

ADS Quality Pilot Program: Technical Implementation Manual

State of Ohio, Department of Developmental Disabilities

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ADS Quality Program Executive Summary

Adult Day Support (ADS) includes services and supports to individuals with developmental disabilities that enhance skills, community membership, and independence, as well as personal choice, all in order to attain or maintain maximum potential and community engagement. The expected outcome is the development of skills that lead to greater independence, community membership, relationship-building, self-direction, and self-advocacy. The Ohio Department of Developmental Disabilities (DODD) is implementing the ADS Quality Pilot Program to test whether directed investments and quality incentives can achieve the following system goals:

- Build ADS provider capacity to support a continued focus on quality improvement
- Reward providers for demonstrating improvement in the quality of services provided
- Improve access to ADS services, especially among individuals with complex needs
- Improve person-centered outcomes among individuals receiving ADS services, including achievement of unique goals, building skills, and integrating into the community

The ADS Quality Pilot Program will provide payment to participating providers through two mechanisms: capacity improvement investments and pay-for-outcomes payments. These payments will be made in addition to service revenue that providers already receive.

1. **Capacity Improvement:** payments will provide funds to providers to build the capacity necessary to re-orient their practice to focus on continuous quality improvement. This includes funds for hiring a quality manager, training staff to deliver the highest standards of care, and investing in health information technology to support quality improvement activities and monitoring.
2. **Pay-for-Outcomes:** payments will be made to providers upon demonstrating high achievement or meaningful improvement on a set of quality measures.

Over time, DODD envisions that the ADS quality program will incentivize and enable improvement on a set of quality measures that focus on individual outcomes, such as achievement of unique goals, demonstrated improvement in functional skills, and improvement in participant satisfaction, with particular attention to individual in ADS with complex needs. Because an ADS quality improvement framework is new in the national DD space, DODD intends to begin the program with a focus on data collection process measures and building the necessary foundation for quality improvement. Following the first year of implementation, the program will shift toward rewarding improvement of person-centered outcomes based upon results of the initial measures.

Participation in the ADS Quality Pilot Program is voluntary for providers who have delivered ADS services for at least one year. DODD anticipates implementing a participation cap in order to manage the pilot program within the existing budget and given current department capacity.

The ADS Quality Pilot Program is slated to begin in October of 2023. The pilot program is expected to invest \$15M in ADS service providers annually. The program will initially be funded through dedicated American Rescue Plan Act (ARPA) funds, which must be expended by March 31, 2025. DODD is in the process of exploring pathways to sustain the program beyond the ARPA deadline through an amendment to the 1915(c) waivers and identification of non-federal funds to support the program on an ongoing basis.

ADS Quality Pilot Program Overview

PROGRAM STRUCTURE

The ADS Quality Pilot Program will allow providers to earn payments through two mechanisms:

1. Capacity improvement funds that are meant to enable providers to build the capacity necessary to re-orient their practice to focus on continuous quality improvement. This includes funds for hiring a quality manager, training staff to deliver the highest standards of care, and investing in health information technology to support quality improvement activities and monitoring.
2. The pay-for-outcomes incentive payment is earned by reporting and achieving targets on a DODD defined set of quality metrics. DODD intends for this program to incentivize quality measures that focus on individuals achieving their unique goals, improving participant satisfaction, and addressing the enhanced delivery of services to individuals in ADS with complex needs. Because a quality improvement framework is new in the ADS DD space, DODD will start the program with a focus on reporting and process measures, as baseline performance on outcome measures is obtained and provider capacity for quality improvement is developed. In year two of the pilot program, providers will be rewarded for demonstrating achievement or improvement on a set of quality measures. It is expected that the quality measure set will evolve over time as lessons are learned through the pilot program.

PILOT PROGRAM TIMELINE

The following timelines reflect the pilot period only, which will take place between October 1, 2023 and March 31, 2025, aligning with the federal ARPA expenditure deadline. DODD intends to sustain the program beyond the pilot, which is contingent upon identification of ongoing funding and CMS approval.

Capacity Improvement

2023					2024				2025			
Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
		July-Sept	Program application/enrollment									
			★	Technology Payment Year 1								
								★	Technology Payment Year 2			
			★	★	★	★	★	★	Staffing Payments			
			Oct-June				Training Period 1					
							★	Training Payment 1				
							July-Dec		Training Period 2			
								★	Training Payment 2			

Pay-for-Outcomes

2023				2024				2025				
Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Oct – Sept				Measure Year 1 (baseline year for new measures)								
				Oct – Mar		Reporting for Year 1						
				Oct – Sept				Measure Year 2				
								★		Pay Point for Year 1		
								Oct-Jan		Reporting for Year 2		
										★		Pay Point for Year 2

Notes:

- Baseline data collection reflects the period beginning in Q4 of 2022 and will be used to establish measure targets for year 2
- The year 2 reporting period is shortened in order to issue provider payments before the 3/31/25 ARPA expenditure deadline

Provider Eligibility and Enrollment

PROVIDER ELIGIBILITY

All DODD providers that have been rendering ADS waiver services for at least one year are eligible to participate in the ADS Quality Pilot Program. Participation in the pilot program is voluntary. Providers who opt-in to the program must participate in both the capacity improvement and pay-for-outcomes aspects of the program.

DODD will institute a cap on participation to make sure the program is implemented in accordance with the program budget and departmental capacity.

Provider participation may be terminated at any point due to noncompliance with program standards.

PROVIDER APPLICATION AND ENROLLMENT PROCESS

DODD will establish an annual process for first time providers to apply for participation in the upcoming program year. The pilot program application will request up-front data needed to operationalize certain provider-specific aspects of the program, such as the staff training target, the provider retention measure, and any other necessary up-front data collection. Providers will also have to submit a technology investment plan and quality manager hiring plan as part of the application. For providers who are continuing their participation in subsequent years, a streamlined enrollment process will be implemented.

DODD will review and approve applications to formally accept providers into the program. Providers will be required to sign a participatory agreement that will outline the terms and conditions of participation in the pilot program.

Capacity Improvement Payments

PROGRAM REQUIREMENTS

The capacity improvement payment is designed to support providers in building the capacity for quality improvement. Specifically, payments will be made to enable providers to hire a quality manager, train staff to deliver the highest standards of care, and invest in health information technology to support quality improvement activities and monitoring. These infrastructure investments are intended to give providers the resources to improve the outcomes of ADS services through practice changes and adoption of continuous quality improvement practices.

The capacity improvement portion of the ADS Quality Pilot Program has been developed to provide payments to participating providers that will compensate providers for three distinct functions:

1. Staffing:

Budgeted amount	<ul style="list-style-type: none"> \$102,947 for providers earning over \$3M in ADS revenue (1 FTE) \$51,474 for providers earning between \$1-\$3M in ADS revenue (.5 FTE) \$33,973 for providers earning less than \$1M in ADS revenue (.33 FTE)
Purpose	Funds a quality improvement manager at a salary of \$71,160 (plus benefits, employee taxes, and trend) to support quality measure reporting, monitoring, and continuous quality improvement activities ¹
Acceptable use	Staff salary and fringe benefits or contract hours
Payment Process	Quarterly payment

2. Training:

Budgeted amount	\$47.09 an hour for an 8-hour training course for each trained DSP for at least 75% of DSPs employed by participating provider (\$376.72 per DSP)
Purpose	Funds staff time for hours spent in training. Providers must have 75% of their DSPs complete the training course. Training is meant to focus on best practices related to the quality measures, to ultimately support quality improvement. DODD will provide the training curriculum and offer training sessions during each program year. Providers may also request approval for alternative training curriculum.
Acceptable use	Staff salary and fringe benefits
Payment Process	Once per year, paid when target completion rate is achieved

3. Technology:

Budgeted amount	\$10,000 flat amount for all providers
Purpose	Funds investment in hardware or software to facilitate quality improvement activities, such as quality reporting, monitoring quality performance, or implementing quality improvement efforts
Acceptable use	New software, updates to software or IT systems, new hardware, internet connectivity, or other technological solutions to support the provider's quality improvement activities
Payment Process	Lump sum payment issued at the beginning of the program year

¹ Includes provision for employee-related-expenses (ERE) equal to approximately 36.2% of wages and an inflation adjustment of 15%, representing wage and ERE inflation from the data measurement period to the midpoint of the payment period.

REPORTING PROCESS

In order to receive the allocated capacity improvement funding, the provider shall be required to submit documents for each of the three categories as part of the program application process. Providers shall maintain records documenting how funds earned in this program were expended.

For the staffing component, the provider shall submit hiring plans and/or job descriptions for the quality improvement manager position that will be filled by a new hire or existing personnel. Similarly, the provider shall submit a technology investment plan that details the intended investments in technology solutions and describes how it will be used to further the provider's quality improvement approach. DODD will review the hiring plans, job descriptions, and technology investment plans as part of the application review process. DODD may require revisions prior to payment to the individual providers.

For the training component, if the DODD curriculum is utilized, no prior approvals are needed. If the provider seeks to use an alternative training program that they have developed or purchased, the provider shall seek DODD approval before the non-DODD developed curriculum is considered for reimbursement; additional compensation will not be provided for the cost of the alternative training. Relevant trainings shall focus on serving higher acuity people, delivering person-centered services, and addressing behavioral support in individualized and unique situations. Each provider will submit documentation attesting to the number of direct service providers that completed the 8-hour training course. The 75% threshold shall be calculated based on the total number of direct service providers employed as reported in the participation application and payments can only be received once that participation requirement has been met.

PAYMENT PROCESS

Payments for the three infrastructure components will be issued to providers for the acceptable uses as described in the tables above. All payments will be reviewed and subject to reporting requirements to verify acceptable use and adherence to program standards.

The payment process for each component of capacity improvement will be made according to the following timelines:

1. **Staffing:** Payments will be issued quarterly, based on the size of the provider in terms of ADS revenue and beginning in the first quarter of the program year 1. Payments will be made automatically to participating providers.
2. **Training:** In order to receive payment from DODD, at least 75% of the provider's direct service providers shall partake in the approved curriculum. The 75% target will be established upon acceptance into the program based on the number of direct service staff reported in the application. If necessary, percentages shall be rounded to the nearest whole number. Upon reaching the target, providers will submit an attestation to DODD indicating the number of direct service providers that have been trained. Upon receipt of this attestation, a payment will be issued to the provider. Providers are able to have a higher proportion of DSPs trained than 75% and will receive payment reflecting the total amount of DSPs that have completed training.
3. **Technology:** A lump sum payment of \$10,000 will be automatically issued to participating providers at the beginning of the program year.

Pay-for-Outcomes Payments

QUALITY MEASURE SET

For the quality pilot project, DODD has established seven quality goals, which have been informed by discussions with the ADS Quality Workgroup. The ADS quality goals include:

1. Incentivize individual achievement of their unique goals/member choice
2. Improve readiness for community employment
3. Improve individual functional skills
4. Improve community integration
5. Improve access to ADS among higher acuity individuals
6. Improve provider capacity/training
7. Improve individual and family satisfaction with ADS services

Because quality measurement is still new in the HCBS adult day program, DODD set out to create a set of quality measures collaboratively with stakeholders that align with DODD's overarching quality goals and the work completed through the Blueprint.² Additionally, these measures were designed to be both achievable and measurable leveraging existing data sets and reporting process to avoid undue administrative burden on providers. These measures can be adapted and modified prior to the start of each pilot program year to help foster continued improvement as lessons are learned.

During year one, quality measurement will focus on the collection of baseline data through Outcome Tracking System (OTS) as new questions are added to the system. The quality payment will be based on provider's achievement on a measure of reporting completeness in the OTS system. In year two, targets will be established for remaining measures using baseline data to identify a high-performance benchmark or meaningful performance improvement threshold that providers will have to meet in order to achieve each measure. The quality payment will be based on a provider's achievement across the full set of measures.

ADS Quality Measure Set³

Quality Measure Name	Data Source	Measure Numerator	Measure Denominator	Measure Target
Complete submission of OTS Questionnaires	OTS	Number of fully complete questionnaires submitted in OTS	Number of OTS questionnaires assigned to the provider	75%-89%: half credit >=90%: full credit
Achievement of all experiences included in the ISP that support progress toward an outcome	OTS (new element in questionnaire)	Individuals who have achieved all experiences in the ISP that support progress toward an outcome in the measurement period	All individuals pulled into OTS with a questionnaire generated and assigned to the ADS provider in the measurement period with a support plan	First year will be used for baseline data collection
Movement along the People's Place on the Path to Community Employment (PPCE) path	OTS	Number of individuals who have moved forward on the PPCE path	All individuals aged 18-64 pulled into OTS with a questionnaire generated and assigned to the ADS provider in the measurement period	First year will be used for baseline data collection

² DODD. Blueprint for Adult Day and Employment Services Work Group. <https://dodd.ohio.gov/about-us/our-programs/resource-blueprint-workgroup>

³ While DODD recognizes the importance of including a member satisfaction measure in this program, processes need to be established in order to be able to measure and track satisfaction survey completion and results. It is DODD's intention to develop these capacities and processes for future inclusion in the quality measure set.

ADS Quality Measure Set³

Quality Measure Name	Data Source	Measure Numerator	Measure Denominator	Measure Target
Completion of DODD approved functional skill-building curriculum	OTS (new element in questionnaire)	Number of individuals who have completed an approved functional skill-building curriculum	All individuals pulled into OTS with a questionnaire generated and assigned to the ADS provider in the measurement period	First year will be used for baseline data collection
Proportion of hours spent in community involvement and socialization activities	OTS	Number of individuals who receive a threshold proportion of hours of ADS services in the community	All individuals pulled into OTS with a questionnaire generated and assigned to the ADS provider in the measurement period	First year will be used for baseline collection
Proportion of B and C individuals provided services	Claims	Number of B and C individuals with ADS claim in the measurement period	All B and C individuals with ADS claim in the measurement period	First year will be used for baseline collection
Continued engagement in services at 6 months among B and C individuals	Claims	Number of B and C individuals with at least 20 hours of service billed per month for 6 consecutive months	All B and C individuals with ADS claim in the measurement period	First year will be used for baseline collection
Provider direct staff workforce retention	Provider self-report	Total number of DSP staff who retained their job during the measurement period	Total number of DSP staff at the beginning of the measurement period	First year will be used for baseline collection

REPORTING PROCESS AND DEADLINES

The timeline for quality reporting will align with the current OTS questionnaire reporting window. Processes and timelines for each type of measure are described here:

- **OTS measures:** The OTS system will include new questions to facilitate this pilot project, which will be structured to capture whether the outcome has been achieved within the past 12 months (October 1 through September 30). Following the close of the measurement period, participating providers will enter data into the OTS system between October and March. The first year of the pilot will collect measurements from the previous reporting period to act as a baseline for quality measures for the second pilot year, from October through September.
- **Claims measures:** DODD will analyze claims data during the same measurement period (October 1 through September 30), building in time for claims runoff to determine quality scores for each measure for each provider.
- **Provider self-report measures:** DODD will issue a one-question survey to participating providers at the end of the measurement period to collect data on staff retention.

PAYMENT PROCESS

Each participating provider will have a unique quality-based incentive pool that they will have the opportunity to earn at the close of each program year. The quality-based incentive pool will be equal to 5% of a provider's Medicaid fee-for-service revenue, which will be calculated using the same time period as quality measurement (October 1 through September 30). The amount of the incentive pool that the provider earns will be calculated based on performance on the quality measures listed above.

Each year, DODD will evaluate the data received and determine the incentive amount earned by each provider-based quality measure performance and issue payments accordingly.

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