


STATE OF NEW HAMPSHIRE BDS RELEASE OF POLICY	
PR NUMBER:	21-18
FROM:	Sandy Hunt
OFFICE OF:	Bureau of Developmental Services
SIGNATURE	
SIGNATURE DATE:	01/21/2022
SUBJECT:	NH HCBS Recruitment, Retention, and Training Payment Provider Agency Guidance
TO:	Nancy Rollins, Interim Director DLTSS, BDS Area Agencies; All BDS Staff; Office of Finance Staff responsible for Recruitment, Retention, and Training Payment
EFFECTIVE DATE:	April 1, 2021 to March 31, 2022

Purpose and Intent of Policy

To describe how the 10% increase to the state Federal Medical Assistance Percentage (FMAP) for Home and Community Based Services (HCBS) from the American Rescue Plan Act of 2021, will be calculated, distributed and for what purpose.

Definitions

- A) **American Rescue Plan Act of 2021 (Rescue Act), Section 9817(a)(1)** provides a 10% increase to the state FMAP for HCBS delivered during the project period
- B) **Direct Support Professional (DSP)** works directly with people who have intellectual, developmental, or physical disabilities. DSPs assist people to reach their goals as outlined in their Service Agreement.
- C) **Direct Support Worker (DSW)** helps maintain a client’s well-being and independence in their own home and community, as outlined in their care plan/service agreement. DSWs provide a range of care and support services such as personal care, help with mobility, transport, domestic duties, or provide companionship. A Direct Support Professional is included in this broader category of Direct Support Worker. Direct Support Worker does not include case managers or other individuals providing a similar service.
- D) **HCBS:** Home and Community Based Services

- E) **Immediate Supervisor** an individual who directs and assigns the work of DSWs. Immediate supervisor does not include agency general management, including Chief Executive Officers, Chief Financial Officers, Chief Operating Officers, Chief Clinical Officers, Chief Medical Officers, or any equivalent Provider Agency leadership positions.
- F) **FMAP:** Federal Medical Assistance Percentage
- G) **Project Period:** April 1, 2021 to March 31, 2022

Provider Agency Requirements

To receive NH Medicaid recruitment, retention, and training payment under this initiative, Provider Agencies must meet the following requirements:

1. The Provider Agency will make payments in accordance with the requirements contained in:
 - a. BDS PR 21-18 NH HCBS Recruitment, Retention & Training Payment Provider Agency Guidance;
 - b. BDS 3785 *Attestation of Requirements & Authorization to Pay Recruitment, Retention, and Training Payment*; and
 - c. Any other requirements set forth by the federal Centers for Medicare & Medicaid Services (CMS) or the Department.
2. At least 80% of the payment must be spent on recruitment, retention, and training payments to:
 - a. Existing Direct Support Workers (DSWs), including Direct Support Professionals (DSPs);
 - b. Existing Immediate Supervisors; or
 - c. New DSWs and New Immediate Supervisors.
 - d. The 80% payment cannot be paid to case managers as they are not direct support.
3. The remaining 20% of the payment must be spent or set aside for the Provider Agency's associated costs of administering recruitment, retention, and training payments or on additional recruitment, retention, and training payments. This 20% cannot be used to pay for payments for case managers as they are not considered direct support nor an administrative cost associated with administering recruitment, retention, and training payments.
4. The individuals receiving recruitment, retention, and training payments are employees or contractors providing direct service of a Provider Agency or subcontractor at the time the Provider Agency or subcontractor invoices for the recruitment, retention and training payment.
5. Payments under this initiative, including the 20% that may be allocated for administrative costs, may not be used to pay recruitment, retention, and training payments to or otherwise supplement the income of a Case Manager, Chief Executive Officer, Chief Financial Officer, Chief Operating

Officer, Chief Clinical Officer, Chief Medical Officer, or equivalent Provider Agency leadership position;

6. Each Provider Agency must adopt a brief written plan that outlines the how the dollars will be used and disseminate the plan to the Department and the Provider Agency's employees and any subcontractors.
7. The Provider Agency must complete BDS 3795 *Recruitment, Retention, and Training Expense Report* and provide it to the Department by emailing it to HCBSARPAPayment@dhhs.nh.gov by 8/1/22. BDS 3795 must provide employee- and contract worker-level details on the recruitment, retention, and training payments, including records of administrative costs.
8. Expenditures Provider Agencies make under this initiative are subject to audit at the Department's discretion or from CMS, and payments made contrary to guidance are subject to recoupment by the Department and other sanctions.
9. Each Provider Agency must retain, maintain, and make available to a state or federal audit authority, or any other authorized third-party reviewer upon request, copies of all documentation related to expenditures made under this initiative, including but not limited to personnel records, NH Medicaid claims data, and provider agency financial data.
10. Misrepresentation or falsification of any information contained on BDS 3785 *Attestation of Requirements & Authorization to Pay Recruitment, Retention, and Training Payment* or BDS 3795 *Recruitment, Retention, and Training Expense Report* may be punishable by fine and/or imprisonment under state or federal law.
11. Each Provider Agency must certify that any information provided to the Department regarding this initiative, including the BDS 3795 report due on 8/1/22, is a true, correct, and complete statement prepared from the books and records of the Provider Agency as of the date signed.
12. The individual submitting BDS 3785 *Attestation of Requirements & Authorization to Pay Recruitment, Retention, and Training Payment* must be authorized to make these representations on behalf of the Provider Agency.
13. BDS 3785 must be submitted by emailing it to HCBSARPAPayment@dhhs.nh.gov

Provider Agency Expenditure Report Requirements

By August 1, 2022, the Provider Agency must submit an expenditures report to the Department on BDS 3795 *Recruitment, Retention, and Training Expense Report*. The BDS 3795 will be an excel workbook for submitting the expense report on one worksheet tab with instructions for completing the report on another worksheet tab.

In addition to this report, the Provider Agency must provide any documentation requested by the Department or CMS as part of an audit.

Procedures

New Hampshire (NH) operationalizes the allocation of authorized funds under section 9817 of the American Rescue Plan Act of 2021 (ARP) for additional payments to providers via the New Hampshire Home and Community Based Services (HCBS) Recruitment, Retention & Training Payment Program (RRTPP).

The estimated amount available for the state to reinvest was calculated by identifying the procedure codes/modifiers/types of service (or combination thereof) that were eligible for the enhanced 10% under Section 9817 of the ARPA. A query was run in our Medicaid Management Information System (MMIS) to determine the Fee for Service and HCBS waiver claims paid during quarter end (QE) 6/30/2021, QE 9/30/2021, and QE 12/31/2021 using the identified procedure codes/modifiers/types of service. We then used the actuals from those quarters (based on the query results), and estimated the following quarter (as an average of the previous 3 quarters). The amount available to NH for reinvestment is the 10% of those total expenses (3 quarters of actual, and 1 quarter of estimates based on those actuals). Using this information, a portion of the reinvestment plan was dedicated to workforce recruitment, retention and training within the Division of Long Term Supports and Services' (DLTSS) four 1915(c) waivers. The projected funds were distributed equally to the two program areas, Bureau of Elderly and Adult Services and Bureau of Developmental Services.

1. NH HCBS RRTPP funds will be allocated and paid to the Developmental Services system. Distribution of funds to providers of ABD, DD and IHS HCBS was determined as follows:

- The Bureau of Developmental Services (BDS) reviewed the Medicaid Management and Information System to determine estimated actual expenditures for the period of April 1, 2021 to December 31, 2021 for eligible codes.
- Distribution of funds to providers was determined by identifying providers of the following service codes:
 - i. DD Waiver:
 1. H2015 - Community Support Services;
 2. H2023 - Supported Employment Services;
 3. T1020 - Residential Personal Care Services; and
 4. T2021 - Day Habilitation Services.

ii. ABD Waiver:

1. H2015 - Community Support Services;
2. H2023 - Supported Employment Services;
3. T1020 - Residential Personal Care Services; and
4. T2021 - Day Habilitation Services.

iii. IHS Waiver: T2025 - In Home Residential Habilitation.

2. Provider payments are based on a uniform add-on payment per service unit for each of the respective codes enumerated above, to arrive at a one-time lump sum payment per provider.

Lump sum payments were determined using the following analysis:

- Projected expenditures were broken out for the chosen services listed above, by service unit: Per Diem, per visit and per 15 min, for the three waivers combined.
- A percentage of total BDS projected expenditures for each service unit was calculated to total overall BDS projected expenditures.
- The calculated percentages were used to break out the allocated ARP dollar amount available to BDS in order to calculate an add-on to each service unit.
- The add-on amount was determined for each unit to keep the dollars within the projected amounts by service unit. Please see worksheet below:

3. At least 80% of the RRTPP funds will be spent on:

- Existing direct support workers (DSW), including direct support professionals (DSPs), and existing immediate supervisors.
- New DSWs, including DSPs, and new immediate supervisors.
- The 80% payment cannot be paid to case managers as they are not direct support.

4. *BDS 3785 Attestation of Requirements & Authorization to Pay Recruitment, Retention, and Training Payment* ensures that the agency understands that:

- BDS will make payments if the provider completes BDS 3785, to attest that the provider will use the payments for the express purpose of recruitment, retention and/or training of direct support staff.
- The ten (10) area agencies, as NH's Designated Organized Health Care Delivery System, will distribute the funds to their vendors after obtaining a copy of BDS 3785 from each vendor. The area agencies will retain these attestation forms with their billing records.

5. Each provider agency shall develop a written RRTPP plan that outlines:
 - That 80% of funds received will be used for recruitment, retention and/or training of existing DSWs, including direct support professionals (DSPs) and existing immediate supervisors and/or new DSWs, including DSPs, and new immediate supervisors. These funds cannot be used to pay for case managers as they are not direct support workers.
 - How funds will be used to support recruitment, retention and/or training of existing DSWs and/or new DSWs.
 - The rationale of how payments will be distributed to eligible DSWs
 - The amount of payments to be distributed to eligible DSWs. The plan shall be submitted to the NH DLTSS, and communicated with the employees of the agency and provider agencies, if applicable.
6. RRTPP payments shall supplement and not supplant current agency practices and policies regarding planned bonuses and wage increases.

Questions regarding this initiative should be directed to HCBSARPAPayment@dhhs.nh.gov.