

Stakeholder Input on Waiver Renewals

February 21, 2017

Waiver Suggestions that are under consideration in Renewals	Developmental Disabilities Administration Response
Clarify issue of "Wait list"; Applied vs. Asked for service; "No Paid services List"	<i>DDA has deployed the Service and Information Request form online to speed all requests for services at: https://www.dshs.wa.gov/dda/service-and-information-request</i>
Plain Language; communications to parents; visuals different; learning styles; Clear communications; parents don't know; Focus on accessibility of service descriptions; language issue. Simplify processes; fewer steps; stop doing Prior Approvals. Speed of access to services. Change the process in the current waivers to make it easier for a person who is requesting an exception to rule. Process steps.	<i>Central Office is currently simplifying and clarifying language and processes wherever possible on websites and other materials, forms, rules, policies, waiver renewal applications and service names.</i>
More information needs to be given to families at every annual meeting (in their own language); No follow through on person-centered planning; Proper person-centered planning could inform the whole system; Lack of coordination; learning holistic approach	<i>Case Resource Managers currently assist participants to identify and document personal goals and specific supports and services to support those goals in annual Person-Centered Service Plans and review past year's plan and progress towards goals.</i>
Helping parents qualify	<i>DDA works with community partners in outreach to all communities.</i>
Information needs to be given to families at annual meeting about the role of the Case Manager (in own language). Clear up Case Resource Manager assumption/knowledge on wrap up form. Importance of Case Resource Manager as linkage points. Families don't understand the role of the Case Resource Manager.	<i>Case Resource Managers are trained to explain their roles to participants and their families with interpreters, as needed. Conversations are occurring about additional resources that can be developed to address this feedback.</i>
How does a person/family manage their waiver budget?	<i>Tools are available for families to help manage their budget at the request of the participant. Case Resource Managers assist participants and their families with questions regarding their waiver budgets.</i>
Information access; Find ways for families to learn about services; Families lack information about services on the waivers	<i>DDA works with community partners in outreach to all communities. Some resources are available on the DDA Internet site and on Informing Families Building Trust.</i>
Social connection (peer support)	<i>DDA offers Peer Mentoring on the Individual and Family Services waiver and community partners offer Parent-to-Parent support.</i>
Strongly value flexibility; Flexibility in moving from one waiver to another waiver; Review in Individual Support Plan or Person-Centered Plan if another waiver would be better; How to improve transition	<i>DDA waivers support flexibility in services within each waiver, service sites, and providers in compliance with the requirements identified by the Centers for Medicare and Medicaid Services (CMS).</i>

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between waivers; Getting appropriate services in place & what we say our services can do	
Waiver Suggestions that are under consideration in Renewals (cont.)	Developmental Disabilities Administration Response
More support: respite, targeted appropriate training	<i>For additional information about waiver services contact your case manager or local office to learn about upcoming informational opportunities.</i>
Having dual services: community access/engagement/day services and employment services	<i>DDA is exploring the expansion of Community Engagement to Basic Plus waiver to assist participants to engage with their communities. The possibility of expansion may be limited to available funding.</i>
Lack of providers; pay, hours & equity of access; particularly those who do behavior support; Developmental Disabilities Administration needs to contract with more community providers of respite and Community Engagement; consider looking at current requirements to become a provider to allow for more; Some areas lack particular resources; working on, seeing great initial results; Find and get providers up to speed; Increase provider capacity. Developmental Disabilities Administration needs to put a concerted effort in recruiting individuals and agencies to provide the services proposed in the waiver renewals. Individuals on the waiver cannot have their needs met if no individual or agency is willing to provide the waiver service. Developmental Disabilities Administration pays providers too low rates. Consistent rate across waivers for Behavior Support – need rate increase to address lack of providers. Increase rates paid for Community Access, Community Engagement, and Peer Mentoring to encourage agencies to provide these services throughout the state. Lack of infrastructure for providers: community guide and others. Create a certified behavior tech position that is paid at a higher rate than Individual Providers	<i>Six new full-time resource developers are currently at work in the field with support from central office to increase the number and diversity of waiver service providers statewide. Rate for Community Engagement was recently increased and other service rates are under review. Qualifications and training requirements for some service providers are actively under review to ensure that minimum requirements meet the standard for quality service delivery without unnecessarily limiting provider recruitment.</i>
Developmental Disabilities Administration partner with counties for community guide, person-centered planning, Individual and Family Services waiver. School districts do case level assessment for future demand.	<i>DDA works with community partners to outreach, plan and provide services to participants.</i>

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Family centered services with multiple family members served	<i>Respite, Staff/Family Consultation and Training and CIIBS and IFS Waiver behavior support and consultation are three current waiver services that support families of participants.</i>
Regular regional meetings	<i>Each DDA Region has their own strategy to communicate with participants and families, including regular meetings, webinars, digital communications and one-on-one contact with participants and families through Case Resource Managers.</i>
Waiver Suggestions that are under consideration in Renewals (cont.)	Developmental Disabilities Administration Response
Transportation needs for community access; Transportation. Transportation to allow eligible clients to actually have a home and community-based service experience; restriction as to be a denial of a federal benefit. Waiver funded bus passes. Transportation funding. Add Transportation to non-Medicaid/waiver services, consider allowing bus passes to be paid for on all waivers.	<i>All waivers currently include transportation to and from any waiver service and the Medicaid state plan provides transportation services to all medical appointments and essential shopping. Central Office is researching strategies to better support participants around transportation and housing needs.</i>
Integrated settings	<i>Required by the Centers for Medicare and Medicaid Services (CMS) and offered in all DDA service settings with the exception of Prevocational Services which are being phased out by March 2019; Respite services are not required to be delivered in integrated settings. DDA has developed a Statewide Transition Plan to address service settings and this plan has received initial approval.</i>
Home and community living as experience; waiver focus on a place; on siloed services not on a life; how do we support concept of home/community experience?	<i>Case Resource Managers currently assist participants to identify and document personal goals and specific supports and services to support those goals in annual Person-Centered Service Plans and review past year's plan and progress towards goals</i>
Supported Living provider supports choice and decision-making; Supported Living consumer's decision-making ability was declining. Supported Living provider was willing to work with family to develop decision-making plan and a power of attorney	<i>DDA appreciates the creativity and dedication to quality services demonstrated by service providers.</i>
For the Children's Intensive In-home Behavior Support renewal, add the word "Positive" for the Behavior Support and Consultation service. Suggest that language be included that this service be in-home or natural environment.	<i>DDA is adopting this suggestion in waiver renewals.</i>
For the Basic Plus renewal, add the word "Positive" for the Behavior Support and Consultation service.	<i>DDA is adopting this suggestion in waiver renewals.</i>

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For the Community Protection renewal, add the word “Positive” for the Behavior Support and Consultation service.	<i>DDA is adopting this suggestion in waiver renewals.</i>
For the Core renewal, add the word “Positive” for the Behavior Support and Consultation service.	<i>DDA is adopting this suggestion in waiver renewals.</i>
Require a plan to protect civil rights in the CP waiver	<i>DDA has policies in place to protect a client’s rights in the Community Protection waiver. If concerns arise please report these concerns to your DDA case manager or supervisor.</i>
Waiver Suggestions that require new resources	Developmental Disabilities Administration Response
Transition support out of parents’ home (especially baby boomers); Future planning for aging parents. More habilitation (life skills, education & therapies). Fund day services. How can parents figure out continuity after their passing. Life skills for people. Make in home support for independent living part of aggregate services in the Basic Plus waiver to allow some individuals to be able to live independently in the community.	<i>Community First Choice (CFC) currently provides Skills Acquisition Training as an option for CFC participants to develop new skills. DDA is researching additional options to support this need.</i>
No crisis services	<i>DDA currently offers Behavioral Health Stabilization Services to participants in crisis on all waivers. Services include Positive Behavior Support and Consultation, Specialized Psychiatric Services and Crisis Diversion Bed Services.</i>
Move Supported Employment back to age 20 for areas that don’t have school to work programs. More supported employment.	<i>Adding services to waivers will require additional resources from the Legislature.</i>
Put as many of the Individual and Family Service Waiver services on the other waivers; might start with more options in Basic Plus waiver aggregate like assistive technology and community engagement. Support to access services in community. Active, accepted community engagement.	<i>DDA is exploring the expansion of Community Engagement to Basic Plus waiver to assist participants to engage with their communities. The possibility of expansion may be limited to available funding.</i>
Employment supports are not working; they are not producing jobs; just revenue generation for agencies. These agencies are “working for” our eligible family member but at no time is billing info flowing through this employer; need to structure incentives	<i>DDA believes employment supports are working. For Fiscal year 2016 6,804 DDA clients collectively earned \$48,191,503.00 which represents an 8% increase in those working from the previous year. We are continuously looking at how to improve employment outcomes (more hours of work, better pay and job retention) for all individuals who want to work. For further concerns related to employment support please contact your local County Coordinator.</i>

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Eliminate Wait list – 10,000 unserved. Improved access to Case Managers and services offered. Family perspective: “Sell Developmental Disabilities Administration to get to eligibility; put Case Managers on hook to get results: lower caseloads, better case management; Case Managers take time to respond with services	<i>Washington Legislature expanded funding for waiver enrollment during the 2015-2017 biennium. DDA is on target to add 6,500 individuals to the IFS waiver and to add 1,000 individuals to the Basic Plus waiver.</i>
Waiver Suggestions that require new resources (continued)	Developmental Disabilities Administration Response
Developmental Disabilities Administration needs to have a plan and process to support individuals who receive community waiver residential services and the rent for their apartment is increased to the point they have to move. The shortage of affordable housing is becoming a huge issue for King, Snohomish, Pierce and Clark counties. We strongly urge Developmental Disabilities Administration to be proactive in finding solutions.	<i>DDA is researching strategies to increase housing options for participants.</i>
Add the service “Person Centered Plan facilitation” to the CIIBS waiver. For the Community Protection renewal, include the word “Individual” to the Staff/Family Consultation service. Add supported decision-making or guardianship, Peer Mentoring, specialized nutrition and “Person-centered Plan Facilitation” to this waiver. For the Core renewal, include the word “Individual” to the Staff/Family Consultation service. Add supported decision-making or guardianship, Peer Mentoring, specialized nutrition, supported parenting, internet access and needed devices, and “Person-centered Plan Facilitation services to this waiver.	<i>Adding services to waivers will require additional resources from the Legislature.</i>
Specialized nutrition on all waivers. Whole life Person-Centered Plan Facilitation available as a separate item on all waivers. Supported Parenting (for individual and parent on all waivers). Peer Mentoring and Community Engagement on all waivers. Make Supported Decision-making an available service	<i>Adding services to waivers will require additional resources from the Legislature.</i>
Add Assistive Technology to all waivers	<i>Currently all Community First Choice participants have access to assistive technology together with participants on the Children’s Intensive In-Home Behavioral Support and Individual and Family Services waivers.</i>
Make internet availability available on all waivers under Assistive Technology	<i>Adding services to waivers will require additional resources from the Legislature.</i>

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More weight in assessment for family needs: single parent, low income, other caregiving needs, language needs. Improve the assessment that determines services to better capture the needs.	<i>DDA will add this input to planning for future assessment updates.</i>
Waiver Suggestions that require new resources (continued)	Developmental Disabilities Administration Response
Create 3 categories within the Basic Plus aggregate services: Goods and Services, Direct Support and Technical assistance. Goods and services include: Specialized Medical equipment/supplies, Specialized nutrition, Assistive technology including internet access, Transportation (bus pass), Reimbursement for transportation services (mileage), Environmental accessibility adaptations, and vehicle modifications. Direct support includes: Support to access the community (Community engagement/Community Guide), Support to live in their own home to live more independently (habilitation), Peer Mentoring, Support for parenting (for individual). Technical assistance includes: Positive Behavior Support and Consultation, Specialized Psychiatric Services, Person Centered Planning, Short term system, community, resource navigation and/or exploration to the person or the family (community guide); Individual/Staff/Family consultation/training, Skilled nursing (nurse delegation), Occupational therapy, Physical therapy, Hearing, Speech and Language services, Supported parenting consultation, Supported decision-making.	<i>DDA appreciates hearing ideas on organizing services.</i>
Up the per-caps for Employment	<i>Adding services or increasing the per capita spending on waivers will require additional resources from the Legislature.</i>
Consider contracting that has a no reject policy particularly agencies who only serve people with disabilities	<i>Continuous enrollment of all qualified providers is current DDA policy and practice.</i>
Request the Legislature to increase funding for Supported Living providers so they can attract people they can hire for direct support staff. Currently turnover rates are 50% and it is impossible to have any continuity of care for the people supported. Also, it would attract providers to serve the 35+ individuals in a state institution who want to move but can't because providers cannot hire sufficient staff.	<i>Adding services or increasing the per capita spending on waivers will require additional resources from the Legislature.</i>

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Support state legislation to allow a person on the waiver to receive both employment and community access. Since the average number of hours a person on the waiver is 12 hours a week, people are sitting at home the majority of their day. Consider allowing 2 services (Employment and Community Access) or look at expanding the aggregate services in Basic Plus to include access to community.	<i>DDA is exploring the expansion of Community Engagement to Basic Plus waiver in the renewal to assist participants to engage with their communities while also participating in Supported Employment.</i>
Waiver Suggestions that require new resources (continued)	Developmental Disabilities Administration Response
Work with stakeholders and others to change in state law the number of hours needed to become an intermittent respite provider (less than 300 hours per year). The current number of 35 hours of training is difficult for these individuals to take, resulting in families not being able to utilize their respite funding.	<i>DDA appreciates hearing suggestions on how provider requirements may need to change to better support participants.</i>
For Basic Plus renewal, include the word “Individual” to the Staff/Family Consultation service. Add internet access and needed devices, community engagement, peer mentoring, supported parenting, specialized nutrition, transportation to non-Medicaid services (bus pass), and supported decision-making or guardianship to the aggregate services category. Add the service “Person-centered Plan facilitation” to this waiver.	<i>Adding services or increasing the per capita spending on waivers will require additional resources from the Legislature.</i>
Increase the per caps for all waivers being renewed.	<i>Adding services or increasing the per capita spending on waivers will require additional resources from the Legislature.</i>
Suggestions not directly related to Waivers	
Bring cultural competency to social work; understanding each other. More cultural competency / social work. More Case Resource Manager training in cultural competence and using interpreters. Families need Language Support; need more trained interpreters, particularly with DD experience. More Case Resource Manager training in cultural competence and using interpreters. Families need Language Support; need more trained interpreters, particularly with DD experience. More training Case Managers in cultural competency. Inconsistent performance by Case works (families compare). Case workers not always having right waiver information. Stop Case Managers making decisions for client. “Everything I’ve asked my Case Manager she has not known.” Train Case Managers & providers.	<i>DDA continues to invest in our Case Resource Manager training and has added additional positions in support of the Case Resource Manager Academy.</i>

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Follow through with documentation and other stuff by Case Manager. Lack of flexibility; Developmental Disabilities Administration provides more training to Case Managers. Stop “We don’t offer that”	
Communicate kudos to Case Managers	<i>Supervisors and Field Service Administrators forward compliments to Case Resource Managers as they are received.</i>
Suggestions not directly related to Waivers (continued)	Developmental Disabilities Administration Response
How can we best understand each other to make human services work	<i>DDA appreciates hearing how we can improve our work, our processes and how we interact with our communities.</i>
Clear communications	
Case Managers at hospitals	
Special crisis case managers	
Families need to be able to come together to create regular housing alternatives (cooperatives, etc.) so that aging parents can bring resources to long-term solutions. We need models and supports. Unanimous fear: what will happen to (my family member) when I die? Needs to be a true partnership in making sustainable plans	
Communicate assistive technology options to people and families	
Client out of pocket costs (how responsive is waiver)	
Stop rushing appointment	
Educate parents early, often. Educating parents. Simple and accessible information for parents	
Better interpretation and translation	
Birth to three program, persistence, ARC’s Parents to Parents advocacy. Birth to three programs good; 1 person in N. Kitsap School District to help transition to preschool / elementary; persistence for dealing with multiple handicaps. Birth to three; build great bridges; at age 3 if eligible, automatically enroll. Birth to 3 program was a savior; Getting into services up to middle school then “new structures to climb”	
If eligible for Developmental Disabilities Administration assess the needs; eligibility = assessor	
Multi-directional communication + share information early	

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Need more appropriately trained direct support staff; worker retraining programs	
Not enough advocacy for inclusion	
Expectations: “We are expected to know, project and imagine services, then be told no.”	
Add: more Case Managers, use resources of families as team members, not antagonists	
General Suggestions	<i>DDA appreciates hearing how we can improve our work, our processes and how we interact with our communities and other service systems.</i>
School transition services are horribly inadequate limiting legally required services to “squeaky wheels only” due to budget limits; DSHS needs to hold schools accountable	
For new families not a lot of coordination of care with other providers (i.e. hospitals)	
Lack of housing	
Families feel isolated and “in the dark” about building a home and community-based services experience for family member with disabilities. We need sponsored community groups we can turn to for peer mentoring.	
Fix how to find consistent, acceptable respite	
Respite care is almost impossible to access effectively. Families need to be able to access family and neighbors without having remotely available training requirements that drive prospects away.	
Training: friends/family need easier access to being respite providers	
Not enough done to help families and communities to build support across families “supported planned household”	
Intercity Transit offers travel training in Thurston County	
Respect and use (flexibility) the family resources that they have and can be used without more bureaucracy. Respect durable power of attorneys.	
Waiver Suggestions with other issues	
Café waiver	Developmental Disabilities Administration Response <i>DDA appreciates hearing how we can improve our work, our processes and how we interact with our communities.</i>
Self-directed waiver	
Provide a budget not based on service silos	

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Flexible aggregate services; flexible to move your money around	
Biggest 3 deficits: inflexible resources! Provide a budget individual can direct through a person-centered plan (not based on service silos)	
Case Resource Managers must be operating as fiduciaries, focused on client needs, not on central office budget	
What is working Suggestions/Comments	
	Developmental Disabilities Administration Response
Children's Intensive In-home Behavioral Support Waiver provides good wrap-around + peer support	<i>DDA appreciates hearing what is working and how we can continue to improve our work with participants, our providers and our community partners.</i>
Parents helping parents even if system does not change	
Individual and Family Services Program waitlist is no more; Legislature funded Individual and Family Services waiver	
Case Manager is "an extended member of the family." Knowledgeable Case Manager; would not have qualified for Medicaid; could plan for future needs. Good knowledgeable case workers. Generally good feedback from families about caseworkers "eyes on the ground." iPad for verbalization: Case Manager helped through clunky steps; +- interface with Case Worker genuinely watching out for us. Success factor: Case Manager understood what was available and communicated that. I have an awesome Case Manager; "What is going to make life nicer, help this person"	
Right services for the person	
Value of services	
Community connection	
Importance of Case Manager & sometimes barriers	
Case Manager relationships	
Perseverance, timing and luck. Persistence (even when in crisis)	
Providers be clear about expectations for person, family and provider!	
Supported employment	
Supported employment with job coach	
Multi direction communication; inform the families about services	
Parent support/simplified accessible information	

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Wrap around services	
Family Resource Coordinators who assist applying at 3 years of age (prior to aging out)	
Peer support; certified peer counselor	
Intercity Transit: How to ride training in Thurston County	
What is working Suggestions/Comments	
Provider willing to accept the waiver payment amount (low reimbursement)	
Continue speech therapy after private insurance maxes out (not clear about how this works)	
Early years: Needed diapers as an older child. Case worker asked what we needed. Connected us to resources.	
Respite has enriched Joy's life.	
Hard to find just one success	
Services engaged client so he wasn't bored. Helped with behaviors.	
Focus on a person's interests. Person-centered and person more involved.	
Timing and sharing stories around getting young adults on waiver	
Talker group makes advances in using her device	
Parent helping parents on how to navigate	