

# Division of Developmental Disabilities Overview

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Courtney Miller, Director

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# Developmental Disabilities

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FY 2018 General Fund budget: \$175,870,554

FTEs: 681.5

- ▶ Administers publicly funded developmental disability services and services coordination to nearly 5,000 individuals in community-based settings through:
  - ▶ Services Coordination;
  - ▶ Two Medicaid Home and Community-Based (HCBS) Waiver Programs; and the
  - ▶ Developmental Disabilities Custody Act.
- ▶ Enrolls and provides oversight of Community-Based Service providers.
- ▶ Provide institutional long-term care and crisis stabilization services to 109 people at the Beatrice State Developmental Center, licensed as Intermediate Care Facilities (ICF).

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# Medicaid HCBS DD Waiver Update

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There are now two Medicaid Home and Community-Based (HCBS) DD Waivers:

Adult Day Services Waiver. This transitions young adults, after high school, from services in the Department of Education to adult habilitative services, including community supports, support for employment, and community integration.

Comprehensive Waiver (Lifespan). This waiver combines the DD Adult Comprehensive (DDAC) Waiver and Children's DD (CDD) Waiver and includes an array of residential and day services.

Waiver application approvals included two Corrective Action Plans.

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# CAP: Rate Reform

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## Rate Rebase and Objective Assessment Process (OAP) Redesign

**Goal:** *To assess and improve Nebraska DDD's current Medicaid Waiver rate structure to ensure appropriate reimbursement.*

**Phase I – Rate Rebase Study:** *Understanding service costs and cost components*

- ▶ Analyzing costs for a comparison to service revenues
- ▶ Understanding the cost components within a service rate

**Phase II – OAP Redesign:** *Changing reimbursement structure for services*

- ▶ Using findings from Phase I and other predictors of need to reform rate structure
- ▶ Altering payment methodologies to better match payment to risk

# CAP: Contracting arrangement with EFH service

- ▶ In the course of NE DDD's waiver application renewals, CMS raised the concern about the use of pass-through payments to extended family homes.
- ▶ CMS indicated that the flow of these payments do not comply with Medicaid regulations. CMS requires the designation of provider agencies as an organized health care delivery system (OHCDS) absent an acceptable alternative approvable by CMS for subcontracting arrangements within the waivers.
- ▶ A significant impact to the OHCDS model is payment for "administrative" tasks – billing, recruitment of providers, matching provider and participants, quality and oversight. These can be reimbursed at 50/50 federal administrative funds but are not available for FMAP claiming.
- ▶ DDD is currently reviewing all viable options with a workgroup of provider agencies to resolve the CAP and ensure compliance with federal regulations.

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# Quality Management Update

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- ▶ DDD has established a Quality Management unit that uses a variety of approaches to oversee compliance with federal and state regulations.
- ▶ DDD is in the process of expanding the QM team to conduct onsite visits statewide to assess provider settings and gather feedback from participants.
- ▶ DDD secured a grant through the Division of Public Health for self-advocate involvement in conducting surveys.
  - ▶ The grant will be applied towards compensating self-advocates to train with and partner with DDD staff to do 50 in-person surveys with participants. This survey will solicit feedback on how satisfied individuals are with the services they receive, if their goals are being met through those services and what outcomes they achieve. This data will complement the NCI data and guide how DDD improves its services. We hope that partnering with self-advocates in this initiative will also contribute to making participants feel comfortable in sharing their concerns and successes.
- ▶ A stakeholder group that included Division staff, advocacy groups, parents and families of individuals with developmental disabilities, and providers were brought together to develop a Quality Management Strategy (QMS) for final review and collaboration with the DD Advisory Committee.
- ▶ The QMS was submitted to the legislature on September 30, 2017 and a progress report was submitted in December 2017.

# Quality Management Update

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## National Core Indicators (NCI) Project

- ▶ DDD, in partnership with the University of Nebraska Medical Center's Munroe-Meyer Institute (MMI), is starting our 2<sup>nd</sup> year of participation in the National Core Indicator (NCI) project. The project assists DD agencies with measuring and tracking their own performance and comparing that performance with other states. DD expanded the sample in year 2 to include residents of Intermediate Care Facilities.
- ▶ **Adult In-Person Survey**
  - ▶ Respondents were picked randomly and over 400 surveys were completed. The voluntary survey seeks out responses regarding the quality of life and outcomes of adults (18 and older) receiving an array of residential and day services.
  - ▶ DDD anticipates the 2016-2017 report for Nebraska's first year of participation to be released in March 2018.
- ▶ **Staff Stability Survey**
  - ▶ An on-line survey of provider agencies supporting adults with DD in services. The survey captures information about wages, benefits, and turnover of the direct care professional workforce, hired by agencies.
  - ▶ DDD anticipates the 2016-2017 report for Nebraska's first year of participation to be released in January 2018.

# Courtney Miller, Director

Division of Developmental Disabilities

Courtney.Miller@Nebraska.gov

402-471-6038



@NEDHHS



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[dhhs.ne.gov](http://dhhs.ne.gov)

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