



*Supporting a Better
Tomorrow...Today*

ID/DD Waiver Update and Proposed Changes



Introductions

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Agenda

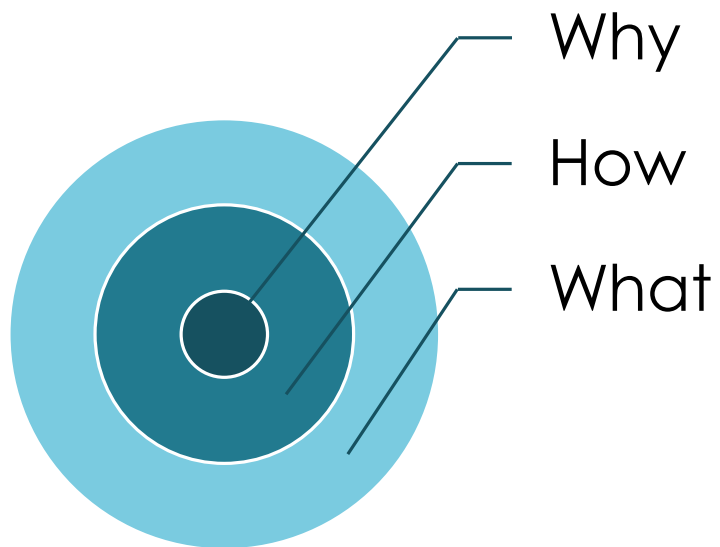
- What we Believe and DMH's Purposes
- Timeline for Waiver Change Implementation
- Review of ID/DD Waiver Proposed Changes:
 - New Service Definitions & Language
 - New Services
 - New Rates
 - New LTSS system
 - New Person-Centered Planning Process
 - Implementation of Supports Budgets



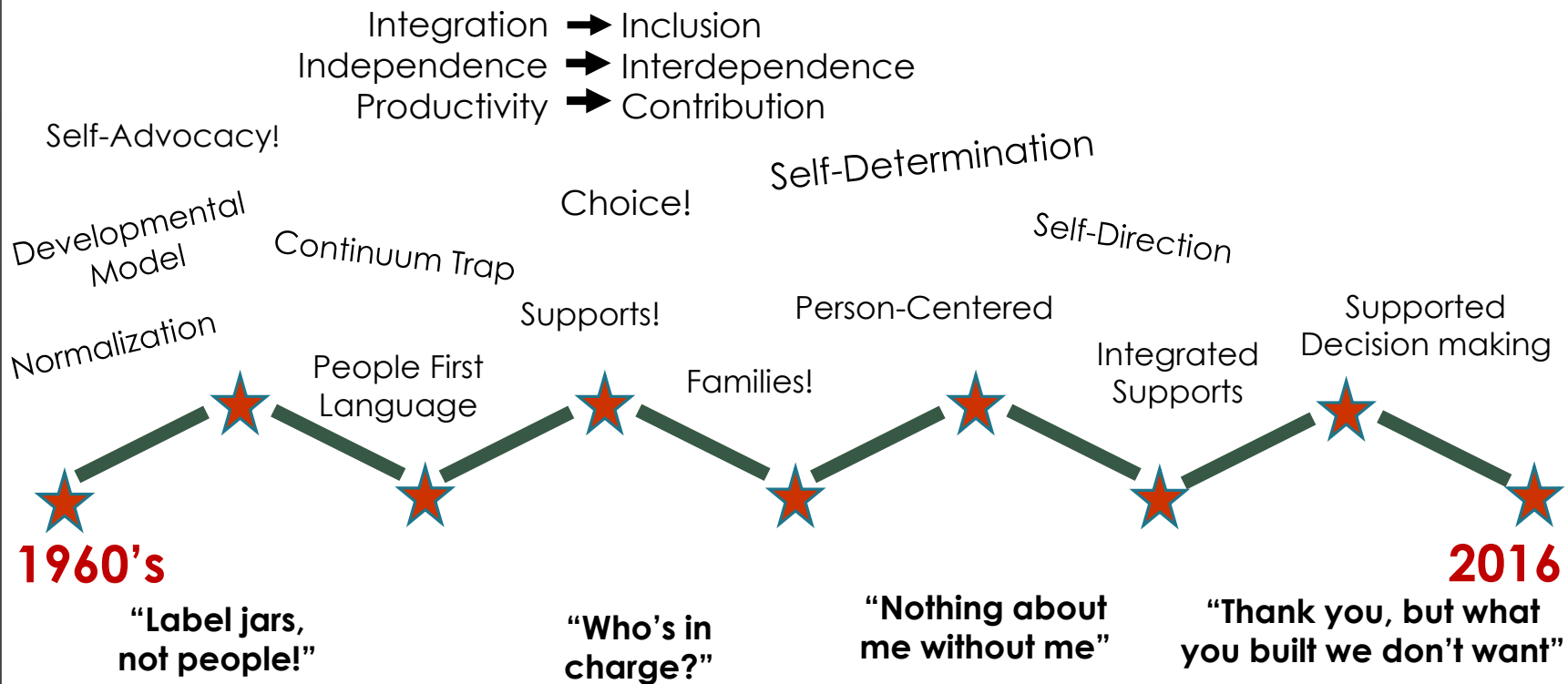
What We Believe

One question to ask...
Why are we doing this?





What do you believe? And when did you believe it?



Department of Mental Health

Mission

Supporting a better tomorrow by making a difference in the lives of Mississippians with a mental illness, substance use disorder and/or intellectual and developmental disability one person at a time

Vision

A better tomorrow exists when...

- All Mississippians have equal access to quality mental health care, services and supports in their communities.
- People actively participate in designing services.
- The stigma surrounding mental illness, IDD, substance abuse and dementia has disappeared.
- Research, outcome measures, and technology are routinely utilized to enhance prevention, care, services, and supports.



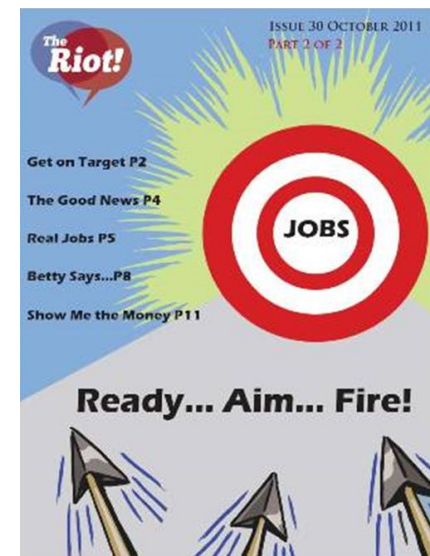
Other Related Principles

A person-centered, community-oriented approach to deliver services for people with IDD also emphasizes:

The contribution that people with IDD and their families can make to support one another and contribute to their communities

A shared responsibility for the wise use of public dollars to support all in need

Managing the system in ways that are efficient and fair to everyone



www.theriotrocks.org

What is BIDD trying to do & why?

The Bureau of Intellectual and Developmental Disabilities (BIDD) seeks to create a service system that:

- Supports people with IDD to full lives in the community with the support they need
- Promotes flexibility and choice
- Allocates resources fairly

How?

- Ensuring existing services promote choice and community inclusion while tying back to and meeting support needs
- Offering new services to increase available options and provide more choices for living setting and respite
- Adjusting rates for home and community-based services to allow providers greater ability to individualize supports
- Promoting person-centered planning and practices
- Aligning resources with support needs



Timeline

Submit Waiver
Amendment to
CMS

- DMH will submit their application for a 1915 (c) Waiver Amendment in April 2016.

CMS Approval

- CMS review of waiver applications takes an average of 90 days. No changes can take place until their approval is received.

Implement
Phase 1

- Phase 1 includes language changes and increased reimbursement rates.

Implement
Phase 2

- Support budgets will go into effect upon individual plan renewal dates



ID/DD Waiver Amendment

- **Purpose of the amendment**
 - Change several technical requirements
 - Change service definitions to be in compliance with CMS Final Rule for HCBS Settings Information
 - Incorporate new rate structure
 - Incorporate Supports Budgeting (Resource Allocation)



Technical Changes of Interest

- Changed the word "individual" to "person"
- Increase Reserved Capacity for crisis and deinstitutionalizations
- ICAP scores, along with clinical judgement, will now be used to determine ongoing eligibility/Level of Care, as well as Support Budgets for each person



Current ID/DD Waiver Services

Support Coordination		
Job Discovery	Supervised Living	Crisis Support
Supported Employment	Supported Living	Crisis Intervention
Transition Assistance	Host Homes	Behavior Support
Day Services-Adult	Home & Community Supports	In-Home Nursing Respite
Prevocational Services		Community Respite
Specialized Medical Supplies, Physical Therapy, Occupational Therapy, Speech Therapy		

7 are adjusted and there are 2 new services



Changing Service Definitions

Support Coordination		
Job Discovery	Supervised Living	Crisis Support
Supported Employment	Supported Living	Crisis Intervention
Transition Assistance	Host Homes	Behavior Support
Day Services-Adult	Home & Community Supports	Community Respite
Prevocational Services		In-Home Nursing Respite
Specialized Medical Supplies, Physical Therapy, Occupational Therapy, Speech Therapy		

Job Discovery

- Persons eligible for Job Discovery
 - Adult who has never worked (transitioning from school)
 - 2 or more unsuccessful job placements
 - Leaving an institution
 - Someone in PV/DSA who has never worked
 - Multiple disabilities
 - Unable to represent him/herself

Supported Employment

- Two types
 - Job Seeking– maximum of 90 hours
 - Job Coaching – amount based on recommendations of employer, team and VR
- Self Employment – 55 hrs/mo of at home assistance, 35 hrs/mo in the community



Day Services- Adult

- Strengthened language regarding choices about activities at the program and in the community, about what a person eats, with whom they eat and where they eat, etc.
- Meaningful days
- DSA and Prevocational services must be offered in distinctly separate parts of a building
- Staffing patterns based on ICAP scores



Prevocational Services

- Cannot enter PV services upon graduation
 - Referral to VR first
 - Other services (Job Discovery, DSA, HCS)
- Community access and job exploration emphasized
- De-emphasis on unproductive sheltered work
- DSA and Prevocational services must be offered in distinctly separate parts of a building
- Staffing patterns based on ICAP scores



Supervised Living

- Staff must be physically under same roof
- Awake
- Able to respond immediately
- Supervisor for every 4 homes
- Access to community, food, keys, etc.
- Increased support for people with medical and behavioral support needs
- Amount of staff time per person based on ICAP score



In-Home Nursing Respite

- Person must require medical treatments
- Medication only is not justification for IHNR
- Enforce requirement that doctor must verify need for medical treatments and length of time they will be required



Host Homes

- Can be accessed by those 5 years of age and up
- Family members cannot be providers

New Available Services

Shared Supported Living

In-Home Respite

Shared Supported Living

- People who live in a compact geographic area such as an apartment complex
- Awake staff 24/7
- Respond in 5 minutes or less
- Share staff
- Amount of staff time is based on a person's ICAP score
- Access to community
- Choices



In-Home Respite

- Temporary, periodic relief for the primary caregiver
- Must live in the family home
- Short community outings
- Family members may be the staff person



New ID/DD Waiver Services

Support Coordination		
Job Discovery	Supervised Living	Crisis Support
Supported Employment	Supported Living	Crisis Intervention
Transition Assistance	<i>Shared Supported Living</i>	Behavior Support
Day Services-Adult	Home & Community Supports	<i>In-Home Respite</i>
Prevocational Services	Host Homes	In-Home Nursing Respite
		Community Respite
Specialized Medical Supplies, Physical Therapy, Occupational Therapy, Speech Therapy		



New Rates

- **Tiered rates** will be applied to Supervised Living, Supported Living, Day Services, and Prevocational based on ICAP assessment to provide for those with more significant need.
- **Ample rates** will encourage development of private provider networks to increase choices of providers.
- **Higher rates** for Supported Employment and Host Home service will help providers to offer these services.
- **New rates** will help people with all levels of support needs to live safely and successfully in the community.



New Medicaid LTSS System

- No Wrong Door referral system
- Conflict Free Case Management
- Core Standardized Assessment instrument (ICAP)
- Information and Referral System
- Electronic Visit Verification
- Reportable Event reporting system
- Electronic Support Coordination vehicle for developing, maintaining, revising, and tracking Plans of Services and Supports,
- Electronic input of provider Activity Support Plans
- Quality Improvement Strategy



CMS Final Rule & Person Centered Planning

- Language in all services updated to bring definitions and practice into compliance with CMS Final Rule on HCBS Settings
 - Inclusion of the Statewide Transition Plan
- Beginning the required Person Centered Planning process with all people and their families/providers



- Approach
- Framework
- Assessment
- Support Levels
- Supports Budgets
- Next Steps

Implementing Supports Budgets

John Agosta & Alena Vazquez

**Human Services Research
Institute (HSRI)**

General Approach

Establishing supports budgets...

- Provides policy makers with information necessary to make fiscal choices that are fair & predictable, make the best use of available money, and are consistent with driving principles of the system
- Allocates resources to people based on their assessed level of need means that each person receives what they need
- Establishes a best fit solution for most, but takes care to accommodate those with extraordinary needs

Looking Things Over

Access	Getting a Budget	Service Planning	Service Delivery	Quality Monitoring
Understanding the process Eligibility	ICAP assessment Service packages Informing people	Creating a service plan	Arranging for service delivery Service delivery Paying for services	Voicing complaints Monitoring Making changes

← Supporting Policies, Rules & Regulations, and Communication →

Blending Things Together

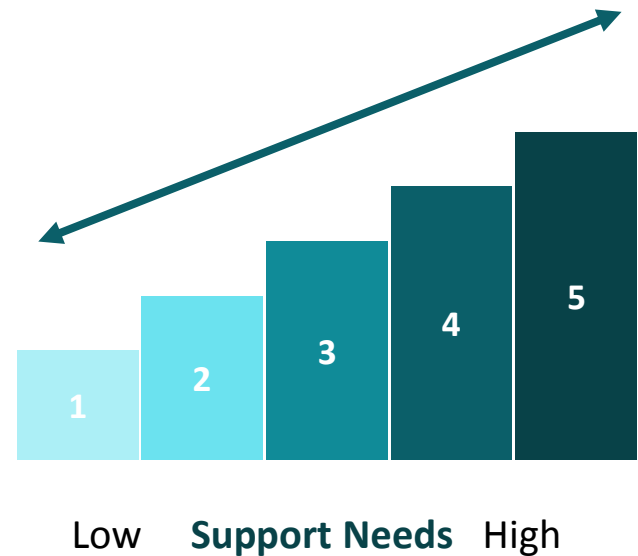


Building a Framework for Service Needs

Introducing new rates with different expectations about service use

Decide on a level-based framework

Levels must account for a range of support needs, but also categorical needs



Assessment



- All service recipients will have an assessment using the *Inventory for Client and Agency Planning (ICAP)*
- A widely-used instrument to assess children and adults with IDD
- Helps identify the type and amount of assistance a person needs to live as independently as possible

Support Levels

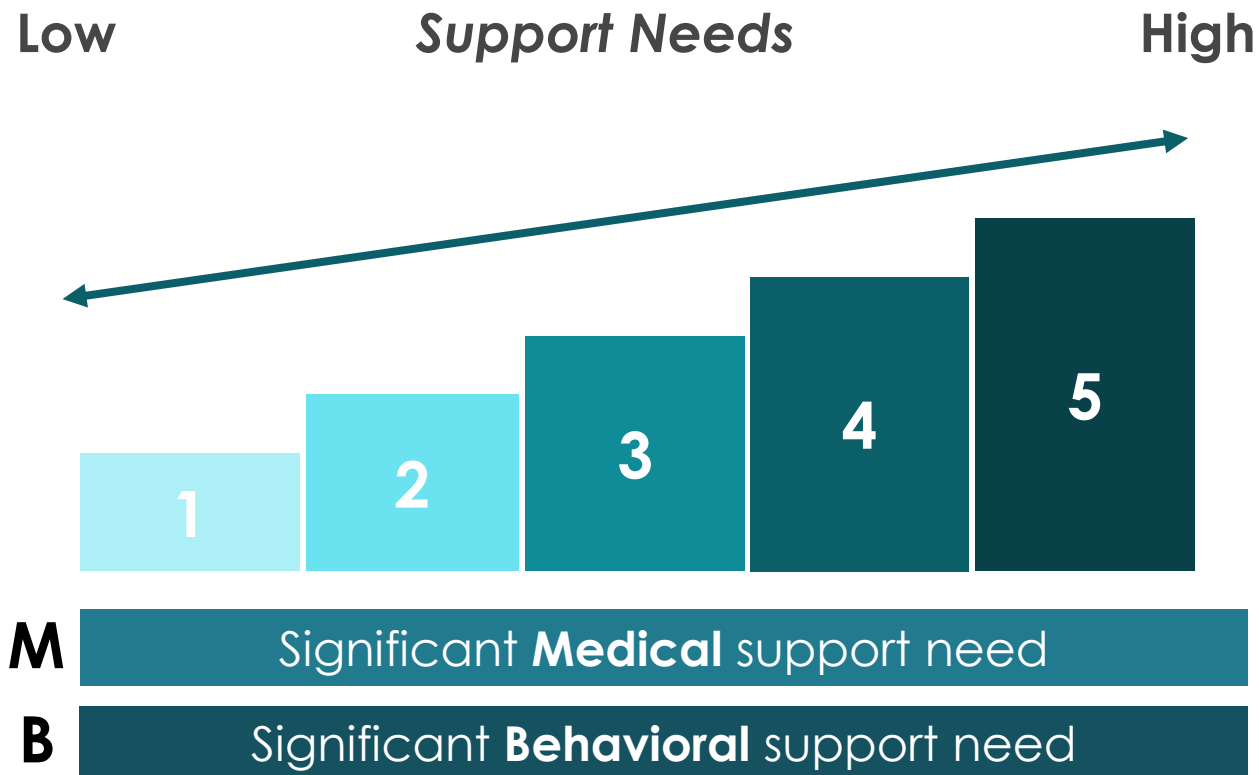
Description	Support Levels	ICAP Levels
Fairly independent, may need intermittent support with living activities like cooking and cleaning	1	9
May need assistance getting ready for the day, household chores, accessing places in their community, purchasing groceries	2	7 & 8
Moderate support needs, may need reminders to complete daily living activities such as bathing, may use alternative means for communication	3	5 & 6
Extensive support needs, likely medical and behavioral support, physical assistance with daily life activities	4	3 & 4
Require constant support, significant hands on assistance with daily life activities, support with communication, and maintain health and safety	5	1 & 2

Supplemental Questions and Extraordinary Support Needs

- During the ICAP assessment additional questions, called Supplemental Questions, are asked. These pertain to specific medical and behavioral support needs.
- A person at any level (1-5) may have these extraordinary needs and will be given a special level designation (M= medical, B= behavioral)
- Certain responses to these questions indicate that the person being assessed has the kinds of support needs that may require different or additional supports.



Support Level Framework



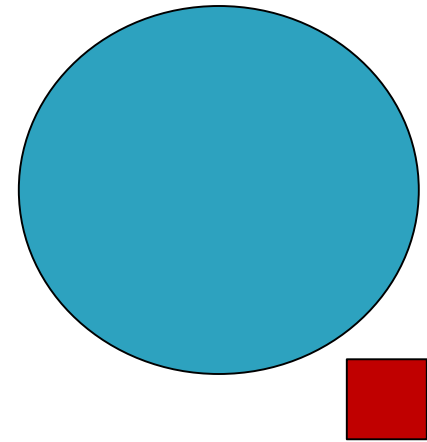
What about exceptions?

Everyone is unique!

The supports budgeting process may account for most people.

Yet some people will have exceptional needs and must be considered one by one.

An Exceptions Process is designed to assure that **everyone** can have their needs met.



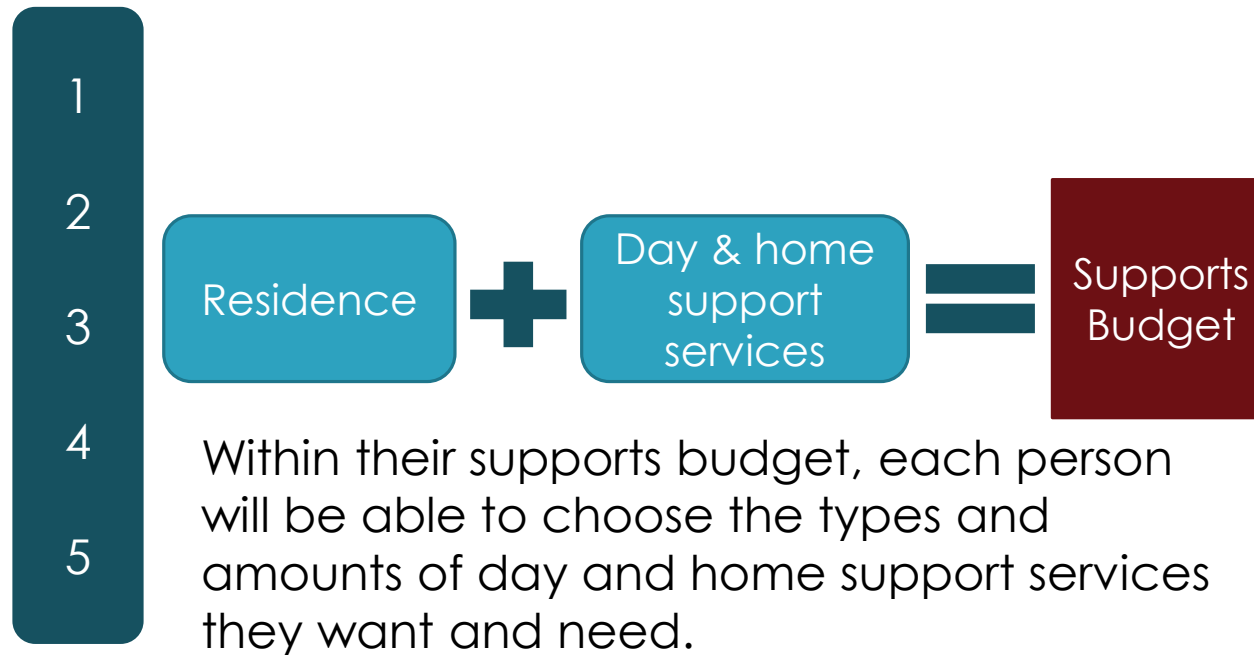
Supports Budgets

- People who use waiver services and their families will have information about their supports budget prior to planning
- They can make informed choices about their services and supports
- The supports budget will guide their choices



Supports Budgets

Supports Level



Base Budget Services vs. Add-On Services (plus supports coordination)

Example Base Budget Services

- Job Discovery
- Supported Employment
- Day Services- Adult
- Prevocational Services
- Respite: In-Home, Community & Nursing
- Home and Community Supports
- Residential: Supervised, Supported, Shared Supported, Host Home

Example Add-Ons

- Crisis Support
- Crisis Intervention
- Specialized Medical Supplies
- PT, OT, Speech
- Behavior Support
- Transition Assistance



Controlling My Supports Budget



Tom

- volunteers 3 days a week independently answering phones at the animal shelter.
- Wants help preparing his meals, learning how to do his laundry and clean his home so he can move out on his own!
- Rides with friends to the bowling alley every Friday to meet with his bowling league.



Sally



- Is a great cook and helps her dad with all the household chores.
- Has a job at a clothing store but needs a job coach to check-in with her and help her learn new tasks.
- Needs someone to stay the night with her when her dad goes out of town on hunting trips.

Putting My Budget to Work



Tom

- Tom is great at getting out in his community on his own.
- Tom love his volunteer job and has friends at the animal shelter who help him when he needs it.
- Tom needs help in his home with cooking and cleaning and wants to use his support budget to get this help.



Sally

- Sally loves living at home and doesn't need paid support at home.
- Sally needs an in-home respite provider so she is safe when her dad is out of town.
- Sally loves her job and wants the help of a job coach to keep working successfully.



Maintain High Expectations

Lead On!

- Where imagery leads, policy follows and behavior results.
- What is your image?
- What do you believe?



Justin Dart

We believe that people with intellectual and developmental disabilities have the right to live, love, work, play, and pursue their life aspirations - just as others do - in their community with the support they need.

Concluding Thoughts



Questions?



Concerns? Complaints? Cheers?

Contact:

Ashley Lacoste Ashley.Lacoste@dmh.state.ms.us 601-359-1288

Brandy Andrews Brandy.Andrews@dmh.state.ms.us 601-359-1288

Concerns or Complaints can also be made anonymously by
contacting **The Office of Consumer Support 1-877-210-8513**

