

# Progress Tracking for Louisiana Statewide Transition Plan 2017 Q1

## I. Louisiana Office of Aging and Adult Services

### A. OAAS Update to Louisiana Work Plan Master

Action Step	Date(s) and Status	Plan Update Narrative
<b>Public and Stakeholder Engagement</b>		
Convene interagency group to manage planning process	Began 9/22/14 and continuing through 3/2019	Meetings were held on the following dates to discuss transition plan action steps and revisions to the transition plan requested by CMS: 1/18*,1/19,1/25*,1/26*,2/20*,2/21,2/28  * Interagency STP Workgroup Meetings to discuss responses to CMS and revise the STP to meet CMS requirements. Included in these meetings were discussions to coordinate timelines where possible.
Develop and update website on a regular basis on external stakeholder comments	10/01/14 – 3/20/19	The OAAS website is continually updated with new or revised documents to reflect actions and work completed towards the transition plan.
Support ongoing stakeholder communications.	11/19/14-3/20/2019	Held public forum (including OAAS stakeholders) on 11/19/14 and continuing as needed through 3/2019. Stakeholders are informed of STP’s progress through provider association meetings, OAAS quarterly provider meetings, and support coordination executive meetings.

		Website updated 10/26/16 with changes to Louisiana Work Plan Master.
Reach-out to providers and provider associations to increase understanding of rule and maintain open lines of communication.	3/13/15-02/2017	Provider outreach continued through September 2016 for Louisiana Work Plan Master public comment and will continue through February 2017 to complete validation and remediation work.
Continued Community Outreach	Began 9/22/14 and continuing through 3/2019	Continue to meet with participants, family members, providers, support coordinators, and stakeholders, and providers to provide updates on the progress of STP activities. Contact methods include provider quarterly meetings, support coordinator executive meetings, conferences, correspondence, website updates, newspaper announcements and general meetings.
<b>Ensuring Providers are Compliant</b>		
Providers who are not in compliance and wish to remain enrolled as waiver providers will submit a corrective action plan. Non-compliance may not extend beyond March 17, 2019	3/1/16-2/28/17	Providers who are not in compliance were identified following ADHC site visits in Q4 2016. Corrective action plans were developed and will be distributed to providers in Q2 2017.
Louisiana will conduct on site reviews to evaluate validity of remediation compliance.	9/16-2-17	ADHC site visits were conducted by OAAS regional office staff in Q4 2016. OAAS state office staff reviewed the site visit documents and evaluated the validity of met and unmet items. Ten ADHCs were identified as needing corrective action plans. These corrective action plans will be developed and distributed to providers in Q2 2017.
Implementation of a transition plan will be developed for those needing to transfer to an appropriate HCB setting. Individuals will be given timely notice and a choice of alternative providers. Transition of individuals will be tracked to ensure successful placement and continuity of service.	3/1/16-3/1/17	Development of an implementation of a transition plan for transfer to an appropriate HCB setting will occur in late 2017.

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B.OAAS Public Comments Received 1/1/17 – 3/31/17

No Public Comments were received.

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C. OAAS Summary of Comments: N/A

## II. Louisiana Office for Citizens with Developmental Disabilities

### A. OCDD Update to Louisiana Work Plan Master

Action	Date(s) and Status	Plan Update Narrative
<b>Public and Stakeholder Engagement</b>		
Convene Interagency group to manage planning process.	9/22/2014 and ongoing through 3/2019	<p><b>3/31/17 Update</b></p> <ul style="list-style-type: none"> <li>• Feedback received from CMS related to transition plan on 1/13/17. Cross office workgroup met on 1/18/17 to discuss feedback received and to begin work on addressing issues identified. Scheduled a call with CMS to discuss feedback on 2/3/17.</li> <li>• Cross office group met on 1/26/17 to discuss summary of information that Suzanne pulled together. Identified specific questions to discuss with CMS.</li> <li>• Call with CMS on 2/3/17-to discuss areas of concern. Based on information received from CMS both in writing and by phone OCDD updated systemic assessment crosswalk, located additional information to support OCDD’s public comment process, and submitted all information to Suzanne.</li> </ul> <p>2/19/17-Cross agency meeting to discuss adding HCBS language to the general provision section of the waiver rule.</p>
Support ongoing stakeholder communications.	11/2014 and ongoing	<p><b>3/31/2017 Update</b></p> <ul style="list-style-type: none"> <li>• Meeting on 1/10/2017 with leadership at LARC to review some of the strategies that they are implementing to come into compliance with the rule.</li> <li>• Attended provider meeting in the SCHSA on 1/11/17 to</li> </ul>

Action	Date(s) and Status	Plan Update Narrative
<b>Public and Stakeholder Engagement</b>		
		<p>provide an update on the HCBS transition plan.</p> <ul style="list-style-type: none"> <li>• Provided Updates on 1/18/17 related to the HCBS transition plan to the DD Council Employment Committee.</li> <li>• 1/19 Validation visit-Baton Rouge-Natural Embraces</li> <li>• 1/24 Validation visit-Baton Rouge-Omni House</li> <li>• 1/25 Validation visit-Baton Rouge-Bethesda Adult Day Program</li> <li>• 1/31 Validation visit Baton Rouge-A Step Forward</li> <li>• 2/1 Validation visit Baton Rouge-Iberville ARC</li> <li>• 2/7-2/8-Rosemary from Central office provided technical assistance to the LGE office related to the Service provider transition plan.</li> <li>• 2/9-2/10-Central Office conducted validation visits in Shreveport area (Hap House, Care Services, and Community Angels)</li> <li>• 2/15-Intenal workgroup discussed possible action items related to employment</li> <li>• 2/16- CO representative attended Employment First workgroup</li> <li>• 2/17-Attended Work Pays workgroup</li> <li>• 2/20-Represenatatives attended State Use Council meeting</li> <li>• 3/6 and 3/7 employment sub-committee meeting</li> <li>• 3/8-attended region 6 quarterly provider meeting to provide updates related to HCBS</li> <li>• 3/18-Governor’s Advisory Council on Disability Affairs meeting</li> <li>• 3/22-Technical Assistance call with G.B. Cooley in</li> </ul>

Action	Date(s) and Status	Plan Update Narrative
<b>Public and Stakeholder Engagement</b>		
		<p>Monroe related to developing transition plan to come into compliance with HCBS rule.</p> <ul style="list-style-type: none"> <li>• 3/22-employment sub-committee meeting</li> <li>• 3/23-Employment first workgroup meeting</li> <li>• 3/30/17 provider validation visit</li> </ul> <p>OCDD will continue to provide technical assistance to all service provider agencies as requested (will partner with LGE offices where appropriate).</p>
Create method to track and respond to public comments.	1/1/15 – 1/31/15	Created spreadsheet. Internal discussions needed potentially related to modifying tracking mechanism.
Collect all public comments. Synthesize comments and develop responses to comments (Will go into transition plan for CMS).	Begin 9/2014 and ongoing through 3/2019	<b>Update 3/31/17</b> -no comments received during this period.
<b>Program Review and Assessment</b>		
Review licensure, certification, policy/procedure and provider qualifications.	<p>10/1/14-initial review</p> <p>In depth analysis- 2/2016 – 3/20/16</p> <p>Adjusted timeline: 9/30/16*</p>	<b>3/3/2017</b> -Received initial approval of STP from CMS.

Conduct site visits.	1/1/16 – 3/31/17*	<p><b>Update 3/31/16</b>-the LGE offices have started to complete site visits. State Office has participated when requested.</p> <p><b>Update 6/30/16</b>-Per recent technical assistance/feedback from CMS (reference letter/date) it is OCDD’s understanding that the validation component of the STP does not have to be completed for initial approval. OCDD is revisiting validation</p> <p><b>Update 3/31/17</b>—Both the LGEs and Central office continue to conduct onsite validation visits with all vocational providers.</p>
Monthly progress reported by LGE offices related to site visits/desk audits.	1/1/16 – 12/31/16	<p><b>Update 3/31/17</b>--some of the requested information has been received by Central Office from the LGE offices. Rosemary Morales from Central Office has been following up with each office to assure that we receive all information.</p> <p>Approximately 40 site visits have been completed for vocational programs. Central Office and LGE offices to continue validation visits to be completed by the end of 3/31/17</p> <p>2/20/17-Identified that statewide there are 86 Active day program providers. Of the 86 validation visits have been completed with 61 agencies.</p> <p>3/9/17-conducted site visit with Sabine Arc</p> <p>3/10/17-conducted site visit with Natchitoches Arc</p> <p>3/14/17-conducted site visit with Pineco</p> <p>3/15/17-site visit with Rescare</p> <p>3/16/17-site visit CARC</p> <p>3/17/17-site visit with Preferred Living</p>
Analysis of findings from site visits and assessments.	6/1/16 – 4/30/17*	<p><b>Update 3/31/17</b> - Beginning the process of analyzing the information; however, as noted previously additional validation to be completed, thus timeframe for this activity to be extended.</p>

Participant survey due	7/15/16 Completed first phase 3/31/17* for next phase	<b>Update 3/31/17</b> -Support Coordination continues to complete individual experience surveys with all waiver individuals. Expected completion March. OCDD to compile the information and identify based on the results whether or not additional corrective action will be needed by the service provider agencies.
Analysis of participant survey findings.	7/15/16 – 4/30/17*	<b>Update 3/31/17</b> -In process of consolidating participant survey data.
<b>Ensuring a Quality System</b>		
Based on crosswalk outcomes of all licensing, certification, policy/procedures, and provider qualifications address any areas of concern to strengthen language to align with CMS rule	1/1/16 - 12/31/17*	<b>3/31/17 Update</b> —OCDD has drafted language for NOW rule. As we process rule/amendment changes in the other 3 waivers during the next several months, language will be added to all waiver rules. Feedback shared with Health Standards regarding changes needed to licensing requirements to align with the rule.  2/20/17-discussed in cross agency meeting on 2/19/17 to include language in the general provisions section of the rule rather than inserting language into each waiver rule. Also discussed coordinating a meeting with Health Standards regarding licensing regulations.  2/24/17-met with Health Standards regarding changes needed to the licensing regulations to align with CMS rule.
Evaluate current plan of care format/process, rights/responsibilities, other waiver forms and update as appropriate to align with the rule.	3/14/16 - 12/31/17*	<b>Update 3/31/17</b> —Workgroup met on 2/6/17.



B.OCDD Public Comments Received 1/1/17 – 3/31/17  
No Public Comments were received.

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C. OCDD Summary of Comments Received 1/1/17 – 3/31/17  
N/A

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### III. Louisiana Office of Behavioral Health A.OBH Update to Louisiana Work Plan Master

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Action	Date(s) Status	Plan Update Narrative
<b>Public and Stakeholder Engagement</b>		
Convene interagency group to manage planning process	Began 9/22/14 and continuing through 3/2019	OBH participated in interagency STP workgroup meetings.
Support ongoing stakeholder communications	Updated 3/15/17	Public notice sent to stakeholders through email and website updates to announce STP Initial Approval by CMS.
<b>Program Review and Assessment</b>		
Distribute participant/member survey.	Began 3/1/16 and ongoing through 2/28/17	Magellan distributed the member survey to the WAAs on 2/26/16. Through the monitoring process, WAAs will work with participants to distribute and complete the surveys through 2/28/17.
Conduct site visits	Began 3/1/16 and ongoing through 2/28/17	<p>In Q1, Magellan CSoC Coordinators reviewed 93 member records to ensure compliance with the HCBS requirements. Of those 93 records, all 93 members showed compliance with HCBS requirements for a compliance rate of 100%.</p> <p>In Q1, Magellan reviewed 3 waiver providers for credentialing/re-credentialing. All 3 providers showed compliance with all elements of the provider survey and credentialing process. Magellan also conducted 7 onsite audits, with 100% compliance of HCBS setting indicators.</p>

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B. OBH Public Comments Received 1/1/17 – 3/31/17:

No public comments were received.

C. Summary of Comments Received:

N/A

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