

**AMERICAN RESCUE PLAN ACT OF 2021 (ARP) SECTION 9817
STATE SPENDING PLAN SUMMARIES
FEDERAL FISCAL YEAR 2023 QUARTER 1 UPDATE**

**DATA AND DESCRIPTIONS IN THESE SLIDES REFLECT DETAILS STATES PROVIDED IN THEIR RESPECTIVE
FEDERAL FISCAL YEAR 2023 QUARTER 1 (FFY23 Q1) SPENDING PLANS AND ARE SUBJECT TO CHANGE
BASED ON SPENDING PLAN UPDATES. SUBSEQUENT CHANGES TO STATE ACTIVITY PLANS AND PROPOSED
SPENDING WILL BE CAPTURED IN FUTURE VERSIONS.**

American Rescue Plan Act of 2021 (ARP) Section 9817

- On March 11, 2021, President Biden signed the ARP (Pub. L. 117-2).
- Section 9817 of the ARP provided qualifying states with a temporary 10 percentage point increase to the federal medical assistance percentage (FMAP) for certain Medicaid expenditures for home and community-based services (HCBS) beginning April 1, 2021, and ending March 31, 2022. The funds must be used to supplement, not supplant, existing state funds expended for Medicaid HCBS in effect as of April 1, 2021.
- Section 9817 also requires states to use state funds equivalent to the amount of federal funds attributable to the increased FMAP ("state equivalent funds") to implement or supplement activities to enhance, expand, or strengthen Medicaid HCBS. CMS expects states to expend these funds by March 31, 2025.
- This increased funding represents an opportunity for states to identify and implement changes aimed at addressing existing HCBS workforce and structural issues, expand the capacity of critical services, and begin to meet the needs of people on HCBS waiting lists and family caregivers. This funding also provides states an important opportunity to enhance individual autonomy and community integration in accordance with the home and community-based settings regulation, *Olmstead* implementation, and other rebalancing efforts.
- CMS requires participating states to submit and receive CMS approval of quarterly HCBS spending plans and semi-annual narratives on the activities that the state has implemented and/or intends to implement.
- For more information on ARP section 9817, please visit [Medicaid.gov](https://www.Medicaid.gov), [State Medicaid Director Letter # 21-003](#), and [State Medicaid Director Letter # 22-002](#).

Notes

- Each state summary contains summarized spending plan information with graphs, data, and at least one example to highlight from each of the 50 states and the District of Columbia (DC). The level of detail greatly varies across state spending plans, and states are in various stages of implementing activities. Therefore, details of each state summary vary from one to another. For example, reported spending is not included for all states because some state spending plans did not include these figures yet (either because of data lags or because states were still early in the implementation phase of their activities). Highlighted activities were chosen, with input from states, to show a range of different types of activities within and across states, including activities targeting different populations and services.
- The state summaries are a point in time representation of state spending on ARP section 9817 activities. Unless otherwise indicated, information is from states' federal fiscal year 2023 quarter 1 (FFY 23 Q1) (October 1, 2022 – December 31, 2022) spending plans, submitted to CMS beginning in July 2022. The spending plans include, among other information, updates on state implementation of activities, reported spending on these activities, and projections for quarterly spending up to FFY 25 Q2 (January 1, 2025 – March 31, 2025). Spending data does not necessarily represent or correspond to expenditures claimed by states on the CMS-64 quarterly financial report as of FFY 23 Q1, as states have two years to claim expenditures on the CMS-64. Further, some activities that states are implementing are not eligible for federal match as Medicaid expenditures. Further, data included in the state summaries are subject to change as states update their spending plans.
- Planned spending dollar amounts are not mutually exclusive and may duplicate between main and/or sub-categories because some states proposed activities that fall into multiple categories and sub-categories, and some states proposed multiple activities under a single category or sub-category but did not provide cost information for each discrete activity. Therefore, states, activities, and/or planned spending dollar amounts can be counted more than once and may not always sum to an unduplicated total.
- In some instances, CMS has asked a state to provide additional information before one or more proposed activities to enhance, expand, or strengthen HCBS in the state's spending plan and narrative can be approved, and/or has identified an activity that is not approvable under ARP section 9817. For all states, the approval to claim the FMAP increase is based upon the state's continued compliance with program requirements as stated in State Medicaid Director Letters # [21-003](#) and # [22-002](#). State spending plans can be found [here](#) and will be updated as available.

Key Terms

- **Planned Spending:** Planned spending is all funding a state has proposed for activities to enhance, expand, or strengthen Medicaid HCBS. The amount includes both the state and federal share of spending for activities that are eligible for federal financial participation (FFP).
 - **Note:** States may be permitted to fund activities using state equivalent funds only that are not eligible for FFP. This would apply to activities such as grant programs and capital investments for housing.
- **Reported Spending:** Reported spending represents funding that a state has spent to-date to implement proposed activities as of the start of FFY23 Q1 (October 1, 2022).
- **Area(s):** This is the category used to group activities described by states in their spending plans.
- **Activity(ies):** This is the actual title of a state's proposed activity noted in the spending plan. Some of the titles are very long and are shortened due to space limitations in the state summaries. Every effort is made to ensure traceability of the activity back to the spending plan.
- **Type, method, and issue:** These are “sub-categories” or “additional breakdowns” in the data collection. Specifically:
 - **Type:** Indicates type of training provided and telehealth support states are proposing
 - **Method:** Rate methodologies or ways states review or update the rates
 - **Issue:** Used specifically for social determinants of health (SDoH) and health equity graphs. These represent specific issues states are aiming to address in the SDoH/Equity context. As part of data classification logic, State Health Official Letter # [21-001](#) served as a guide to identify these issues.

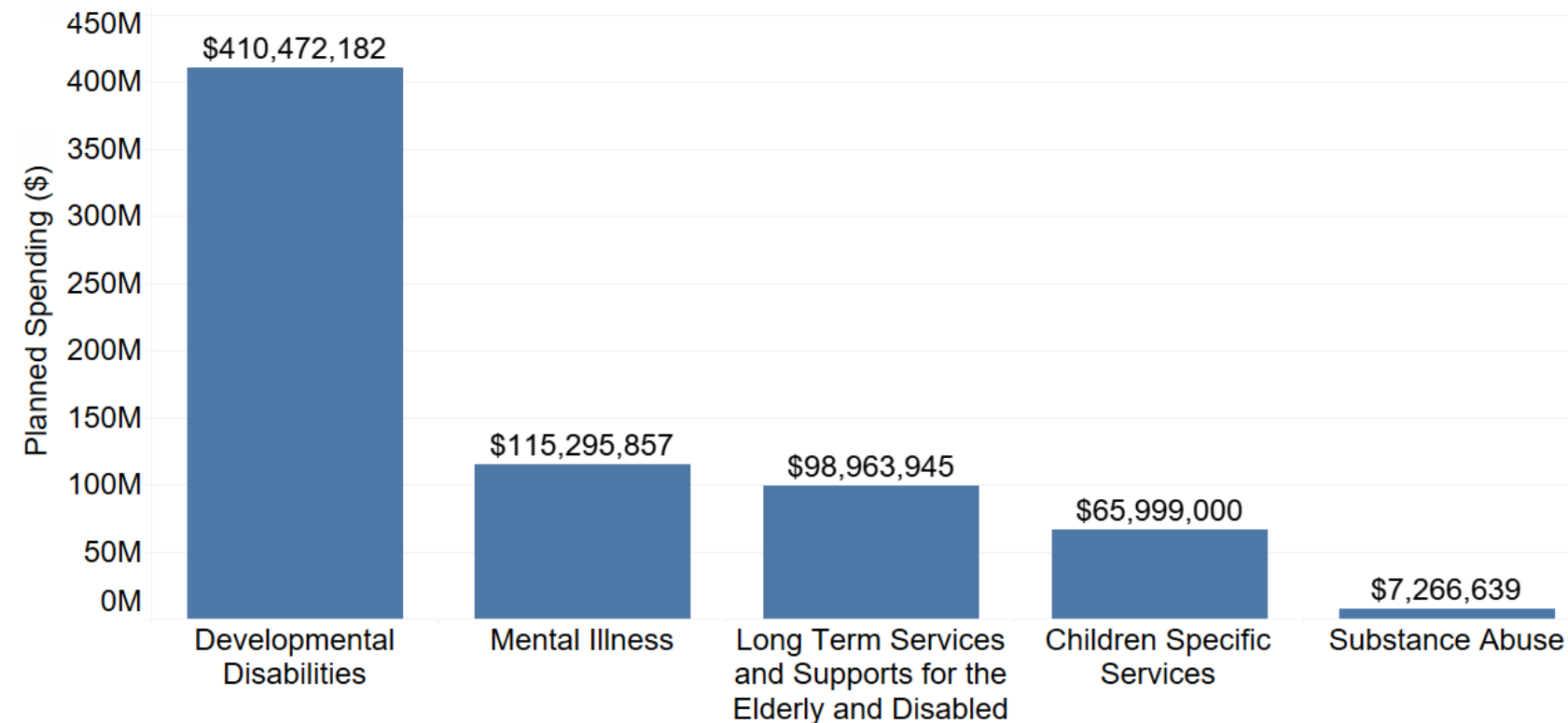
American Rescue Plan Section 9817 State Spending Plan Summary

Alabama

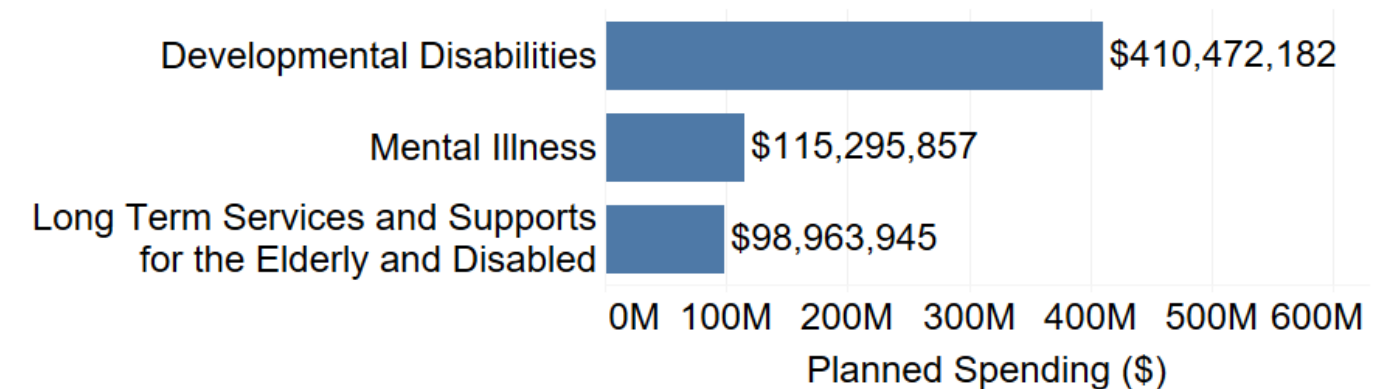
\$702.1M
total
planned
spending

8
activities
planned

Top 5 Activities by Planned Spending



Workforce Recruitment and Retainment Activities
By Planned Spending



Activity Highlights

Add 3,000 Slots for the Elderly and Disabled Waiver Program to Increase Capacity of the Program: Pay for additional community-based Medicaid expenditures for individuals. Three hundred thirty-seven (337) additional people have been enrolled in the waiver program because of this activity through the fourth quarter of calendar year 2021.

Provide Workforce Support and Training: Provide recruitment and retention incentive grants for providers serving individuals with developmental disabilities. The state will also initiate a workforce development initiative and utilize a subject matter expert for development of provider staff competency training opportunities.

Improve Telehealth Infrastructure Developmental Disabilities: Expand the use of technology and telehealth which will increase access to services. The state will also offer electronic visit verification equipment grants and provide funding for data management system enhancements.

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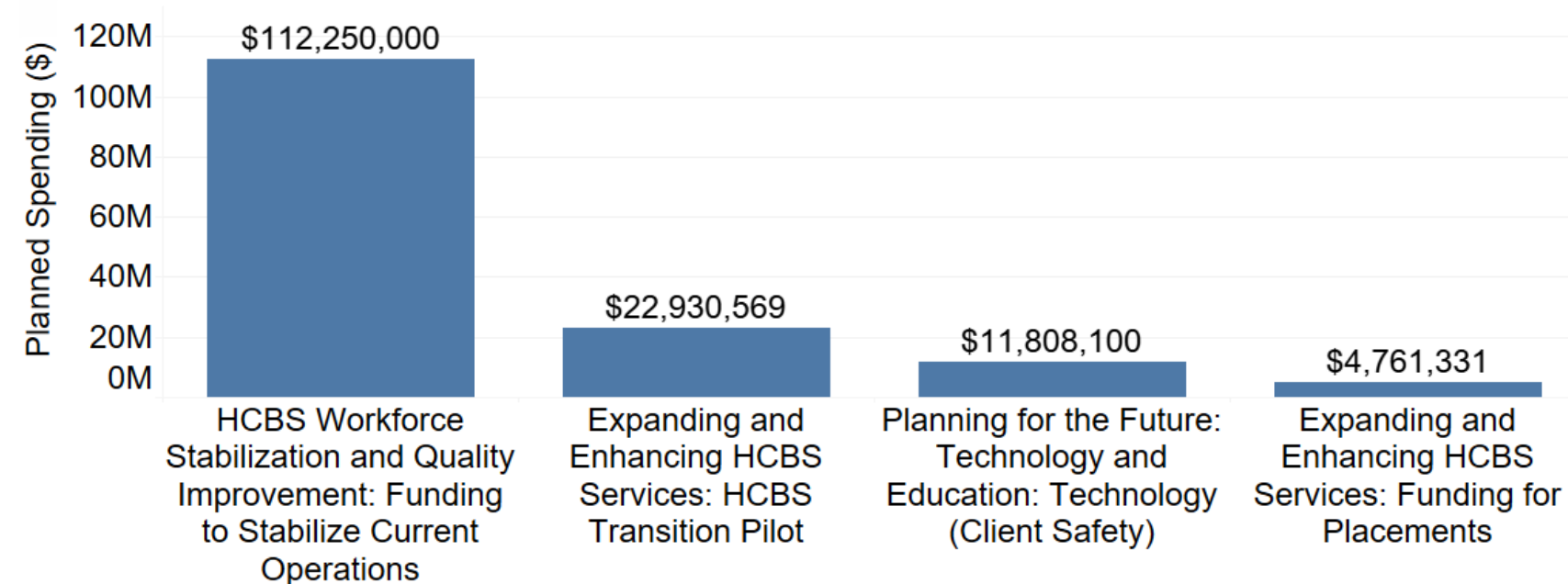
American Rescue Plan Section 9817 State Spending Plan Summary

Arkansas

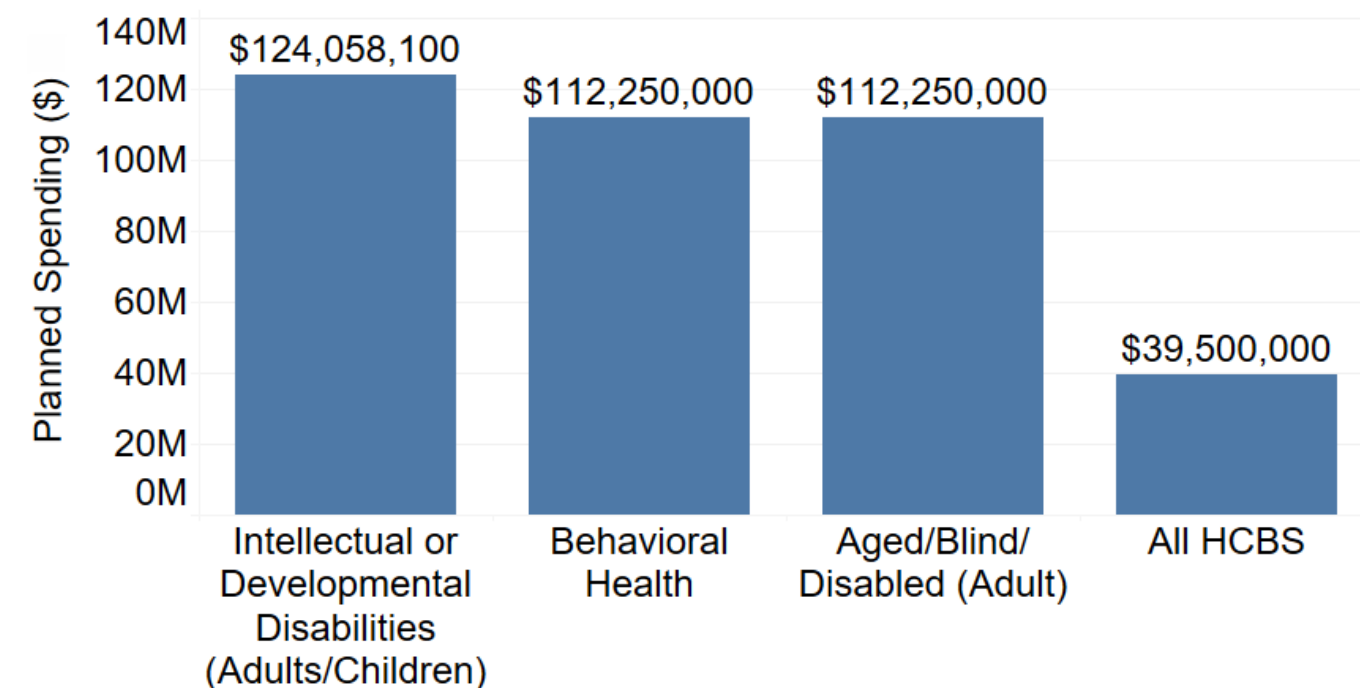
\$151.8M
total
planned
spending

4
activities
planned

All Activities by Planned Spending



Planned Spending, by Population Type



Activity Highlights

Planning for the Future - Technology and Education: Conduct a targeted educational campaign to educate clients and caregivers about underutilized services such as supported employment, supported housing, pre-vocational services for the aging, and peer support; and develop a comprehensive best practice model for providing technology to providers, gathering data on usage and outcomes, and evaluating the success of the initiative.

HCBS Workforce Stabilization and Quality Improvement: Assist providers with funding to stabilize and strengthen current operations and develop provider-based plans for quality implementation, staff advancement, and retention, both short and long term. The funding will be targeted at providers delivering services to people with developmental disabilities, older adults, and those with functional deficits due to their behavioral health needs.

Funding for Renovation and Infrastructure to Serve Complex Clients: Fund renovation and infrastructure, as well as design a process to streamline faster access to HCBS when a client is discharging from a more restrictive setting.

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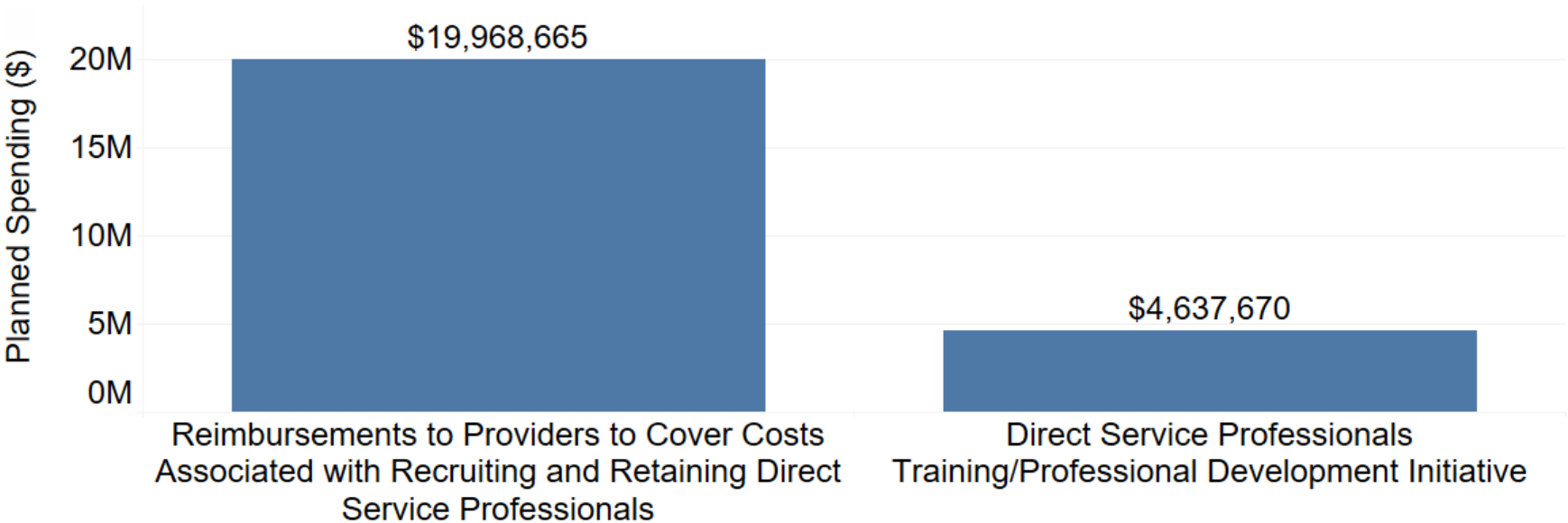
American Rescue Plan Section 9817 State Spending Plan Summary

Alaska

\$24.6M
total
planned
spending

2
activities
planned

All Activities by Planned Spending



Activity Highlights

Reimbursements to Providers to Cover Costs Associated with Recruiting and Retaining Direct Care Professionals: Reimburse providers for the following types of payments to direct care professionals: bonus or hero pays, bonuses, overtime, paid leave for COVID needs, shift differential payment related to the pandemic, personal protective equipment purchases, and vaccine incentive payments.

Direct Care Professionals Training/Professional Development Initiative: Offer enhanced training and support beyond the current training requirements for individuals who provide direct, hands-on care for disabled beneficiaries and their families, incentivizing retention and professionalism among this workforce. This initiative will be conducted in partnership with the University of Alaska Anchorage Center for Human Development which already has significant infrastructure and experience in offering training to direct care professionals.

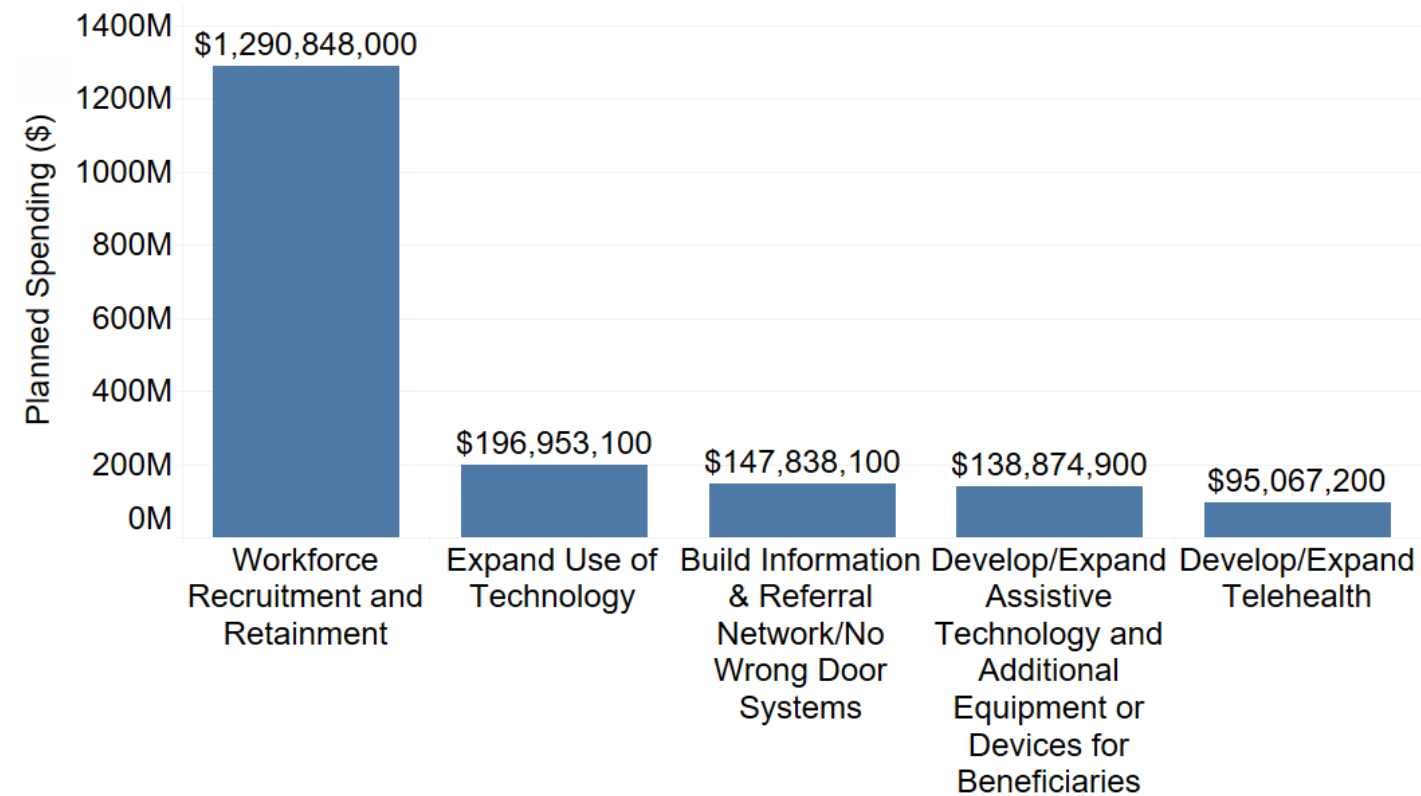
American Rescue Plan Section 9817 State Spending Plan Summary

Arizona

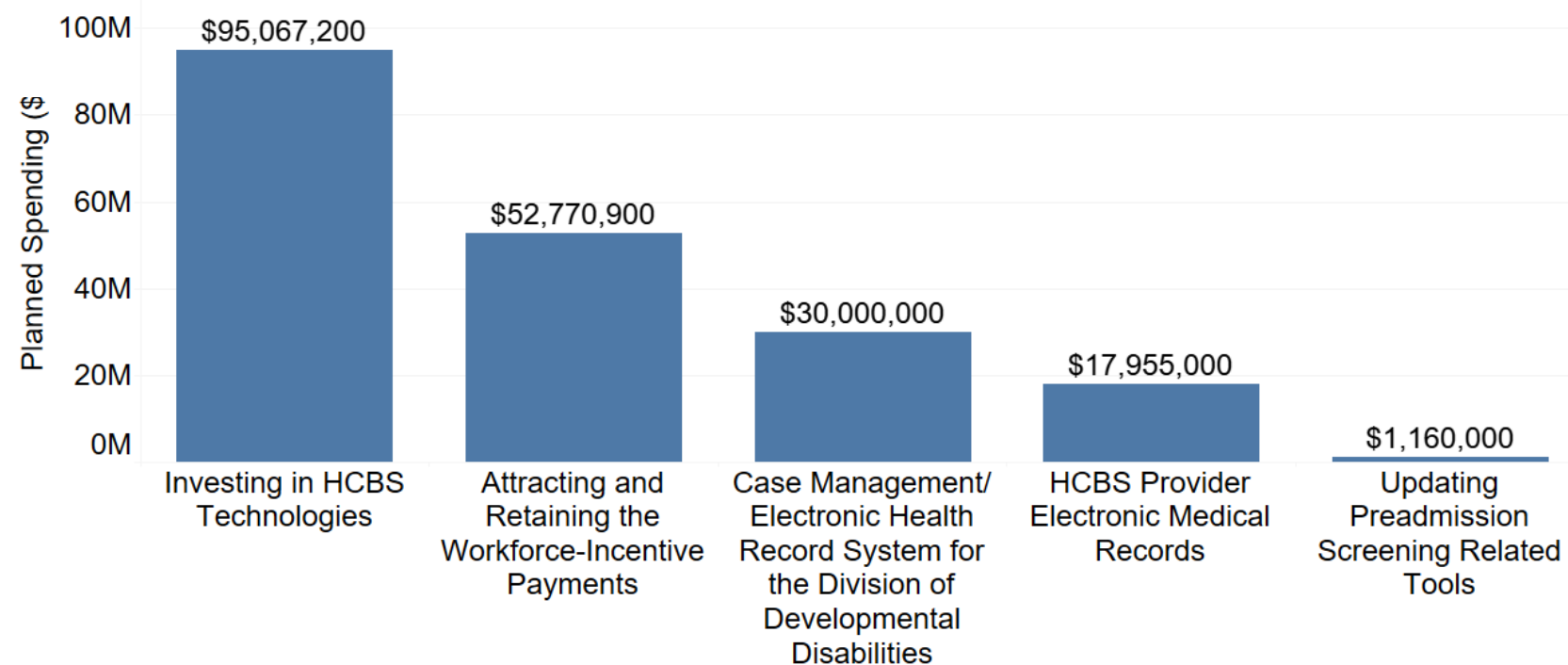
\$1.6B
total
planned
spending

31
activities
planned

Top 5 Areas by Planned Spending



Expanding Use of Technology Activities
By Planned Spending



Activity Highlights

Continuing Education Units (CEU)/Continuing Medical Education (CME) for Intellectual/Developmental Disability (I/DD) and Behavioral Health Providers: Develop CEU/CMEs for providers that include developing material into an electronic learning format and having the material certified as CEU/CME in order to promote provider engagement and ongoing learning. The goal of the courses is to reduce stigma, educate on person-centric care models for people diagnosed with I/DD, and promote a more informed and engaged workforce. Provider engagement will be measured through the number of providers trained, as well as pre/post-test scores.

Grants: Fund a grant program, which targets activities focused on programmatic enhancement, and/or infrastructure investments to providers, health systems, and contracted vendors. Targeted programmatic enhancement can include provider workforce retention and development, specialized training for direct care workers, and support programs that address social risk factors such as social isolation. Infrastructure investments include new living settings, purchase of vehicles, and improvements to existing group homes.

American Rescue Plan Section 9817 State Spending Plan Summary

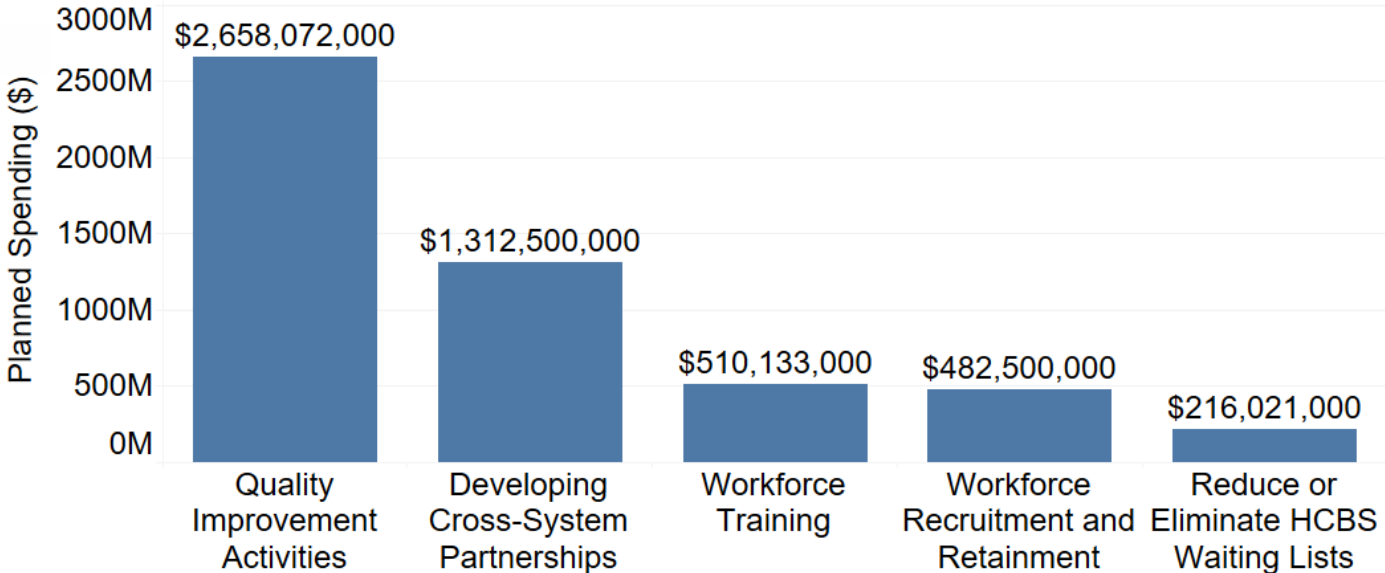
California

\$4.4B
total planned
\$6.5M total
reported
spending*

27
activities
planned

* Reported spending reflects spending through December 31, 2021.

Top 5 Areas by Planned Spending



Quality Improvement Activities

Activity Title from the Spending Plan	Total Planned Spend (\$M)
Developmental Services Rate Model Implementation	\$1,333M
Housing and Homelessness Incentive Program	\$1,300M
Dementia Aware and Geriatric/Dementia Continuing Education	\$25M
Total Planned Spending	\$2,658M

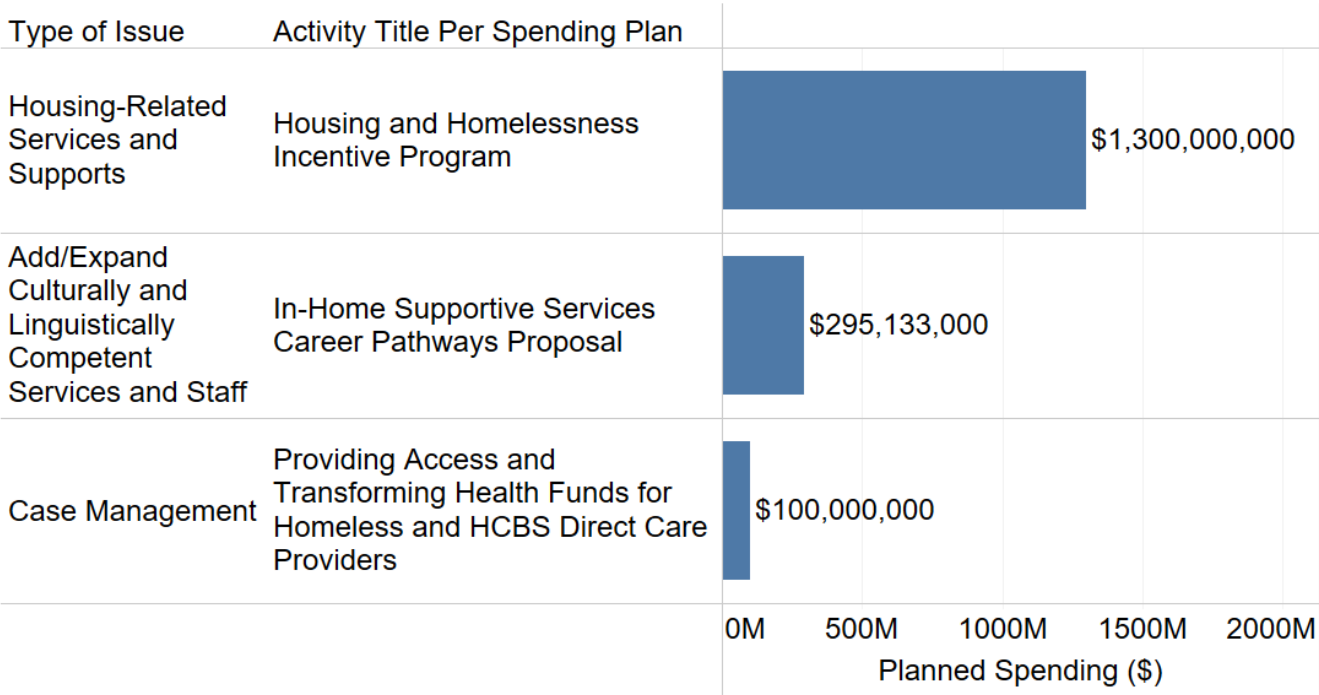
Planned Activities– Highlights

Housing and Homelessness Incentive Program: Provide incentive payments to Medi-Cal managed care plans (MCPs) for meeting specified metrics for addressing homelessness and keeping people housed. Funds would be allocated with consideration for point in time counts of homeless individuals and/or other housing related metrics determined by the state. MCPs and the local homelessness Continuums of Care, in partnership with local public health jurisdictions, county behavioral health, public hospitals, county social services, and local housing departments must submit a Homelessness Plan to the state. The Homelessness Plan must outline how Housing and Homelessness Incentive Program activities and supports would be integrated into the homeless system. This would include a housing services gaps/needs assessment.

Dementia Aware and Geriatric/Dementia Continuing Education: Develop an annual cognitive health assessment that identifies signs of Alzheimer's disease or other dementias in Medi-Cal beneficiaries. Develop provider training in culturally competent dementia care.

Contingency Management: The Contingency Management pilot program offers small motivational incentives combined with behavioral treatment for those with stimulant use disorders. The motivational incentives will be offered to patients through a mobile application and, for patients without access to a smart phone, managed through a statewide database accessed through the provider. The state will conduct a robust evaluation to determine if the program is effective.

Social Determinants of Health Planned Spending
By Type of Issue and Activities



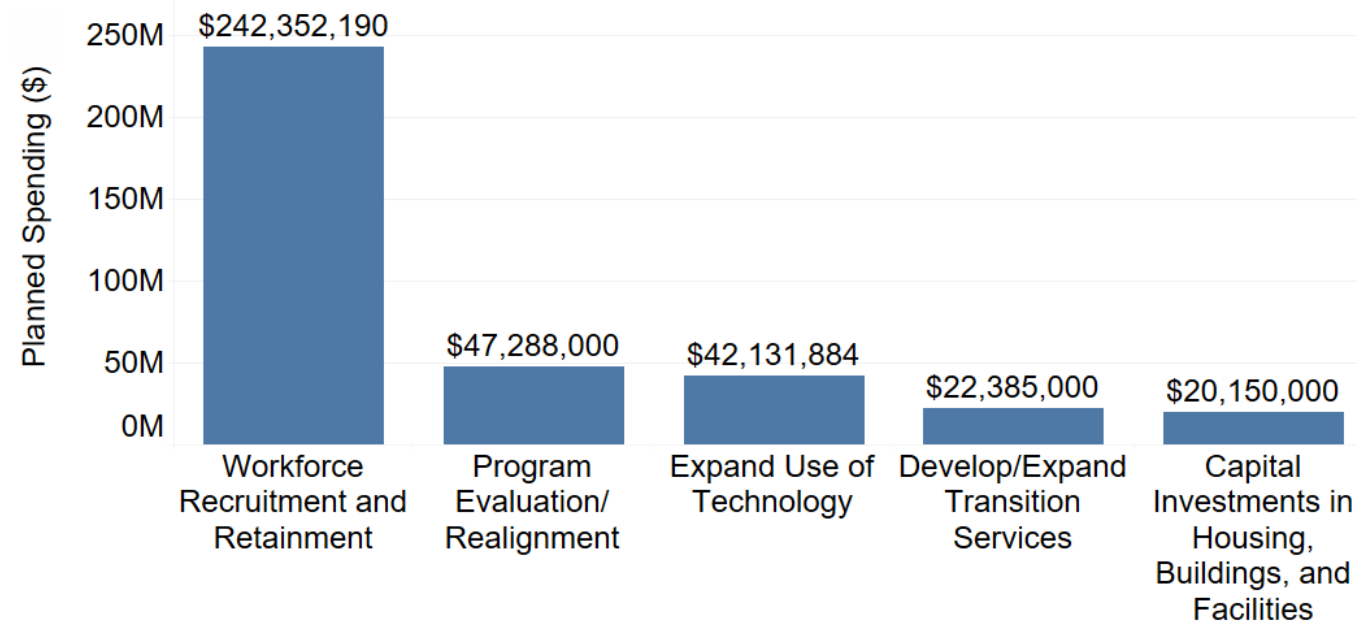
American Rescue Plan Section 9817 State Spending Plan Summary

Colorado

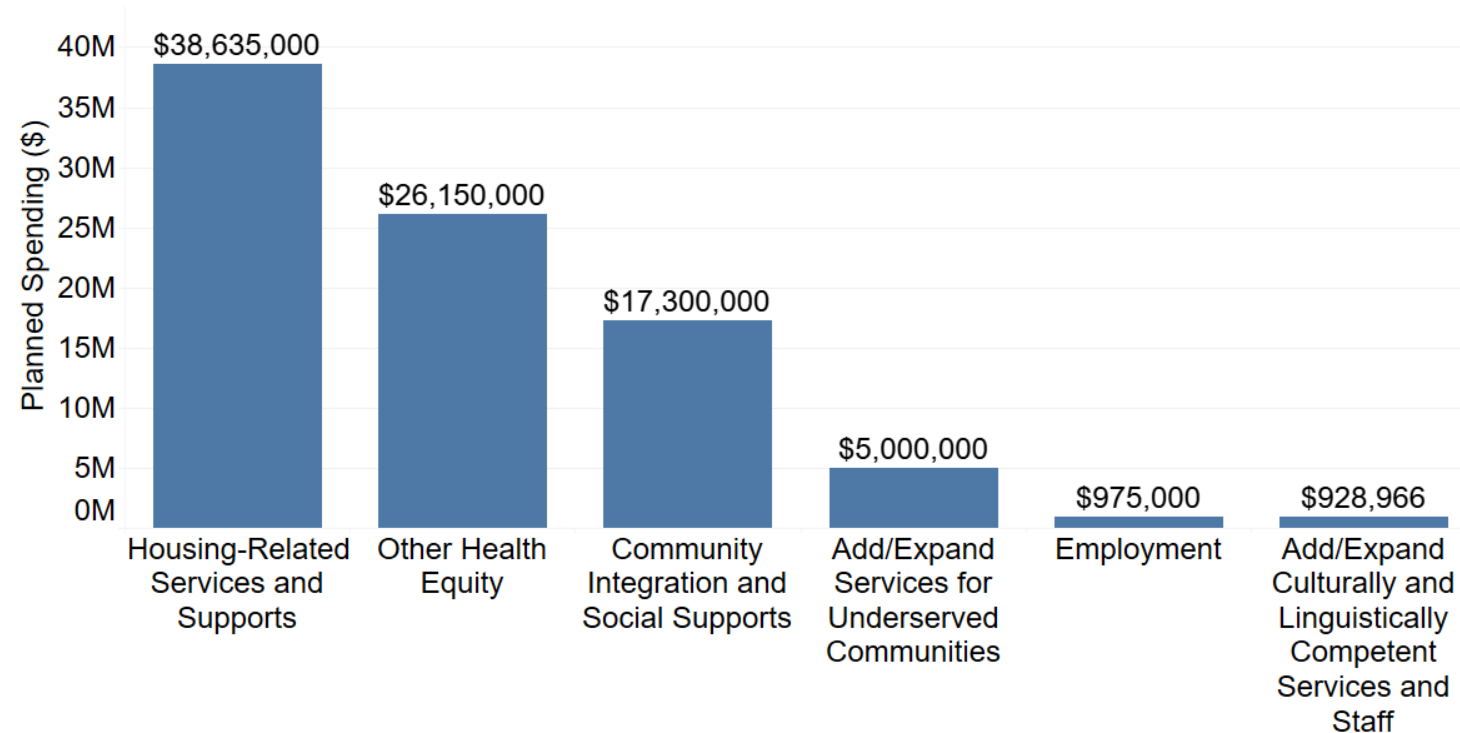
\$510.5M
total planned
\$45.3M total
reported
spending

63
activities
planned

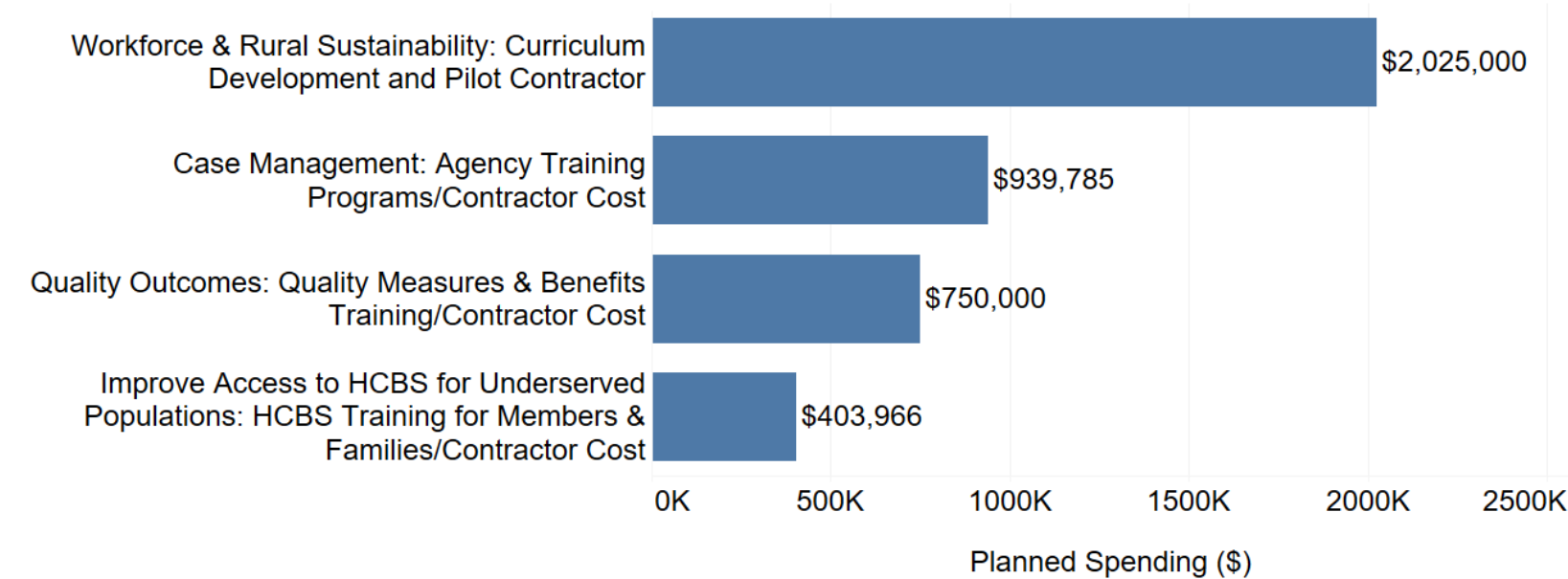
Top 5 Areas by Planned Spending



Social Determinants of Health Planned Spending
By Type of Issue



Workforce Training Activities
By Planned Spending



Activity Highlights

Strengthen the Workforce and Enhance Rural Sustainability: Develop homemaker and personal care worker curriculum to include specialized topics, such as Alzheimer's disease and related dementias and mental and behavioral health care, and provide free training online and in-person through a train-the-trainer model. The trainings will be developed using a “universal worker” structure, designed for use by individuals working in a variety of settings and with different populations.

Support Post-COVID Recovery and HCBS Innovation: Implement a supported employment pilot extension to determine if expanding incentive-based payments for supported employment services within section 1915(c) waiver programs is cost effective and produces positive outcomes. Learnings from the pilot program will be used to scale the model to other communities and to provide best practices recommendations for further development of new, innovative models.

American Rescue Plan Section 9817 State Spending Plan Summary



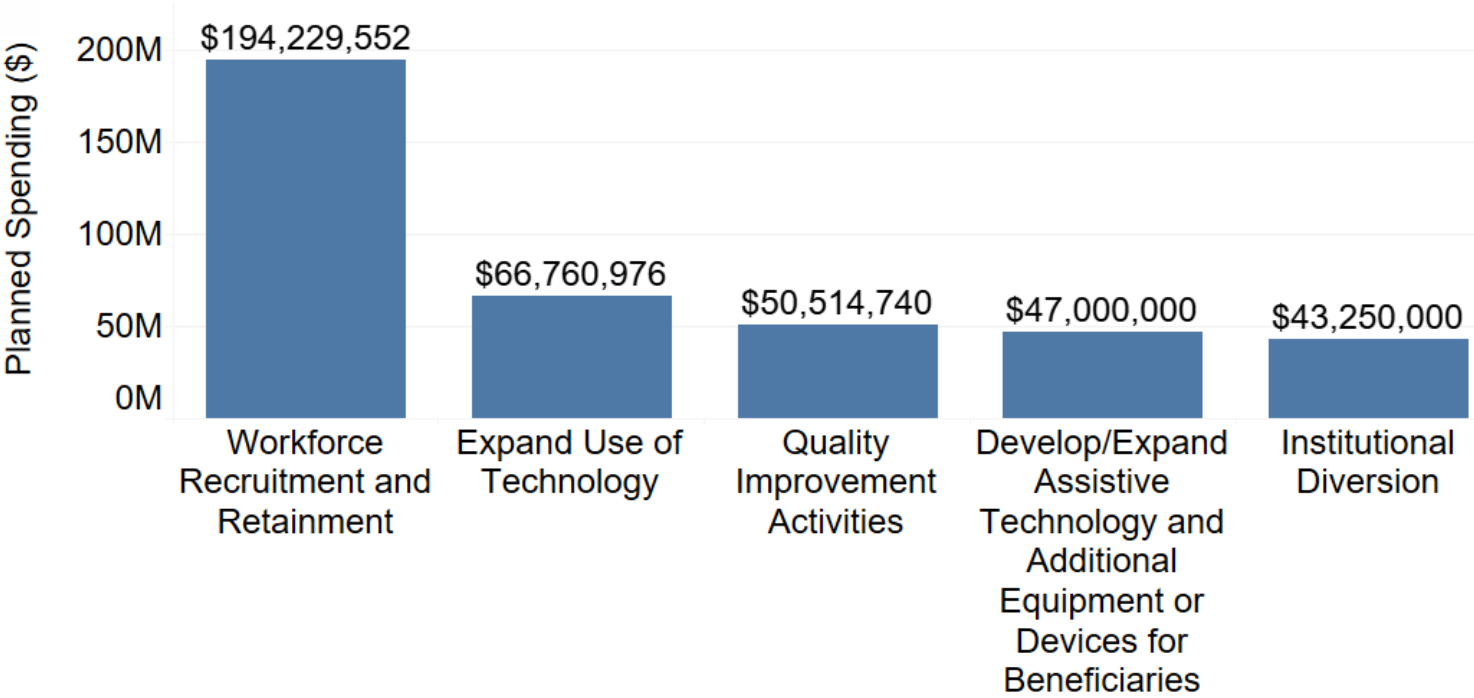
\$461.7M
total planned
\$105.2M
total reported
spending



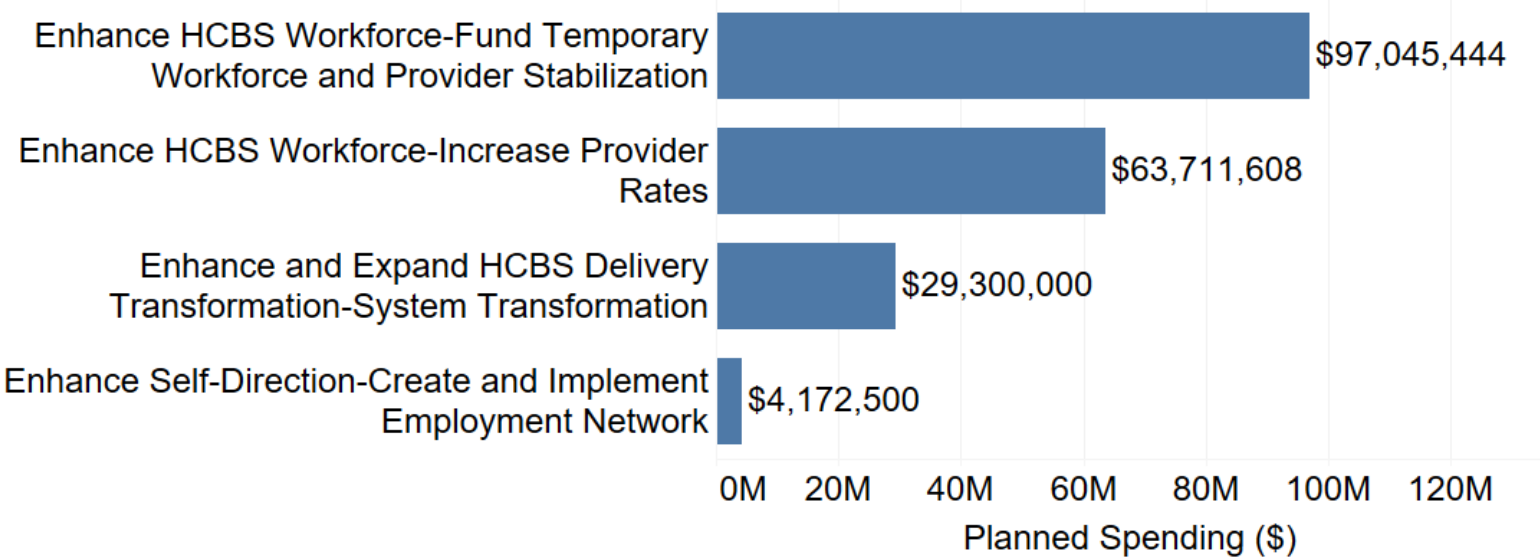
37
activities
planned

Connecticut

Top 5 Areas by Planned Spending



Workforce Recruitment and Retainment Activities
By Planned Spending



Quality Improvement Activities Focusing on Outcome-based Payment Initiatives

Activity Title from the Spending Plan	Total Planned Spend (\$)	Reported Spending (\$)
Strengthen Quality-Implement HCBS and Home Health Pay for Performance Initiative	\$21,323,892	\$5,657,599
Strengthen Quality-Consultant to Create Outcome-Based Payments-Department of Developmental Services	\$1,160,000	(Slated for future implementation – no spending as of FFY23 Q1)
Strengthen Quality-Creation of Outcome-Based Incentive Program	\$600,000	(Slated for future implementation – no spending as of FFY23 Q1)
Total	\$23,083,892	\$5,657,599

Activity Highlights

Critical Incident Management System Enhancements and Improvements: Expand data used to identify critical incidents to include Medicare claims and level of need data as well as admission, discharge, and transfer information, in addition to the Medicaid claims data that is currently used.

Integrate Smart Home Technology into Subsidized Housing: Update subsidized housing stock to include smart home technology with the aim of increasing independence for older adults and people with disabilities.



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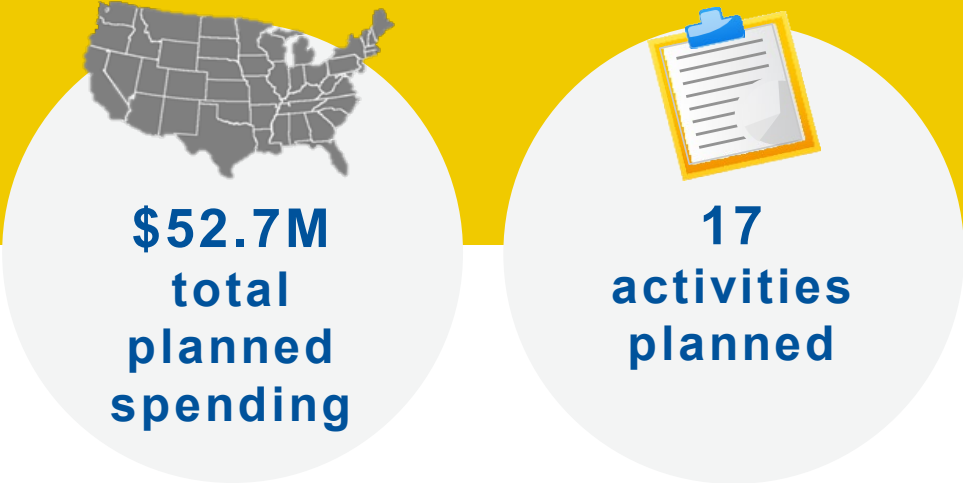
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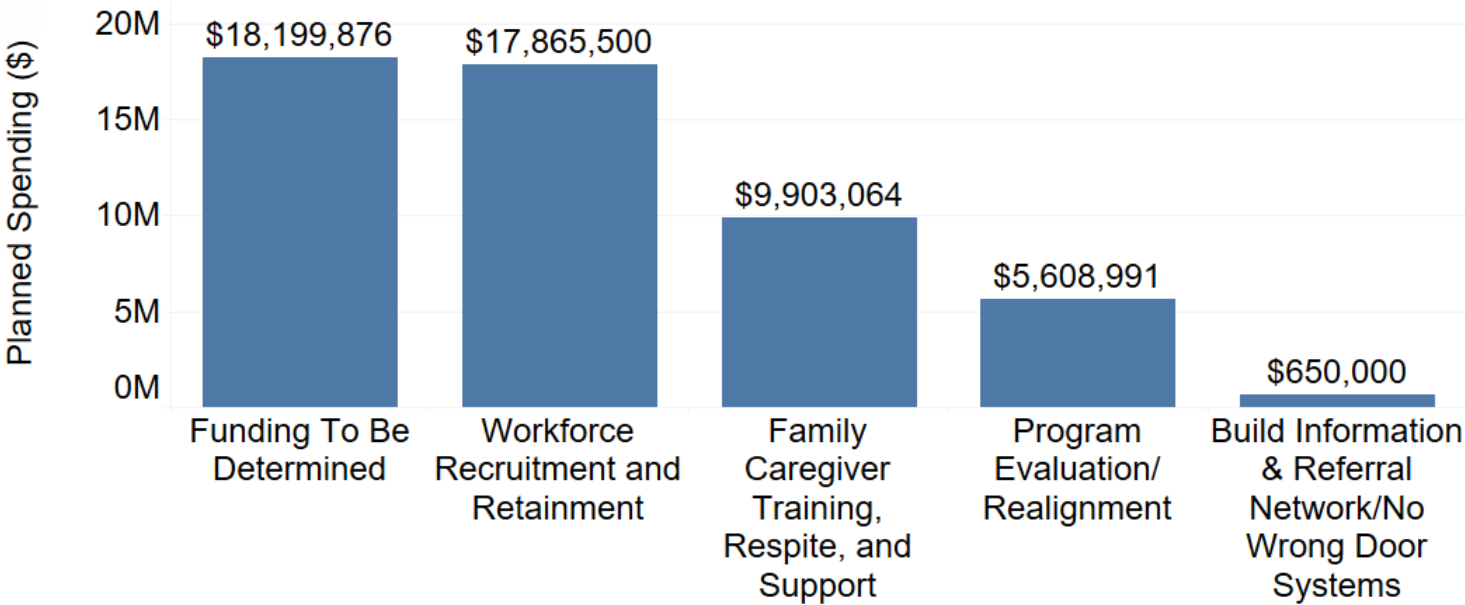
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American Rescue Plan Section 9817 State Spending Plan Summary

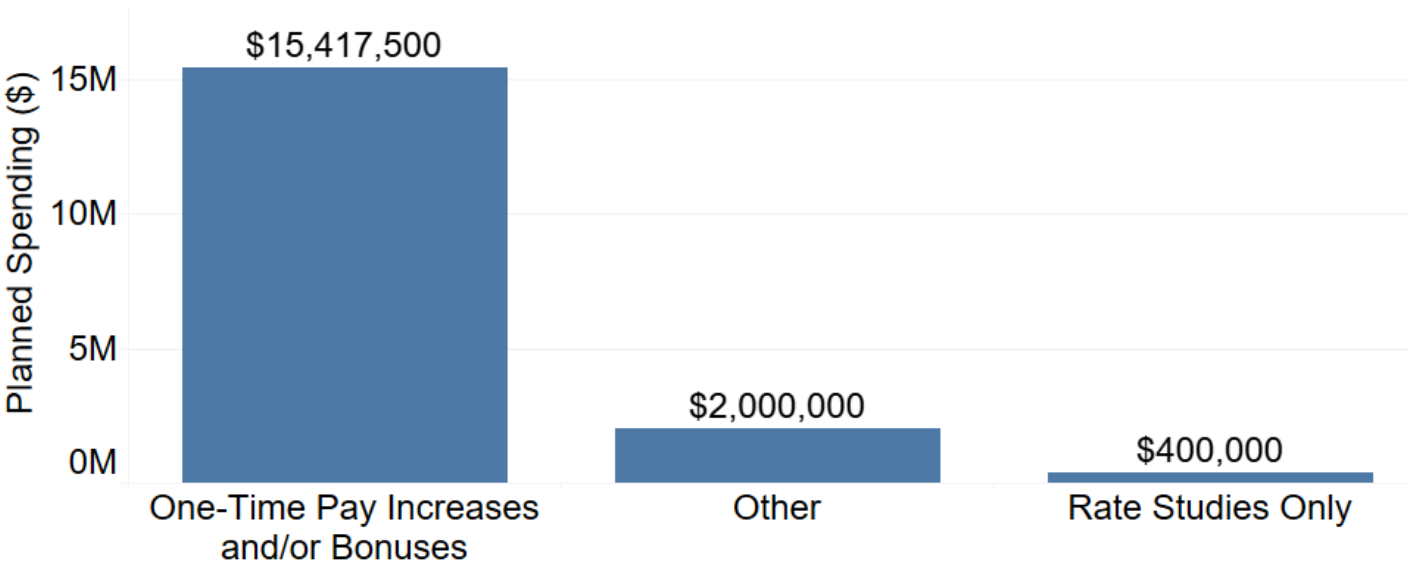
Delaware



Top 5 Areas by Planned Spending



Workforce Recruitment and Retainment Activities that Propose to Update Rates
By Planned Spending



Activity Highlights

Enhance Direct Service Professionals (DSPs) Through Sign-On or Retention Bonuses: Provided funding to home and community-based services (HCBS) providers to pay new recruits bonus payments totaling \$1000, as follows: \$500 after successful completion of all required initial training and a minimum of 90 days on the job, \$250 after 6 months on the job, and \$250 after one year on the job. HCBS providers also paid a retention payment of \$1000 to DSPs who were employed prior to April 30, 2021, and have worked a minimum of 25 hours per week. These investments were used to support DSPs operating across the entire network of HCBS.

Rate Study for DSPs: Conduct a rate study of DSPs providing services to older adults and people with physical disabilities to assess the adequacy of the current reimbursement rates.

Critical Incident Management System Upgrade: Implement a multi-phase project that will begin with a review and update of existing policies and procedures to align with partner agencies as well as national best practices. The state will work with a consultant to review existing regulations, policies, procedures, managed care organizations (MCO) contract language, and the section 1115 demonstration and will make updates as needed. This work will form the basis of business requirements for an integrated incident management information technology (IT) system that will be procured in the next phase of this work.



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American Rescue Plan Section 9817 State Spending Plan Summary

District of
Columbia

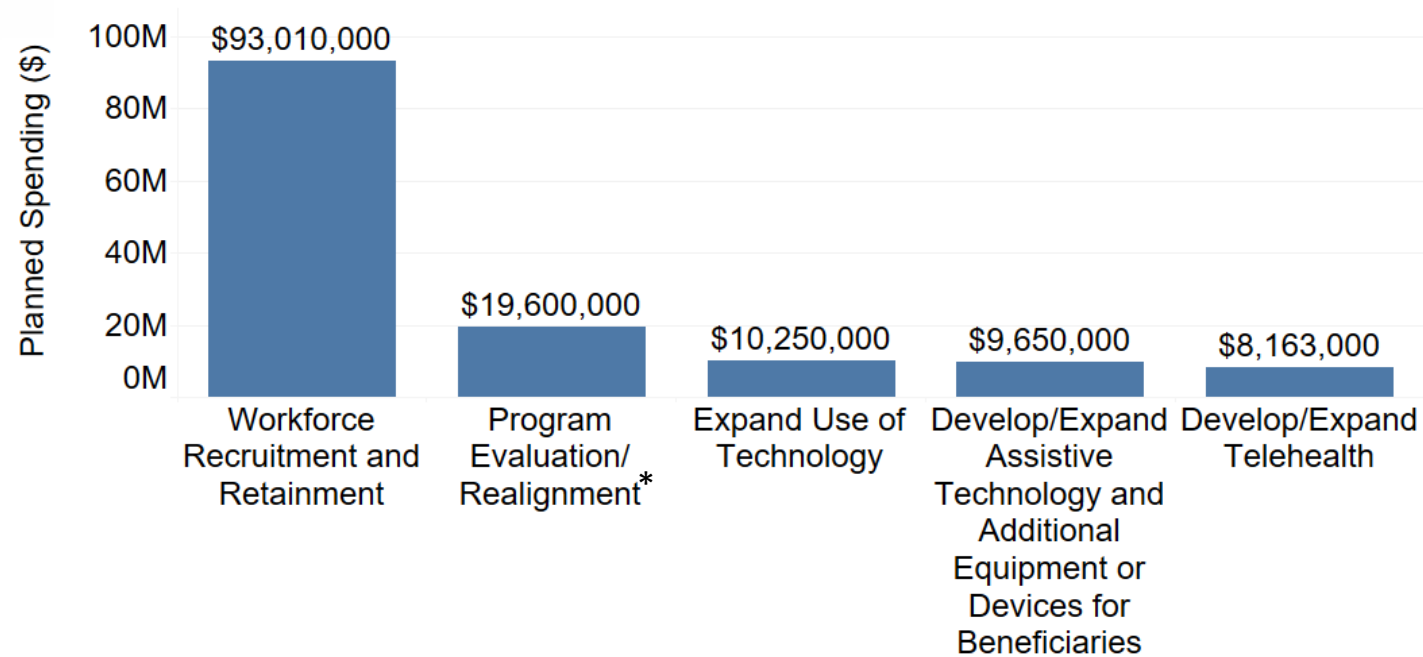


\$168.5M
total planned
\$1.7M total
reported
spending



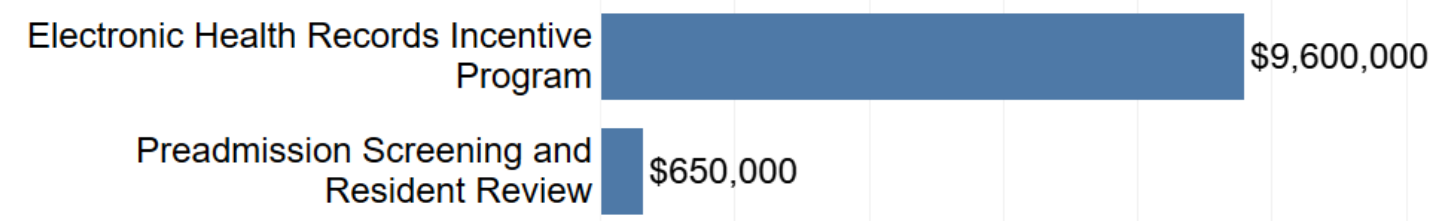
40
activities
planned

Top 5 Areas by Planned Spending



*Program evaluation/realignment includes independent studies and/or evaluation of HCBS programs in the state.

Expanding Use of Technology Activities
By Planned Spending




Activity Highlights

Remote Patient Monitoring (RPM): Implement a pilot program to test strategies that may be used to develop a reimbursement policy for RPM. This pilot grant program will cover the cost of using RPM services for individuals with chronic conditions or home and community-based services (HCBS) beneficiaries, especially those at risk for adverse outcomes due to COVID-19.

Direct Support Professional Retention Bonus Payments: Fund bonuses through disbursements to HCBS providers for payment of year-over-year retention bonuses to certified direct care staff in Medicaid service delivery. The initiative will fund up to two retention bonuses to workers meeting program requirements.

Therapeutic Services to Prevent Functional Decline: Implement services and programmatic changes to increase the capacity of beneficiaries to remain in the community. Activities include establishment of a triage team to focus on high-risk beneficiaries (as identified by enhanced assessment tools used to assess need for long-term services and supports); funding for changes to the scope of medical equipment; and recruitment of physical therapy assistants, as extenders to physical therapists.

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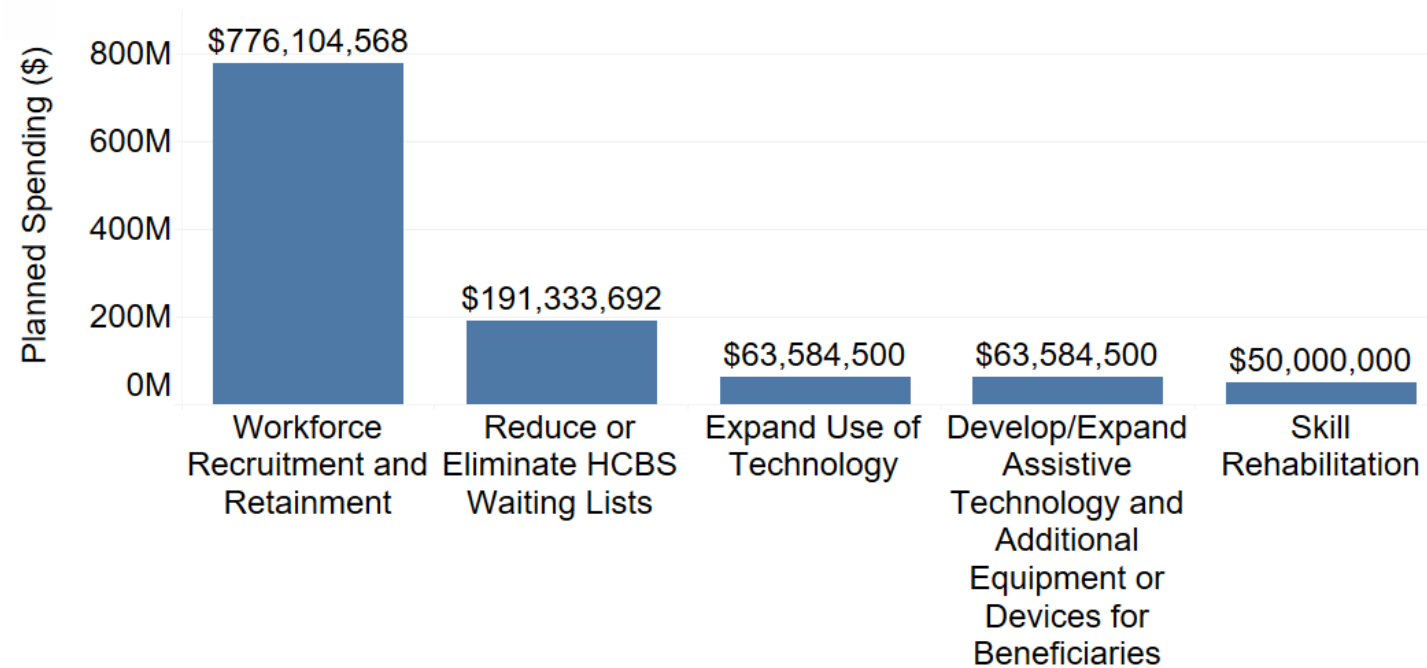
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Florida

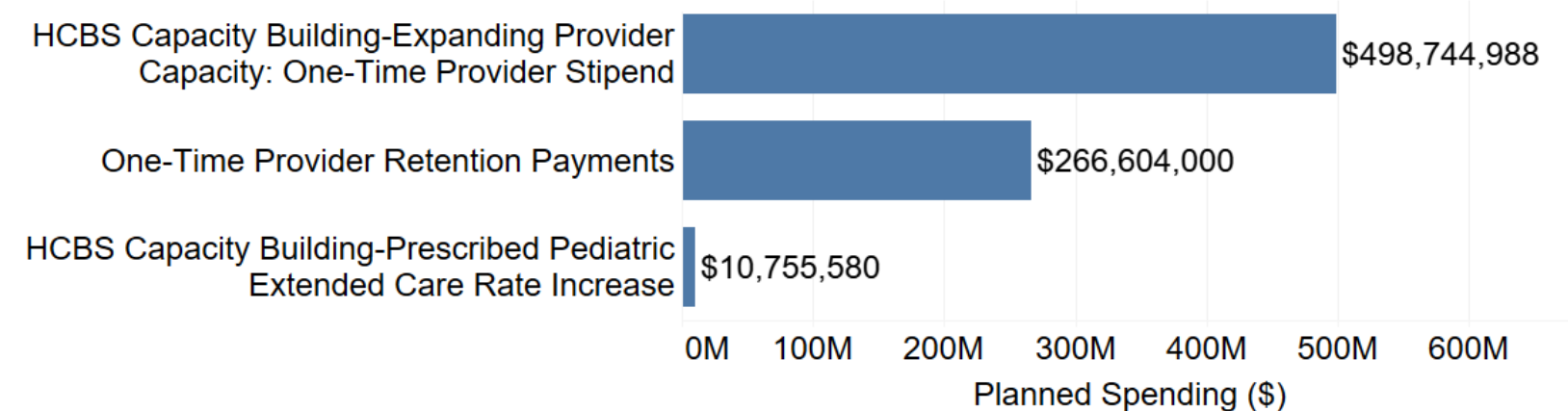
\$1.2B
total planned
\$314.7M
total reported
spending

10
activities
planned

Top 5 Areas by Planned Spending



Workforce Recruitment and Retainment Activities that Propose to Update Rates
By Planned Spending



Activity Highlights

Home and Community-Based Services (HCBS) Capacity Building – Prescribed Pediatric Extended Care (PPEC) Rate Increase: Implement a PPEC rate increase for providers to assist eligible children with medically complex conditions to receive continual medical care. Services provided through PPEC include developmental therapies and medical, nursing, personal care, psychosocial, and respiratory therapy services.

HCBS Capacity Building – Addressing Social Determinants of Health and Health Disparities: Supports care for Floridians aged 60 and older in family-type living arrangements within private homes, as an alternative to institutional or nursing home care. This activity includes working with local Aging and Disability Resource Centers to identify eligible older adults and their needs, and creating an evaluation plan that studies outcomes of interest, including health outcomes, healthcare economics, and unmet social needs.

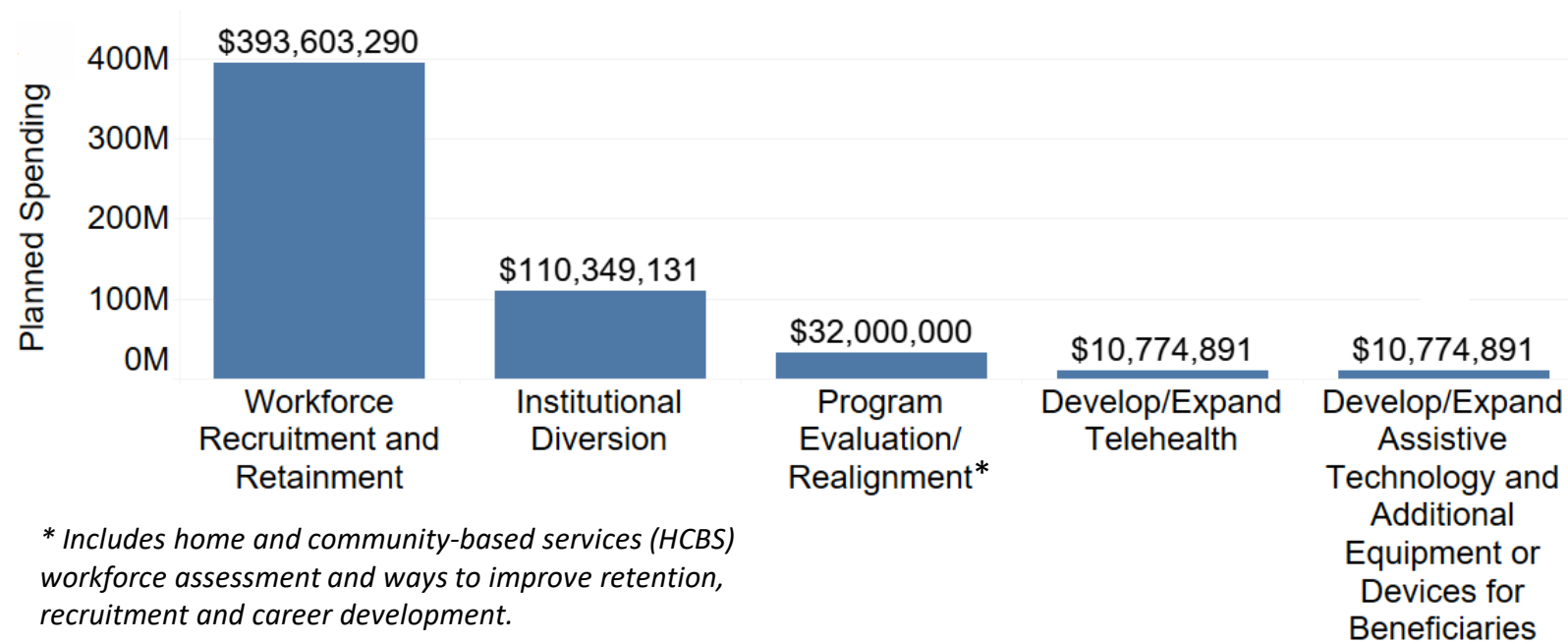
American Rescue Plan Section 9817 State Spending Plan Summary

Georgia

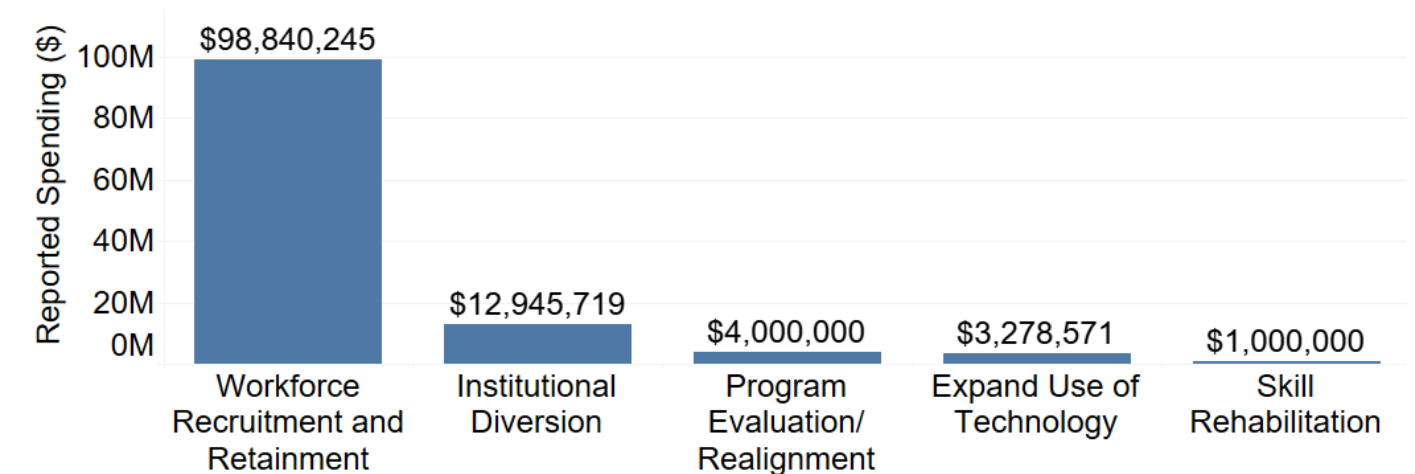
\$565.4M
total planned
\$120.7M
total reported
spending

18
activities
planned

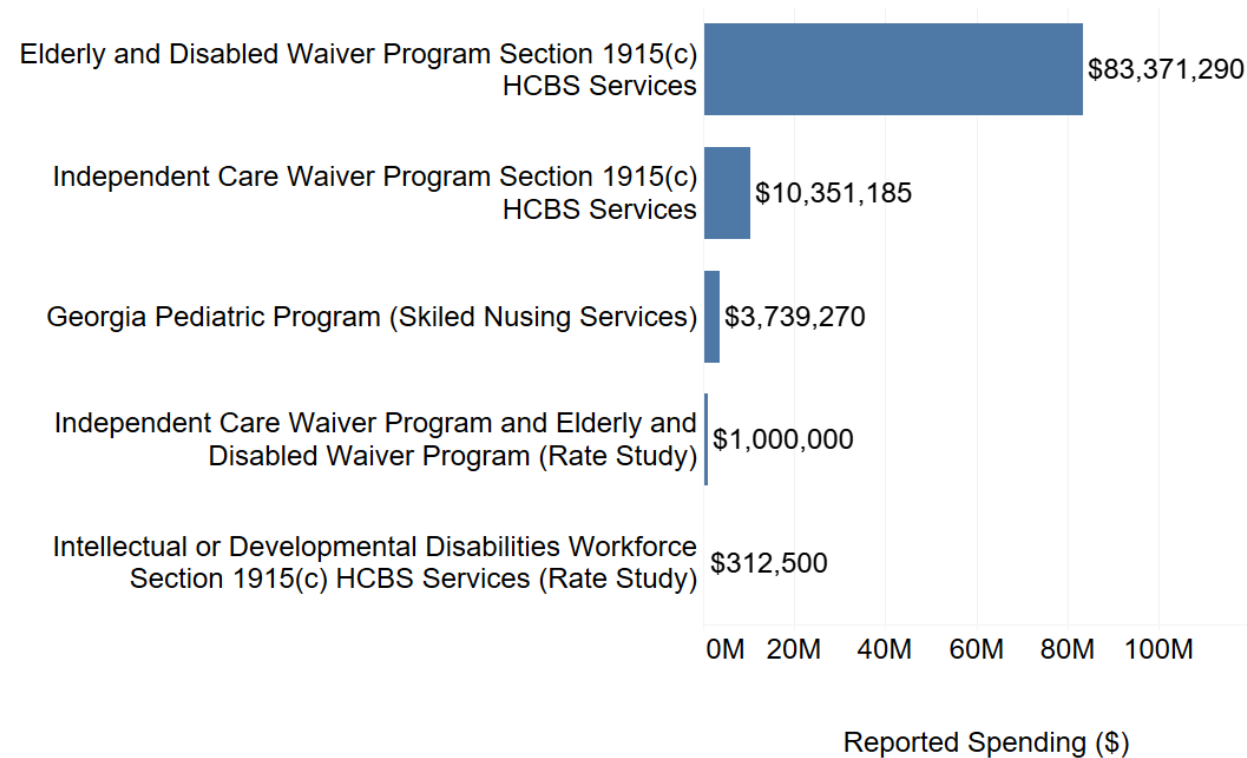
Top 5 Areas by Planned Spending



All Areas by Reported Spending



Workforce Recruitment and Retainment Activities that Propose to
Update Rates
By Reported Spending



Activity Highlights

Behavioral Aides for Children and Youth: Implement a new service that will provide behavioral support aides in the home setting for members under age 21 who are diagnosed with autism, serious emotional disturbance, or other behavioral conditions. The new service will provide one-to-one behavior management intervention and stabilization services designed to teach and reinforce behavioral goals through training and direct support. Use of behavioral support aides is intended to reduce the number of admissions and/or readmissions to psychiatric residential treatment facilities (PRTF), serve as a step-down service for children being discharged from a PRTF, and increase access to HCBS.

Develop a Case Management Technology Platform for Medicaid HCBS: Develop an electronic platform to capture Medicaid HCBS case management activities for both state plan and waiver authorities. Funding would support implementation of the electronic platform, staff training on platform use, additional staff, and development of reporting and dashboard components that provide insight into trends and areas to target quality improvement activities. The technology platform would include incorporation of medical provider electronic health record information to improve accuracy of care planning and service delivery.

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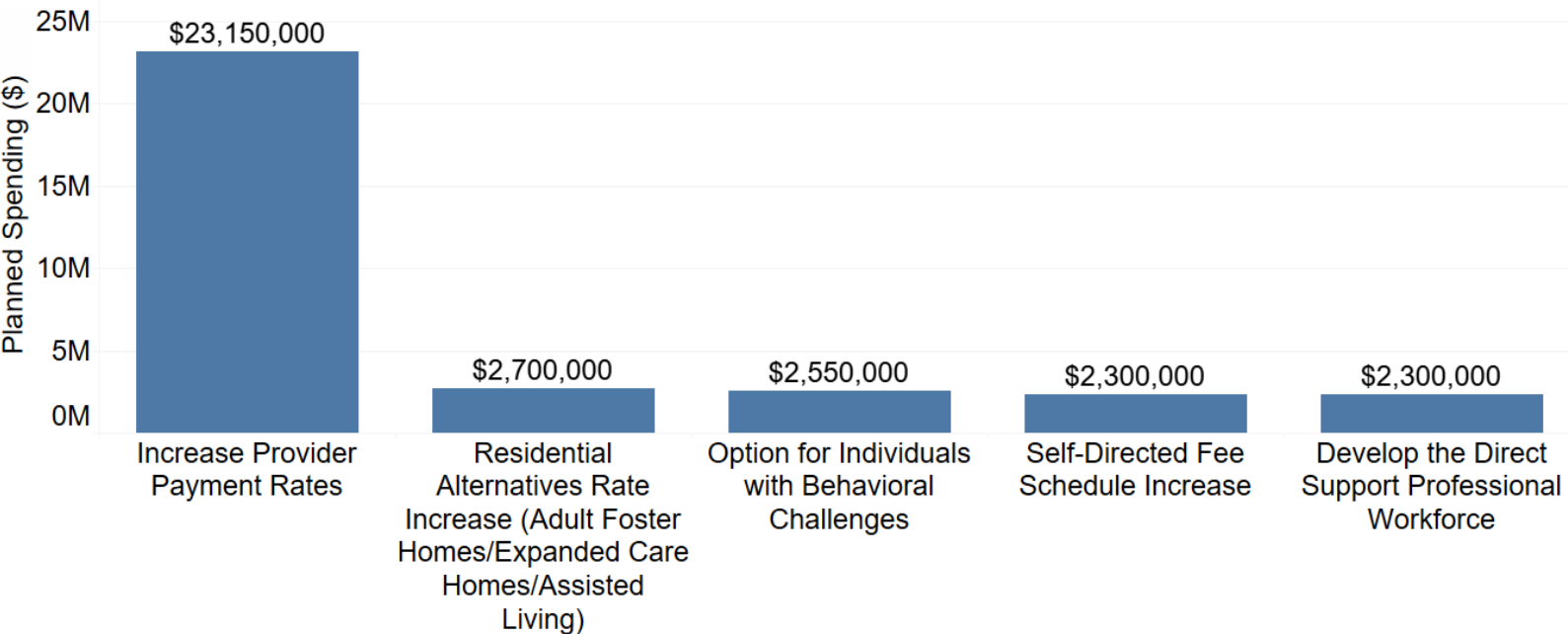
American Rescue Plan Section 9817 State Spending Plan Summary

Hawaii

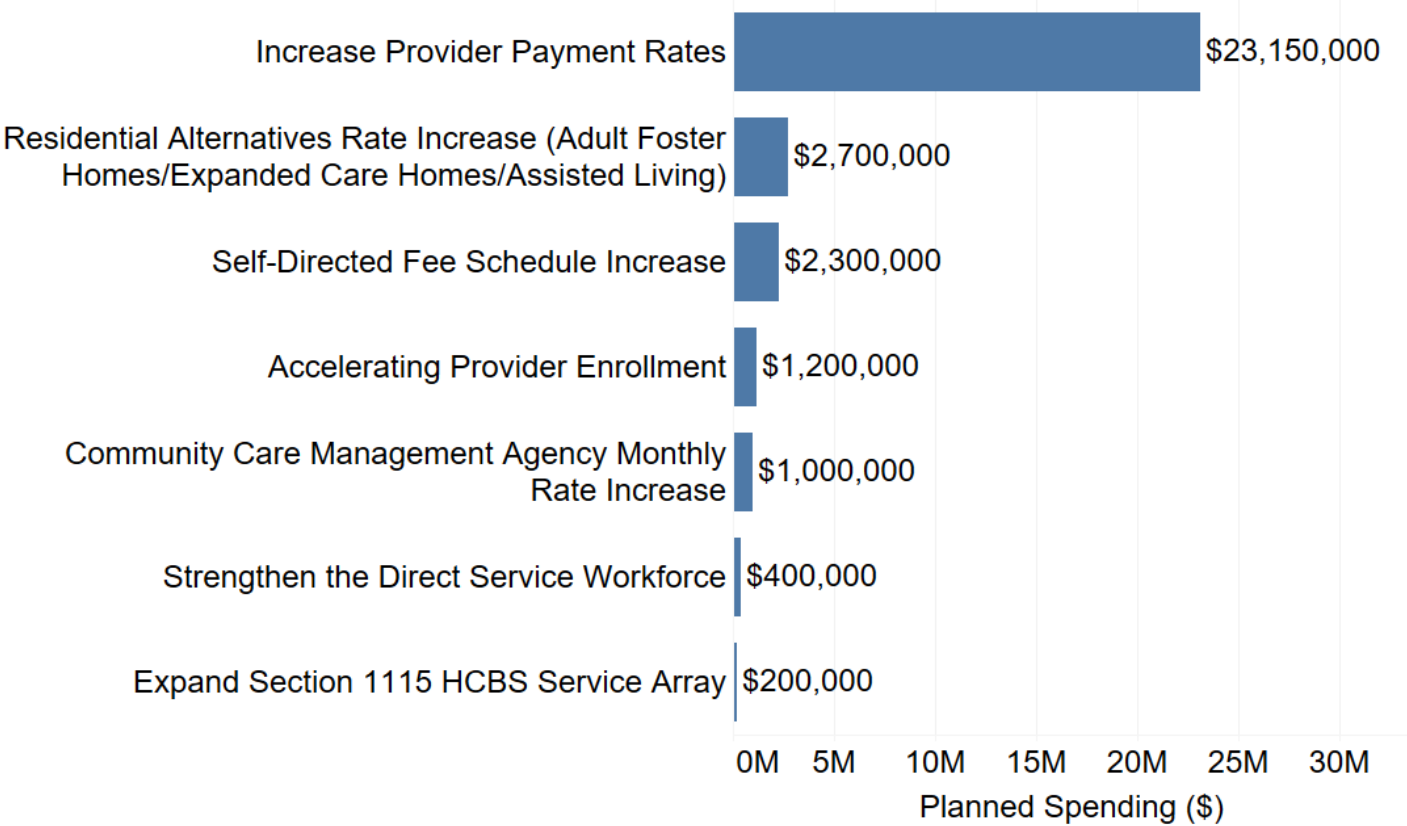
\$52.2M
total
planned
spending

36
activities
planned

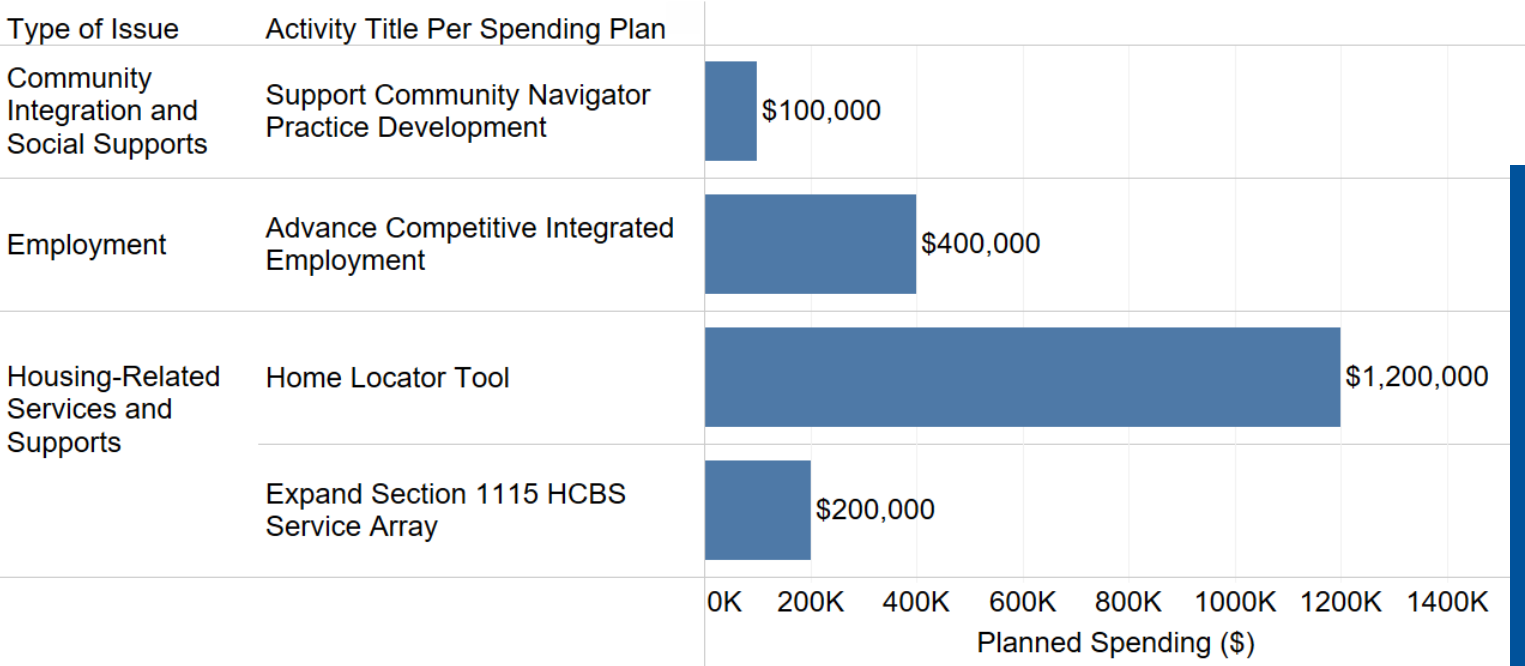
Top 5 Activities by Planned Spending



Workforce Recruitment and Retainment Activities
By Planned Spending



Social Determinants of Health Planned Spending
By Type of Issue and Activities



Activity Highlights

Option for Individuals with Behavioral Challenges: Add a new waiver service in a licensed home setting supported by an interdisciplinary team and skilled staff. The service will emphasize community integration, family engagement, and trauma-informed care.

Building Capacity in Residential Alternatives for Complex Members: Provide training and resources to home and community-based services (HCBS) residential providers to build skills and confidence to support members with complex behavioral and physical needs. The goal is to decrease hospital and nursing facility waitlists, while promoting the safety and well-being of members in home and community-based settings.



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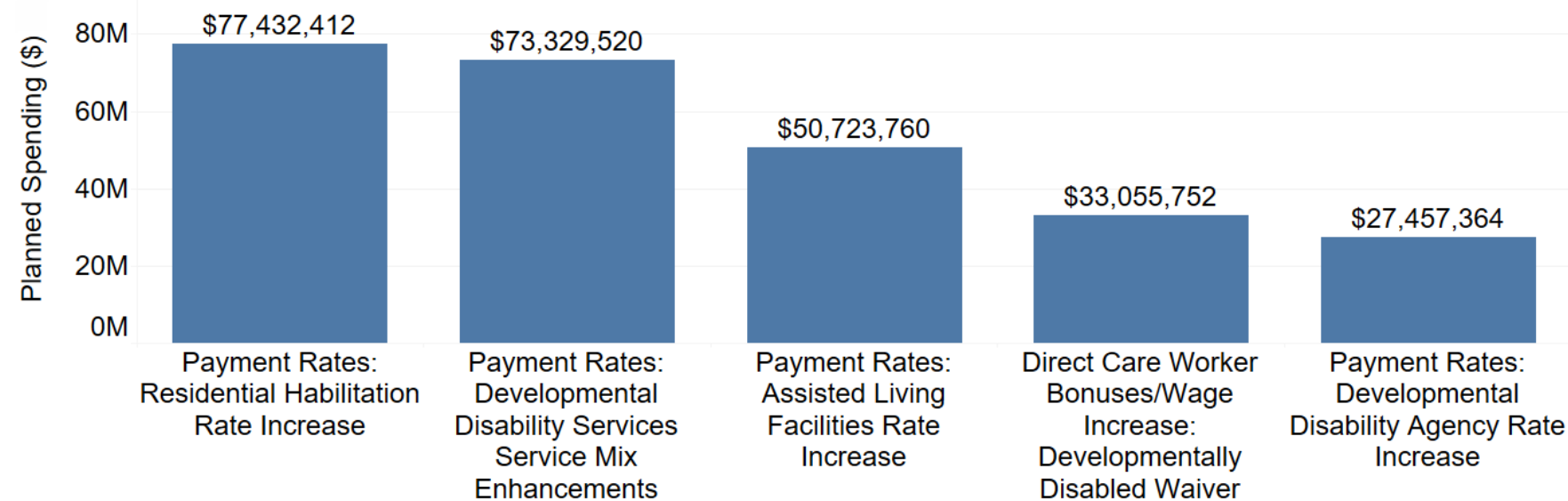
American Rescue Plan Section 9817 State Spending Plan Summary

Idaho

\$301.5M
total
planned
spending

11
activities
planned

All Activities by Planned Spending

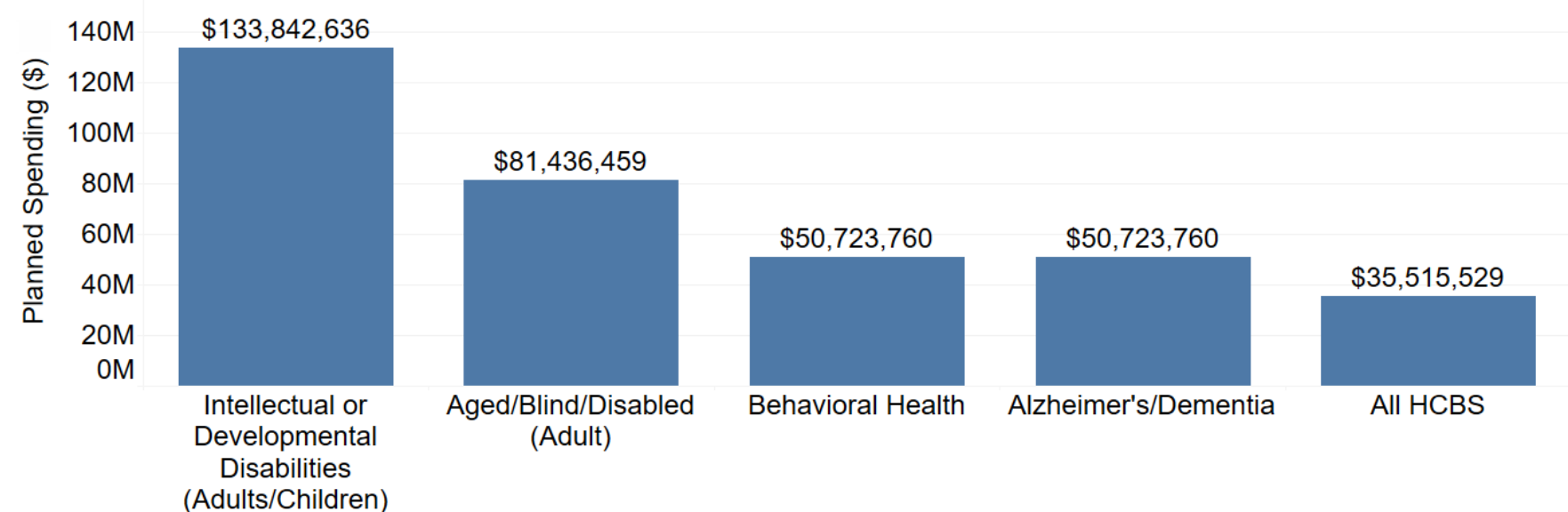


Activity Highlights

Direct Care Worker Bonus/Wage Increase: Support behavioral/mental health, home and community-based services (HCBS), long-term support services, and consumer-directed service workers and providers with payments to support wage increases and/or bonuses to direct care staff. Agency staff and individual providers working one-on-one with Medicaid participants were eligible for wage increases and/or bonuses. The funding supported current staff and new hires based on an initiative in Idaho to strengthen its behavioral/mental health, home and community-based services, and long-term support services provider network.

Provider Rate Increases: Increased provider reimbursement rates for certain home and community-based and long-term support service providers. Provider rate increases ranged from assisted living facilities that care for participants with behavioral, intellectual, and/or cognitive health needs to personal assistance agencies that allow participants to live in their home and receive additional supports like homemaking, chore services, or personal care services. By increasing the provider reimbursement rate, Idaho is taking a first step to improve the ability for provider agencies to attract and retain direct care workers needed to care for participants. The increase to these providers is based on an initiative in Idaho to reimburse for quality healthcare that is appropriate, efficient, and cost-effective.

Planned Spending, by Population Type



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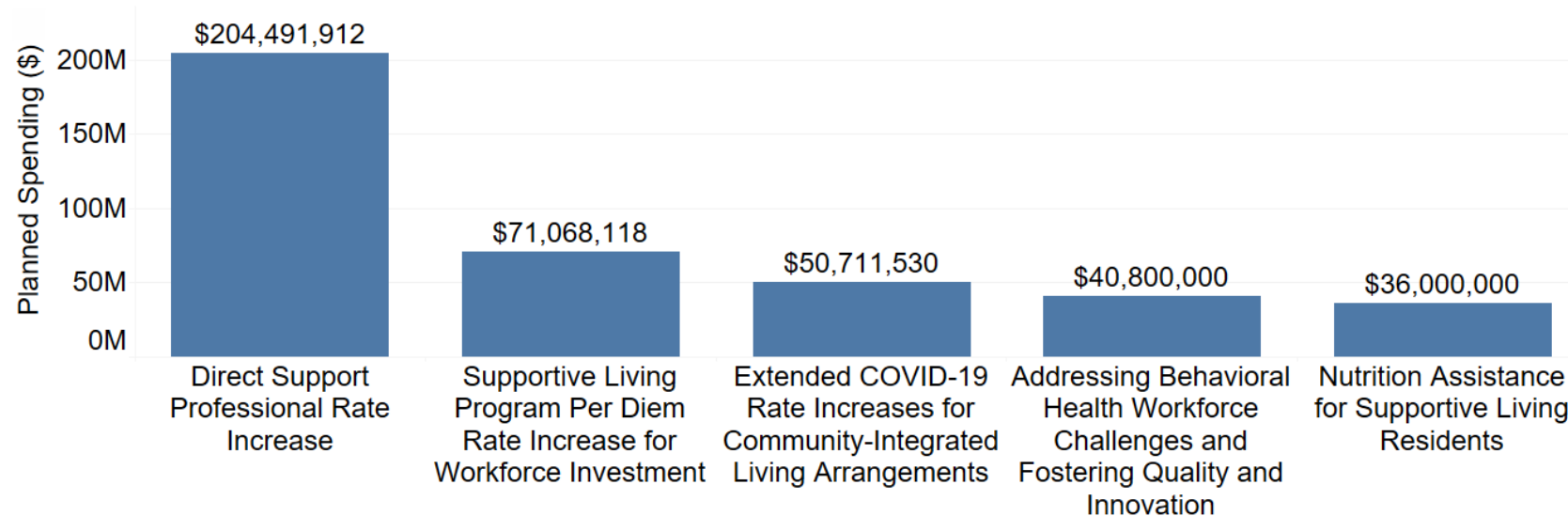
American Rescue Plan Section 9817 State Spending Plan Summary

Illinois

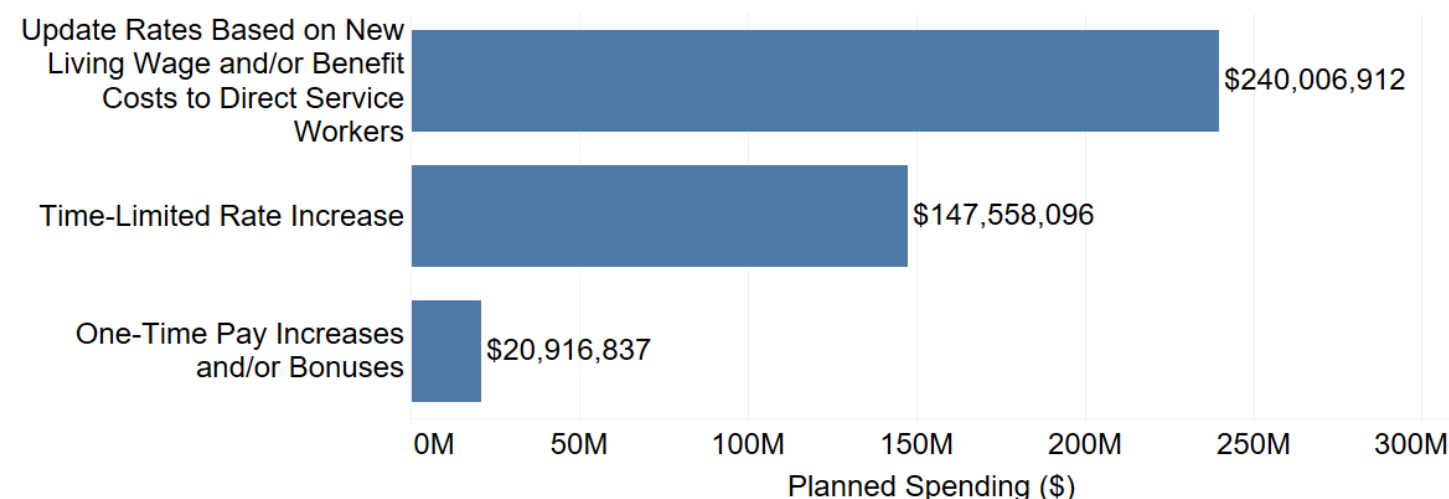
\$629.9M
total
planned
ending

29
activities
planned

All Activities by Planned Spending



Workforce Recruitment and Retainment Activities that Propose to Update Rates
By Planned Spending



Activity Highlights

Division of Developmental Disabilities Direct Support Professionals Rate Increase: Provide a rate increase of \$1.50 per hour in the residential and community day services rate methodologies in order to keep pace with both the statewide minimum wage as well as the City of Chicago minimum wage. The rate increase was effective January 1, 2022, and will be ongoing.

Grants to Expand Services in Underserved Areas and Promote Underutilized Services: Offer one-time grants targeted toward: opening community mental health centers or behavioral health clinics in underserved areas of the state; enhancing access to underutilized team-based services, such as community support team and assertive community treatment; launching other section 1915(i) services including therapeutic mentoring, respite, family peer support, housing supports, and supportive employment; and reimbursing provider costs for attending required trainings for providing behavioral health services.

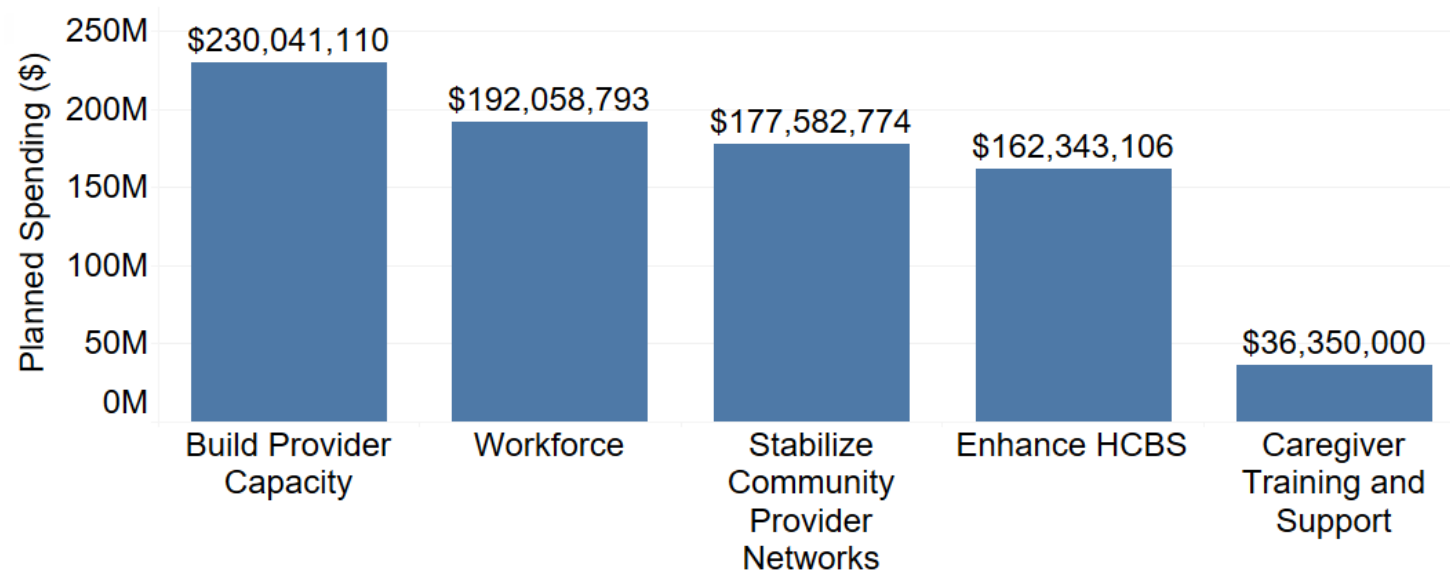
American Rescue Plan Section 9817 State Spending Plan Summary

Indiana

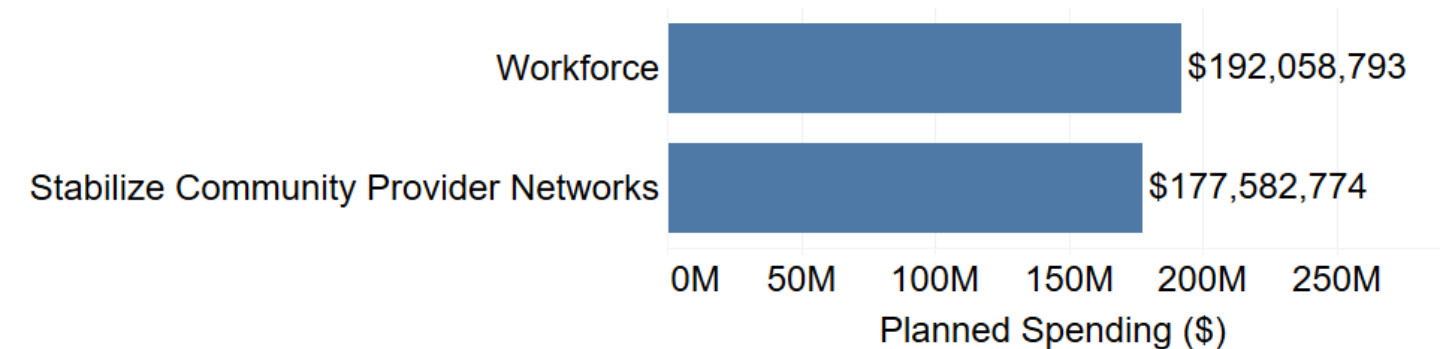

\$798.4M
total planned
\$177.3M
total reported
spending


5
activities
planned

All Activities by Planned Spending



Workforce Recruitment and Retainment Activities
By Planned Spending



Activity Highlights

Recruitment and Retention of Workforce: Enhance the direct service workforce through a comprehensive direct service workforce strategy that involves best practice research and engagement with subject matter experts and stakeholders. Includes an investment grant opportunity for providers that must be directed to their direct service workers to improve recruitment and retention. Explores structural strategies to ensure sustainability of investments.

Integrate HCBS Data Systems to Improve Quality and Reduce Inequities: Improve home and community-based services (HCBS) data systems through system upgrades, updated data management resources, expanded data partners, and enhanced development capacity, and through engagement with national peers to streamline real-time information sharing. Establishment of a comprehensive and integrated HCBS data environment will improve understanding of differences in health outcomes and increase efficiency, which is pivotal from a quality and equity perspective.

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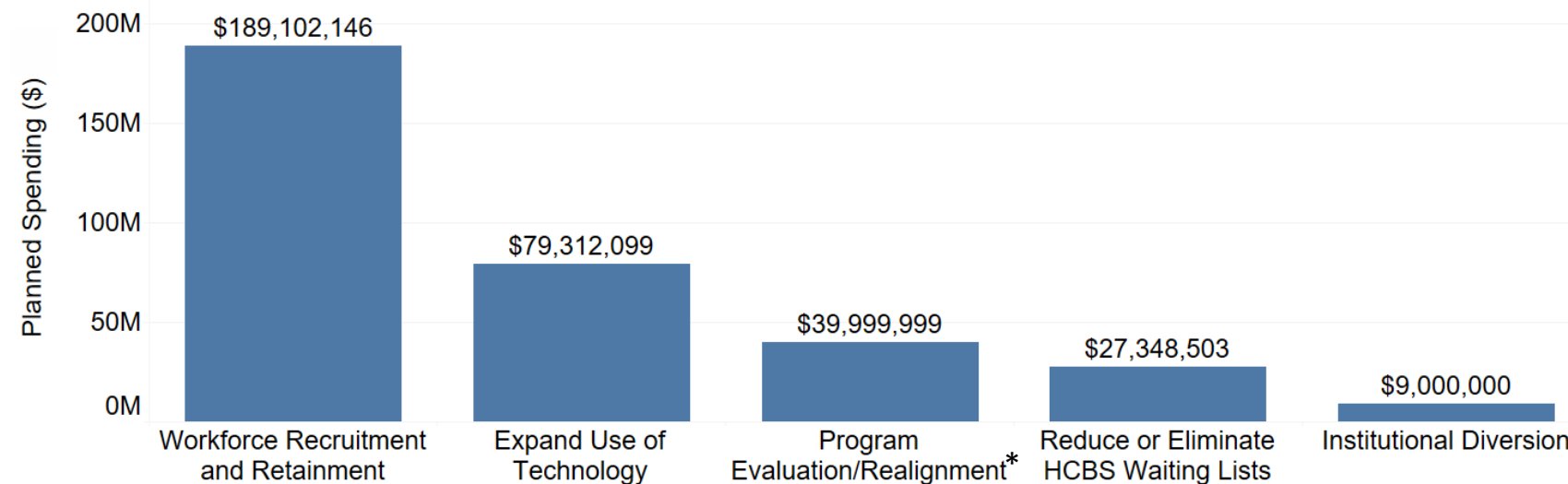
American Rescue Plan Section 9817 State Spending Plan Summary

Iowa

\$365.4M
total
planned
spending

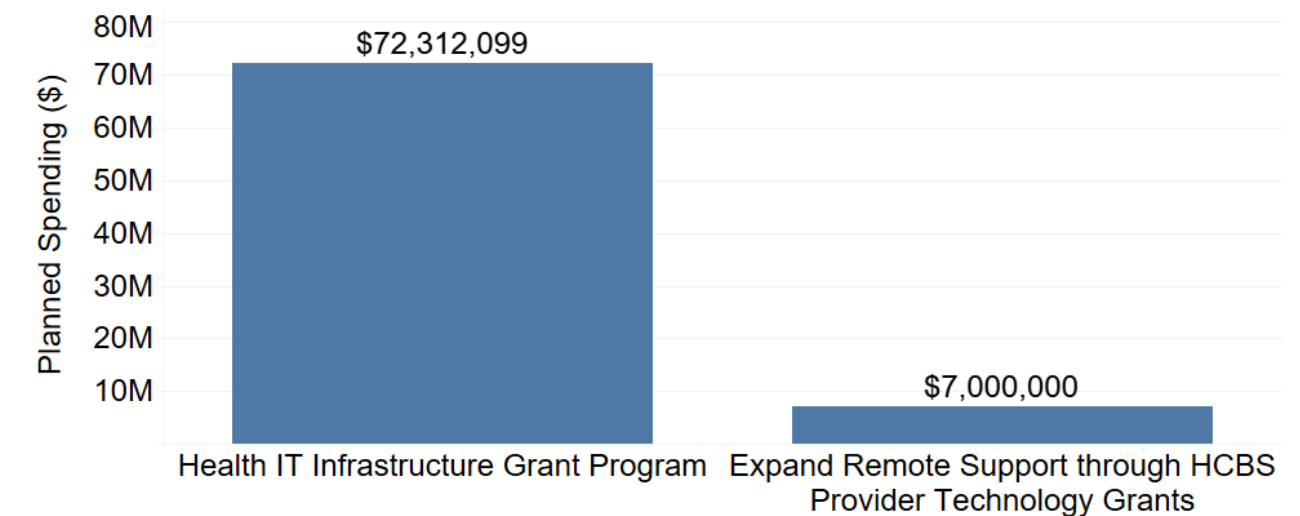
13
activities
planned

Top 5 Areas by Planned Spending



**Program evaluation/realignment includes independent studies and/or evaluation of Home and Community-Based Services (HCBS) programs in the state.*

Expanding Use of Technology Activities
By Planned Spending



Activity Highlights

Health Information Technology (IT) Infrastructure Grant Program: Provide grants for improving IT infrastructure. The movement of the HCBS system towards increased outcome monitoring and better continuity of care will take an investment in infrastructure for HCBS providers. Potential uses of grant funding include the purchase of electronic health record (EHR) platforms, start-up costs to open an HCBS service line for new providers of high-priority services such as rehabilitation services, electronic service record software, and telehealth equipment and software. Awards are estimated to range from \$30,000 to \$200,000.

HCBS Employee Training Grant Program: Provide grants that will allow qualified HCBS providers to fund employee training and scholarships for education and training in nursing, behavioral health, and other health care fields. Grant funds must be used to cover costs related to training and education that will enhance the quality of direct services provided and/or cover the costs related to a course of study that is expected to lead to career advancement with the provider or in the HCBS field. Awards are estimated to range from \$15,000 to \$100,000.

One-Time Recruitment/Retention Provider Payments: Cover costs related to direct support professional wage increases, recruitment, and retention incentive payments by awarding \$3,999 per full-time equivalent direct support professional to individual and agency providers.



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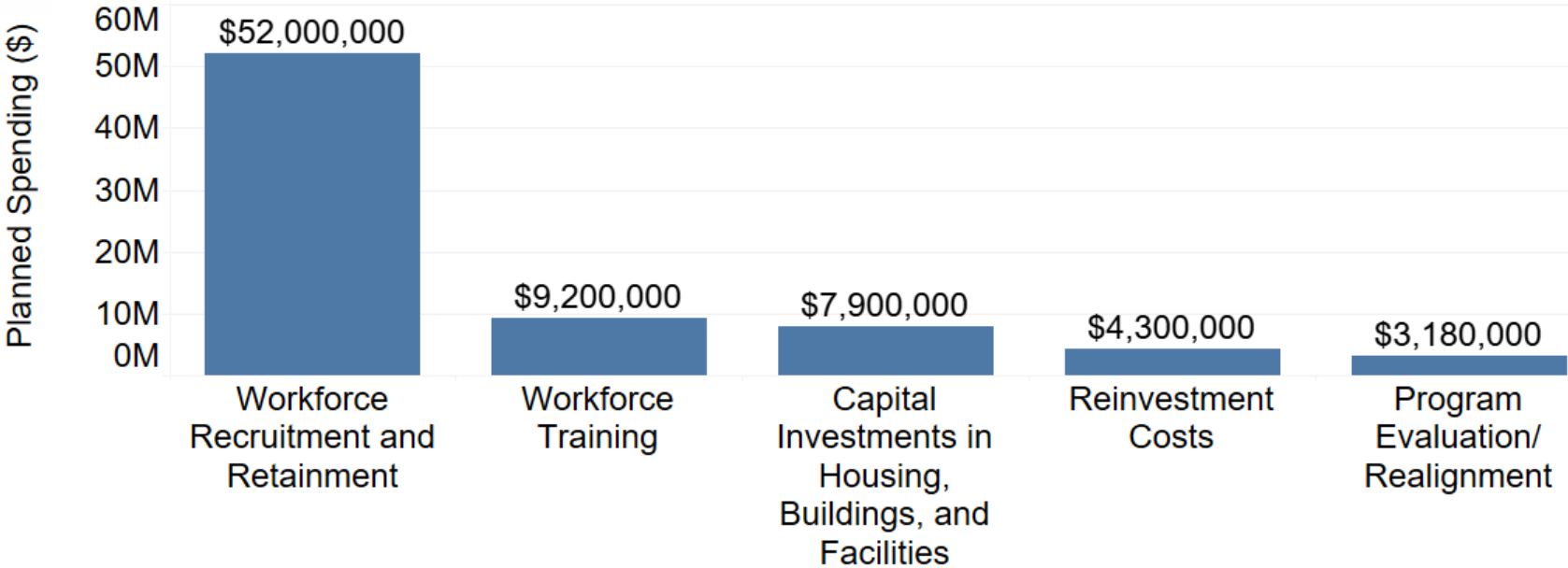
American Rescue Plan Section 9817 State Spending Plan Summary

Kansas

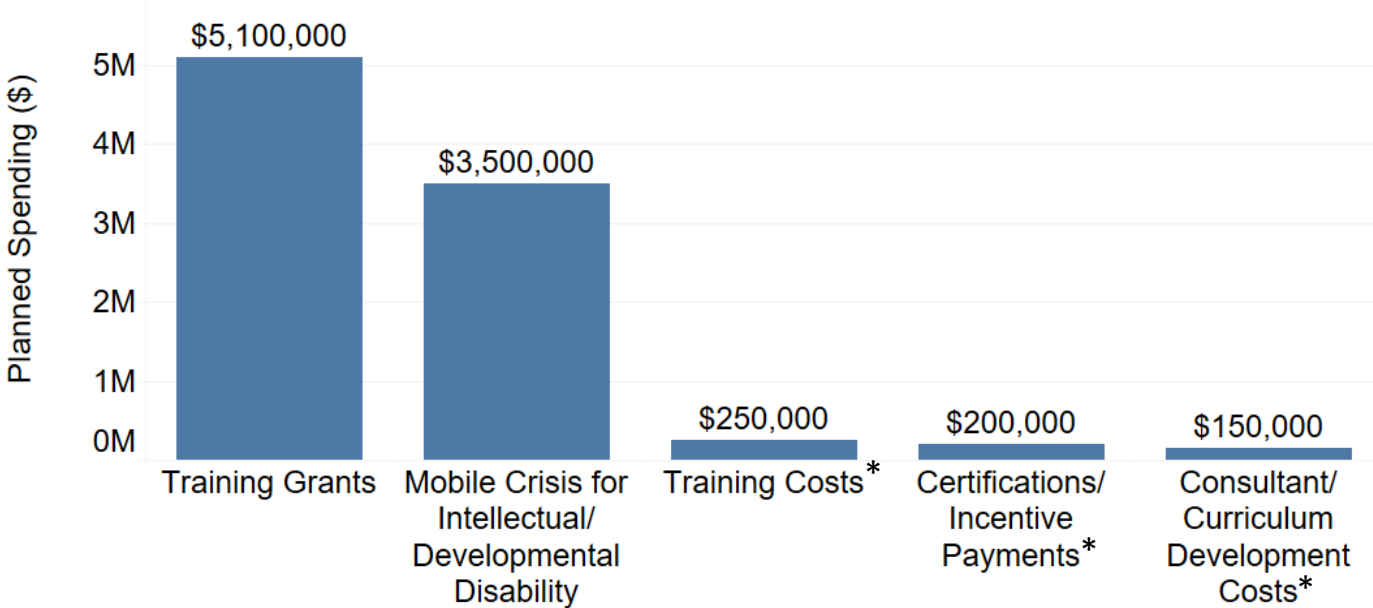

\$84.2M
total planned
\$40K total
reported
spending


22
activities
planned

Top 5 Areas by Planned Spending



Workforce Training Activities
By Planned Spending



* Activities pertaining to Training for Primary Care and Dental Providers to Expand and Improve Services to HCBS Patients.

Activity Highlights

Settings Rule Remodeling Grants: In an effort to maintain and expand HCBS service options in underserved areas, allocate \$5.2 million to offer one-time grants from \$50,000-\$100,000 to 50-100 providers that otherwise would not be able to make the modifications necessary to fully comply with the HCBS settings rule and continue to provide HCBS services.

Workforce Retention Bonus Program: Target recruitment, retention, and training of providers of direct, hands-on agency-directed or self-directed personal care services through section 1915(c) waivers. The initiative investment includes a \$2,000 bonus per worker with approximately 24,000 direct service workers in Kansas. This is equivalent to a \$1 per hour wage increase for a year.



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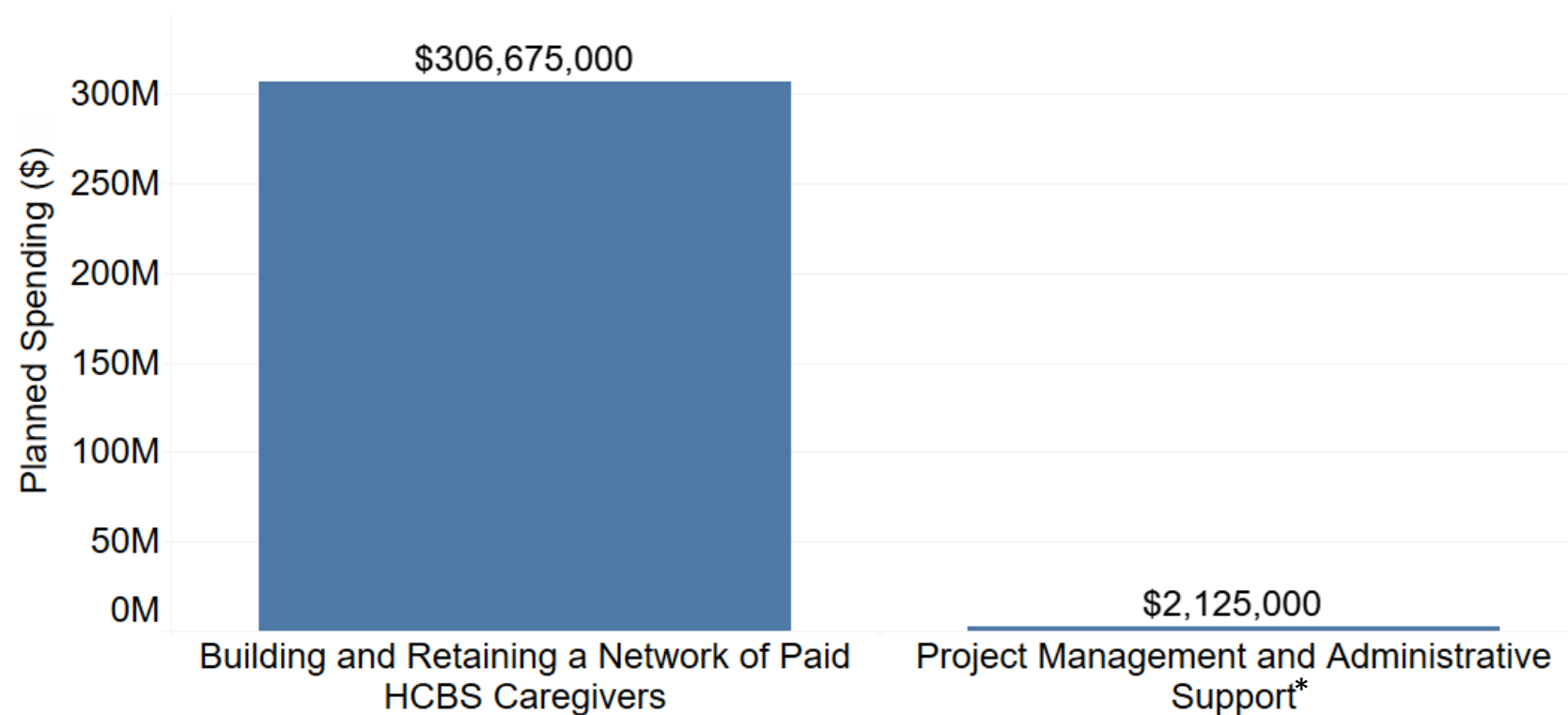
American Rescue Plan Section 9817 State Spending Plan Summary

Kentucky


\$308.8M
total
planned
spending


2
activities
planned

All Activities by Planned Spending



**Project Management and Administrative Support is funding for a consulting firm to provide project management office support including work plan development and oversight for initiatives. This entails ongoing support of the rate study effort.*

Activity Highlights

Building and Retaining a Network of Paid HCBS Caregivers: Support a series of provider rate increases. The initial rate increases include:

- A 50% rate increase for residential services for the Supports for Community Living (SCL) and Acute Brain Injury (ABI) waivers in FY 2022-2023; and
- A 10% rate increase for all services in the following waivers: ABI, ABI Long-Term Care, Home and Community-Based, SCL, and Michelle P. Waiver (excluding residential habilitation services included above) in FY 2022 – 2023 followed by an additional 10% rate increase in FY 2023 – 2024.

Following completion of a rate study, the Department of Medicaid Services will implement long-term rate changes.

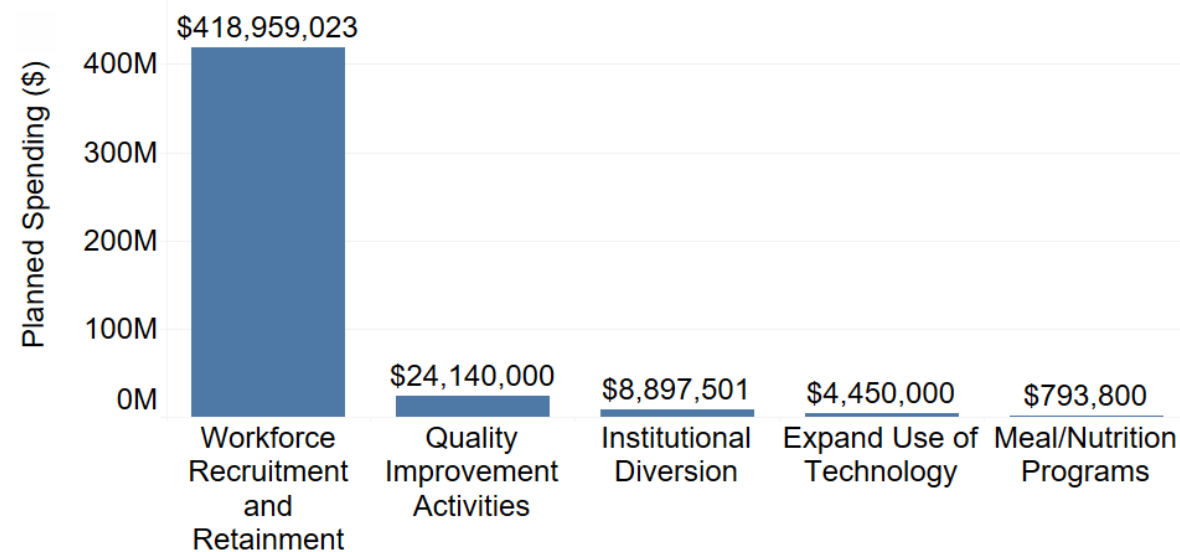
American Rescue Plan Section 9817 State Spending Plan Summary

Louisiana

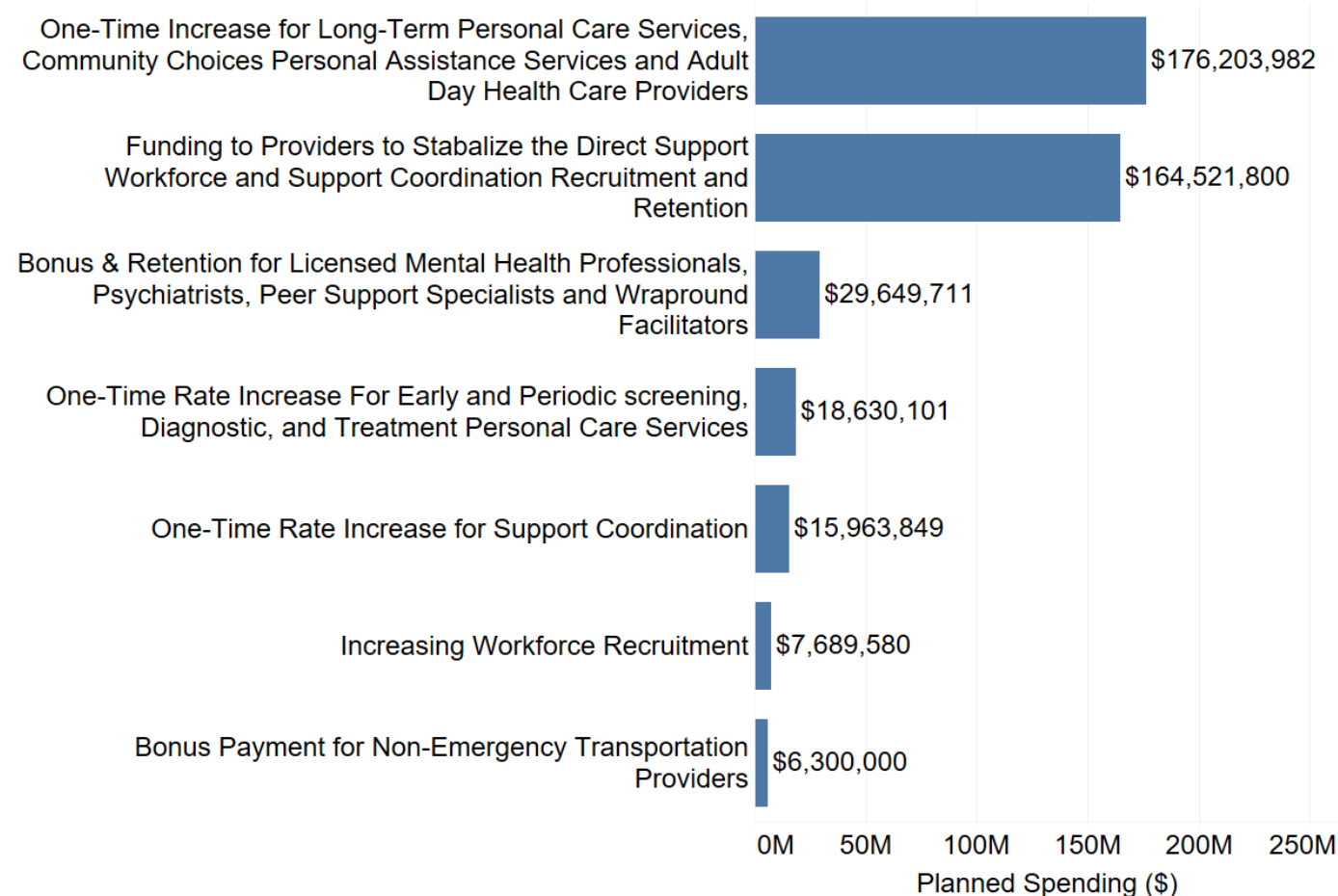
\$457.6M
total planned
\$734.7K
total reported
spending

16
activities
planned

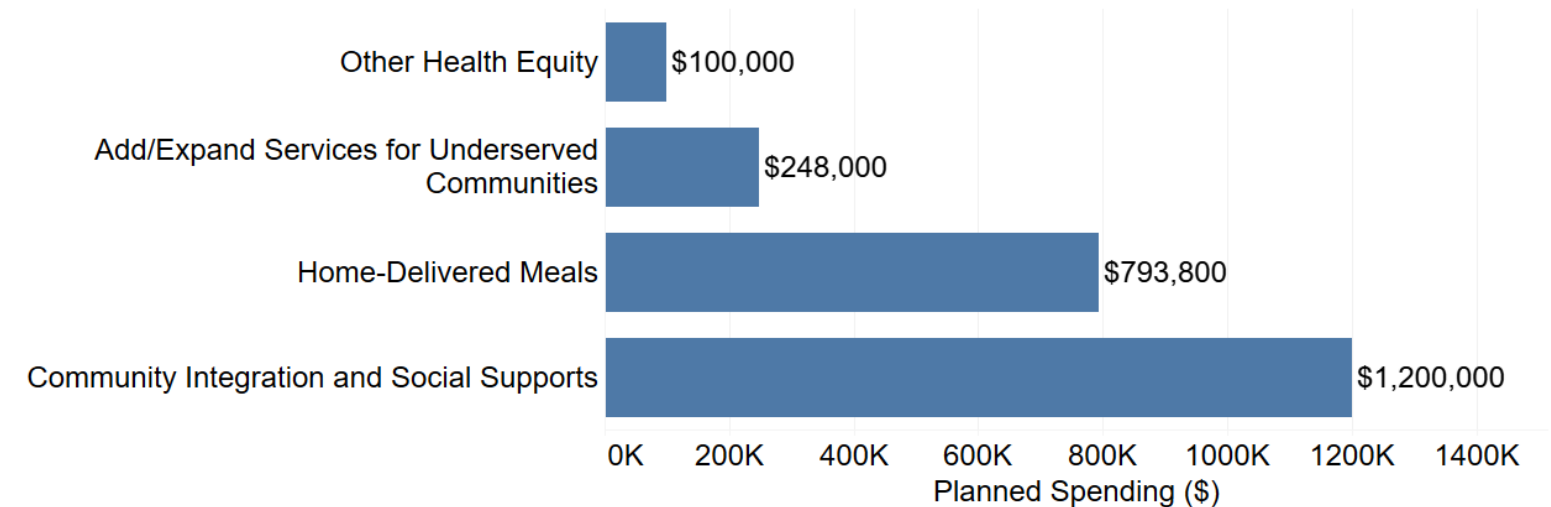
Top 5 Areas by Planned Spending



Workforce Recruitment and Retainment Activities
By Planned Spending



Social Determinants of Health Planned Spending
By Type of Issue



Activity Highlights

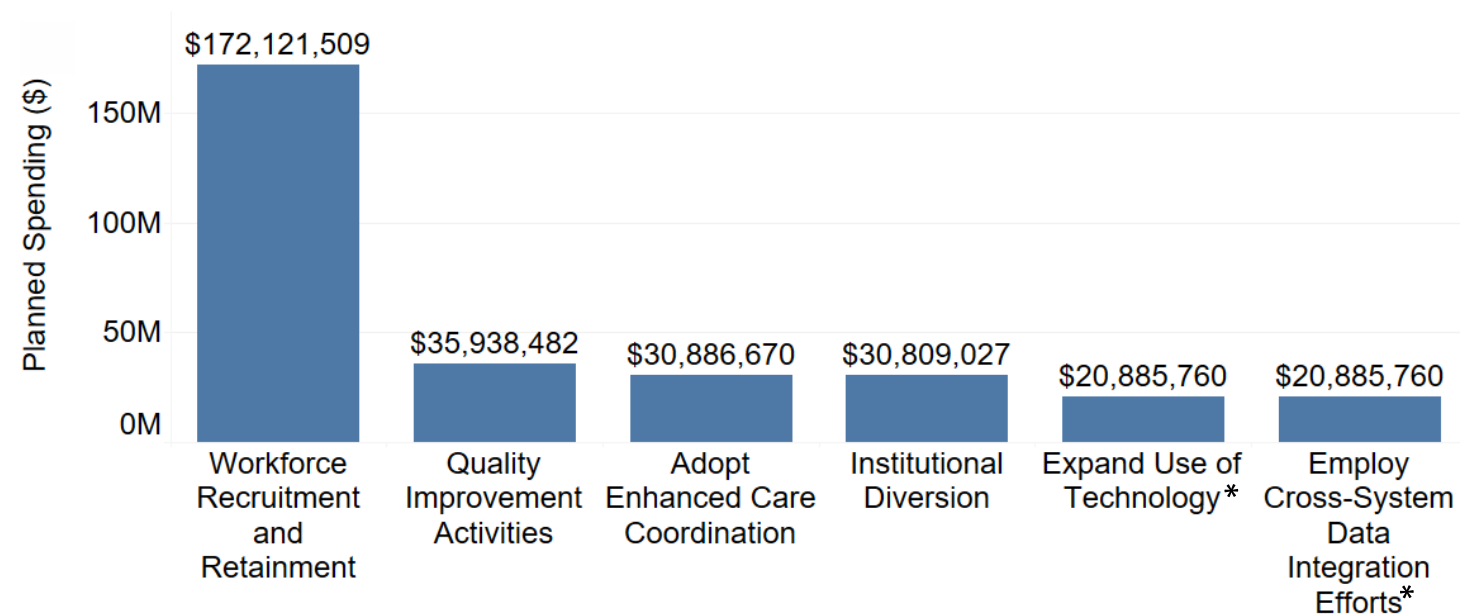
Enhance the Program of All-Inclusive Care for the Elderly (PACE): Add, at a minimum, one PACE center in an area of the state that is currently not served by PACE.

START Model Assessment and Pilot for Persons with Co-Occurring Intellectual/ Developmental Disabilities and Behavior Support Needs: Implement nationally recognized best practice model, which includes an initial comprehensive assessment from the START team to help determine the best method to implement services to support people with intellectual/developmental disabilities and complex behavior support needs. This activity will also involve implementation of a pilot project for crisis therapeutic respite, which will serve as a temporary placement and stabilization location for persons in crisis.

American Rescue Plan Section 9817 State Spending Plan Summary

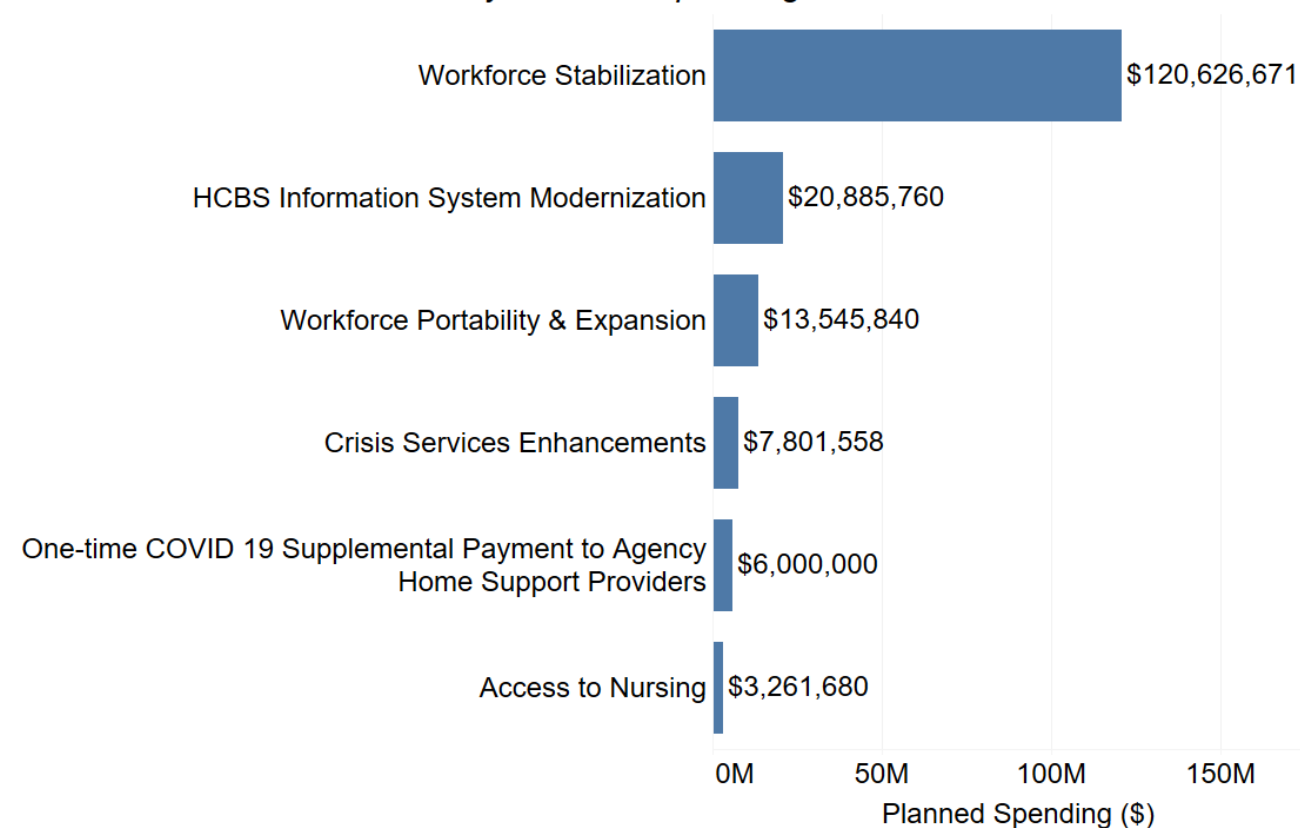
Maine

Top 5 Areas by Planned Spending



*One activity (HCBS Information System Modernization) with total spending of \$20,885,760 combined multiple initiatives across multiple areas and therefore was categorized into more than one area.

Workforce Recruitment and Retainment Activities
By Planned Spending



\$240.8M
total planned
\$120.6M
total reported
spending

19
activities
planned

Activity Highlights

Workforce Stabilization: Provided bonuses in 2022 to direct support workers working in home and community-based services (HCBS) programs funded by Medicaid. Existing workers received retention bonuses recognizing their service, and new workers were offered recruitment bonuses as a hiring incentive. Payments were made to HCBS provider agencies as a percentage of their HCBS revenues in a base period. Each agency had flexibility to determine the size and frequency of bonuses and was required to adopt an agency bonus policy and share it with their workers. Participating providers agreed to the initiative's guidelines and to submit reports to the Department of Health and Human Services.

Innovation Pilots: Focus on one or more requests for proposal calling for pilot projects for HCBS participants in the following areas: expanding access to independence-enhancing technologies such as remote monitoring and medication management; innovative living arrangements that reduce the amount of on-site staffing needed; peer support models; improved transitions across the lifespan; service models that enable individuals in out-of-state placements to return to Maine; and services that more deeply integrate people into their communities.

Crisis Services Enhancements: Add crisis stabilization units and expand substance use disorder treatment capacity in the state's crisis services for adults with behavioral health needs. These enhancements complement the implementation of a three-digit mental health crisis line (988) in 2022 to divert individuals from emergency departments and prevent avoidable interaction with law enforcement. This emphasizes interventions at the promotion and prevention end of the continuum of behavioral health care, which serves to reduce the demand for services within the HCBS system, thus improving timely access to care.

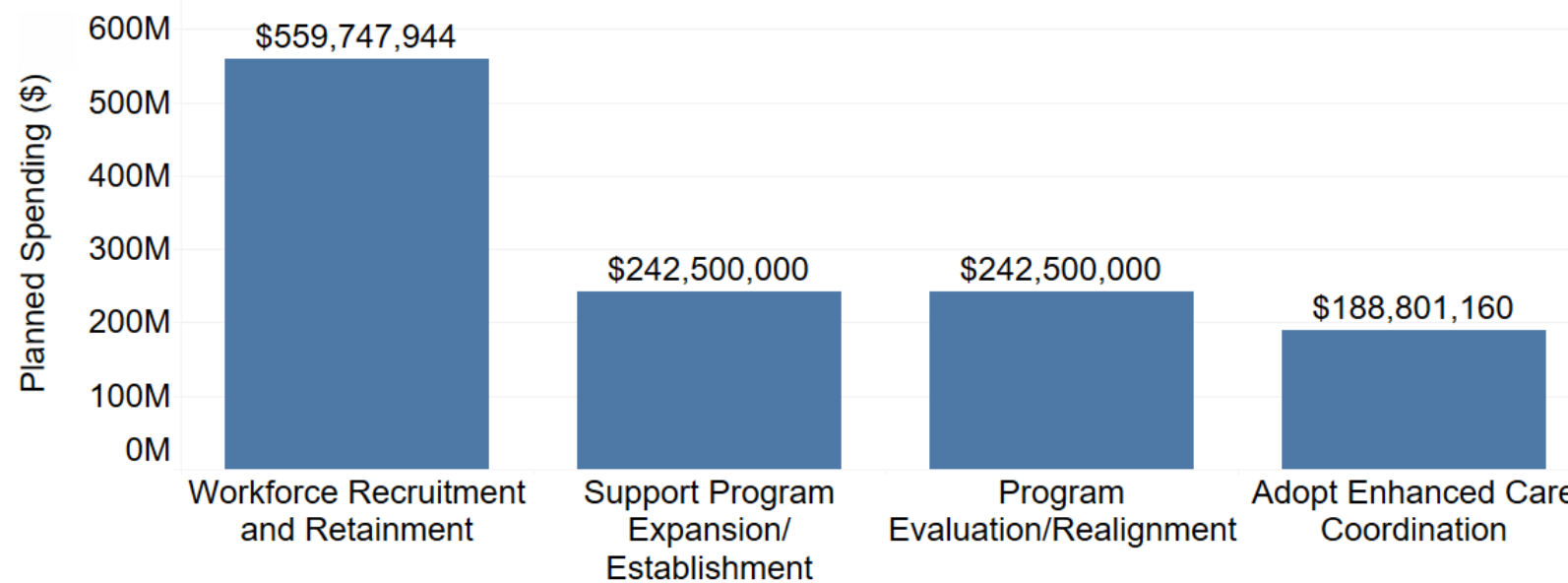
American Rescue Plan Section 9817 State Spending Plan Summary

Maryland

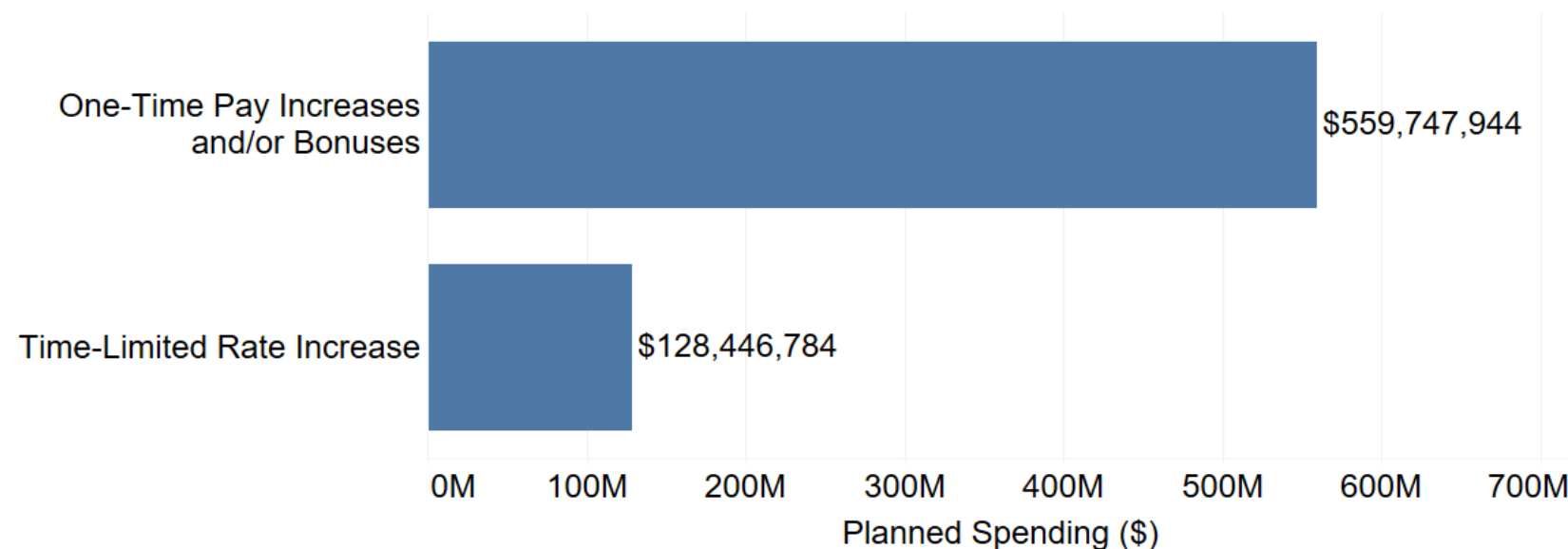

\$559.7M
total planned
\$207.2M
total reported
spending


3
activities
planned

All Areas by Planned Spending



Workforce Recruitment and Retainment Activities that Propose to Update Rates
By Planned Spending



Activity Highlights

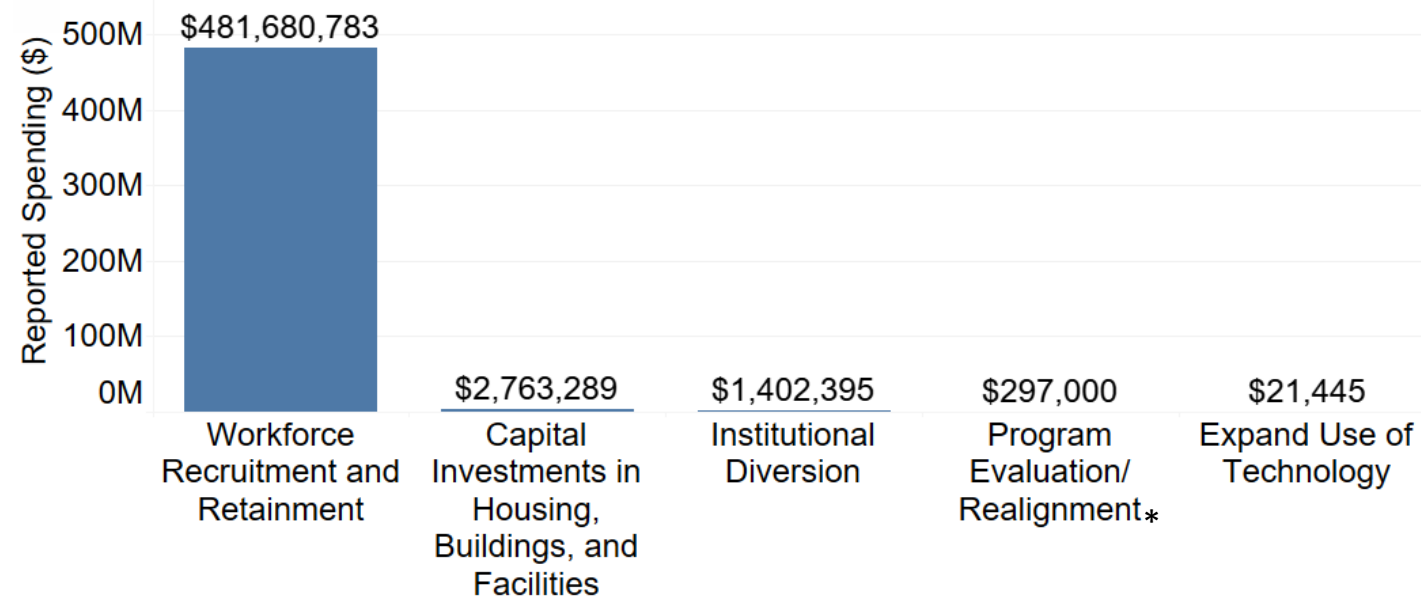
Long-Term Care Home and Community-Based Services (HCBS) Estimates: Provided a one-time rate increase of approximately 5.2% (or \$128.4 million) to HCBS programs through March 2024. Additionally, provided a temporary rate increase for long-term care HCBS between July 1, 2022, and June 30, 2023, of approximately 4% (or \$32.1 million).

Development Disabilities Administration Programs – Grants: Provides grants for the development and implementation of new HCBS business models such as expanded use of technology, customized employment, independent housing support models, community hub development, environmental modifications, transportation alternatives and services, consulting and subject matter expert services, and/or strategic planning and business model development to provide new or additional HCBS.

American Rescue Plan Section 9817 State Spending Plan Summary

Massachusetts

Top 5 Areas by Reported Spending



*Program evaluation/realignment includes independent studies and/or evaluation of home and community-based services (HCBS) programs in the state.

Activity Highlights

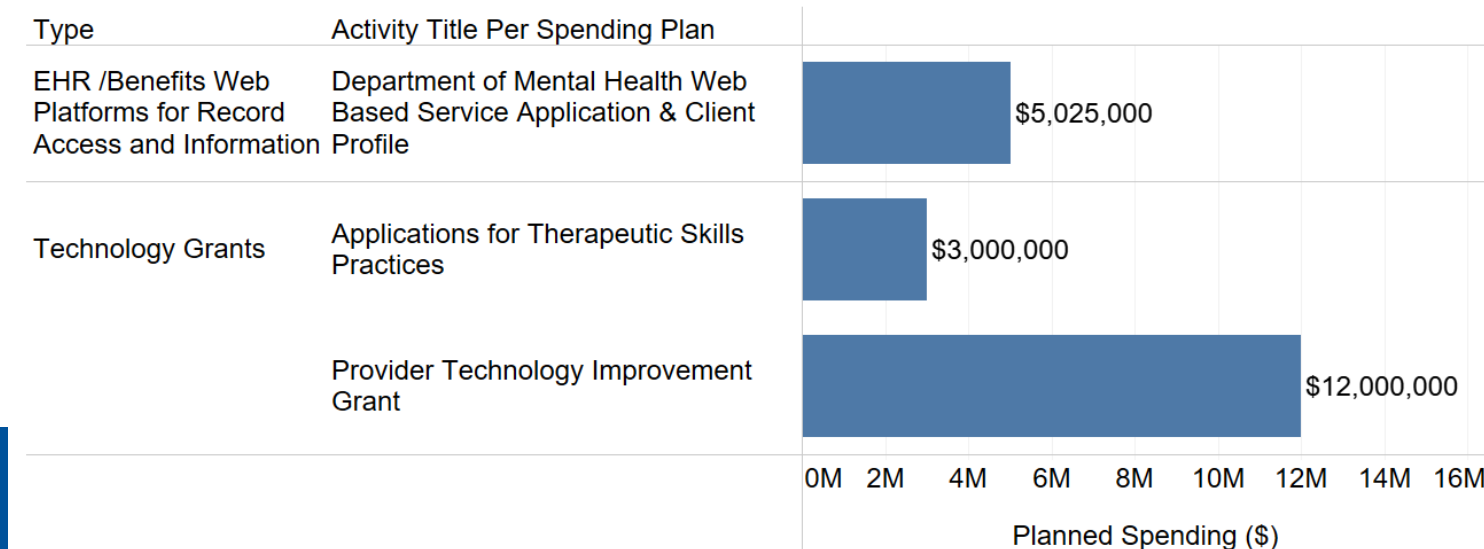
Respite and Resources for Families and Natural Supports: Expand existing respite programs through enhancements to caregiver stipend programs, increase capacity at day programs, and develop new programs including weekend drop-in centers and other respite care settings. Additionally, establish the administration of a grant program to fund innovative caregiver supports by awarding funding to community-based organizations and higher education programs to test innovative solutions and tools for family and natural support caregivers. The grant-funded projects aim to provide a proof of concept for innovative solutions that might be sustainable within agencies or programs and provide immediate support to caregivers to reduce caregiver burnout.

Workforce Innovation and Technical Assistance Grant Program: Establish stability in the HCBS workforce and provide a diverse avenue for proof-of-concept initiatives, through a two-year \$25 million grant program. Provider organizations supporting the Executive Office of Health and Human Services HCBS programs will be eligible to apply for the grants. Examples of initiatives that could be funded include: training programs; recruitment/retention bonuses; payment of application, licensing, or testing fees; creative transportation assistance or education compensation programs; in-field supervisory support; and career path development, including loan repayment. Grant funding will also be leveraged to establish a longer-term strategic framework for the most promising approaches to support workforce and family/natural caregivers.

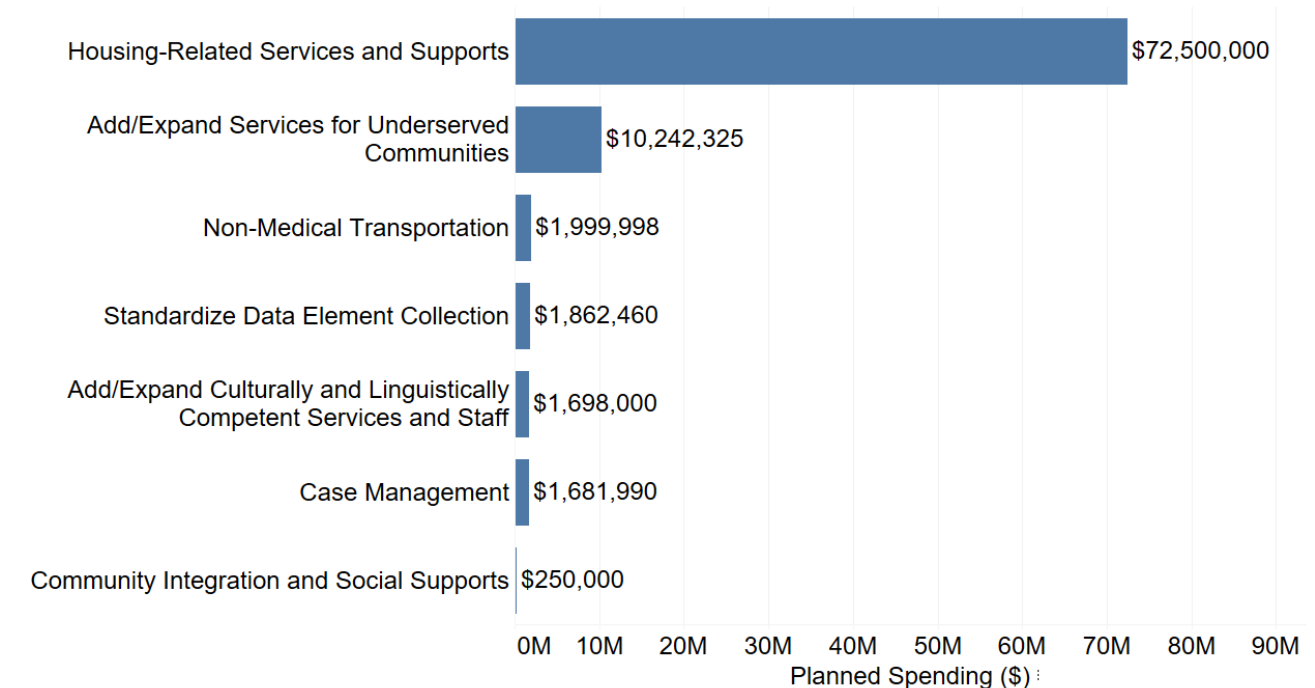
\$1.1B
total planned
\$486.2M
total reported
spending

63
activities
planned

Expanding Use of Technology Activities
By Planned Spending



Social Determinants of Health Planned Spending
By Type of Issue



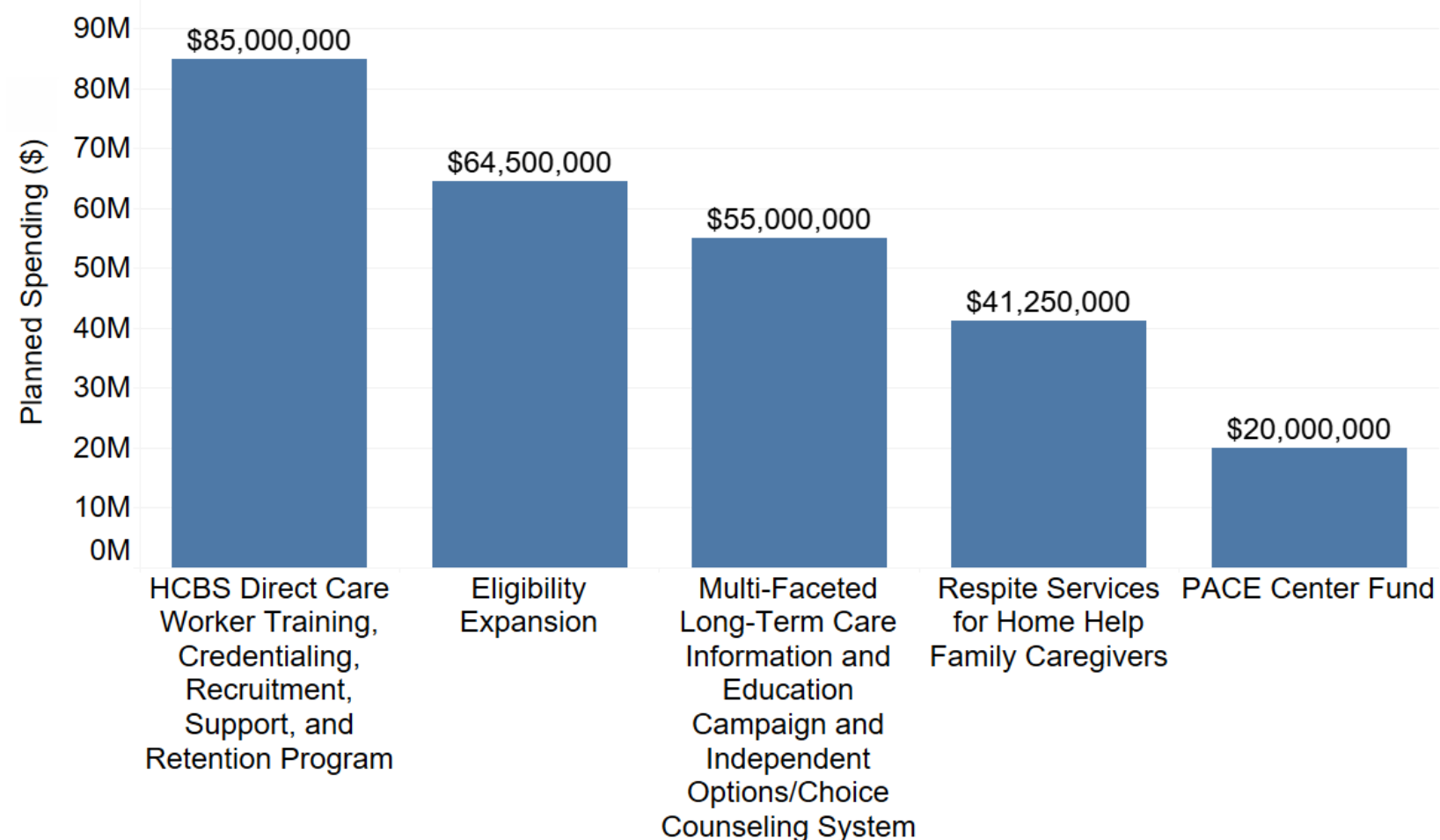
American Rescue Plan Section 9817 State Spending Plan Summary

Michigan

\$273.8M
total
planned
spending

7
activities
planned

Top 5 Activities by Planned Spending



Activity Highlights

Multi-faceted Long-Term Care Information and Education Campaign and Independent Options/Choice Counseling System: Assist individuals to better understand and navigate home and community-based services (HCBS) options through informational trainings, videos, print resources, and a website developed to promote HCBS and long-term care literacy and planning (including community mental health services). These videos and materials will be specific to HCBS and will assist individuals in making educated decisions about their care, as well as provide tools to assist in navigating the systems within HCBS. Materials and videos will be culturally competent, developed and available in accessible formats, including multiple languages, and will be Americans with Disabilities Act-compliant. Additionally, this proposal will create a statewide Independent Choice Counseling system which will serve individuals of all ages, elevate the current array of services into a no wrong door approach, and will build upon the current resources and expertise in the system.

HCBS Direct Care Worker (DCW) Training, Credentialing, Recruitment, Support, and Retention Program: Develop a comprehensive DCW training and credentialing program to improve DCW recruitment and retention. The DCW training program proposes a training curriculum that would have three DCW training tiers plus introductory, specialized, and train-the-trainer trainings supported by a learning management system (LMS). The LMS would host, administer, document, track, report, and evaluate training data information, and connect to the MI Care Career Portal allowing credentials earned to automatically populate to DCW profiles. In addition, this activity includes a worker retention and supportive technology fund to: 1) fund supportive technologies to allow beneficiaries to receive basic services in a remote fashion; and 2) assist providers with developing other DCW supports, such as bonuses for agency quality measures, training, referral and retention bonuses, tuition assistance, childcare and transportation support, and other incentives.

American Rescue Plan Section 9817 State Spending Plan Summary



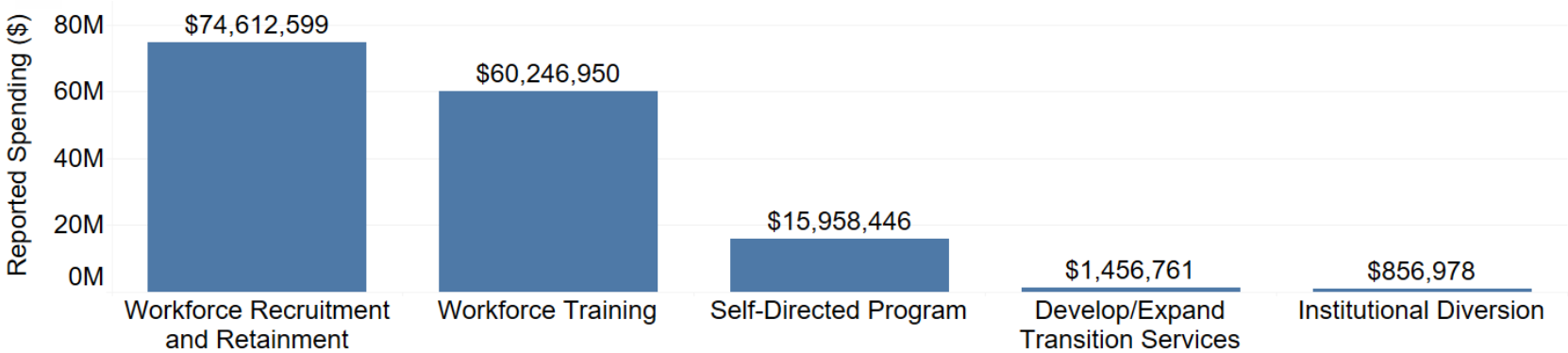
Minnesota

\$1.22B
total planned
\$92.9M total
reported
spending

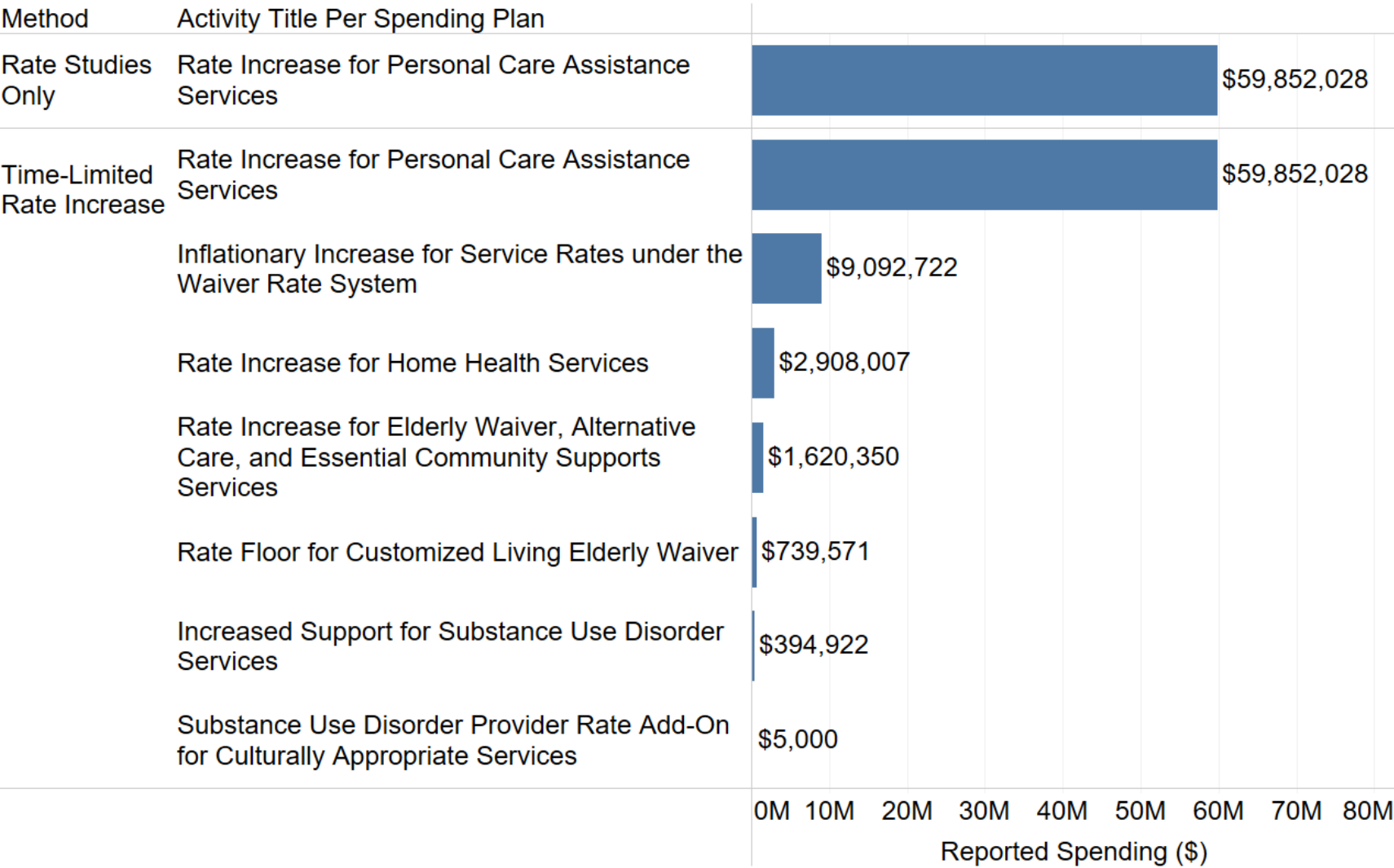


54
activities
planned

Top 5 Areas by Reported Spending



Workforce Recruitment and Retainment Activities that Propose to Update Rates
By Reported Spending



Activity Highlights

Expansion of Telehealth Services: Expands the availability and use of telehealth to deliver home and community-based services (HCBS), including the use of audio-only services. It also includes a study on the impact of telehealth on service access, quality, and fiscal policy, due to the state legislature in January 2023 to inform future policy development.

Housing Stabilization Services, Community Living Infrastructure, and Housing Transitional Costs: Aims to strengthen access to housing stabilization services under the state's Medical Assistance (MA) program through the following: a temporary MA benefit will be added to fund transitional costs (deposits, furnishings, etc.) for people receiving housing stabilization services under the state plan who do not have other funding sources for these costs; state grant funding through the Community Living Infrastructure (CLI) grant program will be provided to counties and tribal nations to integrate housing into their human services work and assist people with disabilities who are homeless or have housing instability to obtain and maintain housing; and additional CLI funding will be provided for expungement assistance to help people overcome barriers to attaining their own housing.



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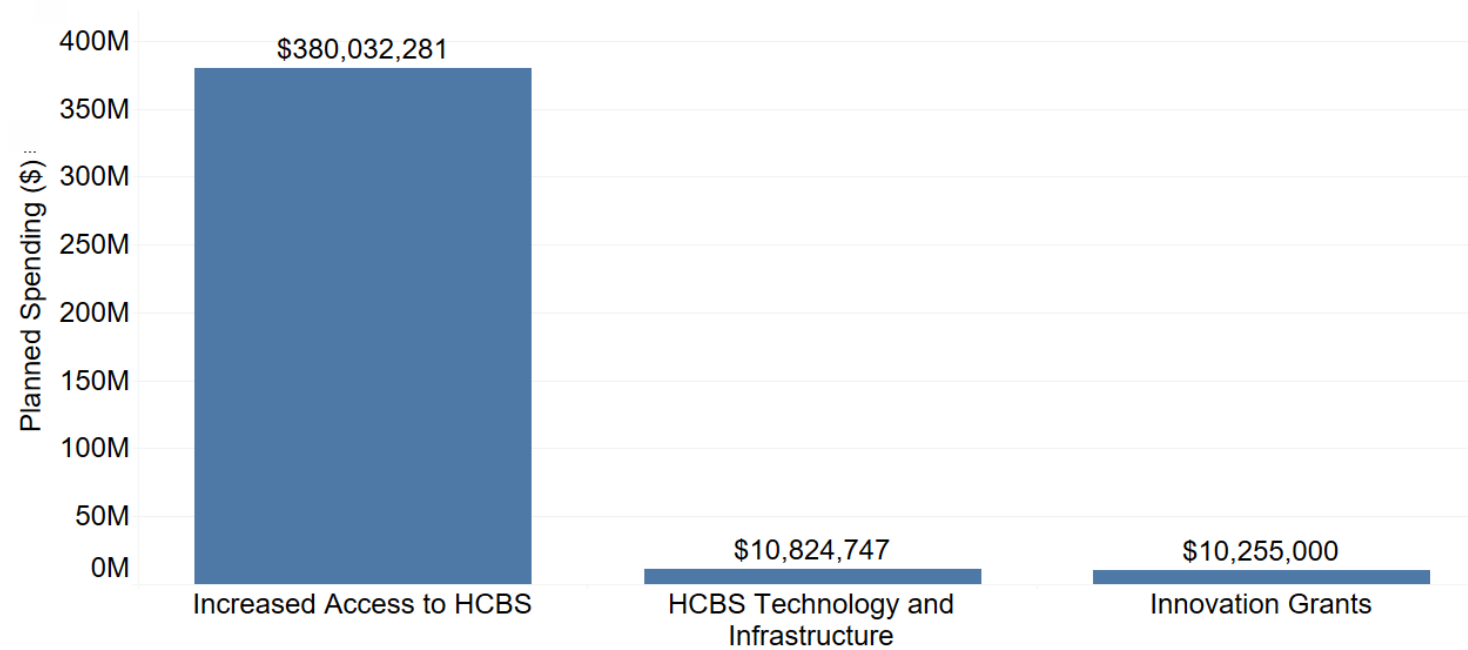
American Rescue Plan Section 9817 State Spending Plan Summary

Mississippi

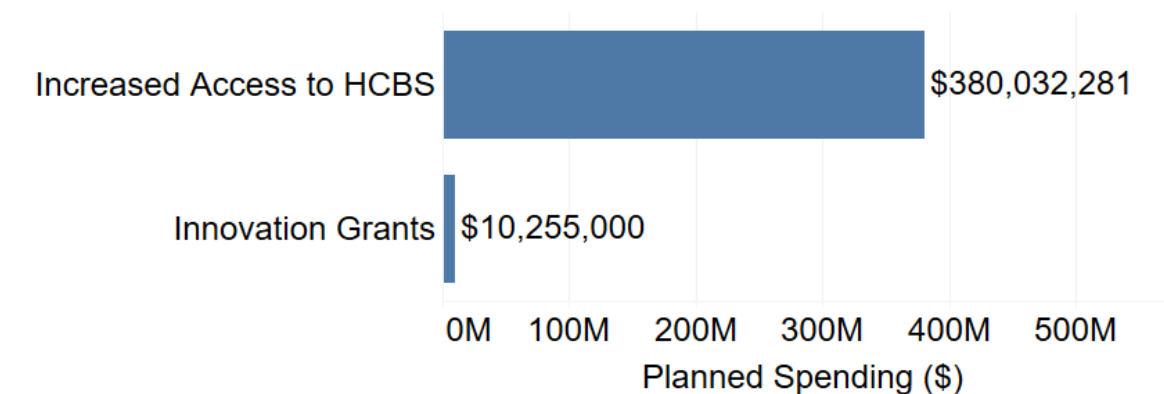

\$401.1M
total planned
\$32M total
reported
spending


3
activities
planned

All Activities by Planned Spending



Workforce Recruitment and Retainment Activities
By Planned Spending



Activity Highlights

Increased Access to Home and Community-Based Services (HCBS): Target investments that immediately expand and improve access to community-based services as well as opportunities to enhance existing services and to support workforce initiatives to retain and recruit the workforce needed to render services. Investments include increasing capacity across section 1915(c) waivers, evaluating and implementing opportunities to add additional services to existing section 1915(c) and 1915(i) programs, and pursuing a strategy aimed at developing and strengthening the HCBS provider network to support additional waiver capacity. The state is also planning for rate increases on a variety of section 1915(c) waiver and state plan HCBS and a comprehensive direct care workforce study to inform assumptions for updated rate studies and support discussions regarding other workforce development opportunities.

Innovation Grants: Award subgrants that allow direct spending on community proposed short-term or one-time projects to enhance person-centered HCBS, improve overall quality, encourage interagency partnerships to address social determinants of health affecting individuals receiving HCBS, and build a stronger HCBS workforce.

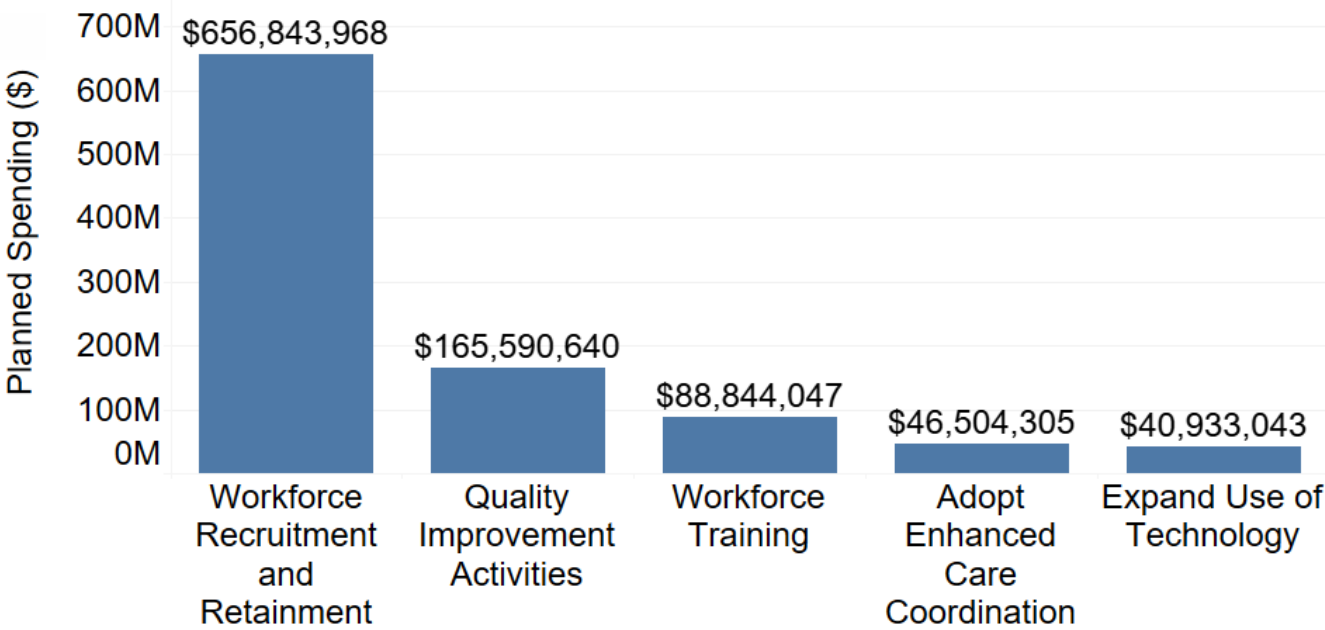
HCBS Technology and Infrastructure: Target investments to enhance and implement technology solutions and infrastructure needed to enable more effective care coordination, access, and service delivery for HCBS. Investments include upgrades to the state's electronic visit verification solution to support changes in HCBS and home health required under the 21st Century Cures Act, implementation of a data lake/repository and associated analytics software to improve opportunities for data integration and analysis, and expansion of data sharing across entities to improve member service as well as ensure interoperability across technology systems. Funds will also be used to make upgrades to the state's electronic long-term services and supports system, which supports assessments, case management, and care planning across all long-term services and supports programs.

American Rescue Plan Section 9817 State Spending Plan Summary

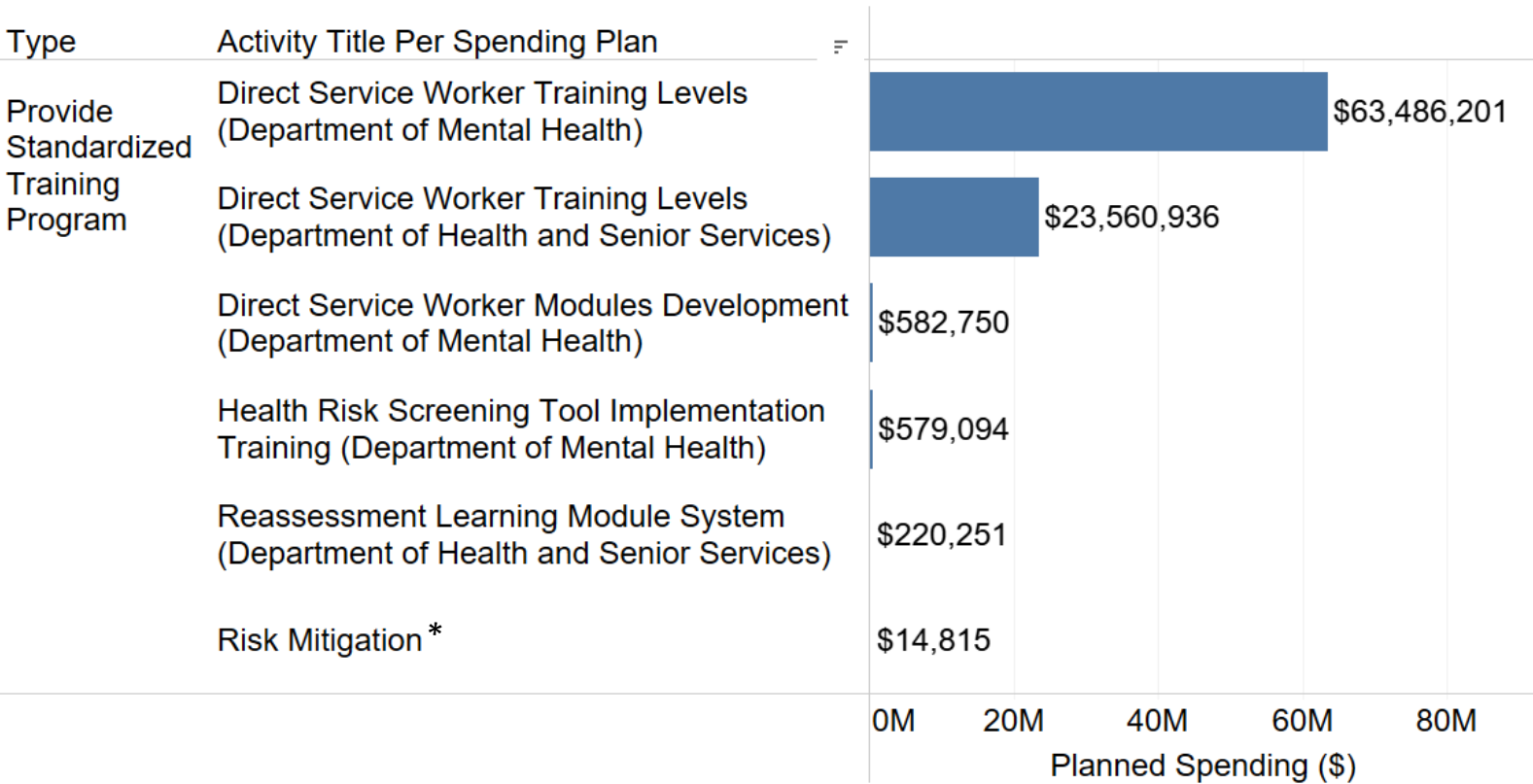
Missouri



Top 5 Areas by Planned Spending



Workforce Training Activities
By Planned Spending



Activity Highlights

Direct Service Professional (DSP) Apprenticeship Program: Develop career paths to support education and training of DSPs. This consists of creating certification(s) that DSPs could build upon to achieve further health professional opportunities. The state will expand the current capacity of the DSP Apprenticeship Program as well as implement incentive payments for providers who hire a DSP Apprentice from the talent pipeline.

Quality Reassessment Initiative: Expand reassessment partnerships by providing targeted enhanced administrative rates for reassessments performed. This proposal would increase certain administrative rates with an optional quality bonus payment for assessors that consistently meet specified quality standards. The state has already implemented a quality review and assurance unit to oversee administrative oversight of this proposal.

Health Risk Screening Implementation Training and Incentive Payment: Implement the Health Risk Screen Tool (HRST) in conjunction with intellectual and developmental disabilities waivers and provide incentive payments to providers for each initial client screened for health risk and destabilization using the tool.

**Risk Mitigation activity is for development of training and implementation design on Risk Mitigation and Effective Plan Implementation, and Individual Rights, Dignity of Risk and Effective Plan Implementation.*

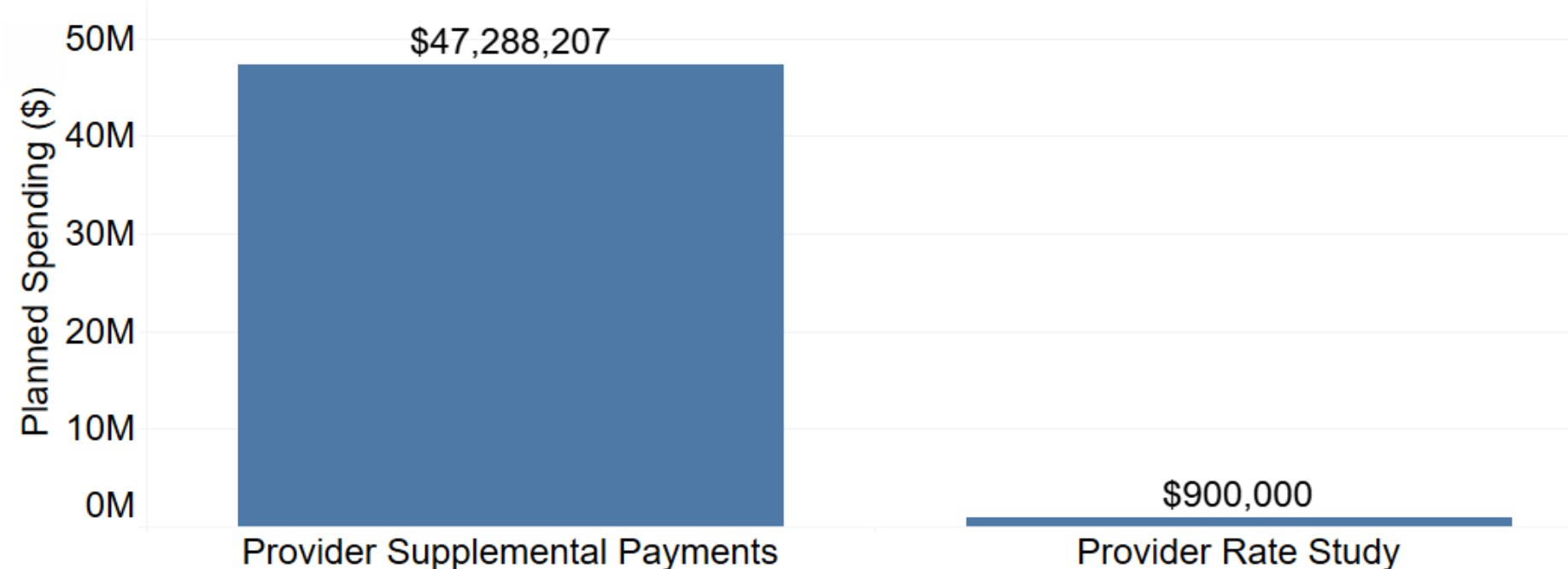
American Rescue Plan Section 9817 State Spending Plan Summary

Montana


\$70.3M
total planned
\$37.7 M total
reported
spending


2
activities
planned

All Activities by Planned Spending



Activity Highlights

Provider Supplemental Payments: Issue payments to home and community-based services providers for 24 months. Providers receiving the supplemental payments will be expected to use the funds for service delivery and/or workforce recruitment and retention. Maximum supplemental payment starts at 15% from April 1, 2021 to September 30, 2021, 12% from October 1, 2021, to March 31, 2022, 8% from April 1, 2022, to September 30, 2022, and 4% from October 1, 2022, to March 31, 2023.

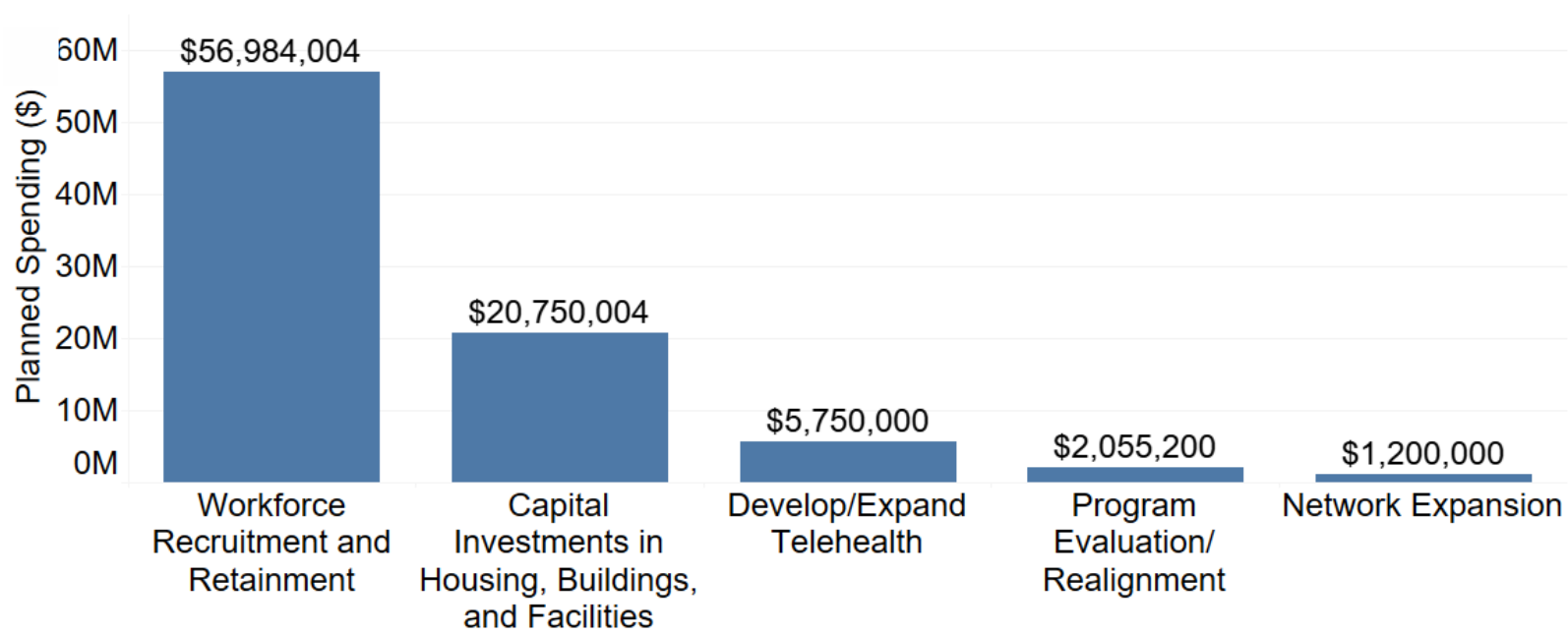
Provider Rate Study: Conduct a provider rate study to determine the impact of COVID-19 on provider rate sufficiency and member access.

American Rescue Plan Section 9817 State Spending Plan Summary

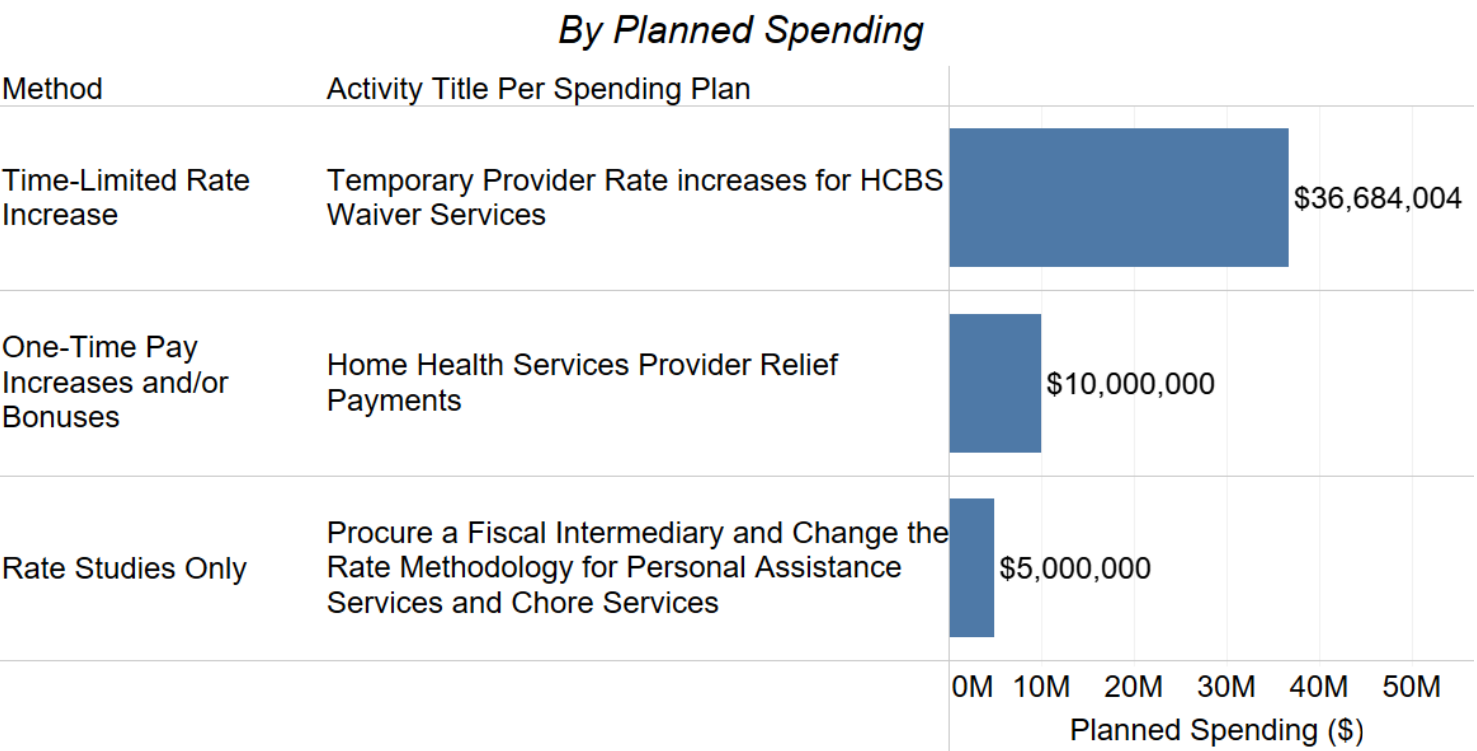
Nebraska



Top 5 Areas by Planned Spending



Workforce Recruitment and Retainment Activities that Propose to Update Rates



Activity Highlights

- Grants to Agencies to Purchase Telehealth Equipment:** Fund providers to purchase technology that will support provision of direct clinical services through telehealth and telemonitoring for two-way audio/video communication or technology for asynchronous management of chronic diseases.
- Renovate Facilities for Other Purposes or Enhance Purpose:** Make available funding for improvements of established structures that include modernization and facility changes to support community-based care provision. Examples include nursing facility to assisted living facility; therapeutic group homes; and respite spaces.



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American Rescue Plan Section 9817 State Spending Plan Summary

Nevada

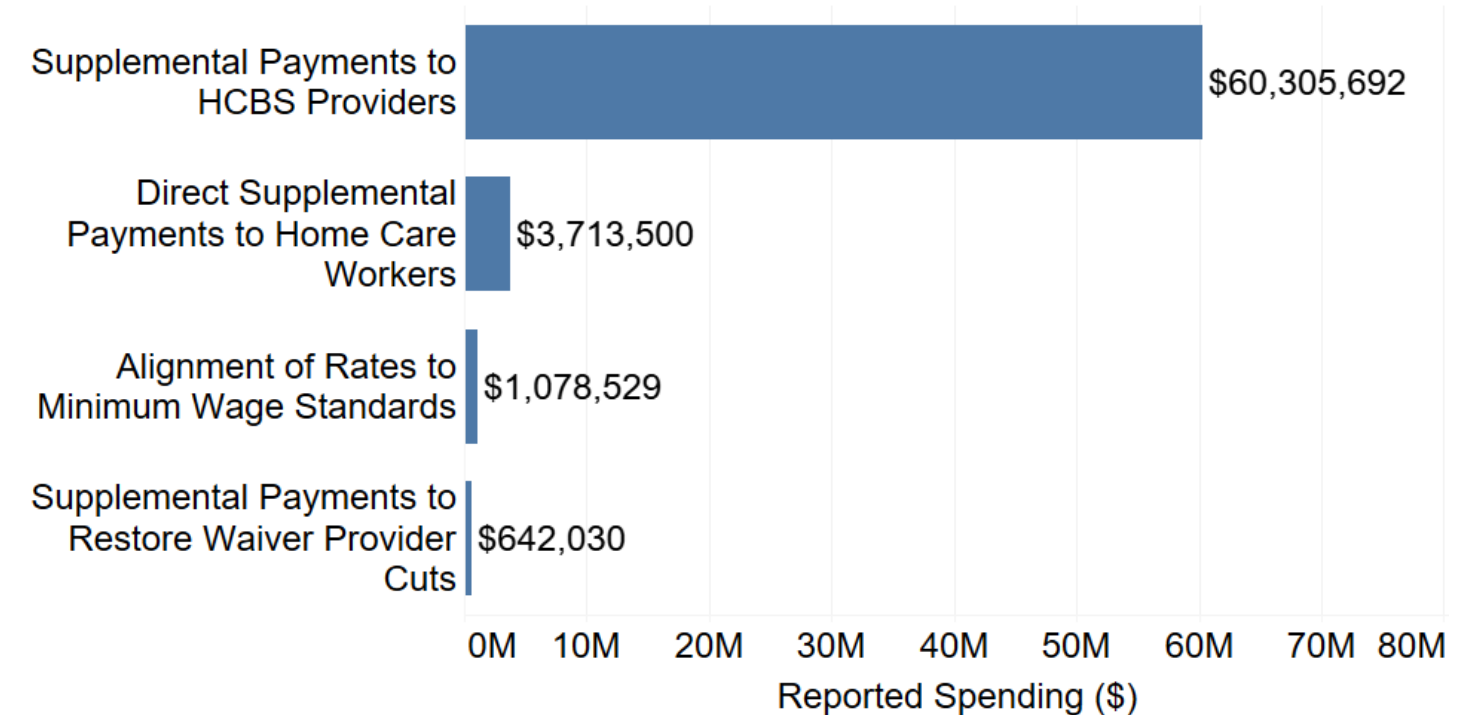

\$125.8M
total planned
\$65.8M total
reported
spending


19
activities
planned

Top 5 Areas by Planned Spending



Workforce Recruitment and Retainment Activities
By Reported Spending



Activity Highlights

Supplemental Payments to Home and Community-Based Services (HCBS) Providers: Provide a temporary bonus payment to providers through specified percent increases (ranging from 15% for home health care to 26.9% for intellectual/developmental disability waiver services) to the reimbursement rate.

Expansion of Dental Benefits for Beneficiaries with Intellectual / Developmental Disabilities (I/DD): Create a dental capitation plan for adults with I/DD including education, oral health promotion, and innovative outreach.

Expansion of Home Delivered Meals Under the HCBS Frail Elderly Waiver: Add home delivered meals as a new waiver service to the section 1915(c) HCBS Waiver for Frail Elderly.

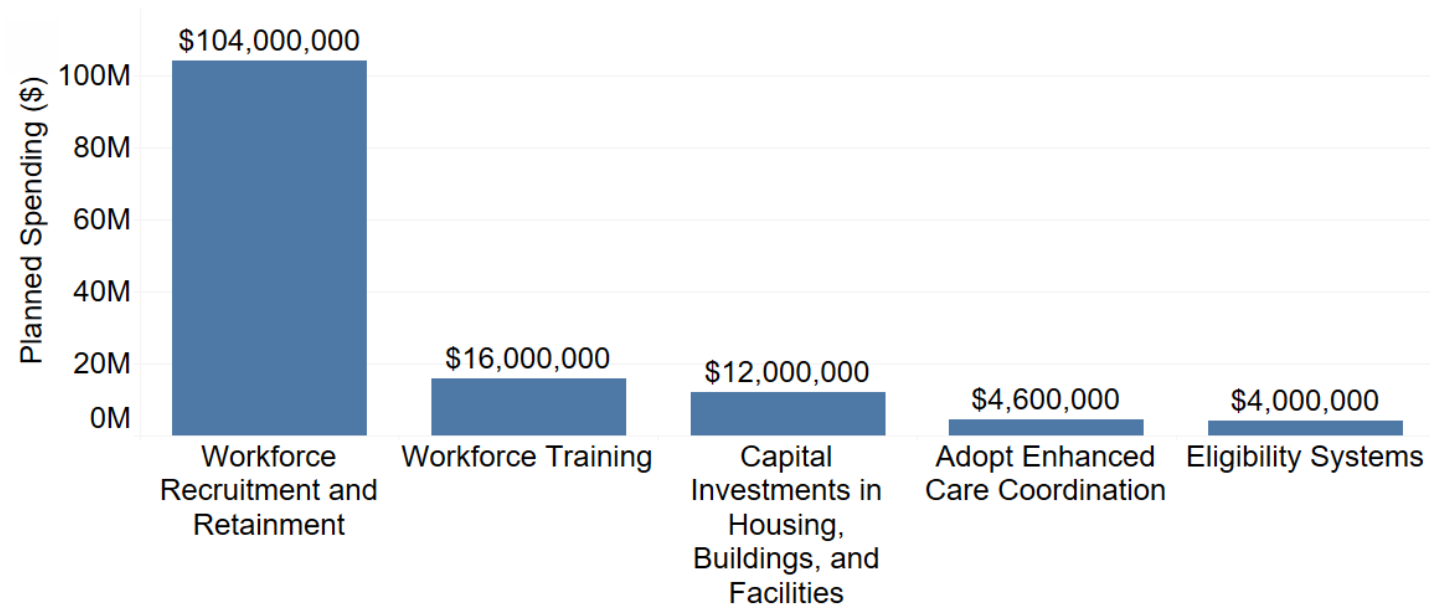
American Rescue Plan Section 9817 State Spending Plan Summary


\$154.5M
total planned
\$69M total
reported
spending


18
activities
planned

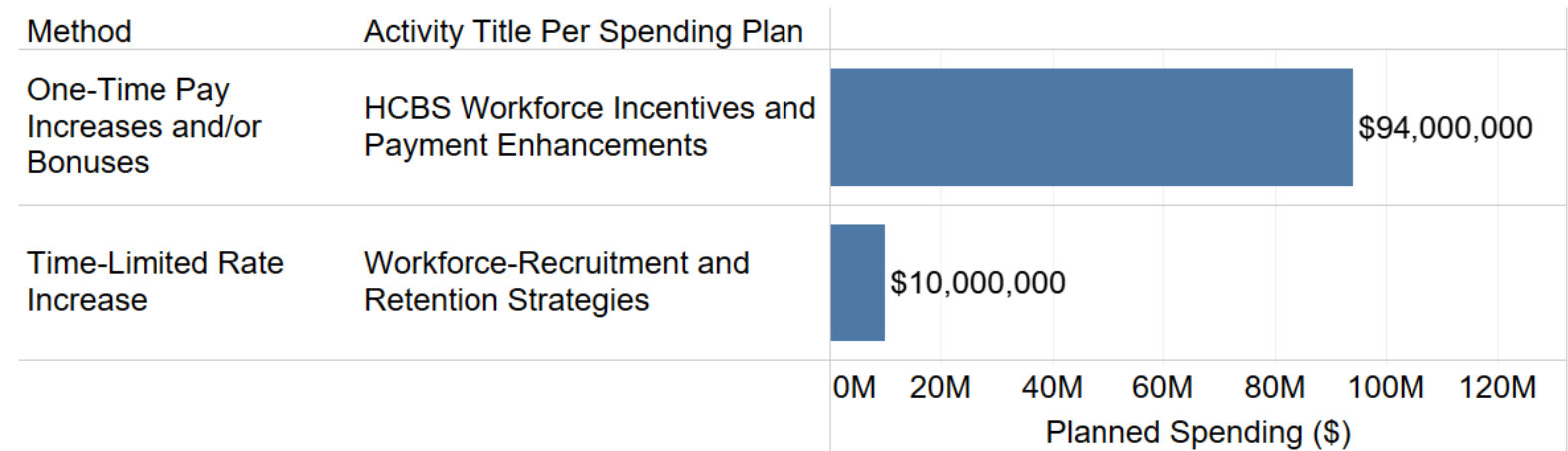
New Hampshire

Top 5 Areas by Planned Spending

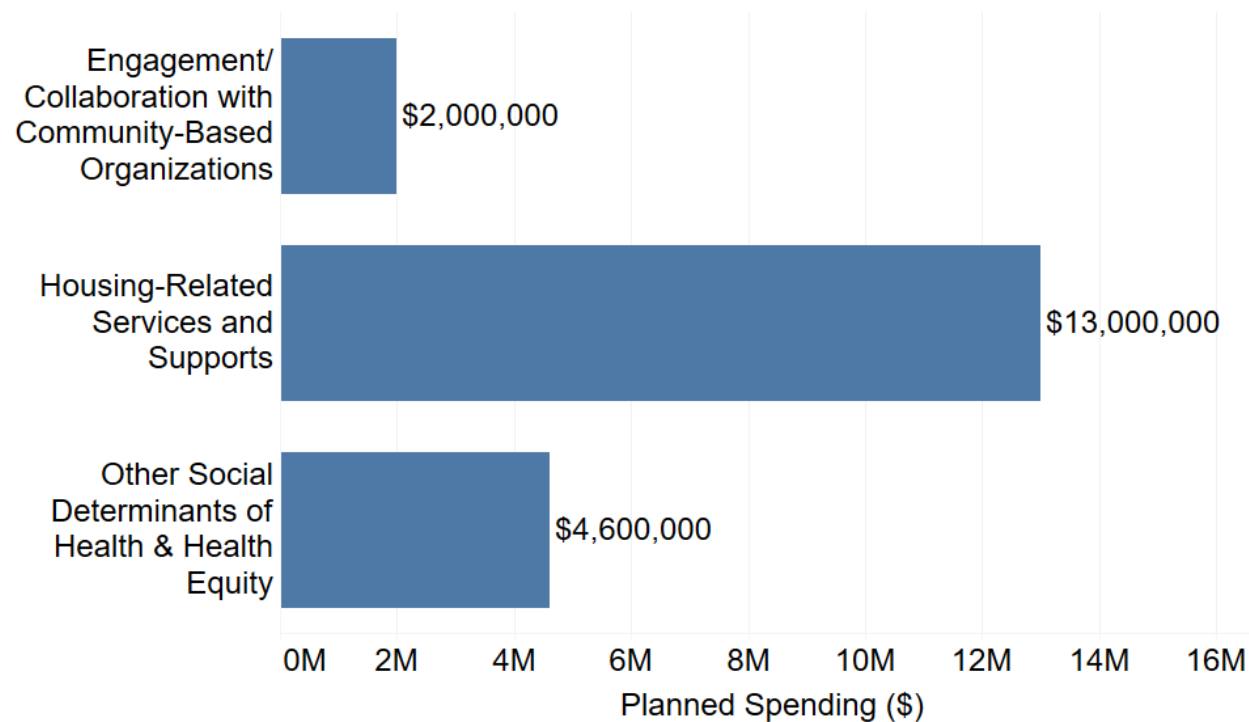


Workforce Recruitment and Retainment Activities that Propose to Update Rates

By Planned Spending



Social Determinants of Health Planned Spending
By Type of Issue



Planned Activities—Highlights

Housing - Developmental Disability, Intensive Treatment Services and Individuals Experiencing Homelessness: This project will allocate one-time dollars to providers of in-state services to buy/retrofit housing for individuals receiving services under the 1915(c) waiver who have Intensive Treatment Service (ITS) needs, individuals returning from out-of-state ITS placements and/or those experiencing homelessness under the 1915(i) State Plan Amendment. The Department of Health and Human Services (DHHS) will issue a Request for Grant Applications and one-time grants will be awarded to the projects that meet DHHS' goal to increase access for home and community-based services (HCBS) to individuals requiring ITS or those experiencing homelessness. All grantees must agree to be compliant with the HCBS Settings Rule and agree to provide the service to the identified population for a period of time, which will be determined by DHHS. Room and board costs will not be covered as part of this activity.

Integrated Healthcare Clinic for Individuals Experiencing Homelessness: Replicate a successful program that is currently operating in the state's largest city. The program will provide clinics in homeless shelters. Included in the clinics will be a medical practitioner (medical doctor, physician assistant, or advanced practice registered nurse), nurse coordinator or medical assistant, behavioral health therapist, substance misuse counselor, and case manager.

American Rescue Plan Section 9817 State Spending Plan Summary

New Jersey

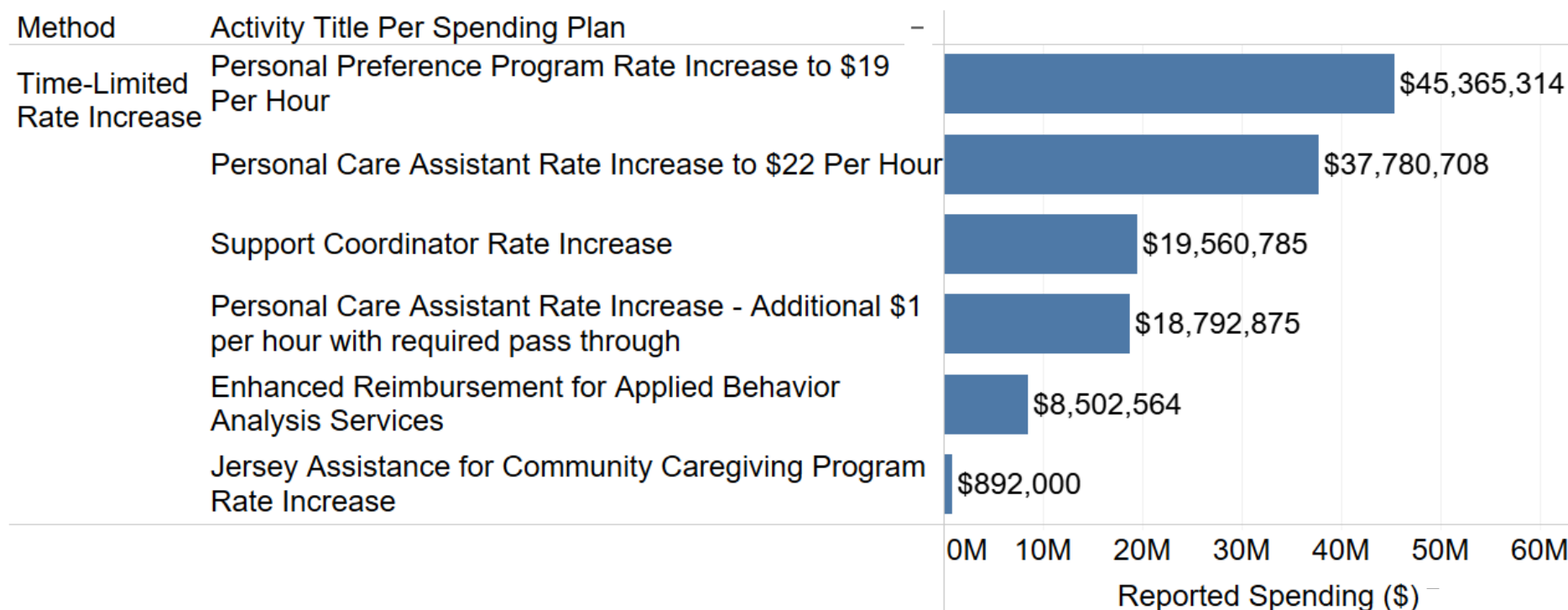
\$839.8M
total planned
\$130.9M
total reported
spending

18
activities
planned

Top 5 Areas by Planned Spending



Workforce Recruitment and Retainment Activities that Propose to Update Rates
By Reported Spending



Planned Activities– Highlights

Personal Care Services Rate Adjustment Activities: Increase personal care rates to \$22 per hour for provider agencies, \$19 per hour for self-directed personal care workers, and provide an additional \$1 per hour personal care assistant rate increase to worker wages.

Healthy Homes Dedicated Housing for NJ Family Care Members: Fund 100-200 deed-restricted, subsidized, and accessible rental units for Medicaid beneficiaries across the state. These homes will support better health outcomes for individuals at risk of homelessness or institutionalization. Room and board costs will not be covered as part of this activity.

Intensive Mobile Intellectual / Developmental Disabilities (I/DD) Services: Provide multidisciplinary and flexible mobile treatment teams to deliver intervention and support to youth with significant I/DD and co-occurring behavioral health needs within their home environment and the context of their caregiving system.

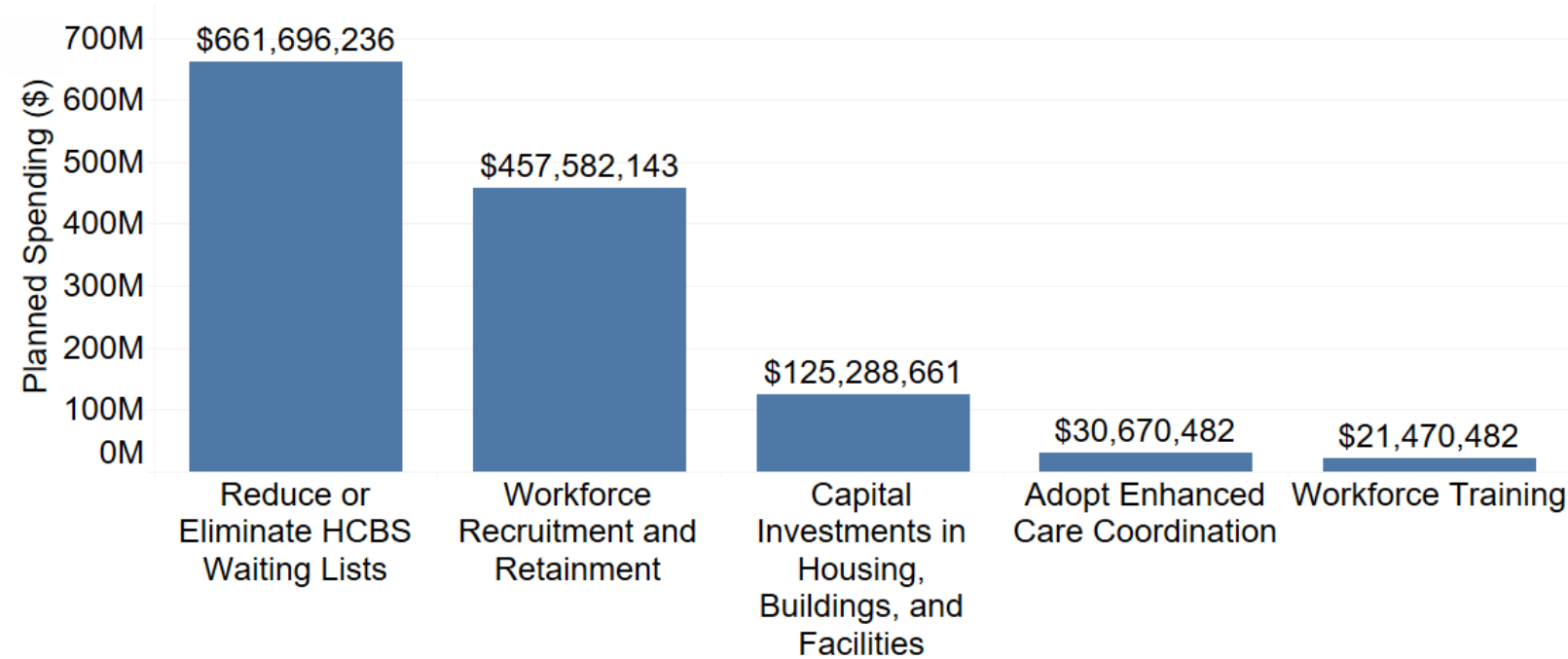
American Rescue Plan Section 9817 State Spending Plan Summary

New Mexico

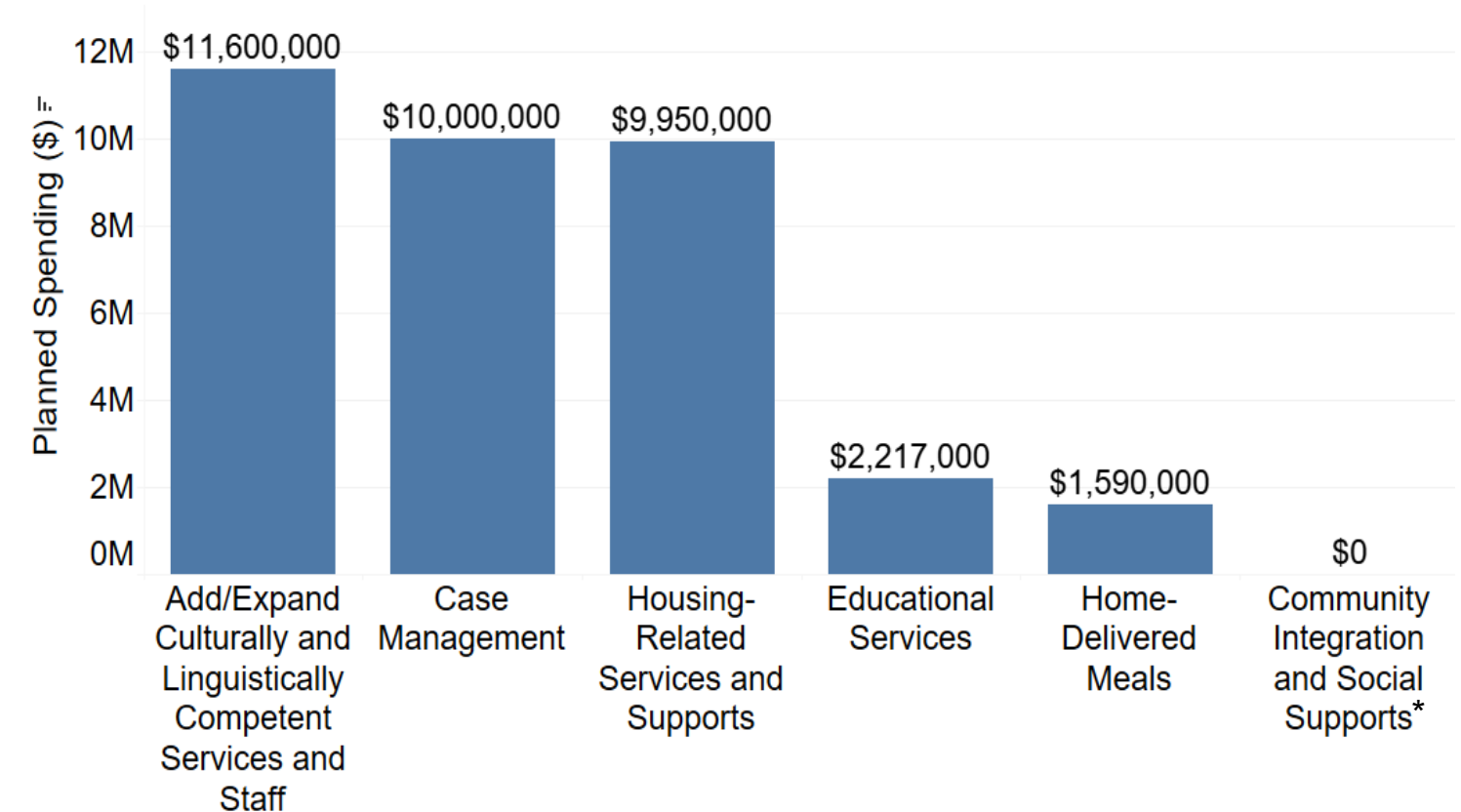
\$1.2B
total planned
\$130M total
reported
spending

36
activities
planned

Top 5 Areas by Planned Spending



Social Determinants of Health Planned Spending
By Type of Issue



* State is in process of allocating funds.

Activity Highlights

Temporary Economic Recovery Payments: Increase in payments for all home and community-based services (HCBS) providers, phased-out over three payments: 15% reimbursement increase (May 1, 2021 to June 30, 2022), 10% reimbursement increase (July 1, 2022 to June 30, 2023), and 5% reimbursement increase (July 1, 2023 to June 30, 2024). New Mexico did not direct a specific percentage of payments to be made to direct service workers; however, providers were strongly encouraged to use recovery payments to support direct service workers.

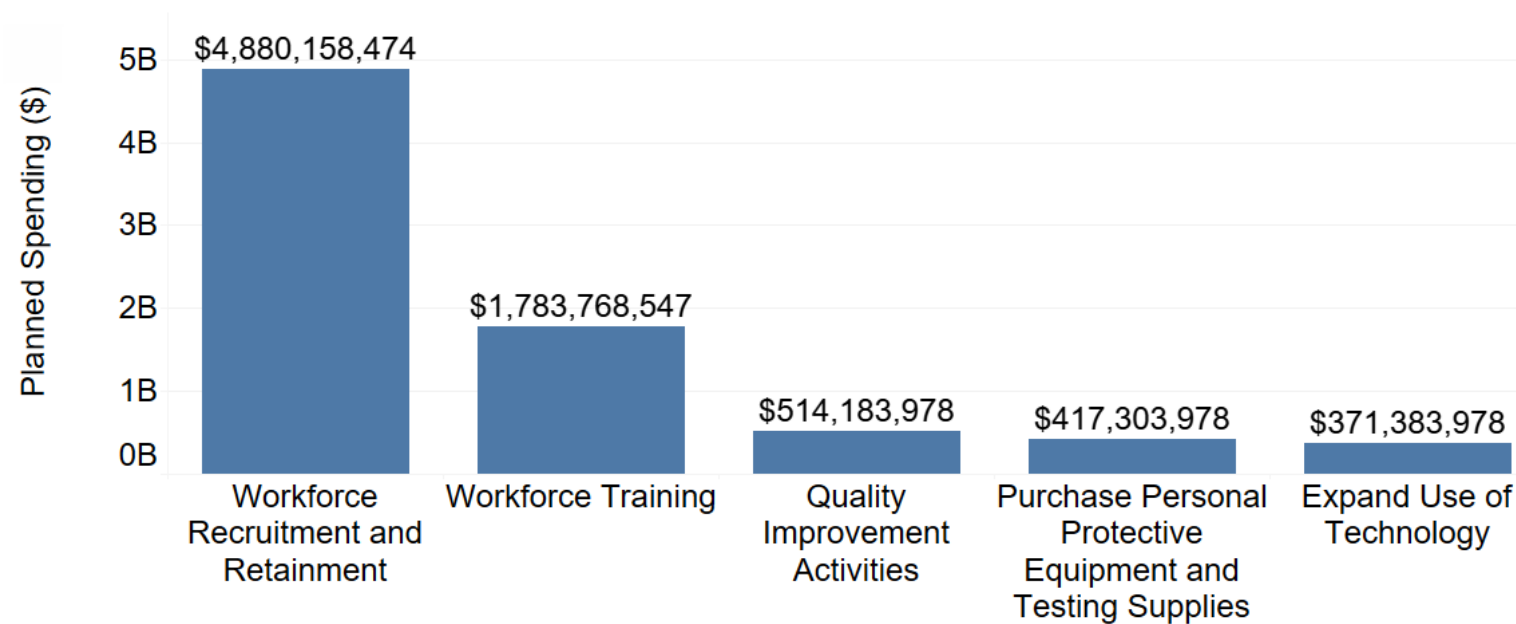
Add Home and Community-Based Waiver Slots: Expand the Developmental Disabilities Waiver Program and the Mi Via Waiver over a three-year period to serve all 4,207 individuals with intellectual and developmental disabilities on the waiting list.

Add Community Benefit Slots: Add 1,000 slots to the Centennial Care Community Benefit waiver program over three years, for those who are not otherwise eligible for Medicaid, thereby enabling more elderly and disabled New Mexicans to receive community benefit services.

American Rescue Plan Section 9817 State Spending Plan Summary

New York

Top 5 Areas by Planned Spending



Activity Highlights

Transform the Long-Term Care Workforce and Achieve Value-Based Payment (VBP) Readiness:

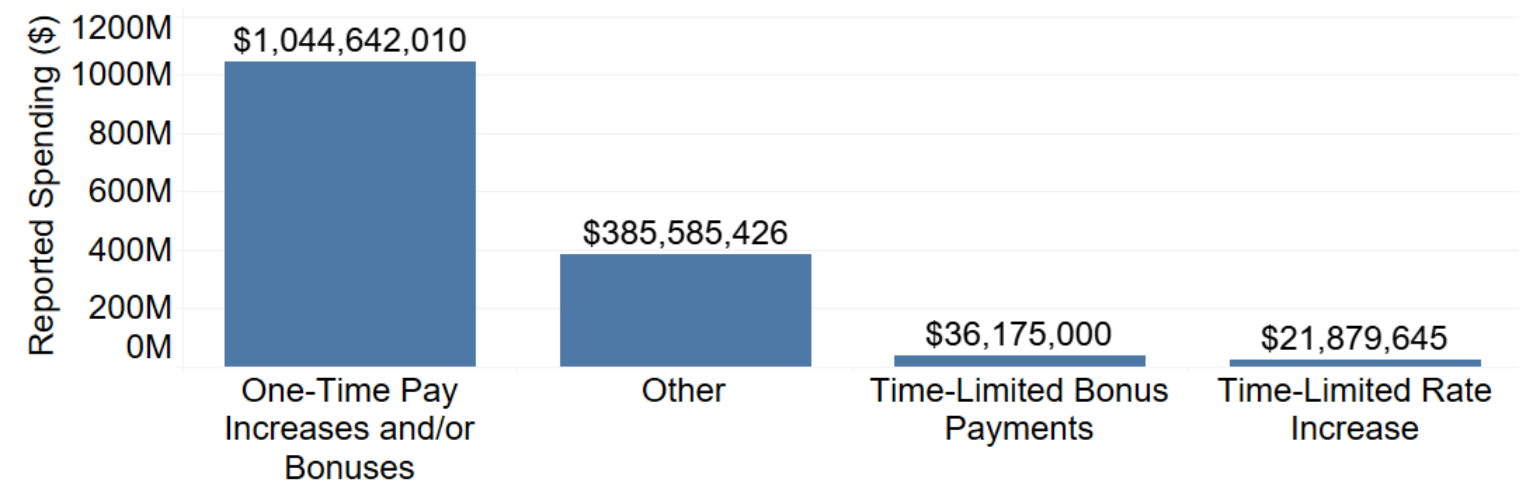
Implement a directed payment program that would help transition home care providers and their workforce to more advanced VBP models. Payments would be tied to the utilization and delivery of qualifying community-based long-term services and supports by eligible providers. Payments would be further conditioned on providers that develop the following workforce transformation programs: workforce retention strategies, training programs in connection with local Workforce Investment Organizations, innovative technologies that assist with value-based purchase contracting, and recruitment of a racially and ethnically diverse and culturally competent workforce.

Home Care Minimum Wage Increase: Implement a \$3 increase to the minimum wage for home health aides, personal care aides, home attendants, and personal assistants performing Consumer Directed Personal Assistance Program services, to both recognize the efforts of home care workers through the COVID-19 pandemic and to attract and retain talented people in the profession.

\$5.2B
total planned
\$1.5B total
reported
spending

46
activities
planned

Workforce Recruitment and Retainment Activities that Propose to Update Rates By Reported Spending



Quality Improvement Activities

Activity Title from the Spending Plan	Total Planned Spend (\$M)
Transform the Long-Term Care Workforce and Achieve VBP Readiness	\$357.3M
Expand Capacity in Nursing Home Transition and Diversion and Traumatic Brain Injury	\$92.8M
Advance Children's Services Information Technology Infrastructure	\$14.1M
Invest in a Community Engagement Initiative—Home and Community-Based Services Day	\$30.0M
Extend Short-Term Support for Behavioral Health Care Collaboratives	\$20.0M
Total Planned Spending:	\$514.2M

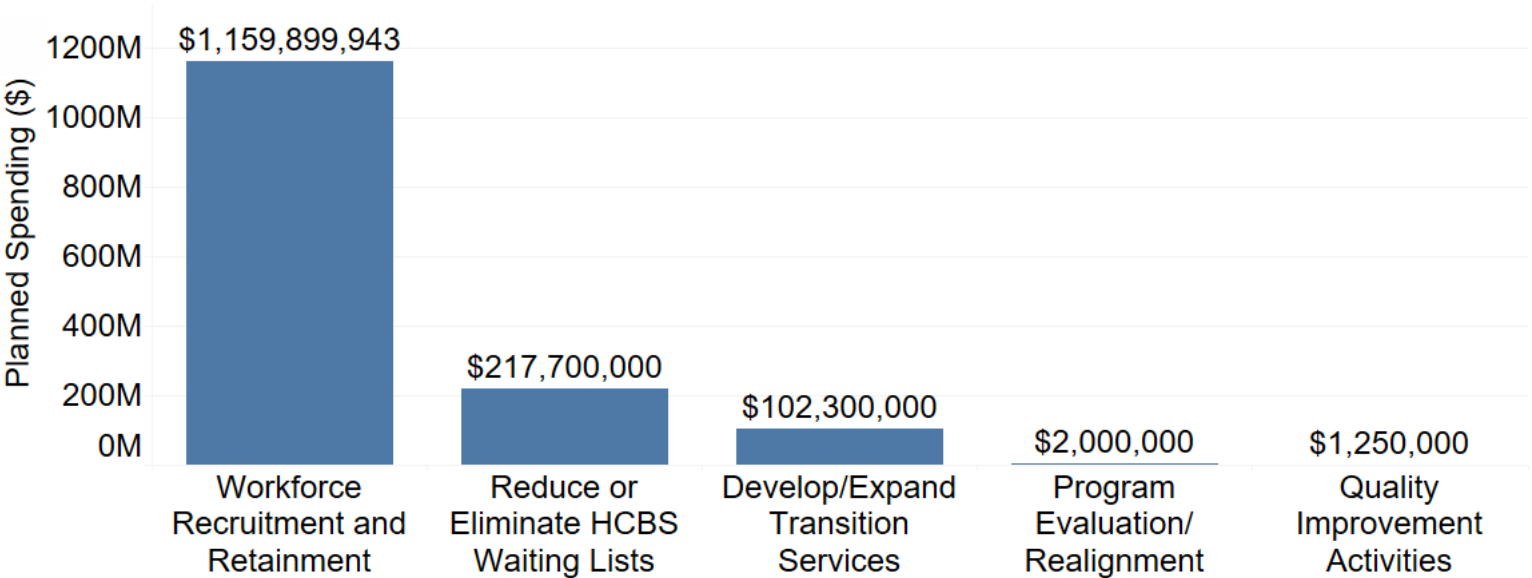
American Rescue Plan Section 9817 State Spending Plan Summary

\$1.5B total
planned
spending

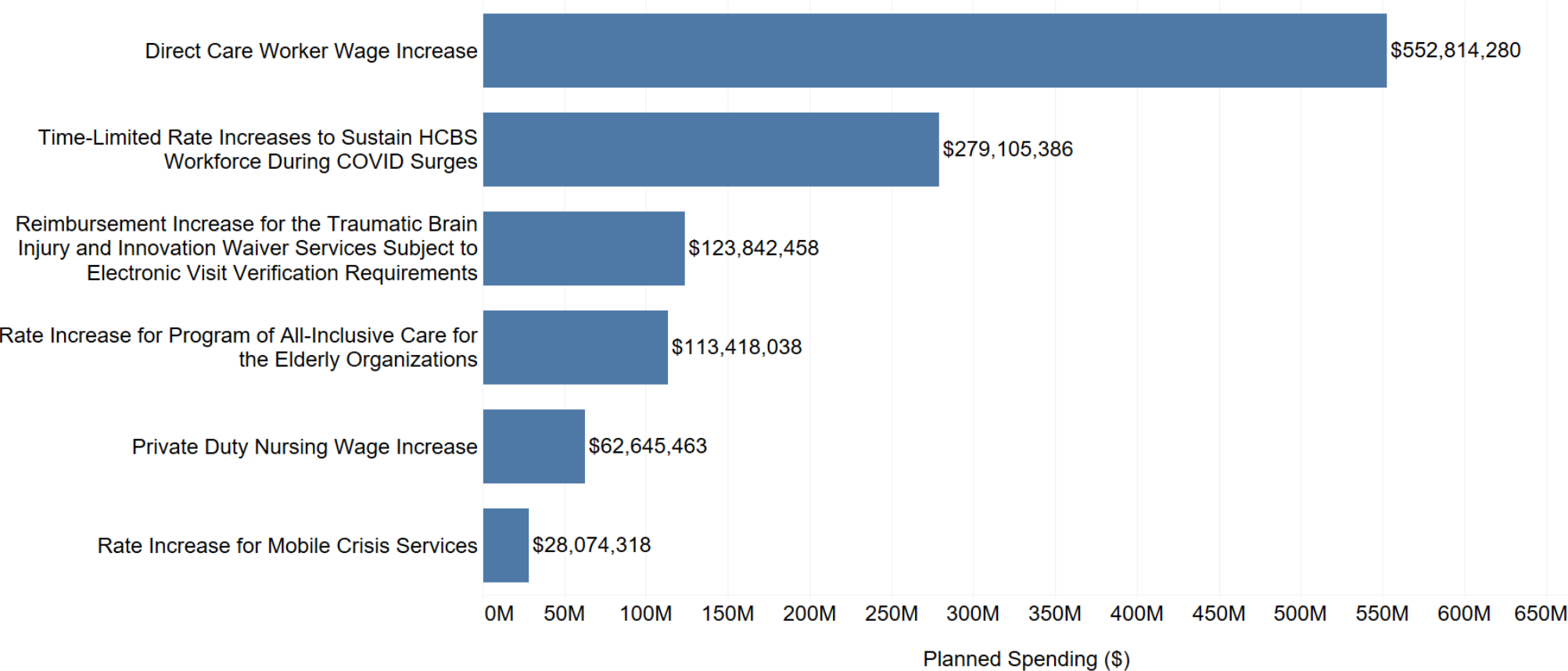
26
activities
planned

North
Carolina

Top 5 Areas by Planned Spending



Workforce Recruitment and Retainment Activities
By Planned Spending



Activity Highlights

Direct Care Worker Wage Increase: Provide a long-term, rate increase for home and community-based services (HCBS) providers. This initiative also proposes strengthening data collection on the direct care workforce, to ensure that the state has accurate information on the direct care workforce and payment rates for these workers.

Waiver Expansion & Waitlist Reduction: Prioritize the joint expansion of waiver slots and reduction of waitlists for two of the state’s four HCBS programs: 1) the Community Alternatives Program for Disabled Adults, which supplements formal and informal services and supports for adults age 18 and older with disabilities and seniors age 65 and older; and 2) NC Innovations, which is designed to meet the needs of individuals with intellectual or developmental disabilities. In order to expand access to HCBS, the state is proposing expanding the unduplicated participant count in each of the two HCBS waivers.

Social Isolation & Loneliness: Research best, promising, and evidence-based approaches to combatting social isolation and loneliness to address rising rates of social isolation and loneliness experienced among adults. Proposed research efforts will be conducted cross-divisionally, expand on existing efforts, and ultimately result in the development and implementation of three to four new programs to combat the negative health outcomes and financial consequences associated with social isolation and loneliness among adults.

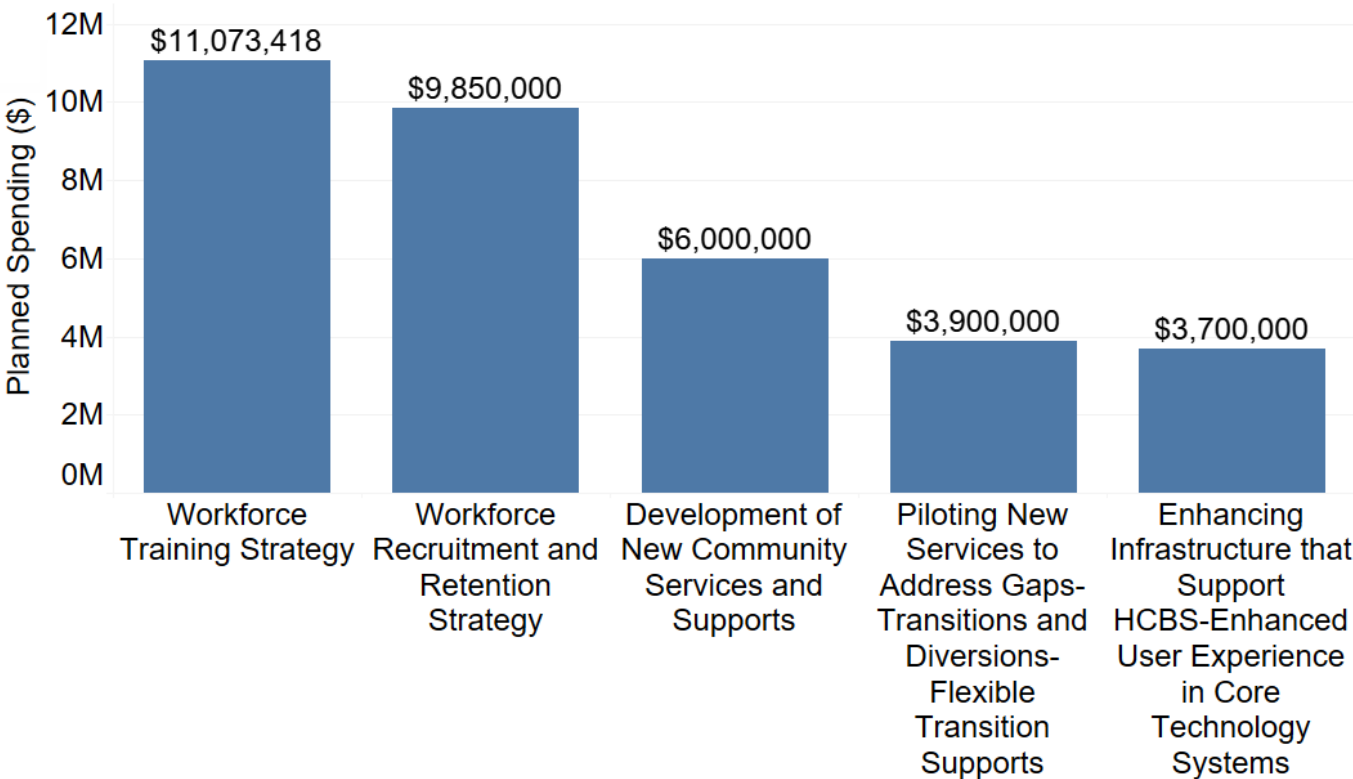
American Rescue Plan Section 9817 State Spending Plan Summary

North Dakota

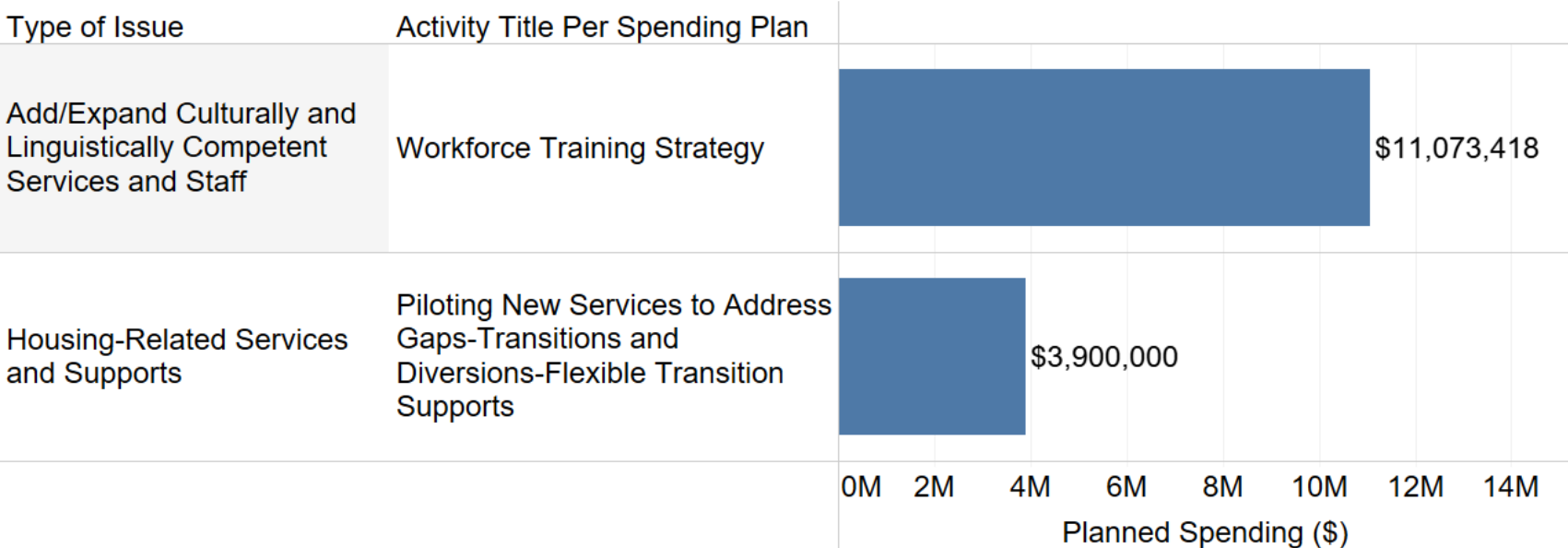
\$45.1M
total planned
\$3.6M total
reported
spending

15
activities
planned

Top 5 Activities by Planned Spending



Social Determinants of Health Planned Spending
By Type of Issue



Activity Highlights

- Workforce Recruitment and Retention Strategy:** Develop a pilot program that supports both the recruitment and retention of the direct care workforce in the home and community-based services (HCBS) industry. The state will engage workforce partners to identify financial incentives that will be meaningful to members of the workforce and impactful in terms of overall workforce availability. It will also consider targeted incentives for specified service types (e.g., respite), enhanced training/endorsements, duration of service, and complexity of care.
- Develop New Community Services and Supports:** Offer a series of tiered start-up grants, incentives, and supports to providers who increase their capacity to provide HCBS. The state will consider incentives for skilled nursing facilities or health systems that open an HCBS service line in compliance with federal regulations, for new providers of high priority services (e.g., respite, family care option, round-the-clock services, personal care, nursing), for existing providers who expand into new service geographies, and for providers who develop capacity for complex care cases. Awards will incentivize both establishment of new service lines as well as enhancement of established service delivery.

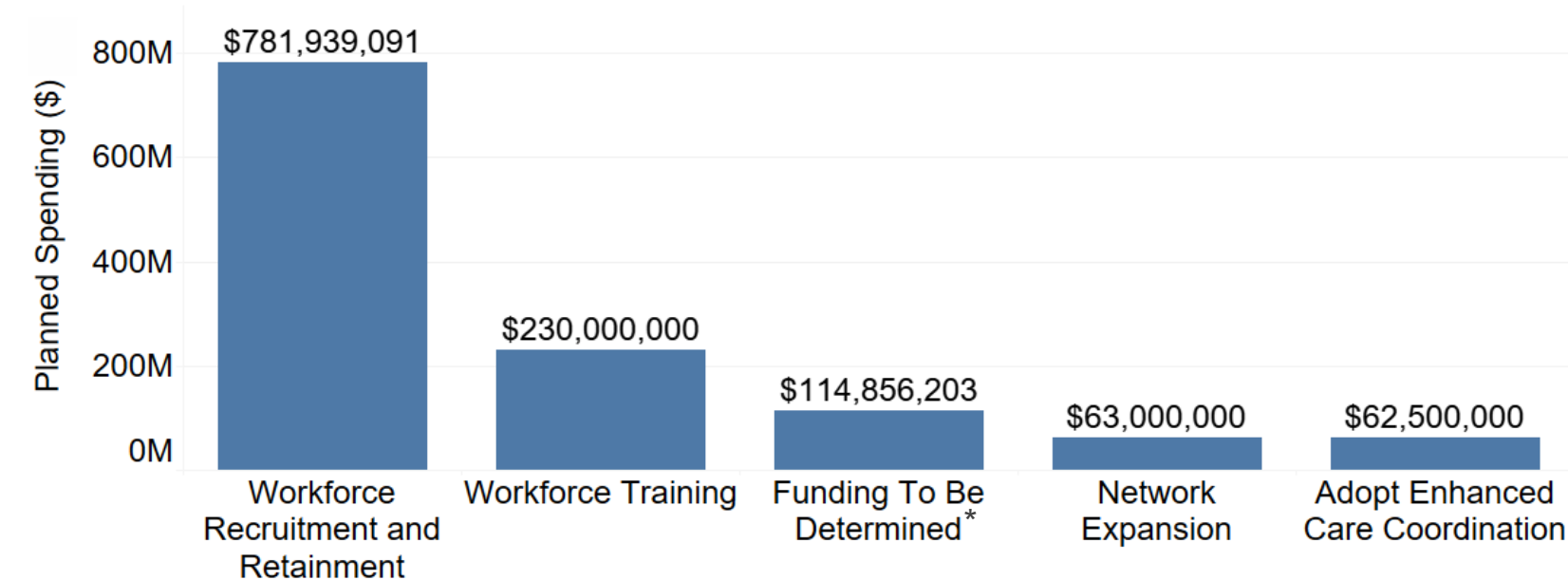
American Rescue Plan Section 9817 State Spending Plan Summary

Ohio

\$1.1B
total planned
\$489.5M
total reported
spending

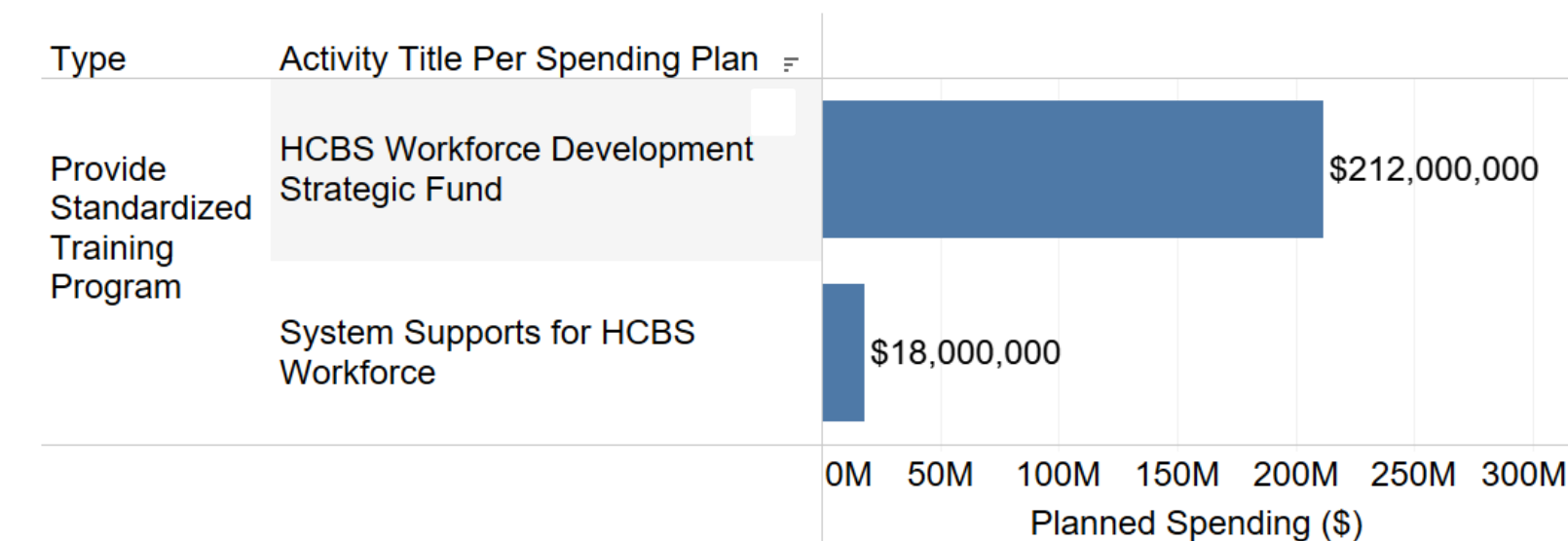
14
activities
planned

Top 5 Areas by Planned Spending



* State is currently developing plans for the funding.

Workforce Training Activities
By Planned Spending



Activity Highlights

Immediate Provider Workforce Relief: Provide targeted, time-limited immediate relief to providers of home and community-based services (HCBS). Providers will be required to invest directly into their staff through retention/sign-on bonuses.

HCBS Workforce Development Strategic Fund: Expand residency training and fellowship programs for advance practice registered nurses, physician assistants, and physicians dedicated to serving the behavioral health, geriatric, and developmentally disabled community; develop a campaign to promote career pathways awareness training programs for school guidance counselors, academic advisors, and employment counselors; and support the growth of existing career-focused programming in behavioral health disciplines at the state's two- and four-year colleges and universities. A student pursuing a degree or certificate in a behavioral health field will be eligible for up to \$10,000 during their undergraduate and graduate studies and up to an additional \$5,000 post-graduation in recruitment and retention bonuses for obtaining employment in a community behavioral health center in Ohio.

Supports for Individuals & Informal Caregivers: Establish The Caregiver Center to provide evidence-based research training to caregivers and serve as a central hub of knowledge to drive public policy and optimize health and well-being for family caregivers.

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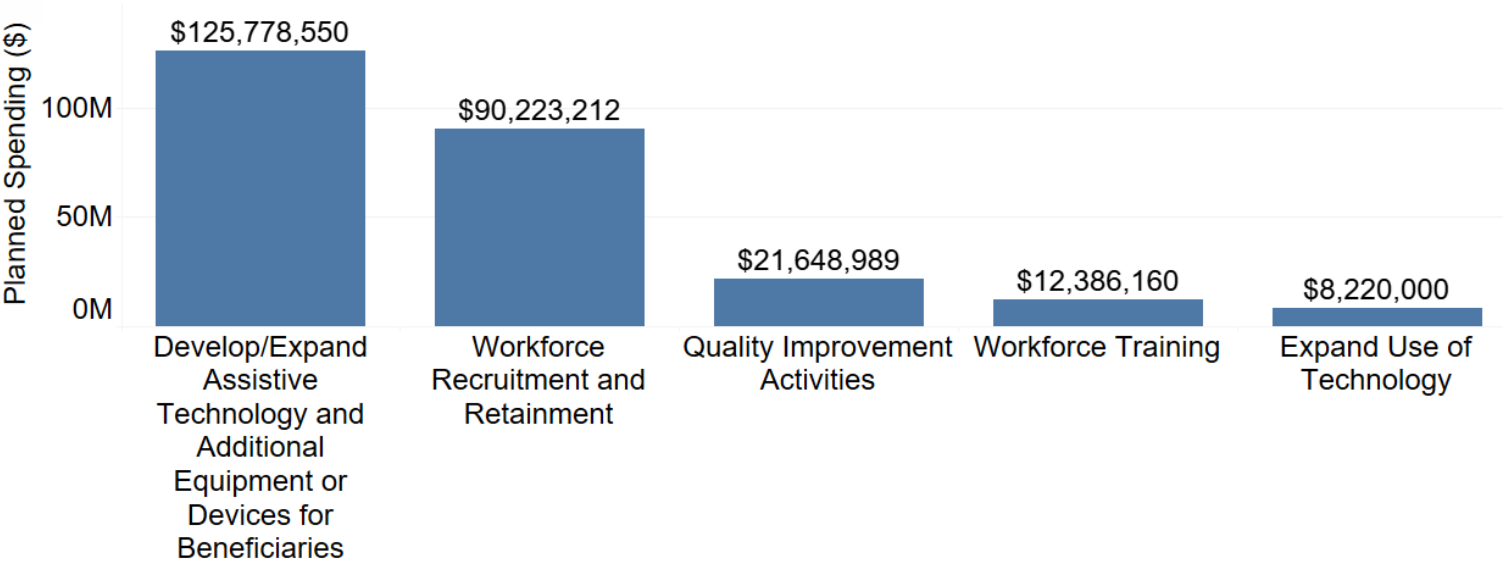
American Rescue Plan Section 9817 State Spending Plan Summary

Oklahoma

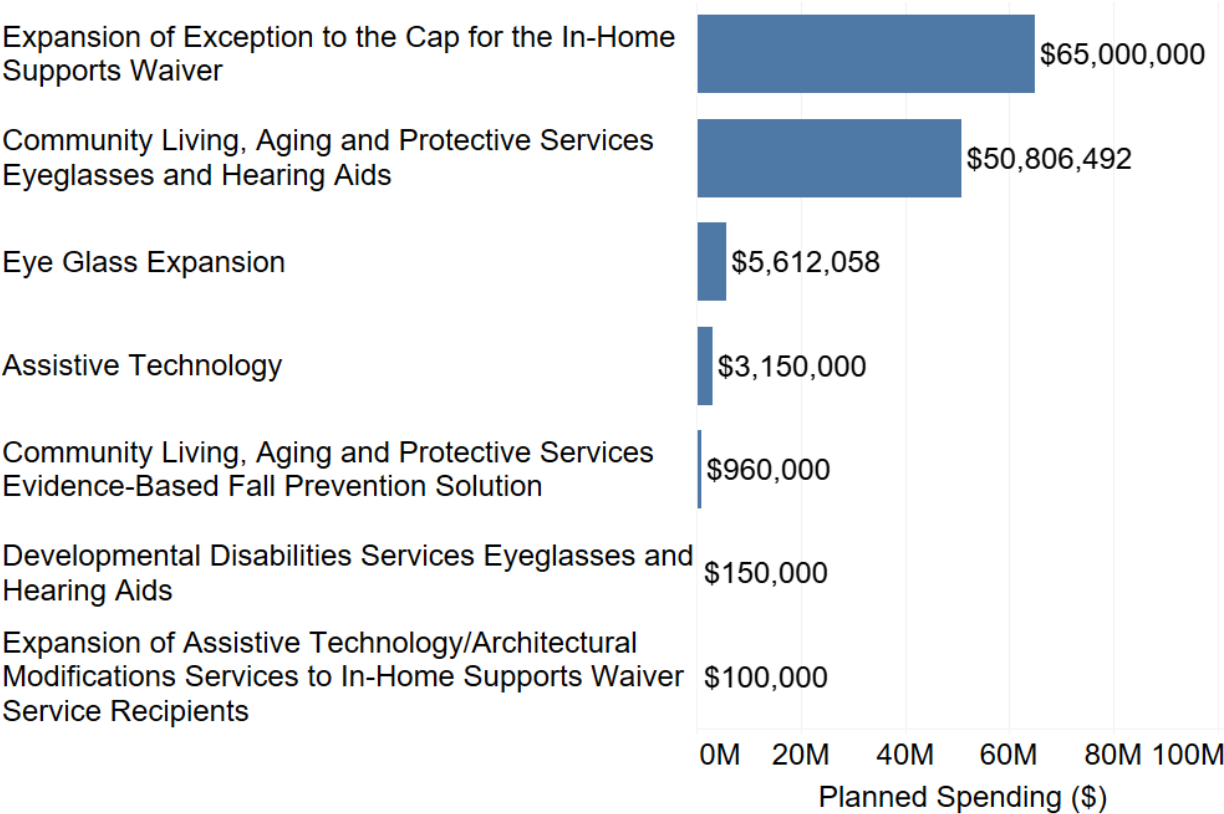
\$282.6M
total
planned
spending

49
activities
planned

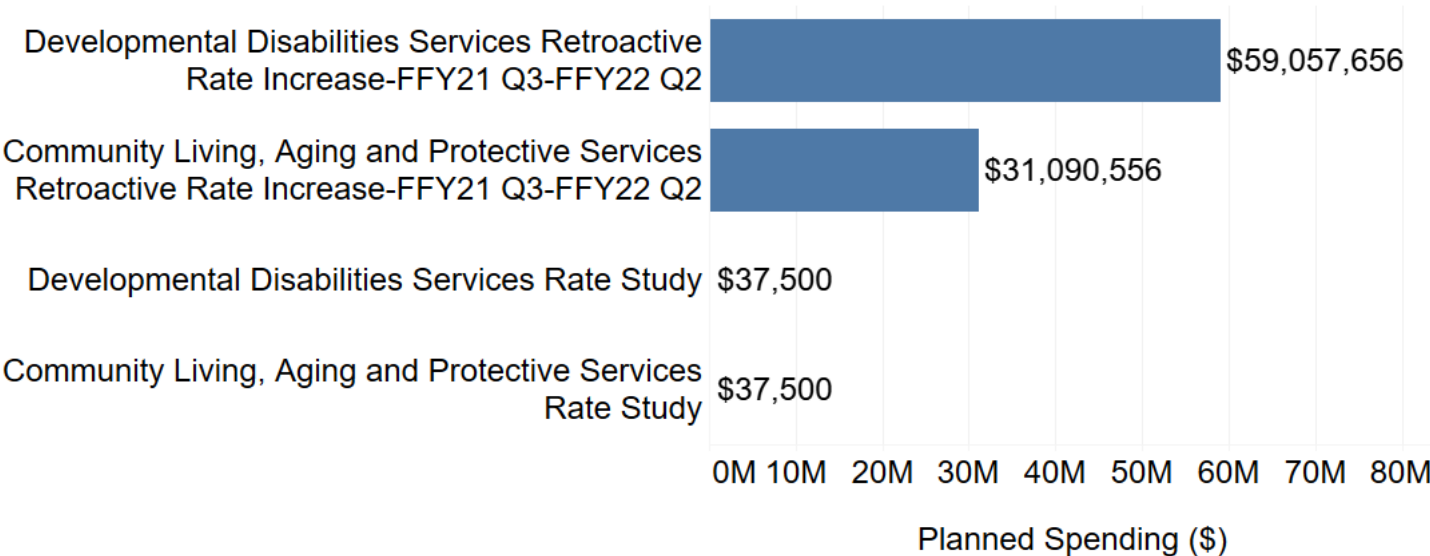
Top 5 Areas by Planned Spending



Assistive Technology and Additional Equipment or Devices for Beneficiaries
By Planned Spending



Workforce Recruitment and Retainment Activities
By Planned Spending



Activity Highlights

Oklahoma Department of Human Services (OKDHS) Community Living, Aging & Protective Services - Create a Digital Communication Network: Develop a Digital Communication Network between the ADvantage Waiver and the Oklahoma Hospital System whereby hospital case managers/discharge planners can communicate with waiver staff for referrals for waiver services, care coordination, and submission of questions or requests for guidance of specific member situations.

OKDHS Developmental Disabilities Services - Eliminating the Development Disabilities Services Waitlist: Expand services to persons with developmental disabilities who have been waiting up to 13 years to receive services through the OK Community Waiver, OK In-Home Supports Waiver for Children, and OK In-Home Supports Waiver for Adults. At the start of this initiative, there were 4,993 persons waiting for services. With ARP funding, 2,800 persons are projected to be moved from the waiting list to receiving ongoing services.

Program for All-Inclusive Care for the Elderly (PACE): Establish the PACE Enhancement Fund to compensate PACE providers for expenses related to the COVID-19 Public Health Emergency (incurred after April 1, 2021) and to strengthen and enhance the PACE program.

American Rescue Plan Section 9817 State Spending Plan Summary



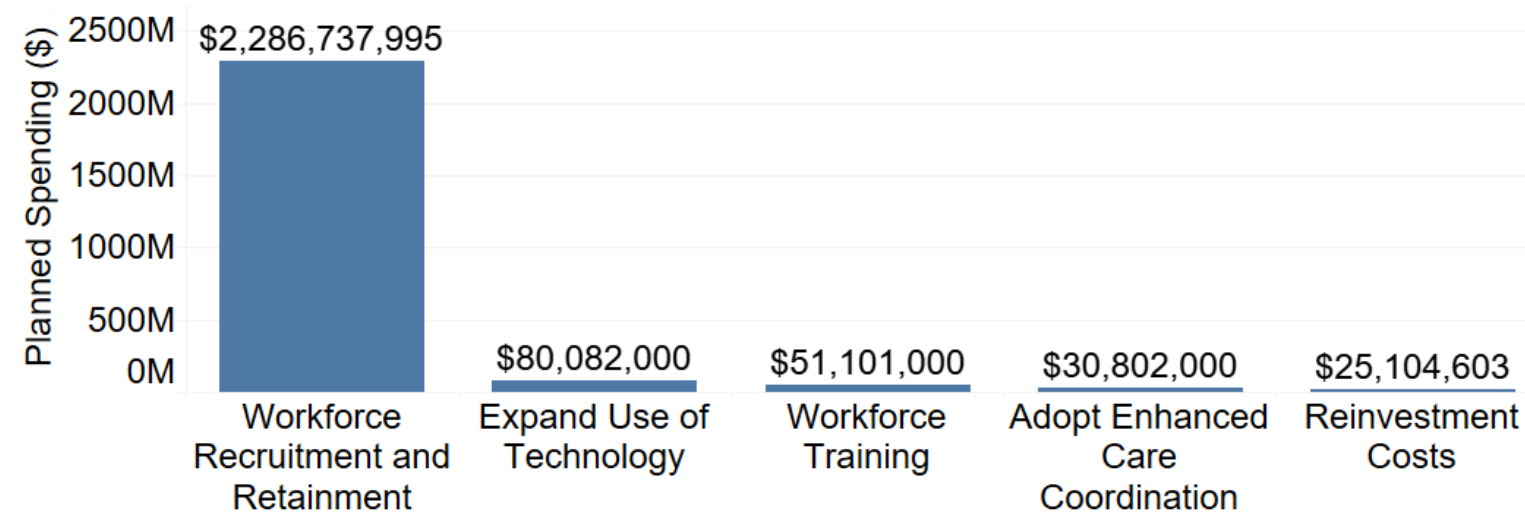
\$2.6B
total planned
\$487.9M
total reported
spending



50
activities
planned

Pennsylvania

Top 5 Areas by Planned Spending



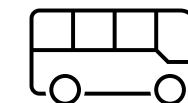
Pennsylvania is implementing workforce recruitment and retainment activities, including...

\$2.3B

*Total estimated planned spending,
including both state and federal
portions*



Increasing payment rates for
behavioral health providers



Providing payments to recruit and
retain non-emergency medical
transportation drivers

Activity Highlights

Increased Access to Home and Community Based Services (HCBS): Provide financial support to adult daily living providers to make physical, operational, or other changes to ensure services are delivered safely during the reopening of day centers.

Mental Health and Substance Use Disorder Services: Fund scholarships to expand the number of certified peer specialists to ensure a strong workforce in mental health service settings.

HCBS Provider Payment Rate and Benefit Enhancement: Engage in value-based purchasing initiatives with managed care organizations that achieve a reduction in missed nursing shifts for children's private duty nursing services.

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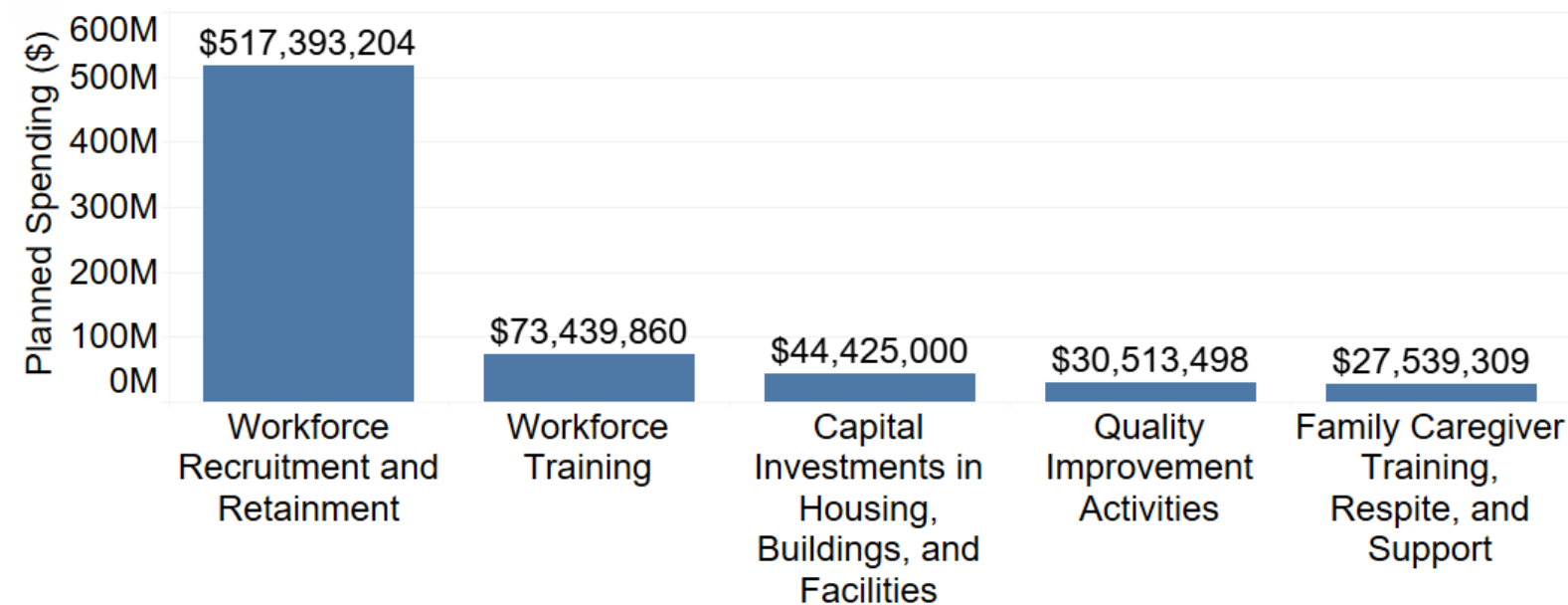
American Rescue Plan Section 9817 State Spending Plan Summary

Oregon

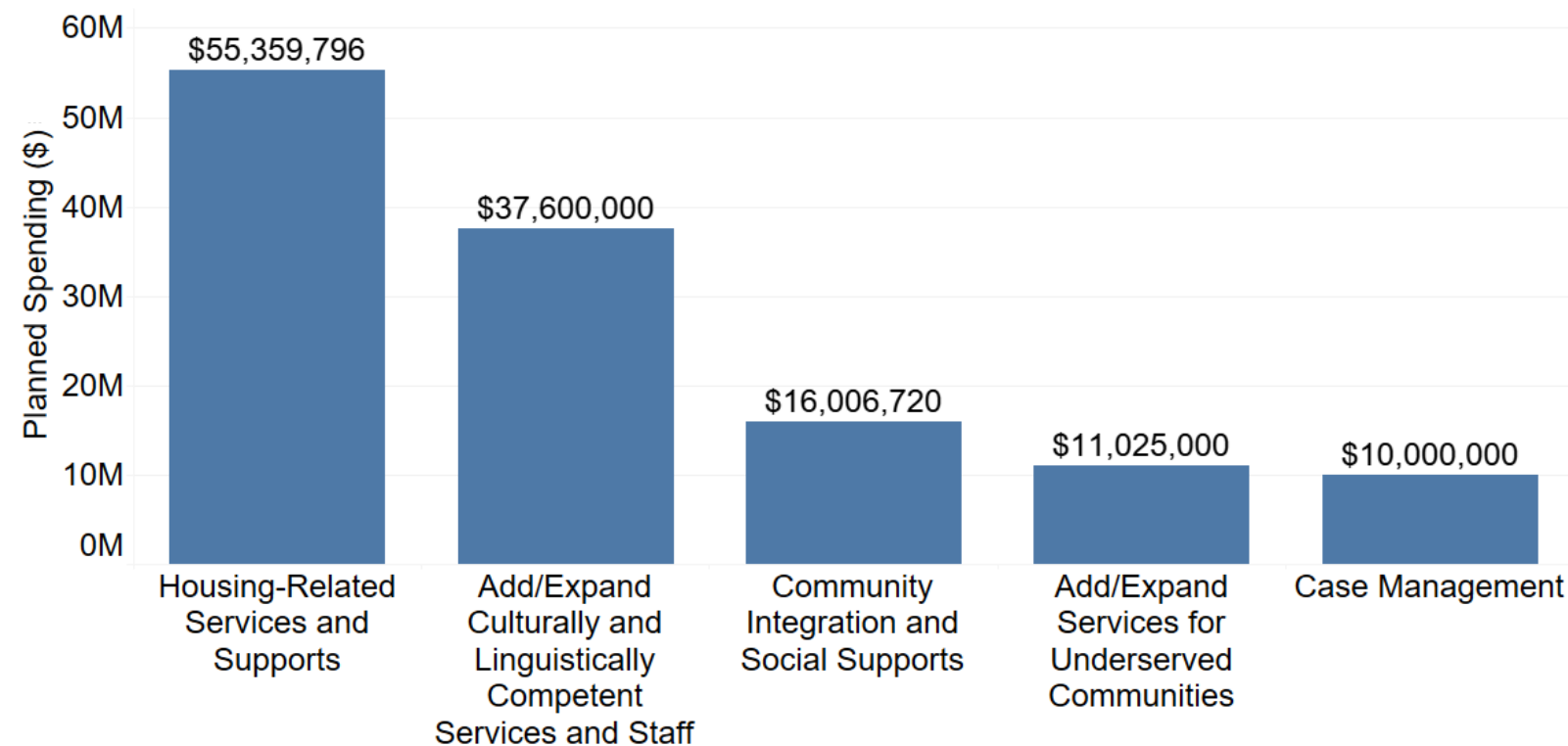

\$742.8M
total planned
\$222.7M
total reported
spending


98
activities
planned

Top 5 Areas by Planned Spending



Social Determinants of Health Planned Spending
By Type of Issue



Activity Highlights

Implementation of New Rate Models – Office of Developmental Disabilities Services: Supported the transition to new rate models in July 2022 for certain section 1915(k) and section 1915(c) services. This funding was to ensure that new rate models were fully funded to support services for individuals with intellectual/developmental disabilities, provider capacity, and direct care workforce.

Resources for Parents Receiving Home and Community-Based Services (HCBS) in Community-Based Settings – Oregon Health Authority: Develop resources, training materials, and ultimately specialized services for parents with behavioral health (BH) and substance use disorder (SUD) needs. This will include support in adaptation of child welfare assessments and practices to meet needs of children and parents with BH and SUD issues. The goal will be to help parents learn skills, so they are better able to parent their child/children.

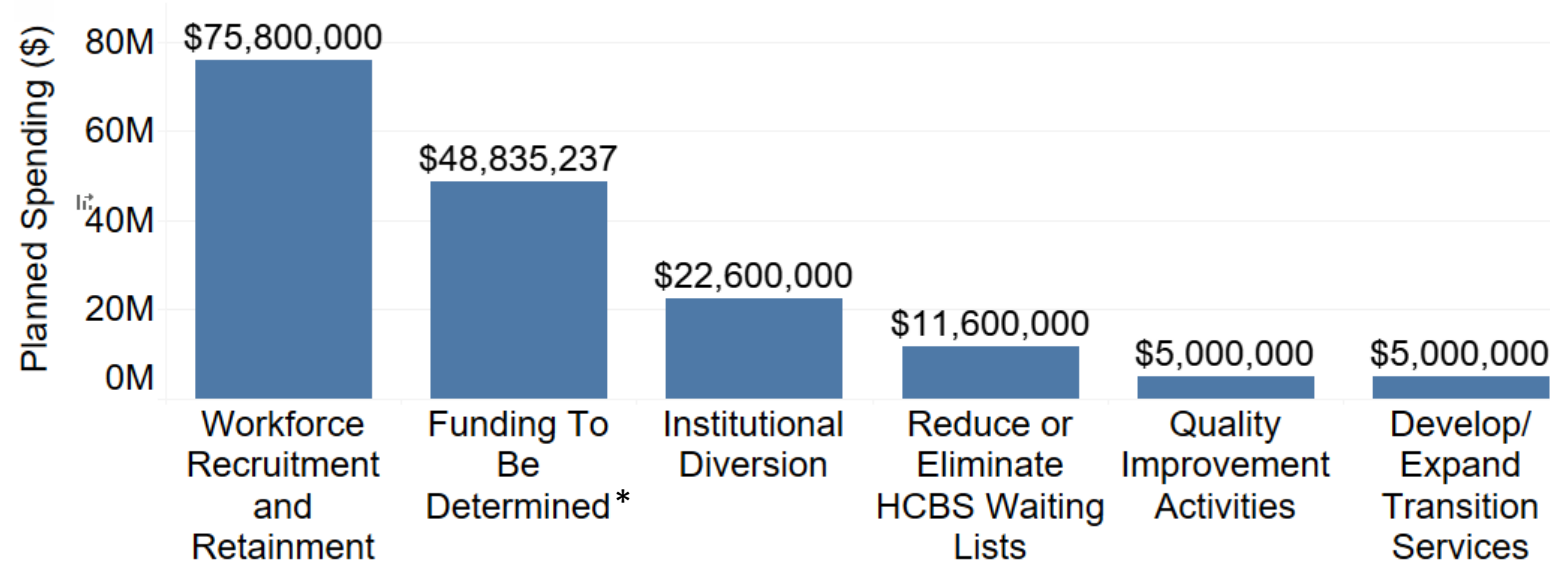
American Rescue Plan Section 9817 State Spending Plan Summary

Rhode
Island


\$157.9M
total planned
\$71.2M total
reported
spending


22
activities
planned

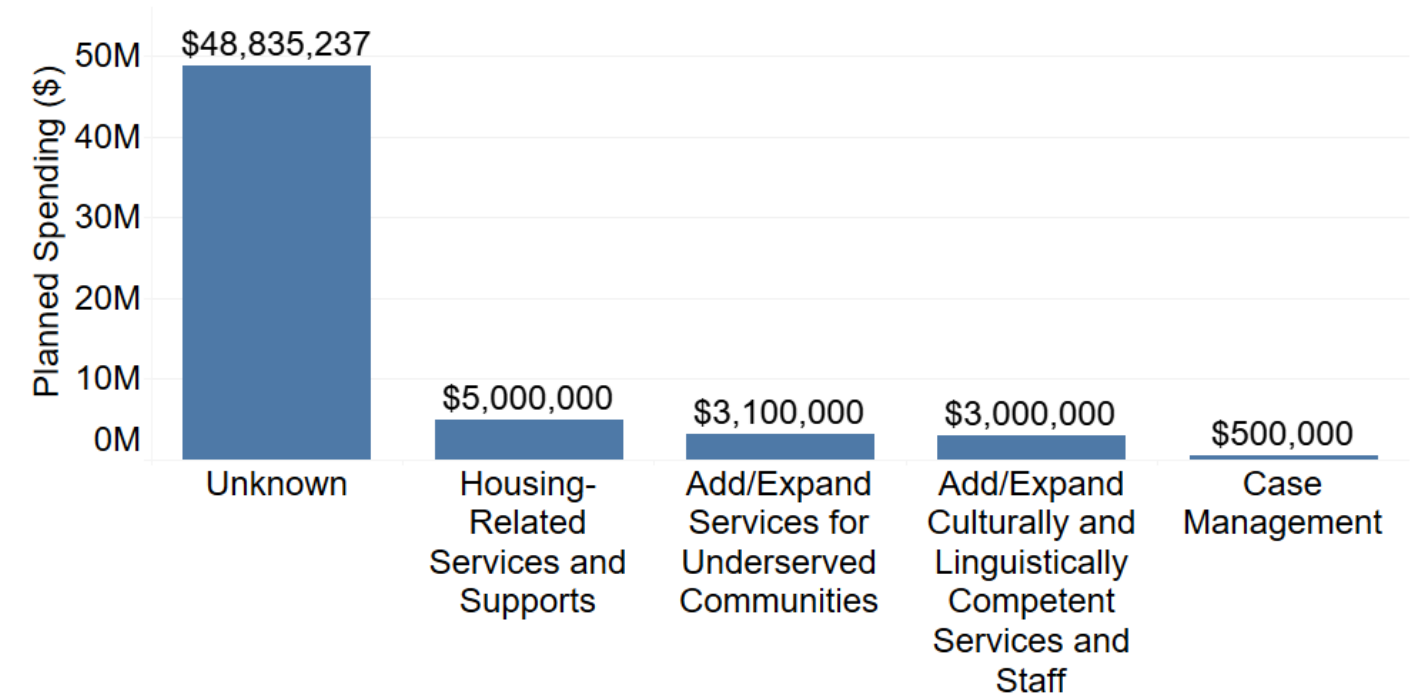
Top 5 Areas by Planned Spending



Six areas are included in this graph, as two (Quality Improvement Activities and Develop/Expand Transition Services) have the same planned spending amount.

* State is currently developing plans for the funding.

Social Determinants of Health Planned Spending
By Type of Issue



Activity Highlights

Oral Health Care to Home Health Beneficiaries Pilot: Develop training for home health professionals that will include general oral health information, mouth care and best practices, oral screening, and referral to dental treatment. This program will also formalize a Dental Provider and Home Health Partnership to increase dental care for homebound individuals. In addition, funding will be used to recruit, retain, and pilot the use of community-based public health dental hygienists through dental practice collaborative agreements to provide oral health services to Medicaid populations outside of the clinic setting.

Strengthening the System with a Single Point of Access: Expand existing 24/7 pediatric behavioral health triage and referral hotline into a central referral hub for children's behavioral health referrals.

Career Awareness & Outreach: Engage with higher education and other public and community-based workforce partners to promote home and community-based services (HCBS) training, education, jobs, and careers to unemployed and underemployed adults and in-school and out-of-school youth. Activities include career days, job fairs, internships, mentors, worksite visits, social media campaigns, and other initiatives to raise awareness of job and career opportunities in HCBS. Conduct a direct care worker outreach campaign strategy to promote this career pathway, develop a strong in-state pipeline, and promote workforce diversity.

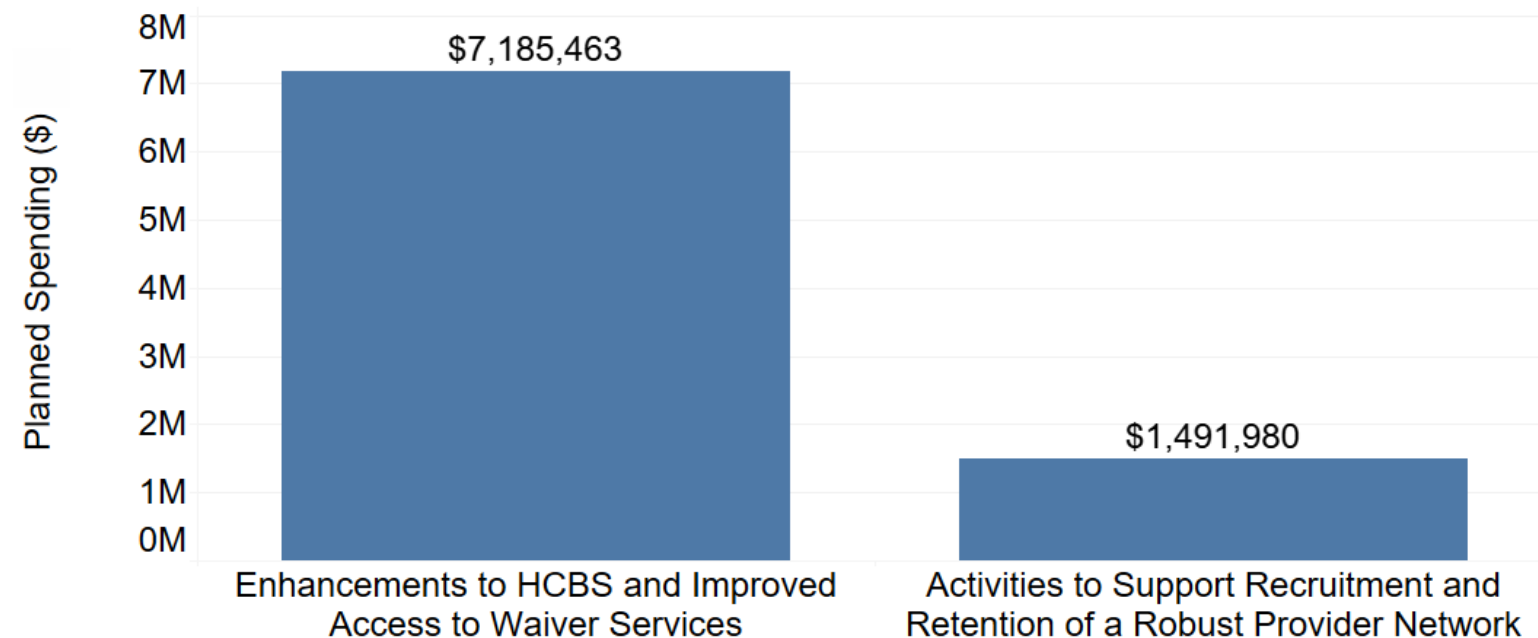
American Rescue Plan Section 9817 State Spending Plan Summary

South
Carolina


\$80M
total planned
\$8.7M total
reported
spending


2
activities
planned

Top 5 Activities by Reported Spending



Enhancements to HCBS and Improved Access to Waiver Services
activity plans to...

\$35M

Total estimated planned spending,
including both state and federal
portions



Increase HCBS program slots



Add new waiver services and
permanently increase reimbursement
rates for existing services



Increase supportive technology and
environmental modification availability

Activity Highlights

Activities to Support Recruitment and Retention of a Robust Provider Network - Workforce Support and Training: Provide one-time retention payments for direct service professionals and nursing staff, retainer payments for providers, and training and certifications; and strengthen assessments and person-centered training.

Enhancements to Home and Community-Based Services (HCBS) and Improved Access to Waiver Services: Increase the number of slots available through the state's HCBS programs. This will reduce current waiting lists for Intellectual Disability and Related Disabilities, Head and Spinal Cord Injury, and Community Supports waivers and reduce the potential for future waiting lists in community long-term care waivers. Add new services to HCBS waivers, update service definitions, and permanently increase provider reimbursement rates for several existing services. Update age requirements for certain waivers. These changes, along with using time-limited funding to providers to help the workforce pursue additional education and certification opportunities, will increase the state's provider capacity and better support waiver participants.

- Data and descriptions in these slides reflect details states provided in their respective FFY23 Q1 spending plans, except where noted. FFY23 Q1 spending plans were submitted to CMS beginning in July 2022. Subsequent changes to state activity plans and proposed spending in spending plan updates will be captured in future presentations.
- Planned and reported spending include both the state and federal share. Planned spending: All funding a state has proposed for the duration of ARP section 9817 activities to enhance, expand, or strengthen HCBS. Reported spending: Funding that state has spent to-date to implement proposed activities.
- Area: Category used to group activities. Activity: Titles of initiatives states described in their spending plans. Type/Method/Issue: Further categorization of an activity or modality.
- Note that planned spending dollar amounts are not mutually exclusive and may duplicate between main and/or sub-categories because some states propose activities that fall into multiple categories and sub-categories, and some states proposed multiple activities under a single category or sub-category but did not provide cost information for each discrete activity. Therefore, states, activities, and/or planned spending dollar amounts can be counted more than once and may not always sum to an unduplicated total.

American Rescue Plan Section 9817 State Spending Plan Summary



\$127.3M
total planned
\$94.4M total
reported
spending*



1 activity
implemented

South Dakota

**The total planned spending amount reflects corrected information that the state subsequently reported to CMS.*

South Dakota issued **supplemental payments to providers** to support...

\$94.4M

Total reported spending, including both state and federal portions

Workforce investments: One-time worker compensation increase, improving worker benefits



Equipment and supply purchases related to:

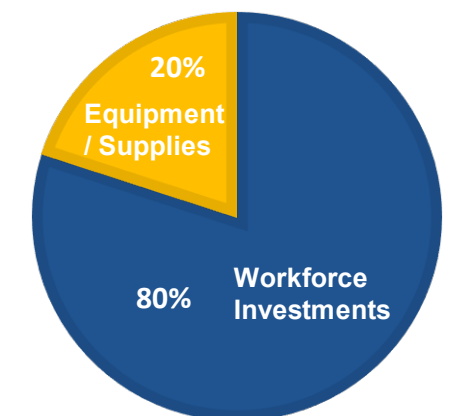


COVID-19 testing and infection control



Telehealth and assistive technology for providers

...while the majority of spending was on activities to **retain and develop the workforce**



Activity Highlights

Enhancement of Home and Community-Based Services (HCBS) Infrastructure: Provide specialized payments for in-state providers.

- Eighty percent (80%) of the total payment was for direct care workforce activities. Direct care workforce activities may include one-time compensation payments, including temporary shift differentials; a one-time compensation adjustment to direct care staff as a method of retention; other types of retention incentives such as paid family leave and paid sick leave; and activities to recruit direct care workers.
- Twenty percent (20%) of the total payment was for equipment and supplies. Equipment and supplies may include expenses related to COVID-19 related equipment, testing supplies, and infection control; telehealth equipment and assistive technology for providers; and other supplies and equipment that enhance the delivery of HCBS.

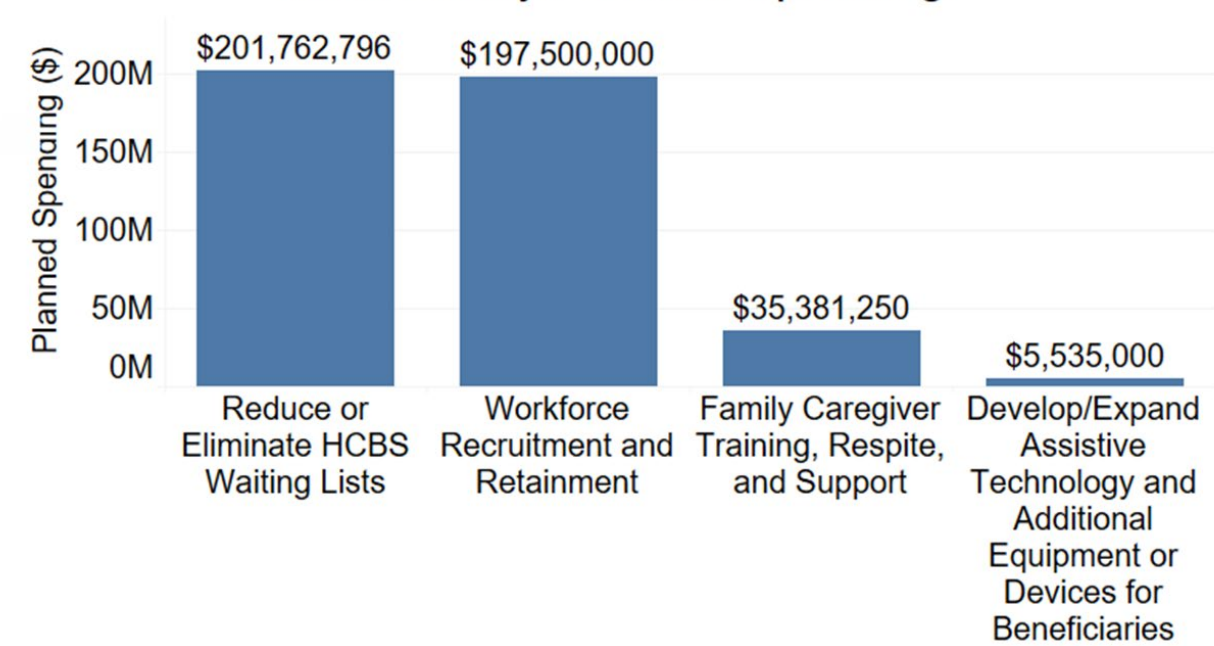
American Rescue Plan Section 9817 State Spending Plan Summary

Tennessee

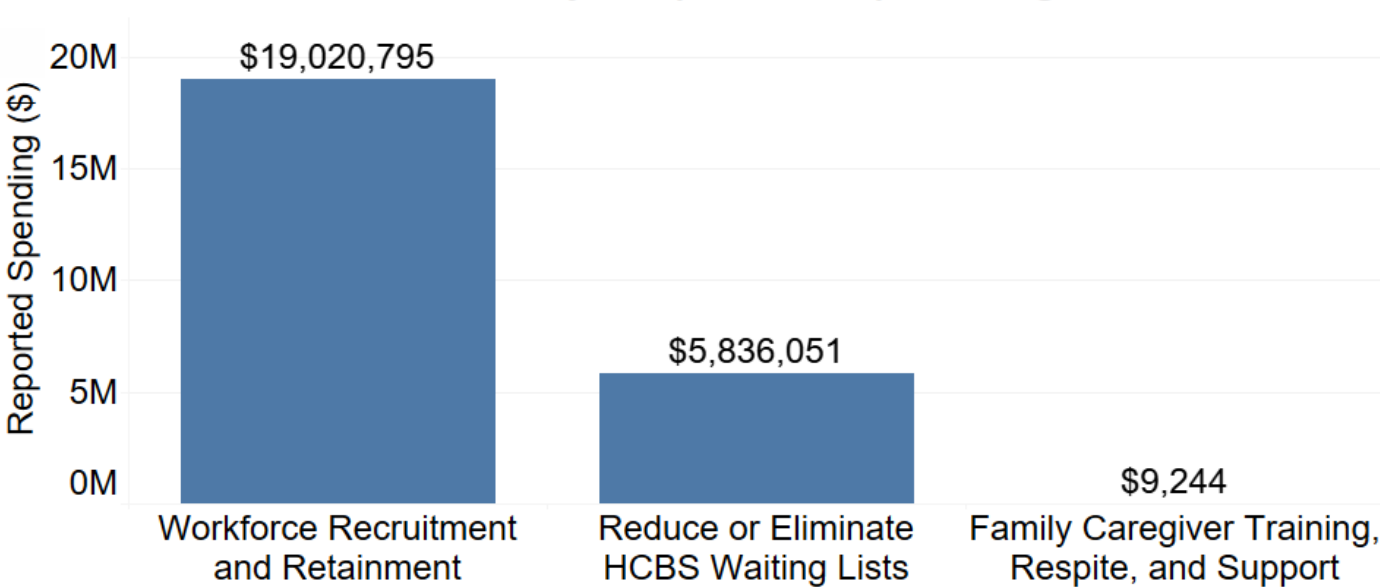
\$440.2M
total planned
\$24.9M total
reported
spending

6
activities
planned

All Areas by Planned Spending



All Areas by Reported Spending



Workforce Recruitment and Retainment Activities that Propose to Update Rates By Planned Spending

Method	Activity Title Per Spending Plan	
Update Rates Based on New Living Wage and/or Benefit Costs to Direct Service Workers	Investments in the HCBS Workforce Capacity and Competency-Wage Increase	\$137,500,000
One-Time Pay Increases and/or Bonuses	Investments in the HCBS Workforce Capacity and Competency-Workforce Development Incentives	\$50,000,000
	Investments in HCBS Provider Capacity and Competency to Deliver Desired Outcomes-Referral Incentives	\$10,000,000

Activity Highlights

Wage Increase for Frontline CHOICES and Employment and Community First (ECF) CHOICES Home and Community-Based Services (HCBS) Workforce: Make targeted rate increases in CHOICES and in ECF First CHOICES that have a direct care component, to better align rates of reimbursement for comparable services. Effective July 1, 2021, an additional \$48.6 million in new state appropriations was approved for increases in direct service provider wages to \$12.50 per hour.

Employment and Community First CHOICES Referral (Waiting) List: Serve 2,000 individuals on the Employment and Community First CHOICES waiting list who are actively seeking to receive HCBS through the program. As of June 15, 2022, 921 of the individuals on the referral list have been enrolled in ECF CHOICES.

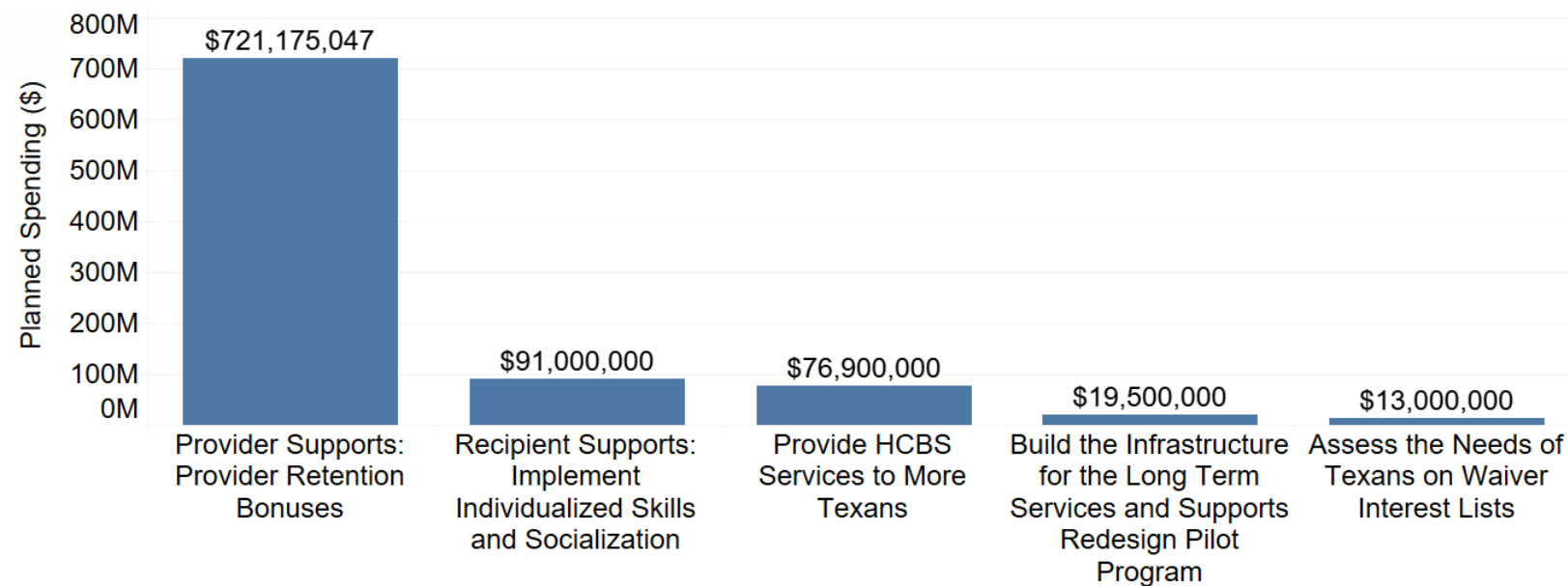
American Rescue Plan Section 9817 State Spending Plan Summary

Texas

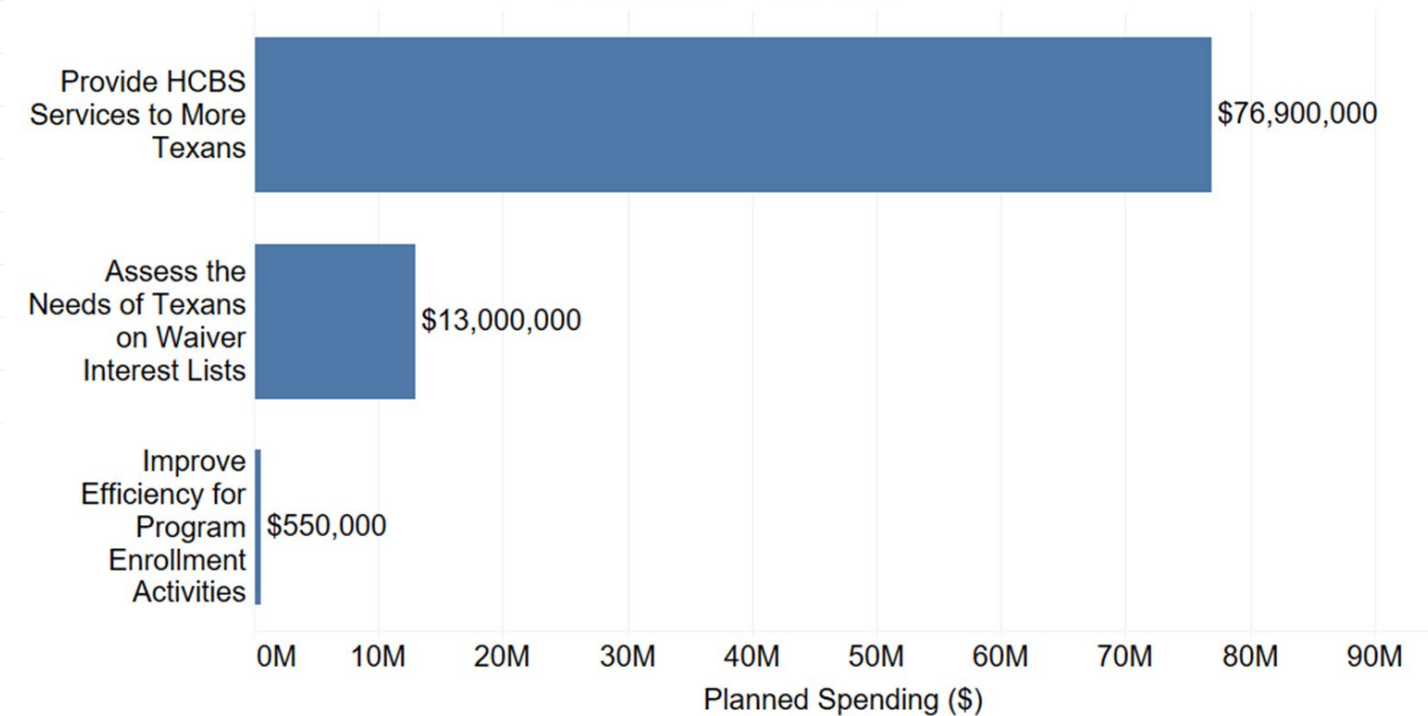
\$964.5M
total
planned
spending

22
activities
planned

Top 5 Activities by Planned Spending



Activities to Reduce or Eliminate HCBS Waiting Lists
By Planned Spending



Activity Highlights

Provider Retention Bonus Program: Provide time-limited reimbursement increases aimed at strengthening and stabilizing the home and community-based services (HCBS) workforce. Providers and provider agencies will be required to use at least 90% of these funds for one-time financial compensation for their direct care workforce. Providers will be prohibited from using the funds for other methodologies that will result in future reductions in hourly wages when the temporary reimbursement increases are discontinued.

Recipient Supports: Implement Individualized Skills and Socialization: Create a new benefit available in certain section 1915(c) waiver programs called individualized skills and socialization. This service will provide on and off-site activities focused on: developing skills; gaining greater independence; socialization; community participation; or an individual's future employment or volunteer goals identified in their person-centered plan.

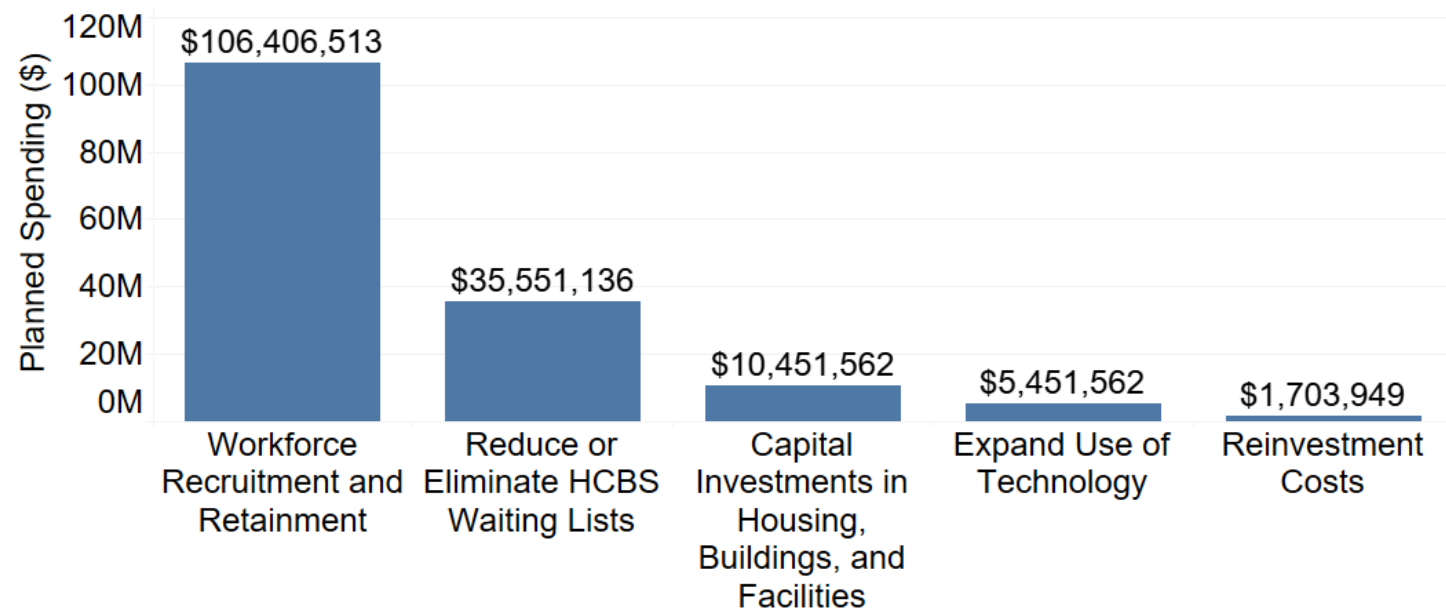
American Rescue Plan Section 9817 State Spending Plan Summary

Utah

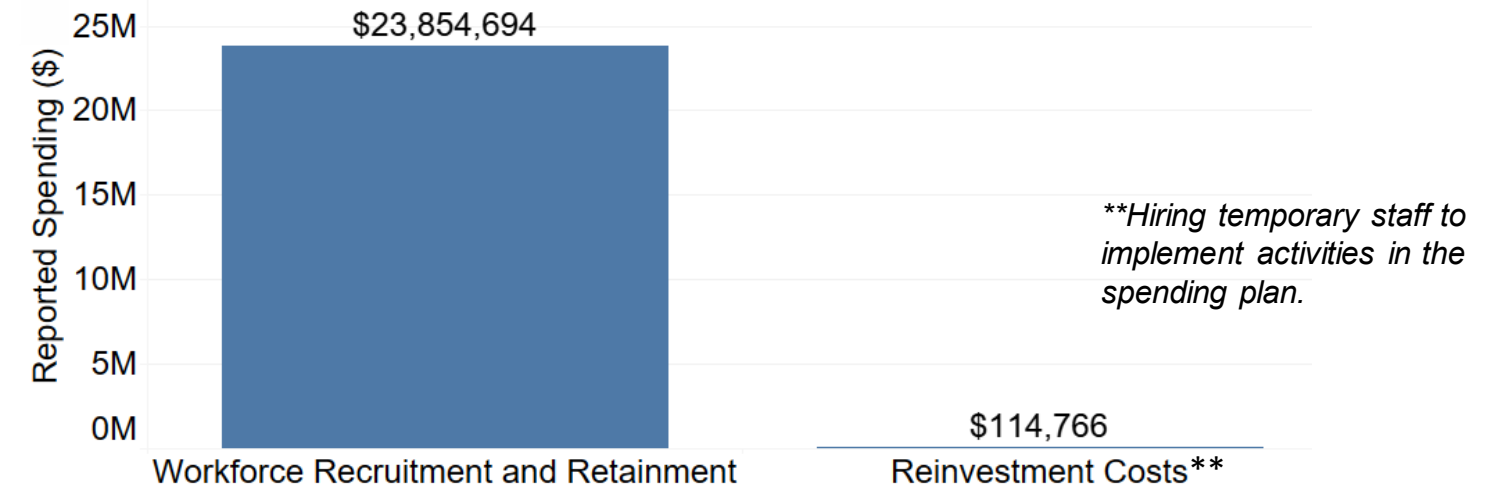
\$157.7M
total planned
\$24M total
reported
spending

11
activities
planned

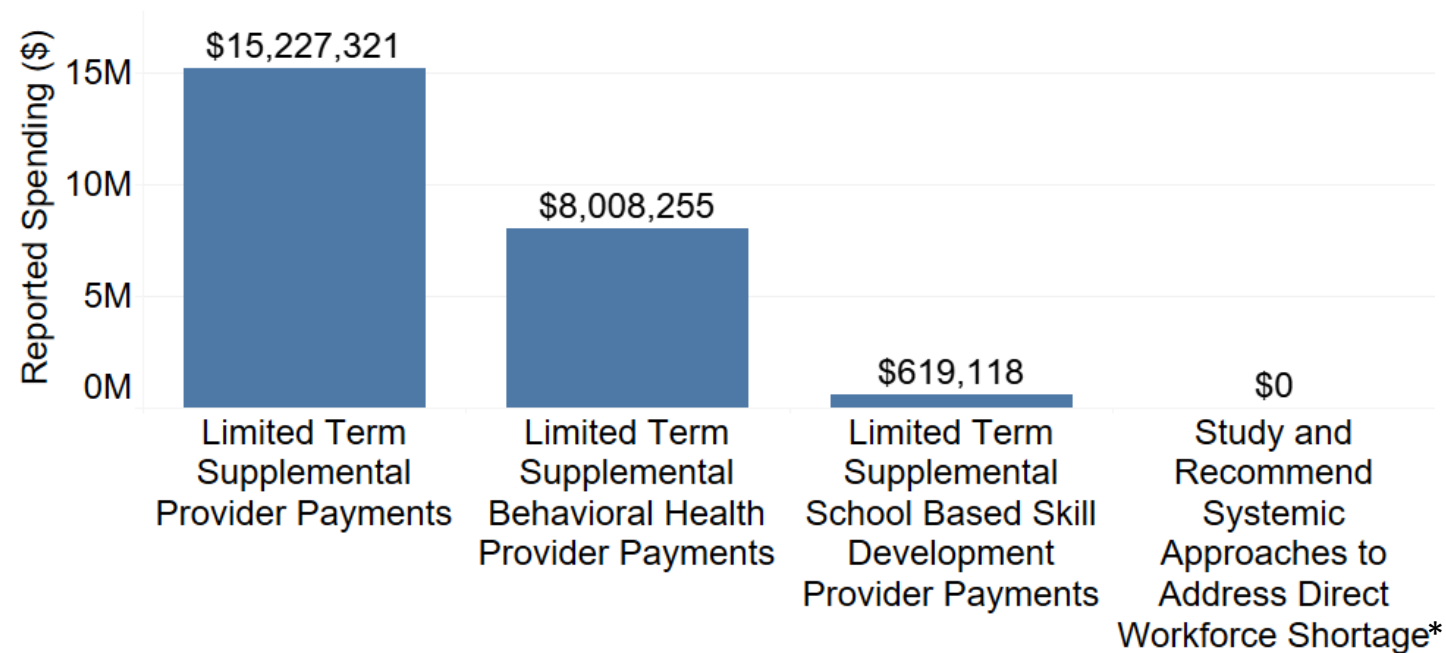
Top 5 Areas by Planned Spending



All Areas by Reported Spending



Workforce Recruitment and Retainment Activities
By Reported Spending



* No spending as of FFY23 Q1.
Implementation planned for upcoming quarters.

Planned Activities– Highlights

Limited term supplemental provider payments program: Make limited-term supplemental payments to home and community-based services (HCBS) providers. Eligibility for quality incentive payments will require providers to attest to meeting certain quality/utilization requirements, such as: supporting direct-care workforce/family caregivers, supporting other COVID-19 related response/expenses, and incentivizing COVID-19 vaccination of HCBS staff and waiver participants. The state intends for providers of all services in Utah's section 1915(c) waivers to receive the limited-term supplemental payments. The enhanced funding is to make temporary quarterly supplemental payments to providers equal to 5% of the total funds reimbursed to providers of all services in Utah's section 1915(c) waivers in the previous quarter.

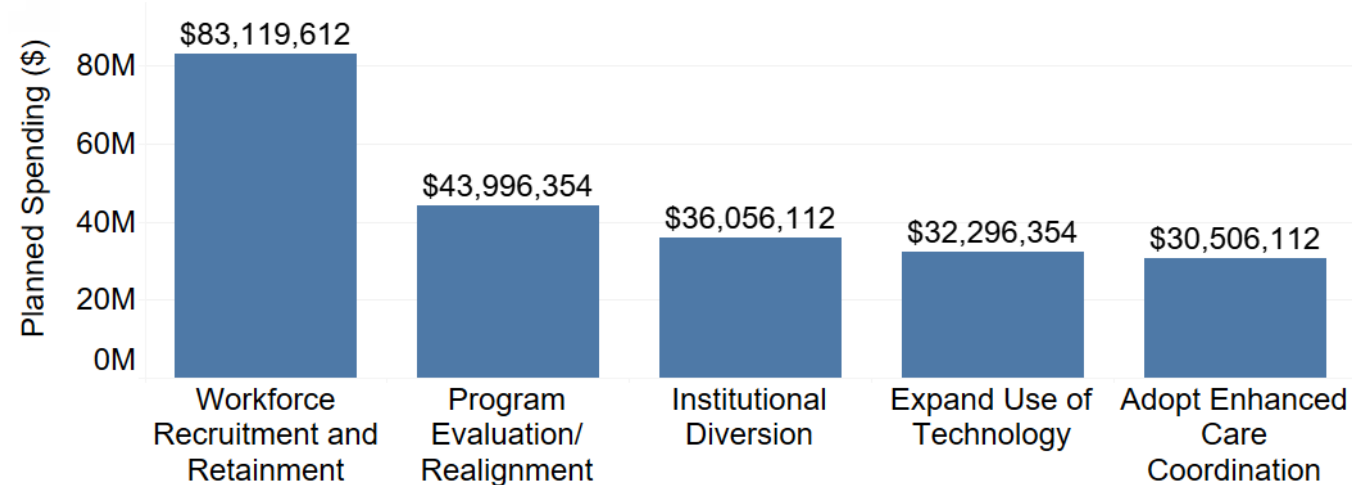
American Rescue Plan Section 9817 State Spending Plan Summary

Vermont

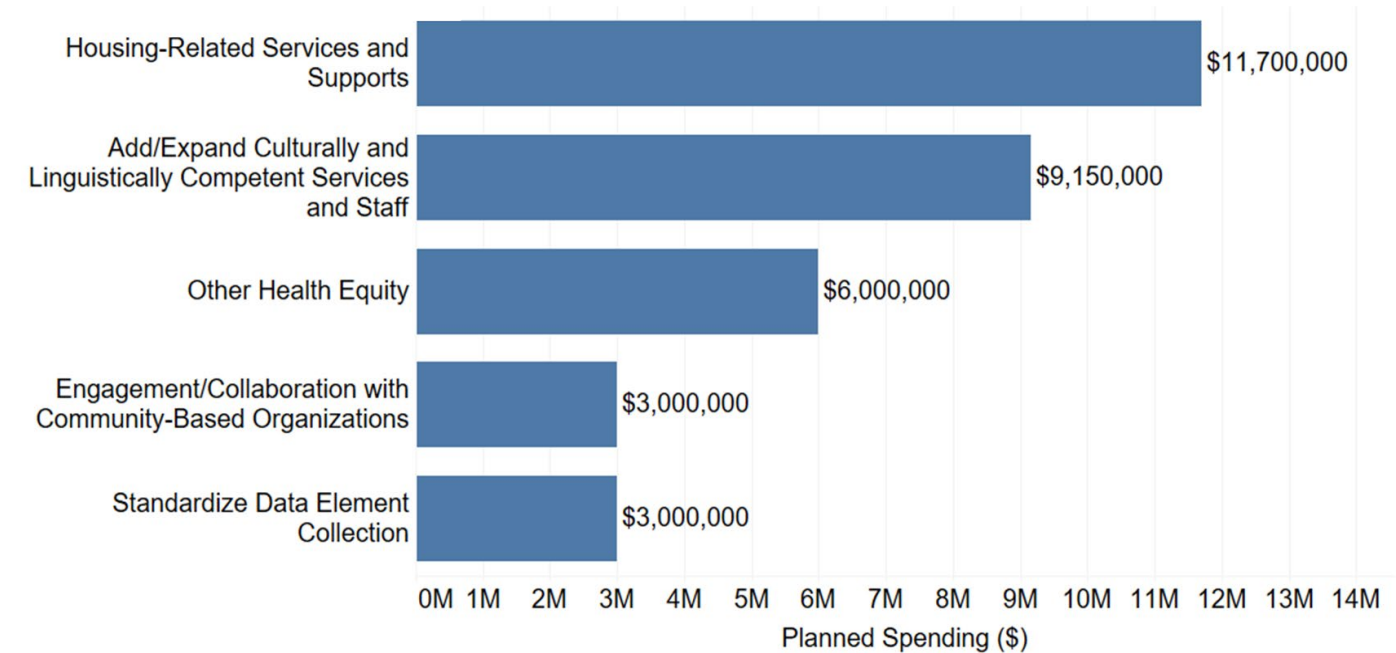
\$154.9M
total
planned
spending

12
activities
planned

Top 5 Areas by Planned Spending



Social Determinants of Health Planned Spending by Issue Type



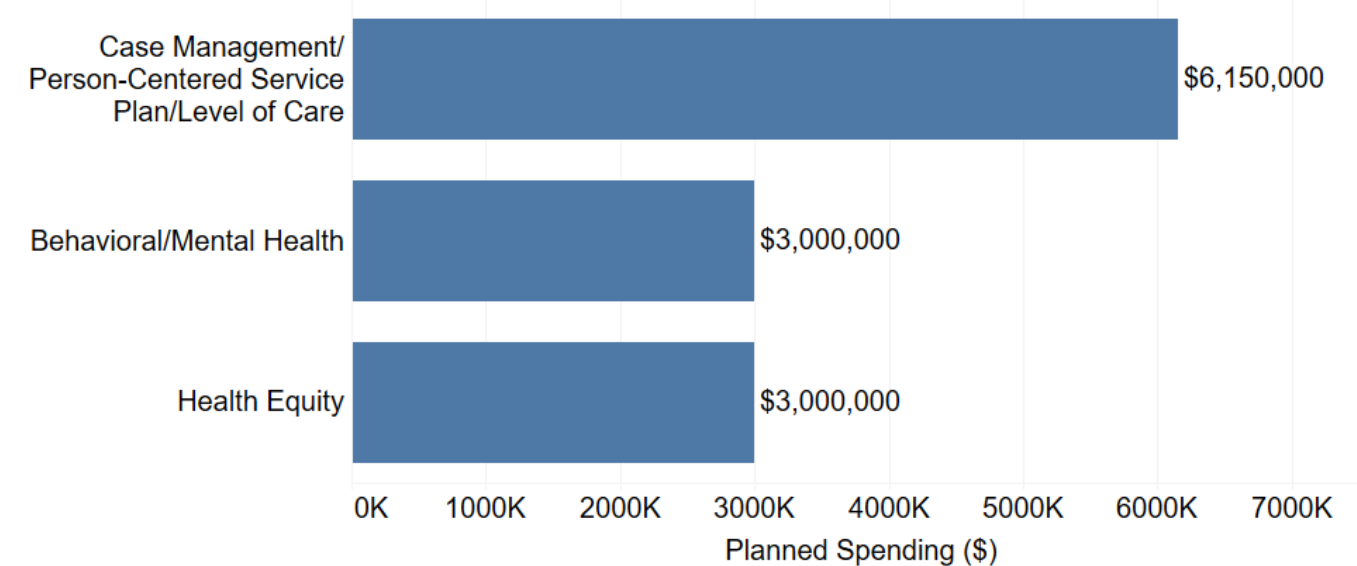
Activity Highlights

Home and Community-Based Services (HCBS) Provider Rate Increases: Provide 3% rate increase to mental health, developmental disabilities, Brain Injury Program, Choices for Care, and the substance use treatment preferred provider network providers and a \$1.50 per day increase to Assisted Community Care Services rates to address increased wage and operating costs.

Innovation Grant to Provide Alternatives to Emergency Room Mental Health Crisis Care: Enable the development and expansion of five models of community-based crisis care to provide alternatives to the emergency room for Vermonters in crisis. The services offered under these models could be covered under the rehabilitative services benefit and are intended to be less than 24-hour outpatient stays.

Medicaid Data Aggregation and Access Program (MDAAP): Establish the MDAAP, an incentive program targeting Medicaid HCBS, mental health, and substance use disorder treatment providers that require electronic data record technology. Providers can use incentives to purchase data systems and connect to the Vermont Health Information Exchange, which will enable providers to inform the state's management of the Medicaid program, better serve Medicaid enrollees, and participate in Medicaid-driven value-based payment models.

Planned Spending by Training Topic



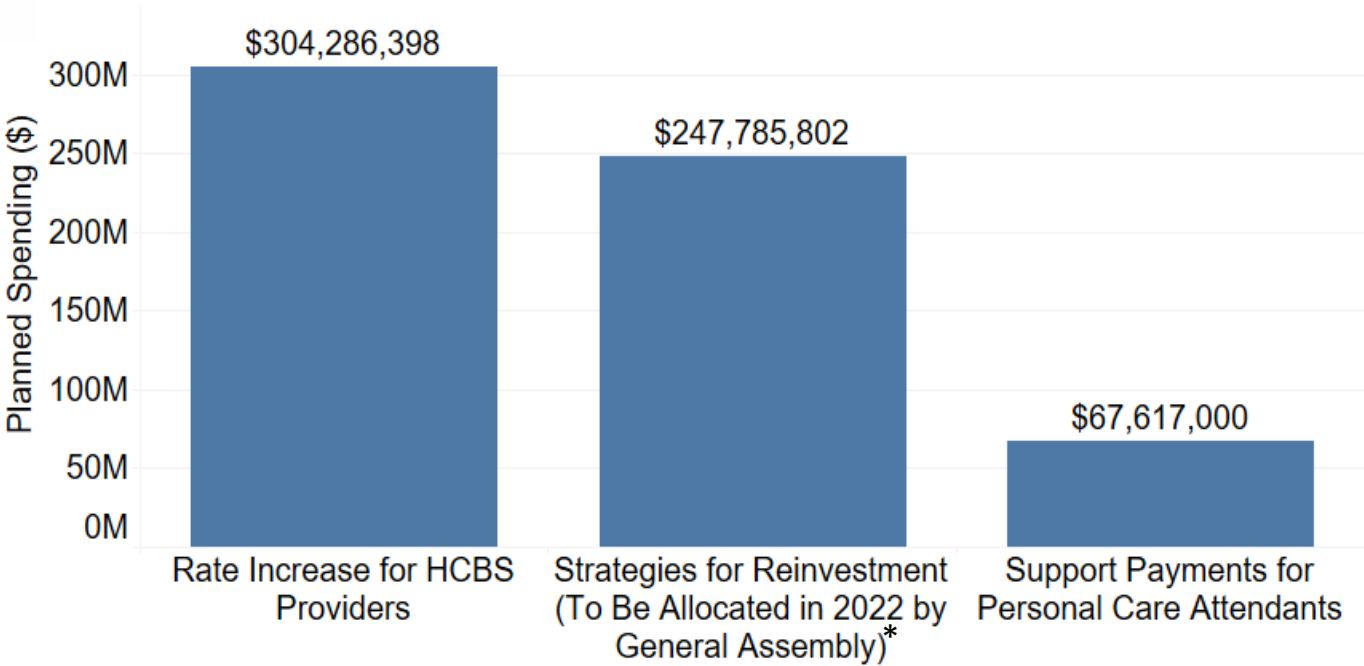
American Rescue Plan Section 9817 State Spending Plan Summary

Virginia

\$619.7M
total
planned
spending

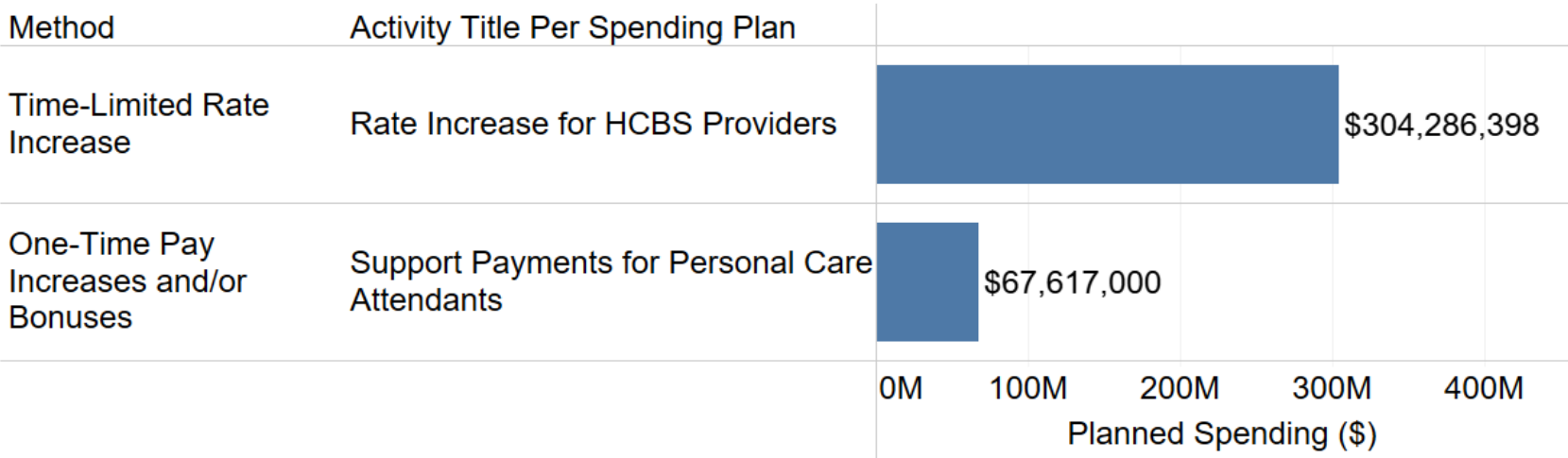
3
activities
planned

All Activities by Planned Spending



**Strategies for Reinvestment (To be Allocated in 2023 by General Assembly) is a “to be determined” activity category, denoting planned spending determinations will be made at a later date.*

Workforce Recruitment and Retainment Activities that Propose to Update Rates
By Planned Spending



Activity Highlights

- Rate Increase for Home and Community-Based Services (HCBS) Providers:** Temporarily increased rates by 12.5% for all HCBS services, except for agency and consumer directed personal care, respite, and companion services in the HCBS waivers and Early Periodic Screening, Diagnosis and Treatment program which received a 12.5% rate increase under Item 313 SSSS. 3. of the 2021 Appropriations Act passed by the Virginia General Assembly. The temporary rate increase covered services provided from July 1, 2021 to June 30, 2022.
- Support Payments for Personal Care Attendants:** Provided \$1,000 support payment to all personal care attendants who provided services to Medicaid members between July 1, 2021 and September 30, 2021. This payment is intended to incentivize retention in the personal care workforce and strengthen personal care services within Medicaid HCBS.

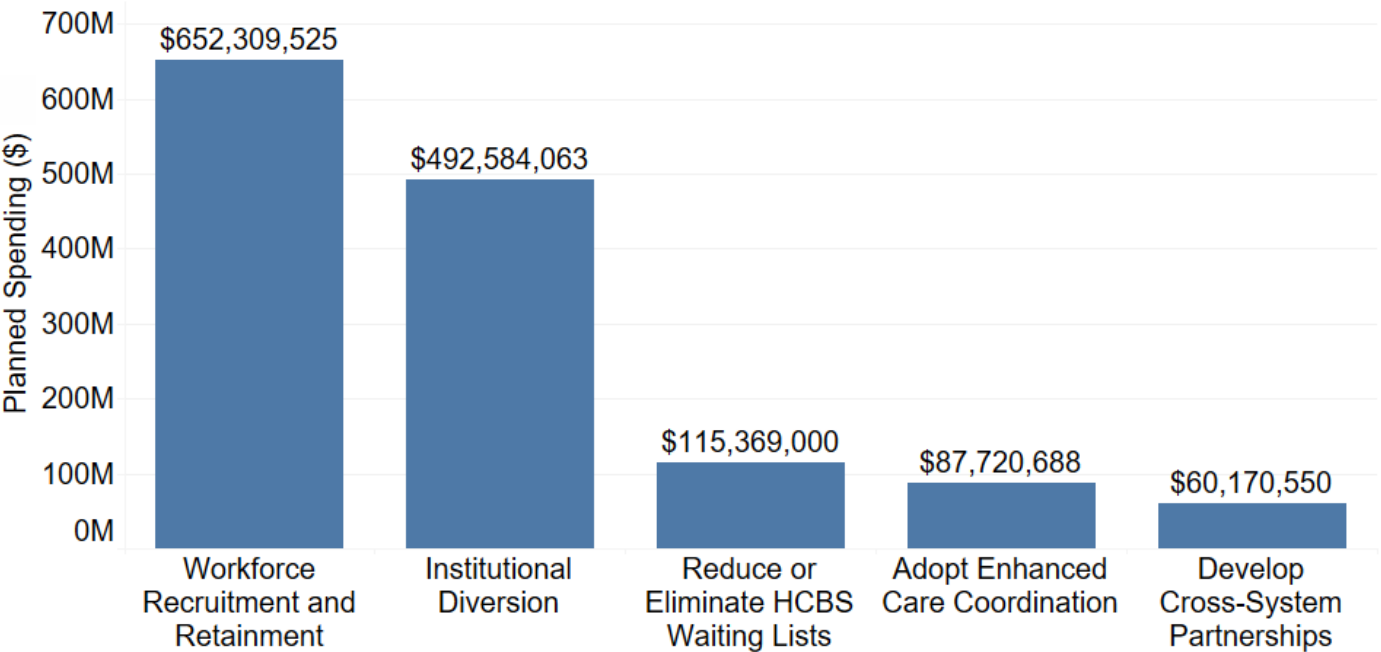
American Rescue Plan Section 9817 State Spending Plan Summary

Washington

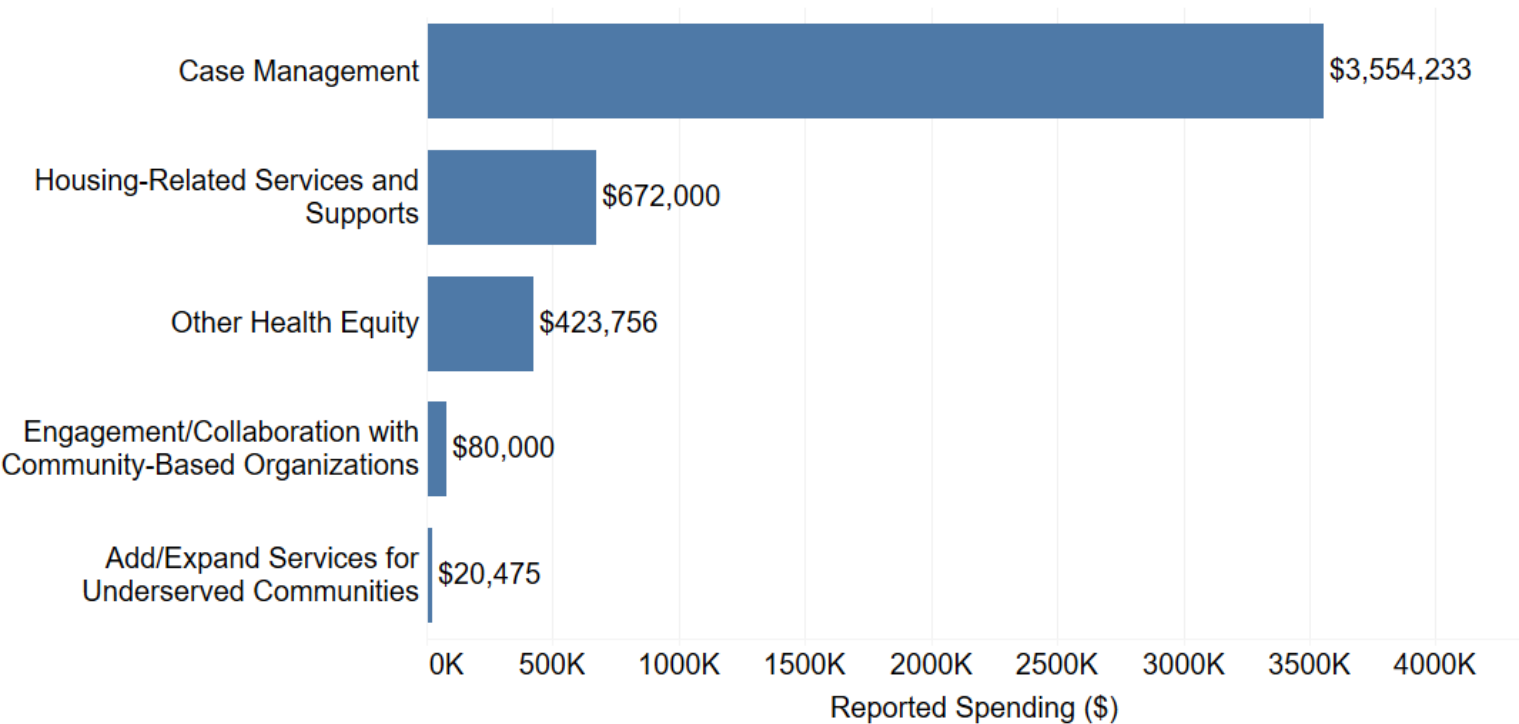
\$1.5B
total planned
\$27.9M total
reported
spending

63
activities
planned

Top 5 Areas by Planned Spending



Social Determinants of Health Reported Spending by Issue Type



Activity Highlights

Substance Use Disorder (SUD) Family Navigators: Fund grants for family navigators, who will work to advance the peer workforce and increase the knowledge and skills of peer support providers in working with adults, families, and youth experiencing SUD. This project provides a 16-hour online training for parents, family members, and caregivers, as well as a Train the Trainer event that focuses on training roles for young adults with lived experience.

High School Transition Students: Support youth with developmental disabilities transitioning out of public schools to receive employment and day services. Capacity expansion of the Basic Plus waiver will support individuals exiting high school transition programs to have long-term employment supports.

Adult and Youth Mobile Crisis Teams: Increase local behavioral health mobile crisis response team capacity and ensure each region has at least one adult and one children and youth mobile crisis team that can respond to calls coming into the 988-crisis hotline. The state will ensure creation of a minimum of six new children and youth mobile crisis teams, and one children and youth mobile crisis team in each region. Additionally, the state will establish standards in contracts with managed care organizations and behavioral health administrative service organizations for the services provided by these teams.

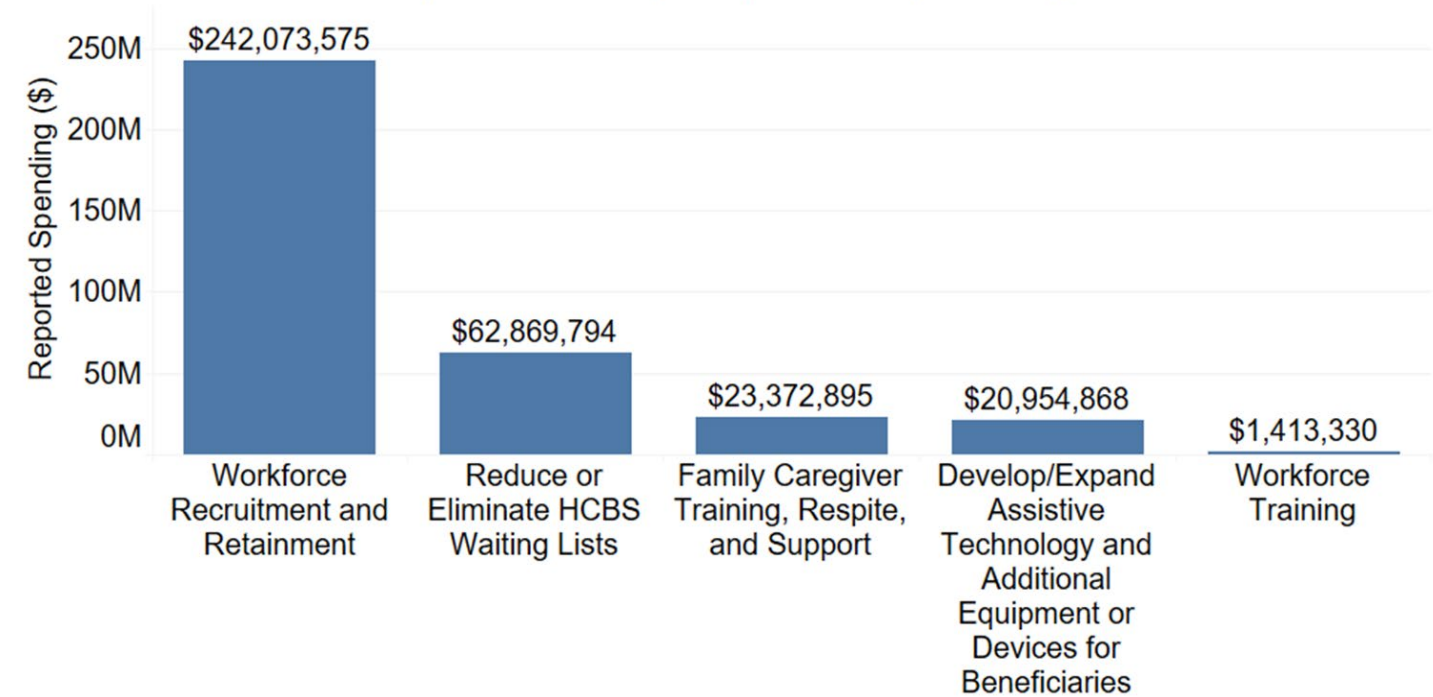
American Rescue Plan Section 9817 State Spending Plan Summary

West Virginia


\$356M
total planned
\$243.3M
total reported
spending


14
activities
planned

Top 5 Areas by Reported Spending

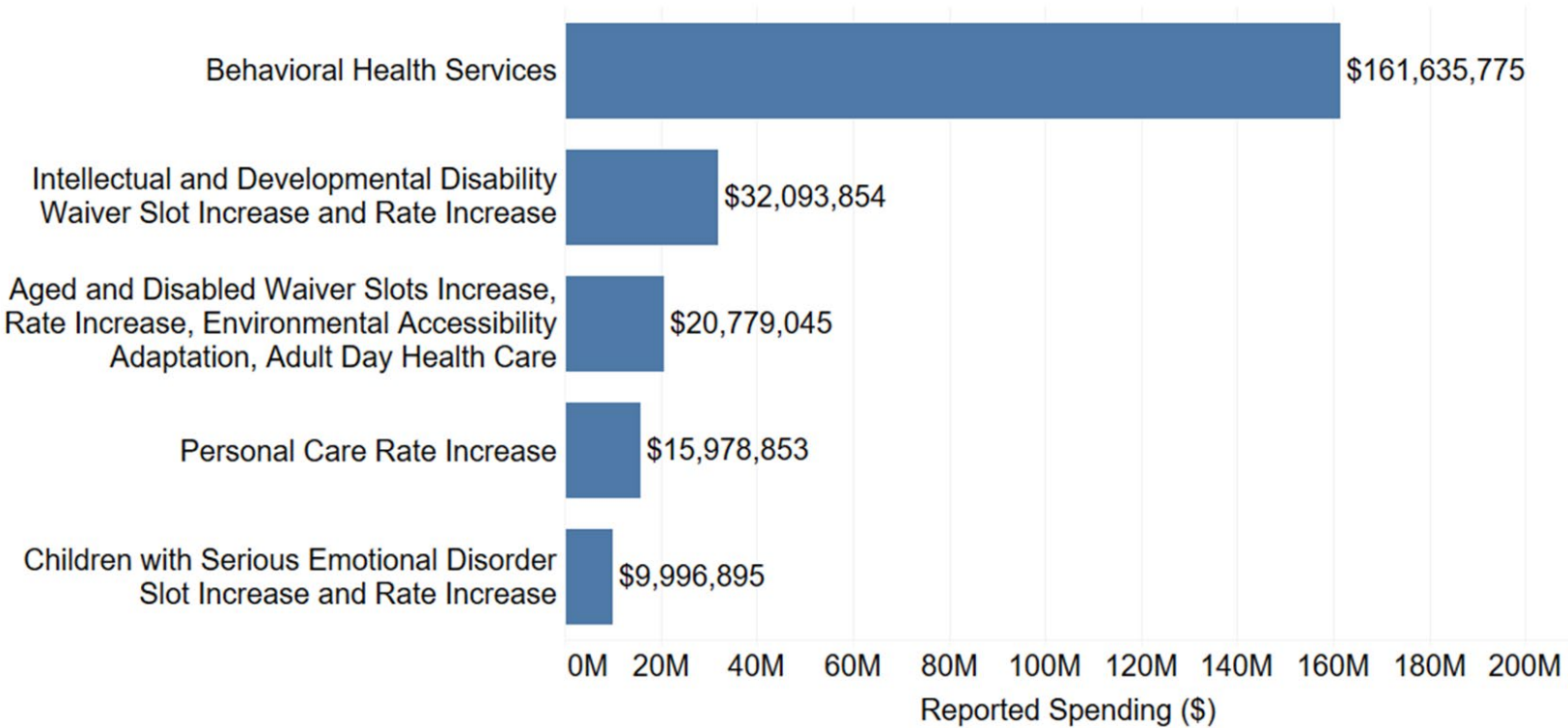


Activities To Reduce or Eliminate HCBS Waiting Lists

Activity Titles from Spending Plan	# of Slot Increase	Reported Spending (\$M)*
Intellectual and Developmental Disability Waiver	50 first year, 100 thereafter	\$32.1M
Aged and Disabled Waiver	300	\$20.8M
Children with Serious Emotional Disorder Slot and Rate Increase	200	\$10.0M
Total Reported Spending-to-date:		\$62.9M

* Activities include multiple initiatives therefore reported spending may include additional spending outside of slot increase efforts, such as provider rate increases.

Top 5 Workforce Recruitment and Retainment Activities
By Reported Spending



Activity Highlights

Intellectual and Developmental Disabilities Waiver (IDDW) Rate Increase: Add additional 50 slots to the IDWW and increase the rates by 50%, with the understanding that the increase will be passed on to workers in the form of incentives and other inducements.

Expansion of Crisis Services: Expand existing mobile crisis response and stabilization teams and offer these services to adults. In addition, the program will develop crisis triage sites for individuals who need a prompt evaluation and assistance in accessing behavioral health and substance abuse services.

Loan Repayment Grants through Bureau for Behavioral Health: Offers loan repayment assistance to mental healthcare professionals who agree to practice in a community behavioral or substance use disorder field in West Virginia. Applicants must agree to a minimum two-year service contract.

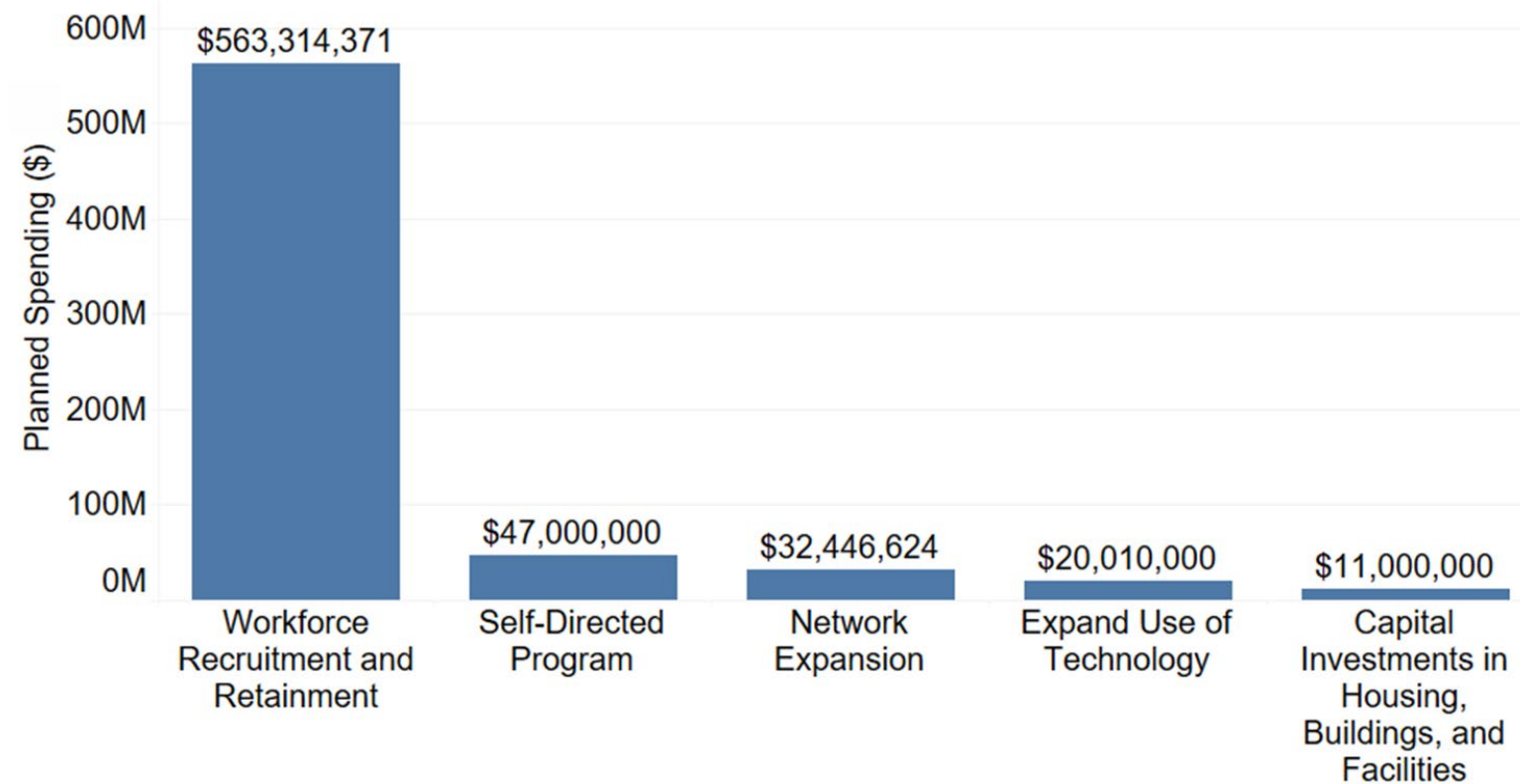
American Rescue Plan Section 9817 State Spending Plan Summary

Wisconsin

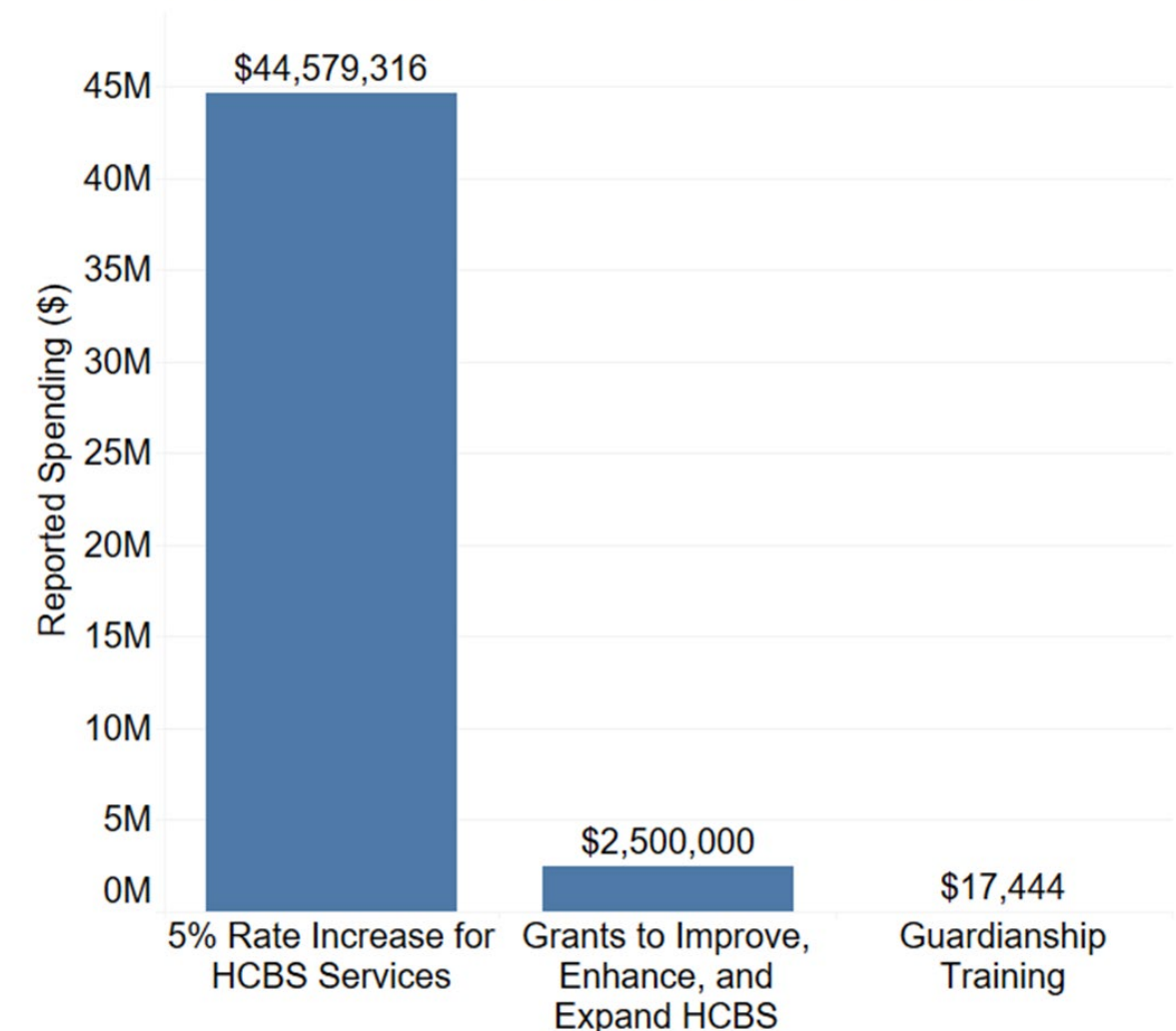

\$695.6M
total planned
\$47.1M total
reported
spending


22
activities
planned

Top 5 Areas by Planned Spending



Top 3 Activities by Reported Spending



Activity Highlights

5% Rate Increase for Home and Community-Based (HCBS) Services: Provide a 5% rate increase for qualifying HCBS.

Direct Care Professional Certification & Registry: Create a new Direct Care Professional Certificate in Wisconsin, including a competency test, a public registry, and a system to track individuals from training to competency, employment, and retention. Implement a marketing and advertising campaign to target recruitment of new Direct Care Professionals.

Tribal Long-Term Care System Enhancements: Further develop systems that address Wisconsin tribal nations' unique cultural and policy needs. The activity will also increase funding for tribal Aging and Disability Resource Specialists.

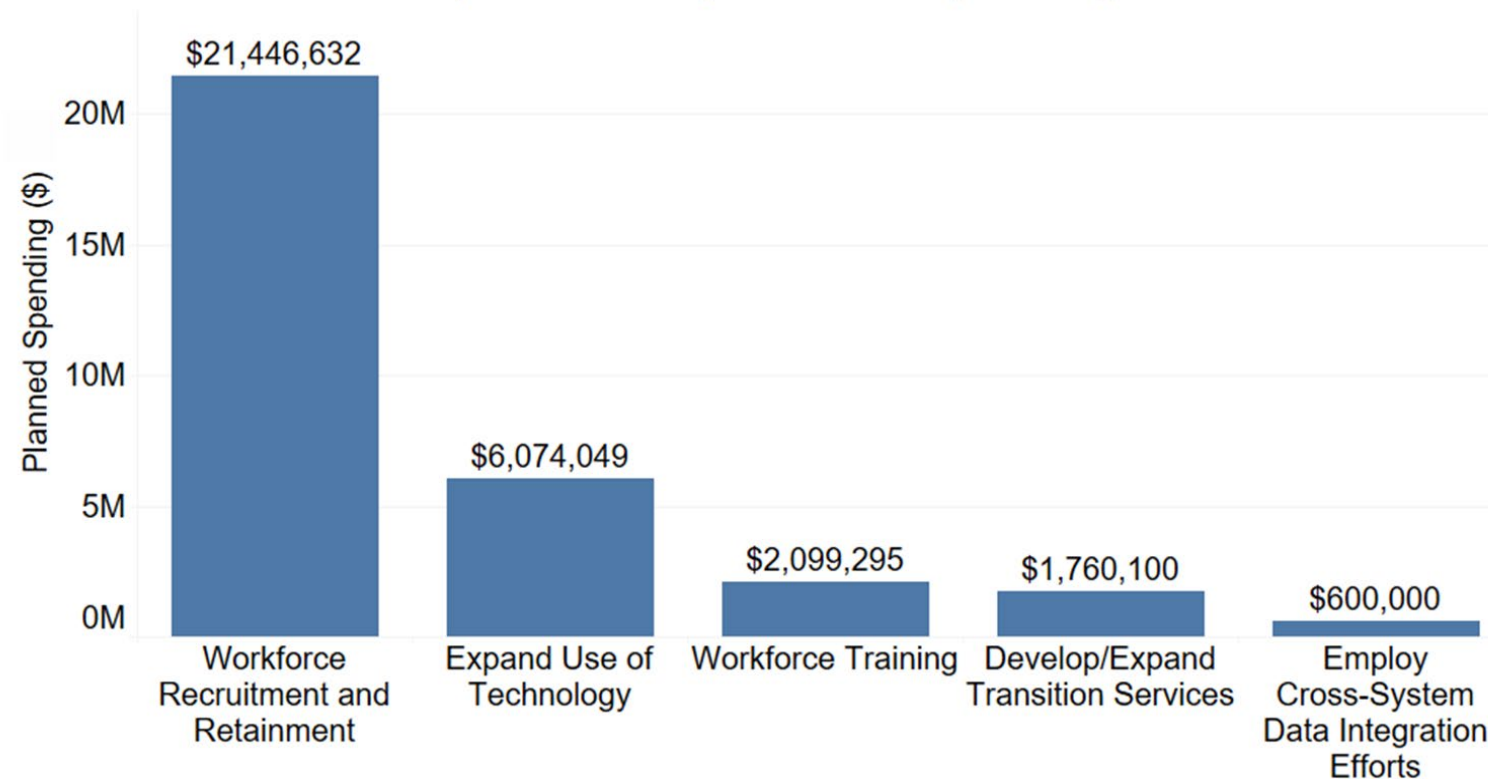
American Rescue Plan Section 9817 State Spending Plan Summary

Wyoming

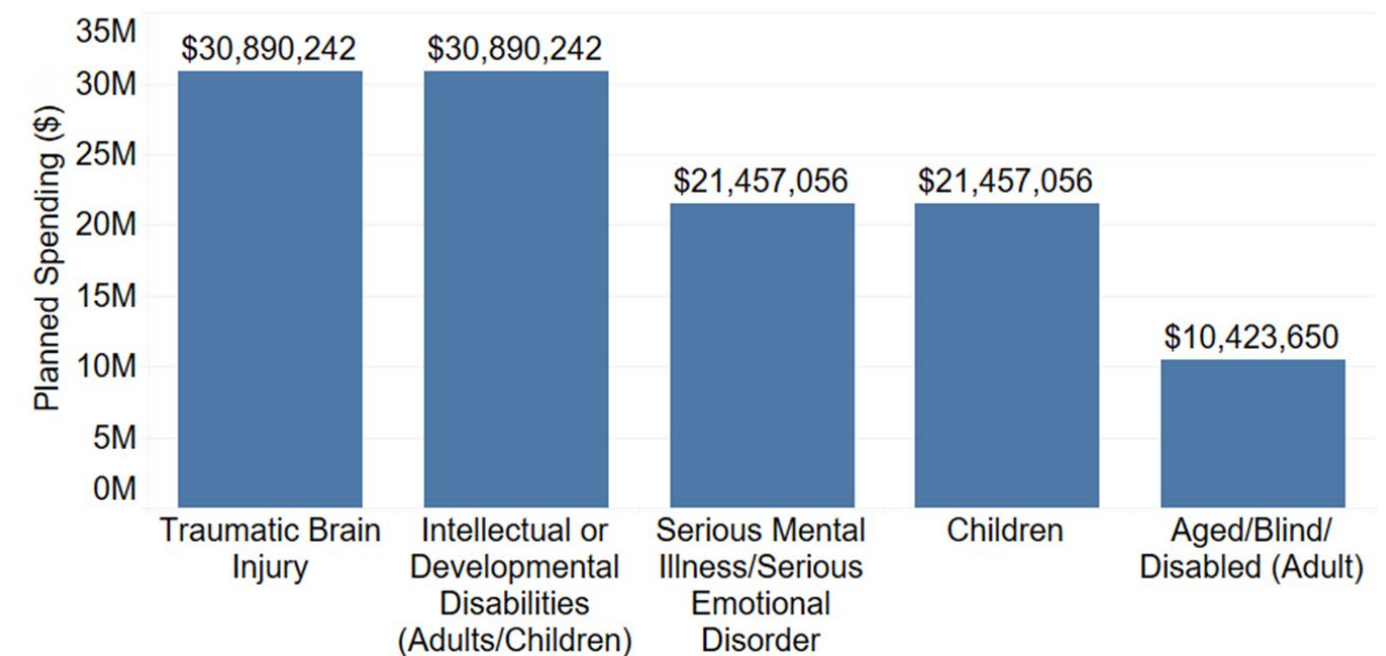

\$32.7M
total planned
\$25.2M total
reported
spending


10
activities
planned

Top 5 Areas by Planned Spending



Planned Spending, by Population Type



Activity Highlights

Increase Provider Reimbursement Rates: Increase provider reimbursement rates of selected home and community-based services (HCBS), including the Care Management Entity and Children's Mental Health Waiver, for the purpose of elevating the compensation for direct support professionals, improving provider recruitment and retention, and ensuring network adequacy.

Support Innovative Technology Projects Through the Award of Innovation Grants: Support provider projects that meet identified criteria and are intended to enhance, expand, or strengthen HCBS. Innovative projects may address remote or virtual support services, equipment purchases that support participant communication and access to needed services, staff development and training, and other technology projects identified by the provider.

Create Community Transition, Environmental Modification, and Homemaker Services: Fund initial set up costs that individuals incur when they transition from nursing facilities back into their community. Covered costs may include security deposits, utility activation fees, and basic furnishings. Room and board costs will not be covered under this service.

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