Provider Issues Resolution Workgroup

2018

Recommendations to support a healthy developmental disabilities provider network in Virginia

Background

In May of 2018, the Department of Behavioral Health and Developmental Services (DBHDS) convened the Provider Issues Resolution Workgroup (PIRW) to identify and address issues that impact the development, expansion and maintenance of a healthy provider network that is accessible to all Virginians with developmental disabilities (DD). The group met monthly through August 2018 and organized three subgroups composed of PIRW members and subject matter experts to examine three areas of concern for DD providers in Virginia, which included issues with rates, regulations, and service delivery.

Three overarching problem statements were developed for subgroup consideration. An options tool was provided to each group to offer a consistent way to consider and develop recommendations for each identified problem. The three problem statements included:

Rates

Determine if specific service rates are inadequate (and which are reducing the availability of the service to individuals on the waiver), and if so determine the preferred method to address those specific rates.

Regulations

Ensure the regulations and definitions meet the philosophical goal of improving flexibility and service delivery for full integration and that changes provide sufficient time for provider input and implementation.

Service Delivery

Identify strategies which will enable providers to ensure or create viable, sustainable business models with stable workforces without creating unnecessary burden generated by excessive staff and individual transitions.

Along with the problem statement each subgroup received recommendations for discussion, relevant resources, and a listing of related efforts. Subgroups met in June and July and were invited to the final PIRW meeting on August 17th, 2018. Each subgroup was facilitated by a DBHDS Community Resource Consultant in agreement with the PIRW Charter. The subgroups considered the information provided by the PIRW and developed factors used in recommendation development that guided their work.

Rates

The Rates Subgroup considered the impact of Virginia's rate structure on the availability and sustainability of DD services. Members included professionals with experience with financial processing, Medicaid billing, and with the 2016 waiver redesign process from both the Department as well as the provider community. Group discussion centered on rate restructuring through refresh and rebase methods. A rate refresh process considers a variety of currently available independent sources such as information from the Bureau of Labor Statistics. This process would adjust existing rates to more recent data related to factors like mileage rates, wage statistics, and health insurance costs. A rebase process

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by contrast would entail a more involved study of rates in Virginia to arrive at new rates across those services considered in the study. A rebase process is considered more costly, more time intensive, and occurs less frequently than a refresh process. It was the recommendation from DMAS and our financial consultant that rebase typically occurs five years after rate implementation whereas refresh can occur annually based on identified areas of concern.

Regulations

The Regulations Subgroup discussed issues surrounding the development and interpretation of regulations on the DD provider community. Members included quality assurance staff, policy writers, providers with service authorization experience, or familiarity with impacting regulations and accreditation processes. Group discussion centered on consistency in interpretation across agencies and reviewers, reducing redundancy in documentation requirements, provider access to current and past information, as well as sufficient time for providers to accommodate changes affecting them. Regulations and processes at the heart of this discussion included program quality reviews through DBHDS subcontractor, human rights, licensing, and Medicaid regulations and included interpretations by contractor, advocates, specialists, quality management, and provider integrity.

Service Delivery

The Service Delivery Subgroup discussed issues related to the recruitment and retention of Direct Support Professionals (DSPs). Members included human resources staff, house managers, and DSP supervisors. Group discussion centered on professionalizing the role of the DSP, workforce development, and taking actions that simplified the documentation requirements so that DSPs could find more success and satisfaction in their jobs.

Final Recommendations

Following subgroup presentations on their work, the PIRW arrived at the following recommendations, which should be considered across agencies and decision-making bodies as the future of the developmental disability service system evolves. These recommendations are expected to lead to a stronger, more stable and effective DD provider network in Virginia.

Rate Recommendations

Recommendation 1

Virginia should proceed with an immediate rate refresh process that uses Bureau of Labor Statistics 75th percentile data. Except in years that a rebase occurs, DD waiver rates should be refreshed annually going forward to increase providers' ability to recruit and retain qualified staff.

Recommendation 2

Rate increases occurring in services that benefit Direct Support Professionals should be passed on in equal weight through the home payments made to Sponsored Residential providers.

Recommendation 3

The Department of Behavioral Health and Developmental Services (DBHDS) should work with the Department of Medical Assistance (DMAS) services to develop a plan to increase rates in long-term care nursing services across Virginia's waivers.

Recommendation 4

Virginia should ensure that DD waiver rates are rebased on a six year cycle beginning in 2020.

Regulation Recommendations

Recommendation 1

DBHDS should create the option for a single agency to have one Plan for Supports per individual regardless of the number of services provided to a person in order to streamline documentation.

Recommendation 2

DBHDS and DMAS should create a formalized process to review system changes and gather provider input before a public comment period begins.

Recommendation 3

Virginia should develop and implement a central provider audit tool to decrease multiple requests for the same information across reviewers. This tool should bring together the various monitoring entities and result in collaboration, as well as provide for the opportunity for deemed provider status to reduce the frequency of reviews.

Recommendation 4

DBHDS and DMAS should develop a publicly available regulations crosswalk to prevent conflict and resolve discrepancies across the various regulations affecting providers.

Recommendation 5

DBHDS should create a central online archive for current and historic information related to the provision of DD services in Virginia.

Recommendation 1

Virginia should professionalize the role of the DSP by identifying training requirements that can be made portable across providers to reduce the time and costs associated with bring qualified DSPs into a new employment setting.

Recommendation 2

Virginia should convene a workgroup that explores ways to develop a pipeline for new DSPs that promotes the position as a valid and desirable career choice. Future work should then focus on implementing a tiered credentialing process for DSPs where specialization and advanced training can be pursued.

Recommendation 3

DBHDS should devise a method of simplified documentation for DSPs that meets expectations for service provision while reducing the time and effort needed to document services and supports.

Funding Priorities

The following list provides funding priorities for consideration as identified by the group.

Funding for an annual refresh process beginning in 2019.

Funding for a rate rebase process on a six-year cycle beginning in 2020.

Funding for nursing services across Virginia's waivers.

Funding to assist in the development of a centralized audit tool.

Funding that off sets the costs of agency accreditation in order to attain deemed status.

2018 Provider Issues Resolution Workgroup Members

Shane Ashby, Mount Rogers CSB/Association of CSBs Ann Bevan, DMAS Dennis Brown, Consultant Service Source Samantha Clark, Team Nurse Connie Cochran, DBHDS Ken Crum, Service Source Jennifer Faison, VACSB Jennifer Fidura, VNPP Christy Glynn, Team Nurse Adair Jenson-Smith, The Choice Group Crystal Lipford, Good Neighbor Homes Matthew Marek, Good Neighbor Homes Robin Metcalf, The Choice Group Tonya Milling, Arc of VA Deanna Rennon, Wall Residences Karen Tefelski, vaACCSES John Weatherspoon, VaSRPG Eric Williams, DBHDS

Provider Issues Resolution Subgroup: RATES

Dennis Brown, Consultant Corina Hearn, Good Neighbors Terry Hurley, Community Residences Cherice Jackson, DBHDS Meneika Keith, Family Sharing Jennifer Fidura, VNPP Evan Jones, Fairfax CSB Robin Metcalf, The Choice Group Tonya Milling, The Arc of VA Matthew Osborne, Faison Center Lisa Poe, Richmond Residential Beverly Rollins, DBHDS Anthony Sandifer, EFSVA Karen Tefelski, vaACCSES John Weatherspoon, VaSRPG

Provider Issues Resolution Subgroup: REGULATIONS

Christy Collins, Collins & Collins Pamela Fisher, Region Ten Crystal Lipford, Good Neighbors Shirley Lyons, Henrico Beth Martin, The Choice Group Tonya Milling, The Arc of VA Heather Norton, DBHDS Deanna Rennon, Wall Residences Anthony Sandifer, EFSVA Karen Tefelski, vaACCSES Joanna Wise Barnes, Service Source Kendra Wormley, VersAbility

Provider Issues Resolution Subgroup: SERVICE DELIVERY

John Coffren, VersAbility Norma Israel, Sunrise Group Alex Jackson, Wall Residences Linda Kerns, VersAbility Beth Martin, The Choice Group Tonya Milling, The Arc of VA GL Pulliam, Dominion Youth Services Anthony Sandifer, EFSVA Jacque Scholl, Service Source Karen Tefelski, vaACCSES Eric Williams, DBHDS Joanna Wise Barnes, Service Source