

WEBVTT

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00:00:00.000 --> 00:00:12.269

Afternoon and welcome to our 1st, annual BI, annual statewide provider meeting. My name is Wanda cracker and I'm the state lead for provider relations and I will be 1 of your facilitators today.

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00:00:12.269 --> 00:00:21.030

We have a great agenda with a few changes as Melissa Jones has replaced Lucas avenues and amber Socrates who are unable to join us today.

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00:00:21.030 --> 00:00:30.510

We are excited to have division director just back to us to kick off our events. And so with that, we'll pass it over and just the floor is yours.

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00:00:30.510 --> 00:00:38.969

Both the mute button.

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00:00:38.969 --> 00:00:43.649

Good morning. Oh, gosh. Good afternoon.

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00:00:43.649 --> 00:00:55.645

I've been on a meeting on morning and now it turned to afternoon. I'm just back I'm the director for division of development disability and I have been here about 3 months.

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00:00:55.674 --> 00:00:58.884

So if I have not had the chance to meet you yet.

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00:00:59.219 --> 00:01:03.780

It's great to do. So I look forward to working with you and.

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00:01:03.780 --> 00:01:07.409

I appreciate all that you do for our clients.

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00:01:07.409 --> 00:01:13.469

In collaboration with our team here, there is a.

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00:01:13.469 --> 00:01:18.000

A stacked agenda of great information so.

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00:01:18.000 --> 00:01:25.620

I don't want to take much of the time, but I did just want to say that I know that the past 18 months has been.

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00:01:25.620 --> 00:01:32.819

There are no words incredibly difficult. Does not begin to describe what.

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00:01:32.819 --> 00:01:45.540

Those serving in the BB, Sabrina and any direct care, or healthcare environment has have worked through in order to make sure that means they're being that. So.

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00:01:45.540 --> 00:01:50.489

I just wanted to say, thank you for all that you've been doing and continue to do.

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00:01:50.489 --> 00:01:57.239

In in in that regard, and also for taking the time today to.

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00:01:57.239 --> 00:02:05.489

Say that, even though we are in the midst of pandemic and continue to work to ensure health and safety.

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00:02:05.489 --> 00:02:17.310

That we want to do more, we want to do what we can learn and expand our knowledge about how to best serve and meet the needs of clients. So, and.

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00:02:17.310 --> 00:02:24.210

Appreciate the time, and I hope you enjoy the the meeting.

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00:02:24.210 --> 00:02:27.389

Thanks.

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00:02:32.219 --> 00:02:46.889

Good afternoon my name is Dwayne shoemaking under state coordinator of employment and community engagement for the division as many of you all are aware of the last 5 years. We've really made promoting employment as 1 of our key priorities.

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00:02:46.889 --> 00:02:54.659

Uh, the primary reason for that is 1, that it is listed as 1 of the requirements and expectations.

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00:02:54.659 --> 00:03:00.840

In the community settings role and secondly, is that with an ongoing homestead enforcement?

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00:03:00.840 --> 00:03:08.699

Individual's rights to pursue employment and to support employment in the community has continued to be prioritized.

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00:03:08.699 --> 00:03:18.689

By the US Department of justice, and through various settlement decrease through the U. S. Supreme Court. So, as we have continued to.

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00:03:18.689 --> 00:03:26.939

Promote employment 1 of the things that we have frequently heard from providers and case managers as well as families and individuals.

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00:03:26.939 --> 00:03:39.534

Is that the primary obstacle is really understanding how earned income can impact 1 individual's cash benefits from as well as the benefits that they may be receiving through Medicaid.

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00:03:40.014 --> 00:03:42.115

So, to that end, um.

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00:03:42.719 --> 00:03:54.564

The majority of my updates can be talking about the benefits planning service definition that we have in the pending waiver renewal. So we did create that service definition as a very distinct and different service.

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00:03:55.134 --> 00:04:05.754

Previously, it was captured within the career planning definition, with minimal outline or guidance around the skill set or qualifications for a person to be able to deliver that support.

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00:04:06.384 --> 00:04:10.675

So, what we did do was included in the 2021 waiver renewal as a separate definition.

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00:04:10.914 --> 00:04:21.654

This was based upon stakeholder feedback from our employment advisory team, which is comprised of individuals from Mark Mac family advocates as well as.

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00:04:23.670 --> 00:04:34.495

Self advocates, so in getting that benefits, planning service, definition design. 1 of the things we realize is that we do need to build the capacity of providers to be able to deliver this service.

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00:04:34.944 --> 00:04:47.305

So, today, what I'm going to do is talk about our strategy and building that provider capacity. We are following a strategy very similar to why the division of behavioral health has followed with our community mental health centers.

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00:04:47.608 --> 00:04:54.749

Uh, for those centers that are delivering what's called employment services, uh, for their funding stream.

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00:04:54.749 --> 00:05:05.428

So, in our service definition, we do have criteria for the professional that can be delivering this service certification and credentialing is required.

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00:05:05.428 --> 00:05:13.228

Uh, there are 3 different types of, uh, acceptance certification or credentialing. Those are certified community work, incentive counselor.

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00:05:13.228 --> 00:05:18.178

Community partner work instead of Councilor or work incentive practitioner or.

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00:05:18.178 --> 00:05:29.189

To get those criteria there are only 2 national credentialing sources. 1 is through Virginia Commonwealth University and the other is through Cornell University.

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00:05:29.994 --> 00:05:30.233

So,

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00:05:30.233 --> 00:05:30.593

again,

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00:05:30.593 --> 00:05:33.954

following from the division of behavioral health model,

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00:05:34.403 --> 00:05:49.194

what we will be doing is working with Cornell University on an approach and strategy to get more credential and certified individuals into our workforce within that service definition.

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00:05:49.194 --> 00:06:03.894

The expectations of that service definition is that upon completion that the individual and the family member and support coordinator is provided with the benefits summary analysis and what that benefits summary analysis will do is talk about the exact

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00:06:03.894 --> 00:06:04.494

impact.

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00:06:04.769 --> 00:06:12.178

That would occur for cash benefits from earned income and then also demonstrate to the individual.

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00:06:12.178 --> 00:06:17.038

How they may be more financially secure by going to work or the.

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00:06:17.038 --> 00:06:26.848

Impact that they may have in going to work. It will also provide a detailed work incentive plan that we'll talk about the different social security work incentives that can be utilized.

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00:06:26.848 --> 00:06:30.149

In order to offset expenses and continue to retain.

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00:06:30.149 --> 00:06:43.619

Ongoing path, cash benefits as well as medical insurance. So, for this service definition, it is intended for recipients and again, it's just going to form individuals other options.

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00:06:43.619 --> 00:06:49.259

Uh, the incentives that they have available, and just what that impact of earned income would be.

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00:06:49.259 --> 00:06:56.579

So, as I mentioned, we are working with Cornell universities, Yang, and can Institute on unemployment and disability.

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00:06:56.579 --> 00:07:05.338

That is a university center of excellence a, that specifically focuses on, uh, employment and benefits planning.

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00:07:05.338 --> 00:07:10.858

So going through that credentialing program, anybody who wants to participate.

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00:07:10.858 --> 00:07:14.218

There is expectation of completing 17 webinars.

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00:07:14.218 --> 00:07:17.759

Each of those are 90 minutes minutes simply.

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00:07:17.759 --> 00:07:21.149

And upon completion of those 17 webinars.

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00:07:21.149 --> 00:07:25.168

There's a file review that gets completed as well as exam.

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00:07:25.168 --> 00:07:28.379

Once individuals complete the written exam.

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00:07:28.379 --> 00:07:37.228

Uh, they are provided provisional certification, then they complete a file review performer benefits, planning analysis.

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00:07:37.228 --> 00:07:46.348

On behalf of an individual submit that file review for approval and then they're issued their full certification credential.

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00:07:46.348 --> 00:07:53.369

By going through the Yang and tan Institute on deployment and disability anybody who completes this course.

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00:07:53.369 --> 00:07:58.079

Will be eligible for 60 hours of ongoing continuing the education.

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00:07:58.079 --> 00:08:02.428

At no cost to them and to preserve that certification.

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00:08:02.428 --> 00:08:05.488

The trained benefits, planning specialist.

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00:08:05.488 --> 00:08:10.588
Would have to complete at least 60 hours of every 5 years.

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00:08:15.418 --> 00:08:21.538
So, the next cohorts for this 1, we'll begin fall of 2021.

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00:08:21.538 --> 00:08:28.079
Uh, those courses are on Tuesday and Thursday afternoons from 1 o'clock until 230 P. M. Eastern time.

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00:08:28.079 --> 00:08:31.889
The course, begins September 9th and continues through November 9.

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00:08:31.889 --> 00:08:35.849
And then there is a review that's completed on November, 16.

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00:08:35.849 --> 00:08:50.788
And the final exam has to be completed sometime between November 2009th and 3rd, we will also have another cohort that will begin Springer 22 with those courses beginning, February 1st and ending March, 29.

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00:08:50.788 --> 00:08:54.568
And then there will also be another cohort next summer.

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00:08:54.568 --> 00:08:58.528
Um, and you will see in the summer, it is a much more compressed.

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00:08:58.528 --> 00:09:10.764
Accelerated training program, and it's offered 3 days a week during the summer on Monday, Wednesdays and Fridays. We did have some individuals that have begun in the cohort this past summer.

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00:09:11.124 --> 00:09:16.854
Uh, we had 1 or 2 providers that actually started the spring and I think folks have had very.

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00:09:17.249 --> 00:09:21.629
Favorable reviews of the training that they're receiving and the support that they get.

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00:09:21.629 --> 00:09:24.958
From those instructors.

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00:09:24.958 --> 00:09:31.078

So the cost the cost of this certification through Cornell universities program.

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00:09:31.078 --> 00:09:37.528

There's 1525 dollars again doing the same thing that division of behavioral health is done.

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00:09:37.528 --> 00:09:42.808

Uh, we haven't negotiated that this kind of cost of 1220 dollars.

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00:09:42.808 --> 00:09:50.489

With the yang team Institute, what the division will do is we will reimburse 50% of the cost.

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00:09:50.489 --> 00:09:56.759

Of that 1220 dollars, or any students that successfully complete that exam.

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00:09:56.759 --> 00:10:03.568

And get their credential. So again, if someone does not necessarily want the divisions.

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00:10:03.568 --> 00:10:10.589

Assistance with reimbursement upon completion, you're still welcome to utilize the Missouri discount.

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00:10:10.589 --> 00:10:16.408

But, in order to do that, we would still need you to follow the protocol that all review here in a 2nd.

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00:10:19.019 --> 00:10:19.318

So,

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00:10:19.313 --> 00:10:21.323

to be eligible participant in this,

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00:10:21.653 --> 00:10:31.913

what a potential provider would need to do is complete an interview with a representative of the divisions employment team they will need to sign a participant agreement letter,

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00:10:32.484 --> 00:10:35.724
indicating that they have the support of their supervisor to complete this.

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00:10:36.028 --> 00:10:41.068
They understand the intent and expectation of attending all classes.

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00:10:41.068 --> 00:10:44.999
As well as completing that examination and the file review.

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00:10:44.999 --> 00:10:55.499
Uh, once that, it's all been completed that then the prospective student would just return a copy of their verification of having completed.

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00:10:55.499 --> 00:11:05.188
The exam and a copy of the certificate to a member of the employment team. And at that point in time, we would reimburse 50% of that.

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00:11:05.188 --> 00:11:08.458
1220 dollars of tuition.

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00:11:10.168 --> 00:11:16.318
So, to, uh, if you're interested in this, what you would need to do is email Sandy Kaiser.

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00:11:16.318 --> 00:11:20.849
Sandy is the employment 1st specialist and that is overseeing this initiative.

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00:11:20.849 --> 00:11:29.339
Her email address for those who may be on the phone and not able to see the monitor is Sandy. S. A. N. D. Y.

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00:11:29.339 --> 00:11:32.519
That Kaiser K. E. Y. S. E. R.

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00:11:32.519 --> 00:11:47.244
At dot Mo dot. Gov and what Cindy will do is walk through you with you the process of completing the verification form. She'll make sure that you have an understanding of the courses and the level of content.

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00:11:47.609 --> 00:11:54.658

Uh, that you'll be participating in because what we do want to ensure that we have a good match of professionals.

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00:11:54.658 --> 00:11:59.038

Who are attending this training and not folks just looking for a real baseline.

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00:11:59.038 --> 00:12:09.839

Level of understanding, I mean, this is intense information, but it will help individuals fully understand all of the nuances of.

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00:12:09.839 --> 00:12:14.938

Uh, as well, as impact on Medicaid, public assistants include food stamps.

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00:12:14.938 --> 00:12:23.609

And public housing, also, as we are building the capacity around the state, we are limiting to this to 1 individual.

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00:12:23.609 --> 00:12:36.839

Per provider agency as well. So if you are interested in doing this, please contact Sandy, and please identify 1 individual, who you think would be best suited to go through that program.

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00:12:38.158 --> 00:12:50.639

And then, of course, anytime we talk about benefits, it's, uh, it's always important to ensure that folks understand the limit of their knowledge. And so what we are asking individuals that if you're working with folks.

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00:12:50.639 --> 00:13:02.609

Who would have, please don't guess I'm trying to debunk the is please don't guess I'm trying to inform individuals. Please contact Sandy. She herself is a certified.

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00:13:02.609 --> 00:13:07.678

Benefits specialist, you can also contact a variety of providers around the state.

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00:13:07.678 --> 00:13:12.479

Add that do have a current credential benefit specialist on staff.

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00:13:12.479 --> 00:13:26.818

What we are going to be doing to is, as individuals goes through this training program, we're going to be keeping a list of all the certified benefits planners and then we will be producing those lists, uploading them to the website.

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00:13:26.818 --> 00:13:29.849

So that way all support coordinators and, um.

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00:13:29.849 --> 00:13:39.719

Provider agencies are familiar with where they may be able to contact and benefits specialists. We will have much more training on the benefit specialist definition.

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00:13:39.719 --> 00:13:43.499

Uh, once the waiver application is approved.

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00:13:43.499 --> 00:13:47.639

Because there are other nuances, uh, to this service definition.

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00:13:48.928 --> 00:13:53.219

So, aside from benefits planning, I also just want to provide an update.

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00:13:53.219 --> 00:13:57.269

On our efforts called employment 1st, Missouri.

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00:13:57.269 --> 00:14:02.219

This is through a contract that the Missouri division of developmental disabilities as.

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00:14:02.219 --> 00:14:06.389

With the Institute for community inclusion at U, mass Boston.

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00:14:06.389 --> 00:14:11.428

Uh, we have 2 instate traders that host a monthly community of practice.

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00:14:11.428 --> 00:14:18.269

On the screen, it says it's a 3rd, Tuesday of the month that sometimes varies. I know this month it's actually the 4th, Tuesday of the month.

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00:14:18.269 --> 00:14:23.578

And there will be an email blast coming out within the next 4 to 5 days.

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00:14:23.578 --> 00:14:28.078

Um, for this month's session, uh, but again I'm working with, um.

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00:14:28.078 --> 00:14:31.259

The 2 folks through employment 1st, Missouri.

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00:14:31.259 --> 00:14:35.068

Uh, they have been providing no cost technical assistance.

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00:14:35.068 --> 00:14:40.318

And mentoring to 23 providers currently through the state of Missouri.

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00:14:40.318 --> 00:14:44.249

Uh, they have delivered over 231 hours.

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00:14:44.249 --> 00:14:50.158

Of training on best practice of delivering employment services of understanding, customized deployment.

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00:14:50.158 --> 00:14:56.639

Ways to engage businesses and they've deliver that training to over 491 individuals.

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00:14:56.639 --> 00:15:00.629

With a 91% provider satisfaction.

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00:15:00.629 --> 00:15:10.769

Writing on the service that they were provided, and 98% satisfaction that it met their needs. So again, I would encourage individuals if you're.

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00:15:10.769 --> 00:15:18.808

With the provider agency who is needing access to any free training or technical assistance or mentoring of staff.

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00:15:18.808 --> 00:15:23.489

Please visit the website on the screen employment. 1st dot org.

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00:15:23.489 --> 00:15:28.889

Again, that's our support that we have contracted to be able to help all providers.

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00:15:28.889 --> 00:15:33.359

And better understanding how to deliver best practice, employment services.

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00:15:35.219 --> 00:15:45.509

Next I just also want to do a little call out for our monthly champions of employment. Cindy Kaiser hosts a monthly community of practice.

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00:15:45.509 --> 00:15:57.239

This 1 is on the 2nd, Wednesday of the month this 1 is predominantly geared toward support coordinators and targeted case management agencies. Year to date. We have had 313.

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00:15:57.239 --> 00:16:01.139

Participants in the champions of employment call.

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00:16:01.139 --> 00:16:04.288

In this call, it's a variety of targeted topics.

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00:16:04.288 --> 00:16:13.139

Around support coordination, strategies and seeking solutions to remove common barriers that may arise as part of the planning process.

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00:16:13.139 --> 00:16:22.558

And tips and and assistants and debunking MS. about employment or earnings, uh, that support coordinators or families may experience.

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00:16:22.558 --> 00:16:25.619

Some of the support that's been provided today.

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00:16:25.619 --> 00:16:29.969

Is around customized presentations on meeting and organizations needs.

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00:16:29.969 --> 00:16:33.538

Providing technical assistance just around best practice.

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00:16:33.538 --> 00:16:36.833

Of individualizing support and developing goals and outcomes.

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00:16:37.644 --> 00:16:48.774

Sandy is also available to do outreach activities beyond this community of practice as well as coordinating any local level web based learnings.

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00:16:49.078 --> 00:16:58.318

Um, or virtual support and again, sandy's email address. Has Sandy got Kaiser at dot? Gov.

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00:16:59.879 --> 00:17:09.749

Uh, real quickly any employment update without data wouldn't feel right to me. So, where we're currently at, uh, with our employment industry is an effort.

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00:17:09.749 --> 00:17:13.138

Is as of the close of July of 2021.

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00:17:13.138 --> 00:17:17.159

We had 1068 individuals that currently.

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00:17:17.159 --> 00:17:20.489

Have an authorization to receive employment services.

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00:17:20.489 --> 00:17:26.519

As you can see in the graph here, this has increased from only 367 individuals.

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00:17:26.519 --> 00:17:35.159

When we 1st launched that initiative every year, we have seen a growing number obviously last year with the pandemic, we just saw a minimal.

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00:17:35.159 --> 00:17:38.338

Increase an increase none the less.

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00:17:38.338 --> 00:17:41.608

And again, we are really starting to see.

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00:17:41.608 --> 00:17:45.959

Uh, those employment services and individuals with employment outcomes.

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00:17:45.959 --> 00:17:51.778

Increase over the last couple of months. So again, 1068 is more than a.

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00:17:51.778 --> 00:17:57.598

A 3 fold increase from 5 years ago and we still know.

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00:17:57.598 --> 00:18:03.088

From our national core indicators data that about 41% of the people that we support.

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00:18:03.088 --> 00:18:07.618

Indicate a desire to pursue competitive, integrated employment.

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00:18:07.618 --> 00:18:12.328

Also, just a special call out to our support coordinators.

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00:18:12.328 --> 00:18:19.858

We now have 210 support coordinators that have at least 13% of their caseload that have an employment outcome.

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00:18:19.858 --> 00:18:25.169

A 132 support coordinators had between 13 and 2004%.

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00:18:25.169 --> 00:18:31.858

Of their caseload, uh, with an employment outcome, we have 51 support coordinators that have a 2025%.

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00:18:31.858 --> 00:18:35.489

And 34% other individuals with an employment.

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00:18:35.489 --> 00:18:40.378

Goal we actually have 19 superstar support coordinators out there.

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00:18:40.378 --> 00:18:50.308

That I have more than 35% other case, slow with a, um, employment outcome. And, uh, we actually have 8 support coordinators.

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00:18:50.308 --> 00:18:58.108

That have more than 50% of their caseload pursuing an employment outcome. So, again.

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00:18:58.108 --> 00:19:01.348

Excellent job for those 210 support coordinators.

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00:19:01.348 --> 00:19:04.469

Uh, for really making employment of priority.

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00:19:04.469 --> 00:19:11.548

With the individuals that they support, if you have questions about the content again, the Q and A's will be answered.

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00:19:11.548 --> 00:19:19.648

And uploaded with the recorded, you're always welcome to email Sandy as the employee 1st specialist.

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00:19:19.648 --> 00:19:25.019

For this date, or contacting me as the coordinator of employment community engagement.

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00:19:25.019 --> 00:19:29.368

And this slide deck will be there also. See what have our email.

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00:19:29.368 --> 00:19:36.449

Addresses and I have actually gone 1 minute over. So I am going to just quickly turn it over to Holly and Shelly.

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00:19:36.449 --> 00:19:39.449

To talk about technology and universal design.

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00:19:39.449 --> 00:19:47.818

Thank you afternoon she's having some issues with her on mute button. So I'm going to get us started.

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00:19:47.818 --> 00:19:54.088

In the interest of our time, but hopefully she will be able to jump on soon.

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00:19:54.088 --> 00:19:58.769

I'm not sure how to advance the slides.

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00:19:58.769 --> 00:20:04.199

Let me see, there we go there. We go.

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00:20:04.763 --> 00:20:19.433

So I wanted to introduce our team. We are the new universal design and assistive technology team. I've been lovingly referred referring to us as you that, because the academics vehicle, and I find it a good way to remember what we do.

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00:20:20.094 --> 00:20:29.693

So, Jason Omar is going to be our vendor service coordinator for modification providers and he's gonna be at the go to, on working with.

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00:20:29.969 --> 00:20:35.608

Notifications and with Missouri, Missouri, inclusive housing.

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00:20:36.749 --> 00:20:42.058

Shelly is a provider relations lead who's going to be Manning?

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00:20:42.058 --> 00:20:46.138

The universal design side of our team.

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00:20:46.138 --> 00:20:51.568

And she's going to be supervising Jason together they're going to champion.

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00:20:51.568 --> 00:20:56.548

Modifications and I'm going to be there backup. They are gonna be my backup.

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00:20:56.548 --> 00:21:00.628

For a technology assistive technology.

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00:21:00.628 --> 00:21:05.519

My name's Holly and then out of the St Louis area.

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00:21:05.519 --> 00:21:08.878

Our team is pretty new, but so far I can help.

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00:21:08.878 --> 00:21:14.848

Get some things going, if you have questions about outcomes, are.

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00:21:14.848 --> 00:21:20.219

Initiating remote sports, I can support you there. We do have a.

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00:21:21.659 --> 00:21:28.709

Email address that will for each, all 3 of us. So when in doubt, you could always use that email address and 1 of us will get back to, you.

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00:21:28.709 --> 00:21:35.038

That email address is technology 1st and universal design that Mo dot. Gov.

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00:21:36.898 --> 00:21:41.489

So, we're starting out brand new and why did.

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00:21:41.489 --> 00:21:48.598

Why do we need a team to do specifically universal design and.

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00:21:48.598 --> 00:21:55.288

Modifications well, we notice that we need to improve our utilization of these 2 services.

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00:21:55.288 --> 00:21:58.288

They were services being under you under, you.

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00:21:58.288 --> 00:22:02.519

Underutilized and we weren't meeting our goals that we'd set for ourselves.

199

00:22:02.519 --> 00:22:07.919

We currently have 214 authorizations for out of.

200

00:22:07.919 --> 00:22:12.269

Over 1600 waiver participants and we're sure we need more.

201

00:22:12.269 --> 00:22:15.328

Out there.

202

00:22:15.328 --> 00:22:21.269

We have set technology goals as part of our technology 1st initiative to the state and we are.

203

00:22:21.269 --> 00:22:29.878

We're lacking pretty poorly. We also realize that some of those issues are due to provider capacity. We don't have enough providers to meet all of the needs.

204

00:22:29.878 --> 00:22:34.648

And to some of those needs aren't being met to satisfaction. So we need to increase that.

205

00:22:34.648 --> 00:22:42.479

We also know that increasing knowledge is going to do that. So we've partnered with shift and we're going to focus on some more specialized tradings.

206

00:22:42.479 --> 00:22:47.519

Or support coordinators and providers with Missouri, inclusive.

207

00:22:53.038 --> 00:22:56.699

We have some next steps. This is kind of a broad.

208

00:22:56.699 --> 00:23:00.058

That's week of what we're going to do.

209

00:23:00.058 --> 00:23:14.128

1st, we need to pull it back to basics. A lot of our support coordinators are having the same information through the state, which is an issue and we know that utilization isn't being looked at utilization review isn't being looked at the same way.

210

00:23:14.128 --> 00:23:17.939

Across the state, so we will.

211

00:23:17.939 --> 00:23:24.449

Be working with to improve how we review these.

212

00:23:25.523 --> 00:23:39.624

Service requests in Holly. I was able to pop in. I got unmuted and locked. Oh, good. I'm so glad. You're here. That's okay. Just to.

213

00:23:39.743 --> 00:23:53.124

Kind of follow up with what Holly was indicating is, is from the whole modification and we're definitely going back to the basics as we understand that there's some confusion around interpretation and even some integrity issues around the deliver.

214

00:23:53.459 --> 00:23:59.394

Delivering that service, so we want to be sure that we shore up all those for all those roles. That are involved on the team.

215

00:24:00.294 --> 00:24:12.384

And then also, we're going to be ensuring that we have our collaboration with mystery housing, and that we're actually working on division goals as well as, um, goals and data. That makes sense that can help us move into the future.

216

00:24:14.338 --> 00:24:23.519

Thank you Shelley. So what are our service providers and what services do they provide? We have about 35.

217

00:24:23.519 --> 00:24:27.298

Yea, or modification providers across the state.

218

00:24:27.298 --> 00:24:31.618

And they work really closely with our durable medical equipment and technology providers.

219

00:24:31.618 --> 00:24:41.219

Could provide some of those hard goods to make individuals homes, more accessible to them. Some of those hard goods are temps and showers and commodes and.

220

00:24:41.219 --> 00:24:51.118

Keep this entry and automatic door openers, but some of the things are really modifications to the structure of the home. So, door wedgings.

221

00:24:51.118 --> 00:24:56.278

Maybe the bathroom needs to be redesigned to help.

222

00:24:56.278 --> 00:24:59.608

The individual with independence in their personal care.

223

00:24:59.608 --> 00:25:11.909

For technology providers, we have had an influx of onboarding, new technology providers, which is really exciting. And we now have providers who cover each of each area in remote supports.

224

00:25:11.909 --> 00:25:18.298

Medical and medication support applications for task management and employment support.

225

00:25:18.298 --> 00:25:26.848

And personal emergency devices, as I mentioned in our earlier slide, we've partnered with shift, which is a national education and accreditation.

226

00:25:26.848 --> 00:25:30.328

Organization to improve how we talk about.

227

00:25:30.328 --> 00:25:37.169

Technology improve how we teach about technology and improve how we add it into individuals lives to support them.

228

00:25:37.169 --> 00:25:44.909

We have a shift has 3 levels of accreditation, a navigator level, which is that the support coordination.

229

00:25:44.909 --> 00:25:51.509

Level and enabling technology information specialist, which is at the Q level.

230

00:25:51.509 --> 00:25:56.098

Shelley Jason, and I are all credited in the task.

231

00:25:56.098 --> 00:26:08.638

Section, and then the organization accreditation, which is the entire organization system, and we've had 2 providers go through that accreditation really? Health insurance and Valley. And we're very excited to see how that.

232

00:26:08.638 --> 00:26:16.078

Progress in the future, we currently don't have any support formations under the navigation.

233

00:26:16.078 --> 00:26:19.648

Accreditation, but are working towards that as a goal for this year.

234

00:26:21.894 --> 00:26:27.743

I'm sure you guys all know that station and date and they're doing some amazing stuff and I know they're next on the agenda,

235

00:26:28.013 --> 00:26:34.644

but I wanted to announce that we are actually working right now to get them on board as a community provider partner,

236

00:26:34.943 --> 00:26:37.554

which means they'll be able to build wavered surfaces.

237

00:26:40.858 --> 00:26:55.824

So, like, Cali indicated, we're kind of on the ground level of trying to develop how we're gonna work through these processes and navigate some of

the next steps. So, our initial development has been a lot of discussions and recognizing where the needs are and where our weaknesses and strengths might be.

238

00:26:56.153 --> 00:26:57.023

Um, and so.

239

00:26:57.868 --> 00:27:08.519

For both areas were recognizing that training is 1 of the number 1, and providing some supports in collaboration with folks, um, other entities and, and within the regional offices as well.

240

00:27:09.594 --> 00:27:13.284

We also recognize that updating our website resources and processes,

241

00:27:13.284 --> 00:27:16.163

because both this information is not always readily available,

242

00:27:16.163 --> 00:27:19.493

nor is it always accessible so we want to be sure that we,

243

00:27:19.673 --> 00:27:27.564

when we do have those trainings and processes established that you guys are able to access that independently and with ease and then,

244

00:27:27.564 --> 00:27:27.894

of course,

245

00:27:27.894 --> 00:27:28.824

there's always the greater,

246

00:27:28.824 --> 00:27:30.294

statewide provider inclusion,

247

00:27:30.294 --> 00:27:38.213

and trying to capacity just as Dwayne was indicating with employment and looking to do that throughout the state as well.

248

00:27:38.513 --> 00:27:43.134

So, 1 thing I do want to highlight is the tech fest. That is coming in February of 2002.

249

00:27:43.134 --> 00:27:54.413

this is very new and in the process and so we don't have a lot of information to share with that, but please keep your eyes and ears open for information and we encourage you to make all.

250

00:27:56.429 --> 00:28:04.979

Efforts to attend that as well. Um, so to stay within our timeframes we'll go ahead and hand it over. I believe station empty is coming up next.

251

00:28:07.348 --> 00:28:11.398

Hi, Hello?

252

00:28:11.398 --> 00:28:17.219

I'm not sure if someone has the slides or will I be advancing them?

253

00:28:20.368 --> 00:28:24.269

It will be events and then look to your left and you can move them up and down.

254

00:28:24.443 --> 00:28:37.733

Oh, got it great. Thank you. Appreciate it. So, thank you for the introduction and thank you all for listening for those of you who know about us. I'll apologize in advance you.

255

00:28:37.733 --> 00:28:50.693

You're probably aware of our services, but the goal of this is to kind of let everyone know who we are, what we're doing about a relationship with the division and how we can serve as a resource. My name is Alex ready.

256

00:28:50.693 --> 00:29:00.953

I'm 1 of the founders and strategy officers and positions with station empty, and I just want to take this opportunity to kind of give you an update of where we are what we're doing and how we can support you.

257

00:29:01.378 --> 00:29:12.324

A little bit of background is, we are station empties. Our mission is really to elevate the quality of medical care for individuals with ID and those individuals that are under your care.

258

00:29:13.193 --> 00:29:20.574

All of our physicians aside from being board, certified doctors are especially trained to understand the needs of this population.

259

00:29:21.294 --> 00:29:32.064

That includes complex, medical needs, behavioral leads, but also all the support that you provide to help assist that. And if you need any kind of medical question or concern, that needs to be addressed.

260

00:29:32.933 --> 00:29:37.074

We 1 of the goals of my presenting this today.

261

00:29:37.074 --> 00:29:48.173

And in general is to let, you know, that this is available through the division division has covered the cost of this service it's free to use for anyone that's on the waiver.

262

00:29:49.013 --> 00:30:02.243

And we just want to get the word out, especially now with the concern about cobit anything we can do to keep people at home and their home setting in general is something that we should take upon ourselves.

263

00:30:02.784 --> 00:30:16.374

But now, in the light of packed hospitals, bench shortages, and frankly, the delta variance is going on, we want to serve as a resource for families and individuals themselves.

264

00:30:16.374 --> 00:30:28.463

So, just to let, you know, that you can pass this on. It's very simple to use. And I'm going to just talk a little bit about our services and get back some time at the end of this for questions. If there are any.

265

00:30:28.888 --> 00:30:32.278

As I mentioned, our partnership is with the division we've been, uh.

266

00:30:32.278 --> 00:30:45.384

Covering about 15,000 individuals for over a year. Now, all individuals are pretty registered. So if you've never used it before, you can just call the 188 number and you can get started immediately when to call station Mt.

267

00:30:45.384 --> 00:30:52.943

Any non life threatening situation or change in condition. It can be a simple question about cobit even it could be about medication.

268

00:30:52.943 --> 00:31:04.463

We can do refills falls fever rashes anything that you can think of that you'd need to speak to medical personnel about. You can call us.

269

00:31:04.463 --> 00:31:10.884

Oftentimes, we're available immediately or within minutes, and we are available 24 hours a day. 7 days a week.

270

00:31:13.374 --> 00:31:27.354

This is the number. Sorry it's a 1877 number. I apologize. And our team will walk you through the whole consultation. We have a navigator that walks you through again. It is simple to use. It's an app that you can download. But it's a great resource for for.

271

00:31:27.354 --> 00:31:40.314

And families and both formal and informal caregivers to have this accessibility, we're really proud of the work we do and really grateful for the division to, to support this kind of service again.

272

00:31:40.314 --> 00:31:55.134

Right now given the current climate of healthcare and what's going on. I think it's even more important that we really take it upon ourselves to, to provide the care. What I've noticed is even if it's covered related issue that's going on.

273

00:31:55.134 --> 00:32:01.344

Individuals are delaying care because of fear of contracting cobit,

274

00:32:01.344 --> 00:32:03.324

or going into the hospital,

275

00:32:03.324 --> 00:32:11.153

or not being wanting to travel and these are all real concerns and issues and you can contact us as many times as you as I mentioned,

276

00:32:11.844 --> 00:32:13.824

there's an app available for the smart phone devices,

277

00:32:13.824 --> 00:32:17.153

and if you go on the website,

278

00:32:17.153 --> 00:32:21.713

you can find some instructions and information about that.

279

00:32:23.338 --> 00:32:34.709

This is just some information about what we do there's my email on the top and then more information on that web link and.

280

00:32:34.709 --> 00:32:41.429

I just wanted to address some of the questions that there has been a question about site services and, um, you know.

281

00:32:41.429 --> 00:32:48.749

If there is a behavioral issue or a psychiatric issue, we can oftentimes mitigate it. The 1st and foremost.

282

00:32:49.314 --> 00:32:54.384

Kind of mantra when it comes to behavioral issues, let's make sure it's not an organic type issue.

283

00:32:54.653 --> 00:33:04.314

Meaning I've had calls for individuals banging their head and and and being disruptive, and they end up having to take or an infection same thing with constipation.

284

00:33:04.314 --> 00:33:11.094

So our Docs oftentimes can handle that and sometimes just speaking to a physician can kind of alleviate that psychiatric issue.

285

00:33:12.294 --> 00:33:21.233

That being said, we do have a separate division that does psychiatric consultations where these are scheduled calls.

286

00:33:21.983 --> 00:33:33.683

And I know that 1 of the questions I got was, do we provide orders and scripts for the code vaccine? Yeah, we are licensed physicians in state of Missouri. So anything that a physician can order, we can order.

287

00:33:34.858 --> 00:33:39.449

And this has become a real issue so.

288

00:33:39.449 --> 00:33:52.884

We can anything that you can imagine that. A physician would need to order. We would be able to order. Whether that's a medication. Whether that's a test. Whether that's a study, such as a radio graphic study, a chest X, Ray and X. Ray we can do that.

289

00:33:53.094 --> 00:34:02.243

If not, if there's an issue that's beyond our purview of services, we're more than happy to help you walk through the process.

290

00:34:02.723 --> 00:34:11.454

1 thing I want to mention is that if we do feel 1st of all, 90% of the calls, we get, we are able to keep that individually in their home setting.

291

00:34:11.454 --> 00:34:26.034

Meaning they don't have to be sent out which in itself is great for the individual and the person that's tasked with transporting them if an individual does need to get send out. Because obviously, we can't cover everything via telemedicine in the consultation such as procedures.

292

00:34:26.034 --> 00:34:40.914

We will contact the E. R, urgent care and let them know and say, hey, we're sending this individual for this specific reason. And the hope, and goal of that is that it will expedite the care that the individual is receiving, eliminate some of the unnecessary testing.

293

00:34:40.914 --> 00:34:51.893

In some cases. We eliminated waiting that long because if it's just a CAT scan or a specific test, sometimes you can bypass the ear and go right to the study that's needed. So.

294

00:34:53.873 --> 00:35:08.423

It's just another feature that we would we would provide. And again, 1 of the questions that came up is is mental health concerns. Yeah. If in short answers, we, we do handle a lot of those. Now. If someone is.

295

00:35:08.699 --> 00:35:17.784

Truly suicidal and harm to themselves or harm to others, and we feel they need further in inpatient evaluation. We do send those out.

296

00:35:17.784 --> 00:35:32.693

We cannot handle those kind of issues, but for behavioral issues, that pop up now and then where you need to speak to a physician, you can definitely call us. In fact, a lot of times what happens and I still practice in the E. R.

297

00:35:32.693 --> 00:35:47.244

is we are the 1st people to see individuals as it is anyway and oftentimes to get to a psychiatrist is very difficult. So, oftentimes, if you go to the, you're going to see a psychiatrist via telemedicine. Anyway, that being said, we do are able to handle those.

298

00:35:47.244 --> 00:36:00.503

And those, we cannot, we do send out and we'll contact the facility in advance. I think there was another question about. Is there anything in motion to address the labor shortage crisis?

299

00:36:00.954 --> 00:36:02.364

Not sure if that's for me.

300

00:36:03.568 --> 00:36:15.923

But, yeah, I will say in 1 sense that, you know, all the great work that that the are doing and that you are all doing, we're there to support you. Oftentimes, I hear that.

301

00:36:15.954 --> 00:36:26.153

You know, it's, it's quite a process to get an individual out of either their own home or facility to a physician, and we can help support you in that and keep that person in their home setting. So.

302

00:36:27.864 --> 00:36:42.023

Again, the main take home home message, I want you to get out of this. Is that the services there? We're there, if you're not sure when to call us or why to call us just call, we will walk you through the process and we'll let you know that. Yes we can handle the situation. Most of the times. We can.

303

00:36:42.384 --> 00:36:56.423

And the other thing I really want to get across is that we're really trying to reach families who may not be aware. I know we've done a lot of marketing and push in terms of getting the word out, but we all get inundated with emails and bombarded with mail.

304

00:36:56.543 --> 00:37:10.224

So I just want to let, you know, service coordinators, no case management anyone that has a touch point to this population. That this is a resource that is really can be a game changer for people and those individual that don't know about it.

305

00:37:10.224 --> 00:37:20.873

Just to let them know there's no need to go out of their home setting for simple things. Sore throat falls med, refills, all those kinds of things. So that's it. That is my email.

306

00:37:20.873 --> 00:37:26.693

If you have specific questions, please don't worry about reaching out to me. At any time.

307

00:37:26.934 --> 00:37:36.893

There's more information on the website and I also want to thank the division for continuing to do the great work they do and working with us to provide this care. Thank you.

308

00:37:52.284 --> 00:37:53.063

Cam Europe.

309

00:37:55.074 --> 00:38:05.393

Thank you good afternoon. Everyone appreciate the opportunity this afternoon to give you some updates in regards to the hearse process. I did not provide any slides in the slide deck.

310

00:38:05.664 --> 00:38:11.873

My intent is to actually go out to the website to walk through where some of the information is currently located for, you.

311

00:38:12.210 --> 00:38:18.750

So, I'm going to share my screen, so this is our division landing page.

312

00:38:18.750 --> 00:38:22.710

When you go out to our website, you'll notice that.

313

00:38:22.710 --> 00:38:28.920

Within the landing page down below, there are several popular sections tabs and if you go to quality.

314

00:38:28.920 --> 00:38:34.949

We have a designated area for the 1st or the Missouri health risk screening tool process.

315

00:38:36.360 --> 00:38:41.730

And I'll provide the links following my discussion today in the chat for everyone as well that I'm covering.

316

00:38:41.730 --> 00:38:45.090

So this is our landing page for the 1st process.

317

00:38:45.090 --> 00:38:52.380

We do have a ribbon that speaks to overview if you've not had an opportunity to go out and access this information.

318

00:38:52.380 --> 00:38:56.250

I would strongly encourage you as service providers to do so.

319

00:38:56.250 --> 00:38:59.610

And it is a document that has a lot of information.

320

00:38:59.610 --> 00:39:03.389

That speaks to the process and its entirety.

321

00:39:03.389 --> 00:39:07.500

And you are able to download that information as well.

322

00:39:07.500 --> 00:39:13.860

And so that is just a really helpful resource for everyone to familiarize themselves with the process.

323

00:39:13.860 --> 00:39:24.780

Also on our landing page, we have a ribbon for and we are hoping to have that document posted next week for finalizing 1 final response.

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00:39:24.780 --> 00:39:30.329

And then, lastly, right now we have a ribbon that speaks to information for individuals and families.

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00:39:30.329 --> 00:39:37.380

This is a really important resource and we worked and collaborated with our contractor intellect ability to.

326

00:39:37.380 --> 00:39:46.920

Provide a brief recording I believe it's about 7 minutes in link and it really speaks to the intent of the health risk screening tool and the value of the tool and the process.

327

00:39:46.920 --> 00:40:00.445

And we're hoping that as we move forward with implementing this enhanced process, that support coordinators, and you as provider agencies will be able to utilize this and share this information with individuals and families.

328

00:40:00.445 --> 00:40:08.425

So that they have a true understanding of why we've made the commitment to move in the direction of utilizing the is a screen.

329

00:40:08.789 --> 00:40:18.360

1, other feature that you can be looking forward to, in regards to our landing page for the hearse process is we will be providing a, some graphics.

330

00:40:18.360 --> 00:40:23.880

In relation to where we're at, within the process in regards to provider participation.

331

00:40:23.880 --> 00:40:29.039

And individuals being screened, still be looking for that enhancement as well.

332

00:40:29.039 --> 00:40:37.139

Wanted to also highlight for you that up on the landing page is the designated mailbox and I will drop this in the chat as well.

333

00:40:37.139 --> 00:40:41.425

We are continuing to encourage agencies or anyone for that matter.

334

00:40:41.635 --> 00:40:55.675

If you have any questions related to the Hearst process, or if you are a residential provider, and you are interested in volunteering to come on board during this phase of the process to please reach out, utilizing that designated mailbox.

335

00:40:55.704 --> 00:40:57.295

And again, I'll drop that in the chat.

336

00:40:57.690 --> 00:41:04.380

For today's webinar as well, we will then take that information and be contacting you directly.

337

00:41:04.380 --> 00:41:14.190

We will also be taking your information if you have questions and that's what supports us to continue to update and revise the epic queue document that we will be posting.

338

00:41:14.190 --> 00:41:19.170

Right now we are in the phase of the process to where we are asking.

339

00:41:19.170 --> 00:41:30.929

For seeking volunteers from residential service provider agencies to come on board to initiate the screening process for the individuals that you provide residential services and supports to.

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00:41:30.929 --> 00:41:41.429

At this point in time we have 9 residential providers across the state who have made that commitment and who are waiting to gain access to the system.

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00:41:41.429 --> 00:41:46.409

We are currently in the final phases of working through some, it requirements.

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00:41:46.409 --> 00:41:50.880

With our departmental state governmental, it.

343

00:41:50.880 --> 00:41:59.400

Organization and the contractor, and are hoping to have everything ready to initiate violate next week is our targeted goal.

344

00:41:59.400 --> 00:42:12.449

We also, in addition to those 9 residential providers have 7 other residential service providers across the state that are in various phases of getting ready to be able to move forward and access the system.

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00:42:12.449 --> 00:42:20.369

So, again, when I think those providers, if if you're on the call today that have reached out, we're really looking forward to having and continued.

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00:42:20.369 --> 00:42:29.760

Outreach and opportunities for other provider agencies to come on board starting in October we will be scheduling a monthly webinar call.

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00:42:29.760 --> 00:42:36.000

Where those participating in the process will have the opportunity to give us some valuable feedback.

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00:42:36.000 --> 00:42:41.369

So that we can continue to do some, do learn new activities and make enhancements to the process.

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00:42:41.369 --> 00:42:46.469

Before we go full statewide implementation in the fall of 2022.

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00:42:46.764 --> 00:42:57.295

We have made some decisions administratively within the division that we are going to make every effort to align with our new case management platform system connection.

351

00:42:57.295 --> 00:43:02.304

And I know toy and other team members will be speaking to that later on today during the webinar.

352

00:43:02.760 --> 00:43:10.380

We think that that will make them a much smoother transition for everyone who's participating in these, these enhancements with systems.

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00:43:10.380 --> 00:43:21.960

So that is our targeted timeline for statewide implementation. So, between now and then again, residential provider agencies please you have the opportunity.

354

00:43:21.960 --> 00:43:26.280

Through the designated mailbox that I have highlighted here.

355

00:43:26.280 --> 00:43:32.880

To reach out to us, and we look forward, hopefully to being able to work with you soon on these lines of effort.

356

00:43:33.929 --> 00:43:40.710

I also have a window of time still, and I went through the 1st information pretty quick intentionally.

357

00:43:40.710 --> 00:43:47.190

What I would like to do is also cover quickly, some information and updates in regards to 19.

358

00:43:47.190 --> 00:43:58.199

So, on our division website, you'll notice that there is a landing page for all of the coping 19 information. I want to highlight the testing information ribbon for everyone.

359

00:43:58.199 --> 00:44:04.920

And again, I will try to drop some designated links in the chat for everyone following my presentation today.

360

00:44:04.920 --> 00:44:12.239

We have posted for provider agencies, all community providers, information regarding the, by next now testing.

361

00:44:12.239 --> 00:44:18.719

With the delta variant, and the continued search that we're seeing in cases across the state.

362

00:44:18.719 --> 00:44:23.730

Testing is still a very integral part of mitigation and identifications.

363

00:44:23.730 --> 00:44:33.480

And so we do have information if you're interested as a community provider on how you might be able to access and be able to utilize the by next now testing.

364

00:44:34.829 --> 00:44:41.039

I also wanted to highlight under the rhythm down below that indicates resources and videos.

365

00:44:42.150 --> 00:44:54.269

That the CDC has recently provided some really great educational resources for individuals with around coping 19 and it's actually titled coven, 19 materials for people.

366

00:44:54.269 --> 00:44:57.929

With intellectual developmental disabilities and care providers.

367

00:44:57.929 --> 00:45:04.019

As you're looking for resources and wanting to have important conversations to support individuals and making.

368

00:45:04.019 --> 00:45:07.530

Those critical decisions right now in relation to.

369

00:45:07.824 --> 00:45:10.105

Risk mitigation and planning,

370

00:45:10.465 --> 00:45:14.275

whether it be looking at code activity in your areas,

371

00:45:14.275 --> 00:45:16.195

and making decisions on activities,

372

00:45:16.525 --> 00:45:25.735

or continuing to stress the importance of those mitigation strategies are having important conversations around whether or not individuals choose to be vaccinated.

373

00:45:26.635 --> 00:45:29.755

These are great resources to support those conversations.

374

00:45:29.969 --> 00:45:35.550

And to share with individuals and families, so I really wanted to take a moment to highlight that as well.

375

00:45:35.550 --> 00:45:46.710

Also, as a reminder, the division does still currently have our designated Mail boxes if you are in need of support in relation to cub in 19 testing.

376

00:45:46.710 --> 00:45:54.809

Or coban, 19 vaccination efforts, or you have questions, please utilize those mailboxes and I'll drop those links in the chat as well.

377

00:45:54.809 --> 00:45:57.989

And someone from the division will be getting back to, you.

378

00:45:57.989 --> 00:46:02.280

And supporting you in those lines of effort, if you need additional information.

379

00:46:02.280 --> 00:46:05.730

And then, lastly, I also wanted to share.

380

00:46:05.875 --> 00:46:19.375

That the Department of health and senior services has a wealth of information related to code as well. They have lots of maps and demographics that will provide you with current update information on cobit activity across the state.

381

00:46:19.375 --> 00:46:28.585

But they've also initiated hotspot advisories and that's the screen. That I currently have pulled up as you can see here, the last advisory that was issued was August 9.

382

00:46:28.920 --> 00:46:37.710

Forecast in Jackson counties and Casey and the surrounding areas. This is vital information as well as you're looking to do planning and mitigation.

383

00:46:37.710 --> 00:46:41.369

To support individuals in your respective counties and communities.

384

00:46:41.369 --> 00:46:46.500

So, I really wanted to just again, take some time to highlight some of the code of information.

385

00:46:47.730 --> 00:47:02.034

And then, lastly, I also wanted to share with you to be looking for an email blast, coming out. Sometime later this month we're making a shift our transition, as, you know, in the past. Those of you that are residential service providers.

386

00:47:02.335 --> 00:47:10.255

Our local regional office QB are in teams have been supporting an annual or an oversight meeting where they've been sharing information.

387

00:47:10.590 --> 00:47:19.800

We're moving in the direction similar to this webinar today where we will be hosting an annual aren't oversight meeting.

388

00:47:20.034 --> 00:47:34.494

That meeting for this year will be on save the day on September 15th from 10. 0, am to 30 PM. So be looking for email blast to inform everyone. There will be registration requirements tied to that. Webinar. We will be recording that.

389

00:47:35.639 --> 00:47:47.425

Webinar much like the meeting today and we have a lot of great topics outlined for that agenda. It's open obviously to the audience who work for our residential service providers and provide oversight.

390

00:47:47.784 --> 00:47:54.954

But anyone else is more than welcome to register and attend and for those, that will not be available. It will be recorded for reference.

391

00:47:55.050 --> 00:48:00.269

So, we're looking forward to that upcoming webinar and information.

392

00:48:00.269 --> 00:48:04.679

And with that, I will turn it over to the next presenter. Thank you.

393

00:48:06.869 --> 00:48:11.039

That afternoon Hi, my name is Melissa Jones.

394

00:48:11.039 --> 00:48:20.820

And I want to talk about some changes that we've made to our certification process. 1st we will be. Can you.

395

00:48:20.820 --> 00:48:35.070

Advanced slide 1 to, for we, thank you. So, employee records, we are not changing employee records. We're still reviewing 100% of new employees, which are employees who have been hired since the previous certification survey.

396

00:48:35.070 --> 00:48:46.739

And we will be looking at 20% of the tenured employees for the minimum of 10 records. So if you have an agency that's small, you only have 5 employees. We will look at all 5 of them.

397

00:48:46.739 --> 00:49:01.405

Um, then with policies and procedures, we're asking that you send policy and procedures to the survey or prior to the survey. So we can review those at our desks. So we are limiting the time that we're spending in in the office in provider's offices.

398

00:49:02.005 --> 00:49:11.664

So, then we can also know what kind of trainings we need to look for in the personnel records, entrance and exit meetings we're doing in person.

399

00:49:11.940 --> 00:49:19.469

Some, if there's no administrative staff that have.

400

00:49:19.469 --> 00:49:22.860

Um, are that are suspected of.

401

00:49:22.860 --> 00:49:37.079

We're asking that we're the providers only have 1 or 2 key staff at the entrance and exits to kind of to limit the number of people with potential exposure and then have the regional office 10 by phone.

402

00:49:37.079 --> 00:49:42.059

These could be done completely virtual on Webex. If needed if.

403

00:49:42.059 --> 00:49:48.059

There's a situation that arises, so, as each survey will be done.

404

00:49:48.059 --> 00:49:54.510

You know, based on what's going on in, with that agency. Okay, next slide please.

405

00:49:54.510 --> 00:49:59.579

So, we are continuing to do 100%.

406

00:49:59.579 --> 00:50:09.929

Of all sites we will review, we will review either virtually or an, in person for 100% of the sites, which we've always looked at 100% of the sites.

407

00:50:09.929 --> 00:50:15.420

The difference is, we will be looking at 63% of the sites in person.

408

00:50:16.530 --> 00:50:24.780

When we're in person, 25% of the 63, we will do a chart review and a medication review.

409

00:50:24.780 --> 00:50:33.210

The other 30, some percent of the sites we will that we're in person will only be environmental reviews.

410

00:50:33.210 --> 00:50:37.500

Then the other 37%.

411

00:50:37.500 --> 00:50:41.340

And the sites will be virtual either. Webex.

412

00:50:41.340 --> 00:50:46.800

Soon whatever it is that works best for your agency.

413

00:50:46.800 --> 00:50:56.219

If we get to a situation, and there's a site that it's not safe for the survey to go into. We can always flip that to an invite.

414

00:50:56.219 --> 00:51:05.130

Excuse me remote visits we can do porch visits. We can look in the windows we can meet in the driveway.

415

00:51:05.130 --> 00:51:08.789

To speak with individuals appropriate socially this syncing.

416

00:51:08.789 --> 00:51:12.389

Um, so that's kind of the situation where we're in right now.

417

00:51:12.389 --> 00:51:15.929

On there is an example of.

418

00:51:15.929 --> 00:51:20.010

You know, if we have 40, 40 sites, 25 sites will be.

419

00:51:20.010 --> 00:51:26.550

Um, visited in person with 25 of those being looked at with the individual records.

420

00:51:26.550 --> 00:51:29.880

And then the other 15 sites will be virtual with no.

421

00:51:29.880 --> 00:51:41.309

Record or medication review, and currently with the situation that it's going on with the delta by variance, we are moving all of our.

422

00:51:41.309 --> 00:51:45.119

Site visits to remote, only.

423

00:51:45.119 --> 00:51:57.869

Except, for certain situations, where it's the agency or the regional office, or the surveyors field, they actually need to go into that environment. So there could be some situations that we need to do that.

424

00:51:57.869 --> 00:52:02.159

We are also trying to do employment sites and they have sites.

425

00:52:02.755 --> 00:52:06.445

In person when there's no individual's presence.

426

00:52:06.445 --> 00:52:18.565

So, before the day, the site opens, or after, everybody leaves for the end of the day, we're trying to do those environmental reviews in person

on site because they're a little tricky to do virtually because sometimes they're a little large.

427

00:52:19.675 --> 00:52:24.864

We're also doing by next testing weekly for all of our surveyors. So we know.

428

00:52:25.230 --> 00:52:39.719

At the beginning of the week, if anybody is positive, and they will cancel, or we'll reschedule your survey to a later date or have somebody else fill in. So that's 1 of the ways that we're trying to mitigate the risk that we're presenting to providers.

429

00:52:39.719 --> 00:52:44.730

Um, let's see, and then I just want to give you a quick update.

430

00:52:44.730 --> 00:52:57.900

From 2020 surveys, we have completed all of the 2020 surveys that we're due during 2020. It took us till about May to finish all of those but we are caught up as of today.

431

00:52:57.900 --> 00:53:03.480

With all of 2020, and so far, all of 21 surveys that was a big.

432

00:53:03.480 --> 00:53:08.820

Challenge for us, but we were able to get that so we're looking forward to.

433

00:53:08.820 --> 00:53:19.559

Continue with this new process to make things smoother and more efficient for agency staff as well as my steps. Thank you have a great day. 1. it's up to you.

434

00:53:25.139 --> 00:53:37.829

All right, so I get to talk to you about the exciting change that we have made to our residential rate skill and it is exciting.

435

00:53:37.829 --> 00:53:41.219

Because anything simpler is exciting, right?

436

00:53:41.219 --> 00:53:48.119

So just wanted to go over what those changes are what they look like, explain a little bit of the impact.

437

00:53:48.119 --> 00:53:51.960

Um, and just to get everybody on the same page.

438

00:53:51.960 --> 00:54:02.639

So, in a previous session or event that we had talked about, some changes that we've made statewide, and 1 of them is designing a centralized.

439

00:54:02.639 --> 00:54:07.739

Enrollment and rate team and so beginning 721.

440

00:54:07.739 --> 00:54:22.525

All initial and renewed information and funneling through that enrollment and rate team email box. So there are now 3 people sitting out all statewide communication about and how the change impacts providers.

441

00:54:24.925 --> 00:54:26.275

That has gone really well,

442

00:54:26.275 --> 00:54:28.704

so far a little bit of a learning curve,

443

00:54:28.704 --> 00:54:40.164

because we're also taking on some additional steps with that team to eliminate the need for support coordinators to change off the for providers to submit new cell budgets.

444

00:54:40.704 --> 00:54:43.315

So, we're finding efficiency in that process.

445

00:54:44.965 --> 00:54:58.284

When we receive an email, the outlook is automatically distributing the provider enrollment emails by region handle job on Springfield are manned by Lisa price a team who is.

446

00:54:59.789 --> 00:55:03.090

Provider relations specialist in Springfield.

447

00:55:03.090 --> 00:55:15.329

Albany, Kansas City hurtful and Rolla are manned by the provider relations specialist Michelle brown and Rolla and poppov left sites in St Louis or manned by Carla bell the provider relations specialist.

448

00:55:15.329 --> 00:55:18.989
Incites them and so that might be.

449
00:55:18.989 --> 00:55:30.300
Strange possibly, you're like, how did you come up with that configuration? And what we did was we looked at the number of people receiving residential services and we tried to group.

450
00:55:30.300 --> 00:55:41.219
The regions and equitable manner, so that we're equally distributing the number of assets that are processed. And so far that's worked really well.

451
00:55:41.219 --> 00:55:47.849
So, we're going to look at the changes when we went from a 5 scale rate system.

452
00:55:47.849 --> 00:55:54.054
Last year to, or sorry? A 7 rate scale system last year to a 5 scale beginning. 71.

453
00:55:54.054 --> 00:56:06.204
and what we want you to know is that, since we are using a new assessment tool to generate that, we recognize that there may not be exact matches from the resulting.

454
00:56:06.204 --> 00:56:20.784
And so we are honoring the higher of the at this time until we get through enough sample size and look at everything closer to figure out attempt to figure out what the differences might have been.

455
00:56:21.780 --> 00:56:27.150
So this is our 5 scale system.

456
00:56:27.150 --> 00:56:36.360
As of 721, you might remember looking at the scale before that an 1 and 2.

457
00:56:36.360 --> 00:56:39.989
And fiscal year, 21 have the same rate.

458
00:56:39.989 --> 00:56:44.730
The same with an S3 and 4. so what we've done is we've condensed.

459

00:56:44.730 --> 00:56:54.960

1, and 2 into a 1 and 3 and 4 into a 2 a 5 and 2 a 3 a 6 to a 4 a 7 to a 5 that has no.

460

00:56:54.960 --> 00:56:59.789

Impact on, right because all we're doing is combining the.

461

00:56:59.789 --> 00:57:05.880

Too similar race into a single or rate allocation score.

462

00:57:06.295 --> 00:57:09.054

So this is going to simplify things a lot,

463

00:57:09.114 --> 00:57:16.494

because I think it was confusing before why have 2 different officers if it's the same rate so,

464

00:57:17.215 --> 00:57:22.644

we think the administration for thinking of condensing the process and making it a little easier,

465

00:57:22.824 --> 00:57:28.344

and it is easier at the moment but there are some little nuances that we need to be aware of.

466

00:57:28.494 --> 00:57:32.184

So the division has committed to.

467

00:57:32.519 --> 00:57:38.039

Retro affecting the initial to the data placements.

468

00:57:38.039 --> 00:57:43.409

And so we are currently we're still receiving people.

469

00:57:43.409 --> 00:57:52.739

A new placement, their initial and that means we're retro dating that back into a previous fiscal year when there was a 7 scale.

470

00:57:52.739 --> 00:57:57.449

Assignment that has no impact to because.

471

00:57:57.449 --> 00:58:01.440

Is individually budgeted and it's an individual hourly rate.

472

00:58:01.440 --> 00:58:14.190

So, there's no impact there, but in group homes, it does impact because prior to 71, I'm 21 group homes had you want you to you 34567 on their contract?

473

00:58:14.190 --> 00:58:18.960

As of 71, you have you want you to U3 4 5.

474

00:58:18.960 --> 00:58:22.320

So, if we have to.

475

00:58:22.320 --> 00:58:33.690

If we have to retro impact and authorization to the previous fiscal year in which there was a 7 scale system, we have to work backwards.

476

00:58:33.690 --> 00:58:41.699

For anything up to 61 or 630 of 21, so provided the, the backwards conversion.

477

00:58:41.699 --> 00:58:51.809

When you get the communication from the enrollment rate team, it will specify this is the billing code for say, example, March, 1 and 20.

478

00:58:51.809 --> 00:58:58.590

1, through June, 30th of 21, and this is the billing code for July 1 forward.

479

00:58:59.605 --> 00:59:13.135

So, we'll spell that out in our email, but I know it can get very confusing. And people might wonder why we're doing that and it's for audit purposes to keep track because we were in a different scale last year than we are today.

480

00:59:13.405 --> 00:59:20.184

It'll only be confusing for a little while, because eventually we won't happy receiving initial that we're backdating.

481

00:59:20.695 --> 00:59:26.304

In 2021, and and we will move forward and only be dealing with the 5 scale system.

482

00:59:26.304 --> 00:59:37.945

So we're excited about the prospect of getting through all of our initials and the last fiscal year and moving into the future and it will make things easier.

483

00:59:39.659 --> 00:59:43.170

Another thing that we're doing with the 5.

484

00:59:43.170 --> 00:59:54.239

Is related to shared living, and we will be posting the revised shared living a manual and the self calculating budget and the rate determination form next week.

485

00:59:54.239 --> 00:59:58.170

We are updating that, so it aligns with.

486

00:59:58.170 --> 01:00:04.315

The rate allocation score of 1 through 5, if you can, I'm going to show you a visual in a minute.

487

01:00:04.315 --> 01:00:04.974

But at the moment,

488

01:00:04.974 --> 01:00:07.375

if you can visualize the shared living budget,

489

01:00:07.375 --> 01:00:08.034

you know,

490

01:00:08.065 --> 01:00:11.905

that there was a 12345 column with a rate differential,

491

01:00:12.114 --> 01:00:15.114

depending on the individual support,

492

01:00:15.114 --> 01:00:18.054

needs that aligned with the support intensity,

493

01:00:18.054 --> 01:00:18.505

scale,

494

01:00:18.925 --> 01:00:19.644
raw scale.

495
01:00:21.570 --> 01:00:25.050
Or the Ross scale.

496
01:00:25.375 --> 01:00:33.655
So that was confusing, right? We work in group homes and but in a in a shared living situation, we were not using.

497
01:00:34.824 --> 01:00:42.324
So, since we've converted to a 5 skill, it matches beautifully with the 5 columns in the shared living budget.

498
01:00:42.659 --> 01:00:46.349
And so we are going to begin using the.

499
01:00:46.349 --> 01:00:51.929
For shared living and so we'll get that posted.

500
01:00:51.929 --> 01:01:00.480
Recognizing that right now you will have people that you develop that budget using a violin.

501
01:01:00.480 --> 01:01:07.230
And that violin does not generate an, was simply continue submitting the same level.

502
01:01:07.230 --> 01:01:13.110
And scale that you have been, because that's what you do until you get a new assessment, right?

503
01:01:13.110 --> 01:01:16.949
The next time their assessment is due, they will get assessed through the.

504
01:01:16.949 --> 01:01:21.179
And that will generate a rate allocation score because with the mosque.

505
01:01:21.179 --> 01:01:27.239
That we can apply to any age, unlike the previous assessment tool utilized.

506

01:01:27.239 --> 01:01:37.349

And so that's super exciting. That's going to simplify things in the future. We're hoping to continue looking for simplification and.

507

01:01:37.349 --> 01:01:40.409

So, as soon as we get that posted.

508

01:01:40.409 --> 01:01:53.130

Excuse me, if any budget new, the new rate determination form, and then the annual post of it should be next week. The next time you submit the budget, you should use the new budget with the.

509

01:01:53.545 --> 01:02:05.275

Representation so, for a visual, I'm going to show you this is the host home budget for a level. 1. this is what you see now, when you look at it 12345.

510

01:02:08.159 --> 01:02:12.539

And that correlates with a range that you got from the.

511

01:02:12.539 --> 01:02:20.429

Right. Or a bind land range that you got from the vineland so beautiful 1 through 5.

512

01:02:20.429 --> 01:02:27.869

We've merged our residential group home and through 1 through 5. so we're doing the same thing.

513

01:02:28.105 --> 01:02:36.355

With the shared living budget so there's no rate change to this no, there's no dollar number changes on this form.

514

01:02:36.565 --> 01:02:43.375

The change is just that it's an 1 on 2 and yesterday and artists for our respect instead of the range.

515

01:02:43.650 --> 01:02:51.989

So, it might be a little odd at 1st, because it might feel strange. Oh, I have a child. He has a violent.

516

01:02:51.989 --> 01:02:57.599

So, what do I do remember just continue submitting the budget. You have.

517

01:02:57.599 --> 01:03:02.280

Until the next assessment, when that child will get an.

518

01:03:02.280 --> 01:03:09.329

If they're in the divisions waiver, we will be sharing the previous budget.

519

01:03:09.329 --> 01:03:19.139

With children's division, because we understand a lot of you contracts specifically with child specific contracts directly with children division, and they use the same tool.

520

01:03:19.139 --> 01:03:22.920

But do you use the vineland?

521

01:03:22.920 --> 01:03:32.159

For that methodology, and so we will provide them with the last budget so that they have that so that if they continue developing child specific contracts with you all.

522

01:03:32.159 --> 01:03:37.079

That they have that budget to use because the division doesn't see those budgets.

523

01:03:37.079 --> 01:03:51.809

But they work within our budget structure in the event that that individual ever moves into an individual agreement so that you experience rate continuity instead of a possible decrease.

524

01:03:51.809 --> 01:03:54.960

By utilizing some separate rate methodology.

525

01:03:54.960 --> 01:04:04.079

So, I know that's a lot of numbers, a lot of stuff throwing out there, but this information will be posted online so that you can see it spend time looking at it.

526

01:04:04.079 --> 01:04:09.449

We hope this makes things simpler and then we will.

527

01:04:09.449 --> 01:04:17.670

And then we'll keep moving towards other ways we can find efficiencies in these budgets. We're not done. We keep looking, keep trying.

528

01:04:17.670 --> 01:04:22.739

So, with that, I'm going to turn it over to Leslie Bradley.

529

01:04:24.929 --> 01:04:28.679

Inclined to.

530

01:04:28.679 --> 01:04:32.070

Someone can move to the next screen.

531

01:04:35.460 --> 01:04:38.969

So the waiver renewal update.

532

01:04:38.969 --> 01:04:43.170

You have control Leslie oh, I'm sorry.

533

01:04:47.849 --> 01:04:52.019

Cat, how do I move it to the next line?

534

01:04:52.019 --> 01:04:56.880

Look to your left.

535

01:04:58.139 --> 01:05:01.260

Okay, thanks Kat, appreciate it.

536

01:05:01.260 --> 01:05:04.619

So, a quick waiver renewal update.

537

01:05:04.619 --> 01:05:08.304

The division continues formal requests for additional information,

538

01:05:08.304 --> 01:05:18.204

or with the Centers for Medicare and Medicaid services for the comprehensive and the community support renewal as well as the partnership or hope,

539

01:05:18.204 --> 01:05:20.485

and the motion amendments to align with the renewal.

540

01:05:21.210 --> 01:05:31.619

As did grant the state temporary extensions for both the comprehensive and the community support waivers to continue operating through September 2008 2021.

541

01:05:31.619 --> 01:05:40.889

Responses were submitted to, on July, 29, 2021, and CMS received those responses and they are reviewing.

542

01:05:40.889 --> 01:05:46.860

The responses for the consolidated code and 19 appendix K addendum.

543

01:05:46.860 --> 01:05:59.130

To add the new help assessment and coordination service, or submitted to CMS on July 21st. And this week CMS did reach out and requested a few minor revisions to the service definition.

544

01:05:59.130 --> 01:06:06.659

Those revisions were submitted Tuesday, August, 10, and we are very helpful to hear from by the end of this week.

545

01:06:06.659 --> 01:06:16.679

And last Emily will be joining us as the vision of the director, federal programs, and our administrative section on August 23rd.

546

01:06:16.679 --> 01:06:23.340

Emily is a registered nurse, and she comes to us with many years of Medicaid experience and utilization management.

547

01:06:23.340 --> 01:06:28.949

Policy and regulations, we are very excited for Emily to join our teams.

548

01:06:28.949 --> 01:06:33.840

And now I'm going to turn it over to toys for a connection update.

549

01:06:38.039 --> 01:06:41.489

Good afternoon. Everyone.

550

01:06:41.489 --> 01:06:51.960

Okay, so we'll change over and switch gears to connection. So for those familiar and unfamiliar with the project, I'll just start.

551

01:06:51.960 --> 01:07:01.650

I'll start out and just talk about just connection in general is the DV case management system that we are currently in our implementation project.

552

01:07:01.650 --> 01:07:09.989

To bring a connection up, so connection is brought to us by systems. That's our current state vendor.

553

01:07:09.989 --> 01:07:16.980

So that we're working with to bring that up so I just wanted to go through a connection project updates with you all today.

554

01:07:16.980 --> 01:07:31.530

Okay, so our project status at this current time so the development of dt's, new case management system connection, we're continuing to move forward with a go live date at this current time of November. 4th, 2022.

555

01:07:31.530 --> 01:07:38.280

There will be a small 30 day pilot That'll be occurring from October 7th to November 3rd at this time.

556

01:07:38.574 --> 01:07:52.855

The table below, I put kind of just kind of a project timeline table together so you can kind of get a visualization. We really block out the project in phases. So our, our project's start date was back in August of 2020, believe it or not.

557

01:07:52.855 --> 01:08:05.934

We've been doing this for a year. Now, our phase 1 startup complaining ran through basically the 1st, or kind of the 3rd into the 4th quarter of 2020 and then we have been in that phase 2 requirement, gathering design.

558

01:08:05.934 --> 01:08:14.425

And then we'll be shortly we've done a little bit of configuration and Bill, but we'll be moving heavily into configuration and build very soon.

559

01:08:17.994 --> 01:08:29.694

So right now the division is currently in that requirement gathering phase, and we have moved into where we are kind of, at that finalization. So we went through many, many different modules.

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01:08:29.694 --> 01:08:41.545

Sos connection has different modules that you configure to be able to do your assessment, your service planning inter, person organization data, things like that.

561

01:08:42.145 --> 01:08:56.005

So, we're in the in the middle of working with business analyst and their development team on what their requirements are to configure connection. So this is a very, very large configurations project.

562

01:08:56.340 --> 01:08:57.204

It's not a build,

563

01:08:57.204 --> 01:09:00.954

which is a little bit different for the state in some of the systems that you currently use,

564

01:09:00.954 --> 01:09:01.045

like,

565

01:09:01.045 --> 01:09:06.204

Seymour connection is more focused on configuration of a a cop system,

566

01:09:06.204 --> 01:09:13.255

which is that commercial off the shelf type system where they have a base base level product and we're doing configuration into it.

567

01:09:14.994 --> 01:09:27.024

So, we're hoping to kind of complete face to at least the requirement gathering activities piece of that by the end of October. So we are heavy into that and then in late fall.

568

01:09:27.265 --> 01:09:41.215

So, after that kind of October, November timeframe, we'll really move into that design configuration. And build, and then we're going to start a lot of activities the States, and will start testing preliminary testing on some items that we're configuring and building.

569

01:09:41.725 --> 01:09:45.863

We'll start planning training and things like that. So it's exciting.

570

01:09:46.229 --> 01:09:52.470

So, we're looking forward to that so I just wanted to kind of give an overarching view of where we are and what we're doing.

571

01:09:53.005 --> 01:10:07.255

So this is again another project timeline, this kind of shows you, it's a little bit more robust, so 1 thing I wanted to mention to you all so funding of this project was being brought to you by CMS 9,010 funding.

572

01:10:07.255 --> 01:10:12.954

So, we're getting that 9,010 enhanced enhanced funding to be able to do this. So.

573

01:10:14.220 --> 01:10:27.000

We have to do what's called a CMS certification for this system. Every year we go through a project update with CMS in order to be able to release those funding.

574

01:10:27.000 --> 01:10:32.850

The funding for the project to be able to bring the system up. So, as you can see in here, we have.

575

01:10:32.850 --> 01:10:44.694

You can see those phases that I kind of talked about, which is kind of the core part of the implementation that phase 1 phase 2 phase 3 and phase 4. and then you see this. Oh, are and then see our review.

576

01:10:44.994 --> 01:10:59.694

Those are upcoming things that we're preparing for, with CMS to do our operational, our operations readiness review certification. So the system will have to be CMS certified and we'll have to continue that throughout the lifetime of the contract.

577

01:10:59.939 --> 01:11:08.010

So, that's just kind of highlighting some more dates inside of that to give you a little bit more idea of a.

578

01:11:08.010 --> 01:11:09.295

Of what we're doing with that,

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01:11:10.854 --> 01:11:13.404

so the requirement gathering update so,

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01:11:13.404 --> 01:11:14.725

in inside of this project,

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01:11:14.725 --> 01:11:16.914

we have documents and we,

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01:11:17.034 --> 01:11:26.515

we do requirement gathering meetings where we review functional requirement documents and these kind of outline and fulfill the business needs on how the system could be.

583

01:11:26.725 --> 01:11:27.234

Should be.

584

01:11:27.750 --> 01:11:39.210

Uh, configured for the division of developmental disabilities. We've currently approved 25 of those functional requirement documents. Some examples of areas that we've approved.

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01:11:39.210 --> 01:11:53.369

We have approved our person organization, we've approved waitlist management, so there's lots of different topics and modules of that corresponds within the connection system.

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01:11:53.725 --> 01:12:06.204

We are in the process of reviewing and refining 15 more and we are working with to gain a better understanding and give them some more information to prepare an additional 11 more.

587

01:12:07.914 --> 01:12:17.395

And we do this in a schedule on Mondays and Wednesdays where we meet with FBI. And the block schedule form to go over these requirements and move through these documents.

588

01:12:18.060 --> 01:12:26.939

Focus area right now is on service planning the, we are doing a lot around quality assurance and then billing in claims.

589

01:12:26.939 --> 01:12:38.430

We did a lot here, but we have a lot more to move through and we're focusing more at the end of this month on some billing and claims pieces and features. So we're looking forward to really refining that area in that section.

590

01:12:38.430 --> 01:12:44.789

As I mentioned, we moved to block Chad sessions, so those are those requirement sessions.

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01:12:44.789 --> 01:12:53.430

Um, in Oracle, in order to keep up the kind of the piece we need for our timeline to close out requirement gathering by the end of October. So.

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01:12:53.430 --> 01:12:58.979

Uh, lots of time being spent by the division and the department to do that.

593

01:13:00.510 --> 01:13:15.060

So the scope updates, so I wanted to just allude to you. Our original contract was developed through an RFP process that was formalized and approved over 2 years ago. That seems crazy that it's that long ago, but over 2 years ago. And so.

594

01:13:15.060 --> 01:13:25.949

Lots of things change business processes, change requirements from CMS, all kinds of different things change. We're in a whole new world post cobit and going through. So.

595

01:13:25.949 --> 01:13:30.149

We've had to and we've recognized and realized through.

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01:13:30.149 --> 01:13:38.369

The requirements gathering processes is that we needed to do some change requests and maybe some contract amendments to do some additional work. So.

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01:13:38.369 --> 01:13:52.135

We have been busy this summer reviewing and completing and doing negotiation with on requirements and pricing for. We initially put together a 32 change request and the division decided to move forward with 25 of 32.

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01:13:53.850 --> 01:14:05.760

So, currently, right now we are converting those change requests into formalized contract amendments for, for away, purchasing and CMS to be able to review and approve.

599

01:14:06.744 --> 01:14:21.625

These would impact our project scope and timeline. So that's 1 caveat that I will say is, anytime I present to you on project timeline or schedule, this is always subject to change just a little bit and we do anticipate and are actively going through a project schedule.

600

01:14:21.654 --> 01:14:27.774

Update based upon adding a pretty extensive amount of work to that scope.
So.

601

01:14:28.944 --> 01:14:41.095

We're looking forward to it. All of it is really great system enhancements. So some of the stuff that I can speak to is just getting some more automation and system enhancements that That'll be very user friendly to our end users, using the system.

602

01:14:41.635 --> 01:14:50.454

And then we're also looking at a data adding additional programs outside of just the waiver programs to make it more of a holistic system. So.

603

01:14:50.880 --> 01:14:56.460

Exciting stuff coming once we get that more formalized approval from our.

604

01:14:56.460 --> 01:15:10.199

Away purchasing division and then we'll be happy to share with you all what updates we have to our project scope and what you can look forward to being in the connection system.

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01:15:11.310 --> 01:15:22.439

So the division also has a dedicated web page. I linked it out there that provides updates. I will just be all on transparency. We're working on a pretty large update to that web page.

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01:15:22.439 --> 01:15:34.020

Um, so stay tuned and I appreciate everyone's time today. And if you have any questions or concerns, you can chat those in or email those email those to me.

607

01:15:38.520 --> 01:15:46.170

Thanks everybody good afternoon. Everyone can hear me. Okay.

608

01:15:46.170 --> 01:15:51.300

Thank you for having me we're going to kind of go over the budget.

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01:15:51.300 --> 01:15:57.210

A lot has happened during the session and the last few months.

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01:15:57.210 --> 01:16:07.859

What we're going to talk about here for the next few slides will be the combination of our fiscal year, 22 budget as well as the American rescue act. Both of these items were happening at the same time.

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01:16:07.859 --> 01:16:18.869

So, on March, 11, President Biden signed into law, the American rescue plan act and that's a 1021. and within that act.

612

01:16:18.869 --> 01:16:26.489

There is a 10% enhanced federal match for Medicaid, CBS and really what that means is that during.

613

01:16:26.489 --> 01:16:31.529

April 1st, 2021 through March 31st of 2022.

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01:16:31.529 --> 01:16:37.409

We will earn an additional 10% map on those expenditures that happen within that timeframe.

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01:16:37.409 --> 01:16:45.329

All of that enhanced that's is your federal federal match the federal money that we're drawing down?

616

01:16:45.329 --> 01:16:49.020

Self of the services that were that we're providing.

617

01:16:49.020 --> 01:16:53.430

All of that enhanced map must be spent on enhancing.

618

01:16:53.430 --> 01:16:57.390

Expanding and strengthening our CBS programs.

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01:16:59.069 --> 01:17:03.090

So, again, that happened in March in, may.

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01:17:03.090 --> 01:17:10.350

There was a conference committee with our budget, and at the conference committee of general assembly voted to utilize.

621

01:17:10.350 --> 01:17:14.010

That American rescue act plan a CBS enhance.

622

01:17:14.010 --> 01:17:20.100

Funding for some of the Department of health and senior services and Department of mental health.

623

01:17:20.100 --> 01:17:28.470

Community based rate increases, so specifically for us, this impacted our DD residential rate standardization.

624

01:17:28.470 --> 01:17:34.920

Where we had put in 100%, we needed to be compliant with the.

625

01:17:34.920 --> 01:17:38.100

Cms corrective action plan to have everyone.

626

01:17:38.100 --> 01:17:43.380

On the residential services at 100% of our lower bound of our Mercer rate study.

627

01:17:43.380 --> 01:17:48.630

And in addition to that impacted our personal assistant rate increases.

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01:17:48.630 --> 01:17:54.720

Including self directed to correspond with department of health and senior services personal care rate increases.

629

01:17:54.720 --> 01:17:58.619

Adding the 5.29% above.

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01:17:58.619 --> 01:18:03.300

That Department of health in senior service rate increases.

631

01:18:03.300 --> 01:18:07.170

So, an additional 5.29% above.

632

01:18:07.170 --> 01:18:11.340

What they moved us to to match the Department of health and senior service personal care.

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01:18:11.340 --> 01:18:14.430

Those are the 2 components therapy and impacted by.

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01:18:14.430 --> 01:18:26.250

Enhanced map, then on May 13th remember the conference committee was May 11. so, 2 days after that CMS released.

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01:18:26.250 --> 01:18:32.399

The CBS enhanced map guidance, and within that guidance, it talked about several things.

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01:18:32.399 --> 01:18:40.920

1 of them being that the defined services for that map is specifically for DD are targeted case management state plan service.

637

01:18:40.920 --> 01:18:44.069

As well, as our 915 C waiver services.

638

01:18:44.069 --> 01:18:51.930

So, based off of those expenditures that we spend, we will be able to draw out an additional 10% federal funds on top of that.

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01:18:51.930 --> 01:18:55.859

In order to use that that funding.

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01:18:55.859 --> 01:18:59.850

They have to submit a spin plan to see a quarterly.

641

01:18:59.850 --> 01:19:03.390

We have to submit a send plan to them.

642

01:19:03.390 --> 01:19:06.600

Originally for approval, and then we do the quarterly updates.

643

01:19:06.600 --> 01:19:13.500

From this enhanced Matt, maybe spent until March of 2024.

644

01:19:13.500 --> 01:19:18.060

Unless you exhaust all it all says prior to that. So it's whichever 1 comes. 1st.

645

01:19:19.710 --> 01:19:26.430

They also required state assurances in order for us to be eligible to earn those enhanced dollars.

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01:19:26.430 --> 01:19:29.550

And those assurances are laid out here.

647

01:19:29.550 --> 01:19:34.260

So we have to ensure or to assure to CMS that we are using those state funds.

648

01:19:34.260 --> 01:19:39.539

That they're giving us to enhance, expand and strengthen CBS.

649

01:19:39.539 --> 01:19:46.109

We have to assure to that we are not imposing stricter eligibility standards, methodologies, or procedures.

650

01:19:46.109 --> 01:19:53.039

For CBS programs and services, then what we're in place on April 1st of 2021.

651

01:19:54.899 --> 01:20:01.350

And then we have to share it to them that we are preserving the cover a CBS, including all the services themselves. The amount.

652

01:20:01.350 --> 01:20:06.779

The duration, and the scope of the services that were also in effect April 1st, 2021.

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01:20:06.779 --> 01:20:12.090

And then we have to maintain the provider payments at a rate. No. Less than what was in place.

654

01:20:12.090 --> 01:20:18.989

As of April 1st, 2021 now, there is a question that we have out to CMS when it comes.

655

01:20:18.989 --> 01:20:23.609

To our CMS corrective action plan for right? Standardization.

656

01:20:23.609 --> 01:20:29.640

Whether or not that corrective action plan was approved prior to April. 1st, 2021.

657

01:20:29.640 --> 01:20:37.079

So, there we are question to them is which 1 do we look at for effectiveness if it's the.

658

01:20:37.079 --> 01:20:40.949

The corrective action plan.

659

01:20:40.949 --> 01:20:44.520

Or if it's the actual rates that were in place April 1st, 2021.

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01:20:44.520 --> 01:20:49.289

If you want to see the guidance, we hear, have the link so you'll be able to see that.

661

01:20:49.289 --> 01:20:56.520

When you get this, and then on June 30th, Governor person, he signed a fiscal year 2022 budget.

662

01:20:56.520 --> 01:21:00.930

He did veto the language that any.

663

01:21:00.930 --> 01:21:05.640

Providers having residential rates above the lower bound.

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01:21:05.640 --> 01:21:10.649

To move to the lower bound. So basically, when he vetoed was.

665

01:21:10.649 --> 01:21:14.609

Was no rate decrease for any provider that had a rate.

666

01:21:14.609 --> 01:21:21.090

Over the residential rate, lower bound. So everyone that was below the lower bound will be brought up.

667

01:21:21.090 --> 01:21:24.569

Anyone above, it will remain the same for this fiscal year.

668

01:21:27.539 --> 01:21:31.229

So, on July, 1st, our fiscal year 2022 begins.

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01:21:31.229 --> 01:21:34.260

What was implemented immediately?

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01:21:34.260 --> 01:21:41.220

With general revenue fund went into effect July 1st and that is rate increases to our personal assistant services.

671

01:21:41.220 --> 01:21:46.079

To align with those DHS Department of health and senior services state plan market rates.

672

01:21:46.079 --> 01:21:56.340

Any rate excuse me? Any race above that state plan right? Will not decrease. They will remain the same. So if you were below, they will come up. If you were above, they will remain the same.

673

01:21:56.340 --> 01:22:01.380

We already put these into and to play so you should be receiving.

674

01:22:01.380 --> 01:22:07.229

Those new rates already, so we finished those up at the end of July.

675

01:22:07.229 --> 01:22:10.739

And that was 4.1Million dollars total.

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01:22:10.739 --> 01:22:18.359

As a result of that change, and then we also did a 5% rate increase for services, which includes they have.

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01:22:18.359 --> 01:22:22.350

Individual skill development, community, integration and employment services.

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01:22:22.350 --> 01:22:28.619

Those have already been implemented in the system and that was a total of 6.1Million dollars in total funds.

679

01:22:28.619 --> 01:22:43.260

As a result of that rate increase, and then the last 1 that we were, we put into place as of right now was the rate increase to reimburse to the reimbursement rates for the applied behavioral analysis services that are provided by.

680

01:22:43.260 --> 01:22:49.619

Register behavior, technicians and licensed assistant behavior analyst. So it was not all of the services.

681

01:22:49.619 --> 01:22:55.829

But just these components and that total funding increase was 211,000 dollars.

682

01:22:58.050 --> 01:23:01.289

So, of course, and that still leaves the 2 that we talked about earlier.

683

01:23:01.289 --> 01:23:09.210

These rates will be implemented upon CMS approval of our enhanced f maps spend plan that we submitted.

684

01:23:09.210 --> 01:23:15.810

We submitted that to CMS on July 12th. They have 30 days to improve that. So we're hoping to hear something today.

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01:23:15.810 --> 01:23:24.539

But that again is for the residential race standardization to bring everyone below 100% of the lower bound up to that lower bound.

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01:23:24.539 --> 01:23:29.250

And that gets us in line with our team at corrective action plan.

687

01:23:29.250 --> 01:23:32.250

And then the personal assistant rate increased.

688

01:23:32.250 --> 01:23:38.250

5.29% above that department of health Institute senior service right? Increase.

689

01:23:38.250 --> 01:23:41.460

It is the 2nd component that we will put into play.

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01:23:41.460 --> 01:23:45.329

Once approved the CBS been plan.

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01:23:46.649 --> 01:23:52.829

So, again, like, I mentioned, we submit Missouri submitted the spend plan to CMS on July, 12.

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01:23:52.829 --> 01:23:57.659

The spend plan covers efforts between Department of mental health.

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01:23:57.659 --> 01:24:00.930

Oh, and the DVH division.

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01:24:00.930 --> 01:24:04.140

As well, as department of health and senior services and.

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01:24:04.140 --> 01:24:12.630

Department of social services. See, my says 30 days of to approve this, we did request an expedited partial approval.

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01:24:12.630 --> 01:24:20.760

To try to implement those rate increases sooner as you can see since today's August 12th, it's been 30 days. We did not receive that expedited approval.

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01:24:20.760 --> 01:24:26.699

Again, we're still hoping to hear from them today they approval or further questions, and we will keep everyone post it.

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01:24:26.699 --> 01:24:32.100

We do have this been planned posted for public comment on website.

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01:24:32.100 --> 01:24:35.460

That is open for public comment.

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01:24:35.460 --> 01:24:41.520

I believe until next week, but we still encourage everyone to continue to.

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01:24:41.520 --> 01:24:50.220

To provide feedback to us on that. So please make sure you check out the, the spend plans and the public notice with these links.

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01:24:50.220 --> 01:24:56.399

Links here and with that, if you have any questions.

703

01:24:56.399 --> 01:25:02.520

You can feel free to nose in and we'll get back with us, but with that, I will turn it over to Wanda. Thank you very much for having me.

704

01:25:02.520 --> 01:25:15.239

Wow, well we made record time today. I think we were all really nervous about trying to get through our slides and the time we had allotted. So.

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01:25:15.239 --> 01:25:23.340

I want a real quick put like a 7th thing out there for our panelists.
Does anyone have any things that they want to.

706

01:25:23.340 --> 01:25:29.250

Stay based on the questions, or that they just had a thought. I wish I would've said.

707

01:25:29.250 --> 01:25:32.939

now's your chance before we close out the, the call.

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01:25:40.350 --> 01:25:45.630

All right, well, I'd like to thank all of our panelists for all of the information presented today.

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01:25:45.630 --> 01:25:53.340

Participants Thank you so much for coming. We know that you've carved out a central time of your day and.

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01:25:53.340 --> 01:26:07.859

Hopefully you found this information very helpful and we hope to can we plan to continue doing this? We're going to do it by annually. Our next meeting we'll be in February or March, we will post this.

711

01:26:07.859 --> 01:26:14.159

The today's transcript recording and Q and a, as soon as we have it available.

712

01:26:14.159 --> 01:26:18.329

And we are getting giving you back.

713

01:26:18.329 --> 01:26:23.939

32 minutes of your day, thank you again so much for coming and we look forward to seeing you next time.