

Your Partner For A Stronger Arizona



Division of Developmental Disabilities
February 4, 2021

# Agenda

- Introduction
- COVID-19 Updates
- Planning Meetings
- Temporary Rate Book
- Proposition 207
- Electronic Visit Verification (EVV)
- DDD Network Development Updates

### COVID-19

DDD's top priority is the health and safety of our members, their families, and the professionals in our program that support them

The Division of Developmental Disabilities (DDD) is:

- Working with ADHS and CDC guidelines to ensure appropriate measures are in place to allow for the continuation of necessary services
- Monitoring service delivery and availability to ensure service continuation
- Providing regular updates on the DDD COVID-19 Website: https://bit.ly/DDD\_COVID19Actions

# **COVID-19 Flexibility Updates**

### Public Health Emergency

Extended for 90-Days starting January 21, 2021

### Respite Year 2021

- Extended Hours from 600 to 720
- Extended through September 30, 2021

### Home Delivered Meals

Extended through April 16, 2021

## **COVID-19 Vaccinations**

### **Arizona COVID-19 Vaccine Prioritization\***

### Phase 1

DECEMBER 2020 - SPRING 2021

Phase 2

**SPRING 2021 - SUMMER 2021** 

Phase 3

SUMMER 2021 - BEYOND

1A

**Healthcare Workers** 

**Emergency Medical** 

Services Workers

**Care Facility Staff** 

Occupations

Long-Term

& Residents

& Healthcare Support

1B

10

Education & Childcare Workers

**Protective Services** 

Occupations

Adults 65 and

Older\*\*

Adults of Any Age with High-Risk Medical Conditions

Adults Living in Congregate Settings Any Remaining Phase 1 Populations

Additional High-Risk/Critical Populations

**General Population** 

Any Remaining Phase 1 or 2 Populations

**General Population** 

http://bit.ly/adhscvfaqs

https://azdhs.gov/findvaccine

Essential Services/Critical Industry Workers

Adults with High-Risk Conditions in Congregate Settings



<sup>\*</sup>Distribution groups and timelines of phases shown are tentative. Local allocators may further subprioritize in each phase based on vaccine supply. This information is subject to change due to future vaccine distribution guidance recommendations, FDA approval of vaccines, and vaccine allocation/availability.

<sup>\*\*</sup>Local jurisdictions may be vaccinating Adults 75 and Older. Visit azhealth.gov/findvaccine for more information.

### **Prioritization Phase By Arizona County**

Arizona COVID-19 vaccine is allocated through local and tribal health jurisdictions. Due to the current limited initial supply of vaccine, Arizona counties will be utilizing a <u>vaccine prioritization phased approach</u>. The map below shows which phase each county is currently vaccinating. Please note that in order to be vaccinated, **you will need to be a member of the current phase**, schedule an appointment, and provide appropriate identification once you arrive at the vaccination site.

- Phase 1A Healthcare Workers & Healthcare Support Occupations, Emergency Medical Services Workers, Long-term Care Facility Staff & Residents
- Priority Phase 1B Education & Childcare Workers, Protective Services Occupations, Adults 65 and older\*\*, Remaining 1A
- Phase 1B Essential Services/Critical Industry Workers, Adults with High-Risk Conditions in Congregate Settings, Remaining 1A & Prioritized 1B
- Phase 1C Adults of Any Age with High-Risk Medical Conditions, Adults Living in Congregate Settings, Remaining 1A & 1B
- Phase 2 Additional High-Risk/Critical Populations, General Public, Remaining Phase 1 Populations
- Phase 3 General Public, Remaining Phase 1 & 2 Populations

Coconino Mohave La Paz Gila Maricopa Graham Yuma Pinal Pima Pattern indicates counties Cochise vaccinating 65 and older.

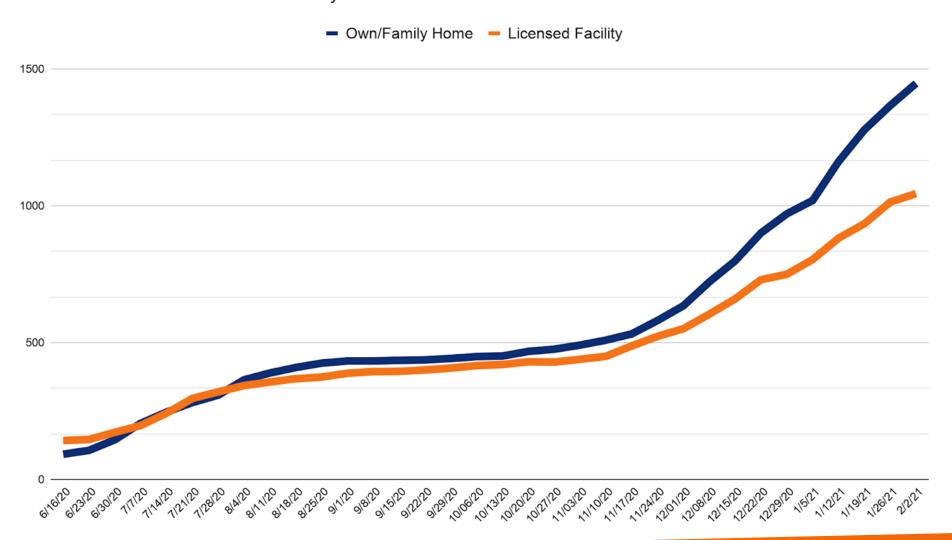
Coconino, Navajo, Apache, Yavapai, Yuma, Graham, Greenlee & Cochise County currently vaccinating individuals 65 and older

http://bit.ly/adhscvcounty

<sup>\*\*</sup>Counties may be vaccinating Adults 75 & Older. Refer to the map below or visit <a href="mailto:azhealth.gov/findvaccine">azhealth.gov/findvaccine</a> for more information.

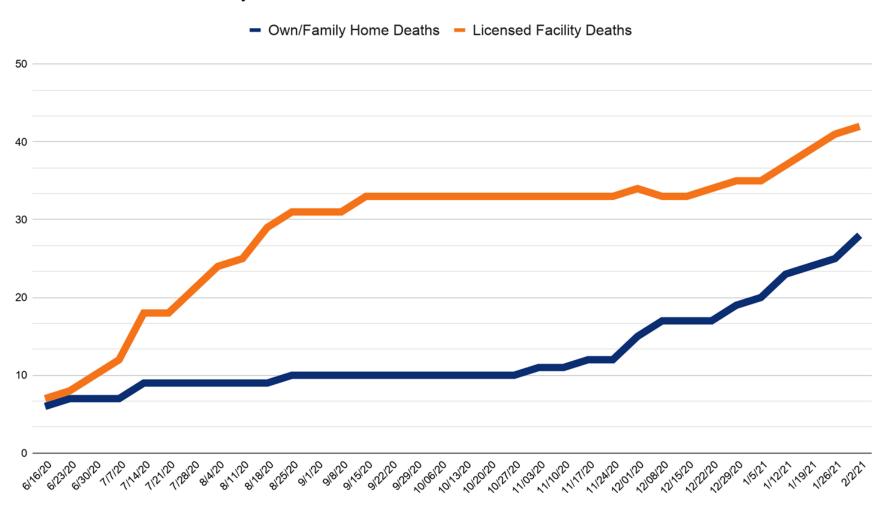
# **COVID-19 Member Positive Tests**

Member Positive Cases - Own/Family Home & Licensed Facilities



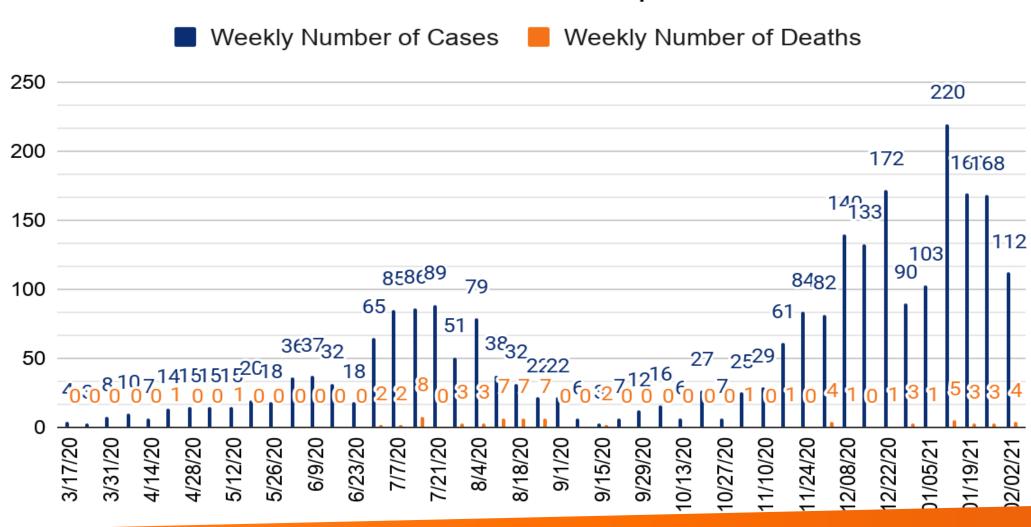
# **COVID-19 Member Mortality**

Member Deaths - Own/Family Home & Licensed Facilities



# **COVID-19 Member Mortality**

### Member Positive Cases and Deaths Reported Each Week



# **Planning Meetings**

- Virtual Planning Meetings are preferred while ensuring the health, safety and wellbeing of our members.
- In-person meetings should only be considered when all other options for a virtual meeting have been exhausted.
- If a member or the member's family cannot connect to a virtual meeting, is there
  another family member, friend, community resource, or an existing paid provider
  that can help.
- If no video conference option is available, an in person will be held with appropriate precautions:
  - Screen for any COVID like symptoms,
  - Wear a Mask,
  - Social Distance,
  - Meet outside if possible

# **Temporary Rate Book**

Effective from January 1, 2021, to March 31, 2021 the Division is making additional funding available for vendors who agree to use 70% of the incentive adjustment amount toward direct care staff.

- The Division grants each vendor the flexibility with salaries, wages, and stipends.
- Allowable expenses for the 70% revenue funds include, but are not limited to:
  - Salary adjustments
  - Stipends
  - Incentives
  - Related payroll and benefit costs related to the increase

#### Services include:

- Attendant Care
- Habilitation, Hourly
- Habilitation, Early Childhood Autism Specialized Hourly
- Respite (Hourly/Daily)
- Homemaker

- Home Health Aide
- Habilitation, Community Protection and Treatment Group Home
- Habilitation, Group Home
- Independent Living Arrangements (Hourly/Daily)

# **Proposition 207**

DDD has been engaging various stakeholders about areas of focus the Division should consider in creating a Policy surrounding the use and storage of Recreational Marijuana

On January 13, 2021, the Division sent an announcement for Public Comment on DDD Provider Policy: *Use and Storage of Marijuana (Cannabis) in Residential Settings* 

Public Comment period ended February 3, 2021

To be notified directly by email about changes to DDD policies and publications: <a href="http://bit.ly/dddpolicyupdates">http://bit.ly/dddpolicyupdates</a>

EVV is being implemented as a result of the 21<sup>st</sup> Century Cures Act, which is a federal requirement.

### The DDD services impacted are:

- Attendant Care
- Homemaker/Housekeeping
- Habilitation Hourly
- Home Health
- Respite (May be provided by DDD or as a behavioral health benefit by DDD Health Plan sub-contractors)
- Skills Training and Development (provided as a behavioral health benefit by DDD Health Plan sub-contractors)



- EVV applies to all providers including paid family direct care workers who live with the member and independent providers.
- It helps AHCCCS and DDD track member's access to care
- The particular EVV System (Sandata or Alternative EVV) is selected by the vendor
- Their vendor can help members and families understand what devices are available to them
- Vendors providing impacted services had to begin using EVV on January 1, 2021

- The Independent Provider (IP) program requires the use of a Fiscal Intermediary. DDD awarded this contract to PCG, Public Partnership Ltd (PPL)
  - AHCCCS, Sandata, DDD, and PPL are working together to ready the Alternative EVV System used by PPL.
  - We expect the EVV system and training for IPs, members, and families to be completed by mid-summer, the IPs and members will begin to use the Alternative EVV system at that time.

AHCCCS has posted Policy 540 to implement this program. There are four documents associated with the policy:

- Attachment A, Electronic Visit Verification Designee Attestation
- Attachment B, Paper Timesheet Attestation
- Attachment C, AHCCCS Electronic Visit Verification Paper Timesheet
- Attachment D, EVV Member Contingency Back-Up Plan

AHCCCS has published Frequently Asked Questions on its website that address a number of topics.

- General FAQ
- FAQ for Members with Live-In Caregivers
- Member Device FAQ
- Telehealth and EVV FAQ

- There are no exemptions for EVV, but AHCCCS has offered some flexibilities such as the continued use of paper timesheets with a FOB device for those members that meet certain criteria including:
  - Limited to no connectivity
  - Use of device would cause adverse health effects/symptoms
  - Moral or religious grounds
  - Live-in caregivers
  - Witness or domestic violence protections

- AHCCCS policy requires a second level of verification by the member, guardian or a designee.
- The person doing the verification cannot be the paid caregiver.
- The policy does accommodate scenarios where there is no one to verify through documentation on the Designee Attestation.

#### POLICY 540, ATTACHMENT A – ELECTRONIC VISIT VERIFICATION DESIGNEE ATTESTATION- requires team agreement



ATTUCUS INTEDICAL PULICY INTARUAL

POLICY 540, ATTACHMENT A – ELECTRONIC VISIT VERIFICATION DESIGNEE ATTESTATION

#### ELECTRONIC VISIT VERIFICATION (EVV) - DESIGNEE ATTESTATION

I may not be <u>able to</u> or I <u>don't want to</u> approve my DCW's time using an EVV device or website. I want another person to do this for me. I know that I can change my mind at any time by telling my provider. This person can only approve my DCW's time and cannot help me make decisions about my healthcare.

MEMBER/HEALTHCARE DECISION MAKER NAME	DATE
Member/Healthcare Decision Maker Signature	Member ID
I am asking(Print Name of Designee)	to be my designee.

#### DESIGNEE ATTESTATION

My signature below means I agree to act as a designee to verify the DCW's time when the person above doesn't want to or is unable to sign for themselves. As a designee, at the time of service or within 14 days on the website, I will:

- · verify the service provided
- · approve the DCW's time

I agree that the process to verify the DCW's time has been explained to me and that I understand the role given to me. I am at least 12 years of age or older.

DESIGNEE'S PRINTED NAME	DATE



ALLCCCS IMEDICAL PULICY MANUAL

POLICY 540, ATTACHMENT A – ELECTRONIC VISIT VERIFICATION DESIGNEE ATTESTATION

### DESIGNEE EXCEPTION REQUEST (TO BE COMPLETED BY THE TREATMENT OR PLANNING TEAM):

The treatment or planning team has discussed the appropriateness of the member's designee and have agreed that an exception should be allowed to have a designee under the age of 12, per AMPM Policy 540. (Please provide details below to explain the member's situation and need for a designee exception)

Click or tap here to enter text.

#### NO AVAILABLE DESIGNEE (to be completed and kept on file with provider):

Due to the member's unique circumstances, there will be no designee and no one else available to verify the DCW's time on an ongoing basis and the member is unable to verify service delivery. Explain the circumstances requiring an exception to verification:

Click or tap here to enter text.

MEMBER/HEALTH CARE DECISION MAKER NAME		DATE	
MEMBER/HEALTH CARE DECISION MAKER SIGNATURE			

Vendors now are responsible for Back Up planning.

1140.

Effective Date: 01/01/21 Approval Date: 11/19/20

contact Sandata EVV at Sandata Customer Care at 855-928-

I will call my non-paid caregiver to provide the service I need.

<u>//</u>	AHCCCS MEDICAL POLICY MANUAL					
Arizo	POLICY 540, ATTACHMENT D - EVV MEMBER CONTINGENCY/BACK-UP PLAN					
	MEMBER NAME	AHCCCS ID #	DATE OF PLAN			
	SERVICES PROVIDED FRI		PREFERENCE LEVEL			
1.						
2.						
B, C, etc	c.) on the corresponding service Preference Level line:  Must be rescheduled within two hours of originally scheduled star	rt time.				
В	Must be rescheduled within 24 hours of originally scheduled start time.					
C	Must be rescheduled within 48 hours of originally scheduled start					
D	Will be performed at the next scheduled visit.					
MEN	IBER HAS BEEN ADVISED THAT S/HE MAY CHANGE THE MEMBER SERVICE I	PREFERENCE LEVEL AND ALSO HIS/HER BACK-UP PLAN CAREGIVER IS LATE OR DOES NOT SHOW UP*	, AS INDICATED BELOW, AT ANY TIME			
	Agency Representative Printed Nat Signature	me and Date				
If my o	caregiver does not show up to provide services as scheduled, in the cases	se of a life-threatening emergency, I will contact 9-	1-1; otherwise, my back-up plan is			
	BACK-UP PLAN	NAME	PHONE NUMBER			
Step 1	I will contact my provider agency. My provider agency will answer my call or get back to me in 15 minutes.					
Step	If my provider agency doesn't respond in 15 minutes, I will					

# Office of Individual and Family Affairs (OIFA)

Customer Service Center
1-844-770-9500 option 1
DDDCustomerServiceCenter@azdes.gov



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# **Questions?**



# Arizona Provider Network Development Consultation

Hearing from you!



# Our team

Burns & Associates, Inc.

Health Policy Consultants





National Association of State Directors of Developmental Disabilities Services



# Project purpose

Support DDD to improve <u>service models</u> and <u>contract design</u>, with stakeholder input, aligned with the Division's "True North"

"True North" means the DDD empowers Arizonans with developmental disabilities to lead self-directed, healthy, and meaningful lives



# We conducted research and talked to stakeholders to recommend ideas for improving services and contracts

We focused on:

What would make services better?

What would make contracts or the process of becoming a vendor better?

What would support vendors to deliver the best possible services?



# We are interested in hearing from:

- Individuals with intellectual and developmental disabilities
- Their families
- Advocates
- Vendors
- Other professionals



# Recent Meetings

- Vendor Meetings
- Member/Family Meetings
- Townhall
- Self-Advocate Meeting

# Vendor Meeting Key Takeaways

# Structural Changes

- Generally supported
- May be easier for vendors, both for new vendors and those expanding services
- Wanted to be sure that most important elements are in the contract, and that vendors are protected

### Training

- Agreement that streamlined and more training is crucial, but must be compensated
- DCW can be good for some services, and many services supplement training
- Want to build off good vendor trainings and match trainings to services

### **Employment**

- Employment can be supported through school, planning, and early expectations for employment
- Employment first need not mean employment only and day services are critical
- Need to consider HCBS rules

### Quality

- It is important for people with disabilities and their families to identify what is quality
- In addition to compliance and safety measures, real quality should also be systematically measured

# Member/Family Meeting Key Takeaways

### Day/Employment

- Parents want to know about options for meaningful day activities
- Important to support transitions to/from other services
- HCBS rules should be considered

### In-home services

- The members and family's culture and age are should be considered
- Matching the members to staff and to the right vendor helps
- Family should be involved in training about the member

### Residential

- Members should have meaningful things to do at home (gardening, having pets)
- Members should be able to make informed choices
- Behavioral support can make or break residential
- Want compatibility for roommates

### Specialized

- Services seem to work well
- Support coordinators need to check in
- Families want staff that show they care



# Self - Advocate Meeting

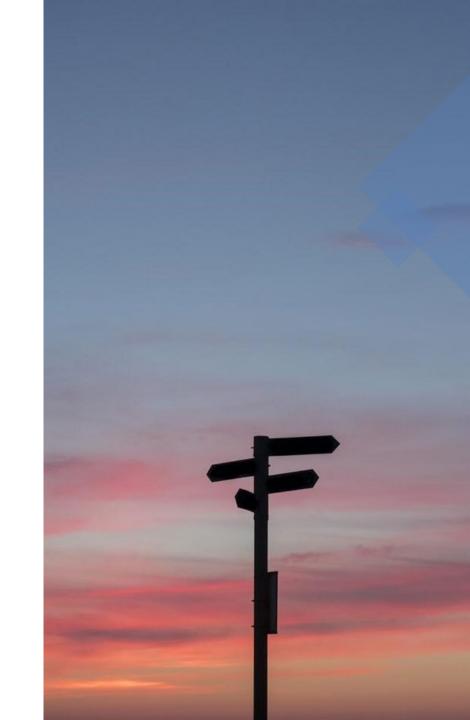
- Self-advocates shared:
  - Difficulty in finding staff, feeling like it is their responsibility
  - Feelings of not being supported by staff
  - Difficulty in finding support for personal ambitions (e.g., employment)
  - Lack of skill among supporters (e.g., not being trained for special medical equipment)
  - Inability to support people according to their needs (e.g., refusing to complete a transfer in the way someone is comfortable with)

### How are we using this information?

 We're making decisions about the services and the contracts and are listening to people throughout the state to help inform those decisions.

### Some examples:

- Considering a longer-term plan to work on strengthening training
- Reconsidering the contract structure
- Implementing a Workforce Development Plan
- Adding specific examples to service specifications



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DDD decided to focus on three areas for improvements in the contract including:



Some of the changes we recommend will be ongoing beyond when the new contract is implemented. No changes will be final until after the public comment period.



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In the current contract we're recommended enhancing:

- Quality Management Plans
- Workforce Development Plans
- Quality Monitoring
- Vendor standards

Later we're recommending:

Accreditation

Strong components and measures can support the Division to continually move towards its True North, ensuring that people disabilities to lead self-directed, healthy, and meaningful lives in their communities and receive the highest quality services possible.

- In the current contract we're recommending:
  - Changing Service Specifications
    - Combining Transition to Employment and Career Preparation Readiness with additional components
  - Add vendor incentives for finding and keeping jobs

Services must support, prioritize, and promote employment!

- In the current contract we're recommending:
  - Offering incentives to vendors for enhanced training
- Later we're recommending:
  - Expanded training requirements for all DSPs, aligned with personcentered principles
  - Strengthening the requirements for training for some employment staff

The Direct Support Professional workforce is the lynchpin to high quality services, investing in training can have profound impacts on the support people receive!

# Join us in the public comment period

- During public comment, the contract will be posted for people with disabilities, families, vendors, and advocates to review and provide feedback.
- Expected to start April 1<sup>st</sup>, 2020
- Will last for approximately 60 days
- Comments will be used to make changes and finalize the contract
- We'll be reaching out to vendors and people with disabilities to discuss the changes
- We'll share the changes with you in a townhall



# Stay Involved!

Townhall meetings

Meetings like today to you our ideas and get yours

Vendor meetings

Meetings with vendors to discuss vendor-specific topics

Website

• Check DDD's website for details at <a href="https://des.az.gov/qualified-vendor-network-project">https://des.az.gov/qualified-vendor-network-project</a>

Email

Contact us anytime through the project to make sure we hear your ideas:
 AZnetworkdev@burnshealthpolicy.com