### **Rethinking Day Services in the COVID-19 Era**

September 16, 2020



## **Presentation Overview**

- 1. Pandemic-Related Changes to Day Services
- COVID-19 Payment Flexibilities and Provider Adaptations
- 3. Innovation in 3 States (with Guest Speakers)
- Moving Toward Value-Based Payments for Day Services
- 5. Q&A

# PANDEMIC-RELATED CHANGES TO DAY SERVICES

### Employment and Day Services: A National Snapshot

- Estimated 5,000 6,000 providers nationally
- Mostly non-profit organizations

Non-profit: 85%

For profit: 6%

Public (state or tribal): 7%

Other: 2%

Most were regional providers

County or regional scope: 51%

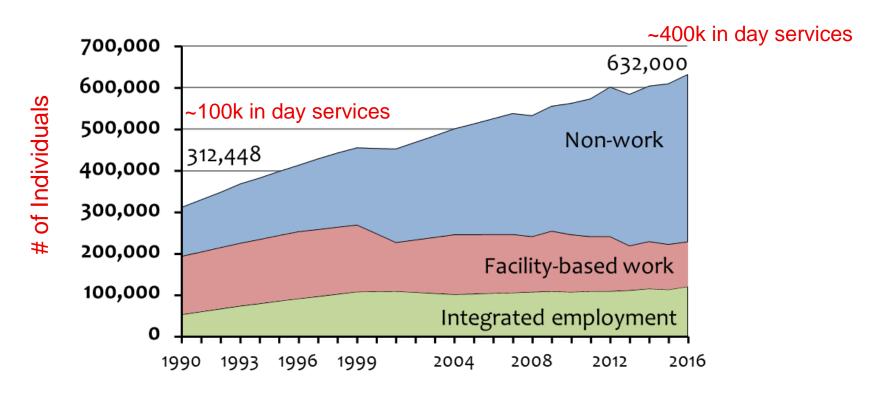
Local scope: 36%

Statewide: 8%Multi-state: 5%

- Average operational budget (in 2014-15) \$3.0 million
- Average number of people served: 2,019
- 60% were funded 51% or more by Medicaid or State I/DD Agency

Domin, D., & Butterworth, J. (2016). Research to practice: The 2014-2015 national survey of community rehabilitation providers, Report 1: Overview of services, trends, and provider characteristics. <a href="https://scholarworks.umb.edu/ici\_researchtopractice/46/">https://scholarworks.umb.edu/ici\_researchtopractice/46/</a>

### Use of Day Services Has Grown Dramatically





Source: ICI National Survey of State IDD Agencies



# Day Services Depend on Multiple Sources of Funding

### **State-only dollars**

Example: California Lanterman Act

### Grants

To CBOs, including local chapters of The Arc

### Medicaidfinanced LTSS

1915(c) waivers 1915(i) State Plan option 1115 demonstration waivers Local coordinating agencies (Example: Colorado Community-Centered Boards)

### **County-based levies**

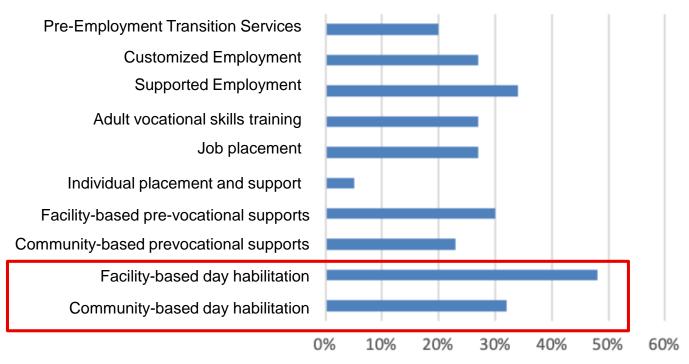
Example: Missouri SB40 boards

# COVID-19 May Shut Many Disability Services Programs for Good

- ANCOR surveyed 191 organizations nationwide.
- 77% have shut down or discontinued programs.
- 16% do not plan to reopen their programs.
- Employment and day services most affected.
- Causes: ↑ costs (PPE, testing); ↓ revenue.
- https://www.disabilityscoop.com/2020/08/24/covid-19-may-shut-many-disability-programs-for-good/28795/ (August 2020)

## COVID-19 Has Hit Day Services Providers Especially Hard

% of Providers No Longer Providing Services

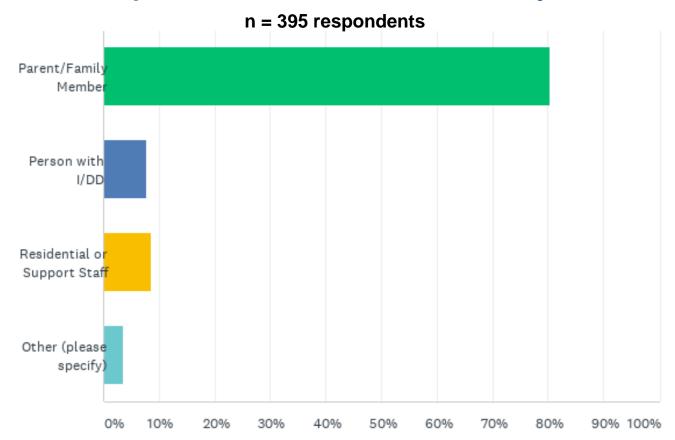


Association of People Supporting Employment First. (2020). *Impact of COVID-19 on disability employment services and outcomes*. <a href="https://apse.org/covid-19-impact-survey/">https://apse.org/covid-19-impact-survey/</a>

The Arc of California. (2020, August 6). What families are telling us: Disability services during pandemic. *The Arc of California*. <a href="https://thearcca.org/what-families-are-telling-us-disability-services-during-pandemic/">https://thearcca.org/what-families-are-telling-us-disability-services-during-pandemic/</a>

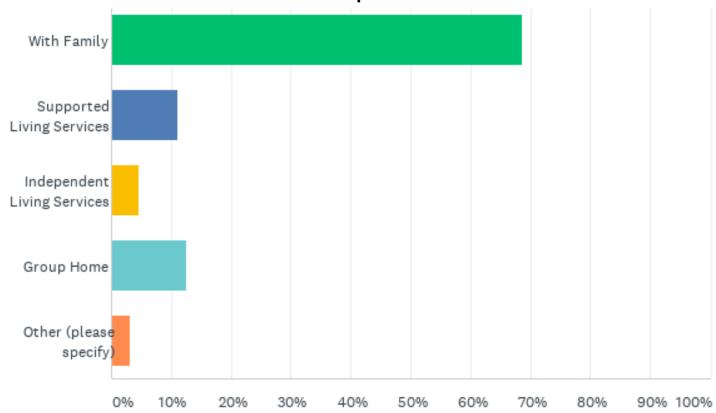
# ATTITUDES TOWARD RETURNING TO DAY SERVICES

### Most Respondents Were Family Members



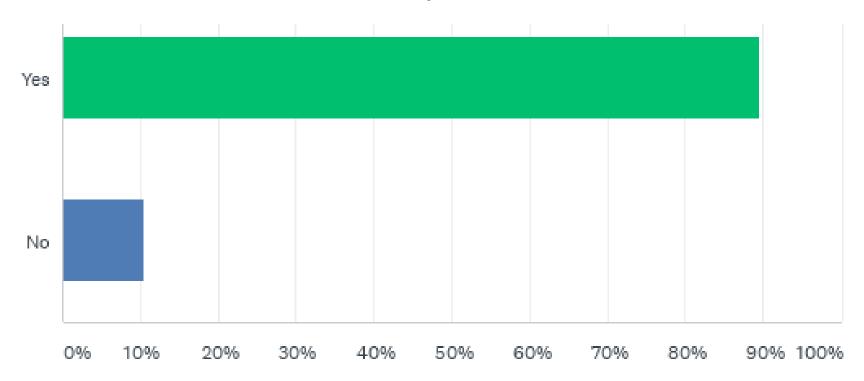
## Most Individuals Live at Home



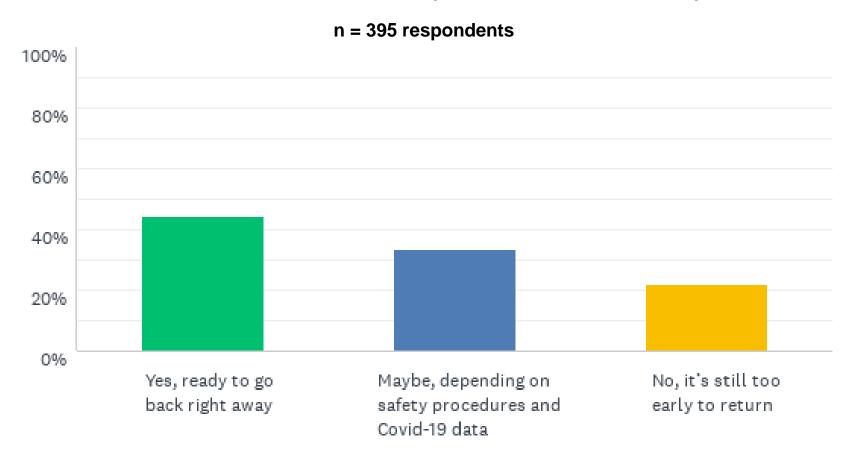


### Vast Majority Want to Return to Day Services

n = 395 respondents



### Some Who Want to Return to Day Services Want Safety Measures



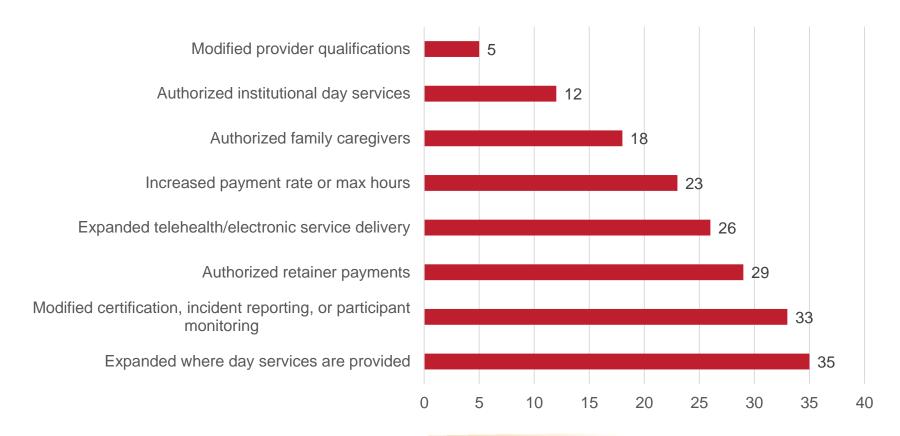
## Some Survey Answers are Hard to Interpret

- Unclear what individuals and families want:
  - A desire to do something during the day, whether technically "day services" or not?
  - Pre-pandemic, facility-based day services?
  - Integrated, individualized day services?
- States and providers wishing to duplicate the survey should add questions to distinguish these possibilities.

# Medicaid Provides Pandemic-Related Payment Flexibilities

- Families First Coronavirus Response Act (FFCRA)
  - Enhanced FMAP (6.2%)
- Appendix K waiver amendments to support providers:
  - Retainer payments
  - Rate changes
- Time limited
  - Enhanced FMAP: duration of public health emergency
  - Appendix K amendments
    - Three 30-day periods for retainer payments
    - Must end by March 31, 2021

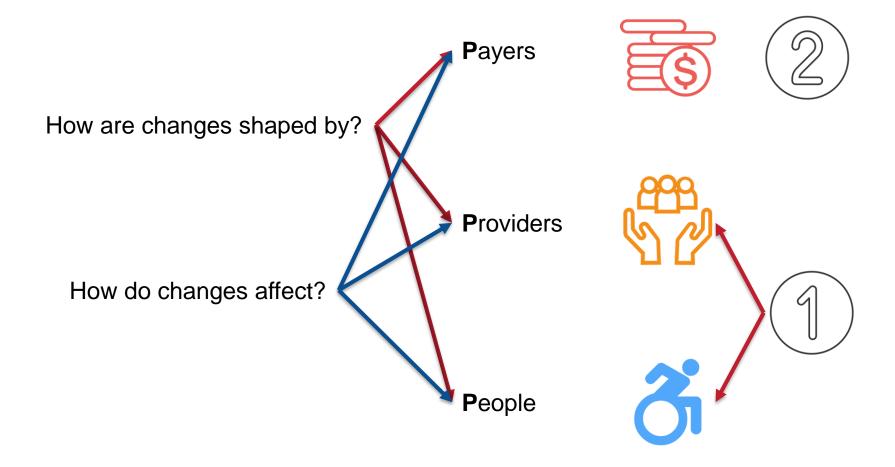
## # States with Appendix K Amendments for Day Services



## Reopening Poses Challenges

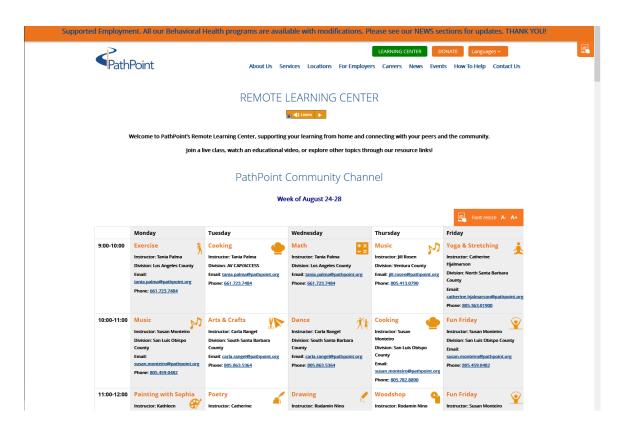
Condition of Reopening	Impact
Social distancing & space changes	Reduced revenue, increased costs
PPE and cleaning supplies	New cost center
Transportation	Cost-inefficient disability-specific transit; Reduced or eliminated public transit
Workforce return	Direct support staff ill, laid off, caring for family, or switched professions for safety
Contingency plans in case of outbreak; plans for continuity of operations	Additional planning for individuals and staff; disruptions in revenue and service delivery

### 3Ps: A Framework for Systems Adaptation & Change



## HARNESSING TECHNOLOGY TO ADAPT AND IMPROVE SERVICES: 2 EXAMPLES

Online classes in exercise, music, cooking, dance, etc.

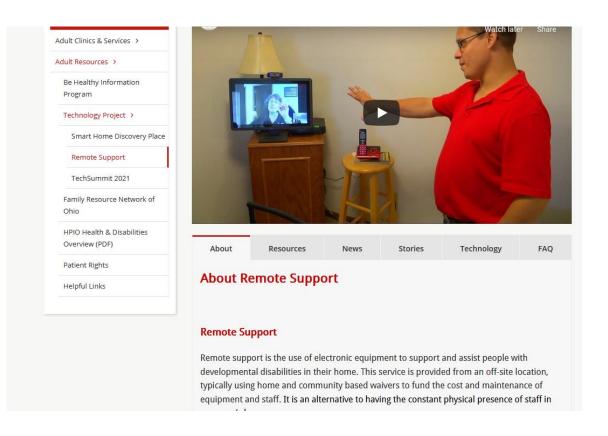


### **Remote Learning Center**

PathPoint (Southern California)

https://www.pathpoint.org/

Resources for helping individuals live independently with technology



### **Remote Supports**

Ohio State University Nisonger Center: <a href="https://nisonger.osu.edu/adult/resources/technology-project/remote-supports/">https://nisonger.osu.edu/adult/resources/technology-project/remote-supports/</a>

## Innovations in 3 States

- 1. St. Louis Arc: Virtualizing Services
- 2. The Arc of Tri-Cities, WA: Supplementing workforce with volunteers
- Managed Resource Connections, Inc. (MRCI) of MN: Moving away from brickand-mortar model of day services

## **Guest Speakers**

- St. Louis Arc: Gabrielle Szarek, Director of Transition Services
- Arc of Tri-Cities
  - Cindy O'Neill, Executive Director
  - Monti Franckowiak, mother and advocate
- MRCI: Brian Benshoof, CEO

# St. Louis Arc Has Successfully Virtualized Many Service (1/2)

- Daily Boost
  - 30-minute segments, 2-3x weekly
  - Short mental breaks for teens and young adults to share positive messages and related content
    - Virtual escape rooms
    - In-home scavenger hunts
- Teach Something/Learn Something
  - 30-minute segments, 1x weekly or more
  - Helps participants work on communication and public speaking skills
- "Launch" Program
  - Combination of individual coaching sessions and group classes for transition-aged teens and young adults
  - Because Launch is paid for privately, it can be taken nationwide increasing revenue.

# St. Louis Arc Has Successfully Virtualized Many Service (2/2)

- Virtual family workshops
  - Tips and activities that can be done at home
  - Resources in the St. Louis area that can be accessed for free or nearly free
- Facebook Live Q&A
  - Every Tuesday hosted by Director of Family Supports
  - Attendance ranges from 500-900



# Uses Volunteers to Grow its Workforce

- Dedicated group of youth who volunteer during the summer, often moving over successive summers toward full-time employment.
- Local teenagers not going to school on campus, so won't have access to typical extracurricular activities.
- Plan to have teenagers supplement full-time staff: paid staff 2:1 or 3:1, with additions of volunteers to bring the ratio down further.

# Testimonial: Yuriy Moved from Volunteer to Staffer at Tri-Cities





# MRCI Reducing Costs by Closing Brick-and-Mortar Locations

- MRCI serves more than 2,000 individuals across Minnesota with employment and day services.
- Plans to sell buildings or not renew leases on rentals.
- Reductions in expenses for:
  - Maintenance
  - Heating/cooling
  - Insurance, etc.
- Reduced use of transportation getting individuals to and from these facilities.
- Long-term move to "day services without walls."

## Adaptation and Innovation Benefit Providers and People

Benefits to Providers: Lower Costs, More Sustainable Business Models	Benefits to People: Improved Choice and Community Integration
Reduced brick-and-mortar costs	Greater independence through remote supports
Selling private pay services on a national scale to grow revenue	Enhanced choice: virtual or in-person
Using volunteers to diversify workforce and lower labor costs	Enhanced choice: pathways for personal growth and the pursuit of individual interests
	Enhanced integration: virtual communities
	Enhanced integration: in-community day supports

Reminder: Day services are services not places.

## Innovation Poses Challenges

- Remote/virtualized services won't be a good fit for everyone.
  - Uneven access to/comfort with broadband & devices
  - Can induce behavioral challenges
    - Hunger strikes
    - Refusal to leave house or elopement
    - Increased risk of institutionalization
- Day services offered in the community don't guarantee meaningful integration.
- The question is what to keep, for whom, when.

Ciulla, J., & Sulewski, J. S. (2016). *High-quality community life engagement supports: Four guideposts for success*. UMass Boston Institute for Community Inclusion. <a href="https://www.thinkwork.org/high-quality-community-life-engagement-supports-four-guideposts-success">https://www.thinkwork.org/high-quality-community-life-engagement-supports-four-guideposts-success</a>

# AN OPENING TO REINVENT SERVICES? "GUIDEPOSTS" FOR QUALITY SERVICES

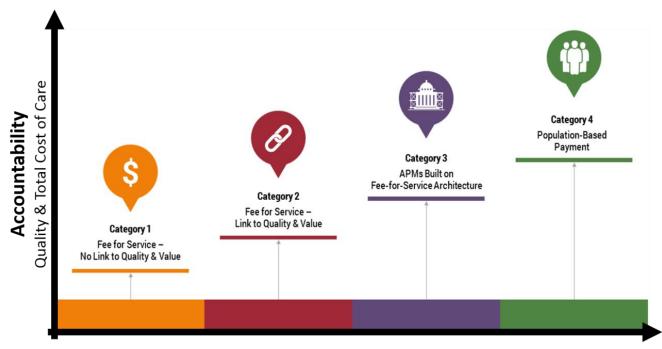
# Changing Language is the First Step to Making Day Services More Integrated

- Names reflect values
- Two common alternatives:
  - "Community inclusion"
  - "Community life engagement" (CLE)

# CMS Has Released Guidance on Value-Based Payments & Medicaid

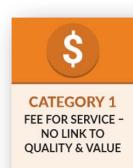
- Released September 15, 2020
- State Medicaid Directors Letter
  - https://www.medicaid.gov/Federal-Policy-Guidance/Downloads/smd20004.pdf
- Fact Sheet
  - https://www.cms.gov/newsroom/fact-sheets/value-based-carestate-medicaid-directors-letter

# Value-Based Payment Systems Can Take Several Forms



**Population Health Management** 

Health Care Payment Learning & Action Network. (2017). *Alternative payment model (APM) framework*. <a href="http://hcp-lan.org/workproducts/apm-refresh-whitepaper-final.pdf">http://hcp-lan.org/workproducts/apm-refresh-whitepaper-final.pdf</a>









**CATEGORY 2** FEE FOR SERVICE -LINK TO QUALITY & VALUE

Foundational Payments

for Infrastructure

& Operations

(e.g., care coordination

fees and payments for

HIT investments)

Pay for Reporting

(e.g., bonuses for reporting

data or penalties for not

reporting data)

Pay-for-Performance

(e.g., bonuses for quality

performance)

### **CATEGORY 3** APMS BUILT ON FEE-FOR-SERVICE **ARCHITECTURE**

A



**CATEGORY 4** POPULATION -**BASED PAYMENT** 

### APMs with **Shared Savings**

(e.g., shared savings with upside risk only)

### B

### APMs with **Shared Savings** and Downside Risk

(e.g., episode-based payments for procedures and comprehensive payments with upside and downside risk)

### Condition-Specific Population-Based Payment

A

(e.g., per member per month payments, payments for specialty services, such as oncology or mental health)

#### B

#### Comprehensive Population-Based Payment

(e.g., global budgets or full/percent of premium payments)

### C

#### Integrated Finance & Delivery Systems

(e.g., global budgets or full/percent of premium payments in integrated systems)

#### 3N

Risk Based Payments NOT Linked to Quality

### 4N

Capitated Payments NOT Linked to Quality

### Common Pathways: Category 1 → Category 2B → Category 4

**Health Care Payment** Learning & Action Network. (2017). Alternative payment model (APM) framework. http://hcplan.org/workproducts/apmrefresh-whitepaper-final.pdf

## VBP for HCBS Roadmap



Medicaid Innovator Accelerator Program. (2019, September 4). Value-based payment for home and community-based services: Strategies, progress, and accomplishments of participating IAP states. https://www.medicaid.gov/state-resource-center/innovation-accelerator-program/iap-downloads/program-areas/vbp-hcbs-strat-prog-accom-webinar.pdf



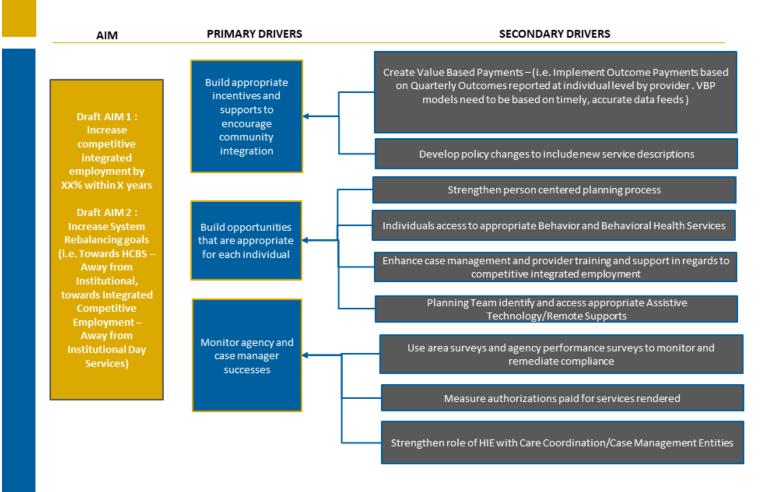
# Guideposts to Value-Based Payments for CLE: UMass Boston ICI (1/2)

- 1. Individualize supports for each person
  - Show understanding of personal preferences, interests, and skills
  - Emphasize person-centered planning and discovery
  - Consider creative grouping, staffing, and scheduling
- 2. Promote community membership and contribution
  - Start with inclusive settings and activities
  - Ensure staff presences does not limit connections with other community members

# Guideposts to Value-Based Payments for CLE: UMass Boston ICI (2/2)

- 3. Use human social capital to decrease dependence on paid supports
  - Create natural supports (e.g., yoga class)
  - Individuals can bootstrap into other integrated activities, including supported employment
- Ensure that supports are outcome-oriented and regularly monitored
  - Emphasize individuals' goals rather than processes (# of hours on an activity)
  - Should *lead to* or *complement* employment

### Draft Driver Diagram to Advance State System Rebalancing Goals



# Move Ahead Despite an Absence of Standards

- No standards yet exist for the quality of day services.
- The lack of standards need not prevent progress.
- Better to move ahead with what you have:
   Some progress is better than none.

# Determine Which Data To Collect (Guideposts for Quality Services)

- 1. Are supports individualized?
- 2. Do supports promote community membership and contribution?
- 3. Do supports use social capital to decrease dependence on paid supports?
- 4. Do supports help individuals achieve their personal goals?

### Additional Resources

- California's DD System Plans to Move to Value-Based Purchasing (VBP)
  - Governor's budget for FY2021 included a shift to VBP for its ID/DD services.
  - Proposal analyzed by non-partisan Legislative Analyst's Office (LAO) California's equivalent of the Congressional Budget Office (CBO).
  - Petek, G. (2020). The 2020-21 budget: Analysis of the Department of Developmental Services budget. California Legislative Analyst's Office. <a href="https://lao.ca.gov/Publications/Detail/4147">https://lao.ca.gov/Publications/Detail/4147</a>

### Medicaid HCBS VBP Website

 Medicaid Innovator Accelerator Program. (2019, September 4). Value-based payment for home and community-based services: Strategies, progress, and accomplishments of participating IAP states. <a href="https://www.medicaid.gov/state-resource-center/innovation-accelerator-program/iap-downloads/program-areas/vbp-hcbs-strat-prog-accom-webinar.pdf">https://www.medicaid.gov/state-resource-center/innovation-accelerator-program/iap-downloads/program-areas/vbp-hcbs-strat-prog-accom-webinar.pdf</a>

### Quality measures

 NQF provides guidance to HHS for measuring the quality of home and communitybased services. (2017). Retrieved September 16, 2020, from <a href="http://www.qualityforum.org/HCBS.aspx">http://www.qualityforum.org/HCBS.aspx</a>

## Q & A Discussion



## What's Next?

- To request additional information or contact a panelist, email <u>AOD@acl.hhs.gov</u>
- Registered participants will receive a link once slides are publicly posted
- Email to come to evaluate this webinar
- Next month:
  - Transportation Services, September 30
  - Different time: 3pm Eastern/12pm Pacific