



NEW HAMPSHIRE
DHHS
DEPARTMENT OF
HEALTH & HUMAN SERVICES

Rate Structure Work Group

June 21, 2024

Agenda

1. Summary of Rate Workgroup Feedback on Exceptions Process
2. Draft Cost Report
3. Next Steps - Continue Cost Report Discussion

- This Rate Setting Work Group is open to the public. Members of the public may ask questions through the chat feature.
- This structure ensures that the Department can engage a diverse group of stakeholders in substantive dialogue while also providing transparency and general updates to the general public.
- If you are a member of the public and have questions about the Rate Setting Work Group and/or its work, please contact BDS@dhhs.nh.gov and a response will be provided as soon as possible.

Exceptions Request Review

Rate Work Group Engagement		Exceptions Feedback Survey
Exception Topic:	Date Discussed:	Survey Responses: 2
Exception Type (s)	3/15/24	<ul style="list-style-type: none"> No additional feedback shared
Exception Process	3/15/24	<ul style="list-style-type: none"> No additional feedback shared
Documentation Requirements	3/15/24	<ul style="list-style-type: none"> No additional feedback shared
Exception Review Timeline	4/19/24	<ul style="list-style-type: none"> Some reviews may go smoothly with less time. Some could be complex requiring more time. Some states have 90 days to review. Proposed 30 days timeline looks adequate. However, examples of time study may be helpful before making decision on timeline.
Review Team Composition	5/17/24	<ul style="list-style-type: none"> No additional feedback shared

**Feedback from all Work Group Sessions and Survey was captured in meeting notes, presentation decks and feedback tracker*

Cost Report

Cost Report Released in August 2022:

- The purpose of the initial cost report was to collect expense and service delivery data for use in developing a rate methodology and rates for select services provided through the Developmental Disabilities (DD), Acquired Brain Disorder (ABD), and In-Home Supports for Children (IHS) waivers.
- The cost report was developed with input from the Rate Work Group between March through July 2022.
 - This process included time for a Beta test of the document to incorporate feedback.
 - Providers were allowed 3 months to complete service information on the cost report.

Cost Report

The annual cost report currently under development will be used to:

- Collect cost information and other data related to services and administrative activities provided through Developmental Services.
- Provide the Department with **historical information** in order to perform data analysis and comparisons on a year-to-year basis.
 - Cost reports are **not** used to project future costs.

Cost Report

Anticipated Timeline for the First Year Submissions:

- Collect stakeholder feedback on cost report
 - June Rate Work Group Meeting
 - July Rate Work Group Meeting
 - August BDS/Provider Meeting
- Cost report released in September 2024
- Providers allowed 120 days for completion
- Cost reports due in January 2025

Cost Report

Today's discussion will cover the following sections:

- Hours
- Expenses
- Revenues
- Other general information sections, as time allows

Next Steps

Upcoming Rate Workgroup Meetings:

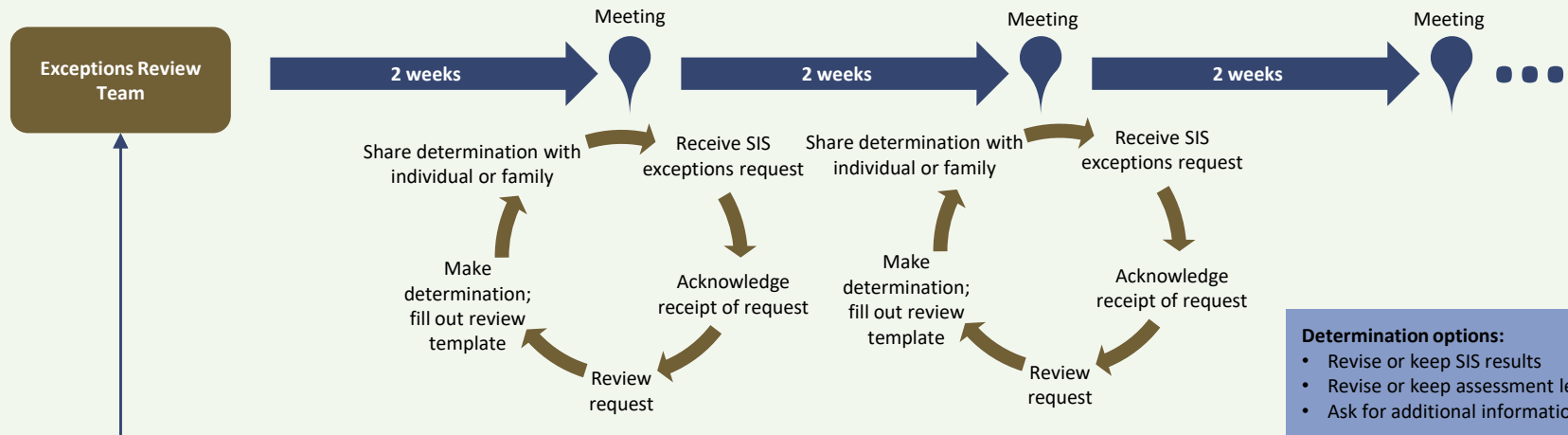
- July 19, 2024 – Continue Cost Report Review
- August 16, 2024 – Draft DD Waiver Rate Review



Appendix

Assessment Focus Group: Proposed Exceptions Process Flow

Meeting Cadence & Actions of SIS Exceptions Review Team



- Determination options:**
- Revise or keep SIS results
 - Revise or keep assessment level
 - Ask for additional information

- If not satisfied with determination:**
- Submit another exceptions request with additional information
 - Initiate formal appeals process with CMS

Process from Completing a SIS Assessment to Receiving Services



★ Steps in process where SIS exceptions can occur

Assessment Focus Group: Proposed SIS-A Exceptions Process

Exceptions Review Team	
Question	Proposed Answer
What types of people/groups should be represented in the Exceptions Review Team? (e.g., Administration, Clinical, Medical, Residential, Day)	Diverse team – Clinical perspective, functional perspective (OT/PT), nurse perspective, family representative (perhaps from a family organization), DAADS representative, service provider agency representative (rendering service provider agency), service coordinator, individual, DSP, HCP, individual not part of our current service system, administrative support professional How many people on team? Recommendation is for at least 7 group members (as identified above and an administrative support professional. Set team
What is the suggested cadence for Exceptions Review Team meetings? (e.g., every 2 weeks)	Recommendation: Every two weeks and as needed. To be adjusted based on volume. Coordinate with ISA group on timeline. Information needed after individual's select their services. If an urgent need is identified, indicate what the expected review/response time will be
Will there be one review team per region or one for the state?	Recommendation: 1 team for the state to ensure consistency
What is the process for review team alternates?	Recommendation: There should be alternates. A SOP should be developed for the Review Team to include an alternate process. Other SOP areas to consider: <ul style="list-style-type: none"> - Annual training and onboarding for exceptions team, families, staff, and individuals - Additional goals for the team (e.g., sharing information trends) - What will annual training and onboarding look like?

Assessment Focus Group: Proposed SIS-A Exceptions Process

Submitting a Query	
Question	Proposed Answer
<p>What information is needed to submit a query? (e.g., written query, additional paperwork)</p>	<p>A statement requesting an exception review and relevant supporting documentation, which could depend on the reason that the exception is being requested.</p> <p>Additional notes/considerations:</p> <ul style="list-style-type: none"> - Ensure access is considered when defining what the “statement” can be. - Examples of supporting documentation could include: <ul style="list-style-type: none"> Person Centered Planning information, if available (via 171-A eligibility info as well) Statement of reason/basis for exception request Video with reason/basis for exception request - Where will the SIS be stored? Will the team have access to it somehow or will the individual need to submit the SIS with the exception request? - Consideration: How to ensure submission of exception request and associated documentation is kept confidential and complies with federal privacy requirements.
<p>Will there be a template/form for both the request for exception and the for the Team’s review?</p>	<p>No specific form to request an exception. An exception request can be accepted in any form (written, verbal, etc.). The Team admin can capture the requests in a standardized way, respond to confirm receipt and rough timeframe for response. There should be a standardized review template for review team to ensure consistency.</p> <p>Can we incorporate the request into HEIGHTS to reduce individual/family administrative burden?</p>

Assessment Focus Group: Proposed SIS-A Exceptions Process

Submitting a Query	
Question	Proposed Answer
Is there any form of acknowledgement provided when exception query is submitted?	<p>Yes, The Team admin can capture requests in a standardized way, respond to confirm receipt and provide a rough timeframe for response.</p> <p>Clarify how BDS will communicate SIS exceptions with the PCP team</p>
Is there a maximum # of exceptions someone can ask for in a certain period of time?	<p>No. Three different reasons that someone may request an exception: 1) Routine change, 2) unexpected change and 3) new assessment needed (is the 3rd an exception? If not, define in SOP).</p> <p>Need to be clear on which path to take if someone needs change in supports or if something has happened. Distinguish between need for an exception and need for a new SIS.</p> <p>What are the flags for a new assessment within the 5-year period? Tie to a significant life change. Group will consider outlining what those life changes are.</p> <p>Can an exception be requested for immediate change while a new SIS is in progress? What if it is a temporary need and not expected to be needed long-term? Consider how waiver services will be able to support such a situation.</p> <p>What are we asking for an exception review for...rate for a specific service or overall SIS results? For IT System – Put in a clock for review. Will also provide good data for trending.</p>

Assessment Focus Group: Proposed SIS-A Exceptions Process

Rules	
Question	Proposed Answer
<p>Should there be stipulations around time periods exceptions should be requested (e.g., X# days after receipt of SIS score? X# days after SIS Assessment?)</p>	<p>As a SIS is complete, indicate what information is sent and when regarding the decisions (SIS and service level impact)? [Team will research family reports that are sent by AAIDD and versions that other States have developed]</p> <p>Who can ask for an exception?</p> <p>Reinforce that if individual is already receiving services, do they continue “as-is”</p>
<p>What are the reasons an individual may request a SIS exception? Is an exceptions request needed if a change in supports needs occurs? (or is a new SIS scheduled?)</p>	<p>Issue with the SIS itself (either info. included or the process to gather) Issue with support needs identified relative to services selected by the individual.</p> <p>If SIS assessment is upcoming but increased support needs are identified to begin immediately, PCP team will determine if “crisis” can be used to assist if additional staffing/supervision is requested.</p>
<p>What happens to an individual’s current services if they request a review?</p>	<p>The benefit levels should remain the same until a final decision is made.</p>

Exceptions Request Types – State Examples

- What are the reasons an individual may request a SIS exception?
- Is an exceptions request needed if a change in supports needs occurs?(or is a new SIS scheduled?)

Virginia

SIS-A Assessments: An individual may request a review of the SIS-A administration in response to concerns with adherence with the Virginia Standard Operating Procedures

Customized Rates: A customized rate may be requested for individuals with extraordinary medical or behavioral support needs receiving any of the following waiver services:

- Community Coaching, Group Day, In-Home Support, Group Home Residential, Sponsored Residential, Supported Living Residential
- Examples include out of state placements; state operated or specialized placements; increased staffing ratios; higher credentials; increased program oversight; medical criteria

Hawaii

Participants may request an exceptions review associated with their needs for services.

Adjustments or exceptions may be requested for the following reasons:

- Health and safety
- Additional time to make support adjustments (such as the development of natural/community supports)
- Increased services to ensure successful transition into less restricted settings, which over time will require a less intensive level of support

Exceptions Request Types – State Examples

- **What are the reasons an individual may request a SIS exception?**
- **Is an exceptions request needed if a change in supports needs occurs?(or is a new SIS scheduled?)**

Rhode Island

Emergency/crisis in individuals living situation include:

- Risk of losing living situation
- Risk of life-threatening incidents
- Repeated incidents relating to the individual's health and safety
- A new diagnosis of mid-stage organic brain syndromes
- A new diagnosis of serious mental health condition
- Development of new co-morbid conditions
- Development of significant health or medical condition

Non-Emergency request for supplemental needs but directly related to the imminent health and safety needs as well as employment needs of an individual that cannot be met within tier allocation

Maine

Exceptions are available related to services needed in excess of established monetary/funding caps available to pay for services and/or unit caps for services

Exceptions Request Types – Feedback/Recommendations

- What are the reasons an individual may request a SIS exception?
- Is an exceptions request needed if a change in supports needs occurs (or is a new SIS scheduled)?

Summary of Assessment Focus Group Recommendations/Feedback

- Reasons an individual may request a SIS exception situations involving a concern with SIS process, change of support needs
- Process needed for responding immediately to crisis situations to assist with additional staffing/supervision
- Recommend three different reasons that someone may request an exception:
 1. Routine change,
 2. Unexpected change
 3. New assessment needed
- Determine if new assessment needed is an exception and if not, develop SOP
- Define criteria for significant life change

Summary of Rate Work Group Recommendations/Feedback:

- Clearly define significant life changes -- if new assessment needed, do not see this as an exception
- A temporary rate increase could be handled through crisis funding for an identified period to allow time for the SIS review team to meet/make a decision. If the need continues after the temporary period, complete a new SIS for long term funding
- If there are significant health/safety concerns, develop a process to obtain crisis funding through BDS not exceptions
- Training for service coordinators to assist an individual/family to request an exception

Exceptions Request Types – Feedback/Recommendations

- **What are the reasons an individual may request a SIS exception?**
- **Is an exceptions request needed if a change in supports needs occurs (or is a new SIS scheduled)?**

Rate Work Group Recommendations/Feedback 3/15/24

- Keep crisis process to address short-term needs. Consider short-term funding process in the context of when a provider may need additional funding during a timeframe when the provider has given notice.
- If a professional (licensed practitioner) disagrees with the SIS results, how will this information be considered within an exception. Team should consider with additional information available (progress on goals, current staffing ratios, etc.) Team should include a clinician to ensure it is able to address feedback from licensed practitioners.
- Consider if/how SIS supports individuals who have a brain injury. Other tools are better at pointing to support needs.
- Process/procedural concerns (did the interview happen through a process that results in a valid SIS) – Appeal. Critical to ensure SIS is completed in alignment with best practices to ensure a valid SIS to avoid need for and timeframes around appeals.
- Results (how the information is applied) – Exception (appeal after exception completes)
- Some group members request consideration of allowing the provider to initiate an exception to ensure viability of provider organizations -- team approval would not be required in this instance. Team meeting to ensure communication on all steps will still be critical in this instance. Some members consider the importance of the SC/team to approve a request for an exception. Consider in both situations, the SC would be the first point of contact, hold a team meeting and determine next steps
- Distinction between an exceptions process and change in needs level. Significant change should not be addressed through an exception process. This should be addressed in the short-term through crisis funding.

Exceptions Request Process – State Examples

- Is there any form of acknowledgement provided when exception query is submitted?
- What happens to an individual's current services if they request a review?
- Is there a maximum # of exceptions someone can ask for in a certain period of time?

Rhode Island

- Completed supplemental funding request forms are submitted via email
- Requests must be submitted at least 60 days prior to the requested start date of these services
- Supplemental funding requests are reviewed by the State and decisions are communicated through written correspondence/forms
- If a supplemental request requires a tier/level change, an approval will be sent out to the individual
- Approvals require creation of a new authorization and billed using modifiers

Virginia

SIS-A Reassessment:

- A request for review may be submitted within 30 business days of receipt of SIS-A results by completing a VA SIS Review Form along with a letter that details the specific ways in which the requestor believes the VA SOP were not followed
- If errors were found a new SIS will be scheduled

Customized Rates:

- Providers and SC must submit a written request for a customized reimbursement rate via the Customized Rate Initial Application Form and accompanying documentation of individual need
- Requests are reviewed by Customized Rate Review Team to determine if documentation substantiates the need and that provider has employed staff with adequate qualifications or increased the ratio of staff to individual
- If approved, the customized rate methodology modifies existing rate methodology
- Customized rate requests must be resubmitted annually

Exceptions Request Process – State Examples

- Is there any form of acknowledgement provided when exception query is submitted?
- What happens to an individual's current services if they request a review?
- Is there a maximum # of exceptions someone can ask for in a certain period of time?

Colorado

- Support Level Request Review Form must be completed by case managers to initiate a Department review of the current Support Level
- A request is submitted when there is a temporary change in needs requiring a higher level of daily support than what has been established for the member associated with the request
- A request can only be initiated by the member, an authorized representative, or the case management agency
- The Request for Support Level Review Form, when completed as outlined, will provide a comprehensive account of the Member's support needs

Hawaii

- Exceptions decisions are determined following review of relevant information
- Participants may review the information submitted on their behalf, and may submit comments, documentation or any other relevant information
- If services are approved, the numbers of units/hours/amount/duration authorized will be specified

Exceptions Request Process – Feedback/Recommendations

- Is there any form of acknowledgement provided when exception query is submitted?
- What happens to an individual's current services if they request a review?
- Is there a maximum # of exceptions someone can ask for in a certain period of time?

Summary of Assessment Focus Group Recommendations/Feedback

- Team admin capture requests in a standardized way, respond to confirm receipt and provide response timeframe
- Benefit levels should remain the same until a final decision is made
- If there are significant health/safety concerns, develop a process to obtain crisis funding to bridge the time needed for the SIS (through BDS not the exception team)
- Clarify how BDS will communicate SIS exceptions with the PCP team

Summary of Rate Work Group Recommendations/Feedback:

- Consideration for the steps in the process where SIS exception requests can occur so as to not stall ISA and budget development
- Consider exception review team decisions (i.e., consensus/majority and prioritization of requests)
- It appears only the individual or family will be provided with the determination – recommend the guardian and service coordinator, and preferably the current provider agency as well, will also be notified
- If not satisfied with the determination of the review team, the person can submit another exception request with additional information, can request an appeal?

Exceptions Request Process – Feedback/Recommendations

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- Is there any form of acknowledgement provided when exception query is submitted?
- What happens to an individual's current services if they request a review?
- Is there a maximum # of exceptions someone can ask for in a certain period of time?

Summary of Rate Work Group Recommendations/Feedback 3/15/24

- Review team should acknowledge receipt of exception request; send to service coordinator. Service Coordinator will ensure the team is notified
- Encourage this process to be built into NH Easy so the team can follow the process. Lean into technology to create efficient and consistent communication processes.
- Crisis funds utilized to address immediate needs. Continue current crisis policy process (4-day).
- Consider that capping the number of exceptions limits rights. Shouldn't be many procedural appeals (goal to ensure SIS is valid each time). Exceptions will likely be when someone is close to another level. Need to ensure process can meet changing needs and ensure provider sufficiency in meeting needs. Group recommends no maximum number of exceptions be set. Difference between a change in life and an exception. Ensure these are defined clearly to ensure clarity in each process. Consider process after the exception decision is made. How does this intersect with 30-day post-decision appeal timeline...also, does it immediately go to appeal or can there be additional information provided to the review team...or both.

Documentation Requirements – State Examples

- **What information is needed to submit a query? (e.g., written query, additional paperwork)**
- **Will there be a template/form for both the request for exception and the for the Team’s review?**

Virginia

- Customized rate application
- ISP
- Behavioral support plan/data (if applicable) including history of crisis, frequency of behaviors and interventions required
- Health Supports data (if applicable) - medical reports, protocols, specialized supervision data, nursing care plan
- Staff credentials - copy of certifications and degrees for all employees who will provide supports to individual
- Crisis plan (if applicable)
- Staffing plan (using template provided by Dept)
- Overnight supports data

Colorado

- Detailed description of the Member’s need(s). Give specific examples of staff support, particularly supports beyond reminders and verbal prompts
- Onset date of new diagnosis (if applicable) or changes in condition
- Interventions associated with the member’s needs
- Time dedicated each day/week to meeting person-specific needs
- Specific details on current and/or significant life changes
- How pre-existing supports may be enhanced with additional funding

Documentation Requirements – State Examples

- **What information is needed to submit a query? (e.g., written query, additional paperwork)**
- **Will there be a template/form for both the request for exception and the for the Team’s review?**

Maine

The exception request must include:

- Proposed level of service
- Anticipated duration of the exception
- Statement of risk involved without an exception (particularly related to institutionalization or segregation)
- Outline of whether the needs can be met through another service or combination of services
- Description of the need in relation to accessing community services

Rhode Island

- Documentation required to substantiate the Major Life Change:
 - Medical assessment
 - Nursing Care Plan
 - Psychiatric assessment
 - Current Behavior Support Plan or Safety Plan
- Documentation for Additional Funding Requests:
 - Progress Notes -- Medical, Psych, PT, OT
 - Current supports summary detailing reasons why additional supports are being requested
 - Behavioral/Medical Plan (Including diagnosis)
 - Supported Employment -- Career Development Plan, job form, and 3 months of job coaching notes

Documentation Requirements – Feedback/Recommendations

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- **What information is needed to submit a query? (e.g., written query, additional paperwork)**
- **Will there be a template/form for both the request for exception and the for the Team's review?**

Summary of Assessment Focus Group Recommendations/Feedback

- Examples of supporting documentation could include: Person Centered Planning information, Statement of reason/basis for exception request, Video with reason/basis for exception request
- Ensure submission of exception request and associated documentation is kept confidential and complies with federal privacy requirements.
- Consider exceptions requests being incorporated into HEIGHTS to reduce individual/family admin burden
- Establish clear requirements for submissions – not overly difficult or time consuming
- Allow submissions in any form (written, verbal, video, person centered planning information ,etc) to ensure accessibility
- Require standard review process / template to ensure consistency

Summary of Rate Work Group Recommendations/Feedback

- There should be a template for an exception request and consistent expectations for what information is provided when requesting an exception
- If the purpose of the exception team is to review specific exceptions for individual SIS's they should not have access to all SIS's. Access should be "need to know"
- Agree with exceptions being requested in NH Easy

Documentation Requirements – Feedback/Recommendations

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- **What information is needed to submit a query? (e.g., written query, additional paperwork)**
- **Will there be a template/form for both the request for exception and the for the Team's review?**

Summary of Rate Work Group Recommendations/Feedback 3/15/24

- Consider two-page form created by BDS with nurse/practitioner justification. Attach documentation that supports narrative. Narrative should be brief in favor of documentation. Narrative of request or existing documentation that may provide narrative/justification such as progress notes, contact notes.
- Current support level and associate rate initially determined and what support level and rate is being requested and why (salary, support level, staffing, etc.). Timeframe for level/rate being requested.
- Behavioral support plans & Medical Plans
- Recommend tracking reasons for requests to trend and determine.
- Consider system/metrics for scoring of information provided (not the individual) for review.
- Ensure strong process/clear guidelines to ensure there is not a “back and forth” process. Do not ask documents to be submitted that are already available to the team and necessary releases (when necessary).
- Process should balance subjectivity (sometimes necessary, sometimes not).
- Consider inviting the SC to the review to present the request.
- Have a QA process for requests, communicate information to ensure process working well and forms are sent with necessary information.
- Should be a checklist/cover sheet and instructions.
- Build form into NH Easy. For the physical form, ensure pdf has form-fill functionality. If/when built into NH Easy, ensure future individual/provider view shows exception process.

Additional Research – Exceptions Rate State Examples

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What is the experience/trend of exceptions requests from other states?

Percentage of Service Recipients with Exceptions

- Of the states contacted/responded, the range for the percentage of total individuals who received an exception was between 2%-8%.
- In Rhode Island, the percentage of total service recipients who received an exception was nearly 8%.
- In Virginia, less than 1% of service recipients requested a reassessment of the SIS-A due to a significant life change which resulted in a need to adjust levels of service.

Factors Influencing Exceptions Volume

- Cadence of exceptions/heightened funding – States approve exceptions for different periods of time, leading to varying amounts of exceptions throughout the year.
- Requests for reassessments in some states are restricted to significant and sustained increases in support needs for a period of six months.
- Some states have restricted certain service types from eligibility for exceptions process.
- Rhode Island removed SEP from their exceptions process, and instead automatically approves all requests for supplemental funding related to SEP.

Exceptions Request Timelines – State Examples

- What is the suggested cadence for Exceptions Review Team meetings? (e.g., every 2 weeks)
- Should there be stipulations around time periods exceptions should be requested (e.g., X# days after receipt of SIS score? X# days after SIS Assessment?)

Virginia

SIS-A Assessments: A final decision will be rendered within **60 business days** of the date of receipt of the Review Form by DBHDS. Notification to the requestor and SC/CM will be sent **within 3 business days** of the decision

Customized Rate: Applications are reviewed in less than **30 days from receipt**

- Applications are processed differently based on SIS level
- If levels 1-5, the application must be reviewed prior to review by the Customized Rate Review Committee (CRRC). This process can take 3-4 weeks in total (may include onsite review)
- Levels 6-7 will go directly to the CRRC for review. Decisions will be communicated to the provider within 5-7 business days following a decision

Maine

- Once all information is received, the department will make a determination **within 60 business days**

Rhode Island

- Requests for additional funding must be submitted **at least 60 days prior to the requested start date** of services
- Requests are viewed on a weekly basis by the DD Committee

Exceptions Request Timelines – Feedback/Recommendations

- What is the suggested cadence for Exceptions Review Team meetings? (e.g., every 2 weeks)
- Should there be stipulations around time periods exceptions should be requested (e.g., X# days after receipt of SIS score? X# days after SIS Assessment?)

Summary of Assessment Focus Group Recommendations/Feedback

- Every two weeks and as needed. To be adjusted based on volume. Coordinate with ISA group on timeline. Information needed after individual's select their services
- If an urgent need is identified, indicate what the expected review/response time will be
- Build into the IT system a clock for review. Will also provide good data for trending

Summary of Rate Work Group Recommendations/Feedback

- Concerns on when the SIS exceptions process can occur and potential delays with ISA and budget
- Exception team needs to quickly convene to address the need/recommend approving temporary increase in funding
- Frequency of meetings should be determined by volume of requests, as proposed, may not meet the need

Exceptions Request Timelines – Feedback/Recommendations

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- What is the suggested cadence for Exceptions Review Team meetings? (e.g., every 2 weeks)
- Should there be stipulations around time periods exceptions should be requested (e.g., X# days after receipt of SIS score? X# days after SIS Assessment?)

Rate Work Group Recommendations/Feedback 4/19/24 – Slide 1 of 3

- *The final process should clearly outline a timeframe for each step of the process (acknowledgement of request, review time, cadence of review meetings, etc.) with a 30-day turnaround being preferred by stakeholders. The process should also be uniform to ensure consistency across requests. (3.15.24)*
- *The timeline for acknowledgement of receipt of an exception request should be limited to 7 days from the date of submission. (3.15.24)*
- *The Exception review team should schedule the review within 14 calendar days of receipt, and then make a judgement on an exception within 7 calendar days of that meeting. The goal should be to keep this process within the 30 days. The acknowledgement of receipt should explain this schedule to the requestee. (3.15.24)*
- Set a standard, reoccurring meeting cadence for the Review team. For example, the review team could meet the first and third Monday of each month (twice per month cadence) with all decisions finalized by the Friday of each review week to ensure the process stays within the 30-day period.
- Include an emergency meeting process where the team would convene sooner to review an urgent need.
- Consider two request types: typical service planning and an emergency process. Should an emergency process flow through the Crisis Process team instead?
- Communicate very clearly to the requestee when their request will be reviewed and the deadline for submission of supporting documentation.
- Create a beginning to end process flow which clarifies if/when crisis funding will be applicable.

Exceptions Request Timelines – Feedback/Recommendations

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- What is the suggested cadence for Exceptions Review Team meetings? (e.g., every 2 weeks)
- Should there be stipulations around time periods exceptions should be requested (e.g., X# days after receipt of SIS score? X# days after SIS Assessment?)

Rate Work Group Recommendations/Feedback 4/19/24 – Slide 2 of 3

- Consider a structure for a team meeting [could be the submitting entity/SC/AA and the liaison] to discuss needs. Could use current meetings as well to determine short term (crisis funding) vs long-term (crisis funding and/or exception).
- Consider allowing 60 days to put through a request.
- If an exception is granted, consider requiring that a new SIS be completed within the following 365 days (consider if SIS can be completed at frequency to meet this volume). Or does the exception stand until the next SIS? Consider adding a timeframe for approval and/or need for review. At the next planning meeting, the team could discuss to ensure the level still meets the individual's needs (increase or decrease), if there is a need for a new SIS or exception if increased needs are still identified. A standard review form/process should be developed to ensure oversight, ease of process, consistent process. Results to be provided to the review team...or just reflected in the ISA or quarterly?
- Consider not more than two (2) exceptions in a defined period of time or instead, consider limiting who can submit the exception, such as SC only. Consider the availability (or requirement) of Area Agency pre-review of exceptions to determine the need or other options, or AA review after approved exception (based on the Review team's duration decision). Consider how AAs will operationalize this review to ensure there is not a conflict and that a process would need to be developed in alignment with the exception process rollout. AA should be copied (through NH Easy perhaps) that an exception was requested and the decision. Consider AA being able to offer endorsement and why (or not endorsed and why) with decision of AA endorsement not being required in order to submit.
- Request forms should also have a spot for SC endorsement and why (or not endorsed and why).

Exceptions Request Timelines – Feedback/Recommendations

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- What is the suggested cadence for Exceptions Review Team meetings? (e.g., every 2 weeks)
- Should there be stipulations around time periods exceptions should be requested (e.g., X# days after receipt of SIS score? X# days after SIS Assessment?)

Rate Work Group Recommendations/Feedback 4/19/24 – Slide 3 of 3

- If the need is anticipated to be for less than a year, should be a crisis request and not an exception UNLESS there is a situation where commitment of the higher rate is necessary to ensure service planning. For example, a new provider is identified and selected but will require commitment of ongoing funding.
- Ensure guidelines for best practices but ensure flexibility to meet individual needs. We do not want guidelines that are so rigid that it prevents teams from meeting a need.
- Resources should be created and shared to the BDS website to provide clarity and training on the process.
- Consider allowing for an exception request if there is not a SIS currently in place (NHH discharge or expired SIS) to ensure service planning is not impacted. Will there be a separate process outside of exception review, such as planning team evaluation/determination of support needs with a review after 6 months to use SIS data?
- Consider guidelines around how many exceptions can be requested.
- Consider built in system review of practice every two years. Keep a uniform practice.
- Ensure as much of the process is built into in NH Easy as possible to ensure transparency, availability of data for review and ease of flow.

Exceptions Request Review Team – Feedback/Recommendations

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- What types of people/groups should be represented in the Exceptions Review Team? (e.g., Administration, Clinical, Medical, Residential, Day)
- Will there be one review team per region or one for the state?
- What is the process for review team alternates?

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- **Cadence of Review Team Meetings:**
 - *The review team could meet the first and third Monday of each month (twice per month cadence) with all decisions finalized by the Friday of each review week to ensure the process stays within the 30-day period. (4/19/24)*
 - Workgroup still feels that this timeline feels appropriate, crisis funding would continue to be utilized to support immediate needs for individuals. Consider evaluating cadence on ongoing basis initially to ensure the frequency of meetings keeps up with the volume of requests. Perhaps more frequent meetings initially (consider weekly). This will ensure reviews are done timely and frequent connection between the review team.
- **Review Team Composition:**
 - *Team should include a clinician to ensure it is able to address feedback from licensed practitioners (3.15.24)*
 - One centralized, core team – taps into subject matter expertise from around the state and uniformity of practice.
 - Local teams also recommended. Is there flexibility (threshold) that can be created for use at service coordination/AA level? If local review teams are established, there will need to be frequent sessions to ensure uniformity. Should be alternates on teams.
 - For individuals already receiving services, consider provider agency rep, DSP, family member, AA rep etc. having the ability to present to the review team – ensure process is straightforward, don't want a hearing/courtroom feeling. Not every exceptions request will need to be presented to team.
 - Florida model = Local Review Committee (similar to HRC in NH). Consider ensuring multidisciplinary team members with varying skills and backgrounds such as SC supervisor, provider agency rep to ensure clinical understanding as well as service delivery and finance.
 - Closed review/deliberation – groups waiting to meet with team should not be able to hear requests from other individuals.
 - Consider narrow group – BDS Clinical administrator, SIS evaluator, nurse, BDS liaison, ITS expertise (provider), behavioral, 2 AA reps (lead and alternate or rotating based on region of request).
 - Subject matter expertise for team: SIS evaluator (someone with SIS experience), clinician (with behavioral background) one from a provider agency and one from BDS, nurse, ITS background, all should have experience in supporting individuals and our services, BDS representation such as Liaison. These do not need to be separate members if some have multiple areas of expertise.
 - If representative with lived experience consider the funding and policy adherence consideration.

Exceptions Request Review Team – Feedback/Recommendations

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- *Additional Considerations/Needs for Review Team*
 - Releases and confidentiality. Consider Business Associates Agreement for the review team members.
 - Ensuring there is no conflict of interest
 - Use technology, as appropriate (i.e., virtual review team meetings)
 - All appeals of review team decisions should go through AAU directly
 - Be clear of role of exception team review – is it a clinical review...ensure the team is comprised of members who meet the goal of the group.
 - When the SIS is completed, who on the team receives the results and the determined support levels for review? Timeline needed for initial and renewal of SIS reviews and ensure there is a transition timeline when moving between staffing ratios (and resulting support level).
 - Timeline:
 - Local – submission to SC. SC has 5 business days to review and schedule team meeting, if needed, (within 14 days of request if team meeting has not already occurred – incorporate into 503 requirements for ISA development). Following the meeting, SC has 14 calendar days to submit paperwork to the review team.
 - Review team includes in the next review meeting. Decision issued by the following Friday unless additional information needed (consider establishing timelines for responding to requests for additional information). Once additional information is received, goes back to the review team at the next meeting.
 - Consider the change approval being retro to the request date, when applicable if already receiving service.
 - Ensure consistency across multiple review teams across the state
 - Create standardized uniform processes
 - Consider exceptions first going to AA representative for awareness/notification.
 - Possible workflow/process: SC Agency makes Tier 1 decision. If supported moves to exception review team and copies AA rep. If individual/guardian/provider agency requests that it move to AA, SC agency will include a statement or rationale.