

Agreement Number 148087

**STATE OF OREGON
INTERGOVERNMENTAL GRANT AGREEMENT
FOR THE FINANCING OF
COMMUNITY DEVELOPMENTAL DISABILITY SERVICES**

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This Amendment number **04** for the Intergovernmental Grant Agreement for the Financing of Community Developmental Disability Services (the “Agreement”) is between the State of Oregon, acting by and through its Department of Human Services, hereinafter referred to as “DHS” and Yamhill County (“County”).

AMENDMENT

The Agreement is hereby amended as follows:

1. This Amendment number **04** shall become effective on the date this Amendment has been fully executed by every party and, when required, approved by Department of Justice.
2. Effective January 1, 2018, Section 3 “Agreement Documents, Order of Precedence”, paragraph a., is renumbered to Section 2 and edited to change the name of Exhibit H from “Reserved” to “Conducting Oregon Needs Assessment”.
3. Effective January 1, 2018, Section 3 “Agreement Documents, Order of Precedence”, paragraph b., is renumbered to Section 2 and edited to change the name of paragraph (11) Exhibit H from “Reserved” to “Conducting Oregon Needs Assessment”.
4. Effective January 1, 2018, Exhibit A “Definitions” is supplemented to add a new Section 52 as follows. The remaining Sections are renumbered 53 through 79.
 52. “Oregon Needs Assessment” or “ONA” means the normed and validated tool owned by ODDS that is used to meet the requirements of the Functional Needs Assessment (FNA).
5. Effective January 1, 2018, Exhibit B Part 1 “Operations and Administration Terms and Conditions”, Section 1 “Biennial Plan” is deleted in its entirety. The remaining Sections are renumbered 1 through 6.

6. Effective January 1, 2018, Exhibit B Part 1 “Operations and Administration Terms and Conditions”, Section 3 is renumbered to Section 2 and amended as follows: language to be deleted or replaced is ~~struck through~~ and new language is **underlined and bold**.
2. County Assistance with Provider and Employer Enrollment ~~and~~, **Credentials, and Payments.**
- a. County shall assist any Individual who wishes to hire a Personal Support Worker (PSW) in the following ways:
- (1) Assist the Individual in becoming a Common Law Employer (CLE) or identifying a designated CLE and provide resources to prospective CLEs on their role. For each CLE County will:
 - (a) Initiate enrollment of the CLE into the Fiscal Management Agent Services (FMAS) vendor’s web portal (currently referred to as “BetterOnline”). For each new CLE, County will provide the required information to successfully enroll the CLE.
 - (b) Provide assistance to the Individual or the designated CLE in completing the required paperwork. County may provide this assistance or refer the CLE to the STEPS program.
 - (c) Upon request, if the County identifies a need, County shall refer the CLE to the STEPS program.
 - (2) Assist the Individual in qualifying PSWs by:
 - (a) Providing PSWs with a Provider Enrollment Agreement (PEA) and initiating a Criminal History Check (CHC).
 - (b) Initiating the PSW enrollment in the FMAS vendor’s web portal. For each new PSW, County will provide the required information to successfully enroll the PSW.
- b. County shall assist any Individual who wishes to hire an Independent Contractor (IC) by initiating a CHC for all new ICs.
- c. For PSW Providers, County shall assist Individuals by verifying certifications, licenses, CHC, driver’s licenses, and auto insurance are appropriate and up to date prior to Services being authorized. Additionally, County shall assist Individuals by ensuring that IC’s CHC is valid and up to date prior to Services being authorized.
- d. **Until DHS implements time capture tools, County must review and approve or reject the PSW time sheet, progress note, and mileage log. County must review, and approve or reject PSW submitted Services-delivered billing entries accordingly.**
- e. **County is required to submit an out-of-cycle request for payment for PSWs if the PSW turned in a properly completed timesheet within the dates as outlined on the approved PSW payment calendar and it was**

not approved by ODDS due to an administrative error on the part of the County. The out-of-cycle request must be submitted within one business day of the County verifying that an error occurred and that it was an administrative error. County will be assessed a \$50.00 fee per PSW out-of-cycle request submitted. Fees will be removed from County's authorized Provider Prior Authorization for Services (DD 48 Case Management). ODDS will offer administrative technical assistance to those Counties that exceed ten submissions or 1% of the total Client enrollment for the County (whichever is greater) in a calendar year.

7. Effective January 1, 2018, Exhibit B Part 2 "Standards and Procedures", Section 1 is amended as follows: language to be deleted or replaced is ~~struck through~~ and new language is **underlined and bold**.

1. Provision of Services.

The DD Services listed in subsections a. and b. below must be provided as described in the appropriate federal regulations, Oregon Revised Statutes, Oregon Administrative Rules, and Service Element Standards and Procedures for the DD Services. Requirements for Service Elements may be found in the OARs listed below. Any additional Standards and Procedures may be found in this Exhibit B, Part 2. Only DD Services listed in subsections a. and b. below are subject to this Agreement.

a. Upon acceptance of the Service Element Prior Authorization in eXPRS, County agrees to directly provide or subcontract for the DD Services listed in this subsection. The DD Services provided by County whose costs are covered in whole or in part with the SEPA are:

Service Name	Service Code	OAR(s)
Local Administration (LA) <u>Eligibility and Licensing</u>	DD 02	Chapter 411, Division 320, Service Element Standards and Procedures
Case Management <u>and Local Administration (LA)</u>	DD 48	Chapter 411, Divisions <u>415 and 320</u> ; Service Element Standards and Procedures
Abuse Investigation Services	DD 55	Chapter 411, Division 320; Service Element Standards and Procedures

- b. DD Services authorized by County through a CPA or Plan of Care Authorization in eXPRS and performed by DHS enrolled Providers are:

Service Name	Service Code	OAR(s)
Nursing Facility Specialized Services	DD 45	Chapter 411, Division 86
Comprehensive In-Home Support Services for Adults	DD 49	Chapter 411, Divisions 345, 435 and 450
Residential Facilities	DD 50	Chapter 411, Division 325
Supported Living Services	DD 51	Chapter 411, Division 328
Transportation Services	DD 53	Service Element Standards and Procedures
Employment and other Non-Residential Day Services	DD 54	Chapter 411, Divisions 345 and 450
Rent Subsidy	DD 56	Service Element Standards and Procedures
Special Projects	DD 57	Service Element Standards and Procedures
<u>Ancillary Services</u>	<u>DD 257</u>	<u>Chapter 411, Division 435</u>
Adult Foster Homes	DD 58 Adult 158	Chapter 411, Division 360
Child Foster Homes	DD 58 Child 258	Chapter 411, Division 346
Family Support Services for Children	DD 150	Chapter 411, Division 305
In-Home Support for Children	DD 151	Chapter 411, Divisions 435 and 450
Room & Board <u>and Service Level Funding</u> - General Fund	DD 156	Service Element Standards and Procedures

8. Effective October 1, 2017, all references in the Agreement to DHS' determination, in accordance with the State Controller's Oregon Accounting Manual, policy 30.40.00.102, is that County is a "contractor" instead of a "subrecipient".

9. Effective January 1, 2018 “Service Element DD 02 Standards and Procedures” is amended as follows: language to be deleted or replaced is ~~struck through~~ and new language is **underlined and bold**.

Service Element DD 02 Standards and Procedures

Effective Date: ~~October 1, 2017~~ **January 1, 2018**
Service Name: ~~Local Administration (LA)~~ **Eligibility and Licensing**
Service ID Code: DD 02

1. Overview.

~~Local Administration~~ **Eligibility and Licensing (DD 02 Services)** encompass the activities related to the ~~CDDP’s general administration and management of a Community Developmental Disability Program (CDDP).~~ **determination of eligibility of Individuals and assisting in the licensing of Adult Foster Homes under OAR Chapter 411, Division 360; and assistance in certifying Child Foster Homes under OAR Chapter 411, Division 346, unless otherwise exempt under Oregon law.**

~~These activities include but are not limited to:~~

- ~~a. Insuring all staff receive necessary training;~~
- ~~b. Insuring all services offered by the CDDP are understood by staff as well as the rules that govern those services;~~
- ~~c. Complying with OAR Chapter 411, Division 320 as it describes the requirements of CDDP staff;~~
- ~~d. Assisting in the licensing of Adult Foster Homes under OAR Chapter 411, Division 360; and assistance in certifying Child Foster Homes under OAR Chapter 411, Division 346 unless otherwise exempt under Oregon law.~~

2. Standards and Procedures not identified in rule.

- a. Comply and track compliance with Oregon Administrative Rules, DHS policies and procedures, and Transmittals.
- ~~b. Assist DHS with the implementation of and compliance with Executive Order 15-01 and OAR Chapter 407, Division 025 and as outlined in Exhibit B, Part 1 of this Agreement.~~
- b.** Special Reporting Requirements
Upon DHS’ request, CDDP will provide data and information relative to the implementation of DD 02 Services within the time specified by DHS in its request to CDDP.
- c.** Billing and Payment Procedures

- (1) DHS will provide CDDP with funding for DD 02 Services by entering a Service Element Prior Authorization (SEPA) and Provider Prior Authorization (PPA) based on the approved CDDP workload model or its funding level for FTE staff.
- (2) DHS will disburse funding for DD 02 Services for a specified period of time equal to the monthly amount set forth in the accepted SEPA and approved in the PPA, as such amounts may be updated from time to time. Any recovery of funding will be done as outlined in Exhibit B, Part 3 of this Agreement unless the recovery falls in the following subsection d.
- ~~(3) If, due to administrative error, CDDP fails to timely approved PSW time submitted and requests an Out of Cycle payment, CDDP will have their 02 SEPA allocation reduced by \$50 per accepted request.~~

d. CDDP, as a Provider of DD 02 Services that are funded by DHS, must:

- (1) Employ an identified individual as an Eligibility Specialist, as defined in OAR 411-320-0020 (14), or have an agreement with another county to perform eligibility determination for the County receiving the DD 02 funding. If there is an agreement with another county to perform eligibility determinations, the agreement must include the provision of DD 02 Services in that county's geographic Program Area. Eligibility Specialists employed to provide eligibility services must:
 - (a) Meet the criteria of a Services Coordinator Eligibility Specialist, as described in OAR 411-320-0030 (5)(d), as such rules may be revised from time to time;
 - (b) Complete a competency based training given by DHS' Diagnosis and Evaluation Coordinator within one year of hire;
 - (c) Participate in DHS sponsored training on an annual basis; and
 - (d) Participate in a minimum of 20 hours of training related to Developmental Disabilities or eligibility on an annual basis.
- ~~(2) The Provider of DD 02 Services funded by DHS, whether County, a CDDP, or Subcontractor, must~~ Employ the staff indicated on its workload model in the specific position type indicated **for the work identified in this Service Element** ~~for local administrative services, **whether County is a Provider, a CDDP, or Subcontractor.**~~ The Provider must hire as many employees as possible for each identified position per the funding allocated to Provider.
- (3) Employ sufficient staff to perform the eligibility determinations for its own County and the county with whom it is subcontracting if performing eligibility determinations for another county.
- (4) Use DHS approved forms and procedures for eligibility determination services.

- (5) Inform DHS' Office of Developmental Disability Services (ODDS) of the name(s) of the County's designated Eligibility Specialist(s), and notify ODDS if the County assigns a new Eligibility Specialist.
- (6) Follow the processes established by DHS to complete the Level of Care determination when an Individual is initially eligible for Developmental Disability Services.
- (7) Ensure any Provider of DD 02 Services for County completes the Eligibility Specialist section of the DHS Level of Care (LOC) form within ten calendar days of the date of initial eligibility. The LOC must be completed in its entirety as soon as possible after eligibility is determined, in compliance with OAR 411-415. Upon completion, the LOC must be submitted to ODDS within 30 calendar days. **Upon implementation of LOC in eXPRS, LOC must be entered into eXPRS within ten calendar days of the date of initial eligibility.**
- ~~(8) Work with all Individuals and their ISP Teams to reevaluate the need for institutional LOC on an annual basis or more often if there is a change in an Individual's need or an Individual requests a review.~~
- ~~(9) Terminate from Level of Care for any Individual that does not meet the LOC eligibility requirements and refer the Individual to other non-waiver or non-K Plan Services.~~

3. CFDA Number(s).

In accordance with the State Controller's Oregon Accounting Manual, policy 30.40.00.102, and DHS procedure "Contractual Governance", DHS' determination is that County is a **contractor subrecipient**.

The Catalog of Federal Domestic Assistance (CFDA) #(s) of Federal Funds to be paid through the Agreement: 93-778.

10. Effective January 1, 2018 “Service Element DD 48 Standards and Procedures” is amended as follows: language to be deleted or replaced is ~~struck through~~ and new language is **underlined and bold**.

Service Element DD 48 Standards and Procedures

Effective Date: ~~October 1, 2017~~ **January 1, 2018**
Service Name: Case Management **and Local Administration (LA)**
Service ID Code: DD 48

1. Overview.

Case Management Services (~~DD 48 Services~~) are delivered to Individuals who are eligible for Intellectual or Developmental Disability Services (I/DD Services) funded by DHS in an identified **Community Developmental Disability Program’s** (CDDP’s) geographic Program Area.

Local Administration encompasses the activities related to the general administration and management of a CDDP. These activities include but are not limited to ensuring that all CDDP staff receive necessary training, that all I/DD Services offered by the CDDP are understood by CDDP staff as well as the rules that govern those I/DD Services, and that all CDDP staff comply with OAR Chapter 411, Division 320 as it describes the requirements of CDDP staff.

Case Management Services and Local Administration together make up the DD 48 Services described in this Service Element.

2. Standards and Procedures.

a. General Performance Requirements

- (1) For each eligible Individual receiving DD 48 Services, the CDDP shall create and submit a Client Prior Authorization (CPA) in eXPRS for DD 48 Services within five business days of the CDDP’s determination that the Individual is eligible for DD 48 Services. Updates or changes to an Individual’s eligibility or service period for DD 48 Services must be reflected in the Individual’s CPA within five business days of the CDDP’s receipt of notification of change. The DD 48 CPAs that are submitted successfully by the CDDP and are accepted through eXPRS will serve as the CDDP enrollment roster for DD 48 Services;
- (2) Providers of DD 48 Services funded by DHS shall:
 - (a) Comply with the requirements of OAR Chapter 411, Division 320 and Division 415, as such rules may be revised from time to time;
 - (b) Whether County, a CDDP, or Subcontractor, employ the staff indicated on its workload model in the specific position type indicated for Case Management Services. The Provider must hire

as many employees as possible for each identified position per the funding allocated to Provider;

- (c) Complete annual plan entry into eXPRS for any Plan of Care Services under the guidelines identified in OAR 411-415-0050. CDDP must utilize the code “TBD” for any services where a Provider has not yet been identified. Failure to follow the guidelines identified may result in withholding payment for services rendered or other actions as deemed appropriate by DHS;
- (d) Develop, maintain, and effectively implement systems and procedures for the timely and accurate documentation of DD 48 Services;
- (e) Comply with all DHS requirements designed to assure the timely and accurate enrollment, service authorization, and service payment for Individuals receiving DD 48 Services;
- (f) Provide, at minimum, one annual qualifying billable Claim for each Individual enrolled in DD 48 Services;
- (g) Ensure that all Claims billed are for activities that meet DHS guidelines as qualifying billable Claims;
- (h) Ensure each Individual receiving DD 48 Services is eligible for DD Services, with eligibility determined in accordance with OAR Chapter 411, Division 320, as such rule may be revised from time to time;
- (i) Complete and submit DD 48 Service eligibility or enrollment information via established methods, and update forms following instructions and forms(s) or method(s) designated by DHS. Failure to submit the DD 48 Service eligibility or enrollment form may delay the approval of the CPA for DD 48 Services.
- (j) **Comply and track compliance with all Oregon Administrative Rules, DHS policies and procedures, and Transmittals.**
- (k) **Assist DHS with the implementation of and compliance with Executive Order 15-01 and OAR Chapter 407, Division 025 and as outlined in Exhibit B, Part 1 of this Agreement.**

b. Special Reporting Requirements

- (1) Upon the request of DHS, the CDDP shall supply data and information relative to the implementation of DD 48 Services.
- (2) CDDP shall respond to DHS staff inquiries or request for additional information within five business days of a request pertaining to a complaint or administrative hearing to include but not be limited to eligibility or service complaints and hearings.

c. Billing and Payment Procedures

- (1) Funding for DD48 Services are:
- (a) Based upon the amount of qualified billable encounters or Claims submitted by the Provider of DD 48 Services, up to the monthly amount authorized by the CDDP's DD 48 Services Provider Prior Authorization (PPA);
 - (b) Paid to the CDDP after the Claims processing cycle on the 15th of the month based on:
 - i. Title XIX eligible Claims cleared since the first of the month; and
 - ii. Title XIX eligible Claims made for the previous month(s) that have cleared but have not previously been paid, will also be processed for payment at this time up to the monthly authorized amount.
 - iii. General fund Claims submitted for the time period between the 1st of the month and the 15th of the month will be held until the next monthly Claims processing cycle described in 2.c.(1)(c) of this DD 48 Standards and Procedures.
 - (c) Paid to CDDP after the Claims processing cycle on the last day of the month based on:
 - i. If any funds remain or are available in the monthly authorized amount;
 - ii. Title XIX eligible Claims cleared since the 15th will be processed and paid first;
 - iii. Title XIX eligible Claims cleared but not yet paid for the previous month(s) will be processed and paid second up to the maximum monthly authorized amount;
 - iv. If any funds remain or are available for the month after payment of the Title XIX eligible Claims, general fund Claims that have cleared that month will be processed and paid third; and
 - v. General fund Claims cleared but not yet paid for the previous month(s) will be processed and paid fourth until the monthly authorized amount is exhausted.

Note: Exception to this process is for those billings made prior to the effective date of the transition to the billable encounters claims system. Any encounter entered before the effective date but not covered by previous allotment payments will be taken into account at the time of the final biennial settlement.

- (2) DHS is not obligated to provide funding for any DD 48 Services that are not properly documented in Individual case files, or are not properly reported through eXPRS within 12 months of the DD 48 Service, and by the date 60 calendar days after the earlier of expiration or termination of the Agreement; termination of DHS' obligation to provide funding for DD 48 Services; or termination of County's obligation to include the Program Area in which DD 48 Services fall in its Community Developmental Disability Program (CDDP).
- (3) Provider of DD 48 Services shall resolve all Provider Liability Accounts (PLA) as shown in eXPRS relating to DD 48 Services, by ensuring the PLA ending balance is zero, within 60 calendar days after the earlier of expiration or termination of the Agreement with DHS; termination of DHS' obligation to provide funding for DD 48 Services; or termination of County's obligation to include the Program Area, in which DD 48 Services fall, in its Community Developmental Disability Program.
- (4) Each Individual receiving DD 48 Services must have an active, accepted CPA within eXPRS for the period DD 48 Services are provided to the Individual in order for Provider to submit a qualifying Claim.
- (5) For each unit of DD 48 Services reported in eXPRS as delivered to an Individual, a qualifying billable DD 48 Service must have been delivered to the Individual and sufficiently documented in progress notes within the Individual's file. DHS will not provide funding for more than one billable DD 48 Service or unit per Individual per day.
- (6) Settlement will be used to confirm and reconcile any discrepancies that may have occurred between actual DHS disbursements of funding awarded for DD 48 Services through a Service Element Prior Authorization (SEPA) and the amount of qualifying billable DD 48 Services actually delivered.

3. CFDA Number(s).

In accordance with the State Controller's Oregon Accounting Manual, policy 30.40.00.102, and DHS procedure "Contractual Governance", DHS' determination is that County is a subrecipient contractor.

The Catalog of Federal Domestic Assistance (CFDA) #(s) of Federal Funds to be paid through the Agreement: 93-778.

11. Effective January 1, 2018 “Service Element DD 49 Standards and Procedures” is amended as follows: language to be deleted or replaced is ~~struck through~~ and new language is **underlined and bold**.

Service Element DD 49 Standards and Procedures

Effective Date: ~~October 1, 2017~~ **January 1, 2018**
Service Name: Comprehensive In-Home Support Services for Adults
Service ID Code: DD 49

1. Overview.

Comprehensive In-Home Support Services for Adults (DD 49) includes assistance to Individuals aged 18 and over to continue to live in their own homes or in their family homes. DD 49 Services include Services identified in OAR Chapter 411, Division 450 Community Living Supports, OAR Chapter 411, Division 435, Ancillary Services, and OAR Chapter 411, Division 345, Employment Services for Individuals with Intellectual or Developmental Disabilities.

2. Standards and Procedures.

a. Service Authorization

DD49 Services must be prior authorized by the County in which the Individual is enrolled and receiving Case Management Services in accordance with Oregon Administrative Rules. This authorization must be provided and documented according to Oregon Administrative Rules, DHS policy and procedure. County shall enter all DD 49 Service plans in the Plan of Care system in eXPRS prior to start of Services.

b. Billing and Payment Procedure(s)

- (1) County shall draft a Plan of Care Service authorization within eXPRS upon completion of the Individual’s ISP.
- (2) County shall add a POC Service Plan line for each Service authorized by the County and agreed to by the Individual consistent with the most recent published expenditure guidelines.
- (3) Once the Individual or their delegate has chosen the Service Provider, the County shall add the Service Prior Authorization (SPA) lines in the Individual’s POC.
- (4) ~~Until such time as DHS implements time capture tools, County must review and approve or reject the PSW time sheet, progress note, and mileage log, County shall review, and approve or reject PSW submitted Services Delivered billing entries accordingly.~~

3. CFDA Number(s).

In accordance with the State Controller's Oregon Accounting Manual, policy 30.40.00.102, and DHS procedure "Contractual Governance", DHS' determination is that County is a ~~subrecipient~~ **contractor**.

Catalog of Federal Domestic Assistance (CFDA) #(s) of federal funds to be paid through the Agreement: 93-778.

12. Effective January 1, 2018 “Service Element DD 57 Standards and Procedures” is replaced in its entirety with the following:

Service Element DD 57 Standards and Procedures

Effective Date: January 1, 2018
Service Name: Special Projects
Service ID Code: DD 57

DD 57 Special Projects governs Services that are supported by the State General Fund (GF Special Projects).

1. GF Special Projects.

a. GF Special Projects Overview

GF Special Projects are one-time-only or time-limited Services, for Individuals with Intellectual or Developmental Disabilities (I/DD), approved in advance by the Department of Human Services’ (DHS) Office of Developmental Disability Services (ODDS). GF Special Projects include:

- (1) Sex offender treatment through group therapy, individual therapy, or group and individual therapy; or
- (2) Other I/DD Services not detailed in any other Standards and Procedures.

b. General Performance Requirements for GF Special Projects

- (1) Individuals receiving GF Special Project Services must be found eligible for I/DD Services under OAR Chapter 411, Division 320. Under extraordinary circumstances, ODDS may authorize an exception to this eligibility requirement.
- (2) All GF Special Project funding requests must be submitted to ODDS at ODDS.FundingReview@state.or.us via form 0514dd for prior authorization. DHS will not pay for any GF Special Project Services rendered prior to ODDS’s approval authorizing the Services. ODDS will not approve retroactive requests for GF Special Projects.

c. Performance Requirements for Start-Up GF Special Projects

- (1) Start-Up funding requests for GF Special Projects can be made for the development of new Services for new Individuals in a residential facility receiving DD 50 Residential Facilities Services for up to \$2,500.00 per Individual for a biennium. Prior to development of the new Service, County will confirm the need and approve the Start-Up GF Special Project. County will determine whether other capacity resources have been considered and ruled out prior to submission of the GF Special Projects funding request to ODDS at ODDS.FundingReview@state.or.us.

- (2) Requests for GF Special Project Start-Up funding must be submitted separately and must include the following:
 - (a) A DHS prescribed line-item budget;
 - (b) A description of the Start-Up GF Special Project being requested;
 - (c) The effective date and the end date of the requested GF Special Project;
 - (d) The Individual's name;
 - (e) The Individual's prime number;
 - (f) The dollar amount requested for the Individual; and
 - (g) Any other information requested by ODDS.
- (3) GF Special Project Start-Up funds must be expended according to the request for the funds and in accordance with any required line-item budget submitted by County and approved by ODDS. Expenditures must comply with the allowable costs detailed in 1. c. (4) below.
- (4) GF Special Project Start-up funds:
 - (a) Cannot be used for County or Provider administration or overhead costs.
 - (b) May only be applied to GF Special Projects from qualified Providers, or vendors and contractors, who are licensed, bonded and insured in Oregon in accordance with OAR 812.
- (5) GF Special Project Start-Up allowable costs include:
 - (a) Program and office supplies specific to the approved GF Special Project Start-Up;
 - (b) Initial staff training, including training materials and training fees, for the GF Special Project Start-Up;
 - (c) Supplies of food, and maintenance and housekeeping items needed only for the first 30 calendar days of the GF Special Project Start-Up;
 - (d) Insurance premiums for fire or liability coverage and professional performance bonds for only the first month's coverage for the residential facility;
 - (e) Health and safety professional, contract services necessary for a program, or for support of an Individual living in a residential facility, such as behavior consultation and nursing assessments; and
 - (f) Initial licensing fees.
- (6) Capital outlay costs allowed under GF Special Projects for Start-up may include:

- (a) Furnishings and equipment appropriate for the type of Service being provided, such as necessary household furnishings and appliances for the residential facility to support the Individual;
 - (b) Office furnishings and equipment proportionate to the size of the program being implemented, or to the number of staff required for the program being implemented, or to both the program size and the number of staff;
 - (c) Environmental modifications, such as wall hardening, locks on cabinets, ramps, bathroom modifications, and technology, necessary to meet the health and safety needs of the Individual, appropriate for the type of Service being provided, and not available to the residential facility through any other resource. All environmental modifications must be performed by a contractor licensed, bonded and insured in Oregon.
- d. Performance Requirements for GF Special Projects for Sex Offender Therapy
- (1) The sex offender treatment funded by GF Special Projects must be court ordered, ordered as a condition of parole or probation, or an exception authorized in advance of the therapy by ODDS. Individuals under the jurisdiction of the Psychiatric Security Review Board (PSRB) do not qualify for GF Special Project funding for sex offender therapy and County will not use GF Special Project funds for sex offender treatment for these individuals.
 - (2) The initial GF Special Projects request for sex offender treatment must be submitted to ODDS at ODDS.FundingReview@state.or.us on form 0514dd. The request for treatment must include the following:
 - (a) An agreement to the sex offender therapy by the Individual's support team prior to submission of the request to ODDS. Documentation of this agreement must be submitted with the request.
 - (b) A budget or a quote for the cost of the therapy services. Therapy rates must not exceed the usual and customary rates for the geographic service area in which the Individual receives sex offender treatment.
 - (c) The sex offender therapy Provider's name;
 - (d) The type of sex offender therapy (individual or group or individual and group therapy);
 - (e) The number of sessions per week by type of therapy requested;
 - (f) The effective and end dates of the requested therapy. The term of the requested therapy cannot exceed the amount of time ordered by the court, or specified by the terms of a probation or parole agreement;

- (g) The hourly rate for each type of therapy requested;
 - (h) The total amount being requested for the Individual per month; and
 - (i) Information or documentation of funds the Individual receives from any non-Supplemental Security Income (SSI) source. The Individual will be required to contribute toward the cost for sex offender treatment if receiving funds from a non-SSI source.
 - (j) Documentation that the sex offender treatment is court ordered or is required by the terms of the parole or probation agreement. County will make this documentation available to ODDS upon request.
- (3) When GF Special Project funds are used to pay for sex offender treatment, the therapy must be provided by a qualified Provider as determined by the applicable ODDS program rules; or recognized by a board in Oregon authorized to license or certify professionals, such as Board of Social Workers or Board of Licensed Psychologists.
 - (4) County shall obtain and maintain documentation regarding the Individual and the Individual's sex offender treatment. This documentation shall include but is not limited to:
 - (a) Clinical reports;
 - (b) Agreements to the sex offender treatment from the Individual's support team; and
 - (c) An itemization of the Individual's treatment costs.
- e.** Performance Requirements for Other I/DD Services Funded by GF Special Projects

Requests for GF Special Projects that are not for sex offender treatments must be submitted to ODDS at ODDS.FundingReview@state.or.us on form 0514dd.
 - f.** Any GF Special Project Services requested by the County will not be provided until County receives authorization from ODDS. ODDS will send a written determination of the GF Special Project request by email within 14 calendar days of the date the County's request is received by ODDS.
 - g.** GF Special Project Reporting Requirements

County shall supply all data, documentation, and information required by ODDS relative to the implementation of, or payment for, GF Special Project Services requested by County. ODDS shall identify the time frame for receipt of the ODDS required data, documentation, or information in its requests to County.
 - h.** GF Special Projects Financial and Billing Procedures
 - (1) All GF Special Projects will be funded through a particular line of a Service Element Prior Authorization (SEPA) in the eXPRS Payment & Reporting System (eXPRS). All GF Special Project funds will be paid

based upon receipt of a completed, accurate, and approved, DHS-prescribed form submitted by County to CAU.Invoice@state.or.us .

- (2) GF Special Project Start-Up funds are entered into an accepted SEPA in eXPRS. County must submit the approved line-item budget and a request for payment on a DHS prescribed form to CAU.Invoice@state.or.us . ODDS will not authorize a payment to County for the GF Special Project Start-Up funds until a completed and accurate form is received by ODDS. Upon receipt and approval by ODDS of the form, ODDS will create a Provider Prior Authorization (PPA) in eXPRS. The PPA will allow the release of funds to County. County will issue payment to the Provider of the GF Special Project Start-Up Service.
- (3) Upon completion of a GF Special Project Start-up project County will submit an expenditure report on a DHS prescribed form, with receipts for all expenditures for the GF Special Project Start-up project attached. The expenditure report is due 45 calendar days after the completion date of the GF Special Project Start-up project and is to be submitted to CAU.Invoice@state.or.us .
- (4) Any unused GF Special Project Start-up funds must be returned to DHS. Provider shall return to County all unused GF Special Project Start-up funds paid to Provider by County. County shall return to ODDS all unused GF Special Project Start-up funds released to County by ODDS. All unused GF Special Project Start-up funds must be returned to DHS no later than 45 calendar days after the close of the biennium in which the funds were released to County.
- (5) GF Special Projects for sex offender treatment must be approved in advance by ODDS, accepted in a SEPA in eXPRS, and Services must be provided before ODDS will release GF Special Project funding. Provider of the GF Special Project sex offender treatment shall submit a monthly invoice to County. County shall review the monthly Provider invoice for accuracy and to ensure the Services, rates and service dates were authorized by ODDS. County will submit the Provider invoice and a contractor invoice in the form prescribed by DHS to CAU.Invoice@state.or.us . Invoices for sex offender treatment must be submitted by County within 45 calendar days from the end of the service month. ODDS will release payment to County upon receipt of a complete and accurate invoice by creating a PPA in eXPRS. ODDS shall release payments to County on or around the 1st and 15th of each month. County will pay the released funds to the Provider of the GF Special Project sex offender treatment Services. ODDS will not pay any invoices for GF Special Project sex offender treatment Services that are received after 45 calendar days from the end of the service month or for GF Special Project sex offender treatment Services that are not authorized by ODDS.
- (6) GF Special Projects funding for other I/DD Services must be authorized in advance by ODDS, accepted in a SEPA in eXPRS, and the GF Special

Project Services must be provided before ODDS will release funding. Payment for other I/DD Services funded by GF Special Projects funding will be paid directly to County by ODDS. County will submit a monthly contractor invoice on a form prescribed by DHS to CAU.Invoice@state.or.us for processing. Upon receipt of fully completed and accurate contractor invoice from County, ODDS will release the payment by creating a PPA in eXPRS. Payments are released to the County on or around the 1st and 15th of each month. County shall pay the Provider of the IDD Services from the GF Special Project funds. County invoices will be submitted within 45 calendar days from end of the service month. ODDS will not pay any invoices for I/DD Services under GF Special Project funds that are received after 45 calendar days from the end of the service month.

2. Settlement for All DD 57 Special Projects.

Settlement will be used to confirm and reconcile any discrepancies that may have occurred between actual DHS disbursements of funding awarded for DD 57 Special Projects through a SEPA and the amount of authorized and allowable DD 57 Services actually delivered and invoiced in accordance with these DD 57 Standards and Procedures.

3. CFDA Number(s).

In accordance with the State Controller's Oregon Accounting Manual, policy 30.40.00.102, and DHS procedure "Contractual Governance", DHS' determination is that County is a contractor.

The Catalog of Federal Domestic Assistance (CFDA) #(s) of Federal Funds to be paid through the Agreement: 93-778.

13. Effective January 1, 2018 “Service Element DD 58 Adult Foster Home Services Standards and Procedures” is renumbered to DD 158 and replaced in its entirety.

Service Element DD 158 Adult Foster Home Services Standards and Procedures

Effective Date: January 1, 2018
Service Name: Adult Foster Homes
Service ID Code: DD 158

1. Overview.

Service Element DD 158 Adult Foster Home Services (DD 158 Services) governs the delivery of residential care and services to Individuals who are 18 years or older with an Intellectual or Developmental Disability (I/DD) in adult foster homes. DD 158 Adult Foster Home Services include 24-hour supervision, room and board, and assistance with the activities of daily living, instrumental activities of daily living, and other activities, including recreation, socialization and access to services which help the Individuals develop appropriate skills to increase or maintain their level of functioning in accordance with each Individual’s person-centered plan.

CDDP shall ensure that each Individual receiving DD 158 Adult Foster Home Services funded by DHS is eligible for Developmental Disability Services, with eligibility determined in accordance with OAR Chapter 411, Division 320, as such rules may be revised from time to time.

2. Standards and Procedures.

a. Service Authorization

DD 158 Services must be authorized in advance by the CDDP in which the Individual is enrolled and is receiving DD 48 Case Management and Local Administration Services.

b. Plan of Care Transition

- (1) Beginning January 1, 2018 all DD 158 Services must be authorized in POC at the DHS approved rate.
- (2) DD Eligibility/Enrollment/Update Form (DHS 0337) Requirements
 - (a) For enrollment dates prior to January 1, 2018, CDDP will complete the DDEE screen with all relevant foster care information and select the appropriate action requested. Payments for service dates prior to January 1, 2018 will continue to be made through the Community Based Care (CBC) system.

- (b) For all enrollment dates and updates beginning January 1, 2018 and after, CDDP will select the “no action needed” from the “Action” drop down in the DDEE screen. No other information will be needed.

c. Billing and Payment Procedures

- (1) DHS provides payments for DD 158 Services solely through DHS funds. DD 158 Services funding is disbursed by DHS directly to Providers of DD 158 Services at the monthly rates authorized by CDDP for the Providers. All payment rates for DD 158 Services authorized by the CDDP must meet the following requirements:
 - (a) Monthly payment rates for Individuals receiving DD 158 Services will be established through an assessment process approved by DHS and are calculated on the basis of the Individual’s residential care and service needs, the Foster Care Support Needs Assessment Profile, or the current approved Functional Needs Assessment (FNA) tool.
 - (b) All Ancillary Services (e.g., Behavior Supports) shall be authorized in DD 257 effective January 1, 2018.
- (2) The monthly rate for DD 158 Services for an Individual will be prorated for any month in which DD 158 Services are not provided to the Individual for a portion of the month or during a time when the Individual is not in the home overnight.
- (3) Effective January 1, 2018 DD 158 Services must be authorized in POC for payment to be made for DD 158.
- (4) CDDP shall submit new or updated DHS 0337 forms as outlined above under the following conditions:
 - (a) New enrollment into foster care,
 - (b) Change of address,
 - (c) Change of service element, and
 - (d) Termination from foster care.
- (5) When an Individual enters DD 158 Services, the CDDP must in a timely manner enter in POC the rate based on the Individual’s current Supplemental Nutrition Assistance Program (SNAP) functional needs assessment for foster care and attach the SNAP assessment in POC.
- (6) Payment for DD 158 Services will be made by DHS through the eXPRS Payment and Reporting System directly to the foster care provider for DD 158 Services delivered to an Individual when the Individual is in the home overnight.

3. CFDA Number(s).

In accordance with the State Controller's Oregon Accounting Manual, policy 30.40.00.102, and DHS procedure "Contractual Governance", DHS' determination is that County is a contractor.

The Catalog of Federal Domestic Assistance (CFDA) #(s) of Federal Funds to be paid through the Agreement: 93-778.

14. Effective January 1, 2018 “Service Element DD 58 Child Foster Home Services Standards and Procedures” is renumbered to DD 258 and replaced in its entirety.

Service Element DD 258 Child Foster Home Services Standards and Procedures

Effective Date: January 1, 2018
Service Name: Child Foster Homes
Service ID Code: DD 258

1. Overview.

Service Element DD 258 Child Foster Home Services (DD 258 Services) governs the delivery of residential care and services in child foster homes to Children who are less than 18 years of age with Intellectual or Developmental Disabilities (I/DD); or individuals 18 to 21 who remain in the same Child Foster Home under an approved variance. The purpose of DD 258 Services is to provide 24-hour supervision, room and board, and structure and daily activities designed to promote the physical, social, intellectual, cultural, spiritual, and emotional development of the Child.

CDDP must ensure all Children receiving DD 258 Services are eligible for Developmental Disability Services. Eligibility must be determined in accordance with OAR Chapter 411, Division 320, as such rules may be revised periodically.

2. Standards and Procedures.

a. Service Authorization

DD 258 Services must be authorized in advance by the CDDP in which the Individual is enrolled and is receiving DD 48 Case Management and Local Administration Services.

b. Plan of Care Transition

- (1) Beginning January 1, 2018 all DD 258 Services must be authorized in POC at the DHS approved rate.
- (2) DD Eligibility/Enrollment/Update Form (DHS 0337) Requirements
 - (a) For enrollment dates prior to January 1, 2018, CDDP will complete the DDEE screen with all relevant foster care information and select the appropriate action requested. Payments for service dates prior to January 1, 2018 will continue to be made through the Community Based Care (CBC) system.
 - (b) For all enrollment dates and updates beginning January 1, 2018 and after, CDDP will select the “no action needed” from the “Action” drop down in the DDEE screen. No other information will be needed.

c. Billing and Payment Procedures

- (1) DHS provides payments for DD 258 Services solely through DHS funds. DD 258 Services funding is disbursed by DHS directly to Providers of DD 258 Services at the monthly rates authorized by the CDDP for the Providers. All payment rates for DD 258 Services authorized by the CDDP must meet the following requirements:
 - (a) Monthly service rates for Children receiving DD 258 Services are based on the Child's assessed residential care and service needs and must be established using the current DHS-approved Functional Needs Assessment (FNA) tool.
 - (b) All Ancillary Services (e.g., Behavior Supports) shall be authorized in DD 257 effective January 1, 2018.
- (2) The CDDP shall not authorize DD 258 Services in excess of the monthly service rate established by the current DHS-approved FNA tool for the Child's Supplemental Nutrition Assistance Program (SNAP). Monthly service rates are individualized and are not transferable to another eligible Child.
- (3) The monthly service rate for DD 258 Services for a Child will be prorated for any month in which DD 258 Services are not provided to the Child for a portion of the month or during a time when the Child is not in the home overnight.
- (4) Effective January 1, 2018 DD 258 Services must be authorized in POC for payment to be made for DD 258.
- (5) CDDP shall submit new or updated DHS 0337 form as outlined above under the following conditions:
 - (a) New enrollment into foster care,
 - (b) Change of address,
 - (c) Change of service element, and
 - (d) Termination from foster care.
- (6) When a Child enters DD 258 Services, the CDDP must in a timely manner enter in POC the rate based on the Child's current Supplemental Nutrition Assistance Program (SNAP) functional needs assessment for foster care and attach the SNAP assessment in POC.
- (7) Payment for DD 258 Services will be made by DHS through the eXPRS Payment and Reporting System directly to the foster care provider for DD 258 Services delivered to a Child when the Child is in the home overnight.

3. CFDA Number(s).

In accordance with the State Controller's Oregon Accounting Manual, policy 30.40.00.102, and DHS procedure "Contractual Governance", DHS' determination is that County is a contractor.

The Catalog of Federal Domestic Assistance (CFDA) #(s) of Federal Funds to be paid through the Agreement: 93-778.

15. Effective January 1, 2018 “Service Element DD 151 Standards and Procedures” is amended as follows: language to be deleted or replaced is ~~struck through~~ and new language is **underlined and bold**.

Service Element DD 151 Standards and Procedures

Effective Date: ~~July 1, 2017~~ **January 1, 2018**
Program Name: **In-Home Support for Children** ~~Community Living Supports and Developmental Disabilities~~
Service ID Code: DD 151

1. Overview.

In-Home Support for Children ~~Community Living Supports and Developmental Disabilities Ancillary Services~~ are program services (DD 151 **Services**) available for individuals under 18 years of age (Children) who reside in the family home, are determined eligible for developmental disabilities services and enrolled into Case Management Services under the Community Developmental Disabilities Program (CDDP), and not receiving Family Support Services for Children (DD 150). **In-Home Support for Children** services ~~Community Living Supports and Ancillary Services~~ are intended to:

- a. Maximize independence and increase the ability of a child to engage in a life that is fully integrated into the community;
- b. Increase the ability of a family to care for their child in the family home; and
- c. Strengthen the role of the family as the primary caregiver.

2. Billing and Payment Procedures

- a. County shall draft a Plan of Care (POC) Service authorization within eXPRS upon completion of the ~~Individual's~~ **Child's** ISP;
- b. County shall add a POC service plan line for each Service authorized by County and agreed to by the ~~Individual's~~ **Child's** guardian or representative consistent with the published expenditure guidelines and within the timeframes identified in **the OARs rule**.
- c. Once the ~~Individual's~~ **Child's** guardian or his/her delegate has chosen the service Provider, County shall add the Service Prior Authorization (SPA) lines in the **Child's** POC.
- d. ~~Until such time as DHS implements time capture tools, County must review and approve or reject the PSW time sheet, progress note, and mileage log, County shall review, and approve or reject PSW submitted Services Delivered billing entries accordingly.~~

3. CFDA Number(s).

In accordance with the State Controller's Oregon Accounting Manual, policy 30.40.00.102, and DHS procedure "Contractual Governance", DHS' determination is that County is a ~~subrecipient~~ **contractor**.

The Catalog of Federal Domestic Assistance (CFDA) #(s) of Federal Funds to be paid through the Agreement: 93-778.

16. Effective January 1, 2018 “Service Element DD 156 Standards and Procedures” is replaced in its entirety.

Service Element DD 156 Standards and Procedures

Effective Date: January 1, 2018
Service Name: Room & Board and Service Level Funding - General Fund
Service ID Code: DD 156

1. Overview.

Room & Board (R&B) and Service Level Funding - General Fund are funds for assistance with the service level funding, room and board, personal incidental items, and, when authorized by ODDS, necessary allowable medical and dental expenditures (DD 156 Services), for Individuals 18 or older with Intellectual or Developmental Disabilities (I/DD), who are currently not Medicaid eligible due to the Individual being undocumented, but who are working towards United States citizenship.

2. Standards and Procedures.

a. Service Authorization

- (1) All Individuals receiving DD 156 Services must be eligible for I/DD Services with eligibility determined in accordance with OAR Chapter 411, Division 320, as such rules may be revised from time to time.
- (2) Eligibility for service level funding must be approved in advance by ODDS based on a Functional Needs Assessment Tool establishing a service level for the Individual.
- (3) Eligibility for Room & Board must include the Individual’s concurrent receipt of DD 50 Residential Facilities Services or DD 158 Adult Foster Home Services.
- (4) Eligibility for medical and/or dental needs is based on the Oregon Health Plan (OHP) approved list of medical and/or dental care and must include information supporting medical and/or dental necessity.
- (5) DD 156 Services must be approved in advance by ODDS. County must submit a request for DD 156 Services to ODDS.FundingReview@state.or.us on form 0514dd with all DHS required information and documentation, and the following information regarding Individual’s citizenship status:
 - (a) Steps Individual has taken to date in obtaining citizenship;
 - (b) Steps to be taken by the Individual to obtain citizenship during the time frame requested for DD 156 Services;

- (c) Information and details about why an Individual is unable to obtain citizenship if applicable;
 - (d) A copy of the Individual's most current Individual Support Plan (ISP), if funding for medical and/or dental expenditures is requested; and
 - (e) A methodology for calculating the funds for medical and/or dental expenditures, if applicable.
 - (f) Documentation that the Individual has been denied Citizen Alien Waived Emergent Medical (CAWEM) and Oregon Health Plan (OHP) insurance coverage if the request is for medical and/or dental expenditure funding.
- (6) County must submit the required documentation and the 0514dd form at least two weeks prior to the start date of DD 156 Services for the Individual in order for the Services to be approved by DHS and funds to be available prior to the start of the DD 156 Services. DHS will not approve retroactive requests for DD 156 Services.
- (7) DHS determines the length of time for the DD 156 Services for an Individual, and DHS may approve new or renewal requests for DD 156 Services for up to twelve consecutive months.
- (8) County must submit a request to renew DD 156 Services to DHS two weeks prior to the end of the current DHS approved time period. The County must follow steps (5) and (6) above for all renewals. The request to renew DD 156 Services for an Individual must include, but is not limited to:
- (a) Updated information about the status of the Individual's citizenship;
 - (b) Steps the Individual has taken towards citizenship since the last update or details about why an Individual is not eligible for citizenship;
 - (c) A copy of the Individual's most current Individual Support Plan (ISP), if funding for medical and/or dental expenditures is requested; and
 - (d) A methodology for calculating the funds for medical and/or dental expenditures, if applicable.
- (9) If the Individual is approved for DD 156 Services:
- (a) ODDS will issue a Funding Decision memo to the County.
 - (b) County will set up an authorization in eXPRS.
 - (c) The DD 156 Service Provider will claim reimbursement for medical and/or dental expenditures after the delivery of the service

to the Individual by the provider of the medical and/or dental service.

- (d) The claim for reimbursement must occur within 90 days from the date of the physical receipt of the medical and /or dental service provided by the DD 156 Service Provider, which is identified by date stamp, facsimile mark, or other form of post mark.

(10) If the Individual is denied DD 156 Services:

- (a) ODDS will issue a Notification of Planned Action to the Individual with a carbon copy to the County.
- (b) The Individual will have the choice to accept or appeal the ODDS denial.
- (c) If a denial is issued to an Individual, the County must notify all service Providers and follow up with the Individual to discuss whether they chose to file an appeal.

b. General Performance Requirements

- (1) The funds awarded for DD 156 Services for service level funding, R&B, and personal incidentals are equivalent to the anticipated Federal Supplemental Security Income (SSI) as defined in Code of Federal Regulations (CFR) Part 416.101 – 416.121, 416.401 – 416.435 and 416.501 - 416.665, and the Oregon Supplemental Income Program (OSIP) Manual under “Room and Board and Personal Needs Standards”. Monthly rates are subject to change to reflect federal cost-of-living or other DHS approved adjustments. These monthly rate changes do not require a request by County and approval from DHS. Any monthly rate adjustments resulting from these changes will be added by DHS to awards DHS authorized for Individuals receiving DD 156 Services.
- (2) DD 156 funds must be used for “current maintenance” costs incurred by an Individual receiving DD 156 Services, as defined in the above-referenced CFRs, the OSIP Manual, and as outlined in this Standards & Procedures (S&P). Current maintenance includes the room and board fees charged by the Provider to the Individual and costs incurred for clothing, medical care authorized by DHS, and personal comfort care for the Individual, whether provided directly by, or facilitated by, the Provider of DD 156 Services.
- (3) DD 156 funds used for an Individual’s medical and/or dental expenses must only be for necessary medical and/or dental expenditures for the Individual up to the amount authorized by DHS.

Necessary medical and/or dental expenditures are those medical and/or dental expenditures needed by the Individual as detailed in the ISP by the ISP team and as referenced in the OHP approved medical and dental costs.
- (4) DD 156 funds may be used for an Individual in a medical emergency even though the emergency situation is not included in the ISP. For purposes of

this S&P, an emergency is defined as a sudden onset of a medical and/or dental condition manifesting itself by acute symptoms of sufficient severity (including severe pain) such that the absence of immediate medical or dental attention could reasonably be expected to result in placing the Individual's health in serious jeopardy, serious impairment to bodily functions, or serious dysfunction of any bodily organ or part.

Allowable DD 156 Services for medical and/or dental expenditures due to emergency situations include:

- (a) Hospital emergency treatment, or inpatient and outpatient care, or
- (b) Emergency vision and dental services.

Documentation that the Individual is not eligible for CAWEM or that CAWEM will not cover the cost of the emergency medical situation must be submitted with the request for emergency medical coverage on form 0514dd.

- (5) The following medical services are not allowable under DD 156 Services: Anything covered by CAWEM or OHP for an Individual who is currently receiving CAWEM or OHP
- (6) Should the Individual's circumstances around Medicaid eligibility change at any time, the County shall:
 - (a) Support the Individual in applying for Medicaid.
 - (b) Support the Individual in applying for SSI.
 - (c) Enroll the Individual into the appropriate service which includes completion of a Level of Care (LOC) within one week of the Medicaid application.

c. Special Reporting Requirements

DHS may request at any time other information regarding the use of DD 156 Services or the justification of such Services. County and the Provider are required to submit the requested information within the timeframe required by DHS. DHS will hold disbursements of all DD 156 funds, until the requested information is received, if the requested information isn't received by DHS within the timeframe indicated in the DHS request.

3. Billing and Payment Procedures.

a. Room and Board and Personal Incidental Funds

- (1) R&B and personal incidental funds will be disbursed to Provider in eXPRS in a Provider Prior Authorization (PPA).
- (2) Each Individual will have a Provider Prior Authorization (PPA) created for up to twelve months in eXPRS for Room and Board payments. The timeframe for the PPA is determined by the effective date of the authorization for DD 156 Services and the timing of future SSI increases.

R&B and personal incidental funds will be released at the beginning of each month by DHS.

b. Medical Expenditures

- (1) Funds for DD 156 medical expenditures will be disbursed to Provider in eXPRS in a PPA.
- (2) DHS will create, at the beginning of each biennium, for each Individual authorized by ODDS to receive DD 156 Services, a PPA for anticipated DD 156 medical expenditure funding for three months. The initial PPA for DD 156 medical expenditures and subsequent PPAs will be released by DHS for payment to Provider.
- (3) Provider shall submit a monthly report to CAU.Invoice@state.or.us within 90 days following receipt of an invoice for the actual medical and/or dental costs incurred. This monthly report will serve as the Provider invoice for medical expenditures for DD 156 Services for the following month. This monthly medical expenditure report must include the following, at minimum:
 - (a) Individual's name;
 - (b) Individual's prime number;
 - (c) Month or timeframe for the reported DD 156 Services;
 - (d) Provider's name and eXPRS Provider number;
 - (e) Description of each medical expenditure, listed separately;
 - (f) Amount of each medical expenditure;
 - (g) Name of entity actually providing the DD 156 Service, such as the name of pharmacy, doctor, or therapist; and
 - (h) Actual date of DD 156 Service, not the date the Service was paid for by the Provider.
- (4) DHS will review all monthly medical expenditure reports submitted by Provider to verify that they are allowable medical expenditures per this S&P or are approved exceptions. DHS will reconcile DD 156 medical expenditure funds paid to Provider with the medical expenditures reported by the Provider and the invoice submitted. Any medical expenditure that is determined not to be an allowable DD 156 medical expenditure will be deducted from the total amount of the Provider's payment. Provider will be promptly notified of this change by email. DHS will complete its review and reconciliation within ten calendar days of receipt by DHS of the correctly completed Provider's medical expenditure report and invoice.

4. Settlement and Quality Assurance.

- a.** Funds for medical expenditures or other expenses not related to R&B and personal incidental funding that are not expended during a biennium are subject to

Settlement by confirming and reconciling actual medical expenditures against the DD 156 medical expenditure funds paid by DHS. Settlement for medical expenditures may occur on a monthly basis and at the end of each biennium.

- b. Provider must submit to DHS final expenditure reports and invoices for all DD 156 Services no later than 45 calendar days from the end of the biennium. County may submit a request to ODDS for an exception to extend this 45 calendar day deadline at CAU.Invoice@state.or.us. Requests for exceptions must be submitted prior to the initial 45 calendar day deadline. The original final expenditure report and invoice submission deadline can be extended one time for up to an additional 45 calendar days.
- c. DHS may conduct quality assurance reviews of the County's and Provider's adherence to this DD 156 Services S&P.

5. CFDA Number(s).

In accordance with the State Controller's Oregon Accounting Manual, policy 30.40.00.102, and DHS procedure "Contractual Governance", DHS' determination is that County is a contractor.

The Catalog of Federal Domestic Assistance (CFDA) #(s) of Federal Funds to be paid through the Agreement: 93-778.

17. Effective January 1, 2018 “Service Element DD 257 Standards and Procedures” is added to the Agreement.

Service Element DD 257 Standards and Procedures

Effective Date: January 1, 2018
Service Name: Ancillary Services
Service ID Code: DD 257

1. Overview.

Ancillary Services (DD 257 Services) are defined as those services that may be authorized as stand-alone services, separate from attendant care, relief care, skills training, or the all-inclusive rate paid to a residential program or a foster care provider.

2. Standards and Procedures.

a. Service Authorization

DD 257 Services must be prior authorized by the CDDP in which the Individual is enrolled and receiving Case Management Services in accordance with OAR Chapter 411, Division 320. This authorization must be provided and documented according to Oregon Administrative Rules, and DHS policies and procedures. CDDP shall enter all DD 257 authorizations in the Plan of Care system in eXPRS prior to start of DD 257 Services.

b. Billing and Payment Procedures

- (3) CDDP shall draft a Plan of Care service authorization within eXPRS upon completion of the Individual’s ISP.
- (4) CDDP shall add a POC service plan line for each DD 257 Service authorized by the County and agreed to by the Individual consistent with the most recent published expenditure guidelines.
- (5) Once the Individual or their delegate has chosen the DD 257 Service Provider, the County shall add the Service Prior Authorization lines in the Individual’s POC.

3. CFDA Number(s).

In accordance with the State Controller’s Oregon Accounting Manual, policy 30.40.00.102, and DHS procedure “Contractual Governance”, DHS’ determination is that County is a contractor.

The Catalog of Federal Domestic Assistance (CFDA) #(s) of Federal Funds to be paid through the Agreement: 93-778.

18. Effective January 1, 2018 Exhibit D General Terms and Conditions, Section 2. Subcontracts, paragraph a. only, is amended as follows: language to be deleted or replaced is ~~struck through~~ and new language is **underlined and bold**.
2. **Subcontracts.**
- a. Except when the Service Element Standards and Procedures expressly require the DD Service, or a portion thereof, to be delivered by County directly and subject to Section 19 of Exhibit E of this Agreement, County may use funding provided under this Agreement for DD 53 Services with local match funding, and for DD 57 and DD ~~58~~ **158** Services with general fund funding to purchase that Service, or a portion thereof, from a third person or entity (a "Subcontractor") through a contract (a "Subcontract").
19. Effective January 1, 2018 Exhibit D General Terms and Conditions, Section 3. Reporting Requirements, is amended as follows: language to be deleted or replaced is ~~struck through~~ and new language is **underlined and bold**.
3. **Reporting Requirements.** County shall report the FTE utilized for Service Elements DD 02, DD 48, and DD 55, if applicable, to DHS semi-annually when requested by DHS. ~~FTE reporting submitted as part of the Biennial Plan will be considered semi-annual FTE reporting for the period in which the Biennial Plan is submitted.~~ DHS may prescribe the format to be used for this reporting.
20. Effective January 1, 2018 Exhibit E Standard Terms and Conditions, Section 24. Notice, is amended as follows: language to be deleted or replaced is ~~struck through~~ and new language is **underlined and bold**.
24. **Notice.** Except as otherwise expressly provided in this Agreement, any communications between the parties hereto or notices to be given hereunder shall be given in writing by personal delivery, facsimile, or mailing the same, postage prepaid to County or DHS at the address or number set forth in this Agreement, or to such other addresses or numbers as either party may indicate pursuant to this section. Any communication or notice so addressed and mailed by regular mail shall be deemed received and effective five calendar days after the date of mailing. Any communication or notice delivered by facsimile shall be deemed received and effective on the day the transmitting machine generates a receipt of the successful transmission, if transmission was during normal business hours of the recipient, or on the next business day if transmission was outside normal business hours of the recipient. Notwithstanding the foregoing, to be effective against the other party, any notice transmitted by facsimile must be confirmed by telephone notice to the other party. Any communication or notice given by personal delivery shall be deemed effective when actually delivered to the addressee.

DHS: Office of Contracts & Procurement
250 Winter St NE, Room 306
635 Capitol Street NE Suite 350
Salem, OR 97301
Telephone: 503-945-5818
Facsimile: 503-378-4324

COUNTY: {Entity Name}
{Contact Name (optional)}
{Street Address}
{City, State Zip}
Telephone:
Facsimile:

21. Effective January 1, 2018 Exhibit H “Reserved” is renamed to “Conducting Oregon Needs Assessment” and added as follows.

**INTERGOVERNMENTAL GRANT AGREEMENT
FOR THE FINANCING OF
COMMUNITY
DEVELOPMENTAL DISABILITY SERVICES**

**EXHIBIT H
CONDUCTING OREGON NEEDS ASSESSMENT**

1. ODDS must ensure that all Individuals enrolled in Services and receiving Services, in addition to Case Management Services, are assessed using the Oregon Needs Assessment (ONA), in addition to any other Functional Needs Assessment (FNA) requirement. The CDDP shall work with ODDS to ensure that this requirement is met for all the Individuals enrolled with their CDDP.
2. Assessments will be performed per ODDS requirements and training coordinated through the state assessment unit. The following special conditions apply to the ONA.
3. **Assessor Requirements.**
 - a. No part of this Exhibit H shall be implemented until the CDDP is notified in writing by ODDS that conducting ONAs must be implemented.
 - b. CDDP will ensure that enough qualified assessors will be available to perform the task. Qualified assessors must meet the qualifications listed in OAR 411-415-0040(1).

- c. CDDP will ensure that all qualified assessors receive required training from state assessment team members no later than 30 calendar days from implementation of the ONA or within 30 calendar days of hire, whichever is later. Additional training requirements may be added to ensure continuing education for assessors. CDDP agrees to make assessors available for additional training as required. Training includes, but is not limited to:
 - (1) Specifications for how to complete the ONA.
 - (2) Professional standards for conducting assessments and Individual interactions.
- d. Assessors may not perform an ONA on any Individual they serve or have served as a Case Manager in the previous six months from the date of hire as assessor or transition to assessor role, whichever is earlier.

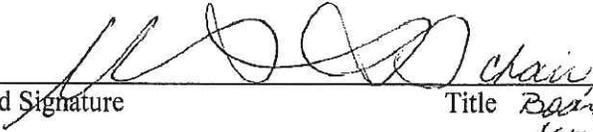
4. Special Payment Provisions.

- a. CDDP will be paid \$50.00 per initial ONA performed within one calendar year of implementation or the end of this Agreement, whichever comes first.
- b. CDDP will be paid for the initial ONA only. CDDP will not be paid for reassessments or if the Individual was assessed at another CDDP or a Brokerage.
- c. ODDS will pull a monthly report, by assessor, to determine the number of initial ONAs performed per CDDP. Payment for initial ONAs will be sent to CDDP no later than 45 calendar days from the end of the applicable billing month.

EACH PARTY, BY EXECUTION OF THIS AMENDMENT, HEREBY
ACKNOWLEDGES THAT IT HAS READ THIS AMENDMENT, UNDERSTANDS IT,
AND AGREES TO BE BOUND BY ITS TERMS AND CONDITIONS.

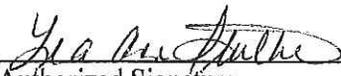
Yamhill County

By:


Authorized Signature Title *Chair* Board of Commissioners Date *6/28/18*

State of Oregon, acting by and through its Department of Human Services

By:


Authorized Signature Title *Lea Ann Stutheit, ODDS COO* Date *7/13/18*

Approved for Legal Sufficiency:

/s/ Mark Williams

May 31, 2018

Authorized Signature Title Date

Accepted by Yamhill County
Board of Commissioners on
6/28/18 by Board Order
18-224