

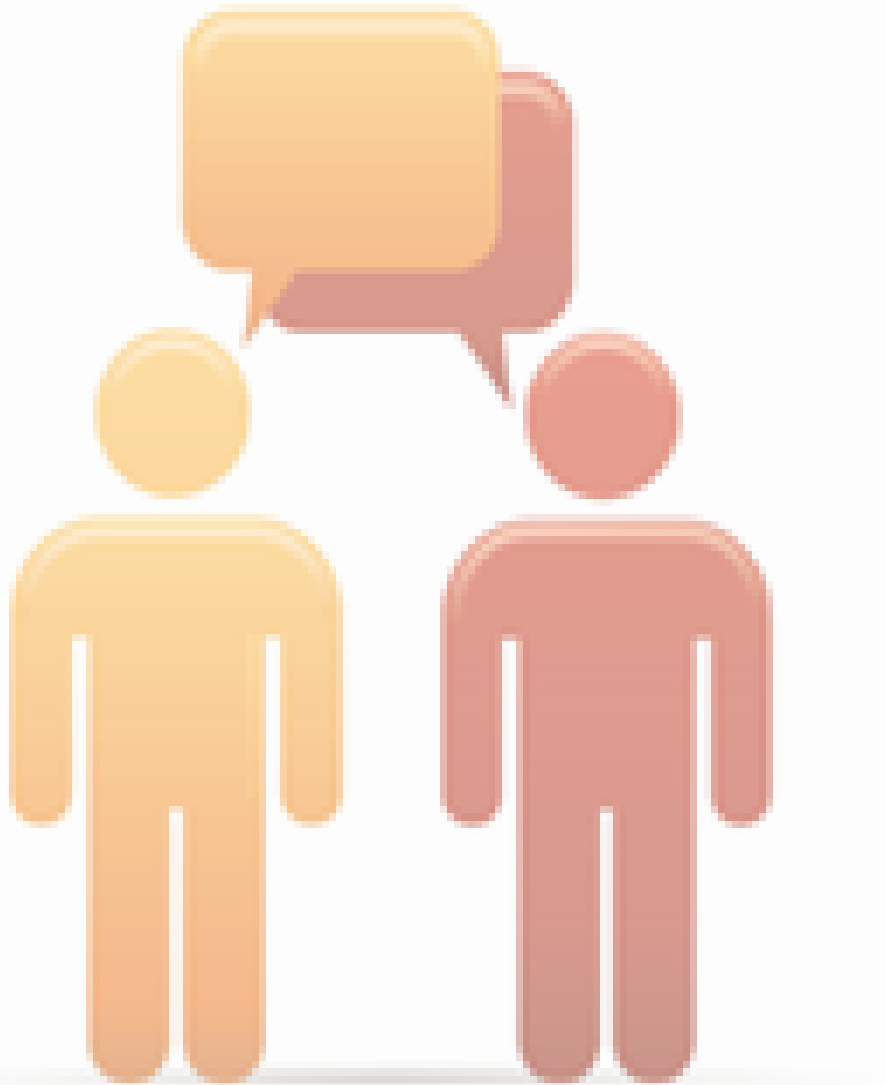


SELF-DETERMINATION PROGRAM (SDP) PROVIDER UPDATE

*Presented By: ACRC, ACRC Providers and the Self
Determination Advisory Committee*

November 2021

Working Outside the Box with Providers in Self Determination



SDP Innovation and Flexibility

- Unmet needs prior to SDP
- After SDP Implementation

SELF DETERMINATION OVERVIEW

The Self Determination Program became available to all Regional Center Clients on July 1, 2021, with the exception of:

- Those residing in Skilled Nursing or Intermediate Care Facilities
- Those under the age of 3 without an eligible diagnosis



Self Determination gives participants the opportunity to:

- Customize services to meet their needs and achieve desired outcomes
- Broaden choice of providers
- Gain control and flexibility in spending their budget

SELF DETERMINATION OVERVIEW

Participants electing to transition to Self Determination may be looking for:

- A way to address unmet needs
- Options in selecting and hiring providers, including non-vendored providers, or providers vendored by another Regional Center
- Flexibility in Service Delivery, including reimbursement rates, to achieve desired outcomes



Note:

Participants must complete enrollment steps, including a mandatory online orientation, to be eligible to participate in SDP.

Non-vendored providers as well as vendored providers must still be screened by the FMS for HCBS compliance, clear LiveScans and any required certifications, licenses, etc.

SELF DETERMINATION OVERVIEW

5 PRINCIPLES OF SELF-DETERMINATION

**The Participant
Is In Charge!**

**The SDP is
Person Centered!**

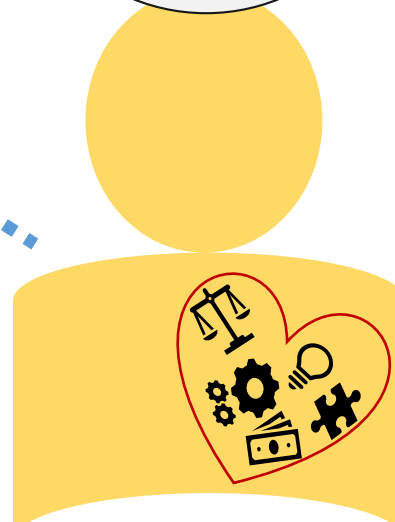
FREEDOM
The right to plan
your own life and
make your own
decisions

AUTHORITY
Control funds for
services within a
certified
budget

SUPPORT
Pick supports and
people that help
you live, work,
and play

RESPONSIBILITY
Make decisions
in your life and
have a valued
role in your
community

CONFIRMATION
You are the
decision maker
about your life



SELF DETERMINATION OVERVIEW

SELF-DETERMINATION VS. TRADITIONAL SERVICES

<u>Traditional Services</u>		<u>Self-Determination Program</u>
<ul style="list-style-type: none">• Person-centered planning → IPP		<ul style="list-style-type: none">• Person-centered planning → PCP* → IPP
<ul style="list-style-type: none">• Service Coordinator (SC)		<ul style="list-style-type: none">• Independent Facilitator (or SC)
<ul style="list-style-type: none">• Funding – approved by RC pursuant to Needs/Goals/Objectives		<ul style="list-style-type: none">• Funding: Individual Budget, adjusted for Unmet or Change in Needs
<ul style="list-style-type: none">• Clients referred by RC		<ul style="list-style-type: none">• Clients acquired in competitive market
<ul style="list-style-type: none">• Vendored providers contract with RC		<ul style="list-style-type: none">• Vendored or non-vendored providers contract with Participant and FMS
<ul style="list-style-type: none">• Reimbursement from RC		<ul style="list-style-type: none">• Reimbursement via Financial Management Service (FMS)

*Optional

SELF DETERMINATION OVERVIEW

Why Independent Facilitator Relationships Are Important

IF Role

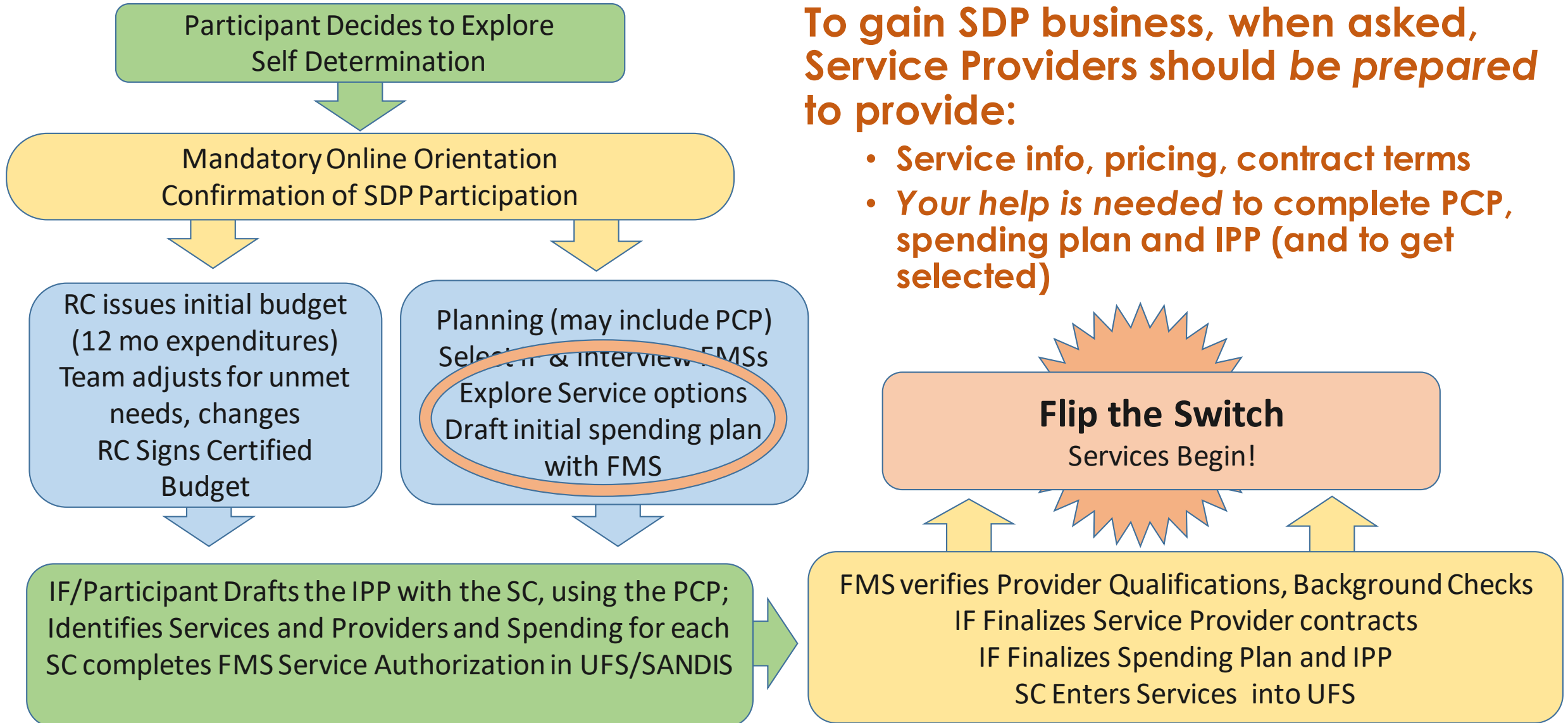
- Many IFs are also trained to provide person centered planning services
- Independent Facilitators will locate and screen potential providers
- Independent Facilitators will help negotiate the contract between provider and Participant
- Over time, Independent Facilitators will develop a network of trusted providers, and a customer base of SDP participants
- IFs are also forming online networks

SDP Provider Business Implications

- Discussions with an IF during PCP formation may present the first opportunity for a provider to market its service options
- Establishing IF relationships will help an SDP provider to be considered by subsequent new SDP Participants
- A provider that develops standard but flexible contracts will help IFs and Participants to proceed in the SDP
- Professional IFs are a potential source of repeat business; family IFs are an important source of references.
- SDP service marketplaces could emerge

SELF DETERMINATION OVERVIEW

Know the Steps



To gain SDP business, when asked, Service Providers should be prepared to provide:

- Service info, pricing, contract terms
- Your help is needed to complete PCP, spending plan and IPP (and to get selected)

Flip the Switch

Services Begin!

FMS verifies Provider Qualifications, Background Checks
IF Finalizes Service Provider contracts
IF Finalizes Spending Plan and IPP
SC Enters Services into UFS

GETTING TO THE SDP SPENDING PLAN

12 Month \$ → Certified Individual Budget → SDP Spending Plan

Traditional Services Framework

Initial Budget/ 12 Month Expenditures:

For traditional services, adjusted for part year, 1 time services



Certified Individual Budget:

Adjust for unmet or changed needs, circumstance or resources



SDP Framework

Access funding for Generic services:

What services will **not** be funded from the Certified Budget?



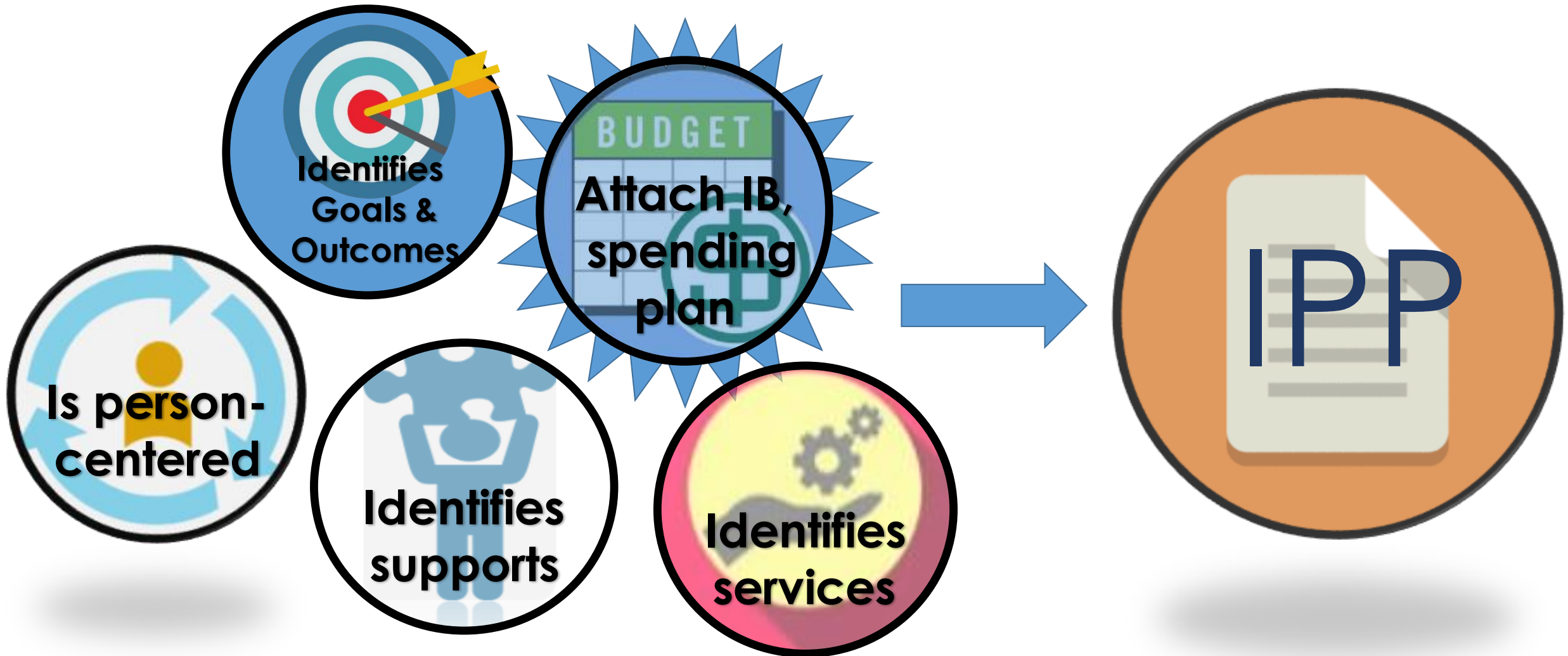
Itemize SDP Services:

- Who?
- How often?
- When?
- Length of time?
- Cost?

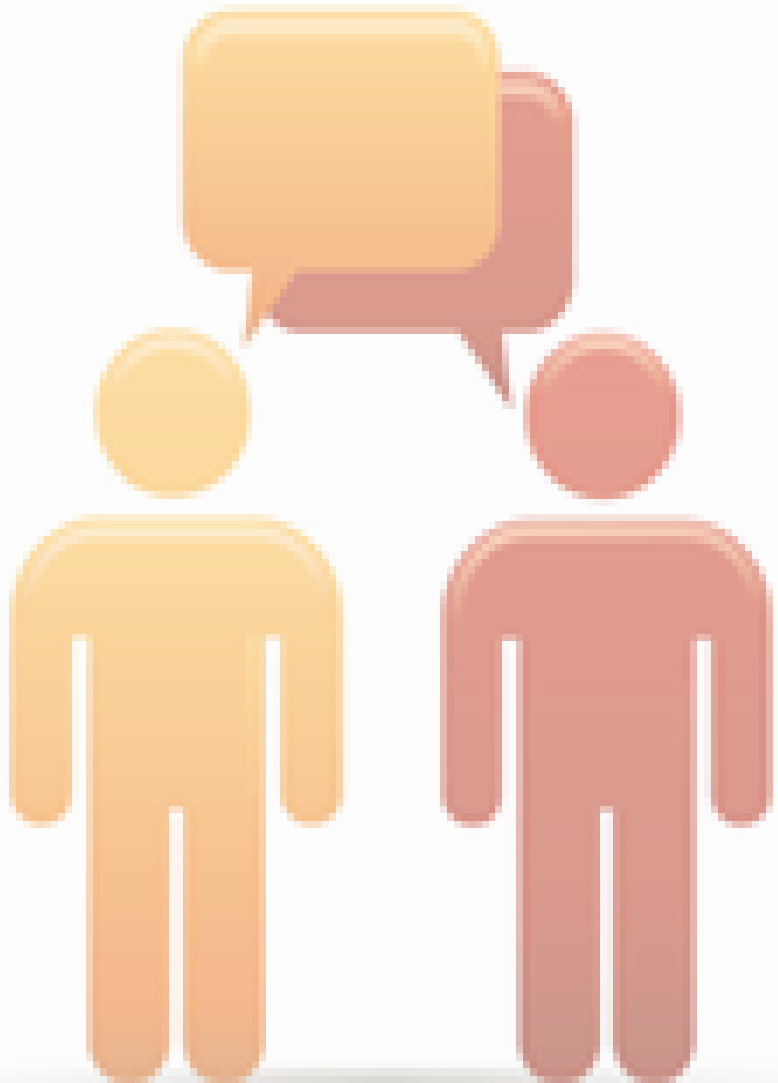


SDP FUNDING

A SDP INDIVIDUAL PROGRAM PLAN (IPP) *INCLUDES THE SPENDING PLAN*



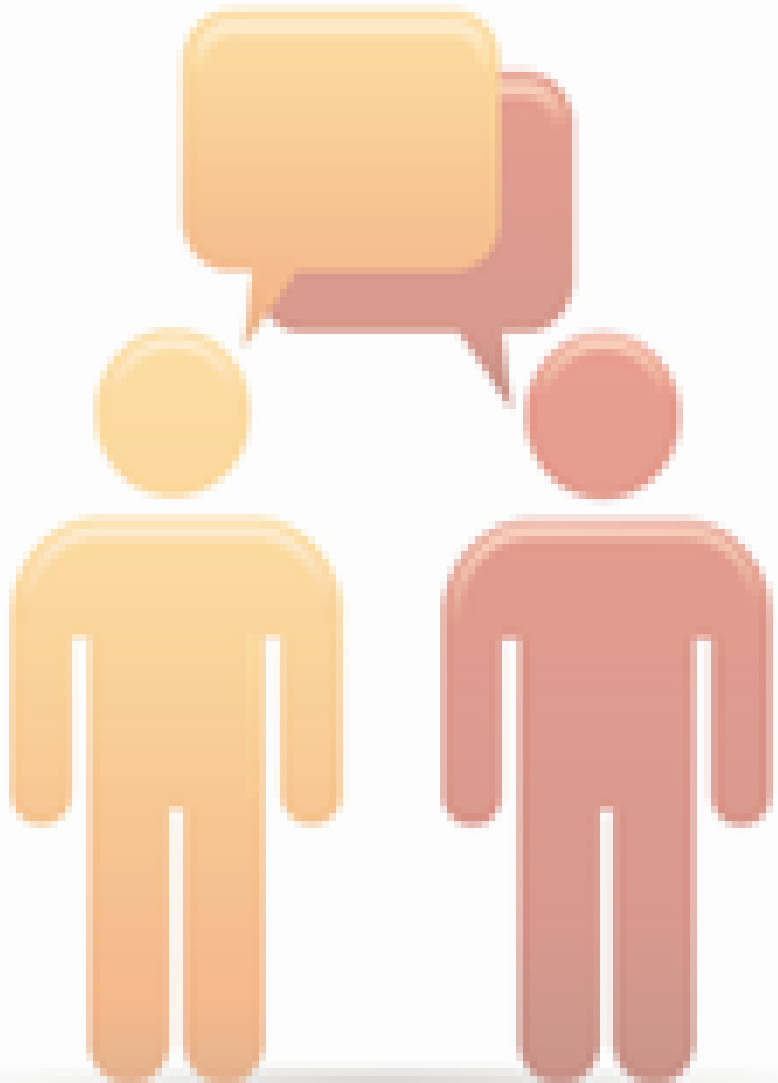
REGIONAL CENTER SERVICE COORDINATOR



The regional center still plays an important role in the SDP, by:

- Helping Participant plan and initiate Self Determination
- Certifying the amount of the individual budget
- Helping with SDP and HCBS settings compliance
- Helping Participant develop their IPP using person centered planning principles

SERVICE PROVIDER



Providers play an important role well before SDP services begin:

- Before SDP Initiation:
 - Advising the Participant and IF of offered services, rates, contract terms, availability, flexibility, etc
- After SDP Initiation:
 - Delivering reliable services that adjust to meet Participant needs and achieve desired outcomes

SERVICE PROVIDER REQUIREMENTS

SDP Services **MUST**:



Be a listed
SDP service



Providers must
be qualified
(FMS will
verify)



Can be
vendedored
& non-
vendedored



Support
choice and
inclusion
(HCBS)

1

**MUST first utilize available
funding for generic
resources**

2

**MUST be provided in places where
Participant is included in the
community (HCBS Final Rule)**

ROLES AND RESPONSIBILITIES: **HCBS Setting Rule Compliance NOW!**

SERVICE PROVIDER SETTING REQUIREMENTS

Setting Assessment and Process



The provider completes a self-assessment of the setting



The selected provider, the regional center and **Participant** will conduct an onsite assessment...



If the provider **passes**, this service can be used in the SDP



If the provider **does not pass**, they can work towards change. If not these services cannot be used in this setting in the SDP



The FMS verifies the **completion** of the assessment process

ROLES AND RESPONSIBILITIES: New SDP Service Codes

https://www.dds.ca.gov/wp-content/uploads/2019/05/SDP_Service_Codes_02142019.pdf

Budget Category	SDP Services	Service Code	Description/Providers
Living Arrangement (310 - 330)	Respite Services	310	Respite (Individual and Agency) In -home
		311	Respite Facility - Out-of-Home
	Live-In Caregiver	312	Live-In Caregiver
	Homemaker	313	Homemaker
	Housing Access Supports	314	Housing Access Supports
	Financial Management Service	315	FMS Fiscal Agent
		316	FMS Co-Employer
		317	FMS Fiscal/Employer Agent
	Community Living Supports	320	Community Living Supports (Individual and Agency)
		321	Residential Facility
Employment & Community Participation (331 - 355)	Community Integration Supports	331	Community Integration Supports
	Participant-Directed Goods and Services	333	Participant-Directed Goods and Services
	Individual Training and Education	334	Individual Training and Education
	Employment Supports	335	Employment Supports
	Technology Services	336	Technology Supports
	Transition/Set Up Expenses	337	Transition Set-Up Expenses
	Non-Medical Transportation	338	Non-Medical Transportation
	Prevocational Supports	339	Prevocational Supports
Independent Facilitator	340	Independent Facilitator	
Health and safety (356 - 399)	Environmental Accessibility Adaptation	356	Environmental Accessibility
	Acupuncture Services	357	Acupuncture Services
	Personal Emergency Response Systems (PERS)	358	Personal Emergency Response Systems
	Home Health aide	359	Home Health Aide
	Communication Support	360	Communication Support
	Skilled Nursing	361	Skilled Nursing
	Nutritional Consultation	362	Nutritional Consultation
	Crisis Intervention and Supports	363	Crisis Intervention and Supports
	Behavioral Intervention Services	364	Behavioral Intervention Services
	Specialized Medical Equipment and Supplies	365	Specialized Medical Equipment and Supplies
	Family/Consumer Training	366	Family/Consumer Training
	Dental Services	367	Dental Services
	Lenses and Frames	368	Lenses and Frames
	Optometric-Optician Services	369	Optometric-Optician Services
	Psychology Services	370	Psychology Services
	Training and Counseling Services for Unpaid Caregivers	371	Training and Counseling Services for Unpaid Caregivers
	Speech - Hearing and Language	372	Speech - Hearing and Language
	Chiropractic Services	373	Chiropractor
	Massage Therapy	374	Massage Therapist
	Occupational Therapy	375	Occupational Therapy
Physical Therapy	376	Physical Therapy	
Vehicle Modifications and Adaptations	377	Vehicle Modifications and Adaptations	
Family Support Services	378	Child Day Care Facility	

- An SDP service offered by a provider **must** fall within a listed SDP service code
- Different Service Codes under the SDP!
- SDP Services are Grouped into 3 budget categories

SDP SERVICES ARE ORGANIZED INTO 3 BUDGET CATEGORIES



1. Living Arrangements

- Services to help in the home, i.e. Respite, Homemaker, Community Living Supports, Housing Access Supports, FMS

2. Employment and Community Participation

- Services to provide support in the community, i.e. community integration supports, employment supports, non-medical transportation, individual education, Independent Facilitator

3. Health and Safety

- Services to maintain health and safety, i.e. personal emergency response system, home health aide, skilled nursing, crisis intervention, child day care facility, dental services, OT, PT, BIS, Speech Therapy, medical equipment, Communications Supports

ROLES AND RESPONSIBILITIES: Spending Categories & Flexibility







https://www.dds.ca.gov/wp-content/uploads/2019/05/SDP_Service_Codes_02142019.pdf

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- The SDP provides significant spending plan flexibility:
- 10% *between* budget categories
- Unlimited flexibility *within* a budget category
- Providers should plan for service flexibility

SERVICE PROVIDER CONTRACT WITH A PARTICIPANT:

Expectations, Outcomes and Metrics

	Expectations of the job including outcomes metrics		Start date/end date
	Hours and days of the job		Rate of pay
	How participant will keep track of when staff works		Where the service will take place

DDS contract template at <https://www.dds.ca.gov/wp-content/uploads/2019/05/Service Provider Agreement Template.doc>

SERVICE PROVIDER CONTRACT - PERSON CENTERED ELEMENTS

Think about not only **what** services Participant may need the Provider to deliver but also **how** services are delivered

WHAT SERVICES ARE NEEDED

- Someone who has a medical background?
- Some who knows their language?
- Someone who drives?
- Someone who can support in personal care?

HOW SERVICES ARE DELIVERED

- Someone who will **not** speak for them?
- Their privacy respected?
- Employees to **not** make personal phone calls or text while working for the participant?
- Staff who understand their culture?

SERVICE PROVIDER LAW AND REGULATION



- The Lanterman Act still applies to all services requested and funded under the SDP
- Generic funding sources for available generic services *must* be exhausted first
- SDP services must still be *necessary* to meet needs arising from a developmental disability
- SDP services have different service codes than traditional services;
 - Providers are not held to traditional service rates
 - Only FMSs must be vendored and have established reimbursement rates

INDEPENDENT FACILITATOR (IF) ROLE *WITH PARTICIPANTS*

Who is an Independent Facilitator?

A person who helps implement the program

They **CAN** help Participant:

- To make informed decisions regarding individual budget;
- To identify needs, desired outcomes in accordance with person centered planning and to draft the IPP
- To locate, access and contract for the services and supports in the IPP
- By leading, participating in and/or advocating on participant's behalf during the person-centered planning process and IPP development.

They **MUST**:

- Receive training
- **NOT provide any other service to the participant**

They **CAN**:

- Be paid from the spending plan, if hired
- Be a service coordinator
- Be family members

INDEPENDENT FACILITATOR (IF) ROLE *WITH SERVICE PROVIDERS*

Key Considerations

Two Ways that IFs can interact with a Provider for a Participant:

1. **Initiating** SDP for the Participant – selecting providers, customizing services, contract terms
2. **Ongoing** Maintenance and support as necessary

Big Picture Business Issues for Providers:

1. Professional IFs are organizing into networks that can span multiple RC catchment areas
2. IFs are a potential source of referrals for new SDP Business
 - Regional Centers are not tasked with client referrals under the SDP
3. IF input may inform Provider strategic planning for SDP services

ROLES AND RESPONSIBILITIES

FINANCIAL MANAGEMENT SERVICE (FMS)

Participants **must choose** a vendored FMS to:

- Reimburse Providers pursuant to spending plan
- Check Provider background and qualifications
- Help develop and manage the spending plan
- Issue a monthly report about the spending plan
- Potentially serve as co-employer with Participant

Provider FMS considerations:

- FMS is funded out of the certified budget
- FMS may establish separate contracts with Providers



Three FMS Models: Bill Payer, Co-Employer, Sole Employer

- The FMS model is selected by the Participant
- An FMS may support only 1, or up to 3 models

**Will Participant
have
employees?**



**What is Participant
relationship
with employees?**



1. Bill Payer



An agency provides the staff that support the Participant



Participant does NOT want to be the employer of their workers



FMS purchases services and items from providers for Participant

- **Unless the Provider is also vendored as an FMS, the Bill Payer model is the only viable FMS model for existing vendored providers**

2. Co-Employer



Participant is a co-employer, along with FMS



Checks background and qualifications



Follows all applicable employment laws



Handles necessary insurances related to employment



Employer of Record, pays the bills

Participant

FMS

- Existing service providers may become vendored as an FMS to offer this model
- Consider joint employer issues

3. Sole Employer



Participant wants to be sole employer



Must obtain necessary insurances related to employment



Checks background and qualifications



Assists Participant in following applicable employment laws



Pays the bills

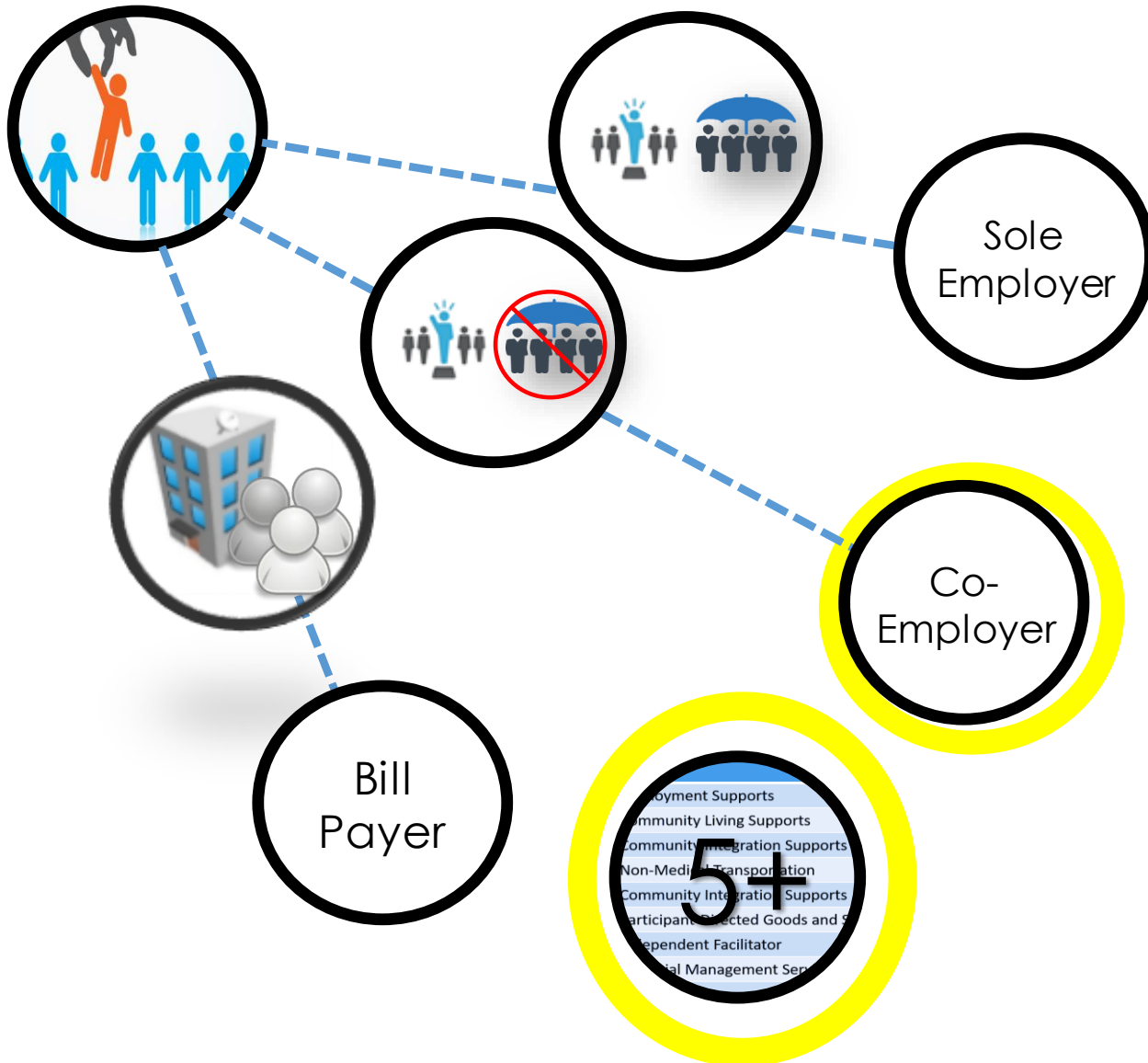
Participant

FMS

- Existing vendored providers may become vendored as an FMS and support participants with this model

FINANCIAL MANAGEMENT SERVICE

The highest cost model in use by the Participant sets the FMS rate



**Self-Determination Program
Maximum Financial Management Services (FMS) Rates**

FMS Model	Number of Services	Max Rate Per Month
FMS as Bill Payer	1-3	\$50
	4-6	\$75
	7+	\$100
Participant as Sole Employer	1-2	\$110
	3-4	\$125
	5+	\$150
Participant & FMS as Co-Employers	1-2	\$125
	3-4	\$140
	5+	\$165

SUMMARY CONCEPTS

MANY CHANGES, *MANY NEW OPPORTUNITIES!*

Planning for Self Determination:

- How will your agency prepare to respond to an Independent Facilitator or Participant who requests service, availability and pricing information?
- How will Independent Facilitators and Participants discover your agency and services?
- How will your agency showcase its credentials, expertise and experience with credibility?

Service Design Flexibility

- Person centered, not program centered
- Not bound by old service code parameters or rates

Business Growth Opportunities

- Serve unmet needs
- Grow beyond catchment area
- Broaden service offerings into similar related services or even new categories

QUESTIONS?

Alta California Regional Center: www.altaregional.org

Local SDP Advisory Committee: Held every month on the 2nd Wednesday from 1:00 pm to 3:00 pm - virtual meetings.

Contact: Mechelle Johnson (916) 978-6653
mjohnson@altaregional.org

DDS Website: www.dds.ca.gov/sdp

DDS SDP Email: sdp@dds.ca.gov

FMS Contact List : www.dds.ca.gov/initiatives/sdp/financial-management-service-contact-list/