

Health and Human Resources

Presentation to Senate Finance

Secretary of Health and Human Resources

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Virginia's Intellectual Disability (ID) and Developmental Disability (DD) System

- Training center costs are 63.8% of appropriations for individuals with ID and supports only 15.6% of the ID population VA serves.
- Statewide training center censuses have dropped 42 percent since 2000; today, they serve 1,018 individuals.
- The statewide average training center cost is \$216,000 per person annually, including direct services, administrative supports and high infrastructure requirements.

Virginia's Intellectual Disability (ID) and Developmental Disability (DD) System

- 8,621 people now receive an ID Waiver.
 - The waiting list is 5,932; of these, 3,316 are urgent.
- 800 people are on the DD Waiver
 - The waiting list is 1,200.
- The annual statewide average community cost is \$138,000 per person for those with comparable care needs as training center residents.

U.S. Department of Justice (DOJ) Investigation

- 2008: DOJ started investigating Central Virginia Training Center (CVTC) pursuant to the Civil Rights of Institutionalized Persons Act (CRIPA).
- 2010: DOJ expanded to cover all five training centers and community-based services, and Virginia's compliance with the Americans with Disabilities Act (ADA) and the U.S. Supreme Court *Olmstead* ruling.
- February 2011: DOJ concluded VA fails to provide services in the most integrated setting appropriate to individuals' needs.

Reaching a Settlement Agreement

- March 2011: Upon advice from the Office of the Attorney General, Virginia entered into negotiations with DOJ to reach a settlement.
- Virginia had two overarching goals: 1) To ensure the agreement results in the best possible outcomes for Virginians with ID and DD, and 2) To ensure the agreement is fiscally responsible.
- January 26, 2012: Virginia and DOJ reached a settlement agreement.

Existing Resources

- In FY 2012, the General Assembly appropriated \$30.0 million to the Behavioral Health and Developmental Services Trust Fund
- In addition, funds were provided to add 275 Intellectual Disability Medicaid waiver slots, and 150 Developmental Disability waiver slots, as well as an array of other items aimed at expanding community access and ensuring quality services at state training centers.

Appropriations in Chapter 890

(in millions)

	General Fund	Nongeneral Funds
Trust Fund Deposit	\$30.0	
ID Waivers (275)	\$9.0	\$9.0
DD Waivers (150)	\$2.2	\$2.2
Crisis Stabilization	\$5.0	
Licensing/QM	\$1.1	\$0.4
Facility staff ratios	\$7.1	
Total	\$54.4	\$11.6

- 10-year settlement begins in FY 2012. The funds appropriated in FY 2012 will be used to offset the costs of the agreement.

General Assumptions

- Medicaid waiver structure and provider rates do not change.
- Each facility will need 24-36 months to responsibly transition all residents to the community.
- No capital funds assumed for community capacity.
- Any possible proceeds from property sales are not included as an available offset to the cost of services.

Summary of Costs and Savings

(in millions)

	General Fund	Nongeneral Funds
Facility transition costs	\$367.6	\$313.3
Facility savings	(\$573.8)	(\$543.8)
Community costs	\$746.6	\$592.5
Community offsets	(\$199.8)	(\$115.8)
Total new funds required	\$340.6	\$246.2

Facility Costs/Savings

(in millions)

	General Fund	Nongeneral Funds
Transition waiver slots	\$278.4	\$278.4
WTA/Other	\$89.2	\$34.9
Closure savings	(\$573.8)	(\$543.8)
Total 10-year impact	(\$206.2)	(\$230.5)

- Assumes closure of four facilities by end of FY 2020.
- Any deviation from the closure plan used to develop estimates will result in changes to cost and savings associated with discharge of residents to community placements.

Community Costs/Offsets

(in millions)

	General Fund	Nongeneral Funds
Community waivers and supports	\$575.4	\$545.4
Crisis programs	\$120.0	
Waiver administration	\$26.1	\$26.1
Quality Management	\$25.1	\$21.0
FY 2012 Trust Fund deposit	(\$30.0)	
FY 2012 items in base	(\$169.8)	(\$115.9)
Total 10-year impact	\$546.8	\$476.6

- Estimates do not include the \$30.0 million included in the Governor's proposed FY 2012 – FY 2014 Budget.

FY 2012 – FY 2014 Biennial Costs

(in millions)

	Costs/Savings	Available Resources	Balance
FY 2012 – FY 2014	\$112.6	\$81.0	(\$31.6)

- Available resources include FY 2012 deposit of \$30.0 million deposit to Trust Fund authorized in Chapter 890.
- Also includes \$17.0 million each year in “base” funding included in Chapter 890 for waiver slots and crisis services.
- The biennial cost is substantially offset by the \$30.0 million deposit included in the Governor’s proposed budget.
- FY 2013 is fully funded by existing and proposed funds. Any additional appropriation needed in FY 2014 can be addressed as actual expenditures are measured against current estimates.

FY 2015 – FY 2021 Annual Net Cost

(in millions)

	General Fund
FY 2015	\$31.1
FY 2016	\$34.7
FY 2017	\$35.0
FY 2018	\$40.6
FY 2019	\$47.1
FY 2020	\$53.6
FY 2021	\$66.8

- Based on current estimates, by FY 2022, or once full savings from facility closures are realized and separation costs fully paid, annual net costs stabilize at approximately \$55.0 million.

Summary

- Total cost of services - \$2.1 billion over 10 years
 - Total general fund cost of services - \$1.1 billion
 - Total general fund savings and offsets - \$776.3 million.
 - Total estimated new general fund required - \$340.2 million.

Details of the Settlement Agreement

The agreement concentrates in four main areas:

1. Serving Individuals with Developmental Disabilities in the Most Integrated Setting and building quality community-based alternatives for individuals, particularly individuals with complex needs;
2. Transitions from Training Centers;
3. Supporting Independent Housing and Employment Options for Individuals with Developmental Disabilities; and,
4. Quality and Risk Management System, to include monitoring and evaluating services, and implementing quality improvement processes at an individual, provider, and state-wide level.

Target Population

- Individuals with DD who meet any of the following:
 - Currently reside at any of the training centers;
 - Meet the criteria for the Intellectual Disability (ID) waiver or Developmental Disability (DD) waiver wait lists; or,
 - Currently reside in a nursing home or Intermediate Care Facility (ICF).

Additional Waiver Slots

Virginia will create 4,170 waiver slots by June 30, 2021:

State Fiscal Year	Individuals in Training Centers to Transition to the Community	ID Waiver Slots for Individuals on Urgent Wait List	DD Waiver Slots for Individuals on Wait List
2012 ¹	60	275	150
2013	160	225*	25**
2014	160	225*	25**
2015	90	250*	25**
2016	85	275	25
2017	90	300	25
2018	90	325	25
2019	35	325	25
2020	35	355	50
2021	0	360	75
Total	805	2915	450

1. These FY2012 slots have already been funded and assigned to individuals.

*25 slots each year are prioritized for individuals less than 22 years who reside in nursing homes or large ICFs.

**15 slots each year are prioritized for individuals less than 22 years who reside in nursing homes or large ICFs.

Individual and Family Support Program

- New program for up to 1,000 individuals per year who are not receiving ID or DD waiver services.
- Services designed to help people stay in communities, examples include:
 - Professionally provided services and supports, such as respite, transition services, transportation services, and behavioral consultation and management
 - Assistive technology, home modifications, goods or products
 - Rental assistance and deposits
 - Utilities and deposits
 - Family education, information and training
 - Peer mentoring and family-to-family supports
 - Emergency assistance and crisis support

Mobile Crisis Teams

- Mobile crisis teams will respond to individuals with ID and DD in their homes and community settings and for up to 3 days, offer assessments for services, support, and treatment to de-escalate the crisis.
- By June 30, 2012, at least one team in each region to respond within 3 hours.
- At least 2 teams in each region to respond within 2 hours
- Enough teams in each region to respond within 1 hour in urban areas and 2 hours in rural areas.

Crisis Stabilization Programs

- Programs will provide crisis respite to individuals with ID and DD who cannot be assisted in their own homes or other community settings by mobile crisis teams.
 - No more than 6 beds
 - Lengths of stay will not exceed 30 days
- By June 30, 2012, at least one program will be established in each region.
- By June 30, 2013, Virginia must ensure there is sufficient capacity in each region to meet the needs of the target population.

Employment First Policy & Community Living Options

- “Employment First” requires that service providers offer the option of helping individuals into employment *first* before offering other services.
 - DBHDS started an initiative October 4, 2011
- Within a year, we will develop a plan to increase independent housing options for the target population.
 - Includes a one-time fund of \$800,000 to provide rental assistance in accordance with the plan above

Staff Support for Community Placements

- Community Integration Managers
- Community Resource Consultants
- Regional Support Teams

Discharge Planning and Transition from Training Centers

- By July 1, 2012, discharge plans will be developed for all training center residents.
- DBHDS will ensure that personal support teams, in collaboration with CSB case managers, provide individuals and their authorized representatives with specific options for types of community placements, services and supports based on individuals' needs and desires.
- DBHDS will ensure training center staff is educated about community services and supports to propose appropriate options to individuals

Discharge Process

The following timelines will be applied to the discharge process:

- Discharge plan will be developed within 30 days of admission;
- Virginia will ensure a discharge plan is developed within 6 months for those already in training centers;
- Discharge plans must be updated within 30 days prior to an individual's discharge;
- Once an individual has selected a community provider and the provider agrees to serve the individual, discharge will occur within 6 weeks
- Post-move monitoring will occur at a minimum of 30, 60, and 90 days following discharge.

Quality and Risk Management System

- DBHDS will require all training centers, CSBs, and other community providers to implement risk management and quality improvement processes, including establishment of uniform risk triggers and thresholds.

Incident Report System

- Virginia will continue to require staff to report:
 - any suspected or alleged incident of abuse or neglect as defined in Virginia Code § 37.2-100;
 - serious injury as defined in 12 VAC 35-115-30; and,
 - Deaths
- Monitoring and oversight by implementing a real time, web-based incident report system and reporting protocol.

Data Collection and Analysis

- Virginia will collect data about individuals receiving services under this agreement and analyze at least one outcome measure from each of the eight identified focus areas.
- This action will include a subset of measures that CSBs and other community providers will be required to report to DBHDS.
- DBHDS will establish Regional Quality Councils to meet quarterly and assess relevant data, identify trends, and recommend responsive actions for each health planning Region

New Case Management Standards

Within one year, case managers will meet with certain individuals face-to-face at least every 30 days, including one visit at least every 2 months to certain individuals' places of residence, if the individual meets the following criteria:

- Receives services from providers with conditional or provisional licenses;
- Has more intensive behavioral or medical needs as defined according to their Supports Intensity Scale (SIS) category;
- Has an interruption of service of more than 30 days;
- Encounters a serious crisis or has multiple less serious crises within a 3-month period;
- Has transitioned from a training center in the previous 12 months; or
- Resides in a congregate setting of 5 or more individuals.

Licensure Inspections

- DBHDS will continue to conduct regular, unannounced licensing inspections of community providers.
- Within one year, DBHDS will begin more frequent licensure inspections of community providers who meet specific criteria.

Core Competency-Based Training Curriculum

- Within one year, Virginia will develop a core-competency based training curriculum for case managers.
- DBHDS will implement curriculum for all staff who provide services under the agreement.

Quality Service Reviews

- DBHDS will implement quality service reviews to evaluate the quality of services at the individual, provider, and state-wide level for a statistically significant sample of individuals receiving services under the agreement.
- These reviews will include face-to-face interviews with individuals, professional staff, and other people involved in an individual's life.

Independent Reviewer

- The independent reviewer will:
 - conduct the factual investigation and verification of data and documentation to determine whether the Commonwealth is in compliance with the agreement
 - conduct reviews in six months cycles with the first report due nine months after the effective date of the agreement
- Virginia and DOJ have jointly selected Donald Fletcher as the independent reviewer at a cost of \$300,000 GF annually.

Transition to Community-Based System

- A plan will be provided to the General Assembly to cease residential operations at four of Virginia's training centers.
- A base plan has been developed, that establishes a timeline for the closure of the four training centers.
- We will work with the General Assembly to ensure that the final plan is appropriately developed and responsibly implemented.

Training Center Closure Schedule

FY	Training Center
2014	Southside Virginia Training Center, Petersburg
2015	Northern Virginia Training Center, Fairfax
2016	
2017	
2018	Southwestern Virginia Training Center, Hillsville
2019	
2020	Central Virginia Training Center, Lynchburg

Southeastern Virginia Training Center will remain open and continue to downsize to 75 beds.

Questions?