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Wealth Management.



OPRA - 2022 Fall Conference

ICF/IID Reimbursement



Denise Leonard, CPA
Partner

TJ Ely, MBA
Senior Manager



Gary Brown, CPA
Director

Missy Behymer, CPA
Director



Agenda



Agenda

- FY22 & FY23 ICF Rate Calculation Recap
- ICF Rate Analysis
- ICF/IID Statewide Data Trends



FY22 & FY23 ICF Rate Calculation Recap



FY22 & FY23 Rates Recap

- FY22 Rates *(based on 2020 cost reports - effective 7/1/21-6/30/22)*
 - Due to House Bill 110, the ICF rate formula was not run for FY22 rate setting.
 - Instead, an 2% increase was implemented above total FY21 rate.
- FY23 Rates *(based on 2021 cost reports - effective 7/1/22-6/30/23)*
 - Per House Bill 110, FY23 rates returned to being calculated using the ICF rate formula in statute.
 - However, due to the signing of Senate Bill 239 in June 2022, the ICF rate formula ran unimpeded instead of being subject to cap-and-rollback provision:
 - Before SB 239, language in House Bill 110 limited the statewide average (SWA) rate to \$365.05. Each provider's rate would have been reduced by a uniform percentage in order to meet the SWA rate of \$365.05.



ICF Rate Analysis



FY23 Medians (Cost)

Medians	FY23	FY22	FY21	FY23 % Chg	FY22 % Chg
Protected with bed tax	\$ 34.00	\$ 33.30	\$ 32.76	2.10%	1.65%
Protected w/o bed tax	\$ 9.11	\$ 8.41	\$ 7.87	8.32%	6.86%
Capital	\$ 23.67	\$ 23.05	\$ 22.21	2.69%	3.78%
Direct CPCMU PG1	\$ 148.23	\$ 147.97	\$ 143.72	0.18%	2.96%
Direct CPCMU PG2	\$ 167.95	\$ 163.72	\$ 151.36	2.58%	8.17%
Direct CPCMU PG3	\$ 159.06	\$ 154.27	\$ 150.80	3.10%	2.30%
Direct CPCMU PG4	\$ 187.45	\$ 184.23	\$ 165.09	1.75%	11.59%
Direct CPCMU PG5	\$ 192.61	\$ 183.81	\$ 226.38	4.79%	-18.80%
Indirect PG1	\$ 105.29	\$ 94.47	\$ 79.42	11.45%	18.95%
Indirect PG2	\$ 84.36	\$ 74.57	\$ 67.69	13.13%	10.16%
Indirect PG3	\$ 81.63	\$ 73.31	\$ 64.44	11.35%	13.76%
Indirect PG4	\$ 85.17	\$ 76.89	\$ 69.41	10.77%	10.78%
Indirect PG5	\$ 88.88	\$ 82.48	\$ 76.42	7.76%	7.93%
ODDP PG1	1.4276	1.4187	1.4313	0.63%	-0.88%
ODDP PG2	1.3130	1.3229	1.3502	-0.75%	-2.02%
ODDP PG3	1.2557	1.2573	1.2772	-0.13%	-1.56%
ODDP PG4	1.2049	1.2233	1.2459	-1.50%	-1.81%
ODDP PG5	1.2033	1.255	1.2559	-4.12%	-0.07%



FY23 Inflation Factors & Ceilings

Inflation Factors	FY23	FY22	FY21	FY23 % Chg	FY22 % Chg
Direct	1.1008	1.0448	1.0381	5.36%	0.65%
Other Protected	1.1192	0.8886	0.9795	25.95%	-9.28%
Indirect	1.1418	1.0652	1.0099	7.19%	5.48%
Capital	1.0284	1.0211	1.0360	0.71%	-1.44%

Ceilings	FY23	FY22	FY21	FY23 % Chg	FY22 % Chg
Direct CPCM U Ceiling PG1	\$ 171.95	\$ 171.65	\$ 166.72	0.17%	2.96%
Direct CPCM U Ceiling PG2	\$ 191.46	\$ 186.64	\$ 172.55	2.58%	8.17%
Direct CPCM U Ceiling PG3	\$ 187.69	\$ 182.04	\$ 177.94	3.10%	2.30%
Direct CPCM U Ceiling PG4	\$ 228.69	\$ 224.76	\$ 201.41	1.75%	11.59%
Direct CPCM U Ceiling PG5	\$ 228.54	\$ 220.39	\$ 226.38	3.70%	-2.65%
Indirect PG1	\$ 113.71	\$ 102.03	\$ 85.77	11.45%	18.96%
Indirect PG2	\$ 92.80	\$ 82.03	\$ 74.46	13.13%	10.17%
Indirect PG3	\$ 89.79	\$ 80.64	\$ 70.88	11.35%	13.77%
Indirect PG4	\$ 95.39	\$ 86.12	\$ 77.74	10.76%	10.78%
Indirect PG5	\$ 99.55	\$ 92.38	\$ 85.59	7.76%	7.93%
Indirect Efficiency Incentive Ceiling PG1	\$ 5.69	\$ 5.10	\$ 4.29	11.57%	18.88%
Indirect Efficiency Incentive Ceiling PG2	\$ 5.57	\$ 4.92	\$ 4.47	13.21%	10.07%
Indirect Efficiency Incentive Ceiling PG3	\$ 5.39	\$ 4.84	\$ 4.25	11.36%	13.88%
Indirect Efficiency Incentive Ceiling PG4	\$ 5.72	\$ 5.17	\$ 4.66	10.64%	10.94%
Indirect Efficiency Incentive Ceiling PG5	\$ 5.97	\$ 5.54	\$ 5.14	7.76%	7.78%



Direct and Indirect Cost Coverage

Direct Care Category	CPCMU Average	Median	Ceiling	% Ceiling Above Median	FY23 Facilities Cost Covered	FY22 Facilities Cost Covered	Change
Peer Group 1	\$155.58	\$148.23	\$171.95	16.00%	67.39%	80.85%	-16.65%
Peer Group 2	\$179.34	\$167.95	\$191.46	14.00%	69.44%	73.68%	-5.75%
Peer Group 3	\$161.65	\$159.06	\$187.69	18.00%	79.35%	74.19%	6.95%
Peer Group 4	\$192.59	\$187.45	\$228.69	22.00%	81.34%	80.77%	0.71%
Peer Group 5	\$192.76	\$192.61	\$228.54	18.65%	94.74%	94.74%	0.00%

Indirect Care Category		Median	Ceiling	% Ceiling Above Median	FY23 Facilities Cost Covered	FY22 Facilities Cost Covered	Change
Peer Group 1		\$105.29	\$113.71	8.00%	67.39%	70.21%	-4.01%
Peer Group 2		\$84.36	\$92.80	10.00%	58.33%	65.79%	-11.33%
Peer Group 3		\$81.63	\$89.79	10.00%	69.57%	72.58%	-4.15%
Peer Group 4		\$85.17	\$95.39	12.00%	62.69%	72.31%	-13.31%
Peer Group 5		\$88.88	\$99.55	12.00%	73.68%	73.68%	0.01%



Trending Rate Analysis

Average Rate Trends by Peer Group

Peer Group	Bed Size	Based on 2021	Based on 2020	Based on 2019	FY23 % Chg	FY23 \$ Chg	FY22 % Chg	FY22 \$ Chg
		Cost Reports	Cost Reports	Cost Reports				
1	17+	\$ 407.34	\$ 357.30	\$ 349.19	14.01%	\$ 50.05	2.32%	\$ 8.11
2	9-16	\$ 377.06	\$ 348.87	\$ 340.10	8.08%	\$ 28.19	2.58%	\$ 8.77
3	7-8	\$ 373.26	\$ 342.33	\$ 334.30	9.03%	\$ 30.93	2.40%	\$ 8.02
4	4-6	\$ 413.19	\$ 363.87	\$ 355.91	13.55%	\$ 49.32	2.24%	\$ 7.96
5	6	\$ 422.70	\$ 414.20	\$ 406.08	2.05%	\$ 8.50	2.00%	\$ 8.12

*FY22 % Chg for Peer Groups 1 through 4, appear slightly over 2.00% increase applied due to CHOP and/or closure.



Fiscal Year Profit (Loss) Analysis

Average Profit (Loss) Trends

Based on 2021 cost reports and FY23 rate derived from cost report

Peer Group	Bed Size	FY23 Avg Rate	2021 Avg Cost	FY23 Avg Profit (Loss)	2021 Avg Cost % Change	2021 Avg Cost \$ Change
1	17+	\$ 407.34	\$ 384.80	\$ 22.54	8.20%	\$ 29.15
2	9-16	\$ 377.06	\$ 369.41	\$ 7.65	1.48%	\$ 5.40
3	7-8	\$ 373.26	\$ 339.01	\$ 34.25	2.28%	\$ 7.55
4	4-6	\$ 413.19	\$ 375.57	\$ 37.62	2.12%	\$ 7.81
5	6	\$ 422.70	\$ 382.69	\$ 40.01	1.63%	\$ 6.13

Based on 2020 cost reports and FY22 rate derived from cost report

Peer Group	Bed Size	FY22 Avg Rate	2020 Avg Cost	FY22 Avg Profit (Loss)	2020 Avg Cost % Change	2020 Avg Cost \$ Change
1	17+	\$ 357.30	\$ 355.65	\$ 1.65	6.42%	\$ 21.44
2	9-16	\$ 348.87	\$ 364.01	\$ (15.14)	6.67%	\$ 22.77
3	7-8	\$ 342.33	\$ 331.46	\$ 10.87	3.01%	\$ 9.69
4	4-6	\$ 363.87	\$ 367.76	\$ (3.89)	8.21%	\$ 27.90
5	6	\$ 414.20	\$ 376.56	\$ 37.64	-3.92%	\$ (15.38)

Based on 2019 cost reports and FY21 rate derived from cost report

Peer Group	Bed Size	FY21 Avg Rate	2019 Avg Cost	FY21 Avg Profit (Loss)	2019 Avg Cost % Change	2019 Avg Cost \$ Change
1	17+	\$ 349.19	\$ 334.21	\$ 14.98	1.63%	\$ 5.35
2	9-16	\$ 340.10	\$ 341.24	\$ (1.14)	1.32%	\$ 4.44
3	7-8	\$ 334.30	\$ 321.77	\$ 12.53	2.54%	\$ 7.97
4	4-6	\$ 355.91	\$ 339.86	\$ 16.05	3.46%	\$ 11.36
5	6	\$ 406.08	\$ 391.94	\$ 14.14	1.30%	\$ 5.04



Calendar Year Profit (Loss) Analysis

Average Profit (Loss) Trends

Based on 2021 cost reports and average 2021 calendar-year rate

Peer Group	Bed Size	2021 Avg Rate	2021 Avg Cost	2021 Avg Profit (Loss)	2021 Avg Cost % Change	2021 Avg Cost \$ Change
1	17+	\$ 353.24	\$ 384.80	\$ (31.56)	8.20%	\$ 29.15
2	9-16	\$ 344.48	\$ 369.41	\$ (24.93)	1.48%	\$ 5.40
3	7-8	\$ 338.31	\$ 339.01	\$ (0.70)	2.28%	\$ 7.55
4	4-6	\$ 359.89	\$ 375.57	\$ (15.68)	2.12%	\$ 7.81
5	6	\$ 410.14	\$ 382.69	\$ 27.45	1.63%	\$ 6.13

Based on 2020 cost reports and average 2020 calendar-year rate

Peer Group	Bed Size	2020 Avg Rate	2020 Avg Cost	2020 Avg Profit (Loss)	2020 Avg Cost % Change	2020 Avg Cost \$ Change
1	17+	\$ 345.45	\$ 355.65	\$ (10.20)	6.42%	\$ 21.44
2	9-16	\$ 339.52	\$ 364.01	\$ (24.49)	6.67%	\$ 22.77
3	7-8	\$ 331.62	\$ 331.46	\$ 0.16	3.01%	\$ 9.69
4	4-6	\$ 352.64	\$ 367.76	\$ (15.12)	8.21%	\$ 27.90
5	6	\$ 405.49	\$ 376.56	\$ 28.93	-3.92%	\$ (15.38)

Based on 2019 cost reports and average 2019 calendar-year rate

Peer Group	Bed Size	2019 Avg Rate	2019 Avg Cost	2019 Avg Profit (Loss)	2019 Avg Cost % Change	2019 Avg Cost \$ Change
1	17+	\$ 329.96	\$ 334.21	\$ (4.25)	1.63%	\$ 5.35
2	9-16	\$ 323.35	\$ 341.24	\$ (17.89)	1.32%	\$ 4.44
3	7-8	\$ 319.88	\$ 321.77	\$ (1.89)	2.54%	\$ 7.97
4	4-6	\$ 341.73	\$ 339.86	\$ 1.87	3.46%	\$ 11.36
5	6	\$ 392.50	\$ 391.94	\$ 0.56	1.30%	\$ 5.04



SNF Profit (Loss) Analysis

Statewide Cost per Diem Trend									
Per Diem Analysis	2021	2020	2019	2018	2017	2016	2015	2014	2013
Medicaid CY Total Rate (January and July 1st)	219.18	205.87	199.21	195.58	193.82	184.74	176.67	174.58	174.28
Tax Cost Center	\$ 3.77	\$ 3.64	\$ 3.12	\$ 3.13	\$ 2.95	\$ 2.78	\$ 2.61	\$ 2.52	\$ 2.47
Direct Care Cost Center	128.63	118.09	100.22	97.86	92.15	87.82	85.33	84.21	82.88
Ancillary/ Support Cost Center	105.18	96.67	86.75	85.28	79.95	77.46	76.28	74.57	73.00
Capital Cost Center	27.17	25.38	23.18	23.93	21.69	21.15	20.59	19.42	19.68
Franchise Permit Fees	18.79	17.42	15.72	15.61	15.22	14.66	14.42	14.19	14.20
Total Allowable Costs Calendar Year	\$ 283.55	\$ 261.20	\$ 228.99	\$ 225.81	\$ 211.95	\$ 203.87	\$ 199.24	\$ 194.89	\$ 192.21
Total Estimated Medicaid Loss per day	\$ (64.37)	\$ (55.33)	\$ (29.78)	\$ (30.23)	\$ (18.13)	\$ (19.12)	\$ (22.57)	\$ (20.31)	\$ (17.93)
Direct Care Consolidated Services	\$ 22.52	\$ 21.95	\$ 23.13	\$ 23.52	\$ 22.14	\$ 21.90	\$ 22.28	\$ 21.77	\$ 21.51
Ancillary/Support Consolidated Services	0.53	0.46	0.45	0.42	0.34	0.28	0.25	0.31	1.02
Consolidated Services - Total ^(A)	\$ 23.05	\$ 22.40	\$ 23.58	\$ 23.94	\$ 22.49	\$ 22.18	\$ 22.54	\$ 22.08	\$ 22.53
Total Allowable Costs with Consolidated Services	\$ 306.60	\$ 283.60	\$ 252.58	\$ 249.75	\$ 234.44	\$ 226.05	\$ 221.77	\$ 216.97	\$ 214.74
Total Profit/(Loss) per Diem	\$ (87.42)	\$ (77.73)	\$ (53.37)	\$ (54.17)	\$ (40.61)	\$ (41.30)	\$ (45.10)	\$ (42.39)	\$ (40.46)
	2012	2011	2010	2009	2008	2007	2006	2005	
Medicaid CY Total Rate (January and July 1st)	171.81	171.67	176.52	171.20	165.11	164.07	159.62	161.77	
Tax Cost Center	\$ 2.27	\$ 2.23	\$ 2.15	\$ 2.01	\$ 1.83	\$ 1.67	\$ 1.37	\$ 1.28	
Direct Care Cost Center	83.02	84.36	84.98	84.93	89.92	70.11	63.20	63.32	
Ancillary/ Support Cost Center	72.05	71.95	71.48	70.87	73.29	70.60	61.01	60.10	
Capital Cost Center	19.29	18.71	18.46	18.11	17.96	17.20	14.22	13.69	
Franchise Permit Fees	13.72	13.23	14.13	10.67	7.19	7.28	6.19	5.20	
Total Allowable Costs Calendar Year	\$ 190.36	\$ 190.48	\$ 191.20	\$ 186.59	\$ 190.18	\$ 166.86	\$ 146.00	\$ 143.59	
Total Estimated Medicaid Loss per day	\$ (18.54)	\$ (18.81)	\$ (14.68)	\$ (15.39)	\$ (25.07)	\$ (2.79)	\$ 13.62	\$ 18.19	
Direct Care Consolidated Services	\$ 21.18	\$ 19.44	\$ 17.62	\$ 17.64	\$ 19.76	\$ 14.41	\$ 10.48	\$ 9.55	
Ancillary/Support Consolidated Services	0.87	0.88	0.79	0.20	-	-	-	-	
Consolidated Services - Total ^(A)	\$ 22.05	\$ 20.32	\$ 18.41	\$ 17.85	\$ 19.76	\$ 14.41	\$ 10.48	\$ 9.55	
Total Allowable Costs with Consolidated Services	\$ 212.41	\$ 210.80	\$ 209.61	\$ 204.43	\$ 209.94	\$ 181.27	\$ 156.48	\$ 153.14	
Total Profit/(Loss) per Diem	\$ (40.60)	\$ (39.13)	\$ (33.09)	\$ (33.24)	\$ (44.83)	\$ (17.20)	\$ 3.15	\$ 8.64	

(A) ODM requires the filing of total consolidated services expenses, regardless of payor type.
 Plante Moran separates this cost in order to better reflect routine costs related to Medicaid only residents.



Average Case Mix (DDP)

Average of the 2021 quarterly DDP scores used as part of Direct care rate calculation for FY23 rates:

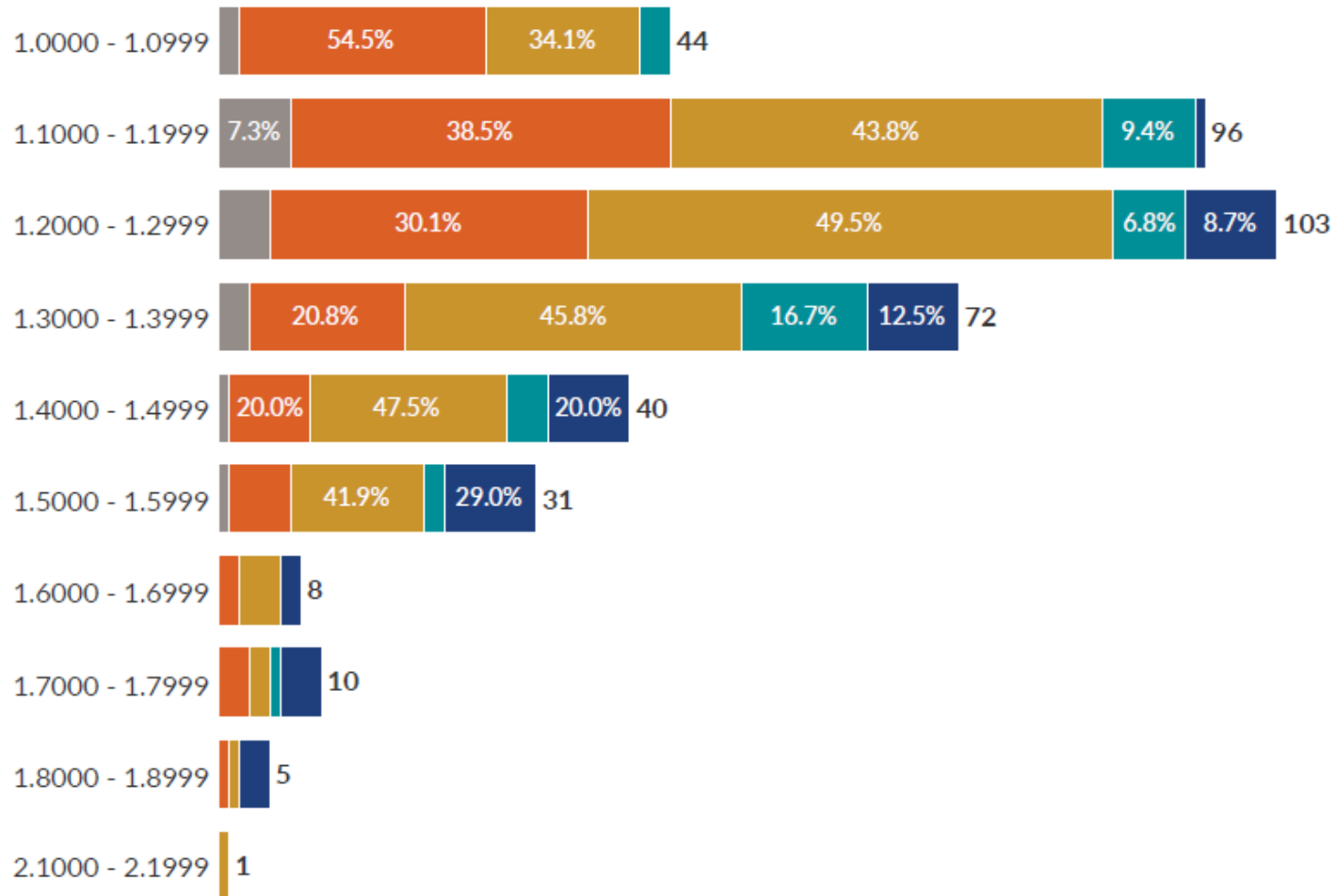
Average Case Mix by Peer Group

Peer Group	Peer Beds	Provider Count	Case Mix
1	17 or greater	45	1.4618
2	9 - 16 beds	39	1.2897
3	7 - 8 beds	181	1.2943
4	4 - 6 beds	128	1.2402
5	6 beds	19	1.2299



Number of Providers per Case Mix Range

Number of Providers per Case Mix Range



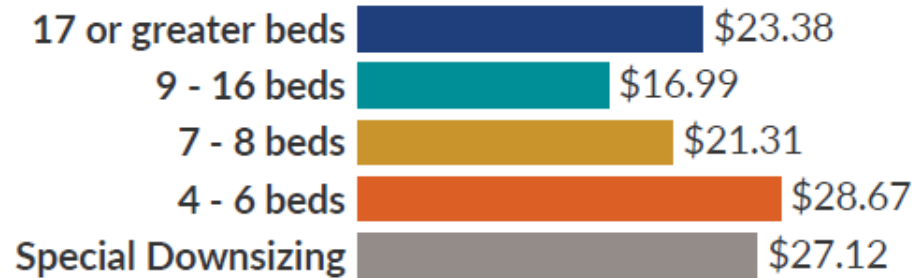
Above shows the total number of providers with a case mix score in a given range and the respective percentage of the total provider count for each peer group.

■ Special Downsizing ■ 4 - 6 beds ■ 7 - 8 beds ■ 9 - 16 beds ■ 17 or greater beds

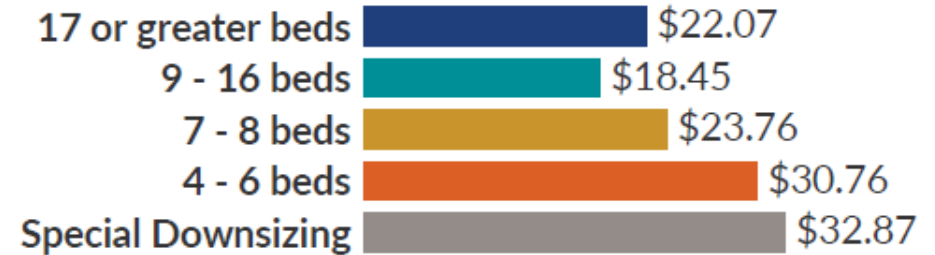


Capital Cost Coverage

Average Capital Cost PPD



Average Capital Reimbursement Rate





Fair Rental Value

FRV Value Per Sq Ft (RS Means)	FY23	FY22	FY21	FY23 % Chg	FY22 % Chg
PG1	\$ 202.30	\$ 193.44	\$ 187.43	4.58%	3.21%
PG2	\$ 202.30	\$ 193.44	\$ 187.43	4.58%	3.21%
PG3	\$ 202.30	\$ 221.62	\$ 215.71	-8.72%	2.74%
PG4	\$ 228.20	\$ 221.62	\$ 215.71	2.97%	2.74%
PG5	\$ 228.20	\$ 221.62	\$ 215.71	2.97%	2.74%

Secondary Building Benchmark	FY23	FY22	FY21	FY23 % Chg	FY22 % Chg
Home Office/Record Storage	\$ 112.11	\$ 112.11	\$ 112.11	0.00%	0.00%



Fair Rental Value Key Points

- Renovations included in FRV as increase in value of facility on Log 2
 - Renovation is capital project that extends the life of a building, increase productivity or improves safety
- Additions reported in Log 1 (expand or extends sq. ft. or bed count)
- Fixed equipment defined as non-moveable equipment affixed to structure and would not be transferred if moved included in Log 2
- Renovations to structures connected to main facility by walkway can be included on Log 2
- Based on formula, large improvement costs would be recovered over long period of time – no immediate recovery



Quality Incentive Data

- Based upon data submitted on the 2021 cost reports
 - Quality Measures attested to on Attachment 8 of cost report
- Quality Incentive add-on amounted to \$0.46 per participating measure

Measure	# of Providers Participating	% Participating
Offers annual satisfaction surveys to families for each resident	407	99.03%
Ensures service plans are person centered	408	99.27%
Ensures individuals experience community integration	409	99.51%
Ensures direct support providers receive additional training	409	99.51%
Ensures policy for staff retention including measuring turnover	402	97.81%

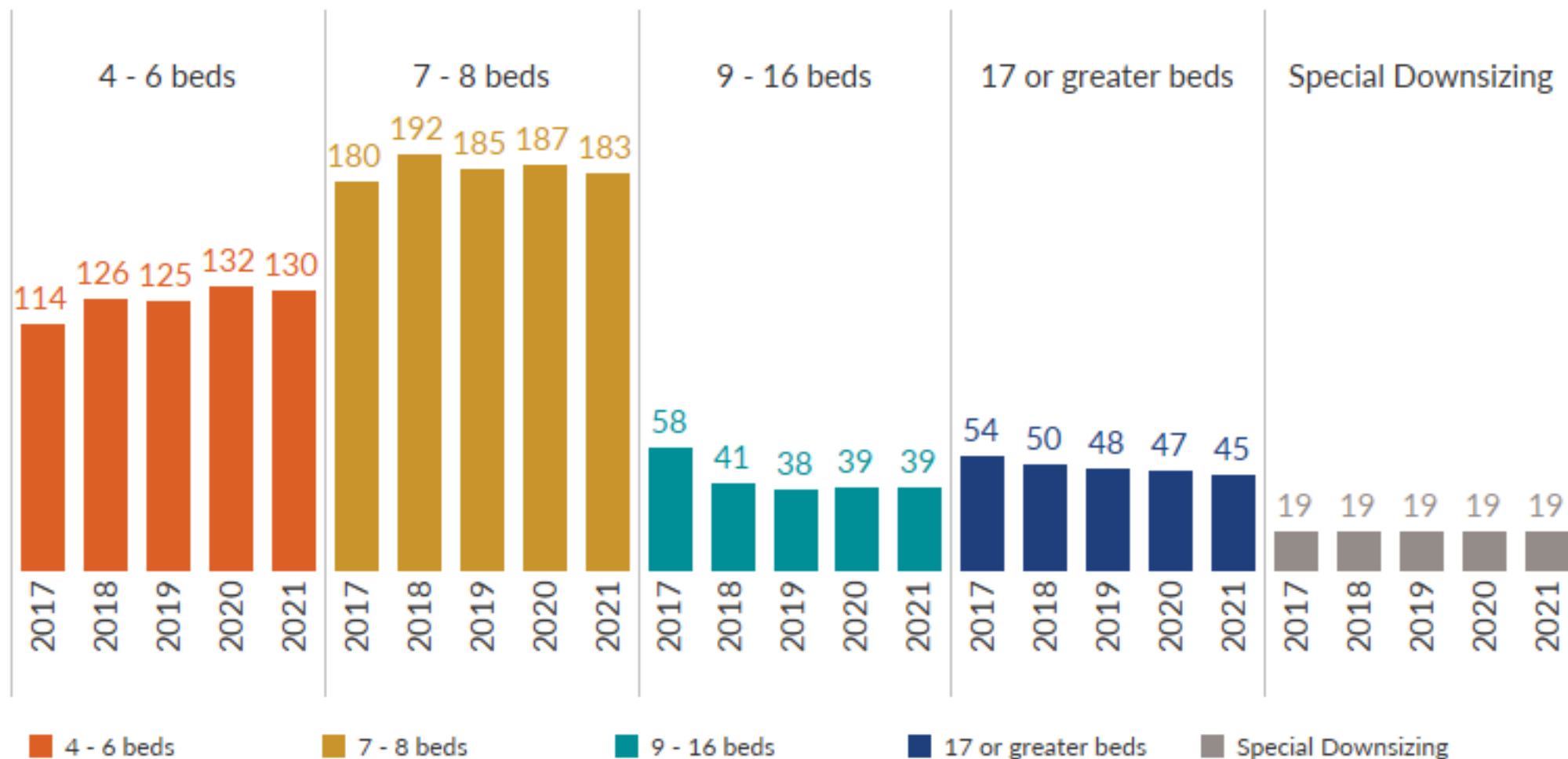


ICF Statewide Data Trends



Provider Count by Peer Group

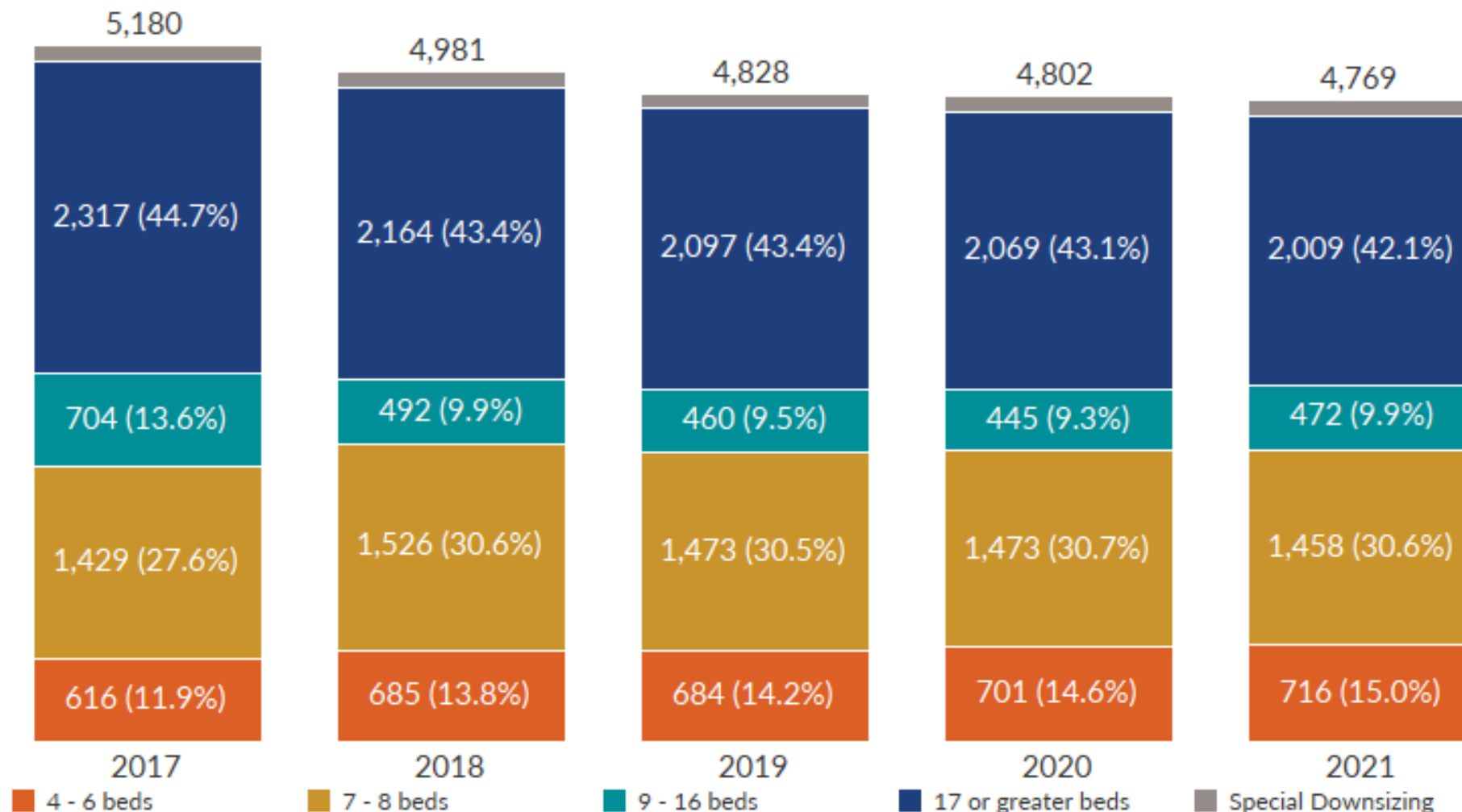
Number of Providers by Peer Group by Year





Total Beds by Year

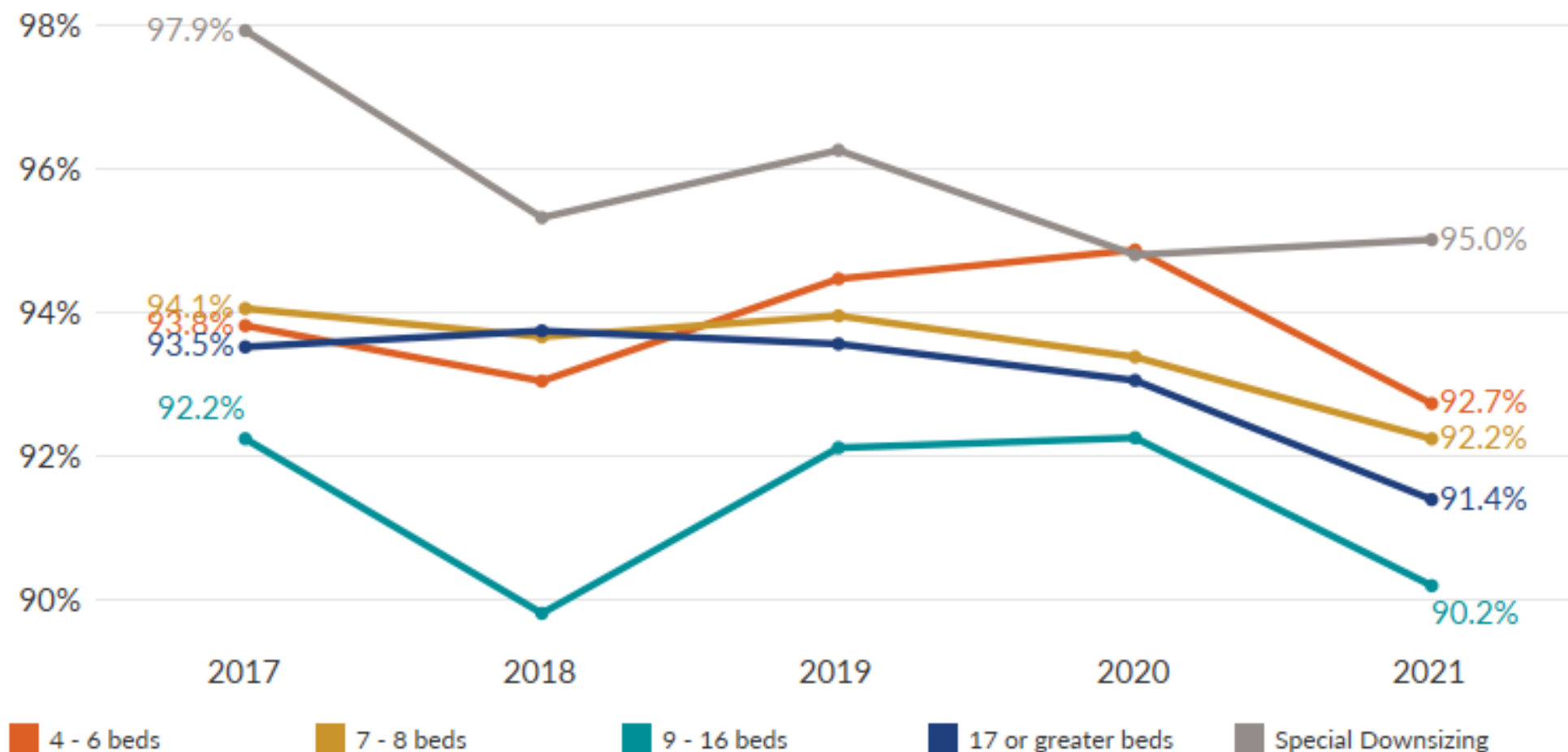
Total Beds by Year





Median Occupancy by Peer Group

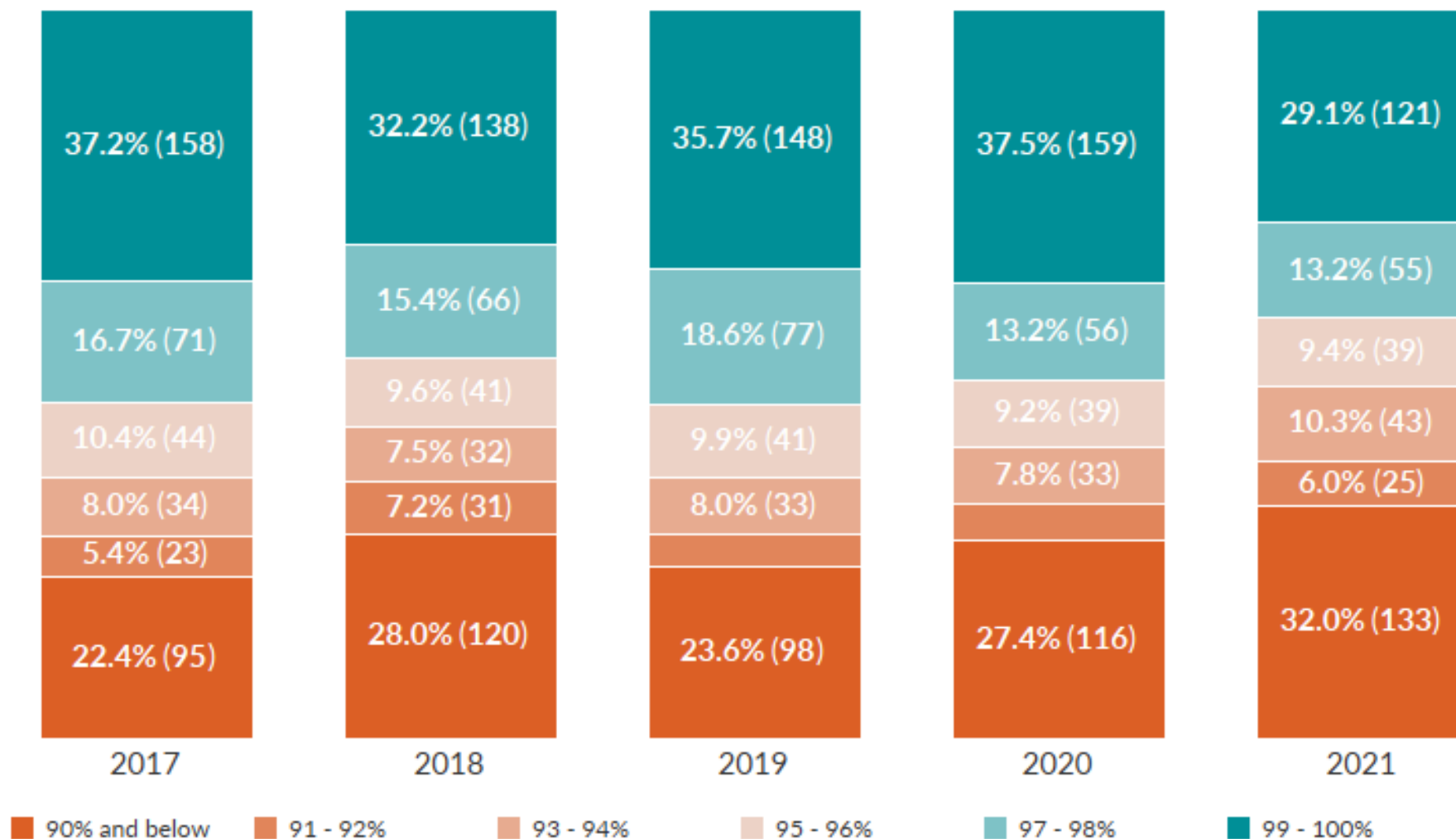
Median Occupancy by Peer Group





Change in Percent Occupancy by Year

Change in Percent Occupancy by Year





Cost Center Fluctuations by Year

Cost Center Fluctuations by Year (Millions)

	Protected Cost % Change		Direct Care Cost % Change		Indirect Care Cost % Change		Capital Costs Cost % Change		Active Treatment Cost % Change		Grand Total Cost % Change	
2013	\$55.67M		\$300.07M		\$135.31M		\$34.55M		\$80.71M		\$606.30M	
2014	\$56.94M	2.29%	\$300.06M	0.00%	\$136.14M	0.62%	\$35.15M	1.73%	\$82.95M	2.78%	\$611.25M	0.82%
2015	\$56.14M	-1.40%	\$292.59M	-2.49%	\$131.73M	-3.24%	\$35.82M	1.89%	\$81.01M	-2.34%	\$597.29M	-2.28%
2016	\$55.62M	-0.94%	\$301.99M	3.21%	\$134.25M	1.92%	\$37.51M	4.71%	\$82.16M	1.42%	\$611.53M	2.38%
2017	\$51.22M	-7.91%	\$277.78M	-8.02%	\$125.35M	-6.63%	\$36.38M	-3.00%	\$73.29M	-10.80%	\$564.02M	-7.77%
2018	\$49.04M	-4.24%	\$271.05M	-2.42%	\$123.48M	-1.49%	\$37.18M	2.19%	\$70.16M	-4.26%	\$550.92M	-2.32%
2019	\$52.41M	6.87%	\$279.74M	3.21%	\$127.20M	3.02%	\$36.28M	-2.43%	\$67.39M	-3.95%	\$563.03M	2.20%
2020	\$60.18M	14.82%	\$318.32M	13.79%	\$137.41M	8.02%	\$36.42M	0.39%	\$42.02M	-37.65%	\$594.35M	5.56%
2021	\$58.30M	-3.12%	\$313.56M	-1.50%	\$140.30M	2.11%	\$36.31M	-0.31%	\$42.76M	1.76%	\$591.22M	-0.53%



Payroll, Fringe, Worker's Comp. Analysis

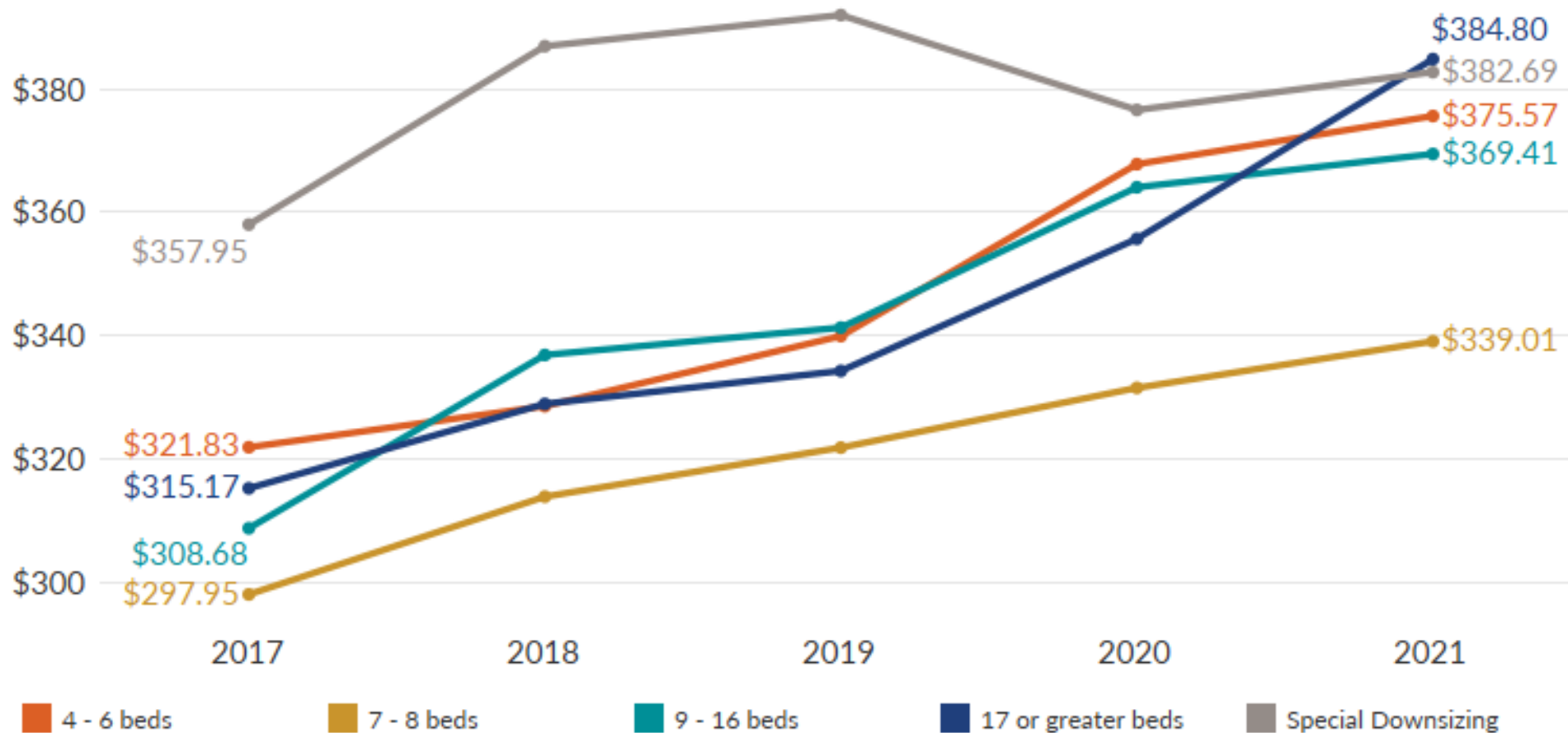
Payroll, Fringe, Worker's Comp. Expense by Year

	Payroll Taxes		Fringe Benefits		Worker's Compensation	
	Cost	% Change	Cost	% Change	Cost	% Change
2013	\$22.48M		\$35.29M		\$8.43M	
2014	\$22.25M	-1.01%	\$36.53M	3.50%	\$7.91M	-6.15%
2015	\$22.21M	-0.19%	\$33.90M	-7.20%	\$4.18M	-47.18%
2016	\$21.87M	-1.54%	\$33.60M	-0.89%	\$6.89M	64.91%
2017	\$20.29M	-7.23%	\$29.68M	-11.66%	\$6.19M	-10.22%
2018	\$19.30M	-4.84%	\$30.67M	3.34%	\$6.27M	1.38%
2019	\$20.10M	4.14%	\$31.53M	2.80%	\$5.31M	-15.29%
2020	\$23.13M	15.04%	\$32.44M	2.90%	\$5.15M	-3.19%
2021	\$22.49M	-2.73%	\$34.01M	4.84%	\$5.22M	1.39%



Total Median Cost per Day

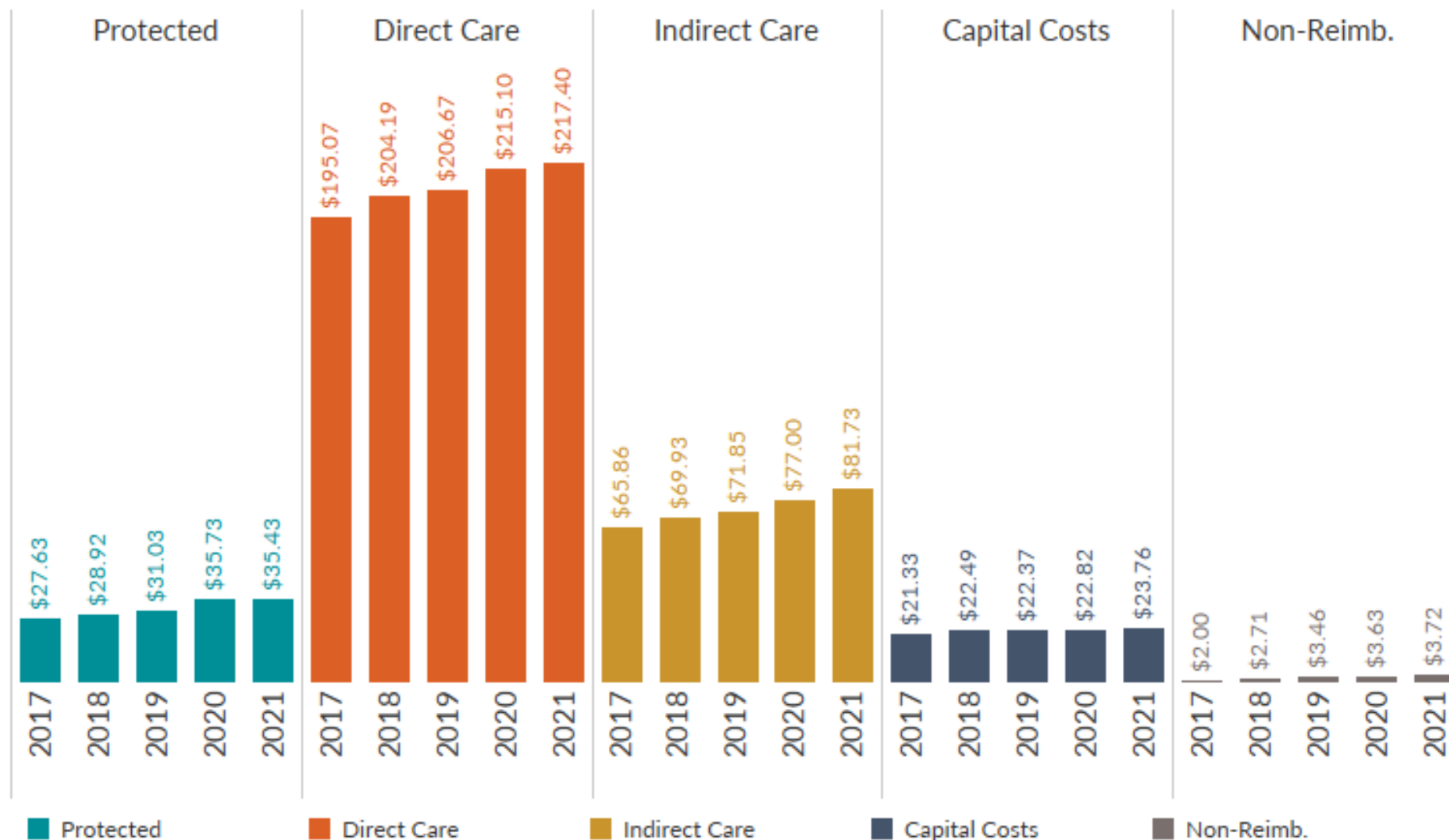
Total Median Cost per Patient Day by Peer Group





Median Cost per Day by Cost Center

Median Cost per Patient Day by Cost Center





Active Treatment Cost per Day Provider Count

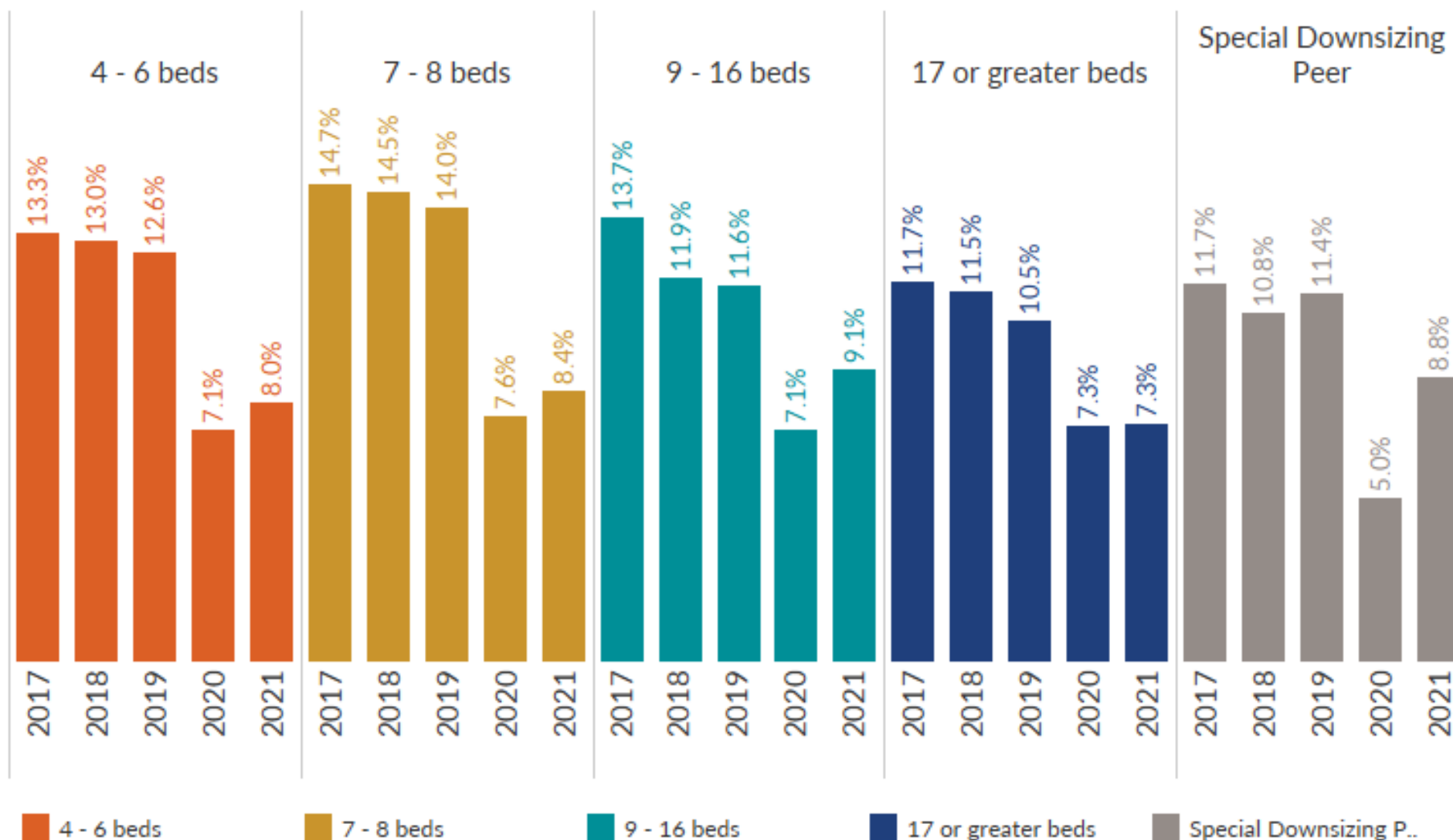
Active Treatment Cost per Patient Day Provider Count

	2017	2018	2019	2020	2021
\$200 - \$209	1		1		
\$190 - \$199			1		
\$130 - \$139	2				
\$120 - \$129	2	3			
\$110 - \$119	1				
\$100 - \$109	6	5	4		1
\$90 - \$99	9	16	9	1	3
\$80 - \$89	15	8	16	5	5
\$70 - \$79	18	21	11	3	5
\$60 - \$69	20	24	32	8	12
\$50 - \$59	55	76	67	40	40
\$40 - \$49	78	82	89	27	42
\$30 - \$39	106	79	75	65	59
\$20 - \$29	68	66	45	89	75
\$10 - \$19	34	36	50	73	70
\$0 - \$9	7	12	15	106	104
Grand Total	422	428	415	417	416



Median Active Treatment as Percent of Total Cost

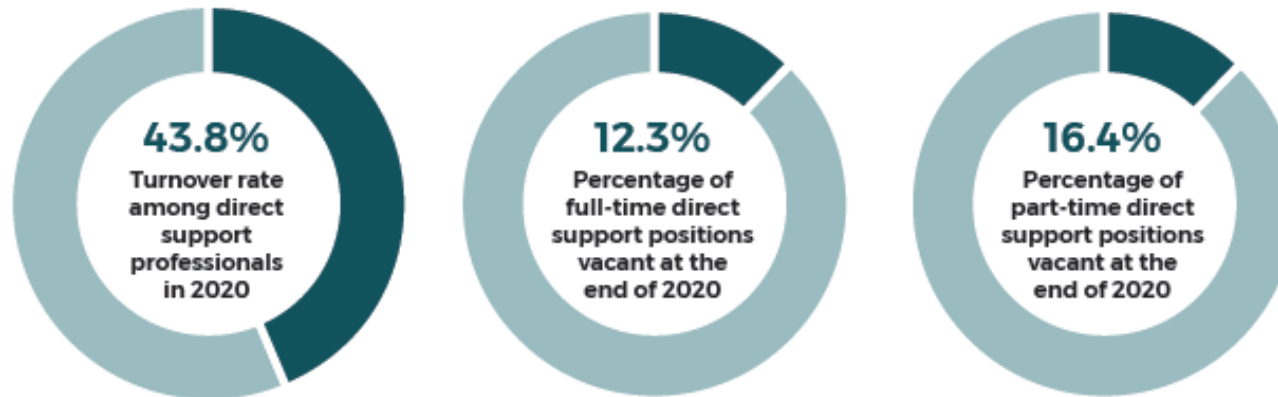
Median Active Treatment as Percent of Total Cost





The Case for Inclusion Report 2022

- Staffing Challenges:



- Programming:

- Per *The State of America's Direct Support Workforce Crisis 2021*, ANCOR surveyed community providers to quantify the impact of the pandemic on the DSP workforce. As of fall 2021:
 - 77% of providers were turning away new referrals, and
 - 84% were delaying the launch of new programs and services due to lack of staffing
 - Meanwhile, there were 589,940 people on states' waiting lists for home-and-community-based services nationally.

Source: *The Case of Inclusion 2022*, caseforinclusion.org



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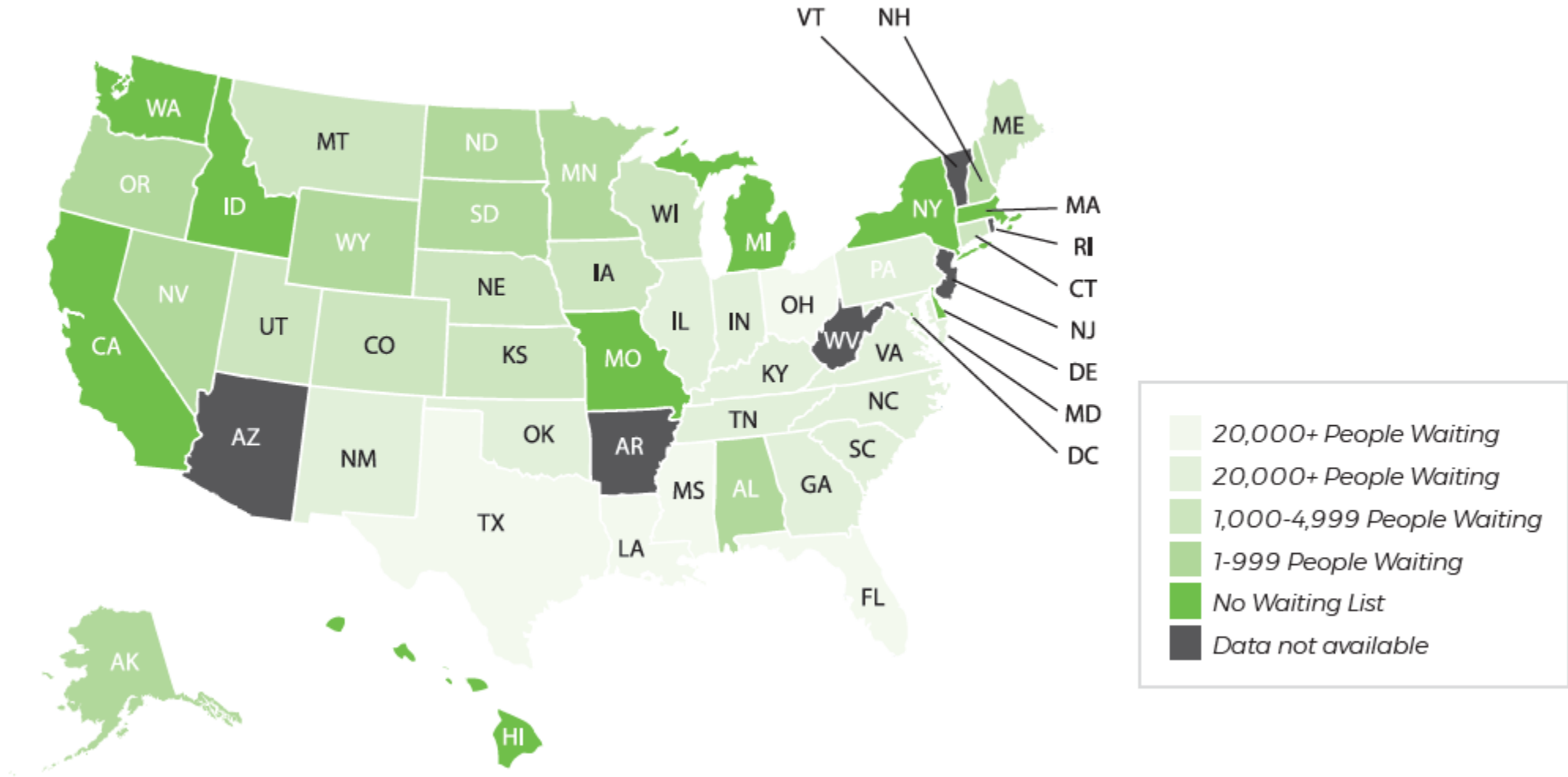
- **Pandemic Financial Impact**
 - One in three providers have spent more than \$500,000 annually in costs related to high turnover and vacancy rates;
 - More than 1 in 6 respondents reported spending in excess of \$1 million annually.
- **Wages & Salaries**
 - 38.3% of responding providers reported implementing at least one bonus for all DSPs.
 - 25.5% reported implementing temporary wage increases to all DSPs.
 - 24.8% reported that no wage bonuses or wage increases were implemented for the purposes of retaining DSPs during the pandemic.

Source: *The Case of Inclusion 2022*, caseforinclusion.org



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NUMBER OF PEOPLE ON STATES' WAITING LISTS FOR HCBS (IDD) SERVICES



Source: *The Case of Inclusion 2022*, caseforinclusion.org

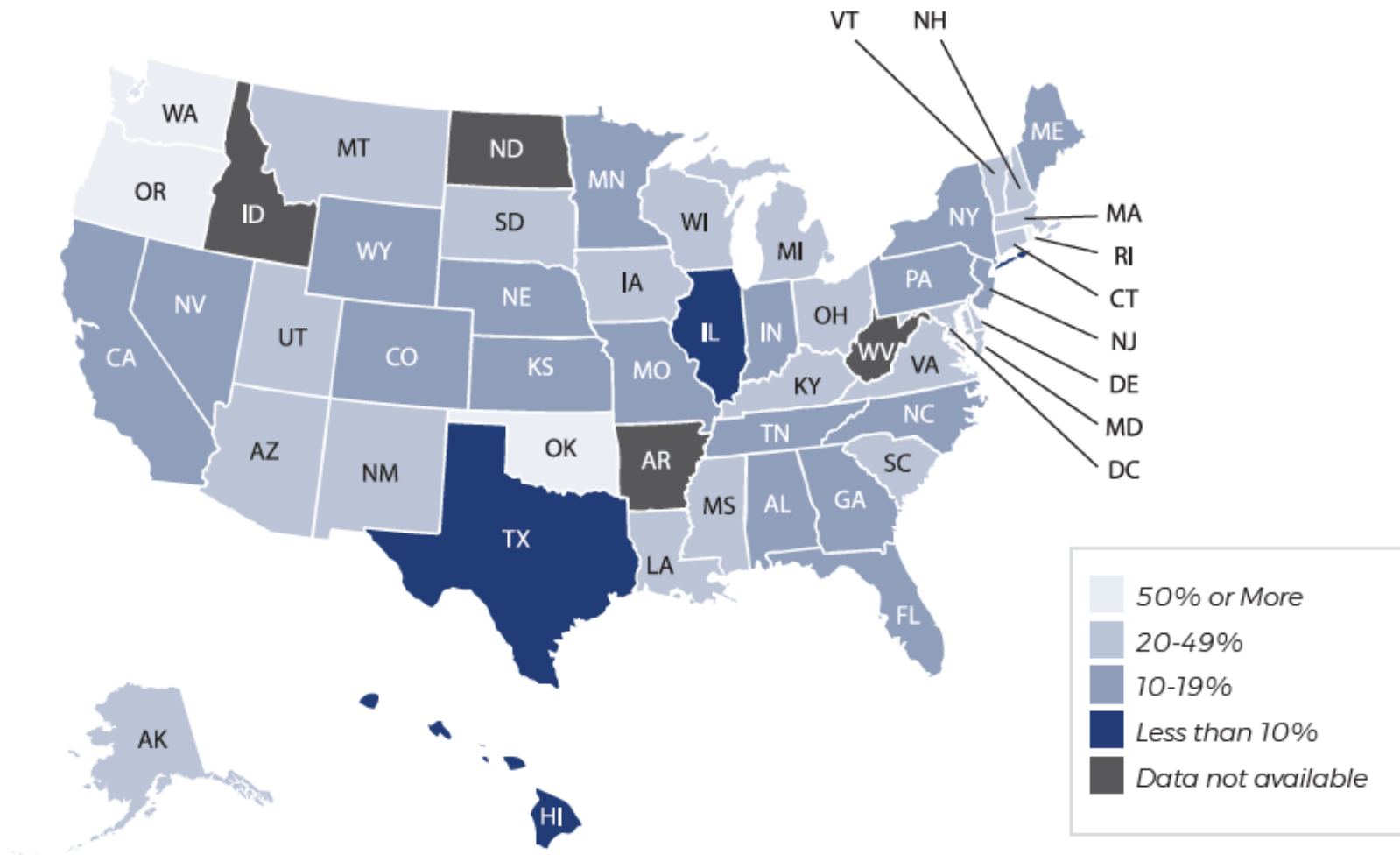


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PERCENTAGE OF PEOPLE WITH IDD PARTICIPATING IN AN INTEGRATED EMPLOYMENT SERVICE



Source: *The Case of Inclusion 2022*, caseforinclusion.org



Q&A



Contact Information



Denise Leonard, CPA
Partner
Plante Moran, PLLC
216.274.6514
denise.leonard@plantemoran.com

TJ Ely, MBA
Senior Manager
Plante Moran, PLLC
216.274.6586
tj.ely@plantemoran.com



Gary Brown, CPA
Director
Brady Ware & Company
614.384.8411
gbrown@bradyware.com

Missy Behymer, CPA
Director
Brady Ware & Company
614.384.8422
mbehymmer@bradyware.com