The Division of Disability and Rehabilitative Services
Quarterly Update January 19, 2011

Bureau of Developmental Disabilities Services

OBA Update

January, February, and March allocations have been released and April allocations are set to be released this month. As a reminder, the OBA will be released when an individual's annual is due.

The Objective Based Allocation (OBA) is the method used by the state to determine the level of supports an individual needs in order to live in a community setting. The OBA is determined by combining the Overall ALGO (determined by the ICAP and ICAP addendum), Age, Employment, and Living Arrangement.

The Inventory for Client and Agency Planning (ICAP) is one of the most widely used adaptive behavior assessment in the United States. In Indiana, the ICAP is used to assess children and adults with developmental disabilities provides information about what type of a person may need for daily living.

The ICAP assessment determines an individual's level of functioning for Broad Independence and General Maladaptive Factors. The ICAP Addendum, commonly referred to as the Behavior and Health Factors, determines an individual's level of functioning on behavior and health factors.

These two assessments determine an individual's overall ALGO level which can range from 0-6. ALGOs 0 & 6 are considered to be the outliers representing those who are the highest on both ends of the functioning spectrum.

The ALGO level is the overall level determined by combining the scores of the ICAP and ICAP Addendum (Health and Behavior Factors). The ALGO level is combined with Living Arrangement, and age to determine an individual's OBA.

More information about how the OBA method works and how it was developed is available here. The information presented at the quarterly provider meetings will be available on the DDRS website shortly.

Appeals Process:

The consumer/legal guardian has the right to appeal any waiver-related decision of the state.

- A Notice of Action (NOA) is issued with the release of each state decision pertaining to a Plan of Care/Cost Comparison Budget (CCB).
- Each NOA contains the appeal rights of the consumer as well as instructions for filing an appeal.
- For a consumer who desires to appeal the objective based allocation process, it is necessary to first allow the Case Manager to submit a CCB using the objective based allocation funding amount.

- Once a decision is rendered by the State, whether the CCB is approved or denied, the consumer/guardian will receive the NOA required for the appeal.

RHS and Day Service reporting requirements:

Providers of RHS and any component of day services – including Prevocational, SEFA, Community Based Habilitation (Individual or Group), Facility Based Habilitation (Individual or Group) services - - must submit monthly progress reports to the case manager for presentation and review by the Individualized Support Team at each team meeting. Examples of RHS documentation are available online here. Day Service documentation standards follow in the next section and formal guidelines will be release to the DDRS website soon.

Day Service Changes

As was announced last quarter, rates and billing ratios for Community Habilitation, Facility Habilitation, and Pre-Vocational Services have been updated in the latest waiver amendment. Those rates became effective December 1, 2010 and are as follows:

Community Habilitation

Ratio	Current Rate	New Rate
Individual	$ 23.24	$ 22.08
2:1	$ 13.03	$ 8.48
3:1	$ 8.69	$ 8.48
4:1	$ 6.52	$ 8.48
6:1		$ 4.72
8:1		$ 4.72
10:1		$ 4.72

Facility Habilitation

Ratio	Current Rate	New Rate
Individual	$ 23.24	$ 22.08
2:1	$ 14.76	$ 8.48
4:1	$ 7.38	$ 8.48
6:1	$ 4.92	$ 4.72
8:1	$ 3.69	$ 4.72
10:1		$ 4.72
12:1		$ 3.00
14:1		$ 3.00
16:1		$ 3.00

Pre-Vocational

Ratio	Current Rate	New Rate
2:1		$ 8.48
4:1		$ 8.48
6:1		$ 4.72
8:1	$ 6.00	$ 4.72

10:1	$	4.80	$	4.72
12:1	$	4.00	$	3.00
14:1	$	3.42	$	3.00
16:1	$	3.00	$	3.00

In addition, we have:

- Eliminated time limits to Pre-Vocational Services
- Added a provision allowing for Medium Group (5:1 – 10:1) Community Habilitation
- Added Large Group ratios (11:1 – 16:1) to Facility Habilitation
- Added Small Group ratios (4:1 and smaller) to Pre-Vocational Services
- Beginning on December 1, 2010 it is only necessary to use the largest rate code for the group you are billing (4:1 for small group, 10:1 for medium group, and 16:1 for large group)
- Pre-vocational services may be done in the community using Enclaves and Mobile Work Crews

Day Service Audit Standards

- Reimbursable service is limited to the amount authorized for that individual through Medicaid Prior Authorization and/or the amount approved on the Plan of Care/Cost Comparison Budget (CCB) and reflected in the Notice of Action (NOA). Services beyond those limits may be provided, but not reimbursed.
- Aggregate billing or specific group billing are both permissible, but must be consistent within the same facility for the same service type. If the methodology changes, there must be a clear break, and each consumer transitioned to the new methodology at the same time.
- The group size is determined by the total staff and total consumers present (aggregate) or the number of consumers with each individual employee (specific group).
- Billing may be in partial units. Any rounding must be to the nearest quarter hour.
- The provider may not bill for services at a lower ratio than what was actually provided (either billing method).

Day Service Documentation Standards

Documentation should include services outlined in the Individualized Support Plan

In addition to compliance with documentation requirements outlined in 460 IAC 6, the following data elements are required for each service rendered:

- Name of participant served
- RID Number of the participant
- Name of provider
- Service rendered
- Time frame of service (include a.m. or p.m.)
- Date of service including the year
- Notation of the primary location of service delivery
- A brief activity summary of service rendered
- Description* by direct care staff of an issue or circumstance concerning the participant including, but not limited to, significant medical or behavioral incidents or any other situation that may be uncommon for the participant

- Signature that includes at least the last name and first initial of the direct care staff person making the entry.
- Electronic signatures are permissible when in compliance with the Uniform Electronic Transactions Act (IC 26-2-8).
- Upon request, all data elements must be made available to auditors, quality monitors, case managers, and any other government entity.
- *The data may reside in multiple locations but must be clearly and easily linked to the participant or the standard will not be met.

For Group services upon request, the provider must be able to verify the following in a concise format:

- the ratio for each claimed time frame of service did not exceed the maximum allowable ratio whether or not all group participants utilize a waiver funding stream.

Waiver Amendments:

The **DD Waiver Amendment** was submitted for review by CMS on December 7, 2010. Once approved, the amended waiver will be posted online by DDRS. Some of the major changes within the amendment will include:

- Removal of the time limit, but add a monitoring requirement under Prevocational Services
- Changing group sizes to small (4:1 or smaller), medium (from 5:1 to 10:1) and large (larger than 10:1 but no larger than 16:1) group settings as appropriate under Prevocational, Community and Facility Based Habilitation
- Restoring the limit to the amount of Residential Habilitation and Supports services that may be furnished to an adult participant by a parent, step-parent or guardian. The limit is a total of 40 hours per week, furnished by one or any combination of parent(s), step-parent(s) and/or guardian(s)
- Revising performance measures to mirror those recently approved by CMS under the Support Services Waiver
- Clarifying that access to the waiver via any reserved capacity (priority criteria) is limited to the number indicated within the federally approved waiver application, and that once the reserved capacity is reached, the applicant meeting priority access criteria will be placed on a waiting list
- Prohibiting separate payment for Transportation services when participants utilize Adult Foster Care services
- Allowing the extension of Supported Employment Follow-Along (SEFA) services beyond 18 months under qualifying special circumstances
- Revising therapy services to ensure allowed and non-allowed activities are consistent across all therapy types
- Removing service and documentation standards from the waiver application itself, placing them instead in the official Waiver Provider Manual authorized by the State Medicaid Agency, the Office of Medicaid Policy and Planning

The recently approved **Support Services Waiver Renewal** is also being amended to remove all reference to time limits under Prevocational services as well as to modify group sizes for Prevocational, Community and Facility Based Habilitation services to those noted above.

The **Autism Waiver** will soon be amended to reflect all changes recently made within the DD and Support Services Waivers, including the addition of five new services (Electronic Monitoring, Intensive Behavioral Intervention, Facility Based Supports, Transportation, and Workplace Assistance) and the acceptance of additional Medicaid Aid Categories for waiver participation.

Accreditation

As a reminder, SEA 148, passed by the Indiana Senate last session, requires all providers of Day Services have each site in which these services are provided accredited by an approved accreditation body. This law will take effect July 1, 2011.

In preparation for the requirements of this law, the Division of Disability and Rehabilitative Services will be sending out a letter to all Day Service providers asking for an update on their accreditation process and providing some timelines for stages in the process.

These timelines include:

Deadline	Deadline Criteria
February 28, 2011	Providers must submit proof of accreditation, or, at a minimum, verification of a Notice of Intent with an accreditation organization, including the anticipated date of survey.
December 31, 2011	All DDRS approved Day Service Providers must be fully accredited by this date.

Day Services, for purposes of accreditation include:
Adult Day Services; Community Based Habilitation – Individual; Community Based Habilitation – Group; Facility Based Habilitation – Individual; Facility Based Habilitation – Group; Facility Based Support Services; Pre-Vocational Services; Supported Employment; and Workplace Assistance (DD waiver only).

Please note that Respite does not require accreditation.

For more info please see Indiana Code 12-11-1.1-1.

460 IAC 6

The Division of Disability and Rehabilitative Services continues to work towards promulgation of its administrative code 460 IAC 6. We have held meetings with INARF and the Arc of Indiana, as well as our case management company, IPMG and they have provided valuable feedback towards the development of this rule.

We held our final internal discussion of the rule in December. At this point all final revisions have been made. We are now putting together a fiscal impact analysis, cost-benefit analysis and small business impact analysis. We are hopeful the Notice of Intent will be submitted in early 2011.

Policy Updates

On December 7, 2010 DDRS posted four new policies: Aversive Techniques, Budget Modification Requests, Health Care Coordination, and New Provider Approval as well as Residential Habilitation Services Standards and Guidelines.

The approved and posted policies are available here.

Moving forward all policies will be available online for public review and comment. The comment period will be 10 business days from posting and an email address will be set up for comments to be submitted. All comments will be reviewed and taken into consideration before finalizing and posting policies. A notification of policies available for review will be sent out concurrent with the posting of the policies online for review.

Legislative Updates

During the 2011 legislative session, DDRS will be moving forward with several legislative changes. A general outline of those changes is as follows:

- Update the language of I.C. 12-11-1.1-1 (d) to read as "Day Services" rather than "Adult Day Services" as was the intent of the law. We also are seeking to qualify examples of day services.
- Eliminate the Community Residential Facilities Council (I.C. 12-28-5) and bring the functions of the council into the Division of Disability and Rehabilitative Services.
    - DDRS currently approves providers before they are sent to CRFC. We feel the council is redundant on this point and that these functions could be served within DDRS.
    - DDRS believes this change will be beneficial to providers by eliminating the extra burden of having to present to the Council before final approval to become a provider.
- Change the number of members on the Independent Living Council (I.C. 12-12-8-6) from 20 to 11.
    - The Council is struggling to recruit enough members to hold a quorum. This legislation is to help solve that problem.
    - DDRS expects this change will have a positive effect on individuals and entities impacted by the provider due to the fact that a quorum can actually be held.
- Model the Bureau of Developmental Disability Services (I.C. 2-11-1.1-1) ability to sanction providers after the Indiana Department of Health standards (I.C. 16-28-5).
    - There are currently two sets of sanctioning standards for individuals served by DDRS, those for individuals in group homes and those for individuals in waiver settings. We are seeking the same sanctioning standards for both settings.
    - This change will ensure not only the health and safety of the individuals being served in waiver settings, but will also ensure that only the best providers are providing services to individuals with developmental disabilities.
- Clean up the definition of a developmental disability (I.C. 12-7-2-61), including changing the term "mental retardation" to "intellectual disability".
    - This is intended to more closely align Indiana's definition of DD with the federal ICF/MR level of care definition and to change the culture of using the term "mental retardation" in alignment with "Rosa's Law".

    - DDRS does not anticipate this language change impacting anyone's ability to obtain services and we believe the change from "mental retardation" to "intellectual disability" will begin a much needed cultural change away from the use of the phrase "mental retardation".
- Replace individual priority categories for the Developmental Disability waiver in the Non-code Code (2008-73-1) with one "Emergency Placement" priority category.
    - This would give us more flexibility in placing individuals onto the waiver when in a priority situation. Individuals seeking a priority category will no longer be jeopardized due to the inefficient process of amending the waiver and submitting to CMS for approval of additional waiver slots.
- First Steps seeks to charge insurance carriers a capitated rate for payment of services provided for the carriers' clients.
    - DDRS is seeking a capitated rate, or monthly fee, that would greatly reduce the administrative cost of the state and significantly increase the revenue from TPL carriers. While the actual rate has not been established, it is anticipated that the implementation of the rate would target an increase in revenue by 100%.

First Steps

Program updates

The Division of Disability and Rehabilitative Services (DDRS) is continuing to review the First Steps early intervention system to determine where reasonable budget adjustments could be made and to identify potential sources of additional program revenue. Program changes are being implemented that will increase accountability and improve communication among providers and families, while maintaining a system of quality services. Currently First Steps is accepting enrollment applications for multidisciplinary agencies. Enrolled agencies will be responsible for the delivery of early intervention services within designated service areas and will address the comprehensive needs of eligible families and their children.

Agency enrollment

Agencies interested in becoming enrolled multidisciplinary agencies with First Steps may complete an enrollment packet. The packet and instructions may be located at:
http://www.eikids.com/in/matrix/docs/enrollment.asp.

Developmental Therapist Waivers

Developmental Therapists that are requesting a waiver to the current personnel requirements may submit their request to the Central Reimbursement Office at:

CSC Provider Enrollment
PO Box 29160
Shawnee Mission, KS 66201-9160
Phone: 866-339-9595 (Option 2)

Waivers will be awarded to currently enrolled Developmental Therapists that do not have any outstanding SPOE or LPCC concerns, substantiated concerns or complaints, unresolved audits, and with proof of education obtained from an accredited university. First Steps reserves the right to decline wavier requests if any of the above conditions apply, or if the provider is not considered to be in good standing with First Steps.

Program Changes

For updates please visit us online at www.in.gov/fssa/eddrs/2821.htm

Bureau of Rehabilitation Services

Federal Indicators

The goal of Vocational Rehabilitation Services is to ensure that Hoosiers with disabilities receive the services necessary for them to secure long-term employment success. VR experienced a moderate level of success during federal fiscal year 2010 by meeting 5 of the 7 Federal Performance Indicators. Highlights include the total number of Vocational Rehabilitation Services consumers achieving an employment outcome was 4,101, versus 4,020 the prior year. The percent of Vocational Rehabilitation Services consumers achieving competitive employment in federal fiscal year 2010 was 96.7% versus 94.7% the prior year. In addition, for federal fiscal year 2010, the percent of persons with significant disabilities in competitive employment was 74.4%, which exceeded the federal standard of 62.4%. Finally, the rehabilitation rate was 59.23%, exceeding the standard by almost 5% and higher than any level the past ten years.

Medicaid Infrastructure Grant (MIG)-Reauthorization and Strategic Plan

Indiana's MIG has recently submitted a Strategic Plan, 'Guiding Employment First in Indiana: A Statewide Plan for Systems Change.' This plan will serve as a roadmap for Indiana to improve employment outcomes for individuals with disabilities. The primary focus areas of the Plan include: Improving access to healthcare supports, Engaging businesses in hiring individuals with disabilities, Enhancing Work Incentives Planning and Financial Literacy, and Improve Supported Employment to help people acquire, keep, and advance in employment. A final version of the Strategic Plan will be available for distribution in early 2011.

Project Search – State of Indiana Recipient of APSE Award

The State of Indiana received an APSE Best Practices Award at the 2010 IN-APSE conference. Project SEARCH is a nationally recognized training and employment model that provides internship opportunities to youth and young adults with significant disabilities, allowing them to obtain the skills necessary for achieving quality employment outcomes. The benefits to Indiana businesses include increased workforce diversity and recruitment of this skilled, largely untapped workforce. SEARCH is supported and funded through Vocational Rehabilitation Services and the MIG, in partnership with adult providers, school districts, and large, well-respected Indiana businesses. Indiana currently has nine active Project SEARCH sites statewide, one of which is located on the Government Center Campus. Several state agencies have participated in SEARCH by hosting an intern and have contributed to Indiana's receipt of this award.

Interpreter Information

The Board of Interpreter Standards (BIS) will host public meetings statewide in January 2011. Indiana Deaf and Hard of Hearing Services (DHHS) invites interpreters, consumers, service providers and anyone who uses interpreting services to join us. This is an opportunity for you to express ideas, comments and concerns on the current rules for Indiana Interpreter Certificate program for community interpreters. Information about the 2011 BIS Public Meetings can be found at http://www.in.gov/fssa/ddrs/3707.htm

Indiana Council on Independent Living Membership Drive

The ICOIL is looking for new members. The ICOIL is a federally mandated council with members appointed by the Governor and has the mission to 'effectively lead a statewide Independent Living Movement that empowers people with disabilities'. The ICOIL works jointly with state agencies and Centers for Independent Living to promote and maintain the Independent Living philosophy. ICOIL is currently looking for people for their membership, which includes at least 51% people with disabilities and representation from providers of services, private business and community organizations. For additional information and the application form, please visit http://www.in.gov/fssa/ddrs/2770.htm

Independent Living Centers - Website

A number of Centers for Independent Living in Indiana have collaborated in the development of the "Disability Information Site", which is an ever evolving site where anyone can view resources by topic and/or submit a resource for inclusion into the site. The website address is www.disabilityinfosite.com

Independent Living Centers – Housing Initiative

In 2009 five Centers for Independent Living (CILs) joined with the Back Home in Indiana Alliance and other disability-related and aging community advocacy organizations to begin a concentrated three year effort to increase the availability of integrated, affordable and accessible housing across the state and within each participating CIL's region. The coordinated effort was formed in part to build upon the individual housing efforts and accomplishments of accessAbility (formerly IRCIL), ATTIC, Inc., Independent Living Center of Eastern Indiana (ILCEIN),The League for the Blind and Disabled (The League), and the Wabash Independent Living and Learning Center, Inc. (WILL).

The CILs are aligned with constituents to locate affordable and accessible rental housing and assist people to become first time homeowners, secure home modifications, and preserve existing housing when they are threatened with eviction. CILs sponsor community workshops and provided technical assistance on a number of housing related topics (e.g. emergency preparedness, homeownership, accessibility standards, applying for affordable rental housing) for people with disabilities and community organizations. For the CIL locations across the State please see http://www.in.gov/fssa/ddrs/2762.htm

State Rehabilitative Commission Membership Drive

The Commission on Rehabilitation Services is looking for members. The Commission is comprised of a group of citizens appointed by the Governor. The Commission works with the BRS's Vocational Rehabilitation Services (VRS) program, on matters such as the effectiveness and customer satisfaction with the services provided to Indiana's citizens with disabilities participating in the VRS program. The Commission is also involved in matters affecting VRS program policies/procedures, goals and priorities, and the State Plan. The majority of the Commission members are individuals who have a disability and is comprised of individuals representing the Statewide Independent Living Council, Parent Training and

Information Center, Client Assistance Program, Vocational Rehabilitation Services (VRS) Counselors, Community Rehabilitation Program Providers, Business, Industry, and Labor, Disability Advocacy Groups, Current or Former Applicants or Recipients of services through VRS, the Workforce Investment Board, and the Department of Education. For an application or more information, please visit http://www.in.gov/fssa/ddrs/2763.htm

DDRS Staff Announcement

The Division of Disability and Rehabilitative Services is pleased to announce Shane Spotts as Deputy Director. In this role, Shane will support the Division Director in coordinating activities and operations for the Bureau of Developmental Disabilities Services (BDDS), Bureau of Child Development Services (BCDS/First Steps), Bureau of Rehabilitation Services (BRS), Bureau of Quality Improvement Services (BQIS) and Disability Determination Bureau (DDB).

A state employee for 3 years, Shane most recently served as the BDDS Director of Project Management. Previously serving in the Government Efficiency and Financial Planning (GEFP) division of the Office of Management and Budget (OMB), Shane brings to his new role experience in state fiscal and policy matters.

Shane holds a Bachelor of Arts in Public Affairs and Economic Development from Indiana University.