

RESIDENTIAL RATE SETTING TRANSITIONAL WORK GROUP
DATA MANAGEMENT SUB-COMMITTEE
JUNE 27, 2012
MINUTES

Committee Members in Attendance: Jim Richey, Peter Mason, Mark Kovitch, Paul Rosin, Stan Soby

1. Review and Approve Minutes from April 25, 2012- Minutes approved as written.
2. Committee Review- Since the last Transitional Work Group Committee meeting, the Sustainability Sub-Committee has met. Providers are concerned; feel like the edge of the cliff is approaching quickly. There is a general feeling that the process being followed in the Committee has the goal of trying to prove what it is that Peter and Joe have created. Peter stated that it has never been said that the new rate setting system is going to add to the amount of money that is currently within the residential system. The charge of the committee was to develop a rate structure based on the level of support needs for the individual within the current appropriation. The Sustainability Committee was established to develop a process to develop a sustainable wage for direct care staff. Currently the Department is trying to come up with a system that will measure the number of hours based on a person's needs. Peter pointed out that in terms of the Day Programs there have been a couple of million dollars put into the system due to the URR process. It was again pointed out that the objective of this process was revenue neutral. Given that the system is based on averages, there will be winners and losers through the process, the Department will make every effort to mitigate the impact on the agencies that come out on the short side. One of the questions at this point is how many CLA's are providing regularly scheduled hours during the day when people are typically in Day Programs. A further question is what the providers want in terms of the process. Peter stated that the Department is making every effort to be inclusive and that the draft template that the Department has put out there is just that a draft. It was noted that URR is an issue in Day Programs and will be an even bigger issue in terms of Residential. It was discussed whether it is better or worse to have a base number of hours plus many carve outs. Possible carve outs discussed were clinical supports and motor vehicle costs.
3. Review QSR Data- Peter did not have the opportunity to look into this. Needs to be looked at for some bench marking. One of the issues noted is that DDS is hitting people on physical plant issues that DSS is refusing to pay for.
4. Business Manager Questions:
 - Individual Budgets- VSA start and end dates not on Document. VSA has authorization date that is different from the utilization date. The Department is creating an authorization database that will put financial data (budgets, individual budgets, etc.) in one place that will hopefully be available to Private Providers at some point. It was agreed that the Department will look to change the approval date to the start date.

- CSA Authorization-It was suggested that the LON be put on the CSA. Jim stated that the Department can do a better job of getting providers better access to LON scores. This should be able to be done with URR as well.
- RDID# on CSA- New system will include the RDID# on the CSA.
- Status of One Time Requests- Agency should be receiving a Contract Service Authorization (CSA) when a one-time request has been approved. Participants stated that this does not occur on a consistent basis. It was agreed that there needs to be further discussion and consistency regarding the process for one time request approvals and notification.

Next Meeting: July 25, 2012- 1:00 DDS Central Office.