



Developmental Disabilities Advisory Council

Meeting Agenda and Minutes

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| Date | June 2, 2022 |
| Time | 2:00pm – 4:00pm |
| Location | Herschler Building Extension Room 1 - 122 West 25th Street, Capital Extension, Cheyenne - MAP Call In Information: https://uwyo.zoom.us/j/202849015 , (669) 900-6833, Meeting ID: 202 849 015 |
| Purpose | To assist and advise the Division of Healthcare Financing (Division) in implementing a statewide service delivery system for persons who are identified as having developmental and intellectual disabilities, and acquired brain injuries (ABI). |
| Members | Rita Basom, Ginny Chidsey, Maria Clark , Brenda Dick, Heather Dodson, Jeff Gardner, Kayla Green, Buck Gwyn, Arkansas Le Marr, Erin O'Neill, Sandy Root-Elledge, Bob Sell. Guests: Amy Riser - Wyoming Institute for Disabilities, Wyoming Assistive Technology Resources (WATR) |
| Division Staff | Elizabeth Forslund, Lee Grossman, Dillion Johnson, Julie Lacey, Samantha Mills, Shirley Pratt |

TOPICS AND HIGHLIGHTS

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| 1. | <p><u>Roll call and approval of minutes</u></p> <ul style="list-style-type: none"> • Jeff called the meeting to order at 2:03pm. • Arkansas moved to approve the minutes of March 3, 2022; Rita seconded. Motion carried. |
| 2. | <p><u>American Rescue Plan Act (ARPA) update</u></p> <ul style="list-style-type: none"> • Assistive technology <ul style="list-style-type: none"> ○ The Division has been participating in a consortium with other states using ARPA funding for assistive technology projects. We are exploring ways to eliminate barriers and get funding to providers. The use of innovation grants is an exciting model that would allow providers to develop programs that work for them and their participants, since services are delivered differently throughout the state. Internally, the Division is working to educate staff members. This education will be expanded to other stakeholders as a way to address fears and barriers. ○ <u>Member question:</u> What is the timeline for this project? <i><u>Division response:</u> These funds are tied to ARPA, so they need to be expended by the federal deadline of March 31, 2025. The benefit of innovation grants is that they don't need to be approved through a waiver amendment.</i> ○ <u>Member comment:</u> WIND is available to provide training on assistive technology options. ○ <u>Member question:</u> Who would be responsible for administering these grants? <i><u>Division response:</u> The Division would be responsible for administering and monitoring.</i> ○ <u>Member question:</u> How would this program be sustained once the ARPA funding is expended? <i><u>Division response:</u> The Division will be monitoring the success of this program and will be discussing how to move this project beyond this one-time funding. Demonstrated success can lead to other funding opportunities.</i> ○ <u>Member comment:</u> This is a good opportunity to get the program started so we can figure out what is valuable and how to sustain. Innovation is the key to the future. |

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| | <ul style="list-style-type: none"> ○ <u>Member comment</u>: It is suggested that the Division consult with providers that have been involved with and have expertise in grants. Getting others involved in how granting decisions are made and how results should be reported would be beneficial. ○ <u>Member comment</u>: The grant model is a great idea. It is important that it is equitable and available to participants as well as providers. It is good that we are looking at current barriers. Being able to purchase things like iPads or tablets would open up more possibilities. ● Case manager training <ul style="list-style-type: none"> ○ The Division is working with WIND to develop and implement person-centered case manager training. Training will focus on best practices related to pre-defined topic areas. ○ Amy Rieser from WIND provided further updates. A survey has been sent to case managers to notify them of the progress on this project and elicit their participation. They have the opportunity to sit on an advisory board, be involved in individual interviews, or suggest families and participants who may want to provide input. Compensation is available for interviewees. A website has been made available that has more information. ○ <u>Member comment</u>: It is good that you are including other stakeholders as well. Participants and families may have thoughts on what should be included in this training. ● Extension of spending deadline to March 31, 2025 <ul style="list-style-type: none"> ○ This extension allows the Division more time to fully develop and implement the activities outlined in the spending plan and narrative that was submitted and approved by the Centers for Medicare and Medicaid Services (CMS). The enhanced funding available through ARPA will not be increased due to this extension. The Division will be required to meet maintenance of effort standards throughout the time it is expending the enhanced ARPA funding. ● Ongoing activities <ul style="list-style-type: none"> ○ The rate increase went into effect on February 1, 2022. Providers are required to apply the full amount of the increase to staff compensation. ○ In addition to the rate increase, the Division is working on case manager training, documentation translation for broader stakeholder accessibility, and the National Core Indicators procurement. ○ Work is being conducted on projects for the Community Choices Waiver as well as the Comprehensive and Supports Waivers. ○ The Division will be holding additional stakeholder engagement opportunities to ensure the ARPA priorities continue to be relevant, and provide updates on the progress of implementing identified projects. ○ <u>Member comment</u>: The rate increase has had a significant impact. Although it hasn't solved the overall problem, it has allowed providers to be more strategic. Families and staff members are breathing easier. ○ <u>Member question</u>: Will innovation grants be available to support staff recruitment or retention? <u>Division response</u>: <i>Not at this time. Innovation grants will be used for technology, but we still need to identify the parameters.</i> |
| 3. | <p><u>Division updates</u></p> <ul style="list-style-type: none"> ● Supports and Comprehensive Waiver amendments <ul style="list-style-type: none"> ○ Amendments for the Comprehensive and Supports Waivers have been submitted to CMS. These amendments include an additional rate increase for agency providers of identified services, allowance of virtual supports for Adult Day Services and Community Living Services |

Basic tier, allowance of identified services when a participant is in an acute care setting if the service is beyond the scope of hospital services, and electronic visit verification requirements.

- Organized Health Care Delivery Systems (OHCDS)
 - The OHCDS model would allow a larger certified entity to subcontract with a small or independent provider in order to take on many of the administrative tasks and provide oversight. The certified entity would have to provide at least one other service. This would be a creative way to gain efficiency within the state. This is not currently an option in Wyoming. Public Consulting Group (PCG) conducted research on other states that use this model. It is not used to a high degree in other states, but this research allows us to benefit from the lessons other states have learned.
 - Council members were asked for their initial concerns, questions, and comments, and were encouraged to provide feedback on the problems or merits of this approach in Wyoming.
 - Member question: Can you give examples of who could be an OHCDS? Division response: *PCG research identified a variety of organizations such as large service providers, independent living centers, and community health or county organizations. States define the provider type and scope of the service to be delivered.*
 - Member comment: This sounds similar to the intent of self-direction. The Division should ensure that there is sufficient oversight.
 - Member comment: The idea is intriguing and is something our state needs. There is a heavy lift of getting so many providers certified, monitored, and sanctioned. There is a quality aspect that this service would seem to address, as well as an additional revenue source for some providers.
 - Member question: Would the smaller provider remain a certified provider? Division response: *It would depend on how the OHCDS option is set up. The state establishes the maximum percentage that the OHCDS can charge.*
 - Member comment: Things to address when discussing this on a larger scale would be who is liable, who maintains the insurance, and what kind of oversight is allowed.
 - Member question: What would stop all staff members from becoming providers and having one OHCDS be responsible for all of them? Division response: *That is not the intent of the OHCDS and we don't foresee this being the result.*
 - Member comment: There is benefit in having a different entity handle the administrative details. However, there are a lot of providers who would no longer be working for themselves, so there may not be a lot of interest. Division response: *The OHCDS can be an option, but states cannot require providers to use this option.*
 - Member comment: From the parent's perspective, this may offer more workforce options. It would definitely be worth piloting. Even if it wasn't successful in other states, it may be successful in Wyoming.
 - Member comment: Some smaller providers may say it is worth a percentage of their income to have someone else handle the administrative stuff so they can do the work of providing services. This could also be a relationship builder between providers, can diversify income streams, and allow people to focus on what is in their wheelhouse.
 - Member comment: When making decisions, the Division needs to be sure to include stakeholders, hold forums, and talk to a multitude of people.
 - Member comment: You will need provider buy in. Can benefits or overhead costs be covered?

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| | <ul style="list-style-type: none"> o <u>Member comment:</u> This would be a good opportunity for staff to use the OHCDs rather than going independent. • Electronic Visit Verification (EVV) troubleshooting <ul style="list-style-type: none"> o EVV, which is federally required, went live in April. The Division and Carebridge, the vendor for the EVV solution, have been troubleshooting concerns and fielding questions. It has helped us identify some programmatic inconsistencies with subregulatory guidance and staff understanding. o Providers are not required to use Carebridge, but can use a system, such as Therap, that integrates with Carebridge. There have been some challenges with systems working together, but we continue to work through them. o <u>Member comment:</u> The Carebridge system is very easy to use. • Schedule of next year's meetings <ul style="list-style-type: none"> o Council discussed changing the meeting day and time beginning in 2023. We will focus on the first Wednesday or Thursday of the last month of the quarter, in the morning. Meeting invitations will be sent out in the next week. |
| 4. | <p><u>NCI Staff Stability Survey</u></p> <ul style="list-style-type: none"> • In response to a request during the last DD Advisory Council Meeting, Dillon reviewed key takeaways from <u>Wyoming specific data</u> from the 2018-2020 Staff Stability Surveys. <ul style="list-style-type: none"> o <u>Member comment:</u> The data is maddening, but not surprising. o <u>Member comment:</u> The data is reflective of decreased funding in integration. Wyoming was once number one in the country, and now we have regressed. I hope to see this change over time. • The 2021 survey is in process. Currently we have a 25% response rate. <ul style="list-style-type: none"> o <u>Member question:</u> Who is the survey sent to? <u>Division response:</u> <i>Providers who serve three or more participants.</i> o <u>Member comment:</u> As council members, we are ambassadors. We need to talk to providers and encourage them to respond. As a system, we will benefit from as many perspectives as possible. o <u>Member comment:</u> The more responses we get, the more valid the data will be. o <u>Member question:</u> Who is sending the survey requests? <u>Division response:</u> <i>The Division is sending the requests, but they are coming through the NCI system. We are reaching out to providers individually, and letting them know what communications to look for.</i> |
| 5. | <p><u>Member updates</u></p> <ul style="list-style-type: none"> • Ginny provided links to two web pages that outline upcoming Department of Education training opportunities. Of particular interest is the Summer Culminating Event being held in Casper on June 21-22, 2022. This conference will focus on students with complex needs, including visual impairments. Continuing education credits are available. <ul style="list-style-type: none"> o https://edu.wyoming.gov/educators/conferences/ o https://wyominginstructionalnetwork.com/outreach-services/vision-outreach-services/summer-culminating-event-june-21-22-2022/ • The Division of Vocational Rehabilitation just completed a federal audit. There were some recommendations, but the audit was successful overall. Brenda will check on when enhanced rates will be available for providers with higher certification levels. • Heather and Erin shared exciting news about supported decision making. • Erin shared an update on her living situation. |

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| | <ul style="list-style-type: none"> • The DD Conference hosted by the Wyoming Governor’s Council will be held on June 22-24, 2022. The deadline for registration is June 10th. Keynote speakers include Nicole LeBlanc, Kathy Buckley, and Josh Davies. • Protection and Advocacy collaborating with the Administration for Community Living on a short-term advocacy project for public health issues. • The Wyoming Institute for Disabilities received three more years of funding for the Family to Family Network. Education and health related ECHO networks continue to be available for continuing education. They continue to work with the Equality State Research Network to document historical accounts and personal narratives of people in institutions. They have received public health workforce funding to address assistive technology in employment. • The Wyoming Community Service Providers will hold the DSP of the Year banquet on September 12th in Casper. They will be hosting a Creating Change workshop to provide education on the legislative process, and guidance on how people can get involved. They have reached out to the legislative and executive branches of Wyoming government to encourage discussion about the future of the waivers, with the hope of developing a longer term plan rather than short-term budget solutions. |
| 6. | <p><u>Public Comment</u></p> <p>There was no public comment offered during the public comment period.</p> |
| 7. | Arkansas moved to adjourn the meeting. Ginny seconded. |
| NEXT MEETING – September 1, 2022 - In Person or Zoom | |