



# Community Meetings with the Department of Intellectual and Developmental Disabilities and The Bureau of TennCare:

*A Conversation with  
Providers about  
Home and Community Based Services*





**Once all Community Meetings have concluded,  
(after February 10<sup>th</sup>), the PowerPoint slides  
will be posted on  
the DIDD and TennCare websites at:**

- **[tn.gov/didd](http://tn.gov/didd)**
- **[tn.gov/tenncare](http://tn.gov/tenncare)**



# *Why are we here?*

- To talk about Home and Community Based Services (HCBS) for individuals with intellectual and developmental disabilities
- To get your input on:
  - the kinds of HCBS that people with intellectual and developmental disabilities need most
  - the kinds of supports that family caregivers of people with intellectual and developmental disabilities need most
  - ways HCBS for people with intellectual and developmental disabilities can be improved
  - ways to provide HCBS to people with intellectual and developmental disabilities more cost effectively so that more people who need services and supports can receive them



# *Medicaid-funded HCBS programs for individuals with intellectual disabilities today:*

## **3 Section 1915(c) HCBS Waiver Programs**

- **Arlington** Waiver Program (**300** participants as of Nov 2013)
- **Statewide** Waiver Program (**6,318** participants as of Nov 2013)
- **Self-Determination\*** Waiver Program (**1,139** participants as of Nov 2013)

\*People enrolled in the Self-Determination waiver can choose to employ and supervise the workers who will provide certain kinds of HCBS. A fiscal employer agent manages all of the payroll and payroll taxes.





## **1915(c) HCBS Waivers**

- Authorized under Section 1915(c) of the Social Security Act
- An agreement between the State Medicaid Agency (TennCare) and the federal Centers for Medicare and Medicaid Services (CMS)
  - The State Medicaid agency may subcontract with another entity to operate the waivers—in this case, DIDD
- Allows states to provide HCBS to certain target populations who would otherwise qualify for and need institutional care
  - Services not otherwise covered under the Medicaid Program
  - Services not available to everyone else enrolled in the Medicaid Program
- Allows state to waive certain requirements that can make it easier to qualify for Medicaid





## ***1915(c) HCBS Waivers***

- TennCare submits an application for each waiver program to CMS
- CMS reviews and approves (or may deny or request modifications)
- CMS has 90 days to review and approve (can stop the clock with a request for additional information; may request modifications or deny)
- Approved services reimbursed with federal and state funding
  - State pays roughly 1/3 of the cost of services provided
  - Federal government pays roughly 2/3



## ***1915(c) HCBS waivers***

- Must be renewed every 5 years in order to continue
- Arlington and Statewide waivers must be renewed by **December 31, 2014**
- A waiver **amendment** can be submitted at any time



# ***Services Offered under the Arlington and Statewide Waivers***

- Support Coordination (case management)
- Transitional Case Management
- Residential Services
  - Supported Living
  - Residential Habilitation
  - Medical Residential Services
  - Family Model Residential Services
  - Intensive Behavioral Residential Services



## ***Services Offered under the Arlington and Statewide Waivers (cont'd)***

- Employment Day Services
- Personal Assistance
- Respite
- Behavioral Respite Services
- Individual Transportation Services
- Environmental Accessibility Modifications
- Specialized Medical Equipment and supplies and Assistive Technology
- Personal Emergency Response Systems (PERS)



## ***Services Offered under the Arlington and Statewide Waivers (cont'd)***

- Behavior Services
- Nutrition Services
- Orientation and Mobility Training
- OT, PT, Speech
- Nursing Services
- Adult Dental Services
  - Statewide Waiver excludes routine exams, cleanings, preventative services
- Vision Services (Arlington Waiver only)



# ***2011 Expenditures for TN 1915(c) Waivers for Individuals with Intellectual Disabilities***

***(based on CMS 372 Reports)***

- **Arlington Waiver-** 341 unduplicated participants (unique individuals served across the program year); \$48.5 million total waiver expenditures; average per person cost: **\$142,031**
- **Statewide Waiver-** 6,336 unduplicated participants \$520 million total waiver expenditures; average per person cost: **\$82,220**
- **Self-Determination Waiver-** 1,227 unduplicated participants; \$21.2 million total waiver expenditures; average per person cost: **\$17,248**





# ***2011 Expenditures for TN 1915(c) Waivers for Individuals with Intellectual Disabilities***

- The average cost of providing HCBS to individuals with ID in TN was significantly higher than most other states in 2011 – nearly twice the national average and nearly twice the median income of a family of four in TN.
- Contributing factors include:
  - Developmental Center litigation
  - Waiting list selection criteria  
(people “in crisis” tend to need more intensive services)
  - Waiver program design



# ***2011 Expenditures for TN 1915(c) Waivers for Individuals with Intellectual Disabilities Across States\****

- Tennessee spent 162% of the median value of state spending on residential services (8<sup>th</sup> highest in the country among states that offer residential services).
- Tennessee spent 236% of the median value of state spending on person assistance services (5<sup>th</sup> highest in the country among states that offer personal assistance).
- Tennessee spent 489% of the median value of state spending on nursing services (5<sup>th</sup> highest in the country among states that offer nursing services under these waivers).

\* Based on an analysis of 2011 CMS 372 report data across all states





# Per Person DIDD Expenditures by State and Category

\* "DIDD Expenditures" refers to spending by the Tennessee Department of Intellectual and Developmental Disabilities (DIDD).

Personal Care

Residential Services

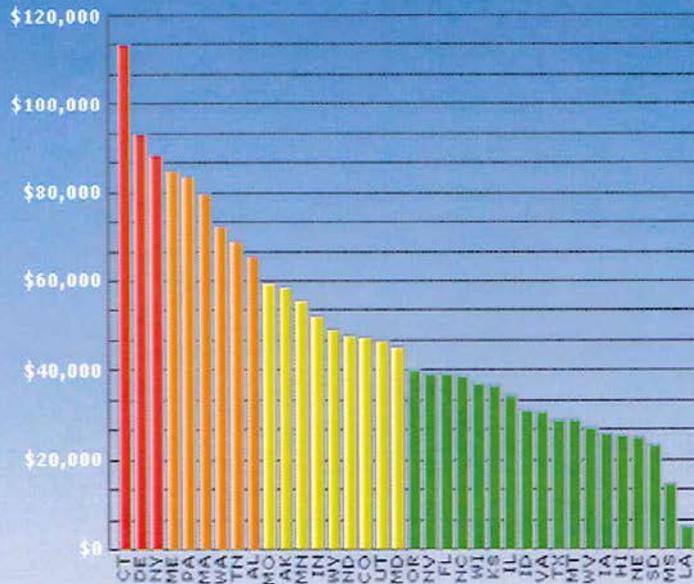
Respite Care

**#8 Highest Expenditure on Residential Services**

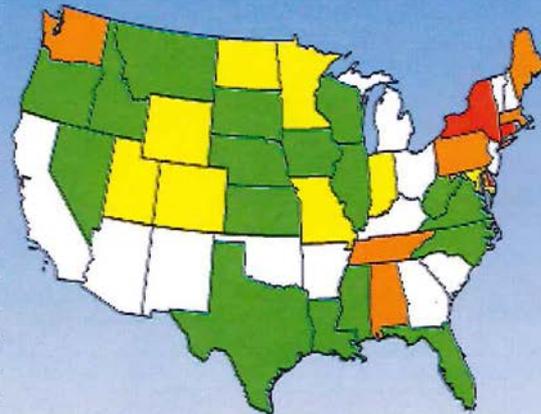
*Out of 36 states*

Per Person Expenditures on DIDD Services

*Residential Services*



Tennessee's per person expenditure of \$69,077.72 is 162% of the median value of \$42,663.42 for states that offer this service.



\*\* "All Services" includes only service categories that are common to TN.





# Per Person DIDD Expenditures by State and Category

\* "DIDD Expenditures" refers to spending by the Tennessee Department of Intellectual and Developmental Disabilities (DIDD).

Nursing

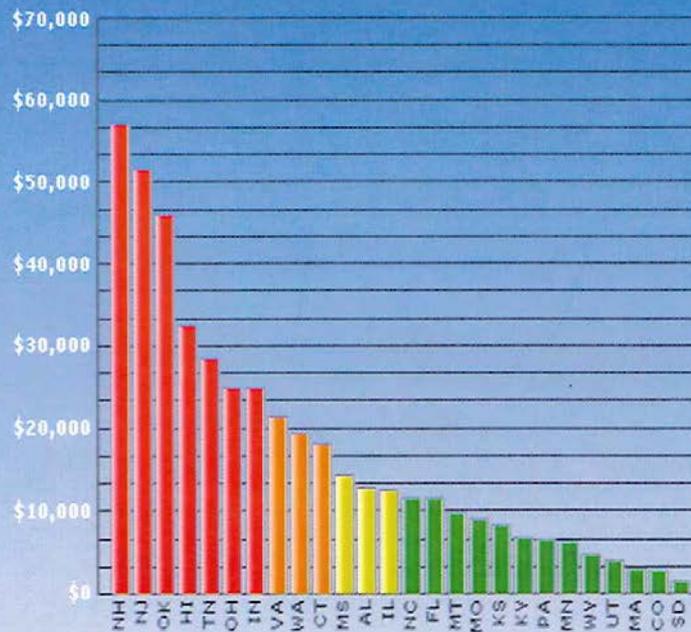
Personal Care

Residential Services

**#5 Highest Expenditure on Personal Care**

*Out of 26 states*

Per Person Expenditures on DIDD Services  
*Personal Care*



Tennessee's per person expenditure of \$28,304.62 is 236% of the median value of \$11,988.57 for states that offer this service.



\*\* "All Services" includes only service categories that are common to TN.





# Per Person DIDD Expenditures by State and Category

\* "DIDD Expenditures" refers to spending by the Tennessee Department of Intellectual and Developmental Disabilities (DIDD).

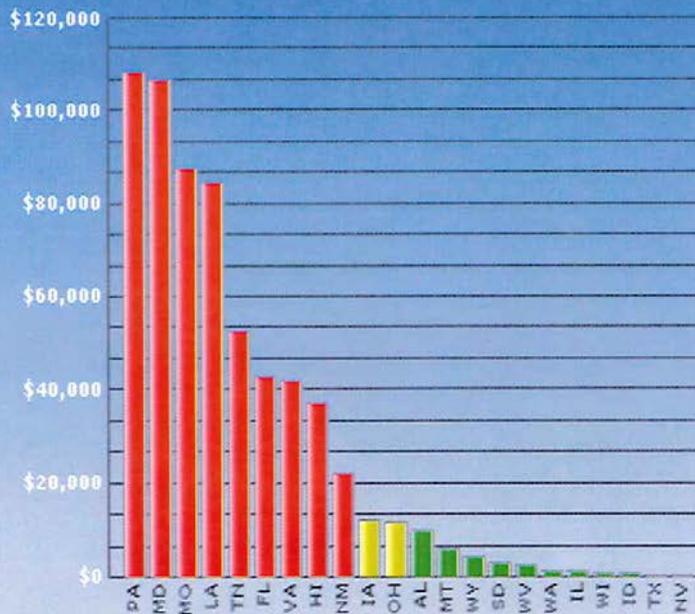
- Nursing
- Personal Care
- Residential Services

**#5 Highest Expenditure on Nursing**

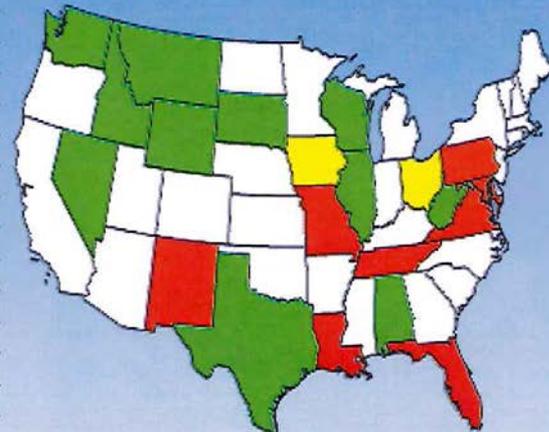
*Out of 22 states*

Per Person Expenditures on DIDD Services

*Nursing*



Tennessee's per person expenditure of \$52,406.39 is 489% of the median value of \$10,710.41 for states that offer this service.



\*\* "All Services" includes only service categories that are common to TN.





# ***2011 Expenditures for TN 1915(c) Waivers for Individuals with Intellectual Disabilities Compared to States in the Southeastern Region (CMS Region 4)\****

- Tennessee spent 176% of the median value of state spending on residential services.
- Tennessee spent 234% of the median value of state spending on personal assistant services.
- Tennessee spent 123% of the median value of state spending on nursing services, and is one of only three states that offer nursing as a separate service under these waivers.

**Tennessee had the highest expenditure of any state in the southeastern region for each of these services.**

\*Based on an analysis of 2011 CMS 372 report data across states in CMS Region 4





# Per Person DIDD Expenditures by CMS Region 4 State and Category

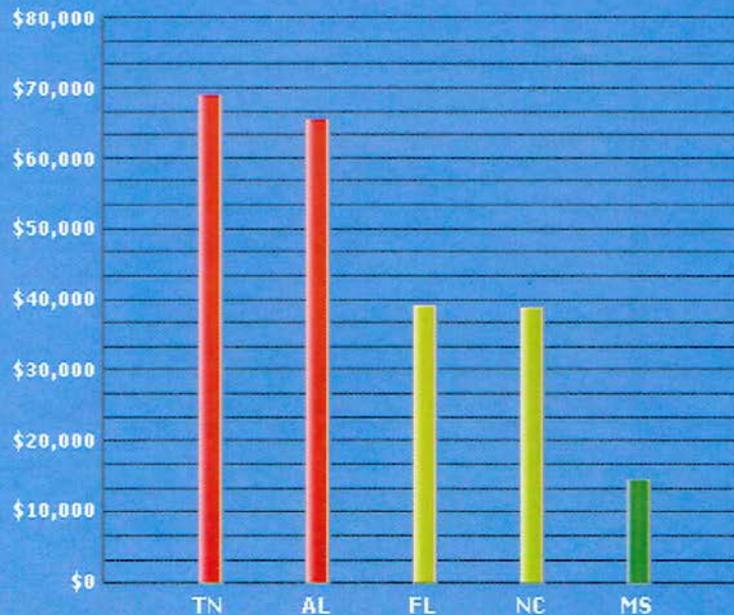
\* "DIDD Expenditures" refers to spending by the Tennessee Department of Intellectual and Developmental Disabilities (DIDD).

- Nursing
- Personal Care
- Residential Services**

**#1 Highest Expenditure on Residential Services**

*Out of 5 states in CMS Region 4*

Per Person Expenditures on DIDD Services  
*Residential Services*



Tennessee's per person expenditure of \$69,077.72 is 176% of the median value of \$39,309.36 for states that offer this service.



\*\* "All Services" includes only service categories that are common to TN.





# Per Person DIDD Expenditures by CMS Region 4 State and Category

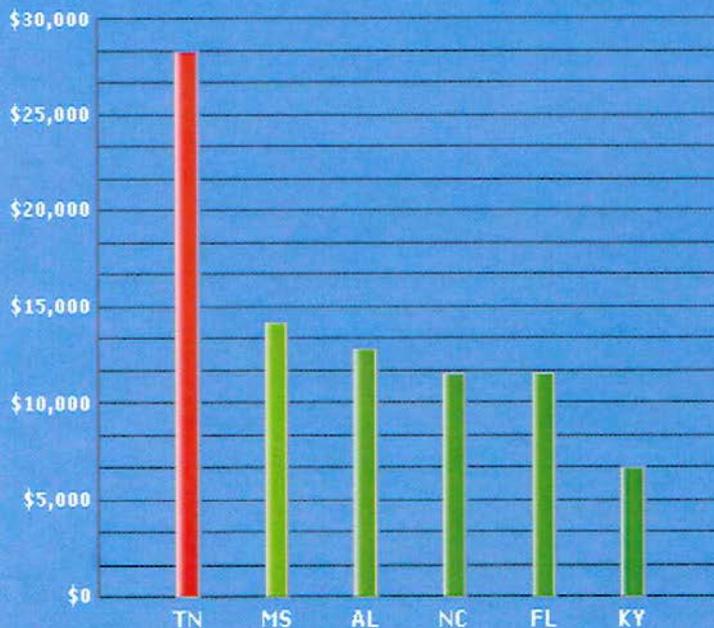
\* "DIDD Expenditures" refers to spending by the Tennessee Department of Intellectual and Developmental Disabilities (DIDD).

- Nursing
- Personal Care**
- Residential Services

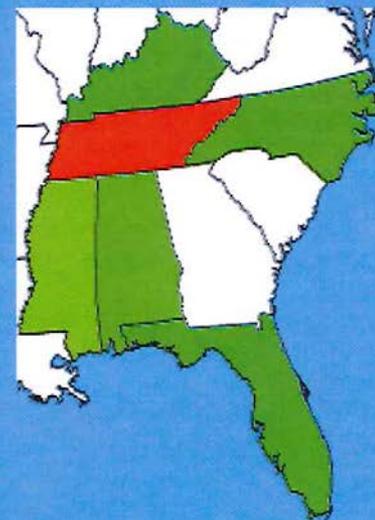
**#1 Highest Expenditure on Personal Care**

*Out of 6 states in CMS Region 4*

Per Person Expenditures on DIDD Services  
*Personal Care*



Tennessee's per person expenditure of \$28,304.62 is 234% of the median value of \$12,118.13 for states that offer this service.



\*\* "All Services" includes only service categories that are common to TN.





# Per Person DIDD Expenditures by CMS Region 4 State and Category

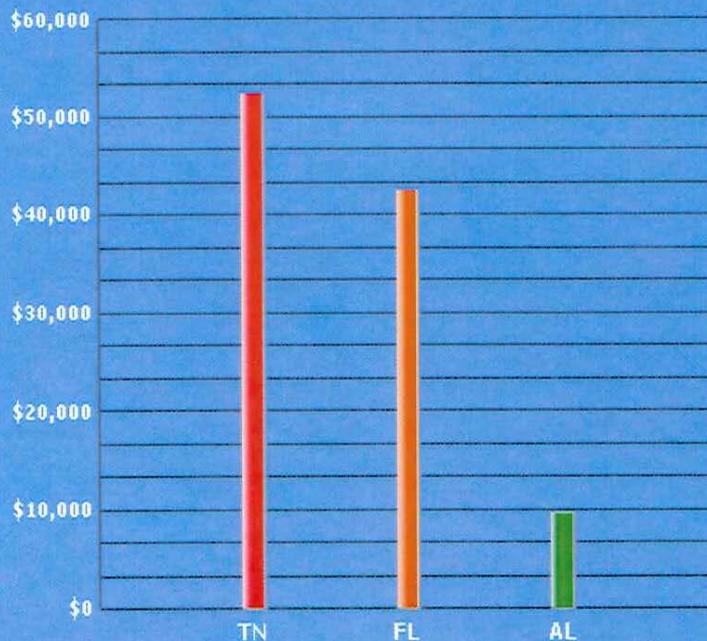
\* "DIDD Expenditures" refers to spending by the Tennessee Department of Intellectual and Developmental Disabilities (DIDD).

- Nursing
- Personal Care
- Residential Services

**#1 Highest Expenditure on Nursing**

*Out of 3 states in CMS Region 4*

Per Person Expenditures on DIDD Services  
*Nursing*



Tennessee's per person expenditure of \$52,406.39 is 123% of the median value of \$42,577.84 for states that offer this service.



\*\* "All Services" includes only service categories that are common to TN.





## *Waiting List*

- 7,180 as of November 2013
- 5,735 are categorized as “active,” “urgent,” or “crisis”
- Remainder are “deferred”
- Does not include people with developmental disabilities other than intellectual disabilities

In addition to continuing to provide high quality services to people currently enrolled in HCBS programs that support choice, self-determination, independence and integration, **we must find ways to provide services as cost-effectively as possible in order to serve more people with intellectual and other developmental disabilities.**

***We think you can help us do that.***





## ***We want your input about:***

- The kinds of HCBS that people with intellectual and developmental disabilities need most
- The kinds of supports that family caregivers of people with intellectual and developmental disabilities need most
- Ways HCBS for people with intellectual and developmental disabilities can be improved
- Ways to provide HCBS to people with intellectual and developmental disabilities more cost effectively so that more people who need services and supports can receive them





## ***Format for today's discussion***

- Break into small groups
- Each group will have a facilitator/recorder
- Someone will also facilitate the discussion (and keep time) across all groups
- Important to focus on the topics identified and keep things moving in order to provide input on all topics
- Report out and next steps



## First Question:

*What are the kinds of HCBS that people with intellectual and developmental disabilities need most?*





## Second Question:

*If a person with intellectual or developmental disabilities lives at home with their family, what are the kinds of supports that family caregivers need?*



## Third Question:

*What are the ways that HCBS for people with intellectual and developmental disabilities can be improved?*



## Fourth Question:

*What are ways to provide HCBS to people with intellectual and developmental disabilities more cost effectively so that more people who need services and supports can receive them?*





## ***Next Steps:***

- DIDD and TennCare will develop a summary of input received
  - from the community meetings
  - through the online survey and comments
- Summary will be shared with stakeholder groups and posted on the TennCare and DIDD websites
  - [tn.gov/didd](http://tn.gov/didd)
  - [tn.gov/tenncare](http://tn.gov/tenncare)



## ***Next Steps:***

- DIDD and TennCare will develop a concept paper about the renewal of the Arlington and Statewide Waivers, as well as ways that the new programs might be structured to serve people more cost-effectively
- There will be additional opportunities to submit comments before the Arlington and Statewide Renewal applications are submitted, or before any new program is proposed