

**Testimony
Health Services Committee
Senator Lee, Chairman
August 1, 2017**

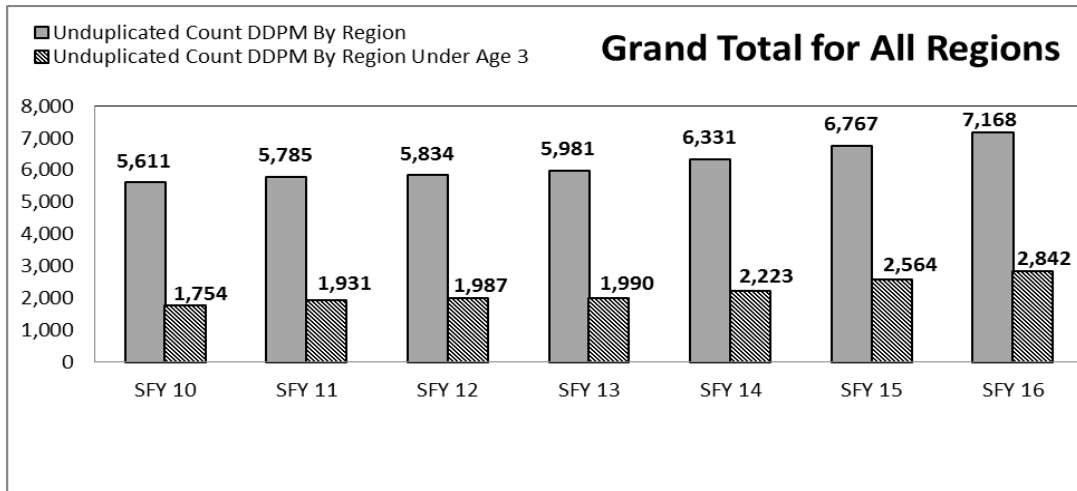
Chairman Lee and members of the Health Services Committee, I am Tina Bay, Director of the Developmental Disabilities Division of the Department of Human Services (Department). I am here today to provide you an overview of the Developmental Disabilities (DD) services and delivery system.

Program

The DD system provides services for eligible individuals with an intellectual or developmental disability, and children birth to age three with developmental delays.

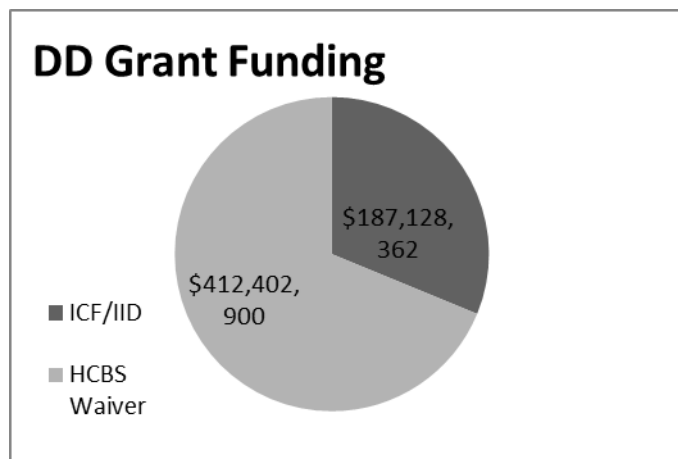
Services include residential and day habilitation, employment, family support, self-directed, corporate guardianship, infant development, and right track. These services are funded through the Medicaid State Plan, Medicaid 1915(c) home and community based waiver, Part C of Individuals with Disabilities Education Act and general fund.

The DD system continues to see an increase in the number of clients served. The chart on the next page highlights the total unduplicated number of clients that received DD program management over a seven-year period. This represents a 27.7% increase from State Fiscal Year (SFY) 2010 to SFY 2016.



In addition to serving more clients, the data shows an increase in the utilization of services, including the number of services provided (units) and staffing levels. Client acuity drives the cost of services, and we continue to see an increase in the number of clients who need enhanced staffing levels to safely and successfully live in the community.

The DD Division’s 2017/2019 executive budget included caseload growth for over 600 new clients and an increase of \$24,881,448 general funds for caseload growth and utilization changes. Below is a breakout of the 2017/2019 executive budget funding for home and community based services and community intermediate care facilities.



DD Transitions

The DD Division continues to work closely with the Life Skills and Transition Center (LSTC), regional staff, providers, and other stakeholders to transition clients from the LSTC to community services. In the 2015/2017 biennium, the Department repurposed an FTE from the LSTC to the DD Division. This position is working with providers and other stakeholders to divert clients from placement at the LSTC and will support the Department's continued efforts to comply with the Olmstead Act. In addition to the repurposed FTE, the DD Division's 2017/2019 executive budget included funding for 24 transitions from the LSTC to community placements.

Technical Assistance Effort

In the fall of 2016, the Department requested technical assistance from the Centers for Medicare and Medicaid Services (CMS). This request, which was approved in February 2017, is a joint effort with the Aging Services Division, Home and Community Based Services Program and Behavioral Health Division. The primary goals of this technical assistance are to:

1. Conduct a comprehensive review of the states existing waiver programs to identify potential paths for eligibility for non-I/DD eligible individuals. This review will entail gap identification with programmatic recommendations for consideration to address areas requiring programmatic bolstering;
2. Provide the state with strategies to improve (and maintain) consistency in the application of criteria across staff responsible for applying eligibility criteria;

3. Assist the state in identifying potential strategies to address gaps in service, such as those to support individuals with co-occurring MH/IDD needs;
4. Provide technical assistance related to mitigating conflict of interest in case management structures; and
5. Provide information and recommend tools/strategies to the state related to person-centered practices and planning.

Over the past five months, the vendor has met frequently with Department staff, participated in two stakeholder meetings, and reviewed feedback gathered through a statewide survey. They are currently compiling a report that will detail out their observations and recommendations. The report is expected to be finalized in the fall of this year.

The Department plans to use this information to examine waiver criteria and services to determine if certain individuals are failing waiver criteria or to determine if certain waiver recipients need additional services. The result may be a change to an existing waiver or a new waiver.

This concludes my testimony and I would be happy to answer any questions you may have.