

Appendix J: Cost Neutrality Demonstration

J-1: Composite Overview and Demonstration of Cost-Neutrality Formula

Composite Overview. Complete the fields in Cols. 3, 5 and 6 in the following table for each waiver year. The fields in Cols. 4, 7 and 8 are auto-calculated based on entries in Cols 3, 5, and 6. The fields in Col. 2 are auto-calculated using the Factor D data from the J-2-d Estimate of Factor D tables. Col. 2 fields will be populated ONLY when the Estimate of Factor D tables in J-2-d have been completed.

Level(s) of Care: ICF/IID

| Col. 1 | Col. 2 | Col. 3 | Col. 4 | Col. 5 | Col. 6 | Col. 7 | Col. 8 |
|--------|----------|-----------|-------------|-----------|-----------|-------------|---------------------------------|
| Year | Factor D | Factor D' | Total: D+D' | Factor G | Factor G' | Total: G+G' | Difference (Col 7 less Column4) |
| 1 | 32471.87 | 9651.52 | 42123.39 | 192254.89 | 6598.05 | 198852.94 | 156729.55 |
| 2 | 42587.25 | 13091.00 | 55678.25 | 211761.00 | 11650.00 | 223411.00 | 167732.75 |
| 3 | 52574.51 | 13483.00 | 66057.51 | 214937.00 | 11999.00 | 226936.00 | 160878.49 |
| 4 | 54750.69 | 13888.00 | 68638.69 | 218161.00 | 12359.00 | 230520.00 | 161881.31 |
| 5 | 56936.90 | 14304.00 | 71240.90 | 221434.00 | 12730.00 | 234164.00 | 162923.10 |

Appendix J: Cost Neutrality Demonstration

J-2: Derivation of Estimates (1 of 9)

a. Number Of Unduplicated Participants Served. Enter the total number of unduplicated participants from Item B-3-a who will be served each year that the waiver is in operation. When the waiver serves individuals under more than one level of care, specify the number of unduplicated participants for each level of care:

Table: J-2-a: Unduplicated Participants

| Waiver Year | Total Unduplicated Number of Participants (from Item B-3-a) | Distribution of Unduplicated Participants by Level of Care (if applicable) | |
|-------------|--|---|-----|
| | | Level of Care: | |
| | | ICF/IID | |
| Year 1 | 683 | | 683 |
| Year 2 | 683 | | 683 |
| Year 3 | 590 | | 590 |
| Year 4 | 606 | | 606 |
| Year 5 | 622 | | 622 |

Appendix J: Cost Neutrality Demonstration

J-2: Derivation of Estimates (2 of 9)

b. Average Length of Stay. Describe the basis of the estimate of the average length of stay on the waiver by participants in item J-2-a.

The average length of stay for the OBRA waiver, as outlined in Appendix J-2, was projected based on a review of historical Medicaid waiver enrollee durational patterns for individuals enrolled in Office of Long-Term Living's (OLTL's) OBRA waiver.

Starting January 1, 2018, the Community HealthChoices (CHC) program began implementation (effective January 1, 2018 in the Southwest Zone, effective January 1, 2019 in the Southeast Zone and effective January 1, 2020 in the Lehigh/Capital, Northeast and Northwest Zones). As such, portions of the OBRA waiver-eligible population became eligible for the CHC waiver over the SFY 2018 through SFY 2020 OBRA waiver projection periods, causing unpredictable average length of stay patterns. To reflect the average length of stay after the statewide CHC integration as of January 1, 2020, members that ultimately enrolled into the CHC waiver were removed from average length of stay calculations.

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J-2: Derivation of Estimates (3 of 9)

c. Derivation of Estimates for Each Factor. Provide a narrative description for the derivation of the estimates of the following factors.

i. Factor D Derivation. The estimates of Factor D for each waiver year are located in Item J-2-d. The basis and methodology for these estimates is as follows:

Appendix J-2 Factor D projections were derived from actual Medicaid waiver user, service utilization and cost data from July 2018 – June 2019. The data was limited to participants within the OBRA waiver, removing members that became eligible for and transitioned to the CHC waiver. Additionally, the data was adjusted to reflect that certain Home Adaptations, such as stair lifts/glides and accessibility ramps, are expected to be covered under the State Plan Amendment during Waiver Years 1-5. This resulted in a reduction in the estimated Home Adaptation user count.

For Waiver Years 1 - 5, unit costs were trended forward for all services using a 1.0% annual inflation factor. Unit per user values were trended at 2.0% annually for all services except personal assistance, where units were trended at 4.0% annually. These factors were based on a review of historical utilization and cost increases within the Commonwealth of Pennsylvania.

Effective January 1, 2022, OLTL will implement a fee increase for personal assistance services of 8.0%. This change is reflected for 6 months of SFY 2022 and for the full year from SFY 2023 through SFY 2026 (i.e., Waiver Years 2–5), and is in addition to the Factor D inflation factor assumptions described above.

ii. Factor D' Derivation. The estimates of Factor D' for each waiver year are included in Item J-1. The basis of these estimates is as follows:

Factor D' was derived from actual July 2018 – June 2019 Medicaid acute medical and behavioral health service costs for participants within the OBRA waiver, excluding members that became eligible for and transitioned to the CHC waiver. Continued growth in utilization of acute care services by the OBRA population as well as the limitation to individuals who remained in the OBRA waiver after the statewide implementation of CHC are factors in the overall increase in Factor D' values compared to the prior SFY 2017 – SFY 2021 OBRA waiver projections.

Factor D' was calculated by dividing the actual costs for these services by the count of unique OBRA waiver participants. The costs of prescribed drugs that will be furnished to Medicare/Medicaid dual eligibles under the provisions of Part D have been excluded. Per capita costs were trended forward using a 3.0% annual inflation factor. This factor was based on a review of historical cost increases for similar services within the Commonwealth of Pennsylvania.

iii. Factor G Derivation. The estimates of Factor G for each waiver year are included in Item J-1. The basis of these estimates is as follows:

Factor G was derived from a review of July 2018 – June 2019 Medicaid nursing facility service utilization and cost data for individuals identified as being in an Intermediate Care Facility for Persons with an Other Related Condition (ICF/ORC), whom OLTL determined represented a comparable peer group to OBRA waiver participants. The peer group does not include short-term nursing facility stays less than 100 days, or residents admitted to nursing facilities for short-term admissions, resulting in a small number of ICF/ORC residents and volatile claims cost. For Waiver Years 1-5, costs were trended forward using a 1.5% annual inflation factor. This factor was based on a review of historical cost increases for nursing facility services.

iv. Factor G' Derivation. The estimates of Factor G' for each waiver year are included in Item J-1. The basis of these estimates is as follows:

For the ICF/ORC individuals whom OLTL determined represent a comparable peer group to OBRA waiver participants (as mentioned in Factor G), Factor G' was derived by analyzing these individuals' associated non-nursing facility Medicaid service utilization and costs during the time period from July 2018 – June 2019. As noted in Factor G, this comparable peer group is comprised of a small number of residents which can result in volatile claim costs. The costs of prescribed drugs that will be furnished to Medicare/Medicaid dual eligibles under the provisions of Part D have been excluded. These costs were trended forward using a 3.0% inflation rate. This factor was based on a review of historical cost increases for similar services within the Commonwealth of Pennsylvania.

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J-2: Derivation of Estimates (4 of 9)

Component management for waiver services. If the service(s) below includes two or more discrete services that are reimbursed separately, or is a bundled service, each component of the service must be listed. Select “*manage components*” to add these components.

| Waiver Services | |
|--|--|
| Adult Daily Living | |
| Employment Skills Development | |
| Job Coaching (Intensive and Extended Follow-along) | |
| Personal Assistance Services | |
| Residential Habilitation Services | |
| Respite | |
| Service Coordination | |
| Structured Day Habilitation Services | |
| Behavior Therapy Services | |
| Nursing Services | |
| Occupational Therapy | |
| Physical Therapy Services | |
| Specialized Medical Equipment and Supplies | |
| Speech and Language Therapy Services | |
| Assistive Technology | |
| Benefits Counseling | |
| Career Assessment | |
| Cognitive Rehabilitation Therapy Services | |
| Community Integration | |
| Community Transition Services | |
| Counseling Services | |
| Home Adaptations | |
| Job Finding | |
| Non-Medical Transportation | |

| | |
|------------------------------------|--|
| Waiver Services | |
| Nutritional Consultation | |
| Personal Emergency Response System | |
| Vehicle Modifications | |

Appendix J: Cost Neutrality Demonstration

J-2: Derivation of Estimates (5 of 9)

d. Estimate of Factor D.

i. Non-Concurrent Waiver. Complete the following table for each waiver year. Enter data into the Unit, # Users, Avg. Units Per User, and Avg. Cost/Unit fields for all the Waiver Service/Component items. Select Save and Calculate to automatically calculate and populate the Component Costs and Total Costs fields. All fields in this table must be completed in order to populate the Factor D fields in the J-1 Composite Overview table.

Waiver Year: Year 1

| Waiver Service/Component | Unit | # Users | Avg. Units Per User | Avg. Cost/ Unit | Component Cost | Total Cost |
|--|----------|---------|---------------------|-----------------|----------------|--------------------|
| Adult Daily Living Total: | | | | | | 160631.82 |
| Basic Half Day | Half Day | 4 | 174.00 | 58.17 | 40486.32 | |
| Enhanced Half Day | Half Day | 1 | 1.00 | 37.51 | 37.51 | |
| Enhanced Day | Full Day | 2 | 3.18 | 75.01 | 477.06 | |
| Basic Day | Full Day | 17 | 115.99 | 60.67 | 119630.93 | |
| Employment Skills Development Total: | | | | | | 317521.40 |
| Employment Skills Development | 15 Min | 20 | 2359.00 | 6.73 | 317521.40 | |
| Job Coaching (Intensive and Extended Follow-along) Total: | | | | | | 144459.72 |
| Job Coaching (Intensive and Extended Follow-along) | 15 Min | 18 | 739.00 | 10.86 | 144459.72 | |
| Personal Assistance Services Total: | | | | | | 10638932.07 |
| Agency | 15 Min | 232 | 7658.00 | 4.85 | 8616781.60 | |
| Participant-Directed | 15 Min | 80 | 7242.00 | 3.45 | 1998792.00 | |
| CSLA | 15 Min | 2 | 2312.72 | 5.05 | 23358.47 | |
| Residential Habilitation Services Total: | | | | | | 3932096.55 |
| GRAND TOTAL: | | | | | | 22178290.11 |
| Total Estimated Unduplicated Participants: | | | | | | 683 |
| Factor D (Divide total by number of participants): | | | | | | 32471.87 |
| Average Length of Stay on the Waiver: | | | | | | 269 |

| Waiver Service/ Component | Unit | # Users | Avg. Units Per User | Avg. Cost/ Unit | Component Cost | Total Cost |
|--|----------|---------|---------------------|-----------------|-------------------|------------|
| Residential Habilitation Enhanced 2:1 | Hour | 3 | 352.68 | 19.62 | 20758.74 | |
| Residential Habilitation Enhanced 1:1 | Hour | 16 | 1653.00 | 19.75 | 522348.00 | |
| Residential Habilitation Unlicensed | Per Diem | 23 | 327.00 | 269.93 | 2030143.53 | |
| Residential Habilitation Licensed | Per Diem | 18 | 297.00 | 254.18 | 1358846.28 | |
| Respite Total: | | | | | | 21661.88 |
| Participant-Directed | 15 Min | 3 | 838.00 | 3.78 | 9502.92 | |
| Agency | 15 Min | 4 | 674.00 | 4.51 | 12158.96 | |
| Service Coordination Total: | | | | | | 1490579.20 |
| Service Coordination | 15 Min | 683 | 110.00 | 19.84 | 1490579.20 | |
| Structured Day Habilitation Services Total: | | | | | | 1015721.27 |
| Structured Day Habilitation - Enhanced 1:1 | Hour | 17 | 46.00 | 19.62 | 15342.84 | |
| Structured Day Habilitation | Hour | 35 | 827.00 | 34.56 | 1000339.20 | |
| Structured Day Habilitation - Enhanced 2:1 | Hour | 1 | 1.00 | 39.23 | 39.23 | |
| Behavior Therapy Services Total: | | | | | | 205592.31 |
| Behavior Therapy Services | 15 Min | 29 | 341.00 | 20.79 | 205592.31 | |
| Nursing Services Total: | | | | | | 2674889.14 |
| Nursing Services | 15 Min | 34 | 6391.00 | 12.31 | 2674889.14 | |
| Occupational Therapy Total: | | | | | | 6450.87 |
| Occupational Therapy | 15 Min | 3 | 101.00 | 21.29 | 6450.87 | |
| Physical Therapy Services Total: | | | | | | 303.00 |
| Physical Therapy Services | 15 Min | 1 | 15.00 | 20.20 | 303.00 | |
| Specialized Medical Equipment and Supplies Total: | | | | | | 1956.96 |
| Specialized Medical | | | | | 1956.96 | |
| GRAND TOTAL: | | | | | 22178290.11 | |
| Total Estimated Unduplicated Participants: | | | | | 683 | |
| Factor D (Divide total by number of participants): | | | | | 32471.87 | |
| Average Length of Stay on the Waiver: | | | | | | 269 |

| Waiver Service/ Component | Unit | # Users | Avg. Units Per User | Avg. Cost/ Unit | Component Cost | Total Cost |
|---|----------------|---------|---------------------|-----------------|----------------|-------------|
| Equipment and Supplies | Per Purchase | 9 | 4.00 | 54.36 | | |
| Speech and Language Therapy Services Total: | | | | | | 629.88 |
| Speech and Language Therapy Services | 15 Min | 1 | 29.00 | 21.72 | 629.88 | |
| Assistive Technology Total: | | | | | | 801.43 |
| Assistive Technology | Per Purchase | 1 | 1.33 | 602.58 | 801.43 | |
| Benefits Counseling Total: | | | | | | 1331.10 |
| Benefits Counseling | 15 Min | 9 | 15.00 | 9.86 | 1331.10 | |
| Career Assessment Total: | | | | | | 12.67 |
| Career Assessment | 15 Min | 1 | 1.00 | 12.67 | 12.67 | |
| Cognitive Rehabilitation Therapy Services Total: | | | | | | 953100.00 |
| Cognitive Rehabilitation Therapy Services | 15 Min | 75 | 900.00 | 14.12 | 953100.00 | |
| Community Integration Total: | | | | | | 17553.36 |
| Community Integration | 15 Min | 4 | 671.00 | 6.54 | 17553.36 | |
| Community Transition Services Total: | | | | | | 2883.35 |
| Community Transition Services | Per Purchase | 1 | 2.24 | 1287.21 | 2883.35 | |
| Counseling Services Total: | | | | | | 206.32 |
| Counseling Services | 15 Min | 1 | 17.44 | 11.83 | 206.32 | |
| Home Adaptations Total: | | | | | | 340588.30 |
| Home Adaptations | Per Adaptation | 19 | 1.00 | 17925.70 | 340588.30 | |
| Job Finding Total: | | | | | | 11291.10 |
| Job Finding | 15 Min | 5 | 183.00 | 12.34 | 11291.10 | |
| Non-Medical Transportation Total: | | | | | | 87652.18 |
| Non-Medical Transportation | Per Trip | 47 | 22.00 | 84.77 | 87652.18 | |
| GRAND TOTAL: | | | | | | 22178290.11 |
| Total Estimated Unduplicated Participants: | | | | | | 683 |
| Factor D (Divide total by number of participants): | | | | | | 32471.87 |
| Average Length of Stay on the Waiver: | | | | | | 269 |

| Waiver Service/Component | Unit | # Users | Avg. Units Per User | Avg. Cost/ Unit | Component Cost | Total Cost |
|--|----------------|---------|---------------------|-----------------|----------------|-------------|
| Nutritional Consultation Total: | | | | | | 13.77 |
| Nutritional Consultation | 15 Min | 1 | 1.00 | 13.77 | 13.77 | |
| Personal Emergency Response System Total: | | | | | | 47992.56 |
| Personal Emergency Response System | Monthly | 147 | 8.00 | 40.81 | 47992.56 | |
| Vehicle Modifications Total: | | | | | | 103437.90 |
| Vehicle Modifications | Per Adaptation | 3 | 1.00 | 34479.30 | 103437.90 | |
| GRAND TOTAL: | | | | | | 22178290.11 |
| Total Estimated Unduplicated Participants: | | | | | | 683 |
| Factor D (Divide total by number of participants): | | | | | | 32471.87 |
| Average Length of Stay on the Waiver: | | | | | | 269 |

Appendix J: Cost Neutrality Demonstration

J-2: Derivation of Estimates (6 of 9)

d. Estimate of Factor D.

i. Non-Concurrent Waiver. Complete the following table for each waiver year. Enter data into the Unit, # Users, Avg. Units Per User, and Avg. Cost/Unit fields for all the Waiver Service/Component items. Select Save and Calculate to automatically calculate and populate the Component Costs and Total Costs fields. All fields in this table must be completed in order to populate the Factor D fields in the J-1 Composite Overview table.

Waiver Year: Year 2

| Waiver Service/Component | Unit | # Users | Avg. Units Per User | Avg. Cost/ Unit | Component Cost | Total Cost |
|--|----------|---------|---------------------|-----------------|----------------|-------------|
| Adult Daily Living Total: | | | | | | 133865.72 |
| Basic Half Day | Half Day | 1 | 93.84 | 30.20 | 2833.97 | |
| Enhanced Half Day | Half Day | 1 | 1.02 | 37.89 | 38.65 | |
| Enhanced Day | Full Day | 2 | 3.25 | 75.76 | 492.44 | |
| Basic Day | Full Day | 18 | 118.31 | 61.28 | 130500.66 | |
| Employment Skills Development Total: | | | | | | 725034.00 |
| Employment Skills Development | 15 Min | 34 | 3113.07 | 6.85 | 725034.00 | |
| Job Coaching (Intensive and Extended Follow-along) Total: | | | | | | 520691.85 |
| GRAND TOTAL: | | | | | | 29087092.35 |
| Total Estimated Unduplicated Participants: | | | | | | 683 |
| Factor D (Divide total by number of participants): | | | | | | 42587.25 |
| Average Length of Stay on the Waiver: | | | | | | 339 |

| Waiver Service/ Component | Unit | # Users | Avg. Units Per User | Avg. Cost/ Unit | Component Cost | Total Cost |
|--|----------|---------|---------------------|-----------------|-------------------|-------------|
| Job Coaching (Intensive and Extended Follow- along) | 15 Min | 32 | 1494.18 | 10.89 | 520691.85 | |
| Personal Assistance Services Total: | | | | | | 12284398.95 |
| Agency | 15 Min | 207 | 7611.60 | 5.26 | 8287662.31 | |
| Participant-Directed | 15 Min | 125 | 8447.30 | 3.76 | 3970231.00 | |
| CSLA | 15 Min | 2 | 2405.23 | 5.51 | 26505.63 | |
| Residential Habilitation Services Total: | | | | | | 6119243.77 |
| Residential Habilitation Enhanced 2:1 | Hour | 4 | 359.74 | 19.82 | 28520.19 | |
| Residential Habilitation Enhanced 1:1 | Hour | 18 | 2841.19 | 19.99 | 1022316.99 | |
| Residential Habilitation Unlicensed | Per Diem | 35 | 306.63 | 275.04 | 2951743.03 | |
| Residential Habilitation Licensed | Per Diem | 26 | 315.69 | 257.88 | 2116663.57 | |
| Respite Total: | | | | | | 31739.70 |
| Participant-Directed | 15 Min | 7 | 1046.44 | 3.91 | 28641.06 | |
| Agency | 15 Min | 2 | 242.46 | 6.39 | 3098.64 | |
| Service Coordination Total: | | | | | | 1111842.73 |
| Service Coordination | 15 Min | 569 | 96.83 | 20.18 | 1111842.73 | |
| Structured Day Habilitation Services Total: | | | | | | 1893217.43 |
| Structured Day Habilitation - Enhanced 1:1 | Hour | 12 | 224.37 | 19.82 | 53364.16 | |
| Structured Day Habilitation | Hour | 60 | 878.36 | 34.91 | 1839812.86 | |
| Structured Day Habilitation - Enhanced 2:1 | Hour | 1 | 1.02 | 39.62 | 40.41 | |
| Behavior Therapy Services Total: | | | | | | 507449.46 |
| Behavior Therapy Services | 15 Min | 46 | 525.31 | 21.00 | 507449.46 | |
| Nursing Services Total: | | | | | | 1835356.22 |
| GRAND TOTAL: | | | | | 29087092.35 | |
| Total Estimated Unduplicated Participants: | | | | | 683 | |
| Factor D (Divide total by number of participants): | | | | | 42587.25 | |
| Average Length of Stay on the Waiver: | | | | | 339 | |

| Waiver Service/ Component | Unit | # Users | Avg. Units Per User | Avg. Cost/ Unit | Component Cost | Total Cost |
|---|--------------|---------|---------------------|-----------------|-------------------|-------------|
| Nursing Services | 15 Min | 26 | 6192.16 | 11.40 | 1835356.22 | |
| Occupational Therapy Total: | | | | | | 26180.55 |
| Occupational Therapy | 15 Min | 9 | 135.30 | 21.50 | 26180.55 | |
| Physical Therapy Services Total: | | | | | | 18179.33 |
| Physical Therapy Services | 15 Min | 4 | 261.95 | 17.35 | 18179.33 | |
| Specialized Medical Equipment and Supplies Total: | | | | | | 7141.31 |
| Specialized Medical Equipment and Supplies | Per Purchase | 12 | 5.72 | 104.04 | 7141.31 | |
| Speech and Language Therapy Services Total: | | | | | | 5188.37 |
| Speech and Language Therapy Services | 15 Min | 1 | 236.48 | 21.94 | 5188.37 | |
| Assistive Technology Total: | | | | | | 821.61 |
| Assistive Technology | Per Purchase | 1 | 1.35 | 608.60 | 821.61 | |
| Benefits Counseling Total: | | | | | | 1455.73 |
| Benefits Counseling | 15 Min | 7 | 18.94 | 10.98 | 1455.73 | |
| Career Assessment Total: | | | | | | 1911.81 |
| Career Assessment | 15 Min | 4 | 37.34 | 12.80 | 1911.81 | |
| Cognitive Rehabilitation Therapy Services Total: | | | | | | 3244429.50 |
| Cognitive Rehabilitation Therapy Services | 15 Min | 140 | 1625.14 | 14.26 | 3244429.50 | |
| Community Integration Total: | | | | | | 176964.82 |
| Community Integration | 15 Min | 19 | 1390.14 | 6.70 | 176964.82 | |
| Community Transition Services Total: | | | | | | 2977.21 |
| Community Transition Services | Per Purchase | 1 | 2.29 | 1300.09 | 2977.21 | |
| Counseling Services Total: | | | | | | 212.59 |
| Counseling Services | | | | | 212.59 | |
| GRAND TOTAL: | | | | | | 29087092.35 |
| Total Estimated Unduplicated Participants: | | | | | | 683 |
| Factor D (Divide total by number of participants): | | | | | | 42587.25 |
| Average Length of Stay on the Waiver: | | | | | | 339 |

| Waiver Service/Component | Unit | # Users | Avg. Units Per User | Avg. Cost/ Unit | Component Cost | Total Cost |
|--|----------------|---------|---------------------|-----------------|----------------|-------------|
| | 15 Min | 1 | 17.79 | 11.95 | | |
| Home Adaptations Total: | | | | | | 79020.24 |
| Home Adaptations | Per Adaptation | 6 | 1.24 | 10621.00 | 79020.24 | |
| Job Finding Total: | | | | | | 5866.79 |
| Job Finding | 15 Min | 5 | 94.17 | 12.46 | 5866.79 | |
| Non-Medical Transportation Total: | | | | | | 289928.57 |
| Non-Medical Transportation | Per Trip | 118 | 28.66 | 85.73 | 289928.57 | |
| Nutritional Consultation Total: | | | | | | 14.19 |
| Nutritional Consultation | 15 Min | 1 | 1.02 | 13.91 | 14.19 | |
| Personal Emergency Response System Total: | | | | | | 57571.45 |
| Personal Emergency Response System | Monthly | 148 | 10.31 | 37.73 | 57571.45 | |
| Vehicle Modifications Total: | | | | | | 6388.46 |
| Vehicle Modifications | Per Adaptation | 2 | 2.16 | 1478.81 | 6388.46 | |
| GRAND TOTAL: | | | | | | 29087092.35 |
| Total Estimated Unduplicated Participants: | | | | | | 683 |
| Factor D (Divide total by number of participants): | | | | | | 42587.25 |
| Average Length of Stay on the Waiver: | | | | | | 339 |

Appendix J: Cost Neutrality Demonstration

J-2: Derivation of Estimates (7 of 9)

d. Estimate of Factor D.

i. Non-Concurrent Waiver. Complete the following table for each waiver year. Enter data into the Unit, # Users, Avg. Units Per User, and Avg. Cost/Unit fields for all the Waiver Service/Component items. Select Save and Calculate to automatically calculate and populate the Component Costs and Total Costs fields. All fields in this table must be completed in order to populate the Factor D fields in the J-1 Composite Overview table.

Waiver Year: Year 3

| Waiver Service/Component | Unit | # Users | Avg. Units Per User | Avg. Cost/ Unit | Component Cost | Total Cost |
|--|----------|---------|---------------------|-----------------|----------------|-------------|
| Adult Daily Living Total: | | | | | | 137905.75 |
| Basic Half Day | Half Day | 1 | 95.72 | 30.50 | 2919.46 | |
| GRAND TOTAL: | | | | | | 31018963.76 |
| Total Estimated Unduplicated Participants: | | | | | | 590 |
| Factor D (Divide total by number of participants): | | | | | | 52574.51 |
| Average Length of Stay on the Waiver: | | | | | | 339 |

| Waiver Service/ Component | Unit | # Users | Avg. Units Per User | Avg. Cost/ Unit | Component Cost | Total Cost |
|---|----------|---------|---------------------|-----------------|-------------------|-------------|
| Enhanced Half Day | Half Day | 1 | 1.04 | 38.26 | 39.79 | |
| Enhanced Day | Full Day | 2 | 3.31 | 76.52 | 506.56 | |
| Basic Day | Full Day | 18 | 120.68 | 61.89 | 134439.93 | |
| Employment Skills Development Total: | | | | | | 747094.00 |
| Employment Skills Development | 15 Min | 34 | 3175.34 | 6.92 | 747094.00 | |
| Job Coaching (Intensive and Extended Follow- along) Total: | | | | | | 553233.78 |
| Job Coaching (Intensive and Extended Follow- along) | 15 Min | 33 | 1524.06 | 11.00 | 553233.78 | |
| Personal Assistance Services Total: | | | | | | 13245633.24 |
| Agency | 15 Min | 212 | 7916.06 | 5.31 | 8911267.06 | |
| Participant-Directed | 15 Min | 129 | 8785.19 | 3.80 | 4306500.14 | |
| CSLA | 15 Min | 2 | 2501.44 | 5.57 | 27866.04 | |
| Residential Habilitation Services Total: | | | | | | 6474744.36 |
| Residential Habilitation Enhanced 2:1 | Hour | 4 | 366.93 | 20.01 | 29369.08 | |
| Residential Habilitation Enhanced 1:1 | Hour | 18 | 2898.02 | 20.19 | 1053198.43 | |
| Residential Habilitation Unlicensed | Per Diem | 36 | 312.76 | 277.79 | 3127737.61 | |
| Residential Habilitation Licensed | Per Diem | 27 | 322.00 | 260.46 | 2264439.24 | |
| Respite Total: | | | | | | 32708.03 |
| Participant-Directed | 15 Min | 7 | 1067.37 | 3.95 | 29512.78 | |
| Agency | 15 Min | 2 | 247.31 | 6.46 | 3195.25 | |
| Service Coordination Total: | | | | | | 1177565.57 |
| Service Coordination | 15 Min | 585 | 98.77 | 20.38 | 1177565.57 | |
| Structured Day Habilitation Services | | | | | | 2017629.99 |
| GRAND TOTAL: | | | | | | 31018963.76 |
| Total Estimated Unduplicated Participants: | | | | | | 590 |
| Factor D (Divide total by number of participants): | | | | | | 52574.51 |
| Average Length of Stay on the Waiver: | | | | | | 339 |

| Waiver Service/ Component | Unit | # Users | Avg. Units Per User | Avg. Cost/ Unit | Component Cost | Total Cost |
|---|--------------|---------|---------------------|-----------------|-------------------|-------------|
| Total: | | | | | | |
| Structured Day Habilitation - Enhanced 1:1 | Hour | 13 | 228.86 | 20.01 | 59533.35 | |
| Structured Day Habilitation | Hour | 62 | 895.93 | 35.25 | 1958055.02 | |
| Structured Day Habilitation - Enhanced 2:1 | Hour | 1 | 1.04 | 40.02 | 41.62 | |
| Behavior Therapy Services Total: | | | | | | 534142.88 |
| Behavior Therapy Services | 15 Min | 47 | 535.82 | 21.21 | 534142.88 | |
| Nursing Services Total: | | | | | | 1962823.32 |
| Nursing Services | 15 Min | 27 | 6316.00 | 11.51 | 1962823.32 | |
| Occupational Therapy Total: | | | | | | 26978.19 |
| Occupational Therapy | 15 Min | 9 | 138.01 | 21.72 | 26978.19 | |
| Physical Therapy Services Total: | | | | | | 18735.36 |
| Physical Therapy Services | 15 Min | 4 | 267.19 | 17.53 | 18735.36 | |
| Specialized Medical Equipment and Supplies Total: | | | | | | 7977.67 |
| Specialized Medical Equipment and Supplies | Per Purchase | 13 | 5.84 | 105.08 | 7977.67 | |
| Speech and Language Therapy Services Total: | | | | | | 5345.21 |
| Speech and Language Therapy Services | 15 Min | 1 | 241.21 | 22.16 | 5345.21 | |
| Assistive Technology Total: | | | | | | 848.27 |
| Assistive Technology | Per Purchase | 1 | 1.38 | 614.69 | 848.27 | |
| Benefits Counseling Total: | | | | | | 1499.81 |
| Benefits Counseling | 15 Min | 7 | 19.32 | 11.09 | 1499.81 | |
| Career Assessment Total: | | | | | | 1968.49 |
| Career Assessment | 15 Min | 4 | 38.09 | 12.92 | 1968.49 | |
| Cognitive Rehabilitation Therapy Services Total: | | | | | | 3413412.29 |
| GRAND TOTAL: | | | | | | 31018963.76 |
| Total Estimated Unduplicated Participants: | | | | | | 590 |
| Factor D (Divide total by number of participants): | | | | | | 52574.51 |
| Average Length of Stay on the Waiver: | | | | | | 339 |

| Waiver Service/Component | Unit | # Users | Avg. Units Per User | Avg. Cost/ Unit | Component Cost | Total Cost |
|--|----------------|---------|---------------------|-----------------|----------------|------------|
| Cognitive Rehabilitation Therapy Services | 15 Min | 143 | 1657.64 | 14.40 | 3413412.29 | |
| Community Integration Total: | | | | | | 191989.08 |
| Community Integration | 15 Min | 20 | 1417.94 | 6.77 | 191989.08 | |
| Community Transition Services Total: | | | | | | 3059.50 |
| Community Transition Services | Per Purchase | 1 | 2.33 | 1313.09 | 3059.50 | |
| Counseling Services Total: | | | | | | 219.07 |
| Counseling Services | 15 Min | 1 | 18.15 | 12.07 | 219.07 | |
| Home Adaptations Total: | | | | | | 81097.71 |
| Home Adaptations | Per Purchase | 6 | 1.26 | 10727.21 | 81097.71 | |
| Job Finding Total: | | | | | | 6046.98 |
| Job Finding | 15 Min | 5 | 96.06 | 12.59 | 6046.98 | |
| Non-Medical Transportation Total: | | | | | | 308749.47 |
| Non-Medical Transportation | Per Trip | 122 | 29.23 | 86.58 | 308749.47 | |
| Nutritional Consultation Total: | | | | | | 14.61 |
| Nutritional Consultation | 15 Min | 1 | 1.04 | 14.05 | 14.61 | |
| Personal Emergency Response System Total: | | | | | | 60939.41 |
| Personal Emergency Response System | Monthly | 152 | 10.52 | 38.11 | 60939.41 | |
| Vehicle Modifications Total: | | | | | | 6601.71 |
| Vehicle Modifications | Per Adaptation | 2 | 2.21 | 1493.60 | 6601.71 | |
| GRAND TOTAL: | | | | | 31018963.76 | |
| Total Estimated Unduplicated Participants: | | | | | 590 | |
| Factor D (Divide total by number of participants): | | | | | 52574.51 | |
| Average Length of Stay on the Waiver: | | | | | | 339 |

Appendix J: Cost Neutrality Demonstration

J-2: Derivation of Estimates (8 of 9)

d. Estimate of Factor D.

i. Non-Concurrent Waiver. Complete the following table for each waiver year. Enter data into the Unit, # Users, Avg. Units Per User, and Avg. Cost/Unit fields for all the Waiver Service/Component items. Select Save and Calculate to automatically calculate and populate the Component Costs and Total Costs fields. All fields in this table must be

completed in order to populate the Factor D fields in the J-1 Composite Overview table.

Waiver Year: Year 4

| Waiver Service/ Component | Unit | # Users | Avg. Units Per User | Avg. Cost/ Unit | Component Cost | Total Cost |
|--|----------|---------|---------------------|-----------------|-------------------|-------------|
| Adult Daily Living Total: | | | | | | 149764.43 |
| Basic Half Day | Half Day | 1 | 97.64 | 30.81 | 3008.29 | |
| Enhanced Half Day | Half Day | 1 | 1.06 | 38.65 | 40.97 | |
| Enhanced Day | Full Day | 2 | 3.38 | 77.28 | 522.41 | |
| Basic Day | Full Day | 19 | 123.09 | 62.51 | 146192.76 | |
| Employment Skills Development Total: | | | | | | 792382.21 |
| Employment Skills Development | 15 Min | 35 | 3238.84 | 6.99 | 792382.21 | |
| Job Coaching (Intensive and Extended Follow-along) Total: | | | | | | 587211.94 |
| Job Coaching (Intensive and Extended Follow-along) | 15 Min | 34 | 1554.54 | 11.11 | 587211.94 | |
| Personal Assistance Services Total: | | | | | | 14298104.96 |
| Agency | 15 Min | 218 | 8232.71 | 5.37 | 9637704.29 | |
| Participant-Directed | 15 Min | 132 | 9136.60 | 3.84 | 4631159.81 | |
| CSLA | 15 Min | 2 | 2601.50 | 5.62 | 29240.86 | |
| Residential Habilitation Services Total: | | | | | | 6906379.62 |
| Residential Habilitation Enhanced 2:1 | Hour | 4 | 374.27 | 20.21 | 30255.99 | |
| Residential Habilitation Enhanced 1:1 | Hour | 19 | 2955.98 | 20.39 | 1145176.21 | |
| Residential Habilitation Unlicensed | Per Diem | 37 | 319.01 | 280.57 | 3311671.52 | |
| Residential Habilitation Licensed | Per Diem | 28 | 328.44 | 263.07 | 2419275.90 | |
| Respite Total: | | | | | | 33697.42 |
| Participant-Directed | 15 Min | 7 | 1088.72 | 3.99 | 30407.95 | |
| GRAND TOTAL: | | | | | | 33178916.15 |
| Total Estimated Unduplicated Participants: | | | | | | 606 |
| Factor D (Divide total by number of participants): | | | | | | 54750.69 |
| Average Length of Stay on the Waiver: | | | | | | 339 |

| Waiver Service/ Component | Unit | # Users | Avg. Units Per User | Avg. Cost/ Unit | Component Cost | Total Cost |
|--|--------------|---------|---------------------|-----------------|-------------------|-------------|
| Agency | 15 Min | 2 | 252.26 | 6.52 | 3289.47 | |
| Service Coordination Total: | | | | | | 1244665.50 |
| Service Coordination | 15 Min | 600 | 100.75 | 20.59 | 1244665.50 | |
| Structured Day Habilitation Services Total: | | | | | | 2111533.04 |
| Structured Day Habilitation - Enhanced 1:1 | Hour | 13 | 233.44 | 20.21 | 61331.69 | |
| Structured Day Habilitation | Hour | 63 | 913.85 | 35.61 | 2050158.51 | |
| Structured Day Habilitation - Enhanced 2:1 | Hour | 1 | 1.06 | 40.42 | 42.85 | |
| Behavior Therapy Services Total: | | | | | | 561930.57 |
| Behavior Therapy Services | 15 Min | 48 | 546.54 | 21.42 | 561930.57 | |
| Nursing Services Total: | | | | | | 2097877.08 |
| Nursing Services | 15 Min | 28 | 6442.32 | 11.63 | 2097877.08 | |
| Occupational Therapy Total: | | | | | | 27796.44 |
| Occupational Therapy | 15 Min | 9 | 140.77 | 21.94 | 27796.44 | |
| Physical Therapy Services Total: | | | | | | 19295.12 |
| Physical Therapy Services | 15 Min | 4 | 272.53 | 17.70 | 19295.12 | |
| Specialized Medical Equipment and Supplies Total: | | | | | | 8209.16 |
| Specialized Medical Equipment and Supplies | Per Purchase | 13 | 5.95 | 106.13 | 8209.16 | |
| Speech and Language Therapy Services Total: | | | | | | 5506.38 |
| Speech and Language Therapy Services | 15 Min | 1 | 246.04 | 22.38 | 5506.38 | |
| Assistive Technology Total: | | | | | | 875.37 |
| Assistive Technology | Per Purchase | 1 | 1.41 | 620.83 | 875.37 | |
| Benefits Counseling Total: | | | | | | 1545.26 |
| Benefits Counseling | 15 Min | | | | 1545.26 | |
| GRAND TOTAL: | | | | | | 33178916.15 |
| Total Estimated Unduplicated Participants: | | | | | | 606 |
| Factor D (Divide total by number of participants): | | | | | | 54750.69 |
| Average Length of Stay on the Waiver: | | | | | | 339 |

| Waiver Service/ Component | Unit | # Users | Avg. Units Per User | Avg. Cost/ Unit | Component Cost | Total Cost |
|---|----------------|---------|---------------------|-----------------|-------------------|-------------|
| | | 7 | 19.71 | 11.20 | | |
| Career Assessment Total: | | | | | | 2027.97 |
| Career Assessment | 15 Min | 4 | 38.85 | 13.05 | 2027.97 | |
| Cognitive Rehabilitation Therapy Services Total: | | | | | | 3616367.58 |
| Cognitive Rehabilitation Therapy Services | 15 Min | 147 | 1690.80 | 14.55 | 3616367.58 | |
| Community Integration Total: | | | | | | 207442.81 |
| Community Integration | 15 Min | 21 | 1446.30 | 6.83 | 207442.81 | |
| Community Transition Services Total: | | | | | | 3156.40 |
| Community Transition Services | Per Purchase | 1 | 2.38 | 1326.22 | 3156.40 | |
| Counseling Services Total: | | | | | | 225.64 |
| Counseling Services | 15 Min | 1 | 18.51 | 12.19 | 225.64 | |
| Home Adaptations Total: | | | | | | 97835.35 |
| Home Adaptations | Per Adaptation | 7 | 1.29 | 10834.48 | 97835.35 | |
| Job Finding Total: | | | | | | 7471.95 |
| Job Finding | 15 Min | 6 | 97.98 | 12.71 | 7471.95 | |
| Non-Medical Transportation Total: | | | | | | 325969.88 |
| Non-Medical Transportation | Per Trip | 125 | 29.82 | 87.45 | 325969.88 | |
| Nutritional Consultation Total: | | | | | | 15.04 |
| Nutritional Consultation | 15 Min | 1 | 1.06 | 14.19 | 15.04 | |
| Personal Emergency Response System Total: | | | | | | 64840.64 |
| Personal Emergency Response System | Monthly | 157 | 10.73 | 38.49 | 64840.64 | |
| Vehicle Modifications Total: | | | | | | 6788.39 |
| Vehicle Modifications | Per Adaptation | 2 | 2.25 | 1508.53 | 6788.38 | |
| GRAND TOTAL: | | | | | | 33178916.15 |
| Total Estimated Unduplicated Participants: | | | | | | 606 |
| Factor D (Divide total by number of participants): | | | | | | 54750.69 |
| Average Length of Stay on the Waiver: | | | | | | 339 |

Appendix J: Cost Neutrality Demonstration

J-2: Derivation of Estimates (9 of 9)

d. Estimate of Factor D.

i. Non-Concurrent Waiver. Complete the following table for each waiver year. Enter data into the Unit, # Users, Avg. Units Per User, and Avg. Cost/Unit fields for all the Waiver Service/Component items. Select Save and Calculate to automatically calculate and populate the Component Costs and Total Costs fields. All fields in this table must be completed in order to populate the Factor D fields in the J-1 Composite Overview table.

Waiver Year: Year 5

| Waiver Service/ Component | Unit | # Users | Avg. Units Per User | Avg. Cost/ Unit | Component Cost | Total Cost |
|---|----------|---------|---------------------|-----------------|-------------------|-------------|
| Adult Daily Living Total: | | | | | | 154272.47 |
| Basic Half Day | Half Day | 1 | 99.59 | 31.11 | 3098.24 | |
| Enhanced Half Day | Half Day | 1 | 1.08 | 39.03 | 42.15 | |
| Enhanced Day | Full Day | 2 | 3.45 | 78.06 | 538.61 | |
| Basic Day | Full Day | 19 | 125.55 | 63.13 | 150593.46 | |
| Employment Skills Development Total: | | | | | | 839648.06 |
| Employment Skills Development | 15 Min | 36 | 3303.62 | 7.06 | 839648.06 | |
| Job Coaching (Intensive and Extended Follow- along) Total: | | | | | | 604886.13 |
| Job Coaching (Intensive and Extended Follow- along) | 15 Min | 34 | 1585.63 | 11.22 | 604886.13 | |
| Personal Assistance Services Total: | | | | | | 15439752.56 |
| Agency | 15 Min | 224 | 8562.01 | 5.42 | 10394965.10 | |
| Participant- Directed | 15 Min | 136 | 9502.07 | 3.88 | 5014052.30 | |
| CSLA | 15 Min | 2 | 2705.56 | 5.68 | 30735.16 | |
| Residential Habilitation Services Total: | | | | | | 7298167.54 |
| Residential Habilitation Enhanced 2:1 | Hour | 4 | 381.75 | 20.42 | 31181.34 | |
| Residential Habilitation Enhanced 1:1 | Hour | 19 | 3015.10 | 20.59 | 1179537.27 | |
| Residential | | | | | 3506096.38 | |
| GRAND TOTAL: | | | | | | 35414749.49 |
| Total Estimated Unduplicated Participants: | | | | | | 622 |
| Factor D (Divide total by number of participants): | | | | | | 56936.90 |
| Average Length of Stay on the Waiver: | | | | | | 339 |

| Waiver Service/ Component | Unit | # Users | Avg. Units Per User | Avg. Cost/ Unit | Component Cost | Total Cost |
|--|--------------|---------|---------------------|-----------------|-------------------|-------------|
| Habilitation Unlicensed | Per Diem | 38 | 325.59 | 283.38 | | |
| Residential Habilitation Licensed | Per Diem | 29 | 335.01 | 265.70 | 2581352.55 | |
| Respite Total: | | | | | | 39193.54 |
| Participant- Directed | 15 Min | 8 | 1110.49 | 4.03 | 35802.20 | |
| Agency | 15 Min | 2 | 257.31 | 6.59 | 3391.35 | |
| Service Coordination Total: | | | | | | 1316010.33 |
| Service Coordination | 15 Min | 616 | 102.76 | 20.79 | 1316010.33 | |
| Structured Day Habilitation Services Total: | | | | | | 2241990.05 |
| Structured Day Habilitation - Enhanced 1:1 | Hour | 13 | 238.11 | 20.42 | 63208.68 | |
| Structured Day Habilitation | Hour | 65 | 932.12 | 35.96 | 2178737.29 | |
| Structured Day Habilitation - Enhanced 2:1 | Hour | 1 | 1.08 | 40.82 | 44.09 | |
| Behavior Therapy Services Total: | | | | | | 602903.81 |
| Behavior Therapy Services | 15 Min | 50 | 557.47 | 21.63 | 602903.80 | |
| Nursing Services Total: | | | | | | 2237220.54 |
| Nursing Services | 15 Min | 29 | 6571.17 | 11.74 | 2237220.54 | |
| Occupational Therapy Total: | | | | | | 31805.19 |
| Occupational Therapy | 15 Min | 10 | 143.59 | 22.15 | 31805.18 | |
| Physical Therapy Services Total: | | | | | | 19881.13 |
| Physical Therapy Services | 15 Min | 4 | 277.98 | 17.88 | 19881.13 | |
| Specialized Medical Equipment and Supplies Total: | | | | | | 8458.36 |
| Specialized Medical Equipment and Supplies | Per Purchase | 13 | 6.07 | 107.19 | 8458.36 | |
| Speech and Language Therapy Services Total: | | | | | | 5671.70 |
| Speech and Language Therapy | 15 Min | 1 | 250.96 | 22.60 | 5671.70 | |
| GRAND TOTAL: | | | | | | 35414749.49 |
| Total Estimated Unduplicated Participants: | | | | | | 622 |
| Factor D (Divide total by number of participants): | | | | | | 56936.90 |
| Average Length of Stay on the Waiver: | | | | | | 339 |

| Waiver Service/ Component | Unit | # Users | Avg. Units Per User | Avg. Cost/ Unit | Component Cost | Total Cost |
|---|----------------|---------|---------------------|-----------------|-------------------|-------------|
| Services | | | | | | |
| Assistive Technology Total: | | | | | | 902.94 |
| Assistive Technology | Per Purchase | 1 | 1.44 | 627.04 | 902.94 | |
| Benefits Counseling Total: | | | | | | 1818.65 |
| Benefits Counseling | 15 Min | 8 | 20.10 | 11.31 | 1818.65 | |
| Career Assessment Total: | | | | | | 2089.29 |
| Career Assessment | 15 Min | 4 | 39.63 | 13.18 | 2089.29 | |
| Cognitive Rehabilitation Therapy Services Total: | | | | | | 3825512.66 |
| Cognitive Rehabilitation Therapy Services | 15 Min | 151 | 1724.61 | 14.69 | 3825512.66 | |
| Community Integration Total: | | | | | | 213760.83 |
| Community Integration | 15 Min | 21 | 1475.23 | 6.90 | 213760.83 | |
| Community Transition Services Total: | | | | | | 3254.94 |
| Community Transition Services | Per Purchase | 1 | 2.43 | 1339.48 | 3254.94 | |
| Counseling Services Total: | | | | | | 232.41 |
| Counseling Services | 15 Min | 1 | 18.88 | 12.31 | 232.41 | |
| Home Adaptations Total: | | | | | | 100345.75 |
| Home Adaptations | Per Adaptation | 7 | 1.31 | 10942.83 | 100345.75 | |
| Job Finding Total: | | | | | | 7699.38 |
| Job Finding | 15 Min | 6 | 99.94 | 12.84 | 7699.38 | |
| Non-Medical Transportation Total: | | | | | | 343783.83 |
| Non-Medical Transportation | Per Trip | 128 | 30.41 | 88.32 | 343783.83 | |
| Nutritional Consultation Total: | | | | | | 15.48 |
| Nutritional Consultation | 15 Min | 1 | 1.08 | 14.33 | 15.48 | |
| Personal Emergency Response System Total: | | | | | | 68463.29 |
| GRAND TOTAL: | | | | | | 35414749.49 |
| Total Estimated Unduplicated Participants: | | | | | | 622 |
| Factor D (Divide total by number of participants): | | | | | | 56936.90 |
| Average Length of Stay on the Waiver: | | | | | | 339 |

| Waiver Service/ Component | Unit | # Users | Avg. Units Per User | Avg. Cost/ Unit | Component Cost | Total Cost |
|--|----------------|---------|---------------------|-----------------|-------------------|------------|
| Personal Emergency Response System | Monthly | 161 | 10.94 | 38.87 | 68463.29 | |
| Vehicle Modifications Total: | | | | | | 7008.65 |
| Vehicle Modifications | Per Adaptation | 2 | 2.30 | 1523.62 | 7008.65 | |
| GRAND TOTAL: | | | | | 35414749.49 | |
| Total Estimated Unduplicated Participants: | | | | | 622 | |
| Factor D (Divide total by number of participants): | | | | | 56936.90 | |
| Average Length of Stay on the Waiver: | | | | | 339 | |