

Membership Meeting

August 27, 2021





Today's Guests and Panelists

Michael Gamel-McCormick, Disability Policy Director,
U.S. Senator Bob Casey

Tony Holtzman, Partner, K&L Gates

TPA Workgroup Participants, Office of Developmental
Programs Rate Workgroup

TPA Government & Advocacy Committee



Upcoming TPA Meetings

- TPA Technology Summit, September 24
- ODP START Program Presentation, October 22
 - Don Clark, ODP
 - Center for START Services, University of New Hampshire
 - AE/SCO/Provider Roundtable
- Kristin Ahrens, November 19



Meeting Materials

1. TPA Workforce Survey Results
2. American Rescue Plan Advocacy Infographic
3. Better Care Better Jobs Act PA Fact Sheet
4. Better Care Better Jobs Act Proposed Legislation
5. Fee Schedule Rate and Appeal Procedures



TPA Government & Advocacy Committee

1. Gary Blumenthal, InVision Human Services
2. Michele Charmello, Transitional Services
3. Nancy Murray, Achieva & The Arc of Greater Pittsburgh
4. Will Stennett, Voices for Independence
5. David Tobiczyk, Goodwill of Southwestern Pennsylvania



"We have turned away over 30 referrals in the last month due to workforce shortages - right now, we don't have the infrastructure to serve people in need, and the systems that we do have are crumbling."

-Provider in Southwestern PA

HELP US FIX OUR CRUMBLING INTELLECTUAL DISABILITY SYSTEM OF CARE

DID YOU KNOW?

- ✓ The average wage of a community Direct Support Professional (DSP) is **30% LESS** than a Residential Aide in a state center.
- ✓ Turnover & vacancy rates are 2 to 3 times **HIGHER** in community programs than in state centers.
- ✓ As a result, more than 35,000 people in Pennsylvania that rely on intellectual disability & autism services are **LOSING CRITICAL SUPPORTS**.
- ✓ People with intellectual disabilities who finally come off the **WAITING LIST** and are in desperate need of services are continuing to wait because providers cannot recruit DSPs to support them.
- ✓ The American Rescue Plan offers an **UNPRECEDENTED** opportunity to increase DSP Compensation.

Workforce Comparisons from Current Data	Residential Services Aides, PA State Centers (June 2021)	Community Direct Support Professionals (July 2021)
Starting Hourly Wage	\$14.29	\$12.94
Average Hourly Wage	\$18.66	\$14.38
Vacancy Factor	16.8%	23.3%
Turnover Rate	13.9%	37.8%

PLEASE ACT TODAY!

Contact [Your Legislator](#) and Governor Tom Wolf at (717) 787-2500 or by email at govcorrespCRM@pa.gov

"...we waited over 10 years for waiver funding to come through and now because the system does not have providers to deliver care, the funding is **useless**."

- Mom of an Adult son with Autism



July 2, 2021

The Honorable Tom Wolf
Governor of the Commonwealth of Pennsylvania
508 Main Capitol Building
Harrisburg PA 17120

Dear Governor Wolf,

We have submitted our comments to the Pennsylvania Spending Plan for the American Rescue Plan Act of 2021 and would like to share our recommendations with you. Our principal request is to establish a living wage for all Direct Support Professionals (DSPs) that is funded through increased fee schedule rates. We ask for your support and are available to provide any further information you may need.

The key points included in our recommendations are as follows:

1. Increasing fee schedule rates to support a living wage of \$18.20 per hour for DSP's with an investment of \$541 million.
2. Funding sign-on and retention bonuses for an immediate impact on workforce vacancies.
3. Incentivizing the use of remote supports and assistive technologies and funding for their ongoing costs.
4. Expanding the proposed student loan forgiveness programs to ID/A DSPs.

Our letter to Secretary Snead is included and contains the complete details behind our recommendations.

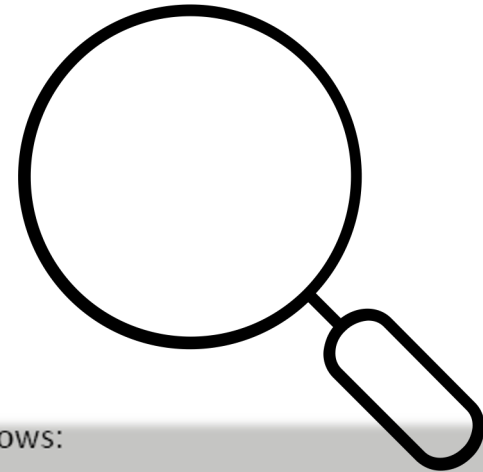
Thank you for your consideration of our recommendations for people with disabilities across the Commonwealth.

Sincerely,

Patrick DeMico

Patrick DeMico

cc: Meg Snead, Secretary, Department of Human Services
Kristin Ahrens, Deputy Secretary, DHS, Office of Developmental Programs



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**The American Rescue Plan
includes opportunities for
reinvestment to obtain additional
Federal dollars**

SMD# 21-003

**RE: Implementation of American Rescue
Plan Act of 2021 Section 9817: Additional
Support for Medicaid Home and
Community-Based Services during the
COVID-19 Emergency**

May 13, 2021

Dear State Medicaid Director:

On March 11, 2021, President Biden signed the American Rescue Plan Act of 2021 (ARP) (Pub. L. 117-2). Section 9817 of the ARP provides qualifying states with a temporary 10 percentage point increase to the federal medical assistance percentage (FMAP) for certain Medicaid...

Page 25 – State Medicaid Director

Appendix E: State Example

States may use the state funds equivalent to the amount of federal funds attributable to the increased FMAP to cover additional Medicaid-covered HCBS. **If a state chooses to cover additional Medicaid-covered HCBS, the state would be able to use the applicable portion of the state funds attributable to the increased FMAP as the state share and receive federal financial participation (FFP) for the additional HCBS expenditures it incurs.** States that are approved to use their initial reinvestment funds for Medicaid-covered services may be eligible for the increased FMAP on those initial expenditures once, if the additional expenditures are incurred between April 1, 2021, and March 31, 2022. However, once states have reinvested state funds equivalent to the amount of federal funds attributable to the increased FMAP for additional Medicaid-covered services listed in **Appendix B**, states should not claim the increased FMAP for subsequent expenditures occurring between April 1, 2021, and March 31, 2022, on Medicaid-covered HCBS. This example shows how the state could reinvest the funds in additional Medicaid-covered HCBS to receive additional federal match.

Table 1: PA Example Showing State and Federal Share and the Funds Attributable to the HCBS FMAP Increase					
	Q3 FY 21	Q4 FY 21	Q1 FY 22	Q2 FY 22	Total Q3-Q2
Total Computable	824.50	824.50	824.50	824.50	3,298.00
State Share ¹³	260.54	260.54	260.54	260.54	1,042.17
Federal Share ¹⁴	563.96	563.96	563.96	563.96	2,255.83
Funds Attributable to the HCBS FMAP Increase	82.45	82.45	82.45	82.45	329.80

Table 2: PA Example Showing Reinvestment in Additional Medicaid-Covered HCBS				
	Q3-Q2 FY 22	Q2-Q3 FY 23	Q3-Q2 FY 24	Total
Total Computable ¹⁵	1,043.67	0	0	1,043.67
State Share ¹⁵	329.80	0	0	329.80
Federal Share ¹⁷	713.87	0	0	713.87
Funds Attributable to the HCBS FMAP Increase	104.37	0.00	0.00	104.37

13 Assumes FFCRA is available through 3/31/2022. PA share is equal to 31.6% with enhanced FMAP and FFCRA increase (federal share = 52.2% + 6.2% + 10%).

14 Assumes FFCRA is available through 3/31/2022. Federal share is equal to 68.4% with enhanced FMAP and FFCRA increase (federal share = 52.2% + 6.2% + 10%).

15 Determines Total Computable by dividing PA State Share amount derived from enhanced FMAP by 31.6%.

16 Assumes the FFCRA increase is no longer available after 3/31/22. PA share is 31.6% prior to 3/31/22 and 47.2% for all subsequent periods.

17 Assumes the FFCRA increase is no longer available after 3/31/22. Federal share is 68.4% with enhanced FMAP and FFCRA and 52.2% without enhanced FMAP and FFCRA.



TPA Workforce Survey Results

KEY FINDINGS

When compared to their counterparts in PA-owned and operated State Centers, community DSPs are reimbursed at significantly lower levels, creating substantial deficits in workforce capacity and stability. (State Center Data Source: Pennsylvania Office of Developmental Programs).

Workforce Comparisons from Current Data	Residential Services Aides, PA State Centers (June 2021)	Community Direct Support Professionals (July 2021)	Variance
Starting Hourly Wage	\$14.29	\$12.94	\$(1.35)
Average Hourly Wage	\$18.66	\$14.38	\$(4.28)
Vacancy Factor	16.8%	23.3%	1.4X Higher
Turnover Rate	13.9%	37.8%	2.7X Higher

DATA FURTHER SHOWS

- 13 of 37 respondents reported staff vacancies of over 25%.
- 18 of 37 respondents reported a staff turnover rate of over 40%.
- Information reported represents over 7,000 DSP positions.

TPA Survey Comparison 2019 vs. 2021



	2019	2021
Provider Responses	34	37
DSPs Reported	7,605	7,408
Average Wage	\$13.24	\$14.38
Vacancy Factor	14.5%	23.3%
Turnover Rate	36.8%	37.8%

PLEASE ACT TODAY!

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"...we waited over 10 years for waiver funding to come through and now because the system does not have providers to deliver care, the funding is useless."



- Mom of an Adult son with Autism

Urge them to take action to fix the Intellectual Disability System of Care!

1

We need \$541 million invested into Fee Schedule Rates for DSPs to reach pay equity with Pennsylvania owned and operated state centers.

2

Programs are closing and services are not available for people finally approved from the waiting list.

3

The American Rescue Plan includes federal funding specifically for Home and Community-Based Services, which funds Fee Schedule Rates and DSP wages.



AMERICAN RESCUE PLAN: ADVOCACY TOOLKIT

Letter to Governor Wolf ARP Recommendations 2021 07 02

Letter to Secretary Snead ARP Recommendations 2021 07 02

TPA ARP Fee Schedule Investment Presentation 2021 08 13

TPA ARP Member Priorities Survey Results 2021 07 06



TPA ARP Advocacy Infographic 2021 07 28

TPA ARP Advocacy Infographic 2021 08 19

TPA Workforce Survey Results 2021 08 26

ARP Advocacy Communication Guidelines and Sample Letter



Find Your Pennsylvania Legislators

Send an Email to Governor Wolf

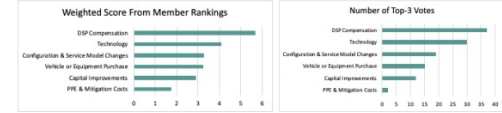
RECOMMENDATIONS FOR THE AMERICAN RESCUE PLAN ACT SPENDING PROPOSAL

TPA Survey Results

JULY 1, 2021

As we prepared our comments for the Commonwealth of Pennsylvania American Rescue Plan proposed spending package, it was important for us to survey members on priorities to ensure a unified message to represent our membership effectively. We opened our survey on June 28 and asked our members to respond to (3) simple questions. Our goal was to establish a priority as we prepare our response. We're pleased to report that 41 surveys were completed in just 48 short hours. Below is a summary of the results.

Q1: Please select in order of priority funding needs for your organization.	Weighted Score	Top-3 Votes
DSP Compensation/Recruitment of Additional Staff	5.67	37
Technology Implementation, Infrastructure, and Ongoing Maintenance & Support	4.08	30
Configuration & Service Model Changes	3.26	19
Vehicle or Equipment Purchase	3.24	15
Capital Improvements	2.89	12
PPE & Mitigation Costs	1.74	2



Q2: What is your preference for the distribution of funding?	Responses	Percentage
Both Gross Adjustments and Fee Schedule Rates	19	46.34%
Increased Fee Schedule Rates	18	43.90%
One or More Gross Adjustments or Lump Sum Payments	4	9.76%



Recommendations

- Increasing fee schedule rates to support a living wage for DSPs (\$18.20 per hour)
- Funding sign-on and retention bonuses to reduce vacancies.
- Incentivizing the use of technology and funding for ongoing costs.
- Offering student loan forgiveness for ID/A DSPs.

www.provideralliance.org

American Rescue Plan
Communication Guidelines

Request: Invest \$541 million into Fee Schedule Rates for DSP Compensation.

Send a Letter or Email to Governor Wolf and Your Local Legislators

We are writing to support the investment of \$541M of American Rescue Plan funding into Fee Schedule Rates that fund Intellectual Disability and Autism services. This funding is needed to increase wages for Direct Support Professionals who provide care and support for people

Tell your story. Provide personal experiences and details on the impact of the DSP workforce crisis on your organization and all of the people you serve.

Please review the enclosed materials for more information.

Include information and infographics from the American Rescue Plan Advocacy Toolkit located at www.provideralliance.org

Communicate with Friends & Colleagues

- Individuals You Serve
- Your Employees
- Members of Your Board
- Friends and Family Members
- Community Partners
- Community Leaders

Please help us share this important message and support our advocacy efforts. We are seeking \$541 million from the American Rescue Plan to increase the wages of Direct Support Professionals.

Use Social Media and Your Website

Share information from the American Rescue Plan Advocacy Toolkit through your social networks.

Write a Letter to the Editor to Your Local Newspaper or Online Journal

Find Your PA Legislators at <https://www.legis.state.pa.us/cfdocs/legis/home/findyourlegislator/>

Email Governor Wolf at govcorresp@pa.gov

Sign the Petition: Go to <https://standup4disabilitycaregivers.org/> to support ongoing cost of living adjustments through an annually applied nationally recognized market index.



Michael Gamel- McCormick

DISABILITY POLICY DIRECTOR
FOR U.S. SENATOR BOB CASEY

How Pennsylvania Benefits



**BETTER CARE
BETTER JOBS ACT** S. 2210



U.S. Senator Bob Casey



IN PENNSYLVANIA TODAY:

- There are approximately 1.8 million people with disabilities¹
- There are approximately 2.4 million people ages 65 and older²



THE BETTER CARE BETTER JOBS ACT WOULD MAKE IT POSSIBLE FOR

Over 40,000 family caregivers in Pennsylvania to return to work³

The Better Care Better Jobs Act Invests in Cost-Effective Services

Cost of Home Care Per Person/Per Year	Cost of Congregate Care Per Person/Per Year
\$26,000 ⁴	\$90,000 ⁵



OVER 16,000 PEOPLE IN PENNSYLVANIA ARE ON THE WAITING LISTS FOR SERVICES⁶

The Better Care Better Jobs Act would provide over 120,000 more seniors and people with disabilities with needed services in Pennsylvania⁷

THE BETTER CARE BETTER JOBS ACT WOULD CREATE

Over 19,000 new home care jobs in Pennsylvania and raise wages for care workers—the median wage is under \$12 per hour⁸



MORE THAN 3 IN 4 AMERICANS SUPPORT THE BETTER CARE BETTER JOBS ACT

- 79 percent support funding service expansions
- 79 percent support paying home care workers competitive wages⁹





Tony Holtzman

PARTNER, K&L GATES

CHAPTER 6100. SERVICES FOR INDIVIDUALS WITH AN INTELLECTUAL DISABILITY OR AUTISM

§ 6100.571. Fee schedule rates.

(a) The Department will establish fee schedule rates, based on the factors in subsection (b), using a market-based approach so that payments are consistent with efficiency, economy and quality of care and sufficient to enlist enough providers so that services are available to at least the extent that such services are available to the general population in the geographic area.

(b) In establishing the fee schedule rates in subsection (a), the Department will examine and use data relating to the following factors:

(1) The service needs of the individuals.

(2) Staff wages, including education, experience, licensure requirements and certification requirements.

(3) Staff-related expenses, including benefits, training, recruitment and supervision.

(4) *Productivity*. Productivity is the amount of service delivered relative to the level of staffing provided.

(5) *Occupancy*. Occupancy is the cost related to occupying a space, including rent, taxes, insurance, depreciation and amortization expenses.

(6) Direct and indirect program and administration-related expenses.

(7) Geographic costs based on the location where the HCBS is provided.

(8) Federally-approved HCBS definitions in the waiver and determinations made about cost components that reflect reasonable and necessary costs related to the delivery of each HCBS.

(9) The cost of implementing applicable Federal and State statutes and regulations and local ordinances.

(10) Other factors that impact costs.

(c) The Department will update the data used in subsection (b) at least every 3 years.

(d) The Department will publish a description of its rate setting methodology used in subsection (a) as a notice in the *Pennsylvania Bulletin* for public review and comment. The description will include a discussion of the use of the factors in subsection (b) to establish the fee schedule rates; a discussion of the data and data sources used; and the fee schedule rates.

(e) The Department will make available to the public a summary of the public comments received in response to the notice in subsection (d) and the Department's response to the public comments.

CHAPTER 41. MEDICAL ASSISTANCE PROVIDER APPEAL PROCEDURES

§ 41.32. Timeliness and perfection of requests for hearing.

(a) Except as permitted in § 41.33 (relating to appeals nunc pro tunc), the Bureau lacks jurisdiction to hear a request for hearing unless the request for hearing is in writing and is filed with the Bureau in a timely manner, as follows:

(1) If the program office gives notice of an agency action by mailing the notice to the provider, the provider shall file its request for hearing with the Bureau within 33 days of the date of the written notice of the agency action.

(2) If written notice of an agency action is given in a manner other than by mailing the notice to the provider, a provider shall file its request for hearing with the Bureau within 30 days of the date of the written notice of the agency action.

(b) If a provider files a request for hearing by first-class mail, the United States postmark appearing upon the envelope in which the request for hearing was mailed shall be considered the filing date of that request for hearing. If the provider files a request for hearing in another manner, or if the envelope in which the provider's request for hearing was mailed bears a postmark other than a United States postmark, the date the request for hearing is received in the Bureau will be considered the filing date.

(c) Except as permitted in § 41.33(b), a request for hearing may be amended only as follows:

(1) A provider may amend a request for hearing as a matter of right within 90 days of the filing date of the request for hearing.

(2) Upon motion of the provider or in response to a rule or order to show cause issued under subsection (f). The Bureau may permit a provider to amend a request for hearing more than 90 days after the filing of a request for hearing if the provider establishes either of the following:

(i) The amendment is necessary because of fraud or breakdown in the administrative process.

(ii) Both of the following conditions are met:

(A) The amendment is based upon additional information acquired after the expiration of the 90-day period that contradicts information previously disclosed by the Department or provides entirely new information not previously disclosed by the Department.

(B) The program office and other parties to the appeal will not be prejudiced if the amendment is allowed.



ODP Fee Schedule Rate Workgroup Members

1. Chris Elliott, Barber National Institute
2. John Eyth, Arc Human Services
3. Trish Fawver, Merakey
4. Ken Gibat, Person Directed Supports
5. Bill Harriger, Verland
6. Kris Saylor, Keystone Human Services
7. Tonja Smith, Allegheny Community Home Care

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Thank You!

TECHNOLOGY SUMMIT

SEPTEMBER 24