

# Department of Public Health and Human Services

Greg Gianforte, Governor

Adam Meier, Director

# Developmental Disabilities Provider Rate Workgroup Meeting Minutes

March 21, 2022 10:00 AM (MST) – 1:00 PM (MST)

#### 1. Welcome

- Jackie Jandt with DPHHS welcomed attendees to the meeting
- Coy Jones with Guidehouse presented the agenda for the meeting and began facilitating

#### 2. Update on Survey Submissions

Guidehouse presented an update on Survey Submissions.

- Attendee: When you say developmental services division, are you talking about the developmental disabilities program or are you talking about the behavioral health and development program?
  - GH: The developmental disabilities program, not children's mental health or adult behavioral health.

# 3. Preliminary Wage Analysis

Guidehouse presented the Preliminary Wage Analysis.

- Attendee: This is what I was expecting. I'm curious if there's a correlation between this
  quarter that we reported on, and also 20219 wages that we were asked to report on.
  Can you tell us what changed from 2019 to 2020?
  - GH: From 2020 to 2021 you'll see some of that data in here, at least what you're looking for the last two years.
- Attendee: Does the analysis look at why a rate is lower and if the rate should be higher to incentivize respite services?
  - o GH: This study only views what the data looks like historically, as providers you'll have to decide if that's what you want to do moving forward.
- Attendee: There could be questions on how many of transportation positions were reported comparative to DSP positions. Some drivers might be driving a vehicle with a Commercial Driver's License (CDL).
  - o GH: I agree, we don't have a lot represented.
- Attendee: Was this data from one agency that responded to the survey?
  - GH: I'm not sure if it was the same agency, but we will double check to see if there was more than one agency or if it was more than one provider taking the survey.

- GH: Are there any concerns from the group regarding a particular type of staff we're not collecting?
  - Attendee: No comment from attendees.
- Attendee: There are a lot of expenses related to Human Resources (HR) and Information Technology (IT), are you finding that those wages and those expenses are reported on the total cost parts?
  - o GH: Yes, those are captured in the aggregate.
- Attendee: How are the administrative costs correlated to a rate?
  - OH: We do it differently for residential vs. non-residential services. For example, a non-residential cost would be the overhead costs, kind of their general admin stuff that is not service related. Administrative cost is often between 14% to 20%, generally it is in that range. When we get to actual rate building, the wage is the fundamental building block of the rate. For example, what is the wage of the individual who is providing the direct service, so that's the direct care worker in this context.

# 4. Wage Trends

Guidehouse presented on Wage Trends.

#### 5. Benefits Reporting

Guidehouse presented on Benefits Reporting.

- Attendee: I was surprised by the working compensation rate being so low, but I was wondering if it was an overall general percentage or specific to the provider cost and wage survey?
  - GH: The state unemployment tax is not coming from the cost and wage survey;
     it's coming from the Montana Department of Labor.
- Attendee: I think it is telling of how many staff members are eligible for insurance vs.
  participating in the insurance plan provided by the provider. Do you have information
  on what the average deductible is?
  - GH: If you look at the number of direct service staff who receives insurance, the numeric contribution is the median, which is the premium that providers are paying.
- Attendee: There was a specific reporting requirement on overtime, I hope that is
  correlated in the rate development, but what we would like to do is offer a competitive
  wage for direct support staff \$18-\$20 an hour. Also, health insurance that doesn't have
  a \$5,000 deductible which is what we're seeing through corporations. Offering a
  medical plan such as that is not a benefit because it's legally required.
- Attendee: Do we have information on how neighboring states offer benefits?
  - GH: One thing we have done, in the total cost, we ask about the costs of benefits beyond wages. It's a historical fringe percentage based on the overall cost. A lot of the information about insurance is broken down by state, but there are a lot of decisions and priorities that need to be established in regard to what the system can bare.

## 6. Peer State Comparisons: Representative Service Rates

Guidehouse presented on the Peer State Rate Comparison: Representative Service Rates.

- Attendee: Is WY ever used as a comparison state?
  - GH: Yes, WY is sometimes used as a comparison state. It's a state where we've established some of the rates especially for DD services.
- Attendee: In terms of cost of living, I would be interested in taking a look at the cost of living when compared to the lower rate for reimbursement and what people are doing with the lower rate for reimbursement.

#### 7. Public Comment

There were no questions or comments from public attendees i.e., non-workgroup or non-steering committee members.

# 8. Next meeting scheduled for April 21, 2022

- DPHHS asked workgroup members preference for in-person meeting in Helena, or virtual meeting for April. A hybrid options was also offered.
  - o One workgroup member wanted virtual. Another agreed. A couple others preferred the idea of an in-person meeting.
    - Guidehouse team mentioned the potential benefit in meeting in-person in April
      due to the nature of the in-depth discussion on the findings and draft
      recommendations.
    - DPHHS to discuss further and communication on next meeting formats will be disseminated prior to meeting date.

## 9. Adjournment @ 12:25 PM (MST)

Meeting Contact: Jackie Jandt, PMP

Medicaid Reform Initiative Specialist,

Email: <u>jjandt@mt.gov</u> Phone: (406) 444-9656