

DS State Program Standing Committee (SPSC)

July 21, 2022

Meeting Held Virtually on Microsoft Teams

Simple Language Summary

Attendees

Committee Members: Bethany Drum, Ed Place, Karen Price, Barb Prine, David Ballou, Priscilla Connolly, Barbara Lee, Chad Cleverly

Guests: Jessica Stehle, Chuck Medick, Tonya Mason, Bart Mair, Anne Bilodeau, Dyaln Devlin, Julie Cunningham, Jen Hayes, Jess Moore, Marie Lallier, Kara Artus, Collette Wilson

State Employees: Clare McFadden, Jessica Nadeau, Chris O'Neill, Laura Siegel, June Bascom, Dylan Frazier, Lisa Parro, Judy Spittle

Roll Call and Review Agenda

A roll call was completed, and the meeting agenda was reviewed

Review of minutes of June meeting

The SPSC minutes from June meeting was reviewed. David Ballou made a motion to approve, and Karen Price seconded the motion to accept the meeting minutes.

HCRS Re-Designation

Jessica introduced members of HCRS Staff

No areas of concern – met requirements in all areas

Highlights

HCRS did an outstanding job on being creative to keep people engaged in services and connected with their support staff throughout the pandemic

They put together multiple online, interactive activities and delivered supplies to homes (baking, crafting, games, etc.)

For folks who didn't have iPad or other devices to join, the agency purchased those devices and delivered those as well.

Outdoor lunch gatherings and drive-by celebrations for birthdays, with fire department included

Virtual trainings and meetings held that all staff (including families and SLP's) were invited to. Some had 90% attendance and requested some of the meetings to continue after COVID

Training

Team leads positions were developed in the office. To help support other staff a Supervision structure was implemented in all offices. This has made staff feel more supported, informed, and connected to one another. In addition to adding new positions HCRS also had retention bonuses.

HCRS complimented and thanked the support of DAIL and SPSC committee

HCBS Conflict of Interest – Dylan Frazier – DVHA

Dylan reviewed what has already been submitted to CMS and reviewed what is required

What is required?

VT must ensure HCBS direct service delivery is independent from: Evaluations of eligibility, Needs Assessments, and Person-centered plan development. The 5 programs in Vermont are: Choices for Care, Brain Injury, DD Services, Community Rehabilitation and Treatment and Intensive Home and HCBS.

Exceptions

If there are no other willing and qualified entities to provide case management activities, and the single entity sets up firewalls. These requirements only apply to HCBS. Mental health programs to consider State Plan rehabilitation as an alternative.

Federal Review

Submitted the following:

December 2021

A 5-year plan to Centers for Medicare and Medicaid Services (CMS):

- Which included a broad and robust stakeholder engagement
- Allowed more time for smooth transitions as programs come into compliance and
- Allowed more time to account for ongoing COVID-19 response and workforce shortages

May 2022

CMS began commenting on the plan and said that a 5-year timeline was unacceptable and indicated this:

- The Corrective action plan should only be 3 years long
- Vermont already conducted stakeholder engagement and should not need to do much more
- Comments did not acknowledge each activity would be done 5 times over an each HCBS program

July 2022

CMS continues to review a revised 3-year plan

- Includes broad and robust stakeholder engagement
- Complies with 3-year federal corrective action plan requirement
- Will be included in 1115 Global Commitment to Health demonstration as Attachment Q once CMS approves
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3 Year HCBS COI Plan

Bringing all 5 plans up to speed – 3 DAIL programs – align these

Barb Prine – if it was possible to do COI in one of these programs, we could do this? Dylan – yes, we could do that. We need to be in compliance with all programs at the end date.

Chad – importance of COI for the client- protects them as client

Julie C – IS CMS reviewing the 3-year plan now and is there a chance they say no to stakeholder engagement. Dylan is not getting this sense that they would say no.

Some percentages of Choices of Care are already in a COI environment. Is the Choice model for case management, is that acceptable to CMS? That is not permissible with CMS.

Phased Implementation begins January 1, 2025, with estimated completion by end of year.

Public comments accepted throughout this process.

ahs.medicaidpolicy@vermont.gov

Major areas of work:

1. Stakeholder Engagement
2. HCBS System Assessment

3. Establish New Eligibility, Assessment, Person-Centered Plan Development and Service Delivery Systems
4. Reimbursement Methodologies and Financial Modeling
5. Statute, Policy, and Manual Review and Updating
6. Quality Management System Design
7. Implementation Planning
8. Implementation

Next Steps

Post Request for Proposals for technical assistance (TA) by July 22, 2022 they were able to get this out ahead of time

Proposals due September 1, 2022

Execute TA contract by October 15, 2022

HCBS system assessment and stakeholder engagement begin by November 2022

Begin considering options for compliance across all HCBS programs by January 2023

SIS-A Updates – Hilary Conant

Vermont is using the Supports Intensity Scale- Adult assessment (SIS-A) CMS requires that we use an independently administered assessment tool to address conflict of interest in case management (the people who assess need can't also deliver the services).

DDSD chose a standardized tool because it offers an independent assessment of a person's support needs in a reliable, validated format, which will help reduce conflict of interest in services and provide an equitable approach to matching people to the services that fit their individual needs.

Everyone who receives Home and Community Based Services will need to have a SIS A assessment when we come into compliance with conflict-of-interest rules. We now know that the timeframe CMS will give us to make these changes is 3 years.

Sample Update

The current group completing SIS A assessments consists of 500 people receiving Developmental Services who were selected because they represented all regions of the state, agencies who provide services, types of services received, and housing/living situations.

The sample started in July of 2021 and should finish up in late July or early August 2022, we're allowing extra time when agencies or individuals and families request it.

These assessment results will be used to help determine a possible payment method. We need to finish the sample assessments and then work with our contractors to create the framework before we can present it to stakeholders and ask for input.

DAIL/DS would also like to propose a payment model that does not tie a SIS A score to a budget, so assessment results would be used for person-centered service planning.

It will take several months for our contractors to complete this work after the sample assessments have been completed.

Next steps for SIS-A Assessments

Since the sample is going to finish up this summer, we need to start planning for when we start regular assessments for everyone receiving Home and Community Based Services.

Everyone receiving Home and Community Based Services will complete a SIS A assessment once every three years, or more often if needed due to a change in their life that results in needing new or different services.

Requirements under CMS:

Everyone must have an independently administered assessment to receive Home and Community Based Services once we make changes to our system to address conflict of interest in case management.

We have three years to come into compliance with the conflict-of-interest rules.

Because we have three years to address conflict of interest, we are proposing that we start the three-year cycle of getting everyone in Home and Community Based Services a SIS A assessment so we are in line with the timeframe for any changes we will see under conflict of interest.

Concerns so far

DAIL/DS will need time to draft possible payment model frameworks, get input, and choose a payment model which could take a year or longer. This would mean that people would need to take assessments before we know how their results will be used, which is very stressful and concerning for everyone.

Keep in mind we will have an exceptions process if we choose a payment model that is tied to a SIS A score, so there would be a way to request more funding if it doesn't meet the person's need.

We will offer a possible payment model that does not tie a SIS A score to a budget. People will always have appeal rights anytime they are receiving a Medicaid funded service, these rights are in addition to an exceptions process.

If we wait until all the payment modeling decisions have been made, we'd need to try to get around 3,400 people assessed in one or two years, and everyone so far has agreed that that would be too stressful for everyone involved. It's taken over a year to get the sample of 500 completed, so trying to get everyone in DS services assessed in 1-2 years would be very stressful.

Some providers suggested mid-September as a target to start the assessments because they are still finishing their sample and need breathing room.

Other providers finished their sample months ago and may be able to start scheduling earlier than that.

DAIL/DS would need to focus on updating written communication, hosting townhalls and/or engagement session to make sure everyone understands the SIS A, the work that still needs to be done, and possible future impacts on services and budgets.

Want to make sure a context assessment is incorporated. One is currently being drafted by a group of folks who are not state employees, but it is not yet ready to be presented to DAIL/DS.

Add Suggestions slide form PPT

Comments:

Susan Aranoff asked about the status of plain language on the SIS-. Hilary indicated that we do have a plain language document on our website and will drop it in the TEAMS chat.

A flyer will be coming out soon, Provider 8/2 12;00 Engagements Sessions, PCG

Feedback and comments from committee today

State interactions that are doing the context assessments. Best next steps – Barb Prine

New SIS-A not available until Jan 2023. Then there is training – phase in. Can't be used until January and training has been done. AAID – not a huge difference with what the results would be. People's scores not likely to change from one version to another. At some point, AAID will not support the older version (18-month period?)

Julie – she is getting reports from people who have taken the SIS and they are feeling traumatized. AAID considering making the tool trauma informed. Ways in getting info and asking questions of the individual.

Any sense if AAID is taking this under consideration. Hilary commented, don't know any of the specifics regarding trauma aspect. Will chat with Jessica and PCG about their training. AAID is very accommodating in everyone's needs. There is a SAMPLE form that can be reviewed prior to answering questions.

Act 186 Steering Committee

The SPSC Committee needs to appoint 2 advocates who are either individuals with a developmental disability or a family member of an individual with a developmental disability.

Barbara Lee, Karen Price, and Max are interested in being considered for these. There were no decisions made at last month's meeting regarding this.

We need to inform the committee properly. This meeting is the discussion of this topic. If anyone else is interested send an e-mail to Jennifer. We can vote at next month's meeting. August agenda will be noted of these individuals being nominated and will vote at that time.

E-mail to go out to Committee notifying them of this.

Laura Siegel - any deaf/signing population - can we get a list of other committee members for this group.

Also, we agreed to send a message to all members of the SPSC for them to indicate their interest in serving on the Housing Steering Committee by sending an email to Jennifer in 2 weeks from now. We know that Max, Karen Price, and Barbara Lee already expressed interest. Judy will work with Jennifer in getting this message sent out.

Other updates

GMSA – Max is in Washington

DD Council – In Washington DC

CMS stakeholders input meeting – CMS is coming to VT – re settings rule. Clare did not have any info on this. Primarily focusing on the Heartbeet community

SPSC to be invited to their visit

VCP – Marie – DSP National with Federal delegation – P Welch and B Sanders Campaign – more at the August meeting – to raise awareness with the DSP position

Forum with candidates ADA celebration at State House

ADA forum at Capitol Plaza in Montpelier VT. See link below to register

<https://vcil.wufoo.com/forms/q1sij7zx0knkg6z/>

Clare McFadden shared that there has been forum for housing, payment parents

Not scheduled is autism or general meetings

Will be sending out survey to groups to send out to others

August topics

SOCP

HCBS Settings Rule

Voting on SPSC members for Act 186 Steering Committee

Vote on a motion to send 1 person with DD and 1 person who is a family member of a person with DD to the Housing Steering Committee, vote on members to be on the Housing Steering Committee

Update on plain language information on SIS-A

Wrap up

The meeting adjourned.