DONNA -- open webinar and introduce the panelist

Panel include:

- Rachel White, Eastern Shore Regional Office Deputy Director
- Linda Yale, Western Maryland Regional Office Deputy Director
- Karen Lee, SEEC Executive Director
- Jennifer Mettrick, Penn-Mar Chief Strategy Officer
- Jane Raddar, MMARS, Inc. Senior Coordinator of Community Services
- Rhonda Workman, Director of Federal Programs and Integrity
- Patricia Sastoque, Director of DDA Services
Thank you for joining us today. My name is Rhonda Workman and I am the DDA Director of Federal Programs and Integrity.

Our agenda for today’s discussion will include the following: (read agenda topics from slide)
Purpose

- Ensure comprehensive and flexible person-centered plans
- Share provider business model and infrastructure strategies considerations
- Support provider transition to fee-for-service billing
- Review processes and share service reminders
- Share strategies and lessons learned from Early Adopters and Coordinators of Community Services

Rhonda

Today’s training/discussion gives us another opportunity to share and discuss how to operationalize the various flexible services and strategies available to CCSs and providers to create individualized person-centered plans. You will also hear from Karen and Jennifer internal infrastructure changes they made related to person centered planning.

Our purpose is to:

- Ensure comprehensive and flexible person-centered plans
- Share provider business model and infrastructure strategies considerations
- Support provider transition to fee-for-service billing
- Review person centered processes and share service reminders
- Share strategies and lessons learned from some Early Adopters
and a Coordinators of Community Services

We are also conducting a follow up webinar on March 4th from 12 - 1:30 where we will review residential services support hours, behavior supports, respite, and State Funded services. We will also hear more from Jane, Karen, and Jennifer.

We appreciate you taking the time to join us today and value your time.

We know everyone is busy but we hope that you will be able to close emails and move from distractions so you can actively listen and share questions in the chat box.
Rachel

People are the center of planning a vision for their personally-defined good life. This is done through Person-Centered Planning.

As per our community of practice, before considering services, it is important for Coordinators of Community Services and Providers, working in partnerships with the person and their team members, to engage in preplanning and team meetings to share updates, progress toward outcomes, current or new needs, challenges, and risk.

As noted in our PCP Development and Authorization Guidance and webinars, there are several person-centered planning tools and strategies that may be used in helping each participant to consider their personal strengths, assets, gifts, and wishes across the Life Domains and over the lifespan.
Person-centered planning is a continual process of listening and learning (e.g., exploration and discovery) to create a meaningful and relevant plan that may be adjusted according to life circumstances. This includes discovery actions such as discussing focus areas as identified by the participant and included in the PCP as well as outcomes the participant wants to accomplish initially and throughout the PCP year.

After the participant’s vision has been identified, the PCP team should utilize the HRST and other tools/discussions to assess support need(s), including any that have changed or have not been met and identify health care needs, risks, and mitigation strategies.

To support an integrated “community life” versus a “service life”, the PCP team should continuously explore generic, natural, community, local, and other resources to meet need(s) and address risk.

- Natural Supports refer to the support and assistance that naturally flows from the associations and relationships typically developed in natural environments such as the family, school, work and community.
- Generic service/support means support and services available to any member of the population and is not specific to meeting specialized needs of individuals with intellectual disabilities or developmental disabilities. Essentially it's the same as a community resource, support or service.

The CCS will develop, in collaboration with the participant and their PCP team, a PCP that reflects the:

- Participant's Vision;
- Participant’s outcomes;
- Identified risks, right restrictions, and needs; and
- Requested services necessary to ensure the participant is:
  - Healthy
  - Safe
  - Achieving the “good life.”
Thank you for the opportunity to join you all in today’s webinar. I’m one of the CCS that worked closely with SEEC in their transition to the fee for services LTSSMaryland- DDA Module and I’m here to share with you some critical aspect of case management that are highly importance to a successful creation of a person-centered plan.

One of many CCS responsibilities is to make time to schedule and conduct the preplanning team meetings and learn how do you work with the person's team in understanding the person's vision, outcomes, risk and together develop the trajectory to the person's "Good Life".

One of my major roles in facilitating this process was to learned and explored the person’s interest of activities of daily living with the team. We also discussed with the person about their vision of what they want
their activities of daily schedule to look like.

We looked at his/her accomplishment and what the they want to achieve in life. For an examples: The person is trying to be financially independent. To achieve the goal is to have and maintain a paid job with the support of the team. We also looked at his/her internal and external support system and developed objectives that would enable the person to achieve their goal and increased their independence.

I highly recommend that you track the PCP anniversary date/APD of people on your caseload so that you can proactively plan and scheduled all the meetings in a timely manner and get the PCP submitted within 20 days to the DDA for their approval.

One of the items that has been very helpful, is to start developing the PCP 60 days or more prior to the end date of the APD date so that it can be approved and implemented on time.

It’s also critical to make sure that if you don’t have 60 days meeting due to a change of agency or CCS to think about how you will prioritize to ensure that the PCP can be completed as soon as possible.
Person Centered Planning

- Providers
  - Preplanning and team meetings
  - Infrastructure
  - Finance and Program Teams

Karen

Jennifer
Karen and Jen

Karen - As we go through our presentation today, think about these infrastructure impacts to guide our transformation thoughts. We become very intentional about implementing these strategies in the beginning, then they became a part of our practice. The intentionality of these strategies is really critical for a successful transition into fee for service and the new service definitions to maintain financial stability.

Jen - Before we began revising PCPs to fit within the new service parameters of LTSS, we came together as a team to develop a Program Services Guide to develop parameters around each service and how we would provide specific services. This was how we were able to train Managers, coordinators and DSPs on the new services and new flexibilities available in LTSS. I will walk through an example of this later in the presentation.

As Karen mentioned, skilled team members that understand the services and can
work with people’s teams is critical in the PCP development process. There are a variety of ways to do this and we are testing two different models at Penn-Mar currently. One where our program managers play this key role and one where a Quality Coordinator in partnership with a program manager plays this role. Both processes work, it is really a matter of training and shifting of responsibilities to have time to focus on the PCP process.
Karen - SEEC's graphic Service Guide- This is a format we share with the people we support, families, CCS’s and others who need to know which service we are licensed to do and they can choose. We also make sure people know we can do virtual or in person for many of these services.
Jen

Penn-Mar needed a good understanding of each service and how we planned to utilize each service to best support the needs of people we support but within the parameters we are able to consistently provide. We continue to work on the menu of services we are able to offer and the specifications in which we can offer them. Above is an example of what that looks like for the Employment Discovery Milestone service.

If we were looking at a service such as Community Development Service it would include parameters around minimum number of hours (3hrs). We did this for two reasons, one since COVID some people we support only want half day services not full day or they would like a mix of individualized supports 1:1 and group based supports. Also it provides flexibility for those that may work part time and want to connect within their communities through a CDS group. Therefore people have flexibility in their schedule. What we realized would not be logistically or financially feasible is to offer one or two hours of CDS which is why we set our parameters at a minimum of 3 and a typical maximum of 6.
Karen

This is the pcp process SEEC used to kick off our LTSS transition. It was really critical that we had a process to build your infrastructure around. We restructured the organization, created processes and then identified which people would train, evaluate, collect data on this process. This is when we realized how critical it was for finance and programs to be working together throughout the process. After we created this process and used it for a bit, we started to tweak the timelines. We now start 90 days out for a PCP pre plan as it does take us 90 days typically on a new plan and up to 100 on a adjustment. We continue to collect this data and analyze it to ensure we are being efficient and getting the plans done before we have the meeting.
Karen

This is reflective of our current pre planning process. this is critical because it shows how many steps there are to getting ready for the actual meeting. You need the staff and infrastructure built to do these steps or you get behind. It also doesn’t reflect the SIP, but that is done with the packet. OM is operations manager.
Karen

These are the tools and tracking we do for every preplan. Our aim is for the outcomes, goals and strategies as well as all of these required tools to be in prior to the PCP.
Day in the Life - Service Flexibility

- Given the person’s trajectory and goals
  - Explore and consider what would a day look like for the person
    - What service options could they choose from on a daily and/or a 15-minute basis?
  - What other services may be needed during the year?
  - How is the person integrated in and supported for full access to the greater community?
  - For participants still in school, it is important to consider services needed during times when school is not in session, such as winter, spring, and summer breaks

Rachel

Using a team approach including detailed team discussions, is essential to identify the person specific goals, needs, and wants

Given the person’s trajectory and goals, it is important to keep in mind that LTSS service provides the person and family with greater service flexibility. Historically, a person could receive one meaningful day service daily as they were based on a daily unit. LTSS service billing provides the flexibility to receive multiple meaningful day services to support their goals and schedules in single day.

If teams need help with understanding how to braid waiver services to meet the needs of the person and allow for the provider to bill for the
service when provided, please reach out to your regional office. Keep in mind that each person is unique and the DDA is not indepthly aware of the person specific team discussions but can share information about the service flexibilities and options for the detailed service authorization section.

As you explore and consider what a day would look like for the person, you may need to shift your thinking from a **daily meaningful day service** to **person’s choice for multiple meaningful day activities and services**

**Some questions to consider include**
- What service options could they choose from on a daily and 15-minute basis?
- What other services may be needed during the year?
  - Remember to consider outcomes the participant wants to accomplish initially and throughout the PCP year and what services would be needed
- How is the person integrated in and supported for full access to the greater community?

For participants still in school, it is important to consider services needed during times when school is not in session, such as winter, spring, and summer breaks
As you may know, the Center for Medicare and Medicaid Services or “CMS” Community Settings final rule intent is to ensure that individuals receiving services and supports through Medicaid HCBS programs have full access to the benefits of community living and are able to receive services in the most integrated setting.

As teams meet, it is also important to keep in mind the federal HCBS Rule and consider the full array of service options available.

To support an integrated person-centered “community life” versus a “service life”, the PCP team should continuously explore generic, natural, community, local, and other resources to meet need(s) and address risk.
The Charting the LifeCourse Integrated Star is a useful tool for people, families, and teams to consider an array of integrated supports to achieve the envisioned good life, including those that are publicly or privately funded and based on eligibility, community supports that are available to anyone, relationship-based supports technology, and also take into account the assets and strengths of the individual and family. This tool is helpful to get a more comprehensive look at all the services and supports that may exist in a participant’s life; not just eligibility specific supports.

After exploration of generic, natural, community, local, and other resources, the PCP team should determine if any remaining unmet support needed can only be met with a Waiver or Medicaid service.

The DDA operated Medicaid Waiver programs includes various flexible services to support full active participation and membership of one’s community.

Examples include but are not limited to:

- Meaningful Day Services including Community Development Services and Day Habilitation
- Personal Supports
- Assistive Technology and Services
- Transportation
- Family and Peer mentoring supports
- Housing support services
- Participant education, training and advocacy supports
Rachel

This slide gives you an example of a PCP detailed service authorization section with multiple services to support Community Integration including:

- CDS
- Day Hab
- Assistive Technology and Services
- Transportation
- Respite, and
- Personal Supports

To support service flexibility:

- Some services are based on 15 minute units
• Some have an upper pay limit like camp and transportation that can be reflected with an annual service cost and check marks in each month
Rachel

During the planning meeting it’s important to discuss “how does the person spend their day?” in creating a robust PCP with a variety of supports based on the person’s wants, needs and if the services take place every day, on various days, etc.

It’s important to remember that some services are in 15 minute units, monthly like follow-along, milestone in Employment Services-Discovery, and upper pay limits in Respite Camp

Remember that some services include transportation and nursing support services as a component of the services like day habilitation and residential services
Once Meaningful Day Service is transitioned to LTSSMaryland, the Meaningful Day Transportation Add On will be ended as the rate includes a transportation cost component within it.
Patricia - will facilitate the discussion by asking the following questions:

Jane - Can you share how you worked with the person’s team in understanding the person’s vision, outcomes, risks and together develop the trajectory to the person’s “Good Life” what was you main role in facilitating this process?

After exploring the person’s interest in activities of daily living with the team. We can also discus with the person about their vision of what they want their activities of daily schedule to look like. We looked at his/her accomplishment and what the person wants to achieve in life. It is also important to consider other services and resources such as Natural supports, Medical Day services, CFC, REM and supports provided. To gain an understanding of what support the person currently has and then
look into what DDA meaningful day services they might be interested in requesting.

DDA-Funded services can be include but not limited to CDS, Day Habilitation, Employment services, Personal support services and so on. Depending on the person’s vision of what they want their activities of daily schedule to look like as a team we can assist to implement that into the PCP and request the meaningful day service that interests them.

Karen and Jennifer
Can you share and discuss examples of how your agency went about creating **multiple services** to support the person’s Day in the life and community integration using DDA Service Flexibilities, natural supports, community, etc., and how you worked with the person’s team in the discovery process and planning to support the creation of a robust PCP?

Penn-Mar example - Through the PCP process we utilize tools such as Charting the Life Course to help guide conversations with each person around ways in which they currently connect with their communities, within and outside of paid services. We talk about natural supports they have and places they like to frequent and feel comfortable. We also talk about their life outcomes and things that are important to them in their life. From this we look for gaps that services may be able to fill so that people can be living their best life. If there are person specific activities they want to participate in that are not related to group-based activities we are able to offer, we build in justification in the PCP for CDS 1:1 supports for the specific activity. In our group based activities we focus on weekly group-based planning sessions that connect to people’s goals and outcomes. We also offer a variety of in-person and virtual topic based groups from employment exploration to social groups.
As an Employment 1st State, the DDA is committed to enhancing community employment options for people with intellectual and developmental disabilities.

Under the Employment First approach, community integrated employment is the first option for employment services for youth and adults with disabilities including significant disabilities.

The guiding principle of Employment First is that all individuals who want to work can work and contribute to their community when given opportunity, training, and supports that build upon their unique talents, skills and abilities. Everyone of working age, and those supporting them,
should consider employment as the first option prior to any other service options. As fully participating members of their community, individuals with developmental disabilities will be afforded the opportunity to earn a living wage and engage in work that makes sense to them.

DDA’s new Employment Services includes a path for successful employment outcomes. Discovery milestones and job development assist individuals in making informed choices in designing their unique employment pathway and increased independence, integration, inclusion, productivity, and self-determination.

DDA’s Career Exploration is another options, however please note that this a time-limited services and does not meet the competitive integrated employment standards. An employment goal is required within the PCP that outlines the trajectory and transition time frame toward competitive integrated employment.

DDA’s Employment Services also include Ongoing Job Supports and Follow Along Supports that should be noted in the PCP.

Every participant interested in exploring employment opportunities should consider adding employment services, discovery, job development and ongoing supports to their PCP within the plan year for properly forecast and only bill when the service is provided. This will assist in not having to create a revised PCP and instead create a PCP with all needed support and services within the plan year.
Linda

This is an example of a PCP detailed service authorization section with multiple Employment services including job development and the employment discover milestones requested within the person’s plan year.

Job Development – includes supports in finding a job including customized employment and self-employment.

Employment Services Discovery - Milestone 1, 2 and 3
- is a process to assist the participant in finding out who they are, what they want to do, and what they have to offer
- Discovery includes three distinct milestones.
Best practices demonstrate that quality person-centered discovery milestones can typically be completed within 90 days. However, the completion of each milestone is flexible and will be considered in conjunction with the participant’s unique circumstances. As noted in this slide each month is checked for the discovery milestones to provide this flexibility.
Linda

- Maryland is an Employment 1st State so we expect that employment must be discussed during the discovery section of the PCP development and it’s a mandatory field in the PCP. While we know that a person has choice or may be of a retirement age, we want employment to be the first option but not the only option.
- Community-based, integrated employment is the first option for employment services for youth and adults with disabilities including significant disabilities so we want to move away from career exploration.
- Every participant interested in exploring employment opportunities should consider adding ES-discovery, job development and ongoing supports to their PCP.
- Ongoing Job Supports and Follow Along Supports can be provided and billed in the same month.
- Career Exploration requires an employment goal and is time limited to up to 720 hours.
Ask the following questions to guide the conversation:

Jane
Can you shared how you started the employment conversation with the person and their team and what supports you provided in the PCP development related to the person’s employment path?

As a CCS I usually start by identifying the person's employment needs by asking questions about his or her interest related to employment and also complete the PCP employment focus area. For example: Are you interested in working, what do you think about having a job, have you ever worked in the past, do you have any financial needs? After identifying his or her needs, I worked with the team to develop realistic
employment goals for the Individual and developed strategies. For example if a person has never worked in the past, we can discuss about employment discoveries. Which that service will help them explore paid/volunteer job opportunities in the community of interest.

Karen or Jennifer can you talk about how your agency has been able to braid and stack and the various employment services to support a person when they have expressed their interest in work and how you used DOORS funding/services?
Karen - From the 20 thousand foot level, a real DSAT- example of someone who wants to work but is currently in discovery. You can see how we lay out the year. When we started we gave ourselves more time to go through the process, but now are tightening up a bit because we want our team to know they have deadlines. If we don’t get the milestone payments done in the time we budgeted, we lose money. It is a business decision to put some timelines on it. You may want to have larger timelines for things in the beginning then tighten them up as time goes by.
This is a good example of a schedule for someone for week. Most of our schedules are actually not weekly, they are weekly schedules but for the month. They are developed by the person, their family, staff, and the front line supervisor. We have a recreation specialist who helps add in courses and we have a team of people who create and implement our online content. You can go to our website to see the online content. It is pretty extensive. You will see there are times this person is getting supports and times they aren’t. Times they get employment services and CDS. They may have one primary staff who does their CDS, and when they are in class, maybe the staff also supports other people. The staff may also support a few other people 1:1 when this person is not getting their supports like when they work when they are at music and therapy or doing discovery. Employment services are only done by trained employment staff. This is not what schedules looked like in 2000 when we started this type of service. We have made mistakes, learned, built community partners, developed relationships and become more sophisticated. And everyone’s don’t look like this, this is a gold standard, but this is our aim and our goal.
Karen

This is the service summary of what the sample schedule I showed. This is the base of the dsat- you will see that this month, there is only 9 hours of 1:1 cds and 8 hours of 1:4 CDS, but when we did the DSAT we put in margins so we wouldn’t have to do a plan revision for when discovery is done, or if they lose their job or something drastic changes. That is why having finance at the table to discuss the cost of a program for someone is viable. It doesn’t take long for the team to learn to see if a person's ideal schedule is financially viable. You just have to start somewhere. You can try all of this before you get into fee for service, we have been doing it in preparation for about two years before becoming an early adopter to prepare. You have to prepare for this change in infrastructure and processes. Don’t wait till you enter LTSS.
Linda-

Meaningful Day services support people 18 years and older and no longer in high school

An individualized schedule is used to provide an estimate of times associated with service activities that reflect the person’s preferences and PCP goals. The schedule is used to determine the authorization of hours and is not intended to dictate the actual provision of services.

The DDA’s Guidelines for Service Authorization and Provider Billing Documentation is a great resource and tool to refer to to see service authorization requirements.
Linda-

Meaningful Day Service services may be:

- a 15-minute unit such as CDS and Day Hab
- a month payment for Employment Services - follow along supports or
- a milestone such as Employment Services discovery milestones

As per the DDA’s guidance, to support week-to-week flexibility, under the traditional model, for a participant’s employment schedule and service needs for Meaningful Day Services, Meaningful Day services can be requested, and authorized by the DDA, up to the weekly limit set forth in the DDA Medicaid Waiver program application, subject to limitations noted on the following slide and in the Person-Centered Plan Development and Authorization Guidance.
Development and Authorization Guidance posted on the DDA person centered planning webpage.

Participants under the self-directed service delivery model can also include a variety of meaningful day services, however the total should not exceed the maximum 40 hour weekly limit.
Rachel

Although the DDA may authorize up to the weekly limit for each Meaningful Day Service requested under the traditional service delivery model:

- Teams should review and discuss service needs including taking into consideration the hours a participant is working (i.e., daytime, nighttime, and weekend hours) and not request the maximum service units for each Meaningful Day service;
- Participants cannot receive and a provider will not be paid for more than the limit for Meaningful Day services set forth in the DDA Medicaid Waiver program application - a total of 40 hours per week for all authorized Meaningful Day services combined.
regardless of provider

Neither a service provider nor a participant through a Fiscal Management Services provider may submit a claim for payment to DDA for Meaningful Day Services provided in excess of the weekly limit.

Such a claim for payment will be denied
Day in the Life - Meaningful Day

- Meaningful Day Service Flexibility
  - For example, a participant may be authorized to receive Community Development Services, Employment Services, and Day Habilitation Services. For maximum flexibility, the DDA can approve up to 40 hours per week of combination of each of these services. However, in combination, the participant may not use, and the provider may not bill for, more than a total of 40 hours of Meaningful Day services within a week
  - **Week One:** The participant may receive 10 hours of Community Development Services and 30 hours of Employment Services
  - **Week Two:** The participant may receive 20 hours of Community Development Services and 20 hours of Employment Services
  - **Notes:** The participant may not receive 40 hours of Community Development Services and 40 hours of Employment Services in a single week

Rachel - read slide
Rachel

This is an example of someone with multiple meaningful day services including:

- Employment Services - Job Development
- Employment Services - On-going supports
- Employment Services - Follow Along
- Community Development Services, and
- Day Hab
Day in the Life - Meaningful Day

Reminders

- Services support people 18 years and older and no longer in high school
- The PCP can include various meaningful day services to support the person’s day in the life and flexible activity schedules similar to the general population

Rachel

Remember that we want the PCP to be able to tell a story of the person’s day in the life and should be reflected in the person’s person-centered plan.

Meaningful day services support people 18 years and older and no longer in high school

The PCP can include various meaningful day services to support the person’s day in the life and flexible activity schedules similar to the general population

- Teams should explore the person’s goals, preferences, and various ways they can spend their day
• Are they doing activities the typical person their age engages in during the day?
• if not, what exploration or questions or choices have been presented to the person to make informed decisions and choices on how they want to spend their day
Ask the the following questions to guide conversation

Jane
Can you shared how you started the meaningful day conversation with the person and their team and what supports you provided in the PCP development?

As a CCS - in my experience - I would ask the person - How do you usually like your day to look like, what are things that you enjoy and make you feel productive. Like for example (Do you want to participate in your community, volunteer, finding a paid job, etc.)

Karen or Jennifer can you share how your agency has been able braid, stack the various meaningful day services to meet the needs of the
person and their preference. Can you shared some of the lessons learned and recommendations to our CCSs and Providers?
Jennifer

The PCP DSA will reflect Day Hab Groups for the authorization

Based on the persons individualized schedule services can be provided in small and large groups and billed accordingly.

The SIP can reflect small and large groups.

Important of teaching staff the definitions of services for documentation purposes.

Services are pre scheduled for staff so they do not have to think through which service is provided and documented.

Staff are aware of the goals of the person so they can document in addition to the person documenting on their own goals.

We currently use (CIMS - Consolidated Information Management System by TwinSis,
Jennifer

Here is an example schedule of a person that participates in a Day Program but has requested to connect with their community in a variety of ways. This shows how we utilize Day Habilitation services in combination with CDS 1:1 and CDS group services throughout their week.

It is important to note that there are many ways of developing an individualized schedule with a person and still staying within your business model parameters. You will see in the example above that CDS services are a minimum of three hours and can be done on one specific day or in conjunction with Day Habilitation. Note that when combining with Day Habilitation, CDS service starts at the community activity and not from the Day Program therefore there may be gaps in utilization. In this example, the person is using public transportation with a team member supporting them with travel training to attend book club at the library which reduces gaps in service billing.
Rachel
We know retirement is important to all of us and it’s an option for people 65 and older, per Social Security Administration retirement age.

People that are *past working age* who no longer wish to work, can be supported to engage in retirement activities like attending a local and integrated senior center; participating in clubs; and volunteering.

We have an array of services that a person in retirement can use to have a meaningful day and not just sit at home and be isolated from their community by using community integration flexible services like:

- Community Development Services
- Day Habilitation
- Medical Day Care
- Personal Supports
- Assistive Technology and Services
- Transportation
• Transportation
Day in the Life - Retirement

Reminders

- Retirement is approved at the age of 65
- Residential shared hours can be used for housemates who are retired when reflected in their PCPs
- Activity schedules can help to map out a day in the life (e.g., attending a local and integrated senior center; participating in clubs; and volunteering)

Rachel

Retirement is approved at the age of 65

Residential shared hours can be used for housemates who are retired when reflected in their PCPs

Activity schedule can help to map out a day in the life (e.g., attending a local and integrated senior center; participating in clubs; and volunteering)
Jane
Can you shared how you went about supporting the person and their team in discussing retirement and how the person would wishes of their day in a life included the person’s preference and choice?

Great question. I asked the Individual to explain his/her vision for the next 5 years as approaching retirement age. The person confirmed that he/she would like to retire at age 67 and continue to live at her plan and receive the maximum support from staff. I would also provide suggestions of what other Individuals that are retired what their weekly activities look like and provide resources of State/County services are available, like for example (going to senior centers, CFC program, Medical Day program, and so on). The Individual’s staff and family would continue to provide assistance/support while he/she continues to live a
better quality of life.

Karen or Jennifer

Can you share how you have created a meaningful day in the life for people of retirement age? and give examples?

Can you talk about providing CDS for a person that has retired living in a community group home?
Jennifer

In this example we are focused on a person that is 65 years or older and no longer is working and wants to only participate in service activities for half days. This example is specific to someone receiving residential supports where they would utilize residential hours during the day along with CDS group based services. When providers are developing their DSAs it will be important that they build in some flexibility and likely put in more residential supports in case CDS services are not provided on a particular day due to illness, etc.. That way the residential provider is able to bill in those instances.

This is an example that retirement can include supports during the day within their home along with Meaningful day services.
Jennifer

In this example, the meeting point for CDS services is at the community location. People can utilize the stand alone transportation service to use public transportation, uber, Lyft, etc to meet at the community location where CDS supports start. Residential providers and Meaningful day providers also can coordinate team member transport to services when other transportation options are not available. There would however be a gap in utilization for the time people are going from one location to another if a service provider is providing the transportation.
Questions