

interChange Provider Important Message

To: Home and Community Based Providers

Subject: Connecticut Home and Community Based Services (HCBS) American Rescue Plan Act (ARPA) Program: Strengthening Quality - Provider Value Based Payment (VBP) Initiative.

To improve Medicaid client health outcomes the Connecticut Home and Community-Based Services (HCBS) American Rescue Plan Act (ARPA) Program aims to create a value-based fee-for-service delivery model by providing whole-person care through incentive payments to HCBS providers based on clearly defined outcomes.

Funded by ARPA, the initiative will span three years with specific quarterly benchmarks. The first benchmark is due February 1, 2022. To meet this benchmark, HCBS providers will execute data sharing agreements with Connecticut's Health Information Exchange (HIE) [Connie](#) and participate in the DSS-provided *Trauma Informed Care Racial Equity Lens Initiative* training. HCBS providers who meet both benchmarks by February 1, 2022, will receive a 1% supplemental payment based on claims paid from July 1, 2021, through February 28, 2022.

To get started HCBS Providers will need to complete two tasks to receive the incentive payment:

1. Execute a data sharing agreement with Connie, Connecticut's Health Information Exchange (HIE) by no later than February 1, 2022.
2. Enroll their Supervisors and Managers into the *Trauma Informed Care Racial Equity Lens Initiative* training and complete the first course by no later than February 1, 2022.

***** Getting Started with Connie *****

To participate, HCBS organizations will be required to sign a Simple Data Sharing Organization Agreement (SDSOA) with Connie by no later than February 1, 2022. The formal agreement will be provided through DocuSign in early January for signature. To receive the formal agreement, each interested HCBS organization will need to complete and submit the online [Interest in Connecting Form](#). Submitting this form does not obligate you to participate.



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******* Getting Started with Training *******

To enroll in the *Trauma Informed Care Racial Equity Lens Initiative* training, LTSS organizations will need to complete the attached [LearnCenter Personnel Data - HCBS ARPA Training](#) Form and submit it to the DSS Office of Organizational & Skill Development (OSD) care of Ana Allendorf and Eric Boisvert at dsslearncentersupport@ct.gov. The initial enrollment of managers and supervisors should be submitted by November 30, 2021, and completed by February 1, 2022, to be VBP eligible.

As managers, supervisors and employees complete the first course of the *Trauma Informed Care Racial Equity Lens Initiative* training program, a report will be sent to DSS for processing.

******* Important Dates *******

November 30, 2021	LTSS organizations supervisors and managers enrolled in the Trauma Informed Care Racial Equity Lens Initiative.
December 7, 2021	Initiative informational webinar. register here
December 9, 2021	Initiative informational webinar (repeated). register here
December 15, 2021	Self-paced HCBS ARPA Racial Equity Training begins.
December 17, 2021	Collect Interest in Connecting form [Insert link] from LTSS.
February 1, 2022	Data Sharing Agreement submitted.
February 1, 2022	Determine data sharing capacity building needs of participants.
February 1, 2022	Last day for supervisors and managers to complete Self-paced HCBS ARPA Racial Equity Training.
March 1, 2022	Define data sharing use case and initiative measures.
March 1, 2022	LTSS organizations employees enrolled in the Trauma Informed Care Racial Equity Lens Initiative.
April 1, 2022	Provide data sharing expectations for year 2 participation.
May 1, 2022	Begin connecting LTSS participants for data sharing.
February 1, 2023	All LTSS organizations interested in continuing to participate are connected to Connie and able to access the appropriate data defined in the use case.
February 1, 2023, through 2024	Monthly data collection on LTSS organization utilization rates and to be defined outcome measures.

Providers include those agencies that provide direct support.

Excluded providers include: Assistive Technology; Environmental Accessibility Modifications, Personal Response System, Skilled Chore, Specialized Medical Equipment, Individual Goods and Services, and all Self-Directed Services.

