



# **BDDS Provider & Case Manager Monthly Webinar**

**January 10, 2023**

# Agenda

- BDDS New Staff Announcements
- Electronic Visit Verification
- CDC Guidance – Congregate Settings
- HCBS Waiver Transition Update
- Incident Reporting – Did You Know?
- Risk Assessment and Planning – Did You Know?
- BDDS Portal 2.0 - Did You Know?
- Indiana MFP Update
- Open Future Learning
- BDDS Innovation Pilot Project Grant Update



# New BDDS Staff Announcements



## Director of Field Operations

Lori Fine

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The Director of Field Operations provides leadership and support to BDDS district offices by addressing staffing, administrative, and technical needs and concerns.





# EVV Compliance

- Federal law requires personal care service and home health service providers to use an electronic visit verification (EVV) system to document services rendered.
- The Indiana Health Coverage Programs (IHCP) announced in IHCP Bulletin BT202248 that the IHCP would begin denying claims for personal care services that are not EVV compliant beginning with dates of services on or after Jan. 1, 2023.
- The IHCP has decided to postpone this final enforcement date until later in 2023. However, personal care services providers that are found to be out of compliance with the EVV requirement will begin seeing select claims recouped beginning in January 2023.



# CDC Guidance: Congregate Settings

The Centers for Disease Control and Prevention (CDC) has issued combined COVID-19 guidance documents for sites serving persons experiencing homelessness, correctional and detention facilities, and other congregate community living settings, with updated content reflecting the most recent CDC recommendations. Because “assisted living, group homes, and other residential care settings (excluding nursing homes), have different contexts and needs than homeless shelters and correctional facilities,” the guidance release includes a specific set of considerations for COVID-19 prevention in these settings.

This specific guidance indicates that “facility operators should balance the need for COVID-19 prevention with the impact from reducing access to daily services and programming,” and acknowledges that local resources, facility and population characteristics, and other factors may make it impossible to apply all enhanced COVID-19 prevention strategies. The guidance offers recommendations specific to “facilities that serve unrelated people who live in close proximity and share at least one common room (e.g., group or personal care homes and assisted living facilities)” for assessing and mitigating COVID-19 risk.



# CDC Guidance: Congregate Settings

## Assessing risk

In addition to monitoring their COVID-19 Community Levels, CDC suggests facilities can consider factors that would indicate heightened risk, including the following:

- A substantial portion of people in the facility who are more likely to get very sick from COVID-19, for example, due to underlying health conditions (including immunocompromise), older age, having certain disabilities, or poor access to care.
- Facility structural and operational characteristics that might accelerate spread, such as a high volume of outside visitors, poor ventilation, areas where many people sleep close together, or resident population's ability to adhere to COVID prevention strategies.
- Active COVID-19 spread occurring in the facility.



# CDC Guidance: Congregate Settings

## Mitigating risk

CDC suggests that congregate settings can consider adopting any of the following enhanced prevention strategies, in addition to implementing the generally recommended prevention steps at each COVID-19 Community Level:

- Increase and improve ventilation as much as possible and consider moving activities outdoors, when possible.
- Consult with the health department about testing strategies, including whether to implement routine screening testing.
- Expand use of masks and respirators.
- Add enhanced cleaning and disinfection protocols.
- Create physical distance in congregate areas where possible and/or reduce movement and contact between different parts of the facility and between the facility and the community, as appropriate.

**FMI:** The guidance specific to setting like group homes can be found at [https://www.nasddd.org/wp-content/uploads/2022/11/Additional-Information-for-Community-Congregate-Living-Settings\\_.pdf](https://www.nasddd.org/wp-content/uploads/2022/11/Additional-Information-for-Community-Congregate-Living-Settings_.pdf). An additional guidance document with FAQs is available at: <https://www.nasddd.org/wp-content/uploads/2022/11/Guidance-on-Management-of-COVID-19-in-Specific-Congregate-Community-Settings-Key-Messages-and-Tough-QA.pdf>

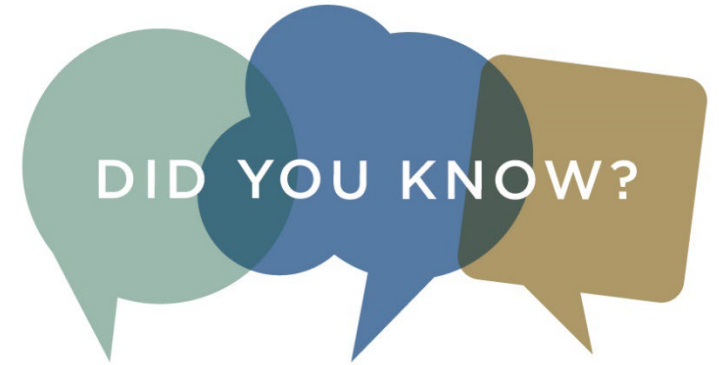


# HCBS Waiver Transition Updates

- **What is going to change with the Aged and Disabled and Traumatic Brain Injury waivers right now?**
- **Who is Impacted?**
- **When?**
- **What if I have questions?** You may email ([backhome.indiana@fssa.in.gov](mailto:backhome.indiana@fssa.in.gov)). If you are not already signed up, please visit [https://public.govdelivery.com/accounts/INFSSA/subscriber/new?topic\\_id=INFSSA\\_43](https://public.govdelivery.com/accounts/INFSSA/subscriber/new?topic_id=INFSSA_43) to sign up for updates from FSSA (text message or email) so you receive updates on when additional feedback sessions are scheduled. You may also follow the Bureau of Developmental Disabilities Services on Facebook.



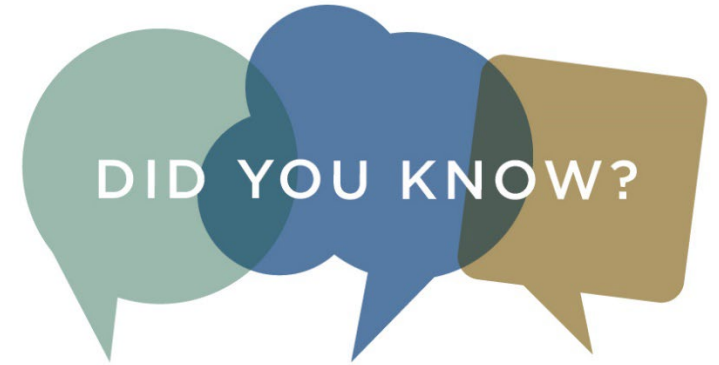
# Incident Reporting



- It is the policy of the Bureau of Developmental Disabilities Services (BDDS) that investigations conducted by providers on behalf of individuals receiving services include mandatory components that ensure the health, welfare, and rights of those individuals.
- Significant injuries of unknown origin require an investigation by the provider that include the mandatory components of an investigation.



# Incident Reporting



Significant injuries include but are not limited to:

- Fracture
- Burn
- Choking that requires intervention
- Bruises or contusions larger than three inches in any direction, or a pattern of bruises or contusions regardless of size
- Lacerations which require more than basic first aid
- Any occurrence of skin breakdown related to a decubitus ulcer, regardless of severity
- Any injury requiring more than first aid

Providers may use this template to as it meets the requirements:

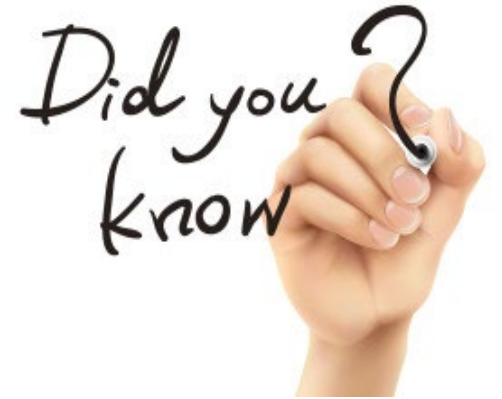
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[https://www.in.gov/fssa/ddrs/files/Incident\\_Reporting\\_and\\_Management.pdf](https://www.in.gov/fssa/ddrs/files/Incident_Reporting_and_Management.pdf)



# Risk Assessment and Planning



**Should a risk plan be implemented for medication administration?**

460 IAC 6-10-7 requires a provider to have a medication administration system in place.

460 IAC 6-14-4 requires a provider to train all direct care staff on how to administer medication, monitor side effects, and recognize and prevent dangerous medication interactions.

It is unnecessary to duplicate the requirements in code in a risk plan.



# BDDS Portal 2.0



- **How do we set up a system admin? and when will we set that up?**  
**Can we have a back-up system admin?**

If your agency does not have a system admin, please contact BDDS

Provider Services at [BDDSPROVIDERSERVICES@FSSA.IN.GOV](mailto:BDDSPROVIDERSERVICES@FSSA.IN.GOV). A provider can have more than one system admin.

- **Can the four roles of the Admin be the same contact person and phone if needed?**

Yes, the same contact person can be used for all roles. It is important to update your records, however, with any subsequent personnel changes.



# Indiana's Money Follows the Person Program



In the recently passed Consolidated Appropriations Act 2023, Congress has authorized the Money Follows the Person Demonstration Project (MFP) through 2027 with funds available through 2031. This continues a valuable funding resource that has allowed Indiana to dramatically increase its support of individuals seeking to transition from facility-based settings into a community setting of their choice.



# Open Future Learning

Opportunity is still open.

<https://forms.office.com/g/E3sFpKPyLD>

Recently released updated FAQ.

<https://www.in.gov/fssa/ddrs/files/DDRS-Open-Future-Learning-FAQs.pdf>

An Open Future Learning Informational Webinar Live Event was recorded on December 21<sup>st</sup>. Here are the slides and a link for the recording:

[https://youtu.be/oZhnU\\_7AXi4](https://youtu.be/oZhnU_7AXi4)



# BDDS Innovation Pilot Project Grant



- In the summer of 2022, DDRS announced funding opportunities for home and community-based waiver services providers, non-provider community entities, self-advocates and families interested in exploring new means to support and address areas of outstanding need among Hoosiers receiving services from BDDS.
- BDDS thoroughly reviewed and vetted all 133 applications. 48 Phase 1 grants were offered to a total of 42 unique entities, six entities were offered two grants each. Approved Phase 1 applications are for projects in every region of Indiana.
- We would like to thank all those who put time and effort into the BDDS Innovation Pilot Project Grant opportunity but were not ultimately selected to move forward. We truly appreciate and value your interest in empowering individuals to live, love, learn, work, play and pursue their dreams.
- Next steps include an in person IPP Summit with all Phase 1 grantees and submission of Phase 2 applications.
- Please direct any questions and/or feedback to Jessica L. Harlan-York at [jessica.harlan-york@fssa.in.gov](mailto:jessica.harlan-york@fssa.in.gov)