


STATE OF NEW HAMPSHIRE BDS RELEASE OF POLICY	
PR NUMBER:	22-39
FROM:	Sandy Hunt
OFFICE OF:	Bureau of Developmental Services
SIGNATURE	
SIGNATURE DATE:	June 3, 2022
SUBJECT:	NH HCBS Recruitment, Retention, and Training Payment Service Coordinator Guidance
TO:	Melissa Hardy, Director DLTSS, BDS Area Agencies; All BDS Staff; Office of Finance Staff responsible for Recruitment, Retention, and Training Payment
EFFECTIVE DATE:	June 3, 2022 revised July 1, 2022

Purpose and Intent of Policy

To describe how the 10% increase to the state Federal Medical Assistance Percentage (FMAP) for Home and Community Based Services (HCBS) from the American Rescue Plan Act of 2021, will be calculated, distributed and for what purpose.

Definitions

- A) **Area Agency** means an entity established as a nonprofit corporation in the state of New Hampshire which is established by rules adopted by the commissioner to provide services to developmentally disabled persons in the area.
- B) **American Rescue Plan Act of 2021 (ARPA), Section 9817(a)(1)** provides a 10% increase to the state FMAP for HCBS delivered during the project period
- C) **Service Coordinator** means a person is chosen or approved by an individual and his or her guardian or representative to organize, facilitate and document service planning and to negotiate and monitor the provision of the individual’s services and who is:
 - 1) An area agency service coordinator, family support coordinator, or any other area agency or provider agency employee;
 - 2) A member of the individual’s family;
 - 3) A friend of the individual; or

- 4) Another person chosen to represent the individual.
- D) **HCBS:** Home and Community Based Services
- E) **Immediate Supervisor** an individual who directs and assigns the work of DSWs. Immediate supervisor does not include agency general management, including Chief Executive Officers, Chief Financial Officers, Chief Operating Officers, Chief Clinical Officers, Chief Medical Officers, or any equivalent Provider Agency leadership positions.
- F) **FMAP:** Federal Medical Assistance Percentage
- G) **Project Period:** April 1, 2021 to March 31, 2022. The project period refers to the period used for calculations of FMAP. The project period is not an indication of when provider agencies must spend funds by.
- H) **Provider Agency** means an area agency or another entity under contract with an area agency to provide services.
- I) **Sub-Contractor** means an entity that contracts with an area agency to provide service coordination services.

Provider Agency Requirements

To receive NH Medicaid recruitment, retention, and training payment under this initiative, Provider Agencies must meet the following requirements:

1. The Provider Agency will make payments in accordance with the requirements contained in:
 - a. BDS PR 22-39 NH HCBS Recruitment, Retention & Training Payment Service Coordination Guidance;
 - b. BDS 3785 SC *Attestation of Requirements & Authorization to Pay Recruitment, Retention, and Training Payment*; and
 - c. Any other requirements set forth by the federal Centers for Medicare & Medicaid Services (CMS) or the Department.
2. At least 80% of the payment must be spent on recruitment, retention, and training payments to:
 - a. Existing Service Coordinators;
 - b. Existing Immediate Supervisors; or
 - c. New Service Coordinators and New Immediate Supervisors.
3. The remaining 20% of the payment must be spent or set aside for the Provider Agency's associated costs of administering recruitment, retention, and training payments or on additional recruitment, retention, and training payments.

4. The individuals receiving recruitment, retention, and training payments are employees or contractors providing service coordination services for a Provider Agency at the time the Provider Agency invoices for the recruitment, retention and training payment.
5. Payments under this initiative, including the 20% that may be allocated for administrative costs, may not be used to pay recruitment, retention, and training payments to or otherwise supplement the income of a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Chief Clinical Officer, Chief Medical Officer, or equivalent Provider Agency leadership position;
6. Each Provider Agency must adopt a brief written plan that outlines the how the dollars will be used and disseminate the plan to the Department and the Provider Agency's employees and any subcontractors.
7. The Provider Agency must complete BDS 3795 SC *Recruitment, Retention, and Training Expense Report* and provide it to the Department by emailing it to HCBSARPAPayment@dhhs.nh.gov by 11/1/22. BDS 3795 SC must provide employee- and contract worker-level details on the recruitment, retention, and training payments, including records of administrative costs. Funds do not need to be expended by 11/1/22; the BDS 3795 SC can contain plans to spend RRTP funds that have not yet been spent. All RRTP funds must be spent by 3/31/2024.
8. Expenditures made by Provider Agencies under this initiative are subject to audit at the Department's discretion or from CMS, and payments made contrary to guidance are subject to recoupment by the Department and other sanctions.
9. Each Provider Agency must retain, maintain, and make available to a state or federal audit authority, or any other authorized third-party reviewer upon request, copies of all documentation related to expenditures made under this initiative, including but not limited to personnel records, NH Medicaid claims data, and provider agency financial data.
10. Misrepresentation or falsification of any information contained on BDS 3785 SC *Attestation of Requirements & Authorization to Pay Recruitment, Retention, and Training Payment* or BDS 3795 SC *Recruitment, Retention, and Training Expense Report* may be punishable by fine and/or imprisonment under state or federal law.
11. Each Provider Agency must certify that any information provided to the Department regarding this initiative, including the BDS 3795 SC report due on 11/1/22, is a true, correct, and complete statement prepared from the books and records of the Provider Agency as of the date signed.
12. The individual submitting BDS 3785 SC *Attestation of Requirements & Authorization to Pay Recruitment, Retention, and Training Payment* must be authorized to make these representations on behalf of the Provider Agency.

13. BDS 3785 SC must be submitted by emailing it to HCBSARPAPayment@dhhs.nh.gov

PROCEDURES

New Hampshire (NH) operationalizes the allocation of authorized funds under section 9817 of the American Rescue Plan Act of 2021 (ARP) for additional payments to providers via the New Hampshire Home and Community Based Services (HCBS) Recruitment, Retention & Training Payment Program (RRTP).

The estimated amount available for the state to reinvest was calculated by identifying the procedure codes/modifiers/types of service (or combination thereof) that were eligible for the enhanced 10% under Section 9817 of the ARPA. A query was run in our Medicaid Management Information System (MMIS) to determine the Fee for Service and HCBS waiver claims paid during quarter end (QE) 6/30/2021, QE 9/30/2021, and QE 12/31/2021 (using actual units claimed for 4/1/22-3/3/22 with a projection for units claimed for 3/4/22-3/31/22) using the identified procedure codes/modifiers/types of service. The amount available to NH for reinvestment is the 10% of those total expenses. Using this information, a portion of the reinvestment plan was dedicated to workforce recruitment, retention and training within the Division of Long Term Supports and Services' (DLTSS) four 1915(c) waivers. The projected funds were distributed between the four waivers based on the number of units of service coordination for each waiver.

1. NH HCBS RRTP funds will be allocated and paid to the Developmental Services system.

Distribution of funds to providers of ABD, DD and IHS HCBS was determined as follows:

- The Bureau of Developmental Services (BDS) reviewed the Medicaid Management and Information System to determine estimated actual expenditures for the period of April 1, 2021 to March 3, 2022 and estimated expenditures for the period of March 4, 2022 to March 31, 2022 for eligible codes.
- Distribution of funds to providers was determined by identifying providers of the following service codes:
 - i. DD Waiver: T2022 – Case Management Services.
 - ii. ABD Waiver: T2022 – Case Management Services
 - iii. IHS Waiver: T2025 - In Home Service Coordination
 - iv. State Plan T2023 – Targeted Case Management Services

2. Area agency payments are based on a uniform add-on payment per service unit for each of the respective codes enumerated above, to arrive at a one-time lump sum payment per area agency, as funds are available. Lump sum payments were determined using the following analysis:
 - Actual expenditures for the project period were broken out for the chosen services listed above, by service unit, for the three waivers combined.
 - A percentage of total BDS expenditures for each service unit was calculated to total overall BDS projected expenditures.
 - The calculated percentages were used to break out the allocated ARP dollar amount available to BDS in order to calculate an add-on to each service unit.
 - The add-on amount was determined for each unit to keep the dollars within the projected amounts by service unit.
3. At least 80% of the RRTP funds will be spent on:
 - Existing service coordinators and existing immediate supervisors.
 - New service coordinators and new immediate supervisors.
4. BDS 3785 SC *Attestation of Requirements & Authorization to Pay Recruitment, Retention, and Training Payment* ensures that the agency understands that:
 - BDS will make payments if the provider completes BDS 3785, to attest that the provider will use the payments for the express purpose of recruitment, retention and/or training of direct support staff.
 - The ten (10) area agencies, as NH's Designated Organized Health Care Delivery System, will distribute the funds to their sub-contractors after obtaining a copy of BDS 3785 SC from each sub-contractor. The area agencies will retain these attestation forms with their billing records.
5. Each provider agency shall develop a written RRTP plan that outlines:
 - That 80% of funds received will be used for recruitment, retention and/or training of existing service coordinators, existing immediate supervisors, new service coordinators, and new immediate supervisors.
 - How funds will be used to support recruitment, retention and/or training of existing service coordinators and/or new service coordinators.
 - The rationale of how payments will be distributed to eligible service coordinators

- The amount of payments to be distributed to eligible service coordinators. The plan shall be submitted to the NH DLTSS, and communicated with the employees of the agency and provider agencies, if applicable.
6. RRTP payments shall supplement and not supplant current agency practices and policies regarding planned bonuses and wage increases. RRTP payments cannot be used to pay for any RRTP benefit planned before May 12, 2022.

Attestations and Spending Plans

Attestations and spending plans for the RRTP payment are two separate documents. Attestations certify that at least 80% of RRTP payment will be used for the express purpose of recruitment, retention, or training of service coordinators. Spending plans are to outline how the RRTP payment will be spent specifying recruitment, retention, and/or training of each agency/provider/subcontractor.

Attestations and spending plans are to be emailed to the Department using this email: HCBSARPAPayment@dhhs.nh.gov. Attestations and spending plans should be submitted to DHHS no later than Friday July 22, 2022. The Department will be contacting each area agency by July 1, 2022 with an estimated payment amount.

Please note attestations and spending plans received after this date will be batched to be sent to MMIS periodically as deemed appropriate by the Department.

Area Agencies (AAs), as NH's Organized Health Care Delivery System, will be required to receive attestations from each of their sub-contractors, signed by the sub-contractor and AA, no later than Wednesday, July 20, 2022. Payments will not be made to the AAs until the Department has received the AA attestation and spending plan affirming that the AA has received attestations from each of their sub-contractors.

Provider Agency Expenditure Report Requirements

By November 1, 2022, the Provider Agency must submit an expenditures report to the Department on BDS 3795 SC *Recruitment, Retention, and Training Expense Report*. The BDS 3795 SC will be an excel workbook for submitting the expense report on one worksheet tab with instructions for completing the report on another worksheet tab.

In addition to this report, the Provider Agency must provide any documentation requested by the Department or CMS as part of an audit.

METHODOLOGY

DLTSS methodology for distributing one-time lump sum payments

Available funds identified above were then converted into uniform add-on dollars per unit to be paid out to providers based on the number of units of services provided under each service unit type (listed below) for the project period (April 1, 2021-March 31, 2022)

1. DD Waiver: T2022 – Case Management Services **\$8.21 per unit.**
2. ABD Waiver: T2022 – Case Management Services **\$8.21 per unit**
3. IHS Waiver: T2025 - In Home Service Coordination **\$8.21 per unit**
4. State Plan T2023 – Targeted Case Management Services **\$8.21 per unit**

The range of payments to Area Agencies will vary depending on the units served by the Area Agency.

Example Payment

For example, XYZ Area Agency who provided: 15,000 units of T1016 Case Management and 100 units of T1017 Transitional Case Management, its one-time lump sum payout would be **\$123,971** (15,100 total units of case management multiplied by \$8.21 per unit add on).

Payment will be included in your weekly MMIS Financial cycle remittance advice (RA) as a financial transaction. The payments will be itemized into 3 amounts for each 1915(c) waiver.

Attachments

Attached to this release is BDS 3785 SC *Attestation of Requirements & Authorization to Pay Recruitment, Retention, and Training Payment*, BDS 3795 SC *Recruitment, Retention, and Training Expense Report*, and a Frequently Asked Questions document.

Questions regarding this initiative should be directed to HCBSARPPayment@dhhs.nh.gov.