



# Developmental Disabilities Administration (DDA) Updates

**Bernard Simons, DDA Deputy Secretary**

July 10, 2020



# Deputy Secretary's Agenda

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- Opening Remarks
- Deputy Secretary Update
- COVID-19 Regional Update
- Retainer Payment Update
- Upcoming Technical Assistance Opportunity
- A family's perspective by Michele Stevenson
- Questions

# Deputy Secretary's Opening Remarks

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- The DDA's highest priority is the health, safety, and wellbeing of people with intellectual and developmental disabilities, their families, staff, and providers
- Thank you for your continued support in joining me during these webcast so that we can stay in-touch and be able to provide you with the most current information

# Deputy Secretary's Update

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- Provider's 1<sup>st</sup> Quarter payment did not include the 4% provider rate increase
- The DDA will process an interim payment for the 4% rate increase prior to the 2<sup>nd</sup> Quarter payment
- DDA is updating the rates in our system including:
  - Traditional services in PCIS2
  - Services that are billed via invoices
  - Cost Detail Sheet

# Deputy Secretary's Update

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- On July 6th, the DDA communicated to the FMS agencies to continue to pay for services for participants using the self-directed service(SDS) model, whose Person-Centered Plans and/or annual budgets are missing or expired, for the next 30 days
- However, the DDA also communicated that these SDS participants must submit new Person-Centered Plans and annual budgets by **August 14, 2020**. Failure to do so may result in their discontinuing in the Self-Directed Services delivery model and being moved to the Traditional Services delivery model

Reference: [Payment on Expired or Missing Self-Directed Budgets](#)

# Deputy Secretary's Update

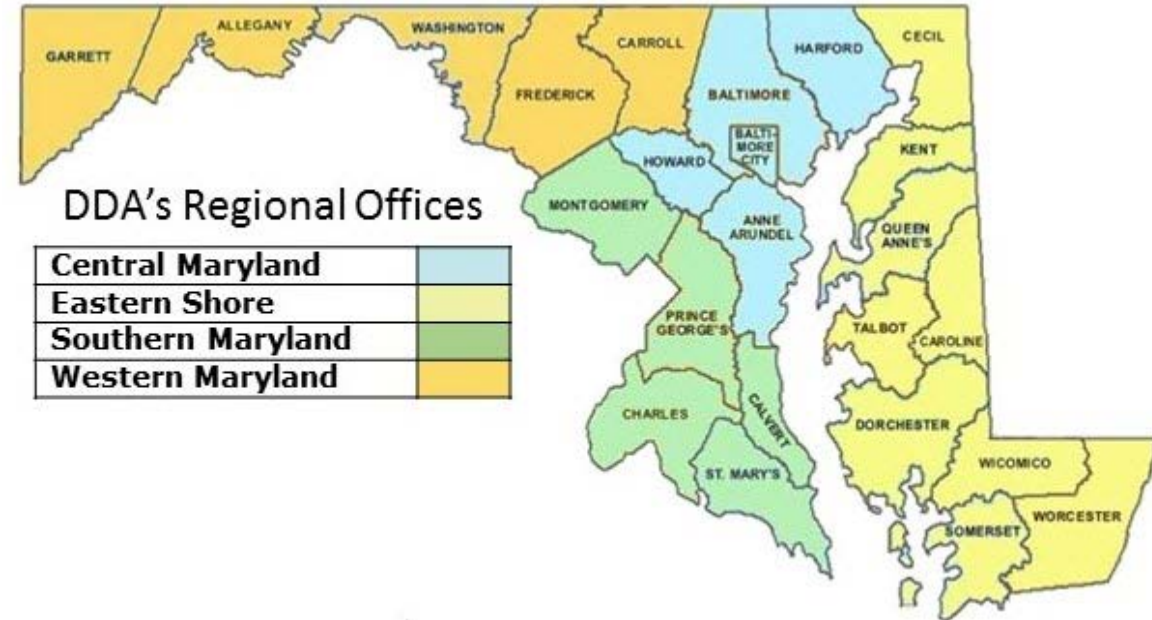
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- The DDA received the fourth round of PPE that our regional office are currently distributing to our providers, people in self-directive services and Microboards
- The DDA requirement of having DSP staff trained in The Mandt System<sup>®</sup> by the end of July 2020 has now been extended to July of 2021

# COVID-19 Regional Updates

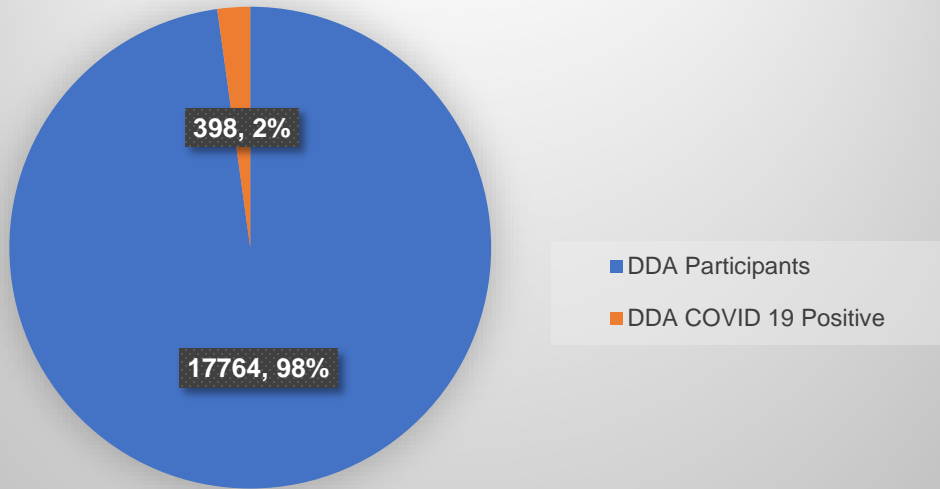
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- **ESRO**- Kim Gscheidle  
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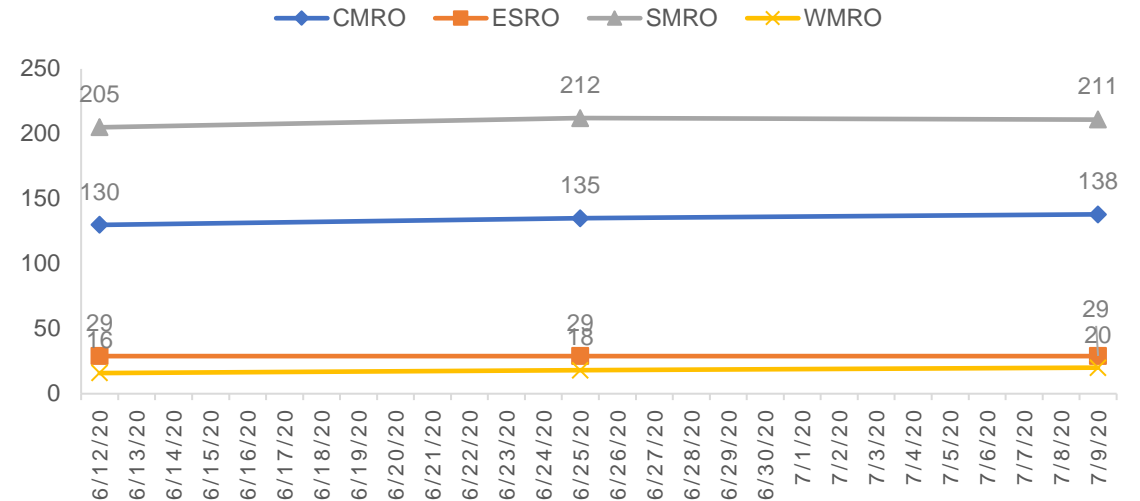
# DDA Tracking

**DDA Participants in Services**  
Week ending 07/09/2020



There are 17,764 people supported in services by the DDA of which 2% (398) have tested positive for COVID-19.

**POSITIVE PARTICIPANTS BY REGION**  
WEEK ENDING 07/09/2020

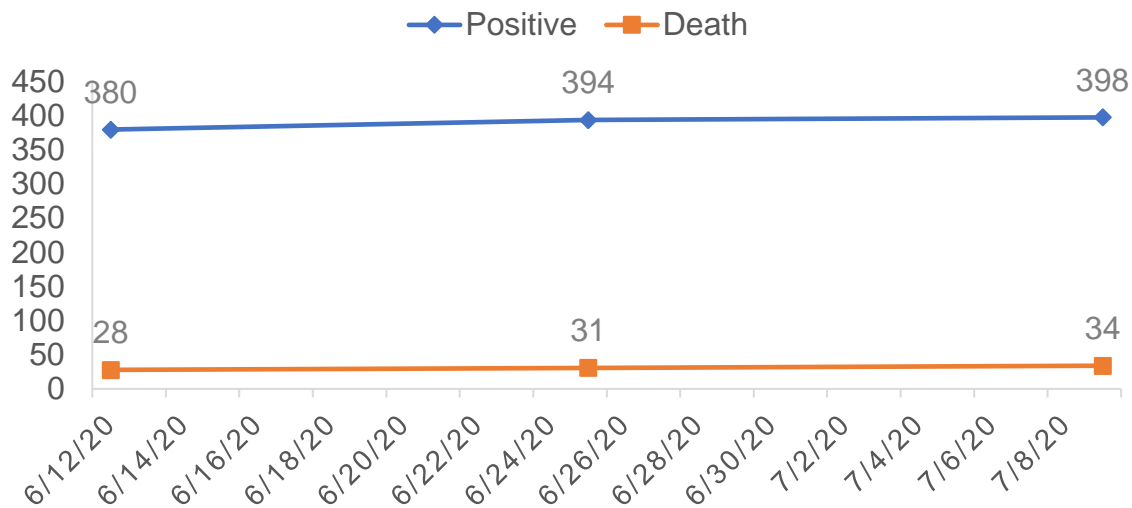


CMRO	138	Positive;	Increase of	3
ESRO	29	Positive;	Increase of	0
SMRO	211	Positive;	Decrease of	1
WMRO	20	Positive;	Increase of	2



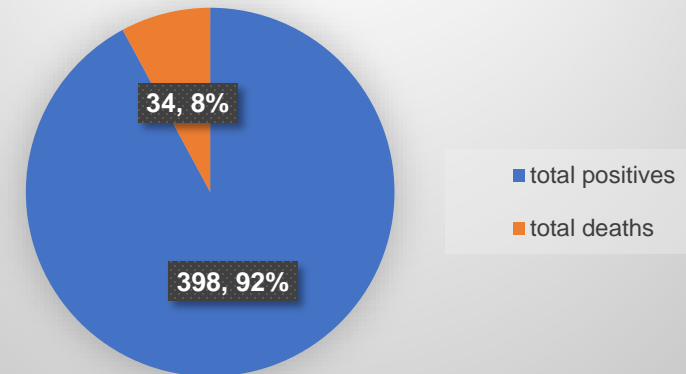
# DDA Tracking

POSITIVE PARTICIPANTS STATEWIDE  
WEEK ENDING 07/09/2020



There have been 398 participants reported as having tested positive for COVID-19 of which there have been 34 deaths.

DDA COVID-19  
Positives and Deaths  
Week ending 07/09/2020



The 34 deaths represents approximately 8% of all (398) participants that tested positive.

# Retainer Payments

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- DDA's Appendix K includes retainer payments for providers who normally provide services that include habilitation and personal care, but are currently unable to due to the state of emergency
- The time limit for the retainer payment may not exceed the lesser of 30 consecutive days or the number of days for which the State authorizes a payment for a "bed-hold" in nursing facilities (Reference: [State Medicaid Director Letter - Olmstead Update No: 3](#))
- Currently, Maryland Medicaid State Plan nursing facility "bed-hold" days are limited to 18 days

# Retainer Payments

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- On June 30, 2020, the Center for Medicare and Medicaid Services (CMS) issued new [Frequently Asked Questions](#) that included Retainer Payments
- They noted that their [State Medicaid Director Letter - Olmstead Update No: 3](#) guidance did not place any restrictions on the number of time-limited periods (episodes) of retainer payments that could be authorized for a beneficiary
- While retainer payments up to 30 days may be implemented, states may authorize up to three 30-day episodes of retainer payments for an individual during the period of the disaster using the Appendix K

# Retainer Payments

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- States are required to describe the methodology for determining the length of time retainer payments will be made available, and any limits on the number of episodes a state will fund (including specifying whether there will be a break in billing between episodes)
- CMS clarified that consecutive days are those days that are eligible for billing
  - For example: As typical day habilitation services are rendered Monday through Friday, 30 consecutive billing days would encompass a 6-week period of time

# Retainer Payments

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CMS required “guardrails” include:

- Limit retainer payments to a reasonable amount and ensure their recoupment if other resources, once available, are used for the same purpose
- Retainer payment cannot exceed the payment for the relevant service; the state may specify that a retainer payment will be made at a percentage of the current rate, or a state may specify retainer payments will not be made to a setting until attendance is below an identified percentage of the enrollment (e.g., 75 percent)

# Retainer Payments

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CMS required “guardrails” include (continued):

- Collect an attestation from the provider acknowledging that retainer payments will be subject to recoupment if inappropriate billing or duplicate payments for services occurred (or in periods of disaster, duplicate uses of available funding streams), as identified in a state or federal audit or any other authorized third-party review. Note that “duplicate uses of available funding streams” means using more than one funding stream for the same purpose

# Retainer Payments

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CMS required “guardrails” include (continued):

- Require an attestation from the provider that it will not lay off staff, and will maintain wages at existing levels
- Require an attestation from the provider that they had not received funding from any other sources, including but not limited to unemployment benefits and Small Business Administration loans, that would exceed their revenue for the last full quarter prior to the Public Health Emergency (PHE), or that the retainer payments at the level provided by the state would not result in their revenue exceeding that of the quarter prior to the PHE

# Retainer Payments

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CMS required “guardrails” include (continued):

- If a provider had not already received revenues in excess of the pre-PHE level but receipt of the retainer payment in addition to those prior sources of funding results in the provider exceeding the pre-PHE level, any retainer payment amounts in excess would be recouped
- If a provider had already received revenues in excess of the pre-PHE level, retainer payments are not available



# Retainer Payments

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- States utilizing retainer payments for one period that is the lesser of 30 consecutive days or the number of nursing facility bed-hold days will have the *option* of requiring providers to comply with these guardrails
- CMS offered states the opportunity to further discuss options
- Tricia Roddy, MDH Director, Innovation, Research and Development Health Care Financing call with CMS
  - Requested guidance as to whether the State can implement multiple retainer payment periods given Maryland's State Plan limit of 18 days per calendar year

# Retainer Payments

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- Based on the response:
  - Funding would need to be authorized by the State
  - Guardrails would need to be established
- We are further discussing with the MDH Medicaid offices and DBM and will provide further information as it becomes available

# Upcoming Technical Assistance Opportunity

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- The DDA has partnered with the [Institute for Community Inclusion](#) to provide technical assistance to eight (8) DDA Meaningful Day Providers
- The focus of technical assistance will be transformation to support meaningful days in the community with a central focus on high quality employment outcomes



# Upcoming Technical Assistance Opportunity

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- The technical assistance will span about 18 months and include:
  - A comprehensive strategic assessment,
  - Development of a transformation work plan,
  - Implementation support' and
  - Training for mid-level provider staff in order to support program development and implementation
- There will be an application process with a target for project kick-off in October

*Michele Stevenson*

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# **A Family's Perspective of her son supports**

# **TEAM B'S SELF-DIRECTED SERVICE PROGRAM DURING COVID -19**

**Team B's Self-Directed Services began July 1, 2017 to the current date**

**Our Journey includes a group of talented individuals that assists Team B to have a comprehensive Person**

**Center Plan and Budget:**

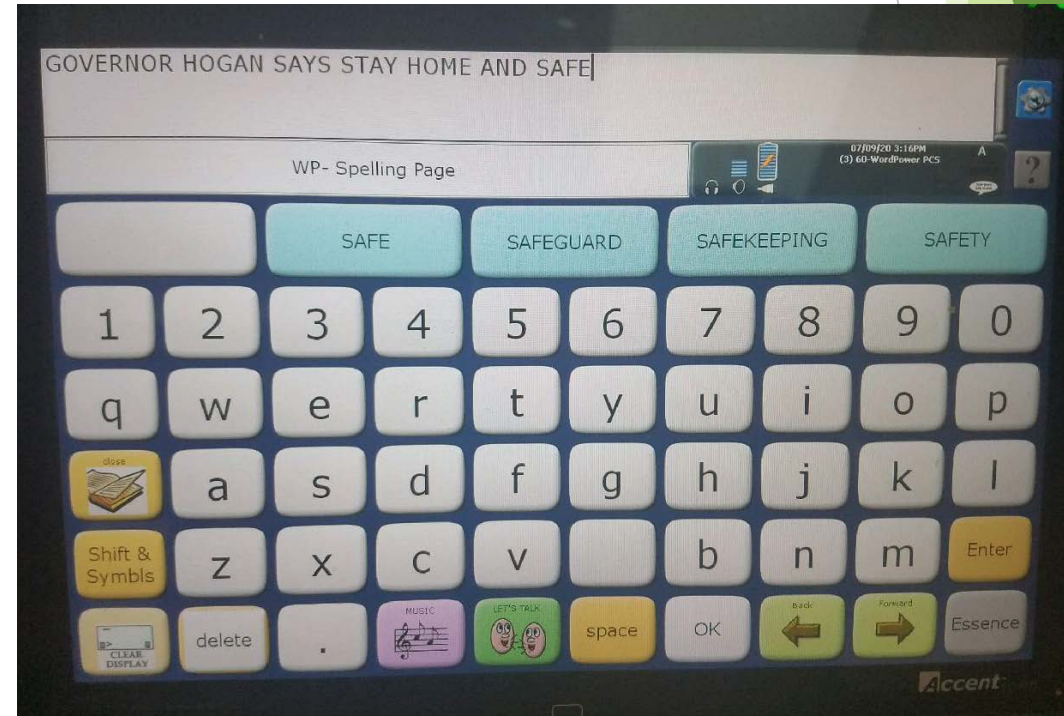
- **Employer**
- **Mother Parent and Advocate for Team B**
- **MDH (Maryland Department of Health)**
- **DDA CMRO (Developmental Disabilities Administration Central Maryland Region)**
- **CCS (Service Coordinators)**
- **Support Broker**
- **FMS (Financial Management Services)**
- **Direct Support Workers**

# TEAM B'S SELF DIRECTED SERVICE PROGRAM DURING COVID -19

Team B consists of eight Proactive, Talented and Trained Direct Support Workers. During Covid -19 Team B had to downsize his staff by half for safety protocols. Although routine changes occurred, and modifications were made to his staff they were able to continue to teach and implement goals and objectives for his Community Development Services and Personal Supports.

Team B accomplished this by using visual supports: ( please see the visual supports on the next slide)

- **TEAM B'S COVID CHECKLIST**
- **UNAVAILABLE ACTIVITIES**
- **AVAILABLE ACTIVITIES**
- **TIME CHART**
- **DAILY SCHEDULE**
- **CDS AT THE FAMILY BUSINESS**
- **CALMING TECHNIQUES**
- **ASSISTIVE TECHNOLOGY**



# TEAM B'S SELF DIRECTED SERVICE PROGRAM DURING COVID -19

## B'S COVID CHECKLIST

1. STAY AT HOME
2. BE SAFE
3. CHECK TEMPERTURE
4. WASH HANDS
5. DISINFECT OUR HOME
6. COVER MOUTH TO COUGH
7. FOLLOW THE SCHEDULE
8. FOLLOW COOL DUDE RULES
9. BE KIND AND HAPPY
10. PRACTICE WEARING A MASK

## UNAVAILABLE

1. BEHAVIORAL CONSULATION AND IPLEMENTATION SERVICES
2. BOWLING TEAM
3. MUSIC THERAPY
4. OCEAN CITY
5. STORES
6. SWIMMING AT YMCA
7. VISITING FAMILY AND FRIENDS
8. VOULUNTEERING AT SCHOOL
9. VOLUNTEERING AT CHURCH
10. WALKING WELLNESS ON TRAILS

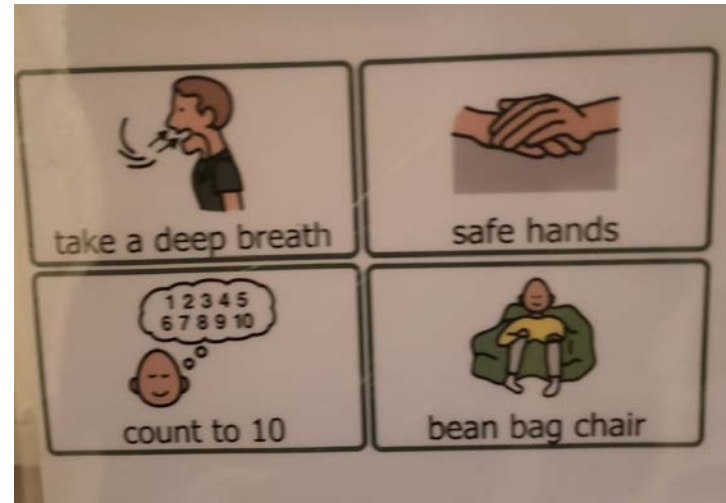
## AVAILABLE

1. ART AND CRAFTS
2. BREAK TIME WITH TOYS
3. CD MUSIC
4. GAME
5. COMMUNITY BEACH
6. COMPUTER TIME
7. IPAD
8. JOB AT FAMILY BUSINESS
9. LEARN TO PLAY SONGS ON PIANO AND INSTRUMENTS
10. MOVIE TIME
11. POOL TIME IN THE YARD
12. PLANT AND WATER HERBS AND WILD FLOWER GARDEN
13. TEACHER AND JOB TIME
14. RIDES IN VAN TO WAVE TO FAMILY, FRIENDS AND STAFF
15. SPORTS IN THE YARD
16. TYPING KINDNESS LETTERS
17. WALKING WELLNESS IN COMMUNITY



# TEAM B'S SELF DIRECTED SERVICE PROGRAM DURING COVID -19

TIME CHART	
6:30 AM	X
7:30 AM	X
8:00 AM	X
8:30 AM	X
9:00 AM	X
9:30 AM	
10:00 AM	
10:30 AM	
11:00 AM	
11:30 AM	
12:00 PM	
12:30 PM	
1:00 PM	



B'S SCHEDULE	
NOW	TYPE KINDNESS LETTER
NEXT	TEACHER TIME
LATER	CHOOSE BREAK



OUTSIDE ACTIVITIES



PLANT AND WATER HERB AND WILDFLOWER GARDEN



HOW WE END OUR DAY WITH MY FAVORITE BREAK



TEACHING CDS SKILLS AT OFFICE



TURN TAKING AT GAME TABLE

DEAR MRS. CHRIS  
I MISS SEEING YOU AT SCHOOL WHEN I VOLUNTEER.  
I LIKE WHEN I GET TO DO MY JOB AND HELP THE CUSTODIANS.  
I HOPE TO SEE YOU SOON.  
I AM PLANTING A GARDEN.  
I AM FEEDING THE DUCKS.  
I AM GOING FOR WALKS.  
STAY SAFE AND WASH YOUR HANDS

KINDNESS,

B

TYPED KINDNESS LETTER ON ADAPTIVE KEYBOARD

# The DDA Commitment

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- We will continue to share information and resources
- We will continue to collaborate and advocate on behalf of the people you support, their families, and staff
- We will help Marylanders with intellectual and developmental disabilities thrive
- We will continue to keep you updated

# Questions

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