



# Wyoming HCBS Spending Narrative Update (FFY 2022 Q4) American Rescue Plan Act of 2021, Section 9817

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*The Wyoming Department of Health, Division of Healthcare Financing provides access to quality, cost-effective services for Wyoming citizens within available financial resources in order to promote self-sufficiency and positive health outcomes.*

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## Executive Summary

The Wyoming Department of Health, Division of Healthcare Financing (Division) is the Medical Assistance Unit within the Single State Agency and directly administers the Wyoming Medicaid home and community-based (HCBS) waiver programs. Wyoming's HCBS programs include:

- The Comprehensive Waiver and Supports Waiver, collectively referred to as the Developmental Disabilities (DD) Waivers. The DD Waivers serve participants who have an intellectual or developmental disability, or an acquired brain injury (ABI).
- The Community Choices Waiver (CCW). The CCW serves individuals who are 65 and older, or who are between the ages of 19 and 64 and are determined to have a disability, which is demonstrated through a disability determination by the Social Security Administration (SSA) or by the Department of Health or its agent using SSA determination criteria.
- The Care Management Entity (CME) and Children's Mental Health Waiver (CMHW), referred to as the CME/CMHW. The CME/CMHW serves youth between the ages of 4 and 21 who have a serious emotional disturbance or serious mental illness.
- Home health and rehabilitation services delivered through the Medicaid State Plan.

On March 11, 2021, President Biden signed the American Rescue Plan Act of 2021 (ARPA). Section 9817 of the ARPA provides a temporary 10 percent increase to the Federal Medical Assistance Percentage (FMAP) for specified Medicaid HCBS expenditures. On May 13, 2021, the Division received guidance from the Centers of Medicare and Medicaid Services (CMS) related to the implementation of Section 9817 of the ARPA. This guidance included the requirement that states submit an initial and quarterly spending plan and narrative on the activities that the state has implemented or intends to implement to enhance, expand, or strengthen HCBS under the Medicaid program.

The following narrative updates information on the activities the Division is implementing, the projected cost of each activity, and the overall estimated funds attributable to the increase in the FMAP that the Division anticipates claiming between April 1, 2021 and March 31, 2022. The Division has developed an ARPA webpage, which includes spending plans, information on upcoming stakeholder engagement sessions, and recordings from previous stakeholder engagement sessions. The website is located at <https://health.wyo.gov/healthcarefin/hcbs/hcbsarpa/>.

## Ongoing Stakeholder Input and Engagement

In an effort to involve HCBS stakeholders in the process, the Division continues to hold community engagement sessions to seek feedback from participants, providers, case managers, and other stakeholders of the CCW and DD Waivers on how Wyoming could best utilize the temporary influx of federal funding that is anticipated to be available through Section 9817 of the ARPA. The following sessions have been conducted, and recordings of the sessions are available on the Wyoming HCBS ARPA webpage.

### Stakeholder Feedback

- Increase provider rates
- Expand assistive technology and home modifications
- Fund transition services
- Conduct person-centered training
- Translate participant resource documents

- Wednesday, April 7, 2021, 1:00PM – 2:00PM – Providers and Case Managers
- Wednesday, April 7, 2021, 3:00PM – 4:00PM – Participants and Other Stakeholders
- Thursday, April 8, 2021, 6:00PM – 7:00PM – Interested Stakeholders
- Thursday, July 29, 2021, 2:00PM – 3:30PM – Interested Stakeholders
- Friday, August 6, 2021, 10:00AM – 11:30AM – Interested Stakeholders

Stakeholder input sessions continue to generate ideas on how to expend the additional funding that Wyoming will receive as a result of the implementation of Section 9817 of the ARPA, including:

- Increasing provider reimbursement rates;
- Expanding assistive technology and home modification services;
- Funding transition services;
- Providing education and skill building for case managers and direct support professionals, including education on person-centered practices;
- Funding waitlists;
- Funding additional supported employment services; and
- Translating participant resource documents.

The Division has implemented several of these suggestions as part of its effort to enhance, expand, and strengthen HCBS in Wyoming.

[The Division will hold a stakeholder meeting on May 26, 2022 to solicit feedback on strategies to stand up several Community Choices Waiver services identified in this narrative update.](#)

## Technical Assistance

Wyoming was selected as one of seven states to receive intensive, short-term technical assistance through an ADvancing States program generously supported by The SCAN Foundation, The John A. Hartford Foundation, the Peterson Center on Healthcare, and the Milbank Memorial Fund. This project was intended to provide the selected states with assistance to facilitate and expedite the implementation of their plans to expand, enhance and strengthen services for older adults and persons with disabilities using ARPA funding. The project, which ended on November 30, 2021, resulted in a comprehensive project plan that the Division uses to manage and track each identified ARPA activity.

## Narrative of Planned Projects and Expenditures

In accordance with Section 9817(b) of the ARPA, the Division has identified several projects that will enhance, expand, or strengthen HCBS. These projects include short-term activities that will be implemented in response to the COVID-19 public health emergency (PHE), as well as longer term strategies that will sustain promising and effective programs and services.

[All identified activities fall within the scope of services listed in Appendix B in State Medicaid Director Letter #21-003 \(SMD# 21-003\) issued by the Centers for Medicare and Medicaid Services. Activities are consistent with examples set forth in Appendix C and D of SMD# 21-003, do not cover services delivered](#)

in an Institution for Mental Disease or other institution setting, and do not include room or board payments.

Wyoming’s initial spending plan and narrative grouped the identified projects into five key categories. These categories are expanded home and community-based services, ~~community~~ transition and diversional services, expanding provider workforce and capacity, adopting enhanced care coordination, and structural planning, analysis, and accessibility. These projects have been further categorized into phases that outline timeframes by which each project will be implemented. The proposed timeline and activity updates, including progress and expenditures made on each activity, are detailed below. The Division is managing and tracking these activities in accordance with the project plan developed in November 2021 as a result of the ADvancing States technical assistance project .

**Table 1**  
**ARPA Activities Timeline by Phase**

Activity Timeline	Phase I April 2021 - March 2022	Phase II April 2022 - March 2023	Phase III April 2023 - March 2024
Increase provider reimbursement rates Create and incentivize case manager training Adopt enhanced care coordination Document translation			
Create/enhance assistive technology services Create transition services Create home modification and homemaker services Plan and implement IT services Level of Care (FASI) planning Customer experience tool			
Enhance supported employment services Implement DSP certification reimbursement			

**Phase I - April 2021 - March 2022 Implementation**

➤ Expanding Provider and Workforce Capacity - Increase provider reimbursement rates			
Projected expenditure	Expended to date	Percentage expended	Completion percentage
\$21,446,632	\$0.00	0%	0%
<b>Waiver(s) involved:</b> Children’s Mental Health Waiver (CMHW) Comprehensive Waiver Supports Waiver		<b>Federal and State authority changes:</b> 1915(b) waiver agreement (CMHW only) 1915(c) waiver agreements Wyoming Medicaid Chapter 47 (CMHW only)	
<p><b>Activity to be completed</b></p> <p><i>Outcome Statement: Providers of selected services that employ direct support professionals, <b>including independent providers</b>, will increase the compensation for direct support professionals.</i></p> <p>The Division will increase provider reimbursement rates of selected HCBS, including CME/CMHW, for the purpose of elevating the compensation for direct support professionals, improving provider recruitment and retention, and ensuring network adequacy.</p> <p>1915(c) waiver amendments to revise rate methodologies and increase provider reimbursement rates have been submitted and approved for the identified waivers.</p> <p>These rate increases only apply to services that are specifically categorized as HCBS, which are outlined in SMDL #21-003, Appendix B. <u>The Division has communicated to all stakeholders that this increase is temporary, and will end by March 31, 2024. In order for this increase to be sustained, the Wyoming Legislature will need to appropriate additional funds to the HCBS Waiver programs.</u></p>			
<b>Spending Narrative Update - FFY 2022 Q4</b>		<p><u>Comprehensive and Supports Waiver amendments to increase provider reimbursement rates for most services were approved on January 31, 2022 and went into effect on February 1, 2022. The Division has implemented an attestation process that all providers must complete. This attestation acknowledges that the provider must pass the entirety of the increase on to direct support workers, and requires the provider to identify the mechanism for passing this increase on.</u></p> <p><u>The Division expects to have expenditure data to report on the FFY 2022 Q2 spending plan.</u></p>	

➤ Expanding Provider and Workforce Capacity - Create and incentivize case manager training			
Projected expenditure	Expended to date	Percentage expended	Completion percentage
\$1,319,235	\$0.00	0%	0%
<b>Waiver(s) involved:</b>		<b>Federal and State authority changes:</b>	

<p><b>Community Choices Waiver Comprehensive Waiver Supports Waiver</b></p>	<p><b>1915(c) waiver agreements</b></p>
<p><b><u>Activity to be completed</u></b>  <i>Outcome Statement: Case managers will implement person-centered planning and best practices in case management services.</i></p> <p>The Division will develop and implement a case manager training and incentivization program. Training focus will include, but is not limited to:</p> <ul style="list-style-type: none"> <li>■ Person-centered planning;</li> <li>■ Best practices in case management services;</li> <li>■ Communication and leadership skills; and</li> <li>■ Developing and maintaining cross system partnerships.</li> </ul> <p>The training program will include incentivized rates for case managers who complete the program. This will be achieved through the submission of the appropriate waiver amendments to increase provider reimbursement rates.</p> <p><u>The Division will review case manager performance to determine the impact that the additional training has on case manager performance, and will ultimately decide if the training will simply be a resource or if the training will be required for all new case managers. In order for the enhanced rate to be sustained, the Wyoming Legislature will need to appropriate additional funds to the HCBS Waiver programs.</u></p>	
<p><b>Spending Narrative Update - FFY 2022 Q4</b></p>	<p><u>The Division included a certificate tier with an enhanced rate for case management services in the most recent Comprehensive and Supports Waiver amendment, which went into effect on February 1, 2022. The Division will include a case management certificate tier with an enhanced rate in a new Community Choices Waiver amendment, which is expected to be submitted in the third quarter of FFY2023. The Division has finalized an interagency agreement with the Wyoming Institute of Disabilities, Wyoming’s University Center for Excellence in Developmental Disabilities (UCEDD), to develop and deliver the training curriculum.</u></p>

<p>➤ <b>Adopting Enhanced Care Coordination</b></p>			
<p><b>Projected expenditure</b> \$10,424</p>	<p><b>Expended to date</b> \$0.00</p>	<p><b>Percentage expended</b> 0%</p>	<p><b>Completion percentage</b> 0%</p>
<p><b>Waiver(s) involved:</b> Children’s Mental Health Waiver</p>		<p><b>Federal and State authority changes:</b> 1915(b) waiver agreement 1915(c) waiver agreements Wyoming Medicaid Chapter 47</p>	
<p><b><u>Activity to be completed</u></b>  <i>Outcome Statement: Participants of CME/CMHW will have access to care coordination while waiting</i></p>			

for Supports Waiver services.

Currently, children and youth who are served by, or applying for participation in, the CME/CMHW program may not be served by the CME if they are on the waitlist for another waiver. The Division ~~will amend~~ amended the CME program's 1915 (b)/(c) waivers to permit participants with co-occurring disorders the choice to either continue to receive CME/CMHW HCBS services or receive state funded targeted case management services while they are waiting for Supports Waiver services. CME enrollment will terminate at the point in time that a youth is moved from the waitlist to funded status on the other waiver.

This activity will be funded through March 31, 2024. The Division will reevaluate the financial feasibility of extending this activity beyond this date by September 30, 2023.

Spending Narrative Update - FFY 2022 Q4

The Division is identifying work within the Electronic Medicaid Waiver System and the Benefits Management System that will need to occur in order to implement this activity.

➤ **Structural Planning, Analysis, and Accessibility - Document translation**

Projected expenditure	Expended to date	Percentage expended	Completion percentage
\$35,000	\$0.00	0%	0%

**Waiver(s) involved:**  
**Community Choices Waiver**  
**Comprehensive Waiver**  
**Supports Waiver**

**Federal and State authority changes:**  
**None**

**Activity to be completed**

*Outcome Statement: Participants, legally authorized representatives, and other stakeholders will have immediate access to spanish and Braille translations of written materials.*

The Division will translate HCBS written materials that may be utilized by participants, including but not limited to program rules, participant manuals, fact sheets, service indices, and documents related to participant-directed services. These materials will be translated to, at a minimum, Spanish and Braille. The Division will accomplish this by expanding its current contract for translation services to include these materials.

Future translation needs, including updates and new documents, will be ongoing and included in the Division's contract deliverables for translation services.

Spending Narrative Update - FFY 2022 Q4

The Division has identified a vendor that can provide Braille translations, and is working to get an interagency agreement in place. Translation services are earmarked to begin on or around July 1, 2022.

**Phase II - April 2022 - March 2023 Implementation**

<b>➤ Expanded Home and Community-Based Services - Create or enhance Assistive Technology Services</b>			
Projected expenditure	Expended to date	Percentage expended	Completion percentage
\$6,160,560	\$0.00	0%	0%
<b>Waiver(s) involved:</b> Community Choices Waiver Comprehensive Waiver Supports Waiver		<b>Federal and State authority changes:</b> 1915(c) waiver agreements Chapters 34, 44, and 45 of Wyoming Medicaid Rule	
<p><b><u>Activity to be completed</u></b></p> <p><i>Outcome Statement: Participants will have increased access to their providers through the use of technology.</i></p> <p>The Division will expand participant access to needed technology devices, which will increase their access to telehealth and virtual services. <u>Capital investments and internet connectivity costs are not included in this initiative.</u></p> <p>This will be achieved through the submission of the appropriate waiver amendments to add services, or to revise the scope of services to specifically allow the purchase of smartphones, computers, or other technology that can be used by the participant to access telehealth and virtual services. The Division will develop necessary limitations to services to ensure that items are purchased in a reasonable and efficient manner.</p> <p><u>This activity will be funded through March 31, 2024. The Division will reevaluate the financial feasibility of extending this activity beyond this date by September 30, 2023.</u></p>			
<b>Spending Narrative Update - FFY 2022 Q4</b>		No Updates	

<b>➤ <u>Community Transition and Diversional Services</u> - Create <u>Community Transition, Home Modification, and Homemaker Services</u></b>			
Projected expenditure	Expended to date	Percentage expended	Completion percentage
\$1,760,100	\$0.00	0%	0%
<b>Waiver(s) involved:</b> Community Choices Waiver		<b>Federal and State authority changes:</b> 1915(c) waiver agreements Chapters 34 of Wyoming Medicaid Rule	
<p><b><u>Activity to be completed</u></b></p> <p><i>Outcome Statement: <u>Participants will have access to services needed to stay in their home or transition from a nursing facility back to their community. These services will include the support</u></i></p>			

needed to modify and maintain their home environments or to receive the initial financial support needed to transition from a nursing facility to their community.

In accordance with Application for a §1915(c) Home and Community-Based Waiver Instructions, Technical Guide and Review Criteria [Version 3.6, January 2019], the Division will fund initial set up costs that individuals incur when they transition from nursing facilities back into their community. Covered costs may include security deposits, utility activation fees, and basic furnishings. Room and board costs, including food and rent costs, will not be covered under this service. This will be achieved through an additional Community Transition Services option.

The Division will submit a Community Choices Waiver amendment to add all identified services. Services will be based on the participant’s assessed needs, and will be subject to service caps and, for home modifications, lifetime expenditure caps. The Division is reviewing the feasibility of using service definitions and current administration mechanisms used for similar services identified in the Comprehensive and Supports Waivers to guide the development and implementation of homemaker and home modification services.

Due to the significant cost savings that will be realized as individuals move from institutional care to community support, the Division intends to extend this funding beyond march 31, 2024. All funding decisions are based on Legislative appropriation.

Spending Narrative Update - FFY 2022 Q4

The Division has conducted research on transition services being used throughout the nation, and is working closely with stakeholders and industry experts to draft a definition for transition services. Internal teams are discussing IT system changes and provider credentialing considerations that will need to be addressed in order to implement these services. The Division will hold a stakeholder input meeting on May 26th to discuss potential implementation strategies for these services. A Community Choices Waiver amendment submission is expected in the third quarter of FFY2023.

➤ **Structural Planning, Analysis, and Accessibility - Plan and implement IT services**

Projected expenditure \$600,000	Expended to date \$0.00	Percentage expended 0%	Completion percentage 0%
Waiver(s) involved: Community Choices Waiver Comprehensive Waiver Supports Waiver		Federal and State authority changes: None	

**Activity to be completed**

*Outcome Statement: The Division will plan, design, and implement necessary IT enhancements that will improve the administration of HCBS programs.*

The Division presently maintains two IT systems that are focused on Medicaid HCBS. The Division

intends to modernize its platform for service planning, provider management, and critical incident reporting.

Ongoing maintenance and updates will be funded beyond March 31, 2024.

<b>Spending Narrative Update - FFY 2022 Q4</b>	No Update
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**➤ Structural Planning, Analysis, and Accessibility - Level of Care planning**

Projected expenditure \$100,000	Expended to date \$0.00	Percentage expended 0%	Completion percentage 0%
<b>Waiver(s) involved:</b> Comprehensive Waiver Supports Waiver		<b>Federal and State authority changes:</b> None - 1915(c) waiver agreements and Chapter 46 of Wyoming Medicaid Rule will require amendments if the FASI is implemented after March 2024.	

**Activity to be completed**

*Outcome Statement: Functional Assessment Standardized Items (FASI) will be implemented as the level of care assessment for participants of the CCW and DD Waiver programs.*

Prior to the COVID-19 PHE, the Division consulted with Public Consulting Group (PCG) to review the Division's current level of care assessments, and make recommendations for implementing FASI. PCG developed a work plan that identifies the activities needed to transition Wyoming to the use of the FASI for institutional level of care assessments.

In order to align with national efforts to create exchangeable data across Medicare and Medicaid programs, the Division will continue to evaluate and plan for the implementation of the FASI as the new institutional level of care assessment for Wyoming Medicaid. The FASI will not be implemented prior to April 1, 2024.

If the FASI is fully implemented, the administrative costs associated with regular level of care assessments will be absorbed by the Division.

<b>Spending Narrative Update - FFY 2022 Q4</b>	No Update
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**➤ Structural Planning, Analysis, and Accessibility - Customer Experience Tool**

Projected expenditure \$400,000	Expended to date \$0.00	Percentage expended 0%	Completion percentage 0%
<b>Waiver(s) involved:</b> Community Choices Waiver		<b>Federal and State authority changes:</b> None	

<p><b>Comprehensive Waiver Supports Waiver</b></p>	
<p><b><u>Activity to be completed</u></b>  <i>Outcome Statement: A customer experience tool, such as NCI or CAHPS, will be implemented for all HCBS populations in order to measure the participant’s experience with services.</i></p> <p>The NCI Aging and Disabilities Survey will provide information about the experiences of participants receiving Community Choices Waiver (CCW) services. This data will be analyzed and compared to national trends, and will be examined by the Quality Improvement Committee for potential areas of improvement in waiver services and administration.</p> <p>This is the first time that Wyoming will participate in the NCI-AD, so data collected in the first year of implementation will be used to establish baseline information on participants of the CCW.</p> <p><u>The Division intends to fund this activity beyond March 31, 2024.</u></p>	
<p><b>Spending Narrative Update - FFY 2022 Q4</b></p>	<p>No Update</p>

**Phase III - April 2023 - March 2024 Implementation**

<b>➤ Expanded Home and Community-Based Services - Enhance Supported Employment Services</b>			
<b>Projected expenditure</b>	<b>Expended to date</b>	<b>Percentage expended</b>	<b>Completion percentage</b>
<b>\$2,589,989</b>	<b>\$0.00</b>	<b>0%</b>	<b>0%</b>
<b>Waiver(s) involved:</b> Comprehensive Waiver Supports Waiver		<b>Federal and State authority changes:</b> 1915(c) waiver agreements Chapters 45 of Wyoming Medicaid Rule	
<p><b><u>Activity to be completed</u></b>  <i>Outcome Statement: Participants will have increased access to supported employment services in order to obtain and maintain integrated employment.</i></p> <p>The Division will increase the amount of supported employment services available to participants. This strategy has been specifically requested by stakeholders during stakeholder input sessions.</p> <p>This will be achieved through the submission of the appropriate waiver amendments. Services will be added to support individuals who choose to work, or will be revised to establish how a participant can request additional funding for supported employment in addition to their established individual resource allocation.</p> <p><u>This activity will be funded through March 31, 2024. The Division will reevaluate the financial feasibility of extending this activity beyond this date by September 30, 2023.</u></p>			
<b>Spending Narrative Update - FY2022 Q4</b>		No Update	

<b>➤ Expanding Provider and Workforce Capacity - Implement DSP certification reimbursement</b>			
<b>Projected expenditure</b>	<b>Expended to date</b>	<b>Percentage expended</b>	<b>Completion percentage</b>
<b>\$780,060</b>	<b>\$0.00</b>	<b>0%</b>	<b>0%</b>
<b>Waiver(s) involved:</b> Comprehensive Waiver Supports Waiver		<b>Federal and State authority changes:</b> None	
<p><b><u>Activity to be completed</u></b>  <i>Outcome Statement: Direct support professionals will demonstrate exemplary skill and knowledge while supporting people with disabilities.</i></p> <p>The Division will reimburse providers for the cost of direct support professional certification through a nationally recognized entity such as the National Alliance of Direct Support Professionals (NADSP) or</p>			

NADD. Certification focus will include, but is not limited to:

- Person-centered practices;
- Crisis prevention and intervention;
- Safety; and
- Health and wellness.

This activity will be funded through March 31, 2024. The Division will reevaluate the financial feasibility of extending this activity beyond this date by September 30, 2023.

Spending Narrative Update - FFY 2022 Q4	No Update
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## Attestations

In accordance with the requirements of ARPA, Section 9817, the State of Wyoming attests to the following statements:

- Wyoming is using the federal funds attributable to the increased Federal Medical Assistance Percentage (FMAP) to supplement and not supplant existing state funds expended for Medicaid HCBS in effect as of April 1, 2021;
- Wyoming is using the state funds equivalent to the amount of federal funds attributable to the increased FMAP to implement or supplement the implementation of one or more activities to enhance, expand, or strengthen HCBS under the Medicaid program;
- Wyoming is not imposing stricter eligibility standards, methodologies, or procedures for HCBS programs and services than were in place on April 1, 2021;
- Wyoming is preserving covered HCBS, including the services themselves and the amount, duration, and scope of those services, in effect as of April 1, 2021; and
- Wyoming is maintaining HCBS provider payments at a rate no less than those in place as of April 1, 2021.

**State of Wyoming HCBS Spending Plan - Federal Fiscal Year 2022 Q4 Update**

**ARPA Section 9817**

The following tables demonstrate the expenditures the Division expects to incur for the identified projects. Projected expenditures are reported by fiscal quarter. Figures will be updated as funds are expended and the Division is able to more accurately pinpoint planned and actual expenditures.

**Total Wyoming Planned and Expended Funds Attributable to Enhanced FMAP**

Federal Fiscal Year	Totals	Q1: Oct to Dec	Q2: Jan to Mar	Q3: Apr to Jun	Q4: Jul to Sep
<b>2021</b>					
Planned Expenditures	\$ -			\$ -	\$ -
Actual Amount Expended	\$ -			\$ -	\$ -
<b>2022</b>					
Planned Expenditures	\$ 5,907,996		\$ -	\$ 2,963,253	\$ 2,944,742
Actual Amount Expended	\$ -	\$ -	\$ -	\$ -	\$ -
<b>2023</b>					
Planned Expenditures	\$ 18,585,299	\$ 2,984,742	\$ 5,106,851	\$ 5,246,852	\$ 5,246,852
Actual Amount Expended	\$ -	\$ -	\$ -	\$ -	\$ -
<b>2024</b>					
Planned Expenditures	\$ 10,708,706	\$ 5,361,852	\$ 5,346,853		
Actual Amount Expended	\$ -	\$ -	\$ -		

**Total Amount Planned**                     \$    35,202,000  
**Total Amount Expended**                 \$                   -  
**Total Amount Remaining**                \$    35,202,000

**Expand Home and Community-Based Services**

Federal Fiscal Year	Totals	Q1: Oct to Dec	Q2: Jan to Mar	Q3: Apr to Jun	Q4: Jul to Sep
<b>2021</b>					
Planned Expenditures	\$ -			\$ -	\$ -
Actual Amount Expended	\$ -			\$ -	\$ -
<b>2022</b>					
Planned Expenditures	\$ -	\$ -	\$ -	\$ -	\$ -
Actual Amount Expended	\$ -	\$ -	\$ -	\$ -	\$ -
<b>2023</b>					
Planned Expenditures	\$ 5,250,329	\$ -	\$ 1,750,109	\$ 1,750,110	\$ 1,750,110
Actual Amount Expended	\$ -	\$ -	\$ -	\$ -	\$ -
<b>2024</b>					
Planned Expenditures	\$ 3,500,220	\$ 1,750,110	\$ 1,750,110		
Actual Amount Expended	\$ -	\$ -	\$ -		

**Total Amount Planned**                     \$    8,750,549  
**Total Amount Expended**                 \$                   -  
**Total Amount Remaining**                \$    8,750,549

**Transition and Diversional Services**

Federal Fiscal Year	Totals	Q1: Oct to Dec	Q2: Jan to Mar	Q3: Apr to Jun	Q4: Jul to Sep
<b>2021</b>					
Planned Expenditures	\$ -			\$ -	\$ -
Actual Amount Expended	\$ -			\$ -	\$ -
<b>2022</b>					
Planned Expenditures	\$ -	\$ -	\$ -	\$ -	\$ -

Actual Amount Expended	\$ -	\$ -	\$ -	\$ -	\$ -
<b>2023</b>					
Planned Expenditures	\$ 1,056,000	\$ -	\$ 352,000	\$ 352,000	\$ 352,000
Actual Amount Expended	\$ -	\$ -	\$ -	\$ -	\$ -
<b>2024</b>					
Planned Expenditures	\$ 704,000	\$ 352,000	\$ 352,000		
Actual Amount Expended	\$ -	\$ -	\$ -		

**Total Amount Planned**                     \$     1,760,000  
**Total Amount Expended**                   \$               -  
**Total Amount Remaining**                 \$     1,760,000

**Expand Provider Workforce and Capacity**

Federal Fiscal Year	Totals	Q1: Oct to Dec	Q2: Jan to Mar	Q3: Apr to Jun	Q4: Jul to Sep
<b>2021</b>					
Planned Expenditures	\$ -			\$ -	\$ -
Actual Amount Expended	\$ -			\$ -	\$ -
<b>2022</b>					
Planned Expenditures	\$ 5,886,507	\$ -	\$ -	\$ 2,943,253	\$ 2,943,253
Actual Amount Expended	\$ -	\$ -	\$ -	\$ -	\$ -
<b>2023</b>					
Planned Expenditures	\$ 11,773,014	\$ 2,943,253	\$ 2,943,253	\$ 2,943,253	\$ 2,943,253
Actual Amount Expended	\$ -	\$ -	\$ -	\$ -	\$ -
<b>2024</b>					
Planned Expenditures	\$ 5,886,507	\$ 2,943,253	\$ 2,943,253		
Actual Amount Expended	\$ -	\$ -	\$ -		

**Total Amount Planned**                     \$    23,546,027  
**Total Amount Expended**                   \$               -  
**Total Amount Remaining**                 \$    23,546,027

**Adopt Enhanced Care Coordination**

Federal Fiscal Year	Totals	Q1: Oct to Dec	Q2: Jan to Mar	Q3: Apr to Jun	Q4: Jul to Sep
<b>2021</b>					
Planned Expenditures	\$ -			\$ -	\$ -
Actual Amount Expended	\$ -			\$ -	\$ -
<b>2022</b>					
Planned Expenditures	\$ 1,489	\$ -	\$ -	\$ -	\$ 1,489
Actual Amount Expended	\$ -	\$ -	\$ -	\$ -	\$ -
<b>2023</b>					
Planned Expenditures	\$ 5,956	\$ 1,489	\$ 1,489	\$ 1,489	\$ 1,489
Actual Amount Expended	\$ -	\$ -	\$ -	\$ -	\$ -
<b>2024</b>					
Planned Expenditures	\$ 2,979	\$ 1,489	\$ 1,490		
Actual Amount Expended	\$ -	\$ -	\$ -		

**Total Amount Planned**                     \$     10,424  
**Total Amount Expended**                   \$               -  
**Total Amount Remaining**                 \$     10,424

**Structural Planning, Analysis, and Accessibility**

Federal Fiscal Year	Totals	Q1: Oct to Dec	Q2: Jan to Mar	Q3: Apr to Jun	Q4: Jul to Sep
<b>2021</b>					
Planned Expenditures	\$ -			\$ -	\$ -
Actual Amount Expended	\$ -			\$ -	\$ -
<b>2022</b>					
Planned Expenditures	\$ 20,000	\$ -	\$ -	\$ -	\$ 20,000
Actual Amount Expended	\$ -	\$ -	\$ -	\$ -	\$ -
<b>2023</b>					
Planned Expenditures	\$ 500,000	\$ 40,000	\$ 60,000	\$ 200,000	\$ 200,000
Actual Amount Expended	\$ -	\$ -	\$ -	\$ -	\$ -
<b>2024</b>					
Planned Expenditures	\$ 615,000	\$ 315,000	\$ 300,000		
Actual Amount Expended	\$ -	\$ -	\$ -		

**Total Amount Planned**                    \$    1,135,000  
**Total Amount Expended**                \$                -  
**Total Amount Remaining**               \$    1,135,000