



Coalition Of Provider Associations
Representing More Than 250 Provider Agencies in New York State

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Provider Associations Meeting ♦ June 19, 2017

Commissioner Delaney was at this meeting, just back from her maternity leave. She gave an update on the following topics, but saved her major update and presentation on the CCO's until the end of the meeting.

- 1. The Integrated Supportive Housing RFP will be out very shortly.** OPWDD providers will be able to participate in the Empire State Supportive Housing Initiative (ESSHI) to assist in relieving homelessness. OMH is the lead on the Housing initiative. Be sure and look for the RFP.
- 2. HCBS Regulations** – CMS has extended the deadline on the implementation of the regulations until March, 2022. They are also reviewing all the regulations so it is unclear if there will be any changes coming down from CMS. OPWDD is determining whether it will be a revised transition plan, particularly around Heightened Scrutiny and Workshops.
- 3. Ceylane Meyers** talked about the **Institute for Community Inclusion (ICI) Employment Study** and the outcomes of their study on supported employment outcomes in a nationwide study. She was trying to determine if anyone from NYS participated in the study.
- 4. Ceylane Meyers** also reported 70 of the 72 proposals on the conversion of the Sheltered Workshops had been given an individual review and sent back to the providers. They have 90 days to respond to the comments. None of the proposals have been approved yet but the plan for conversion is right on target. There is a need for the staff to work on Person Centered Planning in developing their plans. OPWDD wants to be sure that providers are not just moving to a Day Hab model because it is the easy way to convert, but rather are listening to what people want to do with their lives. Ceylane stated that providers are being encouraged to offer other options including retirement, community work options, pre-vocational services and Pathways.
- 5. There was nothing to be reported on Medicaid Transportation.** Still no ADM. Draft is in place but no timeline for release.
- 6. Rate Transformation Update from Donna Cater.** **Respite:** Final respite rates are at CMS for review. The fees we have seen are the same ones as at CMS. It is important that providers remember that there are many more services which can be billed in respite. **IMPORTANT:** There are 5 cost categories in respite. Joanne Howard has said

that effective July 1, 2017 the costs for each of the categories must be reported separately on the CFR. Again, this reporting starts July 1, 2017 whether you are a calendar year or fiscal year filer.

Draft IRA, Day and ICF rates: The file on the rates was transferred to OPWDD from DOH. The acuity measures for the hours in the IRA have not been determined yet and John Kemmer and Jim Moran are working with OPWDD staff and Donna Cater on this issue. July 8th is the target for the rates to go into the system so it is very important to review the rates for any errors. These rates will be out without the occupancy factor. Template funding that has been reported for a full year in your CFR will now be in your rate and not billed at a higher rate. See the memo you should have received from Earl Jefferson.

High Needs Funding: The 01 Amendment to CMS has the methodology for the high needs funding. This will be used in place of template funding and also for existing individuals who have had a qualifying event...yet to be determined. As soon as they are approved the rates will be ready to be loaded. There will be 3 tiers for the funding with a set number of direct care and clinical hours in each tier. The rates will use the individual provider's salaries. This is supposed to be available July 1st. There will be no need for regulations and there will be a cap on the number of hours allowed for the high needs funding. Again there will have to be a qualifying event and the funding will be approved for 6 months or less at a time.

Minimum Wage: In mid-July all providers will get a survey on minimum wage which will increase on December 31, 2017. You will have 2 weeks to fill out the survey and return. The survey should be similar to what you filled out last year. The providers will have 2 weeks to complete with just 1 week extension if needed. The providers will receive a survey asking if they spent all the money that was given to them in the first go round of minimum wage.

CRP Survey: Sometime in July all the Children's Residential Programs, those with children living in an ICF, will receive an active treatment survey. If there are children living in ICFs other than in the CRP program that agency will also have to fill out the survey.

7. An update on legislation affecting OPWDD Providers that is pending was given by Roger Bearden: **a.** A bill to add Prater Willi to the definition of DD; **b.** A bill to require schools to ask parents for permission to share information with adult service providers; **c.** a bill to add siblings as qualified reps to Jonathan's Law; **d.** a bill to expand the CARE demo pilots; **e.** a bill to study rate appeal analysis with the resultant to reestablish rate

appeals; f. a bill to allow the sharing of information on deceased individuals; and g. 911 bill. Roger Bearden asked that we always go to OPWDD when we are proposing legislation. That is something our Advocacy Team does regularly.

8. Kate Bishop provided an update from OPWDD's study of Self Directed services with a group from Massachusetts who reviewed New York's current model. Much time was spent with stakeholders including fiscal intermediaries, brokers, families and individuals. The results showed some positives including: the soundness of the program and its intent; the need for growth and improved structure; program complexity is an issue; scalability remains a problem. Some improvements that are being contemplated include: development of an 'agency broker' that could provide better mentoring and accountability; rate simplification; alternate staffing approaches and billing standards not only focused on habilitation; Regional Office approvals of the service portion of the proposals, with Central Office focusing on quality. Upcoming webinars are planned.
9. The Commissioner gave us a preview of the information and PowerPoint presentation on the CCOs. If you don't have the PowerPoint, you can get on the OPWDD website. What is most important is that OPWDD has put timeframes in place for the CCOs to begin services and for the agencies to stop providing MSC. The draft application for the CCOs will be out on June 30th for review and comment and the final application will go out in September for the potential CCOs to complete. The approvals will be finalized in December and the CCOs will have 6 months to organize. Everyone who is currently receiving MSC services and wants to continue must be enrolled in a CCO by July 1, 2018. Hopefully all providers participated in the Webinar and now have a better understanding of the CCOs and the move to managed care.