

2017 Regular Session

HOUSE RESOLUTION NO. 211

BY REPRESENTATIVE HOFFMANN

A RESOLUTION

To urge and request the Louisiana Department of Health to convene a Disability Services Sustainability Committee for the purposes provided in this Resolution, and to submit quarterly reports to the legislature.

WHEREAS, providers of Medicaid-funded home-and-community-based services (HCBS), intermediate care facilities for persons with developmental or intellectual disabilities (ICF), and case management agencies provide long-term supports and services to individuals with disabilities and those who are aging; and

WHEREAS, services provided by HCBS, ICF, and case management agencies, collectively, help individuals with disabilities meet their health, education, employment, recreational, relationship, and community participation goals; and

WHEREAS, Medicaid reimbursement rates for HCBS, ICF, and case management agencies have been cut significantly over the past ten years; and

WHEREAS, most HCBS, ICF, and case management agencies serve Medicaid enrollees exclusively, and thus have no other payment source to offset their losses from Medicaid; thus any rate reduction or increase in operating cost has a direct negative impact on critical personal care services that keep individuals with disabilities healthy and safe, such as feeding, bathing, and administering medication; and

WHEREAS, the cumulative effect of rate reductions on providers whose only payment source is Medicaid, combined with increased operating costs and unfunded mandates, has brought the disability services system of this state to the brink of collapse; and

WHEREAS, ensuring that the current disability services system is operating in the most efficient and effective manner, and reinvesting cost savings to enhance provider reimbursement rates is essential to sustainability of the system.

THEREFORE, BE IT RESOLVED that the House of Representatives of the Legislature of Louisiana does hereby urge and request the Louisiana Department of Health to convene a Disability Services Sustainability Committee, referred to hereafter as the "committee".

BE IT FURTHER RESOLVED that the committee be composed of the following members:

- (1) The secretary of the Louisiana Department of Health or his designee.
- (2) The executive director of the Community Provider Association or his designee.
- (3) The executive director of The Arc of Louisiana or his designee.
- (4) The executive director of the Supported Living Network or his designee.
- (5) The executive director of People First of Louisiana or his designee.
- (6) One representative of a local governmental entity appointed by the Human Services Interagency Council.
- (7) The president of the Support Coordination Alliance or his designee.

BE IT FURTHER RESOLVED that the member representing the Louisiana Department of Health serve as the chairperson of the committee.

BE IT FURTHER RESOLVED that the committee adopt rules of procedure and any other policies as may be necessary to facilitate the work of the group.

BE IT FURTHER RESOLVED that the functions and purposes of the committee include, without limitation, all of the following:

- (1) To identify and implement potential efficiencies and cost-saving strategies.
- (2) To identify issues impacting the solvency of the disability services provider network, and to recommend means for immediate resolution of such issues whenever feasible.
- (3) To develop a long-term plan for the disability services system which includes recommendations for legislative and administrative actions necessary to ensure sustainability of the system.
- (4) To submit quarterly reports to the legislature.

BE IT FURTHER RESOLVED that the quarterly reports of the committee include, without limitation, all of the following information:

(1) Information concerning billing, including identification of the current billing and payment processes for HCBS, ICF, and case management agencies, as well as strategies for streamlining these processes.

(2) Information concerning rate methodologies, including evaluation of the current reimbursement methodology for HCBS, ICF, and case management agencies to ensure that it takes into consideration not only current costs, but additional factors necessary to build a high-quality and stable workforce.

(3) Information concerning emergency protocols, including protocols for what constitutes an emergency; identification of the roles and responsibilities of the Louisiana Department of Health, human services districts and authorities, case management agencies, other provider agencies, and individuals and families during an emergency; and recommendations relative to automatic waiving of regulations under certain emergency situations.

(4) Information concerning Medicaid audits, investigations, and monitoring, including analyses of all audits, investigations, and monitoring of HCBS, ICF, and case management agencies to avoid duplication of efforts; identification of gaps in the system where monitoring, audits, or investigations are not being conducted; clear identification of expectations of provider agencies during an audit or investigation; and a written definition of what constitutes an audit finding and the related penalty or fine associated with the finding.

(5) Information concerning unfunded mandates, including identification of unfunded mandates for HCBS, ICF, and case management agencies; strategies for eliminating unnecessary unfunded mandates; and recommendations for minimizing the financial impact of each mandate.

(6) Information concerning abuse and neglect training, including identification of current abuse and neglect training requirements for department staff, and recommendations to ensure that abuse and neglect determinations are appropriate and consistent statewide.

(7) Information concerning cost reporting, including mandatory cost reporting by HCBS to verify expenditures, and recommendations for ensuring that such reports include cost factors necessary to build a competent and stable direct support workforce.

(8) Information concerning background checks and onboarding costs, including identification of current background check requirements and other onboarding costs and strategies for securing federal matching funds to cover these expenditures.

(9) Information concerning case management and support coordination, including the status of action items identified in the report issued in January of 2012 pursuant to Act No. 299 of the 2011 Regular Session of the Legislature, and recommendations to streamline case management processes.

(10) Information concerning electronic visit verification (EVV), including identification of the actual cost to providers for implementing EVV and the total amount of cost savings and cost avoidance resulting from EVV implementation.

(11) Information concerning the plan of care approval process, including an analysis of the current process and strategies to streamline that process.

(12) Information concerning new technology-based solutions which would help the disability services system operate more efficiently.

(13) Information concerning fraud, waste, and abuse, including identification of potential risk areas for fraud, waste, and abuse; and strategies to eliminate or minimize fraud, waste and abuse.

(14) Information concerning provider manuals, including identification of manuals that contain outdated or inaccurate information (e.g. the Case Management Manual and Certified Medication Attendant Training Manual); the status of necessary updates to such manuals; and recommendations for a process to keep such manuals current.

(15) Information concerning written policies and procedures, including identification of all procedures that providers are expected to comply with but are not officially documented in rule, regulation, policy, procedures, guidelines, manuals, or any other publication of the Louisiana Department of Health; an update on development of written procedures; and strategies to ensure that all expected procedures are officially documented in writing and disseminated to all disability services providers.

(16) Information concerning any other factor related to the efficiency and effectiveness of the disability services system.

BE IT FURTHER RESOLVED that the secretary of the Louisiana Department of Health shall take such actions as are necessary to ensure that the first meeting of the committee occurs no later than July 15, 2017.

BE IT FURTHER RESOLVED that the committee meet upon the call of the chairperson or upon request of a majority of the members of the committee.

BE IT FURTHER RESOLVED that the Louisiana Department of Health provide staff support for all meetings of the committee.

BE IT FURTHER RESOLVED that the committee submit written reports of its findings and recommendations to the House Committee on Health and Welfare on a quarterly basis.

BE IT FURTHER RESOLVED that legislative authority for the committee shall terminate thirty days after the convening of the 2020 Regular Session of the Legislature of Louisiana.

BE IT FURTHER RESOLVED that a copy of this Resolution be transmitted to the Secretary of the Louisiana Department of Health, the executive director of the Community Provider Association, the executive director of The Arc of Louisiana, the executive director of the Supported Living Network, the executive director of People First of Louisiana, the president of the Support Coordination Alliance, and the executive director of each human services district and authority of the state.

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SPEAKER OF THE HOUSE OF REPRESENTATIVES