

Supporting Children with Developmental Disabilities North Dakota Lessons Learned from the Pandemic

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Developmental Disability Services in North Dakota

• About 4,900 children and adults with a developmental disability are receiving services under a 1915(c) waiver.

 Individuals must be enrolled in ND Medicaid and have an intellectual disability or related condition.



DD Waiver Services in ND Medicaid

Residential Services

- Intermediate Care Facilities (ICF)
- Residential Habilitation
- Independent Habilitation
- Adult Foster Care
- Homemaker

Day and Employment Supports

- Day Habilitation
- Prevocation Services
- Individual Employment Support
- Group Employment Support

DD Waiver Services in ND Medicaid

Family Support Services

- In-Home Supports
- Self-Directed Supports
- Parenting Supports
- Family Care Option
- Extended Home Health

Administrative Services

- Infant Development
- DD Program Managers
- Corporate Guardianship
- Personal Care Services

Key Strategy and Legal Action

 One of the key strategies for the ND Department of Human Services is "Providing Services Closer to Home."

For example, children and young adults with severe autism could be served in the community or in a residential facility. Funds were appropriated to divert and transfer children from institutions to home and community-based settings (HSBS).

- These diversions and transfers are possible with adequate provider networks and appropriate payment mechanisms.
- ND continues to implement the U.S. Department of Justice Settlement Agreement to enhance access to HCBS for older adults and adults with physical disabilities.



Services Closer to Home

- Create pathways that help people access the right service at the right time
- Engage proactively with providers to expand access to services

Changes in DD Policy Due to COVID-19

- All services that could be delivered remotely were (i.e., employment supports, parent support, behavioral counseling, etc.).
- Trainings that could be done virtually were (i.e., all but hands-on portion of CPR) and time to complete extended from 90 days to 6 months.
- Staffing ratios were allowed to flex to accommodate sick leave.
- Retainer payments when utilization fell below 75% for services such as day habilitation, prevocation, group and individual employment supports, etc.
- Extended re-evaluations up to 90 days.
- Could start working while waiting on background check to come back.

American Rescue Plan Act (ARPA) Federal Funds

- ARPA provides 10% of enhanced funding to state Medicaid programs for HCBS services.
- States had 20 days to submit a plan that estimated the amount of funding and how funds would be spent.
- Centers for Medicare and Medicaid Services (CMS) described general ways for states to spend the funding: expand eligibility, offer more services, capital investments, workforce, and address social determinants of health.
- States have until March 31, 2025 to spend the funds.

CMS Overview of States' Plans

- \$2,604 additional spending per beneficiary
- All states submitted and CMS approved the plans
- \$25B in spending approved overall



COVID-19 Federal Funds ND Spending Plan for \$31M









Workforce

New Services Pilot Programs

Transitions

Infrastructure

50%

21%

15%

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Workforce

- Recruitment and retention bonuses
- Start up grants for new service providers
- Consultancy to review and revise training program for Qualified Service Providers (QSPs)

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New Services Pilot Programs

- Flexible transition supports
- Rate innovations for QSPs
- In-home consultation for behavioral needs

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Transitions

- Provide a family care option to incentivize transitions from Life Skills and Transitions Center
- Enhance community supports to wrap around clients after transition
- Flexible support fund for transitions to pay for things not covered under the waiver

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Infrastructure

- Care Connect platform like Care.com
- Document and report quality measures
- Client facing interface to eligibility and payment systems
- Project management

