

Individual Home Supports



IHS RATE SETTING PROCESS 2004-2013



Center for Medicaid Services

The Center for Medicare and Medicaid Services (CMS) expects all states that receive federal reimbursement for developmental services to develop a fair and consistent funding mechanism for each participant that includes:

- a uniform rate setting methodology for service models*
- reimbursement for services actually delivered*
- freedom of choice among service providers.*

2004-2005

- ❖ Draft rates for IFS waiver were established in accordance with CMA guidelines.
- ❖ Waiver Group developed a rate methodology.

2008

Initial IHS Rate Setting Committee was formed with members comprising private providers and DDS staff.

The committee met monthly to deliberate;

1. An hourly rate for fee for service.
2. Determine how to incorporate “indirect” time and expense into the rate.
3. Develop the definitions for IHS, 24 hour IHS, and Cluster setting.



2008

- The committee completed several surveys of providers to gather data that influenced decisions and recommendations.
- The committee analyzed data to help determine the recommended rate.
- The committee developed recommendations for implementations.



2009

- Recommendations made for a new rate structure.
- Implementation of the rates for Individual Budgets, Self Directed Budgets, and Family Supports.



2010-2011

- IHS Rate Setting Committee did not meet and work was put on hold.
- Providers continued to work with multiple payment structure under the IHS program.

2012

- New Residential Rate Setting Committee is formed.
- An IHS Sub Committee is formed.



2012

- Committee began working by reviewing all work completed in the past.
- The Committee set goals;
 1. To define cluster apartment setting.
 2. To define Family Supports.
 3. Develop support hours that correlate to LON Scores.
 4. Develop a rate methodology that incorporates all the costs associated with individualized home supports (on-call supports, emergency supports, maintaining an individual's entitlements, housing issues, etc).

2012

- To develop a method to incorporate funding for other supports (clinical, behavioral, etc.)
- Develop an authorization that can be easily used.

IHS Rate Work Group

Co-Chairs	MaryPat DiCarlo, IPP	Peter Mason, DDS
Members	Stephen Becker, HARC	Mark Kovitch, Key Human Services
	Pat Grygorcewicz, Arc of New London	Lee Combrinck-Graham, Parent
	Shannon O'Brien, DDS	Jamie Louchen, Self-Advocate

Individualized Home Supports

- **Definition** - Provides assistance with the acquisition, improvement and/or retention of skills and provides necessary support to achieve personal habilitative outcomes that enhance an individual's ability to live in their community as specified in the plan of care. The service may be delivered in a personal home (one's own or family home) and in the community.

Individualized Home Supports

Individual Home Supports (IHS) are delivered in two broad sub-categories categories:

- In the family or individual's home with funding managed by them directly through a fiscal intermediary. This sub-category category is titled, IHS/ Family/Self Directed .
- In the individual's own or leased residence, with services provided through a community provider paid for under a contract with DDS. This sub-category is titled IHS/Independent Living
- This objective of both approaches is to provide assistance with the acquisition, improvement and/or retention of skills and provides necessary support to achieve personal habilitative outcomes that enhance an individual's ability to live in their community as specified in the plan of care.

Individualized Home Supports

Examples of the type of support that may occur in these settings include:

- Provision of instruction and training in one or more need areas to enhance the individual's ability to
- access and use the community;
- Implement strategies to address behavioral, medical or other needs identified in the Individual Plan;
- Implement all therapeutic recommendations including Speech, O.T., P.T., and assist in following special
- diets and other therapeutic routines;
- Mobility training or Travel training;
- Adaptive communication training;
- Training or practice in basic consumer skills such as shopping or banking; and,
- Assisting the individual with all personal care activities.

IHS-Independent Living Versus IHS-Family/ Self Directed In-Home Supports

- After reviewing the individual's level of need, the current authorizations and utilization over the past year, there was a large variance between the hours provided individuals who lived in their own home versus those that self directed or lived in a family's home.

IHS- Independent Living Versus IHS-Family/ Self Directed In-Home Supports

The reasons for the difference in hours:

- IHS for individuals living in their own home is generally more predictable in terms of support hours because it is based on the needs of the participant.
- IHS for individuals living in a family home is more variable because they are based on the needs of the individual and the family dynamics.
- An increase in the number of individuals below the age of 21 years old.

IHS - Independent Living

Individuals that live independently in their own home generally are more predictable in terms of support hours because the hours are based only on the needs of the person.

The provider is responsible for the oversight and coordination of all supports.

Providers provide the majority of the supports provided to the individual.

Family/ Self Directed In-Home Support

Individual's that live with their families or self-directed their own resources receive more diversified supports.

The family and the self-directed individual are responsible for the oversight and coordination of all supports.

Providers are one piece of the supports provided to the individual.





The IHS committee decided to separate the rate methodology for these two supports.

IHS- Independent Living

Independent Living Supports will be allocated funding based on:

- standard hours according to the participant's level of need.
- a monthly Safety Net rate as long as 1 unit of support is provided in the month.
- Healthcare Coordination and Clinical Supports will be available through separate authorizations based on the individual's level of need and PRAT determination

IHS- Independent Living

Authorizations will be developed based on a set of standard hours according to the participant's level of need.

- A set of standard hours have been developed based on an analysis of actual attendance submitted by providers over the past year.
- The hours were subtotaled by individuals with the same Level of Need.
- The hours represent a maximum number of hours that an individual could receive for the week.

IHS- Independent Living

The individual's LON will determine the maximum number of hours to be provided to the person.



DDS

LON	Hours/wk
1	14
2	17
3	20
4	23
5	28
6	36
7	42
8	48

IHS- Independent Living

A new Safety Net Rate has been developed. The Safety Net rate will be paid as long as a unit of IHS support was provided for the month. The monthly amount would reimburse agencies for:

- Providing 24 hour (on-call) accessibility of staff.
- Providing emergency supports.
- Maintaining an individual's entitlement funding and Medicaid benefits, etc.
- Assisting in maintaining adequate housing.

IHS- Independent Living

Healthcare Coordination is defined as :

- The overall health assessment, education and assistance provided by a registered nurse.

- For participants with identified health risks, who, as a result of their intellectual disability, have a limited ability to identify changes in their health status or to manage their complex medical conditions.

- For individuals with medical needs that require more healthcare coordination than is available through their primary healthcare providers to assure their health, safety and well-being.

- More information can be found at:

<http://www.ct.gov/dds/cwp/view.asp?a=2042&q=442616>



IHS- Independent Living

Healthcare Coordination must be provided by a qualified provider. Each nurse within an agency that provides Healthcare Coordination must be qualified.

Staff qualification:

- A Registered Nurse (RN) licensed in the State of Connecticut with at least two years of nursing experience and relevant experience with people served by DDS or individuals with behavioral health needs.



IHS- Independent Living

Authorized hours for Healthcare Coordination will be based on the person's LON scores. Hours of service that exceed the automatic authorization level must be submitted to the regional Utilization Resource Review committee for prior approval.

LON Score

- health/medical score **4 or higher**
- score of **6 or higher** for combination of: health/medical **and** either the behavior (home) or psychiatric (home) domains, whichever is higher.

Authorized hrs of service per year:

- Score of 4-6 - 24 annual hrs
- Score of 7-9 - 36 annual hrs
- Score of 10-14 - 48 annual hrs



IHS- Independent Living

Behavioral Supports is defined as those therapeutic services which are not covered by the Medicaid or Medicare, and are necessary to improve the individual's independence and inclusion in his or her community.

More information can be found at:

<http://www.ct.gov/dds/cwp/view.asp?a=2042&q=442526>

IHS- Independent Living



Behavioral Supports services include:

- ❖ Assessment and evaluation of the person's behavioral need(s);
- ❖ Development of a behavioral support plan that includes intervention techniques for increasing adaptive positive behaviors, and decreasing maladaptive behaviors;
- ❖ Provision of training for the individual's family and other support providers to appropriately implement the behavioral support plan;
- ❖ Evaluation of the effectiveness of the behavioral support plan by monitoring the plan on at least a monthly basis. The service will also include needed modifications to the plan; and
- ❖ The provider shall be available and responsive to the team for questions and consultation.

IHS- Independent Living

Behavioral Supports must be provided by a qualified provider. Each staff within an agency that provides Behavioral Supports must be qualified.

Staff qualification:

- Doctorate and current licensure in psychology (Licensure per CGS Chapter 383), or current certification as a Board Certified Behavioral Analyst (BCBA) or Master's degree in psychology, special education, social work or a related field. Proof of Licensure per CGS Chapter 383b (Licensed Clinical Social Worker), or Licensure per CGS Chapter 383a or 383c (Marriage and Family Therapist or Professional Counselor) as applicable.
- Two years of experience providing behavioral supports to people with developmental disabilities.
- Review of all application materials and approval by the Operations Center and its designee (DDS Supervising Psychologist 2's)



IHS- Independent Living

Behavioral Supports will be based on the behavior support needs of the person. When an individual is identified by the team to require behavior support services, the authorized annual hours will be based on the person's LON scores, PRAT approval and the hours to support maintaining the behavioral plan. The development of the plan will be funded through a one time by PRAT.

Guidelines for the annual hours of Behavioral support hours per year:

- Behavioral Composite Score of 1-2 - 0 annual hrs
- Behavioral Composite Score of 3-4 - 2 annual hrs
- Behavioral Composite Score of 5-6 - 4 annual hrs
- Behavioral Composite Score of 7 - 8 annual
- Behavioral Composite Score of 8 - 12 annual hrs

IHS- Independent Living

Cluster Supports

To provide opportunities for individuals that require overnight staff access due to health and safety issues to live independently in their own home in the community and to promote independence and community social interaction.



IHS- Independent Living

Cluster Supports

Cluster supports provides IHS participants access to a direct support staff who would be available to provide supports during the 11:00 pm – 7:00 am time period. Providers would receive a monthly amount to fund the cluster supports as long as they provided one unit of supports during the month.



IHS- Independent Living

Cluster Supports

Definition of Cluster Supports: An independent setting for individuals needing access to on-site overnight staff for health and safety reasons. Individuals that qualify will require a minimum LON score of 3. These individuals are living in their own homes and the cluster consists of 3 or more separate dwellings within walking distance from the overnight staff. The overnight staff attached to a CRS/CLA setting would not be available for reimbursement through the cluster supports since the staff are paid through the all-inclusive CLA/CRS monthly rate.

Independent Living Supports

Cluster Supports

The maximum direct support hours for a participant in a cluster supports setting has been reduced to factor in support hours to be provided by the direct care staff during the overnight hours.

LON Hours for Cluster Supports

LON	Hours/wk
3	17
4	20
5	25
6	33
7	39
8	45

IHS Rates Structure

Service	Units/ Smallest unit increment	Provider Rate
Individualized Home Supports	Hour / 15 minutes	\$ 29.00
Safety Net Rate	Monthly / Paid after 1 unit of service is provided in the month	\$ 365.00
Healthcare Coordination	Hour / 15 minutes	\$ 71.71/hour
Behavioral Supports	Hour / 15 minutes	\$121.20/hour

IHS Rates Structure

Service	Monthly Amount includes Safety Net Rate / Paid after 1 unit of service is provided in the month	Number of Participants in a Cluster	Provider Rate
Cluster/Safety Net Rate	Monthly Amount	7 or less participants	\$ 920.00
Cluster/Safety Net Rate	Monthly Amount	8 or more participants	\$ 706.00

10 Minute Break





Transition Process for IHS Participants Receiving Supports From a Provider

- The new IHS rate structure will commence on July 1, 2013.
- The FY2014 contract has language changes to allow for the implementation of the new structure.
- New authorizations will be sent out to all providers by June 30th.
- Participants currently over the maximum LON hours will have all of FY2014 to titrate down to the new authorized hours.

Transition Process for IHS Participants Receiving Supports From a Provider

Individual Budget Authorizations

- IHS participants that transferred over from an individual budget with a current authorization above the maximum LON hours will receive an authorization at the maximum LON hours. Additional hours equaling the difference between the current authorization and the LON hours will be added through a one time add hours process.



Transition Process for IHS Participants Receiving Supports From a Provider

POS Contract Authorizations

- IHS contracted participants that had actual utilization recorded on the WebResDay attendance program for the past year above the maximum LON hours will receive authorization at the maximum LON hours. Additional hours equaling the difference between the actual utilization and the LON hours will be added through a one time add hours process.



Transition Process for IHS Participants Receiving Supports From a Provider

Individual Budget Authorizations

Participant

- John was on an individual budget.
- John has a LON score of 5.

Support Hours

- John has a current authorization of 30 hours per week.
- The maximum LON hours for John is 28 hours per week.

Authorizations

- John will receive an authorization for 28 hours per week.
- John will receive 2 hours a week through a one time add hours process for FY2014.

Transition Process for IHS Participants Receiving Supports From a Provider

POS Contract Authorizations

Participant

- Sarah was on an the POS contract.
- Sarah has a LON score of 3.

Support Hours

- Sarah averaged 25 hours per week of actual utilization.
- Sarah has a current authorization of a monthly rate of \$ 3,488.33.
- The maximum LON hours for Sarah is 20 hours per week.

Authorizations

- Sarah will receive an authorization for 20 hours per week.
- Sarah will receive 5 hours a week through a one time add hours process for FY2014.

Transition Process for IHS Participants Receiving Supports From a Provider

Individual Budget Authorizations

- IHS participants that transferred from an individual budget with a current authorization at or below the maximum LON hours will receive an authorization for their current hourly amounts.



Transition Process for IHS Participants Receiving Supports From a Provider

POS Contract Authorizations

- IHS contracted participants that had actual utilization recorded on the WebResDay attendance program for the past year at or below the maximum LON hours will receive an authorization based on their actual utilization for the past year.



Transition Process for IHS Participants Receiving Supports From a Provider

Individual Budget Authorizations

Participant

- Pat was on an individual budget.
- Pat has a LON score of 2.

Support Hours

- Pat has a current authorization of 17 hours per week.
- The maximum LON hours for Pat is 17 hours per week.

Authorizations

- Pat will receive an authorization for 17 hours per week.

Transition Process for IHS Participants Receiving Supports From a Provider

POS Contract Authorizations

Participant

- Scott was on the POS contract
- Scott has a LON score of 1.

Support Hours

- Scott averaged 10 hours per week of actual utilization.
- Scott has a current authorization of a monthly rate of \$ 2,093.
- The maximum LON hours for Scott is 14 hours per week.

Authorizations

- Scott will receive an authorization for 10 hours per week.



Transition Process for IHS Participants Receiving Supports From a Provider

Safety Net Authorization

- Providers will receive an authorization for the standard Safety Net rate for every IHS participants living in their own home and receiving supports from their organization. Providers will be paid the standard Safety Net rate for every month when at least one unit of support has been provided to that individual.



Transition Process for IHS Participants Receiving Supports From a Provider

Healthcare Coordination and Behavioral Support Authorizations

- Providers that have been providing nursing and behavioral support on the POS contract with staff that are not qualified will receive a six month one-time authorization. Providers will work with DDS to determine the support needs for each individual and to become a qualified provider for these supports.

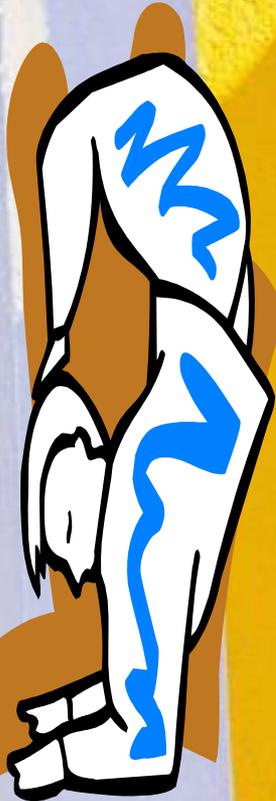
Flexibility of IHS – Independent Living

- Support hours are based on providing an average number of hours per week
- Utilization reimbursement will be based on authorized annual total hours
- Individual teams will be able to manage additional reserved hours for participants with authorizations under the maximum LON hours
- Individual teams will be able to authorize up to 20 hours of emergency supports for those participants at the maximum authorized hours



Flexibility of IHS – Independent Living

- IHS is a program that is based on the unique support needs of the individual
- Providers will be expected to provide supports based on an average number of hours per week
- On any given week, the number of supports hours provided to the person can fluctuate based on any number of reasons
- Monthly reimbursement will be based on the number of hours identified on WebResDay attendance
- DDS will monitor utilization on a quarterly basis and inform the provider and teams when supports are trending over the authorized annual hours.



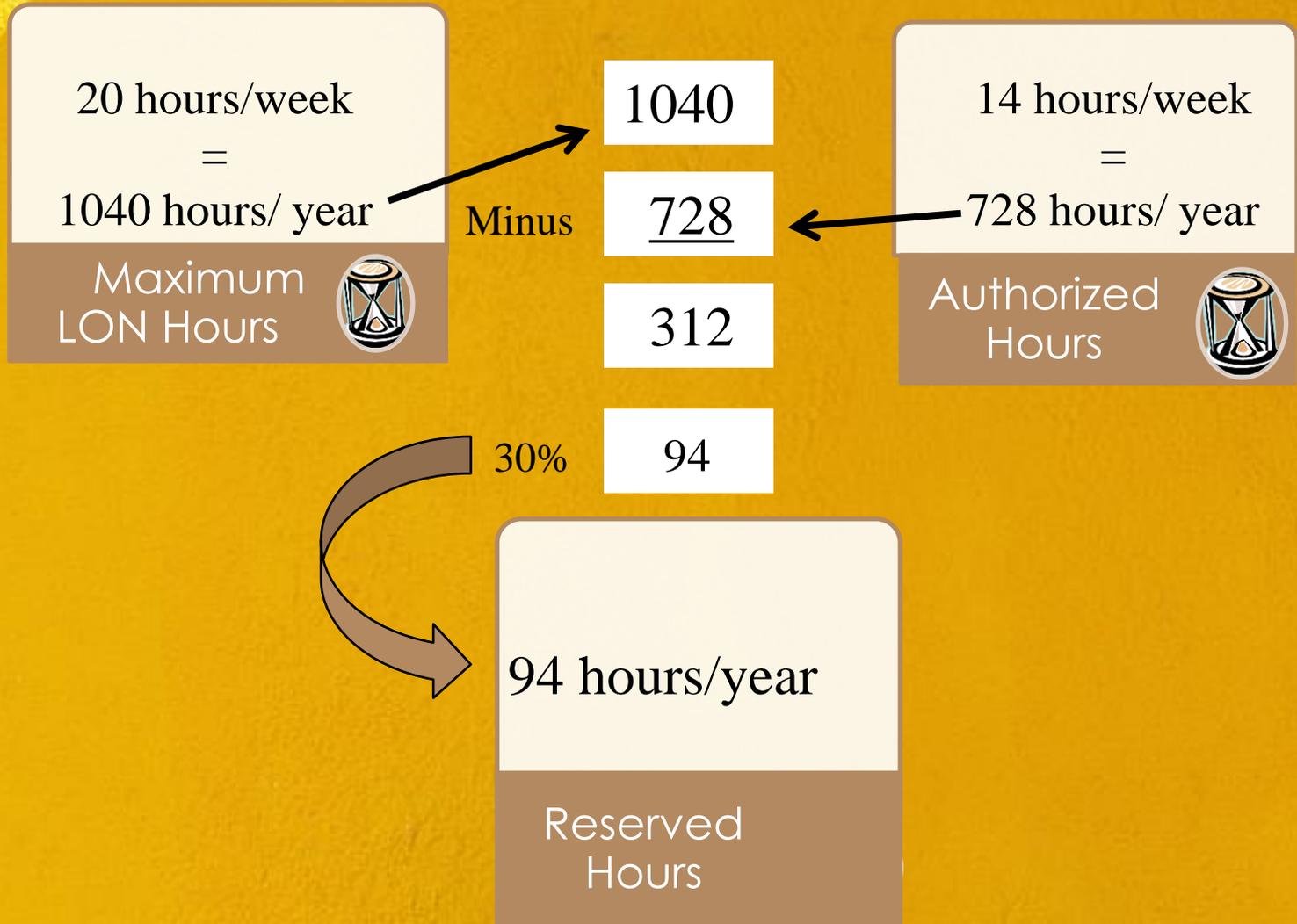
Flexibility of IHS – Independent Living

To encourage individual teams to authorize only supports needed by the person:

- Either 30% of the difference between the maximum LON hours and the authorized hours or 50% of the authorized hours whichever is less will be reserved for enhanced or emergency supports previously authorized through the one-time process.
- Reserved hours will not need to be approved by PRAT.
- The Team will work with Resource Management to issue an add hours authorization to the provider for the reserved hours on a per occurrence or end of year basis depending on the situation.
- Any hours above the reserved amount will need to be approved by PRAT.



Flexibility of IHS – Independent Living



Flexibility of IHS – Independent Living



- Individual teams will be able to authorize up to 20 annual hours of emergency supports for those participants at the maximum authorized hours
- Emergency Support hours will not need to be approved by PRAT.
- The Team will work with Resource Management to issue an add hours authorization.
- Additional hours above the 20 Emergency Support hours will need to be approved by PRAT.

Family/ Self Directed In-Home Supports

Family/ Self Directed In-Home Supports will continue to be allocated funding based on:

- the support needs of the individual's level of need
- Pre-determined funding limits for the VSP program
- natural supports already available and/or being used
- availability of state funded services such as Home Health Aides

Family/ Self Directed In-Home Supports

The Family/ Self Directed In-Home Supports will be funded at the new IHS rate.

Providers will receive a new authorization on July 1, 2013 for the current support hours at the new IHS rate.

Personal Supports

Personal Supports will continue to be a qualified support. DDS will work with providers to develop clear definitions of the difference between IHS and personal supports.

- Personal Support rate will remain the same.
- Personal support hours will be allocated based on the IHS LON support grid. Personal support hours will be prorated to reflect the lower hourly rate.
- 1 hour of IHS supports is equal to 1.1 hours of personal support. (10 hours of IHS equals 11 hours of personal support.
- Personal Support will not receive the Safety Net Rate.

Department of Developmental Services

Draft Service Authorization IHS

Provider				
ABC Provider			IHS Only	
Provider #	212			
Person				
Jane Doe				
DDS #	23423			
Service Type	Intermittent Individual Home Supports			
Level of Support Needs Based on Prnt Determination	4			
		Weekly Direct Hours	Estimated Monthly Amount	Annualized Amount
Maximum Weekly Hours based on LON		23		
Actual IHS hours		23	\$2,668.00	\$34,684.00
Actual personal Support Hours		0	\$0.00	\$0.00
Total Weekly Hours		23	\$2,668.00	\$34,684.00
Available Reserve Hours	30%	0		
Other Adjustments- Description	Dollar Amount		\$0.00	\$0.00
	\$0.00			
Cluster 3rd Shift support required	No		\$0.00	\$0.00
Number of Participants in the Cluster	-			
Safety Net Category for people living independently	1		\$365.00	\$4,384.00
Total Annualized IHS Supports		23	\$3,033.00	\$39,068.00
Effective Date				7/1/2013

Department of Developmental Services

Draft Service Authorization IHS

IHS with Reserve Hours

Provider	ABC Provider
Provider #	212
Person	Jane Doe
DDS #	23423
Service Type	Intermittent Individual Home Supports
Level of Support Needs Based on Prat Determination	5

		Weekly Direct Hours	Estimated Monthly Amount	Annualized Amount
Maximum Weekly Hours based on LON		28		
Actual IHS hours		22	\$2,552.00	\$33,176.00
Actual personal Support Hours		0	\$0.00	\$0.00
Total Weekly Hours		22	\$2,552.00	\$33,176.00
Available Reserve Hours	30%	94		
Other Adjustments- Description	Dollar Amount		\$0.00	\$0.00
	\$0.00			
Cluster 3rd Shift support required	No		\$0.00	\$0.00
Number of Participants in the Cluster	-			
Safety Net Category for people living independently	1		\$365.00	\$4,384.00
Total Annualized IHS Supports		22	\$2,917.00	\$37,560.00
Effective Date				7/1/2013

Department of Developmental Services

Draft Service Authorization IHS

IHS with Cluster Supports

Provider	ABC Provider
Provider #	212
Person	Jane Doe
DDS #	23423
Service Type	Intermittent Individual Home Supports
Level of Support Needs Based on Prat Determination	4

		Weekly Direct Hours	Estimated Monthly Amount	Annualized Amount
Maximum Weekly Hours based on LON		20		
Actual IHS hours		20	\$2,320.00	\$30,160.00
Actual personal Support Hours		0	\$0.00	\$0.00
Total Weekly Hours		20	\$2,320.00	\$30,160.00
Available Reserve Hours	30%	0		
Other Adjustments- Description	Dollar Amount		\$0.00	\$0.00
	\$0.00			
Cluster 3rd Shift support required	Yes		\$920.00	\$11,040.00
Number of Participants in the Cluster	7			
Safety Net Category for people living independently	1		\$0.00	\$0.00
Total Annualized IHS Supports		20	\$2,320.00	\$41,200.00
Effective Date				7/1/2013

Department of Developmental Services

Draft Service Authorization IHS

Provider	
ABC Provider	
Provider #	212
Person	
Jane Doe	
DDS #	23423
Service Type	Intermittent Individual Home Supports
Level of Support Needs Based on Prat Determination	3

IHS with Personal Supports

		Weekly Direct Hours	Estimated Monthly Amount	Annualized Amount
Maximum Weekly Hours based on LON		20		
Actual IHS hours		15	\$1,740.00	\$22,620.00
Actual personal Support Hours		3	\$325.08	\$4,226.04
Total Weekly Hours		18	\$2,065.08	\$26,846.04
Available Reserve Hours	30%	31		
Other Adjustments- Description	Dollar Amount		\$0.00	\$0.00
	\$0.00			
Cluster 3rd Shift support required	No		\$0.00	\$0.00
Number of Participants in the Cluster	-			
Safety Net Category for people living independently	1		\$365.00	\$4,384.00
Total Annualized IHS Supports		18	\$2,430.08	\$31,230.04
Effective Date				7/1/2013

Draft Service Authorization Clinical Supports

LON Score	4		
Residential Health Domain Score	4		
Residential Behavioral Domain Score	3		
Psychiatric Home Score	2		
Eligible Health Care Coordination		Yes	Annualized Amount
Eligible Clinical Behavioral Support		Yes	\$4,363.20
			\$0.00
Maximum Annualized Authorized Health Care Coordination Hours		36	\$4,363.20
Additional Health Care Coordination Hours Authorized by DDS		0.00	
Total Maximum Authorized Annualized Healthcare Coordination Hours		36	\$242.40
			\$0.00
Maximum Clinical Behavioral Support Hours Available		2.00	\$242.40
Additional Clinical Behavioral Support Hours Authorized by DDS		-	
Total Maximum Authorized Annualized Clinical Behavioral Support Hours		2.00	7/1/2013

Any questions?

