

# Overview: Mental Retardation Services System Study

Behavioral Health Care Subcommittee  
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Department of Mental Health, Mental Retardation  
and Substance Abuse Services

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## Status of the MR System

- Three-pronged system:
  - Greatest resources to training centers  
(\$126,841/person)
  - Fewer resources to MR Waiver  
(\$63,296/person)
  - Little to no resources to non-Waiver community  
residents  
(figures not available)

## Authorization for the Study

- 2006 budget language authorized a study of the Mental Retardation Home and Community-Based Waiver
- Expanded in 2007 budget to include a full study of the entire Mental Retardation Services System

## Study Design

### Key areas of the study:

- Person-centered, individualized supports
- Behavioral consultation services
- Skilled nursing services
- Medical services
- Employment, housing and other specialized supports
- Examination of other states' models of supports

## Study Design

### **Coordination, general direction and guidance:**

- MR System Study Steering Committee
- The Advisory Consortium on Intellectual Disabilities (TACID)

### **Information gathering:**

- Six topical focus teams
- Multiple regional discussion groups
- Telephone survey of Waiver & waiting list individuals/family members

## Study Findings: Current Strengths of the System

- Choice of community or facility setting in which to receive Medicaid-funded services. The MR Waiver also offers choices of services and service providers
- The portability of MR Waiver slots
- The flexible management of resources tailored toward individual needs
- An ethical and efficient distribution of Waiver resources to individuals on the wait list

## Study Findings: Current Strengths of the System

- Peace of mind for families of individuals with challenging medical or behavioral needs who reside in state training centers
- Individualization of services available to those who receive Medicaid-funded supports
- Utilization of training centers as regional resource centers for community members
- Some support for community residents not on MR Waiver through:
  - local funding,
  - another Medicaid Waiver,
  - the Department of Rehabilitative Services, or
  - a local philanthropy

## Gaps and Barriers in the Current System

- Need for funding of more MR Waiver Slots and enhanced reimbursement for MR Waiver services
- Limited provider capacity for certain services and in particular areas
- Lack of affordable housing statewide
- Lack of support for paid employment opportunities in the community
- Aging, less than safe state training centers

## Gaps and Barriers in the Current System

- Insufficient and unaffordable medical services for community residents
- Insufficient services for persons with both a mental health and intellectual disability
- Person-centered practices only in pockets
- Few to no supports for individuals in the community without Waiver funding
- Gaps in systematic transportation services

## CMS Funding Initiatives

- Federal initiatives that may facilitate some desired outcomes of the study, but also need support to succeed:
  - Systems Transformation Grant
  - Money Follows the Person Demonstration

## Recommendations for System Change

- Person-Centered Practices set tone for transforming system
- Improvements to infrastructure and quality

### **Recommendations:**

- Made without regard to budget constraints and competing priorities for the Governor and General Assembly
- 21 priority recommendations (5 core recommendations)
- 9 to improve employment services and opportunities
- 4 for health and safety
- 2 to improve housing opportunities

## Recommendations for System Change

- Any Recommendations for funding included in this presentation are made without regard to budget constraints and competing priorities for the Governor and the General Assembly

## Five Core Recommendations

### #1

- Fund MR Waiver slots for 800 individuals per year for the next four biennia
- Fund the start-up of each of the 800 slots
- Fund a statewide assessment tool
- FY 2009 - \$30,880,000
- FY 2010 - \$58,608,000

## Five Core Recommendations

### #2

- Invest in community infrastructure for those exiting facilities and those presently in community
- Renovate CVTC and SEVTC to maintain health and safety
- FY 2009 - \$13,000,000
- FY 2010 - \$13,000,000

## Five Core Recommendations

### #3

- Re-establish commitment to support through General Fund dollars, people with intellectual disabilities who have no other avenue for support.
- FY 2009 - \$40,000,000
- FY 2010 - \$40,000,000

## Five Core Recommendations

### #4

- Provide for a 25% rate increase for all MR Waiver models of residential support of four beds or less (except “sponsored residential” homes).
- FY 2009 – \$13,065,561
- FY 2010 - \$13,145,443



## Five Core Recommendations

### #5

- Fund 125 MR Waiver slots/year for the next two biennia to enable the success of Money Follows the Person.
- Beginning in FY 2013, fund 60 crisis slots/year.
- Fund the start-up of each slot.
- FY 2009 - \$4,825,000
- FY 2010 - \$9,150,000

## Costs and Savings

### Costs

FY 2009 - \$102,781,900

FY 2010 - \$264,925,606

### Savings

Estimated federal revenue generated from full implementation - \$164,723,213