

Direct Care Worker Recruitment and Conversion Bonus Payments

RFA: Response to Questions

Background: Questions from potential applicants received by the specified submission deadline are written in bold text and the District's responses are provided in red. This is drafted regarding [this RFA](#).

- 1. Please clarify whether on page 8 of the RFA the following verbiage (f., i.) is a typo: "Be newly hired meaning, hired on or after April 1, 2022. . ." Elsewhere in the RFA the date of April 1, 2021 is used as the cutoff date for "newly hired" employees eligible for the Recruitment Bonus Payment. Is the eligible new hire date 4/1/22 or 4/1/21?**

This is a typo, thank you for the notice. It should read "after April 1, 2021..."

- 2. What is the rationale for DHCF limiting the period of performance for recruitment bonuses to April 1, 2021, through September 30, 2022? What is the significance of April 1, 2021?**

April 1, 2021 is the effective date of the American Rescue Plan Act of 2021 and its Medicaid HCBS related provisions; the date on which employers could reasonably expect that payments for workforce assistance from state Medicaid agencies in the form of grants such as this may be available.

- 3. To be eligible for a recruitment bonus, the worker must be newly hired. DHCF is defining newly hired as a direct care worker who has not worked full-time (32-hours a week) at an enrolled DC Medicaid HCBS provider for the period October 1, 2020 to April 1, 2021.**

- a. What is the rationale for excluding new workers based upon this definition?**

The purpose of this initiative is to assist providers with the costs associated with bringing new direct care workers into the Medicaid HCBS workforce or who used temporary authorities to hire direct care workers, who then eventually received certification. Direct care workers who do not meet the definition of newly hired proposed by the District represent existing members of the workforce who may separately be eligible for retention bonus payments. The District encourages HCBS providers to review other grant initiatives (i.e. Direct Care Worker Retention Bonus Payments) for additional funding opportunities for Direct Care Workers who do not qualify for retention hiring/conversion payments.

- b. How does this exclusion support the goal of increasing the pool of qualified staff available to HCBS providers and ensuring continuity of care?**

This initiative is intended to assist providers with the costs associated of bringing new direct care into the workforce, or who used temporary authorities to hire direct care workers, who then eventually received certification. This is only one of a few planned initiatives the District is putting in place to address HCBS workforce issues. The District encourages HCBS providers to review other grant initiatives (i.e. Direct Care Worker Retention Bonus Payments) for additional funding opportunities for Direct Care Workers who do not qualify for recruitment/conversion payments. Beginning in calendar year 2023, the District is also planning to make supplemental payments to HCBS providers to support increased direct care worker wages under a separate ARPA 9817 initiative, outlined in the FY 2023 Budget Support Act of 2022 as the "Direct Support Professional Payment Rate Amendment Act of 2022."

- c. Has DHCF determined how many workers would be ineligible for a recruitment bonus because they worked during some or all of the period between October 1, 2020 and April 1, 2021?**

DHCF has not completed this analysis. DHCF reminds stakeholders that direct care workers who do not meet the definition represent members of the workforce who may separately be eligible for retention bonus payments.

- d. **How would an employer know that a worker has not worked for another HCBS provider during the period between October 1, 2020 and April 1, 2021? Will the employee's attestation suffice?**

DHCF will rely on the **employer's** attestation, though DHCF will verify those attestations using available data sources.

- e. **If an employer pays a bonus to an employee who is later found to be ineligible for the bonus, will DHCF hold the employer accountable or will you seek reimbursement from the employee? How will this be handled?**

Employers are the applicants and will be held responsible for any expenditures regarding funding issued under this RFA. DHCF will notify applicants of the direct care workers included in their count of eligible direct care workers upon award of the grant.

- 4. **Many direct care workers work "on-call" for multiple agencies. According to the RFA, if a worker works for multiple agencies who are applying for the grants, the District will assign the direct care worker to a single agency based upon the hours worked over the months or years in question.**

- f. **Could you be more specific about how you intend to do this and when?**

DHCF will look at available information (including reimbursement data) to arrive at an estimate of the agency the direct care worker was primarily employed at during the period in question. This will happen after the application is submitted and before notice of the grant's award is provided.

- g. **Employers generally do not know when an aide is working for another agency or program. How will the employers be notified and when?**

Employers will be notified upon award of the grant.

- h. **Will employers be informed in advance of the application deadline?**

No. Employers will be notified upon award of the grant.

- i. **How will employees be notified?**

Employees will not be notified by DHCF. Providers will be responsible for distributing payments.

- 5. **Some employers hired CNAs under DOH waivers but those workers have not yet been able to obtain their HHA certifications due to the inability to enroll in a Bridge Course, testing date delays and delays in processing. Would DHCF consider amending the eligibility requirements to allow employers to provide conversion bonus payments to workers who have applied for certification but have not yet been able to complete the process?**

This initiative is planned only for those who have completed the certification process by the September 30, 2022.

- 6. **Can DHCF provide clarification related to why the RFA excludes contractors or part time working as Direct Care Workers? Most EPD Waiver Direct Care Workers operate in a contract position. The RFP also appears to be somewhat contradictory to this point.**

Part-time workers are countable for purposes of this RFA, as long as all other requirements are met. DHCF reminds HCBS providers that contracted and temporary staff are not countable for purposes of this initiative.

7. Is there any funding in the grants to cover the administrative cost of managing the grant?

Any grant funds received through this grant award must be spent on bonus payments to eligible direct care workers.

8. Especially, given that the period to qualify for the incentive reimbursements has already passed (ended September 30, 2022), the reimbursements can not incentivize the employees, or aid with recruitment, conversion, vaccinations, or retention. To really serve as incentives, it would be much better if the end dates of the grants were in the future.

This initiative is one of a few planned initiatives the District is putting in place to address HCBS workforce issues. Beginning in calendar year 2023, the District is also planning to make supplemental payments to HCBS providers to support increased direct care worker wages under a separate ARPA 9817 initiative, outlined in the FY 2023 Budget Support Act of 2022 as the “Direct Support Professional Payment Rate Amendment Act of 2022.

9. Will licensed staffing agencies/provider that have a Medicaid ID with DDS qualify for the Direct Care Worker compensation, since the provider has both Home Health Aides and Direct Support workers?

To be eligible providers must meet all eligibility criteria set forth in Section III of the RFA. Eligible providers must be DC Medicaid-enrolled provider organization that provides HCBS services through the following HCBS Medicaid provider types and corresponding eligible direct care workers:

- a. Home Health Agency – Personal Care Aides; Home Health Aides
- b. Adult Day Health Providers – Personal Care Aides employed as Direct Care Support staff
- c. Rehabilitation: Behavioral Health (e.g. Mental Health Rehabilitation Services; Adult Substance Use Rehabilitation Services) – Certified Peer Specialists
- d. Supported Employment Providers - Certified Peer Specialists
- e. Other 1915(c) Home and Community-Based Waiver Providers – Homemaker; Chore Aides; Direct Support Professionals in Residential Habilitation, Day and Employment Services, Assisted Living Facilities, Supported Living, Host Home settings or providing In-Home Supports, and Respite

10. To be eligible, workers must be employed on the day the application is submitted. What happens if that changes? That is, the provider develops their application but then a worker leaves - how will that be handled?

Grants funds received under this initiative must be used to fund recruitment/conversion bonus payments to eligible direct care workers. If the provider has paid a recruitment or conversion bonus to an employee that is no longer employed as of the date of grant submission, the provider may still receive grant funds associated with the costs of that bonus if they are able to submit information on/demonstrate the following: (1) Identifying information (NPI, Other information) for the employee; (2) The period of employment.

11. Will the grants be paid to providers even if one or more qualifying criteria is not met?

Each provider must meet all criteria set forth in Section III of the RFA.

Sophia Aman, Palisade Health Care Partners

12. Does unpaid personal or medical leave of absence taken by PCAs during the qualifying period affect the 12-month continuous service criteria?

No, so long as they remained continuously employed by the agency.

13. If a provider has multiple Medicaid IDs, do we have to submit multiple applications. Metro Homes Inc is an ICF Provider and has 9 separate Medicaid ID'S. Do we have to submit 9 applications? The reason for this question is because the proposal title is asking for the Medicaid ID to be included.

DCMedicadID-RFANumber-Application Date

No. Please make sure your application includes all of the provider IDs your agency has, along with other required information. The application name should use any one of your provider IDs if you have multiple. Please note that ICF providers are not HCBS providers and may not qualify for this incentive payment.

14. It was mentioned in the call, that this is a reimbursable grant. Does that mean the provider has to pay the bonus first before we get reimbursed. If this is the case, what will happen if the provider pays the employees and then do not get reimbursed.

You are not required to make a payment until you are notified whether or not you will receive funding for an individual direct care worker and are awarded grants funds under this initiative.

15. Does the amount paid out to the employee also include the taxes? Meaning if the amount is \$1,500, then do we have to pay \$1,500 or can it be \$1,385.25 (Taxes FICA, SUT FUTA) the remainder. If this is not the case and employee need to pay the entire \$1,500, how can the provider gets reimbursed for the employer portion of taxes.?

The amounts specified in the RFA refer to the amount to be paid to the direct care worker in the form of a bonus. The amount paid to the HCBS provider may reflect the amount of the total bonus plus the employer portion of the required payroll taxes. As a formula, (Bonus payment from DHCF = \$1500 bonus to employee + required employer portion of payroll taxes). DHCF will add a standard calculated employer portion of payroll taxes to each grant award.

16. For staff with variable hours (fluctuating above and below 32 hrs per week) and continuous employment, is there a specific methodology you require for calculating FTE?

The District is proposing a simple definition of part-time worker as any direct care worker who works less than 32 hours per week. Employers need only report the information requested by the RFA in the templates provided. Each part-time worker (less than 32 hours/week) is countable for purposes of this initiative. The District will only reimburse providers \$750 plus a standard calculated employer portion of payroll taxes per eligible part-time worker, per 12-month period they were retained. The District reminds applicants that contractual or temporary staff are not countable for purposes of this initiative.

17. Can you please clarify the parameters for full time start and end date? Does this end date refer to the date at which an employee became part time or the date at which an employee separated from the agency?

The employment start and end dates requested in the Recruitment and Conversion Health Care Worker List Excel document refers to the date the employee's employment ended, if applicable. Please refer to the instructions worksheet for complete instructions and definitions. As stipulated in Section III A 4 e in the RFA, if the provider has already paid a recruitment or conversion bonus to an employee that is no longer employed, the provider may still be eligible to receive grant funds associated with the costs of that bonus if they are able to submit identifying information for that employee and the period of employment. The "Full Time as of Start Date? (Y/N)" column requests information on whether the employee is considered full or part time for the purposes of this grant.

18. Will you let us know the list of approved direct care workers by the award date (i.e., prior to us distributing any awarded bonus payments to our employees)?

Providers will be notified of countable workers on the award date.

19. We have several positions at our organization that must complete required training and certifications with DC/DDS to provide Direct Care to the people we support through HCBS Programs. Can we include all positions meeting this eligibility standard (includes Home Coordinators, LPNs, and Direct Support Professionals) or is this funding specifically intended for Direct Support Professionals?

Eligible direct care workers are outlined in Section III of the RFA. Direct support professionals are included in

20. On the spreadsheet there is a column for "Employment end Date", do we include past employees?

Yes, as stipulated in Section III A 4 e in the RFA, if the provider has already paid a recruitment or conversion bonus to an employee that is no longer employed, the provider may still be eligible to receive grant funds associated with the costs of that bonus if they are able to submit identifying information for that employee and the period of employment.