

# California Enhanced HCBS FMAP State Plan Summary

## (I) Workforce: Retaining and Building Network of Home and Community-Based Direct Care Workers

### 1) Specialized Upskilling Pilots

IHSS (Aging) providers that complete a State-identified, with stakeholder input, pilot specialized training pathway will receive a **\$3.00/hour<sup>1</sup> pay differential** when enrolled to provide services to a recipient with the care need for which they completed specialized training.

### 2) Direct Care Workforce (non-IHSS) Training and Stipends - **IDD**

A new statewide Direct Care Workforce Training and Stipends Program (includes IDD) – leveraging on-line learning innovations, rooted in adult learner principles, and delivered in multiple languages with cultural competency - will be provided to direct care workers caring for adults in HCBS (non-IHSS) programs.

### 3) IHSS HCBS Care Economy Payments

This funding would provide a one-time incentive payment of \$500 to each current IHSS provider that provided IHSS to program recipient(s) during a minimum of three months between March 2020 and December 2020 of the pandemic.

### 4) Non-IHSS HCBS Care Economy Payments - **IDD**

This funding would provide a one-time incentive payment of \$500 to each current direct care, non-IHSS provider of Medi-Cal home and community-based services during a minimum of three months between March 2020 and December 2020.

### 5) Increasing Home and Community Based Clinical Workforce Funding

This proposal would increase the home and community-based clinical care workforce, including home health aide, CNA, LVN, RN workforce in Medi-Cal. Grants can pay for loan repayment, sign-on bonuses, training and certification costs, etc.

**6) Providing Access and Transforming Health (PATH) funds for Homeless and HCBS Direct Care Providers**

California is proposing a significant expansion of the homeless system of care that will create over 2,000 direct service jobs for those providing services to homeless and formerly homeless individuals. Funding will support outreach efforts to publicize job opportunities, workforce development strategies to train staff in evidenced based practices, implement information technology for data sharing, and will support training stipends.

**7) Medicare Partnerships and Shared Savings on Supplemental HCBS Benefit Services**

Through this proposal, DHCS would fund incentives to invest in models of care that reduce inpatient or short-term nursing home stays. DHCS would also pursue a Medicare and Medicaid Shared Saving program with the federal government, building on the success of Cal MediConnect and providing more incentives for Care Plan Options, leveraging the upcoming Dual-Special Needs Plan aligned enrollment model, and considering opportunities to improve care for dually-eligible populations in Medicare fee-for-service. Additionally, DHCS would provide incentives to Medicare Advantage plans to develop innovative approaches for integrated models of care, focused on partnerships with providers such as community based organizations that provide HCBS as supplemental benefits. DHCS will also consider partnerships and incentives to provide HCBS to Medicare fee-for-service beneficiaries.

**8) Traumatic Brain Injury (TBI) Program**

The proposal includes funding to expand capacity of six (6) existing TBI sites and to award up to six (6) additional TBI sites in unserved/underserved areas.

**9) Developmental Services Workforce Investment - IDD**

Recruitment and Retention for Direct Service Professionals (DSPs). This represents an investment of \$200M for the following:

- Recruitment – Even pre-pandemic, service providers had significant challenges hiring and retaining qualified staff. During the last year, DSPs worked above and beyond expectations to maintain consumer safety and continue providing necessary services and supports. To assist with retention, provide current DSPs \$500 and with recruitment offer \$500 to DSPs, upon hire.

- DSP Training - This training program provides DSPs an opportunity to receive a one-time training bonus upon completion of enhanced training. Additionally, this funding provides a bridge while DDS develops and implements the DSP training and certification program.
- Employee Assistance for all DSP. This will provide an investment of \$15M for short- term counseling, support and resource referral service to assist DSPs and their families in managing difficult life events. Approximately \$5M annually and could be scalable for other systems.

## **10) Community Navigator/Implicit Bias Training - IDD**

COVID-19 highlighted the continued need to assist families of children who are regional center consumers from underserved communities to navigate systems to reduce service access and inequity and meet basic needs. This additional investment will add 42 additional navigators, to the proposed 21, to double down on the effort to achieve meaningful change for regional center consumers and families who face challenges navigating regional center and generic resources.

## **(II) Home and Community Based Services Navigation**

### **1) No Wrong Door/Aging and Disability Resource Connections (ADRCs)**

California is establishing a state-wide “No Wrong Door” system (or Aging and Disability Resource Connections), so the public can easily find information, person-centered planning, and care management for older adults and adults with disabilities across the range of home and community services provided by health plans (i.e., CalAIM “In Lieu of Services”) community-based organizations (CBOs), and counties.

### **2) Dementia Aware and Geriatric/Dementia Continuing Education**

This spending plan makes additional investments to further this work by screening older adults for Alzheimer's and related dementias to ensure early detection and timely diagnosis, while also connecting individuals and families to community resources.

### **3) Caregiver Resource Centers**

This proposal would provide increased respite care, behavioral health services, and other supports to meet intensified needs due to

pandemic pressures on families, through 11 Caregiver Resource Centers and 33 Area Agencies on Aging.

#### **4) Individuals with Developmental Disabilities Resource Navigation Portal - IDD**

This proposal would develop an online portal identifying resources for regional center consumers, families, and regional center staff. Information available in the navigation portal would include regional center intake information packets, resources on accessible housing options, and resource information from related safety net systems, such as In Home Support Services, CalFresh, Behavioral Health, etc. The proposed funding also includes an on-demand educational series for families.

#### **5) Emergency Department HCBS Connections Toolkit**

The funding will be used to create toolkits for Emergency Departments to provide pre-packaged resources, training, and information on local connections to services. Tools will be created with subject matter experts and leverage work such as the Geriatric Emergency Collaborative, CalBridge BH Navigator work, and homelessness resources.

#### **6) Mental Health First Aid in Schools and Back-to-School Toolkit Funding**

The Mental Health First Aid in Schools and Back-to-School toolkits will help address some of the immediate needs of children and youth for the much-anticipated return to school for the 2021-22 year.

### **(III) Home and Community-Based Services Transitions**

#### **1) Community Based Residential Continuum Pilots for Vulnerable, Aging, and Disabled Populations**

The Community Based Residential Continuum Pilots would provide medical and supportive services in home and community care settings (home, ARFs, RCFEs) in order to avoid unnecessary healthcare costs, including emergency services and future long-term care placement in a nursing home. This program would ensure individuals are able to live in the least restrictive setting possible by ensuring access to home-based health and other personal care services for vulnerable populations, including seniors and people with disabilities.

## **2) Eliminating Assisted Living Waiver Waitlist**

Add 7,000 slots to the Assisted Living Waiver in an effort to eliminate the current Assisted Living Waiver waitlist while furthering the vision of the Master Plan for Aging.

## **3) Expanding Capacity of Independent Living Centers**

The proposal prevents institutionalization by establishing a Community Living Fund for one-time community transition costs to help persons with disabilities to transfer home from a congregate setting.

The proposal includes the following:

Funding to the 28 ILCs dedicated staff to provide the services.  
Funding for transition or diversion services to consumers up to \$5,000 per service, with an average of \$2,700 per transition service.  
One DOR SSA to provide grant administration.

## **4) Housing and Homelessness Incentive Program**

Medi-Cal managed care plans would be able to earn incentive funds for making investments and progress in addressing homelessness and keeping people housed. There would be a requirement that 85% of the funds go to beneficiaries, providers, and/or counties. Funds would be allocated by Point in Time counts of homeless individuals and other housing related metrics determined by DHCS. Managed care plans would have to meet specified metrics to draw down available funds.

## **5) Affordable Housing for Individuals who have IDD - **IDD****

- Develop affordable housing with a requirement for restricted use for individuals with IDD. Funds to match existing funding sources and used to secure carve out or set-asides.
- Provide rental assistance to IDD consumers. COVID-19 had a direct impact on individuals being able to secure safe, affordable housing in the community of their choosing. To support individuals living in their own home, apartment, etc., this proposal helps establish housing and rental assistance for individuals with IDD and will be supported in future years through non- state or federal funds.

## **(IV) Services: Enhancing Home and Community-Based Services Capacity and Models of Care**

### **1) Nursing Home Recovery & Innovation**

California's priorities include revisiting and expanding the pilot for Small Home facilities, for both quality of care and quality of jobs; facilitating in-room broadband access for residents; and disaster readiness improvements for facilities and systems, to respond to wildfires, earthquakes, and other emergencies where residents are especially vulnerable, among other innovations.

### **2) Alzheimer's Day Care and Resource Centers**

This furthers the recommendations for the Governor's Task Force on Alzheimer's Prevention and Preparedness.

### **3) Adult Family Homes for Older Adults**

California will pilot Adult Family Homes for older adults in one county, with the Department of Developmental Services (DDS) assisting the Department of Aging (CDA) in developing and operating the program. This pilot is based on the successful program serving adults with developmental disabilities currently run by the DDS.

### **4) Family Home Agency - IDD**

FHAs offer the opportunity for up to two adults with developmental disabilities per home to reside with a family and share in the interaction and responsibilities of being part of a family and building connected relationships. This proposal would provide pass through funds to family home providers and include a differential for multi-cultural/multi-lingual families.

### **5) Coordinated Family Support Service - IDD**

Currently, adults living outside the family home have more coordinated supports than individuals living with their family. DDS data shows a significantly higher percentage of adults who identify as non-white (75%) live with their family as compared to adults who are white (52%). To improve service equity for adults who live with their family, and improve individual supports at home, this proposal would pilot a new service for families similar to supported living services provided outside the family home. The pilot would assist families in coordinating the receipt/delivery of multiple services.

#### **6) Reimagine Work Activity Programs - IDD**

Existing work activity programs largely support sub-minimum wage employment in segregated settings. Funding would support the transition out of services provided in sheltered work settings to a new model of service that is time-limited, person-centered and focused on a “Pathway Forward” to employment connecting to Paid Internship Programs or Competitive Integrated Employment and measuring outcomes.

#### **7) Enhanced Community Integration for Children and Adolescents - IDD**

Children with IDD are frequently left out from participation in community programs, but both the child with IDD and children without greatly benefit from opportunities to develop friendships. This proposal would support community social recreational connections for children through a multi-year grant program.

#### **8) Capacity Expansion for Deaf Community - IDD**

This proposal works to improve services for individuals with intellectual and developmental disabilities who are deaf. Due to the uniqueness of the deaf culture and their communication needs, funding will provide regional centers the ability to contract for communication assessments that will be used in developing Individual Program Plans.

#### **9) Contingency Management**

The lack of effective community-based treatments for stimulant use results in increased utilization of residential treatment services, particularly in the Medi-Cal program. DHCS proposes to offer contingency management via a pilot, as it is the only treatment repeatedly shown in studies to work for stimulant use disorder. Contingency management uses small motivational incentives combined with behavioral treatment as an effective treatment for stimulant use disorder. The Department proposes to implement the motivational incentives through a mobile application that will be accessible to patients through smart phones, tablets or computers.

## **(V) Home and Community-Based Services Infrastructure and Support**

### **1) Long-Term Services and Supports Data Transparency - IDD**

This is a multi-department initiative to improve long-term services and supports (LTSS) data transparency, including utilization, quality, and cost data. This will be accomplished by creating a LTSS Dashboard linked with statewide nursing home, long-term care, and HCBS utilization and cost data, CDPH licensing data, LTC Ombudsman data, and other quality and demographic data. The goal of increased transparency is to make it possible for regulators, policymakers, and the public to be informed while we continue to expand, enhance and improve the quality of home and community-based services.

### **2) Addressing Digital Divide for Adults with HCBS - IDD**

Telehealth services accelerated during the pandemic have the potential to improve access to health care from home and with family. Older adults and adults with disabilities eligible for Medi-Cal tele-health services and participating in HCBS will be provided tablets or other appropriate devices for telehealth, along with broadband and tech support (including expanded language access for tech support). This initiative leverages a new CDA digital divide initiative with Older American Act providers to increase the number of older adults and adults with disabilities receiving HCBS who are connected to tele-health and to other digital services and supports that prevent isolation and support well-being, while furthering the goals of the Master Plan for Aging.

### **3) System Improvement - IDD**

The proposed immediate investments will improve and stabilize the services directly impacting consumers, build the infrastructure to support consumers and their families through person-centered practices and supports. Additionally, a prevailing need and challenge within the developmental service system is moving from a compliance-based system to an outcome-based system. To accomplish this conversion, DDS will need to build infrastructure and modernize methods for collecting and analyzing information about consumer services and outcomes.

1. Accelerate Service Coordinator Recruitment and Hiring
2. Outcomes-Based System
3. Modernize Regional Center Information Technology Systems



4. Organizational Change Management (RCs and DDS)
5. Person Centered Planning
6. Support Development of New Community Services and Supports

#### **4) Ombudsperson Office and Restructure - IDD**

This initiative works to improve dispute resolution and due process activities – This proposal would establish an Ombudsperson's Office at DDS and redesign the appeal and Fair Hearing process.