Developmental Disabilities Task Force met on October 14, 2021, chaired by Lt. Governor Crouch
- A recording of the meeting can be viewed here: [1102 recording](#)
- Areas of Focus Included:
 - 988 Overview and Update
 - Update provided by DMHA Director, Jay Chaudhary and DDRS Associate Director, Kelly Mitchell
 - Employment – Overview and Discussion
 - Included an update from DDRS Director, Kim Opsahl about the employment related aspect of FSSA's spend plan related to the ARPA's FMAP increase. Work will soon begin on the key elements: enhanced benefits planning support, build Indiana's Self-Advocacy network, training and resources to build stakeholder and system capacity, support for providers interested in transitioning out of 1.4 (c), and quality-driven payment mechanisms, such as pay for performance
 - Waiver Redesign Update
 - Cathy Robinson reviewed the status of the case management innovation project
 - Priority Waiver Category Overview and Discussion
 - Kim Opsahl discussed the history and current status of the priority waiver category eligibility process

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DDRS Advisory Council: COVID-19 Data

- BDDS COVID Positive Cases – as of 10/20/21
 - CIH: 1586
 - FSW: 1310
 - SGL: 918
 - Total Cases: 3814
 - Total COVID Related Deaths: 90
- Total number of Staff COVID Positive Cases
 - Waiver: 1692
 - SGL: 739
 - Total Cases: 2431
 - Total COVID Related Deaths: 7



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Vocational Rehabilitation Needs Assessment

Reminder:

- Comprehensive Statewide Needs Assessment – completed every three years
- Survey helps FSSA understand how to improve services and employment outcomes for individuals with disabilities
- The survey can be found at [this link](#)
- The survey will close on October 25, 2021
- Questions about the survey: 800-545-7763



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American Rescue Plan Update

American Rescue Plan Update

- 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. Funding range: \$670.6M – \$877.6M
- FSSA received conditional approval on the HCBS Enhanced FMAP Spending Plan from CMS on 9/30, pending response to CMS questions
- FSSA responded on 10/7 – waiting for full approval
- Using DDRS Advisory as one of the groups to advise the state on implementation.
- First up: stabilization grants and employment focus

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

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9-8-8 Crisis Support System

- Discussed during the 1102 Task Force
 - Funding seems to be the key issue at this time
 - Proposed cell phone surcharge is the suggested funding mechanism
 - Legislative action would be needed to make this work
 - No draft legislation has been provided to date
- Provider Focus Group Summary
 - Provider focus group met Oct. 4
 - Discussed ongoing collaboration to include IDD in 988 and answered provider questions
- New Core Area Planning Committees
 - IDD Provider Representation
 - Commitment from DMHA to at least one IDD provider representative per committee
 - First Area Planning Committee met October 19

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COVID-19 Reporting Reminder

- **REMINDER: Required COVID-19 Reporting**
 - Individuals receiving BDDS services and supports
 - COVID-19 positive cases (confirmed via a COVID-19 test) and all deaths must be reported via [BDDS online incident reporting system](#).
 - Provider staff in direct contact with individuals receiving BDDS services and supports
 - COVID-19 positive cases (confirmed via a COVID-19 test) and all COVID-19 related deaths must be reported via online at [COVID-19 employee reporting form](#).
 - Provider notification of temporary closures or re-opening
 - Temporary closures or re-opening must be reported online at [Provider notification of temporary closures or re-opening](#).

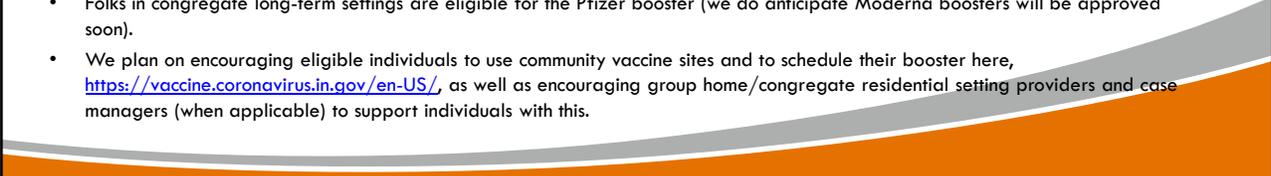


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COVID-19 Boosters

- **CDC Recommendation**
 - Individuals ages 65 and older and residents of long-term care facilities should receive a booster dose.
 - Individuals ages 50 to 64 with underlying medical conditions that put them at high risk of severe COVID-19 should receive a booster dose.
 - Individuals ages 18 to 49 with underlying medical conditions may receive a booster dose, based on their individual benefits and risks.
 - Individuals ages 18 to 64 who are at high risk of COVID-19 exposure and transmission because of an occupational or institutional risk of exposure may receive a booster shot based on their individual benefits and risks.
- The single booster dose can be administered at least six months after completion of the second dose and applies only to individuals who previously received the Pfizer vaccine. Individuals who received the Moderna or Johnson & Johnson vaccines are not eligible at this time.
- Folks in congregate long-term settings are eligible for the Pfizer booster (we do anticipate Moderna boosters will be approved soon).
- We plan on encouraging eligible individuals to use community vaccine sites and to schedule their booster here, <https://vaccine.coronavirus.in.gov/en-US/>, as well as encouraging group home/congregate residential setting providers and case managers (when applicable) to support individuals with this.



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COVID-19 Vaccine Mandates

- **Current Rules and Policy**
 - **OSHA Emergency Temporary Standard**
 - These standards are federal regulations that are enforced by Indiana State government employees at the Indiana Department of Labor.
 - These emergency standards are currently in place and enforceable.
 - Any provider who is providing direct healthcare, as defined by multiple documents and flow charts that we have made available, must develop a plan to protect employees from COVID in the workplace
 - **CMS**
 - A rule has been adopted and is currently in effect for ICF-IID facilities, which requires providers to provide vaccination education, access and reporting for residents and staff
 - This policy was developed by CMS and will be enforced by Indiana State government employees at the Indiana State Department of Health
- **Proposed Policy (not yet enforceable)**
 - **OSHA**
 - President Biden announced that any business in the country with more than 100 employees will be required to either prove that everyone is vaccinated or test employees weekly.
 - Draft rules have been sent to the Office of Management and Budget and could be published within a week or two.
 - Details regarding penalties, enforcement, timeline are all unknown at this point.
 - **CMS**
 - President Biden also announced an expansion of the current vaccine requirements on healthcare facilities to include any provider receiving Medicaid or Medicare funding.
 - Rules will need to be promulgated to enforce this, but CMS reported to ANCOR that the mandate will not apply to HCBS and will impact services with federally specified qualification requirements, including federal conditions of participation.
 - Currently we believe that ICF-IIDs are included, while waiver services are not.
 - Nothing is certain at this time until the regulation is published.

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COVID-19 Vaccine Mandates

- **FSSA Response on Roll Out of Booster Shots for COVID-19 Vaccine**
 - *“As you are likely aware, we understand that folks in congregate long-term settings are eligible for the Pfizer booster (we do anticipate Moderna boosters will be approved soon). Given the general availability of booster shots and the varied way in which this population was originally vaccinated, we plan on encouraging eligible individuals to use community vaccine sites and to schedule their booster here, <https://vaccine.coronavirus.in.gov/en-US/>, as well as encouraging group home/congregate residential setting providers and case managers (when applicable) to support individuals with this.”*

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Telehealth

- **Senate Enrolled Act 3 (2021 Session)**
 - Limits telehealth services, reimbursed by Medicaid, only to licensed providers
 - Licenses included in title 12 (IPLA)
 - Excludes many IDD services
- **Executive Order 21-13**
 - The healthcare emergency allowed Gov. Holcomb to waive laws by executive order
 - Language in EO 21-13 allowed telehealth for IDD services
 - Executive order 21-25 excluded previous telehealth language, preventing any un-licensed provider from providing telehealth services
- **Appendix K**
 - Federal public health emergency approval allows telehealth until the end of the federal emergency period
 - Assumptions are that this authority will end Dec. 31, 2021
 - After the federal emergency period runs out, Indiana state law will kick back in and prevent telehealth services to only licensed providers

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DSP Wage Increase Update

- [BR202137](#) corrected previous information on claims payments for services subject to the 14% rate increase
- Claims for those waiver services with dates of service from July 1, 2021 to August 17, 2021 **should be resubmitted for payment**
- 79 providers did not submit their DSP Wage Increase plans
- If you have not done so, please submit your plans and email [Katy Stafford-Cunningham](#) and let INARF know it was submitted
- OMPP has told us “Any provider that did not submit a plan to DDRS, they are expected to bill for the (old) procedure code and modifier combination.”

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Contribute to the PAC

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.



INARF PAC

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

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Thank you!

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