



*Coalition Of Provider Associations*

*Representing More Than 250 Provider Agencies in New York State*

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## Provider Association Meeting Minutes – October 22, 2018

1. **DD Managed Care Plans.** The public comment period on the proposed managed care plan for OPWDD services has officially closed. OPWDD will be holding public forums across the state to solicit comments on the plan. The final plan should be released in December.
2. **OPWDD Leadership Changes.** Jackie Best was promoted to Director of Statewide Services Offices. Margaret Stadnicki will serve as Acting Director of the LIDDRO. Willow Baer, Esq., has been appointed Acting OPWDD General Counsel. Ann Marie Peterson is now Acting Director, Region2. Tammy Devine has been promoted to Deputy Director for QI.
3. **CCO Update.** Only 150 individuals remain who need to be assigned to a CCO. CCOs will schedule initial face-to-face meeting with enrollees. However, it is anticipated that the CCO staff who participated in the initial in-person meeting may not be staff member who will be assigned to the individual on a longer term basis. OPWDD has extended period of time for completion of Life Plans due to technology problems for new individuals enrolling in the CCOs and Tier 4 individuals. For Tier 4 individuals who are in the Willowbrook Class, the Life Plan deadline was extended to March 31, 2019, and consideration is being given to extending all other Tier 4 individuals from December 31, 2018 to March 31, 2019. All others transitioning from MSC must have a Life Plan by December 31, 2018. Also, there is some additional flexibility in staffing to meet the 1:20 ratio. For new individuals entering the system after July 1, 2018, the deadline is 120 days from enrollment. Questions were asked whether providers must still update DDP2 to be used for acuity factor for residential rate setting purposes given the fact that CCOs will also be conducting a DDP2 as well for CCO purposes. OPWDD will review and clarify this DDP question.
4. **CFCO Update.** New CFCO implementation date will be delayed beyond January 1, 2019 – actual date will be determined shortly. There are 4,000 individuals receiving community habilitation who are also enrolled in mainstream Medicaid managed care plans and these individuals will receive this service through their Medicaid managed care plan. Therefore, providers will have to provide such services through the Medicaid managed care plan either through a single case agreement for community habilitation or the provider can consider a full provider agreement that will cover everyone who enrolls in the Medicaid managed care and needs community habilitation.
5. **Outreach to families.** OPWDD will be providing training to the staff at the Regional Offices about the SIP-PLs and other managed care concerns they are expressing. They see the need to better outreach to families in each of the State's regions. The SIP-PI policy document will most likely be rolled out in early 2019.

6. **Hard to Serve Individuals.** There has been significant upstate media attention regarding OPWDD residential services for individuals classified as sexually violent predators (SVPs). Legislation has been introduced restricting OPWDD residential programs from serving SVPs. OPWDD has identified three alternatives for individuals who are SVPs: (1) identify special residential programs designated for SVPs; (2) spreading out such individuals though out the residential system; and (3) not having the DD residential system serve such individuals. OPWDD appears committed to providing residential services to individuals who have been classified as SVP. Additional comments included the possible formation of a workgroup. More to come.
7. **CPR Requirements.** OPWDD considering developing mandatory CPR training requirements whether by ADM or regulation. OPWDD has found that providers have varying policies regarding staff administering CPR, dealing with DNRs and calling 911. Jill Pettinger would welcome input from the Provider Associations.
8. **Employment Update.** Regarding workshop transformation, 71 proposals have been submitted – 30 will transition to integrated business model, 34 will close and the remaining 7 have not made a decision. 19 agencies of the 30 integrated business model proposals have been approved and have been authorized to resume enrollment of new pre-vocational program participants. SEMP authorization denials have amounted to about 7% of the request for authorization.
9. **Workgroup Recommendations.** OPWDD identified items for inclusion in the 2019-2020 state budget and excluded items that would impact later budget cycles and managed care issues. However, the provider associations declined to identify priority items and suggested that OPWDD identify its priority areas and then permit the provider associations to advocate for others during the budget process. OPWDD is also considering funding regional technical assistance on CFR, rate rationalization and managed care preparation.
10. **Rates Update.** Final July 1, 2018 rates have been approved by DOH and were sent to e-MEDNY to be posted shortly. Previously released draft rates are unchanged except for a few property changes in day hab programs. By next Wednesday, rate sheets will be posted and 90 days clock for calculation error starts running. For the 12 agencies that needed a corrected 7/1/17 rates due to unmerging of CFR data due to auspice changes and consolidations, the corrections will follow issuance of the 7/1/18 rates. The rate sheets will identify the “acuity credibility” adjustments for providers in each of three categories: 75/25, 85/15 or 90/10 for direct care hours’ outliers.
11. **CFR Submission Deadline.** July 1, 2019 rates will be rebased using the 2017/2018 CFR for NYC and 2017 CFR for rest of the state. OPWDD does NOT anticipate allowing providers to re-open CFRs due for corrections after the due date. CFR deadline for calendar year providers will be January 4, 2019. This same deadline will apply to both the 2018 CFR for calendar year filers and the 2017/2018 CFR fiscal years filers.