

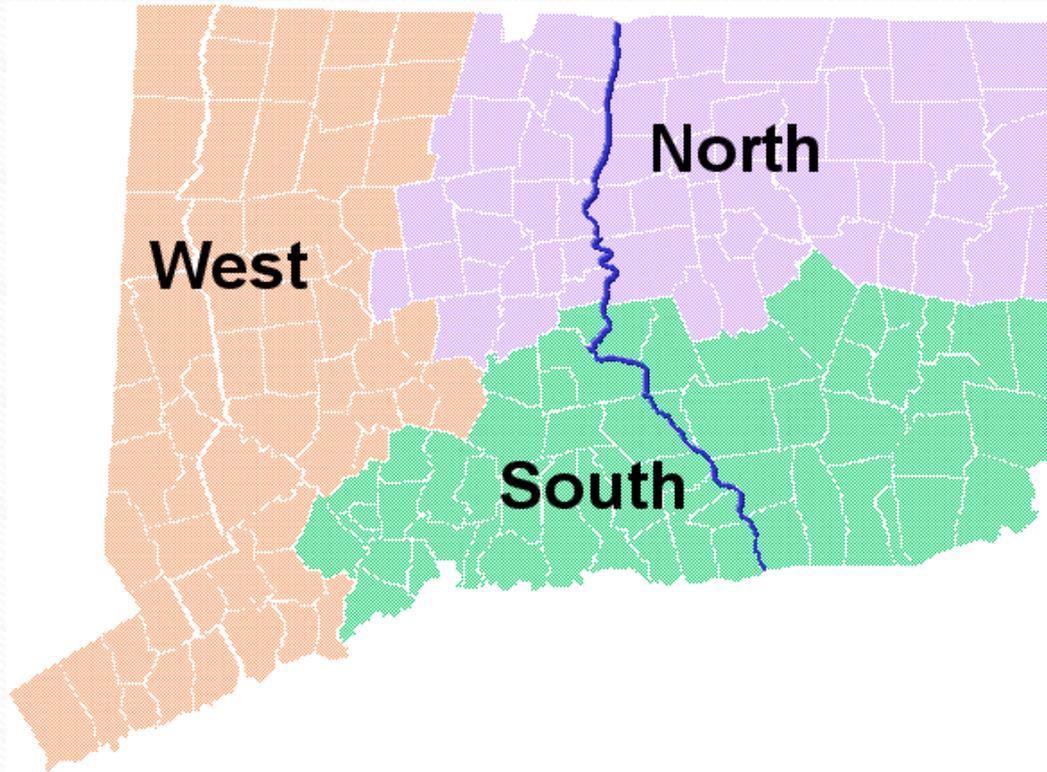


CT DDS and CNHCT Collaboration Presentation for Complex Care Committee

January 22, 2016

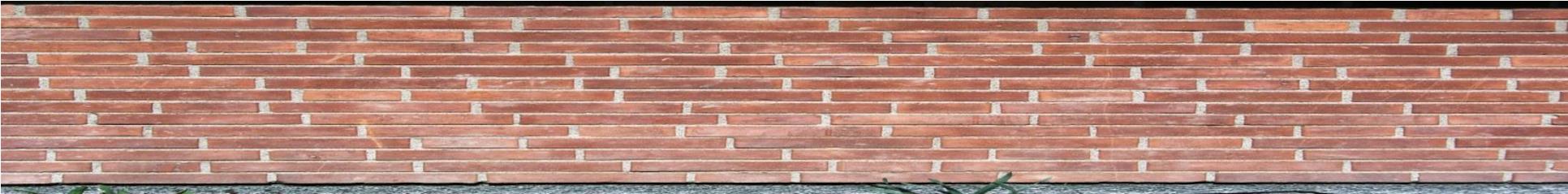


DDS Regions



Who do we support?

- Males and Females
- Across the lifespan 3-96
- Private Insurance
- Medicaid
- Medicare



Medicare and Medicaid Eligible

- 16403 Individuals currently eligible for DDS**
- 5775 are dual eligible for Medicare and Medicaid*
- Individuals can live in any setting
- 200 plus qualified provider agencies

- *11/2015
- **MIR data 12/2015



Who do we support?

- **DDS supports 15350 that have a Medicaid number***
- **DDS supports 1049 that have no Medicaid number***
- **DDS supports 5775 that are considered dual eligible**
(Medicare and Medicaid)**

*DDS DSS Download 1/7/2016

**CHNCT info 11/2015

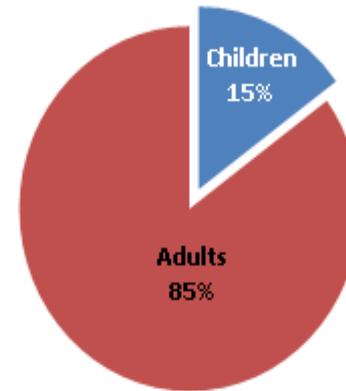
MIR 2/2015

Who We support

DDS Supports People With Intellectual Disability and Developmental Disabilities

DDS supports approximately 156 people under the Autism Waivers

Individuals with ID supported by DDS



MIR 12/2015

**Children is defined as age 0-17.
Adult is age 18 and over.**

DDS ID Eligibility

- Resident of the State of Connecticut
- Have “intellectual disability” as defined in Connecticut General Statutes 1-1g
 - IQ 69 or below
 - Concurrent Adaptive skill deficits
 - Onset during the developmental period
- OR, a Diagnosis of Prader-Willi Syndrome
- Eligibility Unit www.ct.gov/dds - select ‘eligibility services’ or call 1-866-433-8192

Autism Diagnosis

- In order to be eligible for supports and services from the Division of Autism Spectrum Disorder Services at the Connecticut Department of Developmental Services, a person must have:
- Legal Residency in the State of Connecticut
- A **PRIMARY** diagnosis of Autism Spectrum Disorder (an evaluation for Autism Spectrum Disorder must **include** a standardized diagnostic instrument such as the Autism Diagnostic and Observation Schedule (ADOS), Childhood Autism Rating Scale (CARS), or Gilliam Autism Rating Scales (GARS). Evaluations that do not include standardized diagnostic instruments will not support to qualify individuals for DDS service).
- A full scale IQ of 70* or higher (a diagnosis of intellectual ability **must include** tests such as the Wechsler or Stanford-Binet which assess the applicant's intellectual/cognitive ability and generate IQ scores. Psychological testing must indicate current (within 3 years) cognitive/IQ results).

*For children ages 3-7 where a valid IQ cannot be determined, eligibility will be based upon a diagnosis of an ASD and developmental delays.

- Impairment in at least **three** areas of adaptive functioning (To be eligible for DDS Division of Autism Spectrum Services, impairment in adaptive functioning must be determined by Adaptive Skills Testing. **Adaptive Skills** tests such as Vineland and Behavior Assessment System for Children (BASC) evaluate the applicant's capability with daily activities such as dressing, grooming, and social skills).
- Live in either their own home or their family home (individuals living in residential or school settings are not eligible for the autism waiver services).
- Medicaid Eligibility (Applications will not be processed for individuals 18 years and older unless there is a copy of the Medicaid Card.)

Additional Info

- DDS eligibility is not based on income
- Medicaid eligibility is required to receive waiver services

Where People Live

About 64% of the people supported by DDS live in their own home or family home

MIR 12/2015



Places people live

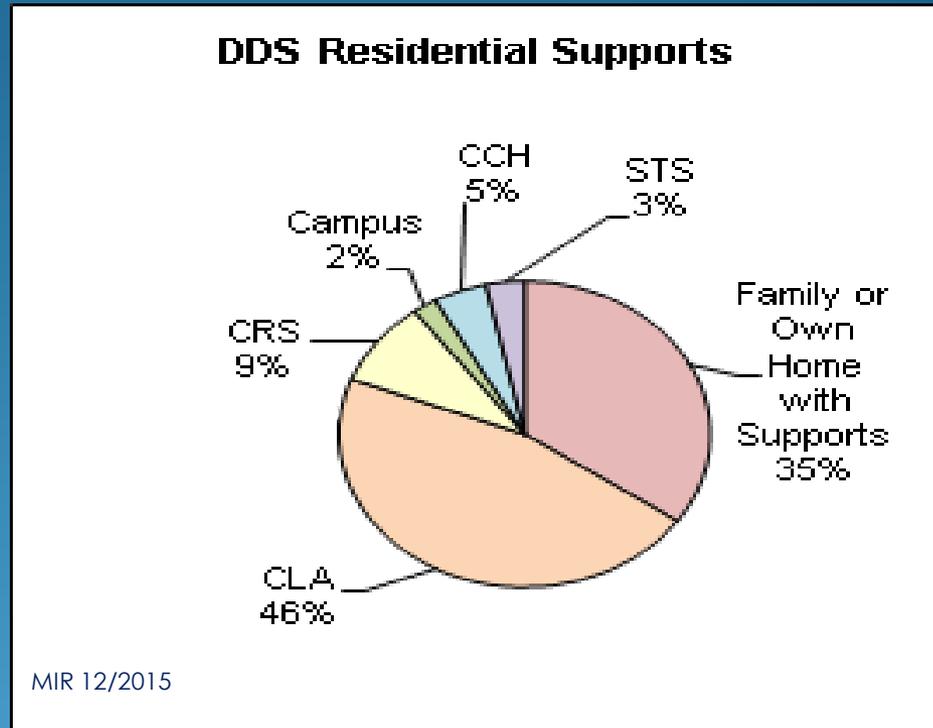
Key:

CLA- Group home
24/7 support

CRS- Group setting
3 or less not
licensed

Regional Centers-
campus setting

CCH- Community
Companion Homes



The Family or Own Home with Supports category refers to people living in their family or own home who have in-home supports. This category excludes individuals living in their family or own home who do not have in-home supports.

Challenges

- Multiple Surrogates(designee)
- Accessibility
- Person Centered Care

Multiple Surrogates

- Individuals
- Parents (are not necessarily legal guardian if person 18 or older)
- Legal Guardians(Plenary/limited)
- Conservators
- Spouses
- Family members
- Group Home managers
- Nurses
- Health Care Coordinators
- Case managers
- Direct Care professional
- Self directed staff

Accessibility

- Physical Access- are the building equipped
- Provider Access- historically hard to find medical providers willing to work with individuals
- Communication accommodations- how and with whom
- Healthcare disparities- inadequate focus on health promotion and prevention

Person Centered Care

- Treat each person not their disability
- Individual habilitation and rehabilitation expectations
- “Nothing about me without me”
- Engage surrogates without violating a person’s rights

Opportunities

- Establish a learning collaborative to educate providers on healthcare and barriers

Opportunities

- Utilize DDS expertise
(DDS Pilot for Healthcare Coordination)
- DDS Case Manager
 - State employee-exam
 - Average case load 40 individuals
 - Coordinates Individual Plan, resource and referral not direct services

Opportunities

- Develop Care Coordination that reduces duplication or detracts from the individual outcomes

Opportunities

- Support individuals and their surrogates to make informed decisions about preventative healthcare
- Healthcare needs are undersupported-hard to coordinate the care

Current Collaborations

- Share data weekly
- Intensive Case Management (ICM) referrals and follow-up
- Regional trainings to DDS Staff by ICM staff
- Prior Authorization- specific email process established to promote communication
- Training and outreach to partners- HHA Webinar
- Specific issue and developing resolutions
(example HHA)

Future Collaborations

- Real time ER data
- Using shared data to help identify potential service gaps

