



**Rhode Island
Executive Office of Health and Human Services**

Home and Community-Based Services (HCBS)

Workforce Recruitment & Retention Plan

LTSS Case Management

Friday, February 4, 2022

**RHODE
ISLAND**

HCBS Workforce Challenges & Program Goals

HCBS Workforce Challenges

- The pandemic has exacerbated challenges in meeting consumer demand for home and community-based services (HCBS) due to workforce shortages
- High staff turnover rates have a negative impact on access to services, continuity of care, and workforce knowledge, skills, and experience to care for increasingly complex HCBS consumers

Program Goals

- Increase our ability to meet Medicaid consumer needs for HCBS services
- Increase number of HCBS direct care workers and licensed health professionals actively providing frontline services
- Improve retention rates for HCBS staff
- Reduce vacancy rates for HCBS staff

Background on ARPA HCBS Enhanced Funding*

- The American Rescue Plan Act (ARPA) will provide an estimated \$114M for home and community-based services (HCBS) via enhanced federal Medicaid matching funds*
- EOHHS understands and has received substantial stakeholder feedback highlighting a critical need to strengthen the HCBS workforce via improved compensation
- As a result, EOHHS is dedicating an estimated \$56M of the ARPA funds to a **HCBS Workforce Recruitment and Retention** effort to **increase compensation to frontline HCBS workers**
- **An estimated \$330K of this total will be directed to long term services and supports (LTSS) case management provider agencies that did not otherwise receive a direct increase in the FY2022 state budget.**

~\$114M ARPA HCBS enhanced FMAP

~\$56M HCBS Workforce
Recruitment & Retention Program

~\$330K LTSS
Case Management

Enhanced Payment Rate: Process by Provider Type

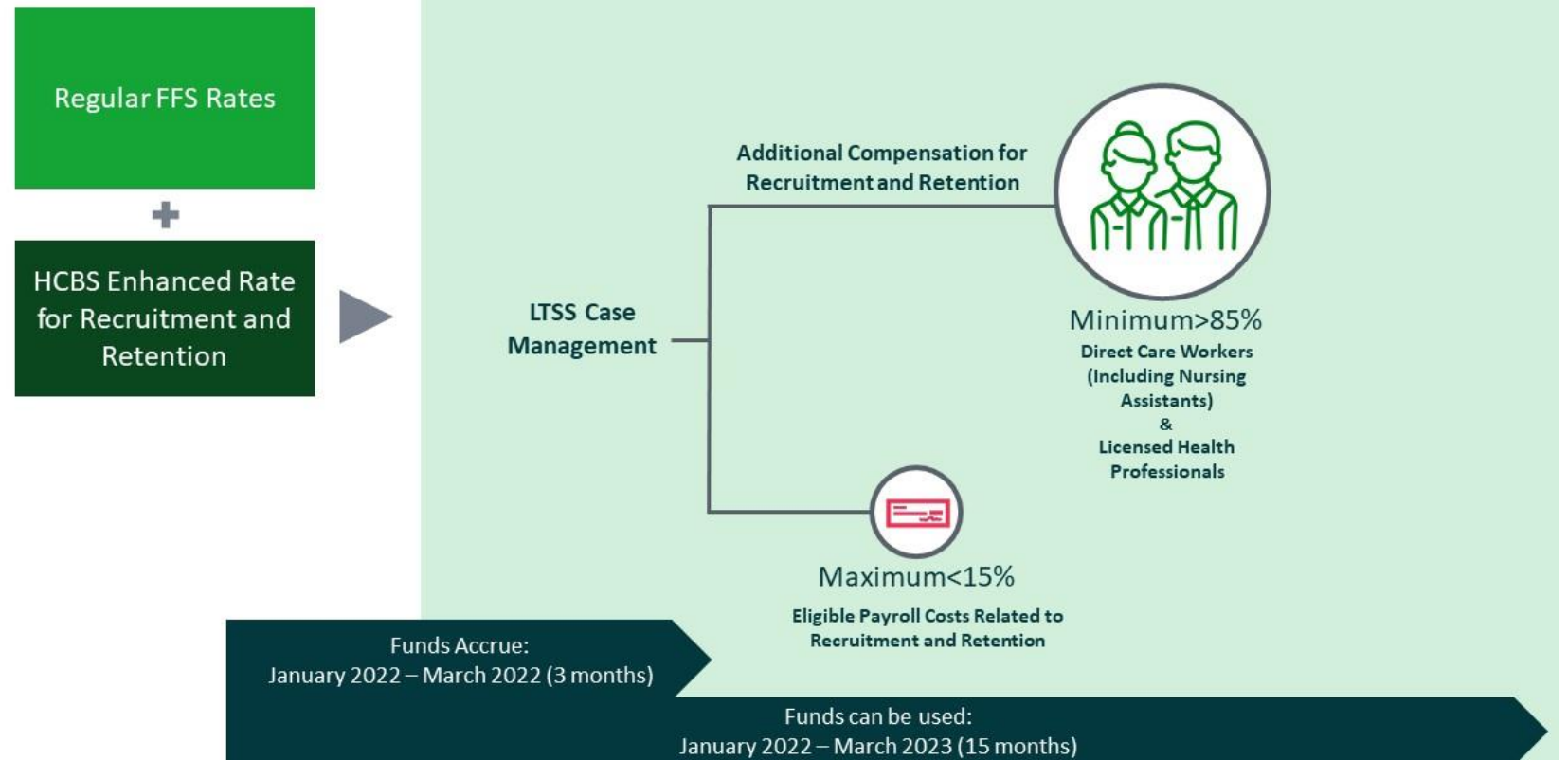
Category	Provider Agency Types
LTSS	Home Health
	Adult Day Health Centers
	Habilitation Group Homes
	PACE
	Case Management Agencies

FUNDING MECHANISM:
Enhanced FFS Rates

- Temporary, 63% FFS rate increase for qualifying services (T1016 and T1017) to Medicaid beneficiaries from January 1, 2022 - March 31, 2022.
- Submit claims ASAP, ideally no later than June 30, 2022 to swiftly access and use enhanced funds.

Funding Flow for LTSS Case Management

Temporary enhanced payments must be used for certain Qualifying Activities



Enhanced Rate Spending Definitions



Minimum 85%

Direct Care Workers

Direct Care Workers means frontline paraprofessional staff (including Nursing Assistants) who provide care and services *directly* to Medicaid beneficiaries and are not licensed by RIDOH.

- These staff must be directly employed by the LTSS Provider Agency and shall not include FLSA exempt employees or employees contracted through a third-party vendor or staffing agency.
- Management staff who spend at least 50% of their time on frontline direct care may be included.



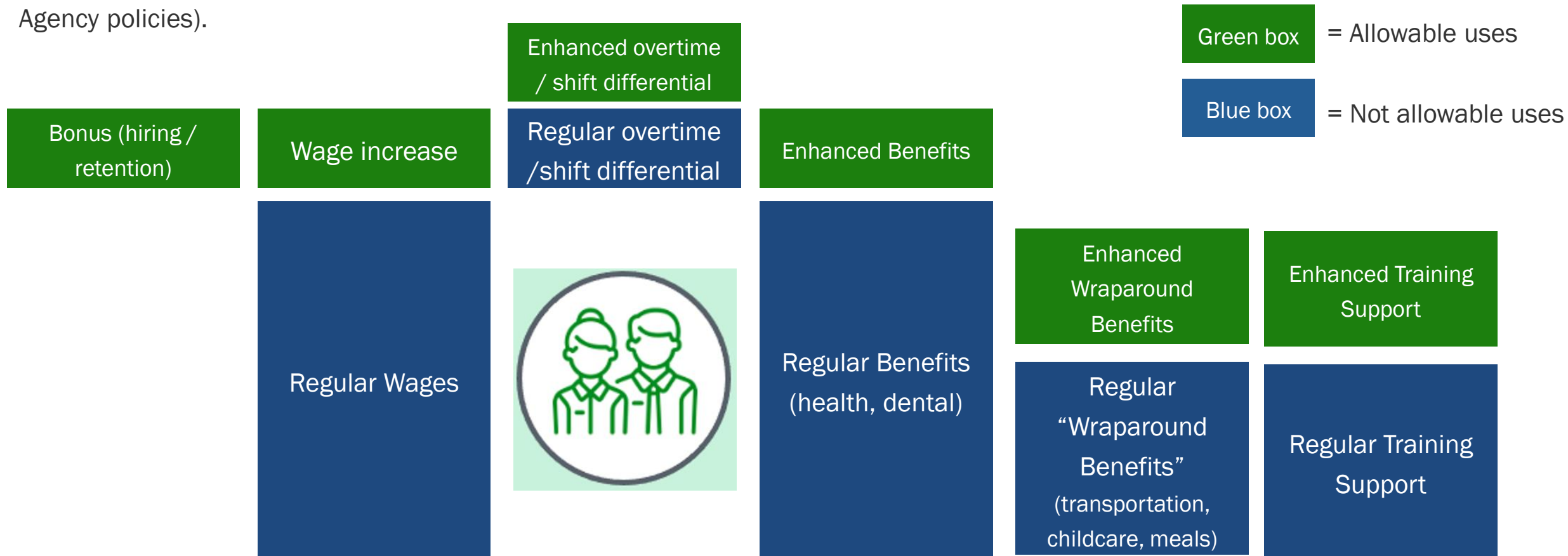
Maximum <15%

Eligible Payroll Costs

Eligible Payroll Costs means payroll taxes, unemployment insurance, workers compensation, liability, and other employer costs that increase as a result of increased compensation to staff under this Program.

Qualifying Activities

Funds must be used for worker compensation above the amount paid as of October 31, 2021 (prior to the temporary rate increase); Funds may not be used to pay base wages or other regular compensation (e.g., standard overtime or health benefits per Provider Agency policies).



Qualifying Activities - Definitions

Funding may be used for additional compensation to frontline workers to improve recruitment, retention, and staffing levels.

Specific examples of permitted uses include, but are not limited to:

- **Wage rate increase:** Increase to the hourly or annual wage the LTSS Provider Agency paid an employee prior to the start of these Program Activities.
- **Enhanced benefits:** Enhanced benefits that Provider Agency makes available to employees, above the amount paid an employee prior to the start of these Program Activities. Examples may include, but are not limited to, enhanced or new health or dental insurance coverage.
- **Overtime:** Payments over and above agency standard policy.
- **Shift differential payments, or Differential payments for hard-to-fill locations:** Includes any type of differential payments that are over and above agency standard policy.
- **Retention bonus:** Incentive payment(s) as compensation over and above an hourly rate of pay, separate from an employee's standard wages.
- **Hiring bonus:** Incentive payment(s) as compensation that is over and above an hourly rate of pay, separate from an employee's standard wages.
- **"Wraparound benefits":** Additional employer provided benefits to help the workforce remain employed – over and above agency standard policy. Examples may include, but are not limited to, transportation support/reimbursements, meal vouchers, childcare assistance, or car maintenance support.
- **Training support:** Additional compensation for training, including wages for time spent in training, testing or certification materials, including but not limited to continuing education credits (CEUs), or exam fees above and beyond previous agency HR policy.

Implementation Timeline



- January 1, 2022: Enhanced rate takes effect pending CMS and OMB final approvals and program spending may begin
- February 11, 2022: Final comments and feedback due
- February 18, 2022: Attestation & Initial Workforce Report due by 5pm
- March 31, 2022: Enhanced rate period ends
- March 31, 2023: All program funds must be spent or returned to EOHHS, unless an extension is pre-arranged.
- Submit quarterly Workforce and Expenditure Reports, due 2 weeks after each quarter's end:

Start Date	End Date	Quarterly Workforce and Expenditure Report Due
Jan 1 2022	Mar 31 2022	Apr 14, 2022
Apr 1 2022	Jun 30 2022	Jul 14, 2022
Jul 1 2022	Sep 30 2022	Oct 14, 2022
Oct 1, 2022	Dec 31, 2022	Jan 14, 2023
Jan 1, 2023	Mar 31, 2023	Apr 14, 2023

Additional Participation Requirements



- Provider Agencies must maintain detailed and complete financial and payroll records demonstrating that Program funds are spent in accordance with Program guidance



- Provider Agencies must cooperate with EOHHS on audit activities

Provider Agency Attestation

To be accessed and submitted online at: [ARPA HCBS Enhancement Initiative](#)

By submitting this form on _____ [Today's Date] _____, I, _____ [Name] _____, hereby attest that, to the best of my knowledge and belief, that the above information is accurate and complete.

I recognize that the purpose of the HCBS FMAP temporary rate increase received by _____ [Agency] _____ is to improve recruitment, retention, and capacity of the frontline home and community-based services (HCBS) workforce. I hereby attest that at least 85% of the enhanced HCBS FMAP temporary rate increase will be spent to provide additional compensation for frontline workers (at least 85% for direct care workers and licensed health professionals via Qualifying Activities as described in Program Guidance). I further attest that no more than 15% of the enhanced HCBS rate increase will be spent on payroll costs directly related to the additional compensation for frontline workers. My agency will maintain payroll records to support this attestation, and such payroll records may be subject to audit by EOHHS. In the event that EOHHS determines that Program funds have been used for ineligible expenses, my agency may be required to repay such funds to EOHHS. My agency also commits to returning to EOHHS any Program funds not expended by the Program end date of March 31, 2023. My agency will maintain and submit quarterly Expenditure Reports and Workforce Reports as required by EOHHS.

Workforce Report (Initial & Quarterly) - DRAFT

DRAFT included for reference; final version to be accessed and submitted online at: [ARPA HCBS Enhancement Initiative](#)

	Direct Care Workers (including Nursing Assistants)
Total workers employed	
# part-time employees	
# full-time employees	
0 - 1 year of service	
1 - 5 years of service	
5+ years of service	
Ethnicity of employees	<input type="checkbox"/> Hispanic or Latinx <input type="checkbox"/> Not Hispanic or Latinx
Race of employees	<input type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Other
# who speak a language other than English	
Total job openings	

- Specify job titles for Direct Care Workers: _____

Expenditure Report (Quarterly) – DRAFT – slide 1 of 2

DRAFT included for reference; final version to be accessed and submitted online at: [ARPA HCBS Enhancement Initiative](#)

Spending Summary Table

	Total Program \$s spent since Jan 1 2022 (Provider data)	Ratio of Program expenditures since Jan 2022 (Autofill)
Additional compensation - direct care workers (target $\geq 60\%$)		
Increased payroll costs related to the additional compensation above (target $\leq 15\%$)		
Grand Total		

If spending proportions in Table above vary significantly from target percentages, please explain here the reasons and plans for reaching the target spending ratios by the end of the program period Mar 31, 2023: _____

Expenditure Report (Quarterly) – DRAFT – slide 2 of 2

DRAFT included for reference; final version to be accessed and submitted online at: [ARPA HCBS Enhancement Initiative](#)

Additional Compensation Table

Additional Compensation Paid to Frontline HCBS workers since January 1, 2022	Direct care workers (including Nursing Assistants)
Total Wage increases (total elevated wage minus previous base wage)	\$
Benefits	\$
Overtime	\$
Shift differential payments or differential payments for hard to fill locations	\$
Retention bonus	\$
Hiring bonus	\$
Wraparound benefits	\$
Overtime or shift differential incentives	\$
Training support	\$
Other (describe): _____	
	\$
TOTAL ADDITIONAL COMPENSATION^	\$

Comments (optional; note highlight successes, challenges and lessons learned): _____

Appendix



Eligible Provider Agencies

Provider NPI	Provider
1063425189	Child and Family Service of Newport City
1114138773	East Bay Community Case Management
1245456532	West Bay Community Action, Inc
1346441045	Tri-Town Community Action Agency

Eligible Service Codes

Provider Type Description	Procedure Code	Procedure Code Description	Program Indicator Code
LTSS Case Management	T1016	CASE MANAGEMENT, EACH 15 MINUTES	MDE050
LTSS Case Management	T1016	CASE MANAGEMENT, EACH 15 MINUTES	MWA070
LTSS Case Management	T1017	TARGETED CASE MANAGEMENT, EACH 15 MINUTES	MCS010
LTSS Case Management	T1017	TARGETED CASE MANAGEMENT, EACH 15 MINUTES	MDE010
LTSS Case Management	T1017	TARGETED CASE MANAGEMENT, EACH 15 MINUTES	MDE060
LTSS Case Management	T1017	TARGETED CASE MANAGEMENT, EACH 15 MINUTES	OOR010

Questions & Comments

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