**Meeting Title:** KDADS HCBS-CDDO Quarterly Business Meeting  
**Meeting Date:** 8/20/20

<table>
<thead>
<tr>
<th>Meeting called by</th>
<th>Amy Penrod</th>
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<tbody>
<tr>
<td>Type of meeting</td>
<td>Quarterly</td>
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<tr>
<td>Facilitator</td>
<td>Paula Morgan</td>
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<td>Note taker</td>
<td>Paula Morgan</td>
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<tr>
<td>Attendees</td>
<td>All CDDOs indicated. KDADS staff. Providers.</td>
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**Topics:**

**Presenters:**

**Agenda Item:** Minutes – Paula Morgan. No corrections noted.

**Agenda Item:** KDADS Updates-Amy Penrod, Commissioner.

- **Topic:** KDADS staffing: My staff are teleworking, primarily. Will continue to work from home for the foreseeable future. Covid cases not trending in the right direction for return to office. All staff have equipment to access files/networks from home. To get ahold of us, via email most effective. Having to work on ways to get phone connectivity. Most don’t have state issued cell phone.

- **Topic:** Budget: KDADS in first round of budget rounds, in September. Putting together budget. You may have seen the Secretary’s budget issues yesterday, virtual. We have been asked as our budget to have a reduced resource packet, no surprise. Asked to submit 10% reduction, 41 million, significant. Didn’t include consensus case load programming (nursing facility programming). Currently evaluating how to present to Gov and Gov staff on consequences of reductions, and advocacy to protect our programming. Last year increase successful, but this year, allotment rescinded. Keep up advocacy.

- **Topic:** TCM workgroup: Michele is spearheading with Paula and Brutus, WSU, to put together a TCM focused stakeholder opportunity, workgroup. Main goal is to establish framework, foundation, values of TCM services in KS. We know how important TCM is to our consumers. Want to preserve valued services in KS, first step in laying foundation for work that will continue. Some of you may have heard me yesterday (Interhab meeting), discussing ways to move forward, want TCM to be sustainable, preserve value of this service for our participants. Opportunity for stakeholder network to work with us. For stakeholder engagement, we will be messaging, we will be targeting mid-September. There would be a lot to discuss. There will be some information coming out to show representation throughout the state, independent TCM, rural, urban. WSU will help facilitate this.

- **Action Item:** Kathy Brennon to send out TCM workgroup information to Amy P.

- **Topic:** IDD Waitlist information-Paula Morgan report:

  As of 8/19/20, 4pm: 4,318  
  Last WL offer round: October 2019, 150 offers.  
  Results: 112 approvals (KDHE)  
  5 KDHE denials  
  31 declines/removals  
  3 tier 0s/ineligible
Offers ended with people who had been waiting since 11/1/2011. Next round will start with 11/2/2011.

**Crisis-exception stats since January 1, 2020:**
- Crisis=95 approvals
- CINC=8
- CINC ROC=8
- S.E. =11
- 122 total

Crisis-exception CDDO/MCO training: 9/23/20, 1:30pm (1hour)

- **Action Item:** CDDOs ask for additional information for people leaving the waiver for: death, move out of state, voluntary waiver end, and crisis-exception statistics over the years for comparison of numbers. Amy to look at feasible statistic reporting.

- **Agenda Item:** KDADS crisis-exception training with CDDOs and MCOs.

LaTonia: working with Paula to put together training for CDDO, MCOs, PIC, 3rd week of September. Paula: looking at Sept 23, afternoon, as possible date/time.

- **Agenda Item:** IDD Systems updates, COVID-19, CARES:

  Amy: worked with CMS to get guidances, approvals on Appendix K. less face to face, or no face to face items. Televideo. Not out of the woods yet. Looking for feedback from different networks. Is telehealth a viable, long-term option for some of our services. What should be considered longer term adoption items for moving forward? Will have a retainer payment chart, qualification for the 5% relief payment. Some might be able to apply for both. Straightforward. Options for providers and how it will work. Have been working on retainer payments since late March, then March 30, CMS came out with new guidance. CMS had only been approving 1-30 day period of retainer payments, then they opened it up to 3-30 day payments. We had to modify our guidance. MCOs to run data to see which providers qualify for retainer payments. Eligible providers: IDD Day, IDD Residential, PCS providers (multiple waivers): 75% of rate that would have been provided as per the person’s PCSP as of March 1st, will send out bulletins, revised for the new period, via KMAP. MCOs administering payments, KDADS monitoring and reviewing their work. Complicated by 5% relief payment to HCBS providers, timing makes this confusing, because of the retainer payments as well. Running the stats to see how much that will be. Set amount by Sparks committee, so we are making sure to maximize that distribution. Required to be used for costs directly related to COVID-19: staffing/operational adjustments due to pandemic, equipment, materials, etcetera. Expended by December 30th, state has to account how money was spent.

  CARES funds requires attestation by provider prior to payment being sent. Working with MCOs, looking at Federal to account for this money. Trying to make sure that we prepare for all needed documentation, prior to distributions. Goal to get it out as soon as possible. Targeting September. Some providers could qualify for both pots of money.

  Retainer payments to help maintain the network, and time when business interruption happened due to COVID-19.

  CARES geared toward increased in expenses due to COVID-19, having to provide PPE, sanitation, to defray increased cost.

  Some providers might qualify for both. Bulletins with graphics. Key: don’t want to ask for purchases with two streams of money. Ex: $50,000 for PPE; can split it with each funding stream. Can’t record $50,000 or double book expense. CARES does have to be COVID-19 related. Should be relatively easy to tie the expenses back to COVID. We will do what we can to make it easy and straightforward.

  Will put out KMAP bulletin, be distributing support materials, clarifying materials.

  **Action Item:** Clarifying bulletin with graphics.

**Agenda Item:** COVID-19, School, and PCS

Amy: have been having discussions on intersection of school district responsibility vs. HCBS, role of MCO to coordinate with school, so that school provides what they are responsible for, and the waiver providing what the waiver is responsible for...IEPs not updated, needs to be coordinated. Initial thought: don’t have a solid answer today, but we recognize additional
guidance is needed. Michele has put out guidance with Amy to the MCOs. MCOs had some questions that Michele covered. I will go back and get her guidance, and add to it what KSDE adds, then get out guidance to you all.

- **Action Item:** Guidance sent to MCOs on PCS and School to go out to the CDDOs.

**Agenda Item:** Status of Capacity Report

Russell: currently in a holding pattern.

- **Agenda Item:** Workgroup Updates:
  
  **Operations Workgroup-Amy P.** had some good robust conversation, ticked some things off our list, but have been waylaid by public health emergency. CDDO Notif form updated for PPOC inclusion. Completed, spent two sessions on overview, reviewing Peer Review process. Lots of suggestions for tool, document companion updates. Colin may have additional comments. Good discussion.

  Have spent last few meetings talking about COVID provider challenges, PPE, compliance by clients in using PPE. Stephanie Sanford with SACK has training on rights and responsibilities. She was clear that responsibility is for everyone to take care of self and others. Stephanie is open to providing that, virtual platform. Subgroup working on TCM manual. Will dovetail into workgroup on TCM. There is laundry list of items to tackle.

  **Eligibility Workgroup, Tara C:** Eligibility workgroup-meeting monthly since March. 3 priority: update policy, revise elig manual, develop training. Group has revised current elig policy, list of questions created for clinician to review. Sent to KDADS Leadership. Consultation for: UCEDD? A possibility? Not sure if it would require a payment or contract. Dr. Dixon only speaks to ID, need DD questions answered/worked through.

  - **Action Item:** UCEDD as DD diagnosis consultation question.

  **BASIS assessment workgroup, Heather P.** workgroup has been going through basis assessment, question by question, documentation requirements. Working through differences among CDDOs. Dealing with inconsistencies as we go along. Takeaway: interesting how we all do similar work, but then some differences. Glad to see getting back on same page.

**Quality Assurance:** Colin: discussing Peer Review, intent of regulation is outlined, so that CDDO is better prepared, 30-64-27, guidelines for everyday business and process. Quality review team, licensing, PIC to ensure that we are not duplicating. QA adjustments for COVID-19, quality-wise. Documentation for virtual meetings. Meeting minutes vital. QA notes to be updated by Colin.

**Complex Needs:** Russell: Russell-survey out to get data back. Dee was going to look at data. Not sure what the outcome of survey is yet. Looking at impact of dual diagnosis on IDD system. No meetings for several months.

- **Agenda Item:** Final Settings Rules: Amy/Russell/ColinLaTonia: year extension for compliance from Feds. Overall intent at KDADS, we are pressing forward. Continuing our work for best timeframe, work for providers to make adjustments. Date to have all in process and moving forward is still July 2021, a year from now. We are looking at meeting goal of having all providers notified of remediation status by Mid September. Go into remediation tab. Remediation tab: heightened scrutiny identified, have to work items in that tab. For anyone in category 3, remediation tab. Will have until July 2021 to remediate out of category 3 so as to avoid public review/CMS review. 3 categories. Settings on institutional grounds= category 1, and 2, mandatory review. Category 3, setting that isolates, for remediation. Have to remediate all steps prior to July 2021 for category. If not done by them, heightened scrutiny packet has to
be submitted to CMS for their review to see if provider setting can continue. Power point on Community connections. Guidance so that providers are prepared. If flagged for heightened scrutiny, have to be reviewed. Encourage providers that community connections support tab to answer questions. If not, go to chat section, and will get your questions answered as quickly as possible. Have sent out correspondence about guidance sessions. Smaller group discussions. Please respond to LaTonia, CDDOs, to schedule session. Send concerns/issues to chat. Working on sending out information through community connections. Contact LaTonia on what you need, poll coming up in a few weeks. LaTonia will also get a policy overlay out. To providers: If you have several settings that are similar, utilize that once reviewed, in your information for the rest of the settings. Please be patient on our reviews.

- **Agenda Item: Contract Negotiations: Amy:** 100% consensus to do another 6 month extension. I will have contract team draft extension paperwork for review, then move forward the process. Be thinking about what the spring looks like.

- **Action Item:** Draft extension paperwork for KDADS Legal review.

- **Agenda Item:** TCM workgroup, Kathy B: TCM manual update-Shannon and I meet with workgroups led by TCMs. They need an end date to motivate them to keep working. Legal section, want Legal staff to review for timelessness, input. Want phone contact. Want to have Licensing participation at high level. Whole reason for manual is to follow licensing. Once we have draft done, we will have questions on each section of the manual. Will need blessing on product, or items to rework. One question is: with new group you are having, we don’t want this work to become outdated.

- **Action Item:** Amy-KDADS Legal consult and KDADS Licensing Commissioner outreach on request by workgroup for KDADS specific participation.

- **Agenda Item:** Request for data averaging in BASIS and at CDDO discretion, Heather P., SCDDO. Stated that Michele, in BASIS workgroup said would not reconsider it.

- **Action Item:** Amy, Michele and Paula to have internal discussion.

**Agenda Item:** PIC Updates, Colin: I commend PIC staff to do their work and additional work to help out. Peer Reviews still on pause. Work together to reinitiate the reviews. Work on process, since we have put a pause on that. PIC conducts AIR reviews, APS reviews, PIC part of heightened scrutiny process as well. Level of compliance determinations.

- **Next Meeting:** 3/18/21. 9:30am.

- **Reminder:** Quarterly reports due the 20th of the month following the end of quarter. Send State Aid and Admin reports to: Joy.Knowles@ks.gov (fiscal), Andrea.Hohman@ks.gov (PIC staff), copy Paula.Morgan@ks.gov on the sends. Upload the complaint, crisis and annual reports to the IDD upload. Make sure that it is the IDD upload, and not the General upload.

### Conclusions

See Action Items

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<tr>
<th>Action Items</th>
<th>Person Responsible</th>
<th>Deadline</th>
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