DDS VENDOR RATE STUDY and RATE MODELS

Behavioral & Professional Services

March 22, 12:30pm – 2:00pm

Purpose of the Rate Study

- ABX2-1 required DDS to submit a rate study to the Legislature by March 1, 2019.
 - Presented on March 15, 2019
- The study needed to address community-based services in terms of:
 - Sustainability
 - Quality
 - Transparency

Who Participated

Sent to more than 5,500 entities

- More then 1,100 responded (20%)
 - Represented 4,600 vendor numbers
 - Accounted for 52% of 2017 POS claims

Burns & Associates (B&A)

- Employs an "independent rate model" approach to develop HCBS rates (not dependent on a single source of information)
- Reviewed CA laws that impact providers' costs
- Consider reasonable costs providers incur to deliver services
- Constructed the rate models in accordance w/ DDS policies and requirements

Assumptions

- Wages, benefits and productivity of the direct care worker
- The agency's program operation costs
- The agency's administrative costs
- Staffing ratios and staffing levels
- Participant attendance/absence factors
- Travel-related expenses
- Facility costs
- Program supplies

Rate Study Also Considered

Number and type of service codes

Quality of services

Client outcomes

Compliance with HCBS

Notes from B&A

 Recognize that provider costs are related to the rates they are paid

 Independent sources, such as Bureau of Labor Statistics, were used to consider wage data

 To see the detailed report, go to dds.ca.gov and click on 'rate study'.

HCBS Rate Setting Methodologies

Fee schedule

 Fixed, pre-determined rate for a single service for a designated unit of time. Do not vary by client or provider.

Negotiated market rate

 Rate based upon negotiation. Typically involves a range of permissible rates by reviewing prices for other providers of similar services

HCBS Methodologies Cont.

Cost reconciliation

 Provider files cost reports created by State, to be reimbursed for true-cost of service.

Tiered rate

 Payment based on a rate that varies by characteristics of the individual, the provider or a combination of both

Bundled rate

 Rate encompasses two or more discrete services with distinct purposes that are not closely related

DDS Rate Setting Methodologies

- Set by DDS
 - Provider cost statements, fee schedules, regulation or statute.
 - ARM, day programs, WAP, infant development, ILS, in-home respite

- Schedule of Maximum Allowance (SMA)
 - Rates set by DHCS for medical service providers: nurse, home health aides and therapists

DDS Methodologies Cont.

- Usual and Customary (U&C)
 - Same rate others pay as long as 30% of the provider's customers are not regional center clients.
- Set by DSS
 - Applies to out-of-home respite
- Negotiated (includes Median)
 - Rate can't exceed the applicable median rate

Direct Care Worker Wages

- Used data from Bureau of Labor Statistics
- Considers rising minimum wage
- Considers impact on workers who already earn the new minimum wage
- Considers impact on supervisors who must earn twice minimum wage in CA
- Used multiple BLS occupations to construct rate model wage assumptions

Direct Care Staff Benefits

- Rate models assume that all employees providing direct care receive the same benefits
 - Social Security 6.20% of total wages
 - Medicare 1.45% of total wages
 - Fed Unemployment Ins 0.60 % on first \$7,000
 - State Unemployment Ins 3.40% on first \$7,000
 - State Employer Training Tax 0.10% on first \$7,000

Direct Care Benefits Cont.

Workers Compensation - \$4.53 per \$100 in wages

Health Insurance - \$360/month

25 paid days off (vacation, holidays, sick)

• \$100/month other benefits (ie dental, life insurance)

Direct Care Staff Productivity

- This accounts for time the direct care staff are working but not with the client
 - Travel time between individuals
 - Program set-up & clean up 1.25 hours/week
 (15 min/day) for each worker
 - Networking and general development activities for Job Developers – 5 hours/week
 - Recordkeeping and Reporting varies by service

Direct Care Productivity Cont.

 Supervision and other employer time – i.e.: attending staff meetings

 Missed appointments – assumes some portion of a missed session spent doing paperwork, for example

 Collateral contacts – non-billable activities performed on behalf of the client. Applied to Job Coaching and Infant Development services

Program Operation Expenses

Note -of the 1,100 surveys submitted, only 416 included complete data for operating expenses.

Program operations expenses include:

- Supervision
- Quality oversight
- Training curriculum development
- Program specific activities

Administrative Expenses

- Costs affiliated with these functions:
 - General management
 - Finance and accounting
 - Information technology
 - Human resources
 - Professional services
 - Calculated at 12% (Note lower than 16.9% reported, but dollar amount is the same since it's applied to a higher cost base)

Accounting for Regional Differences

 The study includes a separate rate model for each Regional Center to recognize geographical cost differences for:

- Direct care wages
- Travel distances and time
- Real estate

Classified as A, B or C – see maps in handouts

Behavioral & Professional Services

Services are generally provided in the community on an individualized basis by professionals such as:

- Behavior Analyst BCBA (612)
- Associate Behavior Analyst BCABA (613)
- Behavior Management Assistant (615)
- Behavior Technician (paraprofessional) (616)
- ☐ Behavior Management Consultant (620)
- ☐ Infant Development (805)
- ☐ Adaptive Skills Trainer (605)

Behavior Analyst - 612

 Behavior analysts assess the function of a behavior and design, implement & evaluate instructional & environmental modifications to produce socially significant improvements in the individual's behavior through skills acquisition & the refuction of the behavior.

- Overview of rate model:
 - Billing unit = hourly
 - Geography-based rate
 - Group services allowed at 1:2 and 1:3

Associate Behavior Analyst - 613

 Same function as the Behavior Analyst, but under direct supervision of a Behavior Analyst or Behavior Management Consultant

- Overview of rate model:
 - Billing unit = hourly
 - Geography-based rate
 - Group services allowed at 1:2 and 1:3

Behavior Management Assistant - 615

 Same function as the Behavior Analyst, but under direct supervision of a Behavior Analyst or Behavior Management Consultant

- Overview of rate model:
 - Billing unit = hourly
 - Geography-based rate
 - Group services allowed at 1:2 and 1:3

Behavior Technician-Paraprofessional - 616

 Implement instructional and environmental modifications to produce socially significant improvements in the individual's behavior through skill acquisition and reduction of the behavior.

 Work under the direct supervision of a certified Behavior Analyst or Behavior Management Consultant

Beh. Tech. Cont.

- Overview of rate model:
 - Billing unit = hourly
 - Geography-based rates
 - Non-English stipend
 - Group services allowed at 1:2 and 1:3

Behavior Management Consultant - 620

 Provide consultation to individuals, families, service providers per regional center guidelines.

- Overview of rate model:
 - Billing unit = hourly
 - Geography-based rates
 - Group services allowed at 1:2 and 1:3

Infant Development - 805

- Programs promote physical, cognitive, language and speech, and psychosocial development.
- Promote self-help and feeding.
- Increase parent/child interaction by training parents to recognize & respond to child's unique characteristics, temperament and non-verbal communication signaling distress or need for interaction
- Develop parent/child relationships thru feeding, bathing, comforting, etc.

Infant Development Cont.

- Service would be limited to 'special instruction' services provided by early childhood specialists or teachers.
- Other services currently provided under 805 would move to service code corresponding to the professional qualifications.
- Overview of rate model:
 - Billing unit = hourly at applicable qualification rate
 - Geography-based rates
 - Group services allowed at 1:2 and 1:3

Adaptive Skills Trainer - 605

 Propose eliminating this service code and putting staff under the service code corresponding to their qualifications.