

Report of the Developmental Disabilities Services
Legislative Work Group
Regarding: Act 50

Joint Fiscal Committee
September 11, 2013

Submitted by:
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Department of Disabilities, Aging, and Independent Living

DAIL Commissioner Susan Wehry, M.D. thanks the members of the Developmental Services Work Group for their participation and DAIL's Developmental Disabilities Services Division for their behind the scenes work to support the Work Group.

Report of the Developmental Disabilities Services Legislative Work Group

Executive Summary

The Developmental Disabilities Services Legislative Work Group (hereafter referred to as “the Work Group”) was established by the General Assembly to consider administrative or operational changes to better manage the service needs of persons with developmental disabilities within the appropriated funds in State Fiscal Year 2014 (SFY14). The Work Group was charged to address five specific questions and met four times between June and August, 2013. The legislative tasks and the findings and recommendations of the Work Group are summarized below. Additional details can be found in the full text of this legislative report.

Task #1: Assess whether the methods of developmental service case planning and oversight should be revised: The Work Group reviewed the current procedures for developmental disabilities services case planning and was also provided with information about case planning procedures that have been used in the past.

Recommendation: Members of the Work Group suggest no changes to the current case planning process at this time.

Task #2: Assess whether alternate practices could be identified, resulting in more cost-effective use of resources available for developmental services: The Work Group generated over 40 ideas for providing innovative, cost-effective services that could potentially result in cost savings. There were a number of ideas that Work Group members felt might have merit, but required further consideration and that in some cases, might benefit from a pilot implementation to adequately plan and evaluate before rolling out statewide. It was suggested that these ideas be referred to the *Developmental Disabilities Services Imagine the Future Task Force* that is being convened in September, 2013 and commissioned by DAIL to develop a long-term strategic vision for Developmental Disabilities Services that will be used to inform the next System of Care Plan that will go into effect on July 1, 2014. Ideas were separated into short-term and long-term solutions and are detailed below.

Recommendations: Please see recommendations for Tasks #3 and #4 below.

Task #3: Determine what changes could reasonably be implemented in fiscal year 2014 to manage service needs within the appropriated funds and identify the fiscal year 2014 amount, if any, of budgetary management that will be accomplished through existing System of Care Plan rescission processes based upon the estimate provided by the Department of Disabilities, Aging and Independent Living (DAIL), the AHS, the Department of Finance and Management, and the Joint Fiscal Office: According to information submitted on July 23, 2013 by the Joint Fiscal Office on behalf of the agencies listed above, the savings target was revised to \$2.3 million from the original \$2.5 million. The Work Group identified and considered 6 ideas for short-term solutions that could reasonably be

implemented in State Fiscal Year (SFY 14). The full list of ideas and summary of key factors can be found on the chart starting on page 15 of this report.

Recommendations:

- *Idea 1.1 (Funding) Reduce budgets over \$200,000 down to \$200,000:* The Work Group recommended that this idea not be implemented.
 - *Idea 1.2 (Funding) Lower the ceiling on new waivers to \$250,000 (from \$300,000):* It is difficult to predict what savings could be generated since it is unknown how many new applications would come in over \$250,000. Last year, there were four new applicants with approved budgets over \$250,000. Combined those budgets are \$146,481 (e) over the \$250,000 proposed cap. The Work Group did not recommend that this idea be implemented; DAIL does recommend that this idea be adopted, as reflected in its annual update to the System of Care Plan.
 - *Idea 2.1 (Employment) pay employers/coworkers to support person on the job/consider models such as Work without Limits:* The Work Group recommends that this idea be put forward, but as a long-term solution and that first the model should be tested through a pilot program.
 - *Idea 3.1 (Supportive Living): Spend more money on Supervised Apartment Living:* The Work Group recommends that this idea be implemented as soon as feasible for those who are able. If 60 people were to transition from Shared Living to Supervised Living, the estimated cost savings would be \$535,780. The Work Group has referred this to the *Developmental Disabilities Services Imagine the Future Task Force* to make recommendations to the Department of Disabilities, Aging and Independent Living (DAIL) about how to overcome potential obstacles. The Task Force has been established to help DAIL to create a long-term strategic vision for Developmental Disabilities Services.
 - *Idea 3.2 (Supportive Living): Use technology like Safety Connections more across the state and not just in Chittenden County:* The Work Group recommends that this model be implemented as a short-term solution that could reasonably be implemented in SFY 14.
 - *Idea 12.2 (Administrative): Cap administrative rates or bring them more into alignment across agencies:* The Work Group did not recommend that this idea be implemented.
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- **Task #4: Identify cost-effective, innovative models of care and develop recommendations as to how these models could be implemented in Vermont:** The Work Group considered over 40 ideas for long-term, innovative models of care. A survey was sent out to Work Group members asking them to select their top choices of the ideas they would like to recommend to the Joint Fiscal Committee and the *Developmental Disabilities Services Imagine the Future Task Force*. The top selections fell in the categories of family support, supportive living, transition, funding, home support, quality assurance and services for refugees. The full list of long-term ideas can be found in the chart starting on page 23 of this

report. Below are the top recommendations of the Work Group of based on the survey conducted in August 2013:

- *Idea 1.3 (Family Support): Investigate what is being done in the Family Support grant that the National Association of State Directors of Developmental Disabilities Services (NASDDDS) is doing with the Missouri University Center of Excellence in Developmental Disabilities.*
- *Idea 3.1: (Supportive Living): Look at what other states are doing in the areas of supportive living and technology.*
- *Idea 3.2: (Supportive Living): Develop a way to subsidize the rent (Section 8) so that people can live in apartments together.*
- *Idea 4.2: (Transition): Develop more post high school transition programs, like SUCCEED, to teach the basics of living in the community.*
- *Idea 5.2: (Funding): Bring back the more pro-active State System of Care Plan (SOCP) funding priorities that prevent crisis.*
- *Idea 7.1: (Home Support): Explore options to create better and different housing situations that do not necessarily cost more money.*
- *Idea 7.3: (Home Support): Consider Planning Lifetime Advocacy Network (PLAN), an organization built on the belief that through networks we can help families provide for peace of mind.*
- *Idea 10.2: (Quality Assurance): Increase DAIL quality assurance staff back to, or at least closer to, prior levels and recreating the citizen Quality Assurance reviews.*
- *Idea 14.4: (Refugee): Approach Vermont's Congressional Delegation to see what funding may be available to support the refugee population.*

Task #5: Inform participants working to update the System of Care Plan for June 2014 on these findings and recommendations. The information and recommendations outlined in this report will be forwarded to the *Developmental Disabilities Services Imagine the Future Task Force* and will be used to inform participants working to update the System of Care Plan effective July 2014.

