



LCBDD News & Updates!

Hello to all of our Provider Partners! Sending along some useful info. and updates. Lots of activity at the State level. Please let me know if you have any questions on any of it.

Thanks,

David



Direct service providers can earn \$1 more per hour with [this new rate](#). #DSPLevelUp

CMS Approves Amendments

The Centers for Medicare and Medicaid Services approved amendments for the Individual Options, Level One, and SELF waivers, which include the competency-based longevity and training rate add-on. Changes will be effective 6/1/18. Read more about the waiver changes [here](#).

DODD releases guidance on Training & Longevity Add-On

Guidance on the Training & Longevity Add-On for HPC staff is now available from DODD, including a form to document the required 2 years of experience. Both the guidebook and the form are attached to this email, and are also available at <http://dodd.ohio.gov/Communications/SiteAssets/TrainingLongevityAddOnGuide.pdf>

From DODD's guidebook:

Provider Agency Staff

"Employees of agencies must submit proof of experience to their employer, in a manner prescribed by the employer, before the add-on can be applied.

The agency will review those documents and verify two years of work experience. The agency may use the department's Employment Experience Form or develop one of their own.



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Once the agency has verified the information, the agency may bill for hours of Homemaker/Personal Care or HPC services provided by an eligible direct service provider using a billing code that reimburses the agency at a higher rate. (More about this billing code)

The agency is required to maintain verification of related experience and training for each direct service provider for whom the add-on is billed.”

DSP Longevity Add-On trainings

Four FREE training sessions are being held at the Newark Library. Each session gives 3 hours of credit towards the 60 hours needed for the new Longevity & Competence Add-On. Click on the dates below to register online.

OADSP/DODD Training Development Modules

Session 1: [A Closer Look at Autism](#) 9:00-12:00

Session 2: [Trauma Response](#) 1:00-4:00

[5/31/2018- Newark](#)

Session 1: [DSP as a Leader](#) 9:00-12:00

Session 2: [DSP as a Mentor](#) 1:00-4:00

[6/7/2018- Newark](#)

Ohio Becomes a Technology First State

Gov. John Kasich on Thursday 5/24/18 signed an executive order to expand access to technology for Ohioans with developmental disabilities by designating Ohio as a Technology First state. The executive order ensures technology will be considered as part of all service and support plans for people with disabilities. The executive order is not a technology-only policy. Instead, the goal is to help people learn more about how to use technology to better their lives.

[Read more](#) about what Technology First means for a person's independence.

Compliance Review Tool
Effective April 2018 Quick Look Changes

Agency Review Tool - Effective Date April 2018

Question #	Changes/Revision
2.008 Page 2 Employment	Question revised (clarification on who is responsible for writing employment progress reports) and guidance added (amendments to ISP if there is no progress toward achieving ISP outcomes)
2.009 Page 3 Employment	Rule citation added and guidance revised
2.012 Page 3 Employment	Rule citation added
2.013 Page 4 Employment	Guidance for this question revised (additional clarification on group employment, updates Voc. Hab. Effective date for community employment written outcomes in ISP, updates expected outcome for individual employment support, updates expected outcome of career planning, defines competitive, integrated employment)
2.014 Page 5 ISP Planning	Question added (During the service planning process, did the team explore the least restrictive services and settings? Offers guidance on the questions)
3.006 Page 6 Nursing and Delegation	Rule citation added and guidance revised (Added reference to nursing delegation grid, includes changes to references to locations serving 17 or more individuals, locations with 6 or fewer beds, and delegation for G/J tubes)
7.010 Page 16 Nursing and Delegation	Question and guidance revised (add references to 13 health related activities DSPs can do without delegation, and rules for nursing delegation for activities not included in Cat. 1 Cert)
7.015 Page 17 Employment	Question and guidance revised (lists out prevocational services, outlines what should be included in written progress report)
7.016 Page 18 Employment	Question revised (lists out prevocational services)
7.020 Page 18 Service Delivery	Question revised (rewords question on service delivery to include person-centered language)
7.022 Page 19 Day Services	Question added (new question regarding meeting the requirement to bill the community integration add-on, provides guidance on needed training and parameters for when the add-on can be billed)
7.023 Page 19 Day Services	Question added (new question for career planning documentation showing outcomes, question is specifically: assistive technology assessment, benefits education and analysis, career discovery, employment/self-employment plan, and situational observation and assessment)

9.013 Page 34 Health Related Activities	Question and guidance added (asks about proper certification for category 1 health related activities, outlines health related activities under category 1 certification, including the addition of 5 new health related activities)
9.027 Page 38 Day Services	Question revised (removes language around number of training hours needed for the specific waiver day service for first year staff)
9.028 Page 38 Day Services	Question revised (removes language around number of training hours needed for second year staff)
9.039 Page 41 Compliance	Guidance for this question added (language added around the agency's compliance protocol including the employment of a compliance officer or committee, compliance policies, and review of said policies and committees)
9.045 Page 42 Nursing	Question added (question added about three health related activities that can be completed with training but do not require med admin certification)
9.046 Page 42 Day Services	Question added as technical assistance only (no citations issued until 7/1/18) (question about if adult day support or Vac Hab provider notified DODD within 14 calendar days of moving or closing facilities)
12.002 Page 47-48 Title XX	Guidance for this question revised (revising guidance for service documentation for Title XX services)

Independent Review Tool - Effective Date April 2018

Question #	Changes/Revision
2.008	Question revised and guidance added
2.009	Rule citation added and guidance revised
2.012	Rule citation added
2.013	Guidance for this question revised
2.014	Question added
3.006	Guidance for this question revised
7.010	Question and guidance revised
7.021	Question added
9.001	Question and guidance revised
9.007	Guidance for this question revised
9.016	Question added
9.017	Question added

ICFIID Review Tool - Effective Date April 2018

Question #	Changes/Revision
1.008	Question revised and guidance added

2.014	Question and guidance revised
2.020	Question and guidance revised
2.025	Question revised
2.030	Question added
3.010	Guidance for this question revised
4.012	Question added
4.013	Question added
5.001	Question and guidance revised
6.006	Rule citation added and guidance revised
8.007	Question removed; subsequent questions renumbered

All Individual Interview Tools – HCBS questions removed

Ancillary Review tool – No change to compliance tool

Employment Experience Form

Competency-Based Training and Longevity Rate Add-on for Providers of HPC Services

Applicant's name	Applicant's DOB	Application number
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Employer name: List either the name of the agency through which you were employed or the name of the person you served as an independent provider.

Street Address, City, State: Specify the address of the employer.

Job title: List the title you had while employed by an agency. For all services delivered as an independent provider, write "independent provider". Additional documentation, such as pay stubs or employment verification on agency letterhead, must be submitted for each agency employer listed.

Services provided: Describe the type of waiver service provided, such as Homemaker/Personal Care, Shared Living, employment services, etc., or other service specifically for people with developmental disabilities.

Dates of service: Include day, month, and year on which employment started and stopped for this employer.

Total Hours: Include number hours worked each week for the employment span if working for an agency or include the total number of units or hours billed as an independent provider.

Employer name, street address, city, state	Job title	Services provided	Dates of service	Total hours

I certify that the information provided above is accurate. I understand that falsifying any information on this document may result in a denial or revocation of certification.

Applicant's printed name	Applicant's signature	Date
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