

COMMENTS AND RESPONSES ON ARC 1818C – Medicaid Training

The following persons and organizations provided written comments which are included in the summary below:

William Vaughn, President and CEO, Mainstream Living, Ames
Bob Bartles, Executive Director, Hope Haven, Burlington
Jan Caldwell, Director, Crest Services, Des Moines
Patrick Costigan, Regional Director, REM Iowa Community Services, Guttenberg,
Robert Hebl, Executive Director, Discovery Living, Inc., Cedar Rapids
Mickey Edwards, Regional Director, Christian Opportunity Center, Pella
Jennifer Ellis, Executive Director, Friendship Ark, Ames
Steve Hodapp
Janice J. Kness, Skyline Center, Inc.
Sherri Nielsen, President/CEO, Easter Seals Iowa
Laurie Doyon, VP of Operations, Progress Industries
Marlin Wilkerson, VP of Operations—Iowa, Mosaic
Sherri L. Clark, Executive Director, Nishna Productions, Inc.
Deb Eckerman Slack, ISAC
The Arc of East Central Iowa, Board of Directors: Janet Abejo, Ashley Anthony, Dianne Austad, Jeff Corrigan, Christine Crosby, Melissa, Cullum, Melisa Cullum, Jody Donaldson, Luvoria Duckett, Elaine Duvall, Stephanie Erbe, Brian Fagan, Brad Hauge, Darrin Keller, Cheryl Kiburz, Joe Linn, Jamie Meyers, Mark Mitchell, Ellen Mouw, Ben Rodgers, David Schulz, Melissa Tandy, David Wenzel.
Shelly Chandler, Iowa Association of Community Providers
Nancy Curtis, Cass Inc.
Teresa Naughton, Executive Director, Life Works Community Services

COMMENT: Seventeen of the eighteen written responses received by the department had similar comments:

1. All commenters were in opposition of the proposed rule as written.
2. Staff training is crucial to ensure the provision of high quality services to individuals.
3. The legislation was a clear directive for DHS to write rules to allow providers to include staff training as a direct expense and to date has not been implemented.
4. How the department treats training as an indirect expense in the HCBS waiver programs is inconsistent with how department has developed rates and paid for training costs with other Medicaid providers.
5. Iowa DHS is proposing that training as a direct service cost is to be contingent on appropriation by the legislature. This is not the intent of SF 452.
6. Request to remove the language “To the extent that funding is specifically appropriated by the legislature for this purpose for a state fiscal year.”

RESPONSE:

Upon review of these comments, the Department has revised the amendment to the rules as shown below. Consistent with the comments, the Department believes that the treatment of staff training as a direct care cost was intended to be limited to direct-care staff.

COMMENT: From Deb Eckerman Slack, ISAC:

Will this rule change also allow providers of targeted case management for HCBS waivers include their training costs in their cost reports?

RESPONSE:

No. This rule change is applicable to HCBS services rates that are set through the retrospectively limited prospective rate setting methodology. That methodology applies to reimbursement for HCBS supported community living; HCBS family and community support services; HCBS supported employment (services to maintain employment and enhanced job search); and HCBS interim medical monitoring and treatment when provided by an HCBS-certified supported community agency.

REVISED AMENDMENT: Adopt the following **new** subparagraph **79.1(15)“b”(9)**:

(9) The reasonable costs of direct-care staff training shall be treated as direct care costs, rather than as indirect administrative costs.