



# Department of Public Health and Human Services

Greg Gianforte, Governor

Adam Meier, Director

## Developmental Disability Provider Rate Workgroup Meeting Minutes

June 1, 2022

11:00 AM (MST) – 2:00 PM (MST)

Zoom Invite Information:

### Join Zoom Meeting

<https://mt-gov.zoom.us/j/87861448571?pwd=RHdMQTIGYVUzZmNCSUdRMzF6dnhLQT09>

Meeting ID: 878 6144 8571

Password: 108890

### Dial by Telephone

+1 646 558 8656

Meeting ID: 878 6144 8571

Password: 108890

Find your local number: <https://mt-gov.zoom.us/j/87861448571?pwd=RHdMQTIGYVUzZmNCSUdRMzF6dnhLQT09>

### Join by SIP

[87861448571@zoomcrc.com](https://mt-gov.zoom.us/j/87861448571?pwd=RHdMQTIGYVUzZmNCSUdRMzF6dnhLQT09)

### Join by H.323 (Polycom)

162.255.37.11##87861448571

## Agenda

### 1. Welcome

Jackie Jandt with DPHHS welcomed attendees to the meeting

Coy Jones with Guidehouse presented the agenda for the meeting and began facilitating

### 2. Rate Model Adjustments

Guidehouse presented on Rate Model Adjustments.

- Attendee: I would like to see the breakdown of productivity. You said you significantly lowered it. You say that it is aligning with other services in different populations and I'd like you to expand on that – what are the other populations?
  - GH: There are supported employment services in SDMI and Big Sky Waivers, so we developed a common rate assumption for each of those. I don't have the productivity numbers on hand, but I can follow up with you on that.
- Attendee: This is one of those services where transportation is not included so productivity is significantly higher than some other services because of

the high travel times. I'm not sure why the change from 56% of an increase (which I do agree was a bit high) down to 22%... I think the productivity piece should be looked at more.

- GH: I will follow up with you about that.
- Attendee: Why the lower increase % in work integration?
  - GH: The per trip work integration costs are not based on a mileage rate. The % increase you're seeing on mileage reimbursement is due simply to the fact that current structure pays 41 cents per mile, while IRS pays more per mile. We are not assuming the average trip is 12 miles. We don't know what went into assumptions for cost per trip at current rates. We are looking at cost per trip at current reported service delivery.
  - Attendee: Most of our trips are individuals – so we might take a person who is working out to do some socialization where it's 1:1. We are limited to 12 max per year, so that's once a month at most.
- Attendee: We are not paid for transportation to and from work site.
  - GH: In our costs, that's the cost of doing the business.
- Attendee: I am concerned about the productivity because of those types of issues. A person's day is not 100% billable in supported employment. They have to go to a worksite and back and none of that is a billable service
  - GH: In addition to time costs, there are also fuel costs to consider.
- Attendee: Is there any plan for annual or bi-annual cost of living increases?
  - GH: You will see that recommendation for consideration when we get to that point in the presentation. We are obviously not prescribing a plan but we do think it makes sense to have a plan for an annual or bi-annual increase depending on the budgeting process. This will be in our full report.
- Attendee: While I very much appreciate the increases listed in your study... for the record these recommendations as currently written look like congregate day and living services are more incentivized vs creating independence in individual living and individual employment. I would like to see why the changes in productivity with SE was lower so significantly. Also, I would like to see why SL has been so disincentivized vs Personal Care. ("Do for" vs encouraging independence)

### **3. Geographic Factors**

Guidehouse presented on Geographic Factors.

### **4. Additional Rate Models**

Guidehouse presented on Additional Rate Models.

### **5. Fiscal Impact Analysis**

Guidehouse presented on the Fiscal Impact Analysis.

6. **Cost Reporting Plan**  
Guidehouse presented on the Cost Reporting Plan.
7. **Final Recommendations**  
Guidehouse presented Final Recommendations.
8. **Considerations for Implementation**  
Guidehouse presented Considerations for Implementation.
9. **Timeline and Next Steps**  
Guidehouse presented on Timeline and Next Steps.
10. **Public Comment**  
There were no public comments.
11. **Adjournment @ 2:00 PM (MST)**

**Meeting Contact:** Jackie Jandt, Medicaid Reform Initiative Specialist,  
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