

American Rescue Plan Act

Home and Community Based Services Spending Narrative and Projection

Oct. 13, 2021

Governor Mike DeWine | Lt. Governor Jon Husted | Director Maureen Corcoran



Department of

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Ohio submitted to CMS an initial funding projection and a narrative on process and broad potential areas of funding in July.

Ohio engaged in a process to solicit feedback from the community for recommended use of funds. Given the diverse group of stakeholders, Medicaid posted an RFI in August to solicit feedback from all stakeholders. That process was completed by the end of August and supported the development of the proposed spending plan.

On Sept. 29, CMS requested a detailed spending plan to be submitted by Tuesday, Oct. 19th. The following is a detailed explanation of the state's updated spending plan.

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Proposed Detailed Spending Plan

The directors of multiple state agencies engaged in a cross-agency collaboration to review stakeholder feedback and build out a joint proposal. The plan is reflective of stakeholder feedback and provides a boost of support for the administration's efforts to further expand high-quality care for individuals in the community. This priority has especially come into focus during the pandemic as institutional-based care has become less desirable by Ohioans and the demand for services and supports in the home and community are growing.

Joint ARPA HCBS Proposals – Summary Page	Proposed HCBS Allocation (State Share)	% of Total HCBS Allocation	Proposed Total Funding (w/Match)	All Funds
1. Provider Workforce Relief - Maintain (Calc. 10% Rev.)	\$164,343,522	29%	\$469,552,919	49%
2. Technology Enhancement	\$27,500,000	5%	\$55,000,000	6%
3. Workforce Support - Sustain and Expand	\$221,000,000	39%	\$230,000,000	24%
4. Other Program and System Enhancements	\$148,225,000	26%	\$206,500,000	21%

The proposed plan identifies four major areas of proposed funding, summarized:

Project outline:

JOINT ARPA HCBS Proposals	Proposed Total Funding (w/Match)	Proposed HCBS Allocation (State Share)
1. Immediate Provider Workforce Relief		
Provider Workforce Support Funding	\$469,552,919	\$164,343,522
Subtotal Provider Relief	\$469,552,919	\$164,343,522
2. Workforce Support - Sustain and Expand		
HCBS Workforce Development Strategic Fund	\$212,000,000	\$212,000,000
System Supports for HCBS Workforce	\$18,000,000	\$9,000,000
Subtotal Workforce Support	\$230,000,000	\$221,000,000
3. Technology Enhancement		
Improvements in Information Technology and		
Program Infrastructure	\$20,000,000	\$10,000,000
Using Telehealth and Technology to Support	\$15,000,000	\$7,500,000
Individuals in the Community	+ / /	+ - / /
Developmental Disability Technology	\$20,000,000	\$10,000,000
Advancements Subtotal Technology Enhancement	\$55,000,000	\$27,500,000
4. Other Program and System Enhancements		
Address Gaps in Services	\$27,500,000	\$13,750,000
PACE Expansion	\$50,000,000	\$50,000,000
Supports for Individuals Receiving Services and Informal Caregivers	\$63,000,000	\$56,500,000
Eliminating Disparities and Addressing Social Determinants of Health	\$20,000,000	\$10,000,000
Multi-System Youth	\$33,500,000	\$11,725,000
Developmental Disability Enhancements	\$15,500,000	\$7,750,000
Subtotal Other Programs and Enhancements	\$209,500,000	\$149,725,000
Grand Total	\$964,052,919	\$562,568,522

Immediate Provider Workforce Relief

The agencies are collectively proposing one-time direct payment to HCBS providers in recognition of the essential work performed and for relief from the negative economic impacts experienced during the ongoing COVID–19 public health emergency (PHE). The provider groups identified for this support are all direct providers of HCBS services listed in appendix B to SMD# 21-003. Payments made to providers will be completed before March 2022.

The agencies' goal is to improve access to community-based care to address gaps in service provision related to the ongoing COVID–19 PHE. Many providers have lost revenue during the PHE due to reduced demand for face-to-face services and increased costs for personal protective equipment (PPE), and office reconfigurations, to protect employees and patients.

Direct Payments to Providers		
\$164M HCBS Allocation		

Payments will be made directly to HCBS-identified providers to support an immediate need to support workforce capacity. Providers will be required to invest directly into their staff through retention/sign-on bonus.

Flexibility could include an investment in technological support to reduce workforce burdens (e.g., electronic health records).

Workforce Support – Sustain and Expand

During the COVID-19 pandemic, providers have been unable to adequately maintain the needed workforce capacity. Even prior to the onset of the pandemic, this sector of health care had been facing a shortage of workforce in direct care and professional services.

The proposal seeks to address the negative impact COVID-19 has had and is relevant for workforce needs for multiple systems/agencies including the Ohio Department of Medicaid, the Ohio Department of Mental Health and Addiction Services, the Ohio Department of Developmental Disabilities, and the Ohio Department of Aging.

The agencies will create a multi-agency workforce recruitment initiative that will identify and implement data-driven strategies for recruitment, including efforts that acknowledge and incorporate the opinions and suggestions from the HCBS workforce. The work will include an assessment of needs across the state and partner with local universities, career technical schools, community colleges, and workforce boards to build out the needed capacity with a goal of establishing a stable pipeline of demand in the field, allowing ongoing efforts to be sustained. Each of the initiatives below will focus on the HCBS services workforce and will enhance, expand, and strengthen HCBS in Ohio.

To complete this work and to quickly respond to this intense demand, a dedicated team will be needed through either a state team, a consultant/vendor, or public-private partnership where expertise can be leveraged.

HCBS Workforce Development Strategic Fund		
\$212M	\$212M	
Total Investment	HCBS Allocation	

- Coordinate multi-agency campaign and coordination of initiatives.
- Develop a program for scholarships and paid internship funds to colleges and universities. The state would make available funds to colleges/universities that would then offer scholarships to the individual students. We could target the scholarships and/or tailor amounts and guidelines to the specific year the student is in their education for both undergraduate and graduate degrees.
- Fund short-term internship investment opportunity, administered by the community behavioral health (BH) provider providing the internship opportunity, that also has a commitment component by the individual benefiting from the internship opportunity.
- Expand residency training and fellowship programs for advance practice registered nurses, physician assistants, and physicians dedicated to serving the behavioral health, geriatric, and developmentally disabled community.
- Provide funding to support public colleges and universities that develop or increase capacity in distance learning opportunities and/or additional degree programs that lead to credentialed or licensed behavioral health careers.
- Campaign to promote career pathways awareness training programs for school guidance counselors, academic advisors in colleges and universities, and employment counselors.
- Establish a fund to provide transportation support for HCBS workers as one of the many barriers to recruiting and retaining home health aides is access to reliable and affordable transportation.
- Identify ways to better recruit and retain workers in the developmental disability (DD) system by using a Workforce Crisis Task Force (WCTF). The Ohio Department of Disabilities (DODD) created WCTF in response to this existential threat to DD services. DODD will allocate ARPA funds to support initiatives identified by the WCTF.

System Supports for HCBS Workforce

\$18M	\$9M
Total Investment	HCBS Allocation

- Create a center of excellence partnership (with sister-state agencies) to implement, train, and evaluate best practices for HCBS case managers and providers across programs.
- Expand the virtual reality training project to develop and make public more training scenarios and make more headsets available for direct service providers (DSPs) to experience the training.
- Fund a Direct Service Provider (DSP) connector. DSPs have needs that have to be met outside of what is normally included in their job duties or the human resource (HR) practices of their employers. DSP Support Connectors will support accessing needs that include childcare, transportation, public benefits management or application, and medical services.
- Expand Employer Resource Networks (ERNs) to reduce turnover and increase retention of the DSP position in Ohio.
- Offer online training resources and live help sessions for HR directors and managers of provider agencies.
- Fund new technology options to providers to support DSPs in micro-learning applications.

Technology Enhancements

To support the continuing access to care, and to strengthen the HCBS workforce delivering care, the agencies are collectively proposing to invest in infrastructure and equipment. The proposals involve a variety of projects in each of the sister agency programs. Some would reside within individual programs; some projects would leverage results for multiple programs.

Improvements in IT and Program Infrastructure		
\$20M	\$10M	
Total Investment	HCBS Allocation	

- Develop an "aggregator" to hold service plan information across all long-term services and supports (LTSS) programs.
- Improve/enhance system integration and cross-system data integration efforts for LTSS and Front Door Policy.
- Strengthen assessment practices for level of care (LOC) and specialized recovery services (SRS) program.
- Enhance technology to improve program infrastructure for SRS (e.g., quality improvement activities).
- Develop/expand cross-system data communication to develop person-centered data communication system.
- Modernize systems used for services for the Aging community, including Ohio Benefits Long-Terms Services and Support application, Passport Information Management System (PIMS), and develop a predictive Risk Model for Disease Outbreaks.

Using Telehealth and Technology to Support Individuals in the Community

\$15M	\$7.5M
Total Investment	HCBS Allocation

- Expand health information exchange (HIE) use and capacity. ODM proposes to provide technology enhancements to support care coordination and utilization management.
- Expand use of technology and telehealth with new/expanded SRS service.
- Expand use of technology and telehealth with expanded nursing facility (NF) -based HCBS waiver service.
- Implement school-based health care telehealth supports.

Developmental Disability System Technology Supports		
\$20M	\$10M	
Total Investment	HCBS Allocation	

- Implementation of Technology First Recommendations aimed to provide technological support to recipients receiving care in the home and community.
- Support development of a system, "DSP Now," that will offer services coordinated through multiple providers for each person who needs it. The platform will allow for greater flexibility in scheduling for DSP workforce to address growing demand.
- Development of HCBS DSP support network.
- Development of technology for people and families.

Program and System Enhancements

These proposals aim to drive system reform and will enhance and strengthen HCBS through various measures – all aimed at providing more access to HCBS care in the community and providing for a more user-friendly experience for enrollees and their families as they navigate the complex system.

Address Gaps in Services		
\$27.5M Total Investment	\$13.75M HCBS Allocation	
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- Increase access to self-direction in all HCBS waivers, with particular attention to expanding informal supports, family caregivers, and other workforce- oriented strategies.
- Sponsor a survey and enforcement initiative to improve quality of life for persons served in the aging system.
- Add a personal care service to the ODM state plan benefit.
- Support development of a full behavioral health crisis continuum.
- Improve access to HCBS by developing the Golden Buckeye Connector, a digital bridge to all things useful including a consumer-driven mobile application that connects consumers, care managers, and service providers. ODA and ODM will develop and carry out a marketing strategy to inform the community, providers, stakeholders where to visit (website, 800 #, text, OBLTSS agencies).
- Explore potential new or enhanced behavioral health services. Engage a third party to conduct a review of BH services to determine any service gaps or needs not met fully by the current service array.
- Employ consultants to engage a robust discussion with stakeholders regarding considerations for the future of MyCare.

Program of All-Inclusive Care for the Elderly (PACE) Expansion

\$50M	\$50M
Total Investment	HCBS Allocation

 ODA, as the PACE state operating agency, would fund start-up costs, initial incentive payments, and grant funding to support the statewide development and implementation of three new PACE sites. At least one PACE site would be developed in a rural area of Ohio.

Supports for Individuals & Informal Caregivers		
\$63M	\$56.5M	
Total Investment	HCBS Allocation	

- ODM will provide funding to embed options counselors into hospital discharge programs to help educate individuals and facilitate community integration to ensure that individuals with SMI and/or DD are in the most appropriate setting of their choice.
- ODA will support statewide expansion of a local pilot program providing age-friendly phone-based technology to directly connect authorized participants with authorized care workers.
- DODD and ODA will support an initiative to offer intensive, short-term skill-building sessions for people with disabilities and the aging population to get a true experience of independent living.
- ODA will establish The Caregiver Center to provide evidence-based research training to caregivers and serve as a central hub of knowledge to drive public policy and optimize health and well-being for family caregivers and their care recipients across Ohio.
- ODA will use one-time funds to support strategies to expand current adult day services settings to or develop new capacity as these services are a significant need for Ohio's elderly citizens.
- DODD will create a platform to connect families to people willing to provide personal care needs in the community. People willing to provide these services submit background checks, rates, any relevant credentials or training, and a profile to be loaded on an online platform. Families would be given quarterly funds loaded as credits on the

online platform where they can interview and choose the worker best suited for their loved one. Once a match is made, scheduled, and completed, the credits assigned are converted to payment for the service.

Eliminating Disparities and Addressing Social Determinants of Health	
\$10M HCBS Allocation	

- Develop a new Medicaid service providing housing navigation supports to reduce and prevent evictions. Stable and safe housing is essential for the health and wellness of individuals.
- Distribute enhanced payments to Ohio Medicaid's Comprehensive Primary Care (CPC) providers that work in the areas of the state that have the lowest opportunity and highest social vulnerability, as measured by the Ohio Opportunity Index (OOI). Enhanced payment will help these providers engage in reducing health disparities and improve access to primary care and preventive services for Medicaid beneficiaries in their communities. Practices will be directed to use these funds to enhance primary care medical home services to support beneficiaries to address health disparities, including COVID-19-specific responses such as COVID-19 vaccination outreach.
- Enhance care coordination for those with complex behavioral health needs.
- Extend use of MyCare waiver screening tool to Ohio Home Care.

Multi-System Youth in the DD System		
\$33.5M Total Investment	\$11.73M HCBS Allocation	

 DODD will create additional Home and Community Based Services by creating additional opportunities for multi-system youth for children with significant behavioral issues who are also served by county boards. This proposal expands and enhances services to youth with developmental disabilities and severe behavioral disorders in Ohio in partnership with DODD in new and creative ways.

Developmental Disability System Enhancements

\$15.5M	\$7.75M
Total Investment	HCBS Allocation

- DODD will contract with expert(s), including oversight of a workgroup with DODD, county board staff, providers, and advocates, to simplify and modernize DODD's waiver reimbursement system. Consideration will be given to alignment across the waiver/service array administered by ODM, MHAS, and ODA to assure a consumeroriented priority and prevent dislocation between service systems.
- DODD will expand and accelerate the Employment First efforts in Ohio to better prepare people and employers for the transition away from subminimum wage employment.
- DODD will implement the Adult Day workgroup Blueprint proposal issued May 20, 2021, to provide an enhanced service offering.
- DODD will provide planning grants to support the establishment of an Ohio coalition that will develop action plans for advancing strategies that will ensure self-determination of adults with developmental disabilities through the use of a full range of decisional supports.