



## DEPARTMENT OF ECONOMIC SECURITY

*Your Partner For A Stronger Arizona*

### DIVISION OF DEVELOPMENTAL DISABILITIES

## **Sent on Behalf of DES/DDD Business Operations**

*Please do not reply to this message*

**TRANSMITTAL DATE: September 15, 2017**

**TOPIC:** Distribution of One Time Funds to offset Provider Costs

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### **Target Audience – All Qualified Vendors**

With the passage of the State Fiscal Year 2018 budget, a one-time appropriation of \$10 million from the State General Fund, matched with approximately \$23 million in Medicaid funding was allocated to offset increasing provider costs associated with the passage of Proposition 206, the Minimum Wage and Paid Time Off initiative. This funding is subject to availability of funds and approval by the Centers for Medicare and Medicaid Services (CMS) for use of Title XIX funds. If approved by CMS, the funds would become available after October 1, 2017, and would be distributed in four equal installments throughout the balance of the fiscal year ending June 30, 2018.

### **Proposed Implementation Schedule**

Dates of Service (DOS)	Claim Payment Rec'd Prior	Survey Due	Payment
April – June 2017	September 1, 2017	Sept 2017	Oct 2017
July – September 2017	November 1, 2017	Nov 2017	Dec 2017
October – December 2017	February 1, 2018	January 2018	Feb 2018
January – March 2017	May 1, 2018	April 2018	May 2018

In anticipation of CMS approval, the Department is making preparations for the distribution of this funding. To be eligible for this funding, the Qualified Vendor must have rendered one or more of the selective Home and Community Based Services (HCBS) that received a rate increase due to Proposition 206 passage and be a current DDD provider. See the following link for a list of selective services included in the July 1, 2017, rate increase:

<https://des.az.gov/sites/default/files/media/Proposed-Rate-Increase%20-7-1-2017.pdf>

In order for an organization to qualify for the first distribution of funds, it must complete and submit a response to the survey available through the following link: <https://www.surveymonkey.com/r/Prop206OneTimeFunding>

The survey must be completed and submitted by September 29, 2017. If you have any difficulties accessing and completing the survey, you must request and submit a hard copy through Customer Service's email:

[DDDDProp206Survey@azdes.gov](mailto:DDDDProp206Survey@azdes.gov) by close of business September 29, 2017.

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Only eligible organizations should complete the survey.

The first distribution of funds will be based on the total amount of paid claims for the selective HCBS identified for dates of service 4/1/2017 through 6/30/2017, as recorded by September 1, 2017. The distribution of funds will be proportionate to the total amount of paid claims during this time period. Any questions regarding this communication may be directed to:

[DDDProp206Survey@azdes.gov](mailto:DDDProp206Survey@azdes.gov)

***Thank you!***