

Working with DD Services



“Solving the DD Puzzle”

Speaking the Same Language



Speaking the same language allows us to better meet the needs of our clients.

- Understand who is being served through our programs.
- Understand the Services Available
- Talk to the Right Person
- Utilize Resources

Definitions



Developmental Disability (411-360-0020)

Developmental Disability means a disability attributable to mental retardation, autism, cerebral palsy, epilepsy or other neurological handicapping condition that requires training or support similar to that required by individuals with mental retardation, and the disability:

- (a) Originates before the individual attains the age of 22 years, except that in the case of mental retardation the condition must be manifested before the age of 18; and
- (b) Has continued, or can be expected to continue, indefinitely; and
- (c) Constitutes a substantial handicap to the ability of the person to function in society; or
- (d) The condition or impairment must not be otherwise primarily attributed to mental illness, substance abuse, an emotional disorder, Attention Deficit and Hyperactivity Disorder (ADHD), a learning disability, or sensory impairment; or

- (e) Results in significant sub-average general intellectual functioning with concurrent deficits in adaptive behavior that are manifested during the developmental period. Individuals of borderline intelligence may be considered to have mental retardation if there is also serious impairment of adaptive behavior. Definitions and classification will be consistent with the “Manual of Terminology and Classification in Mental Retardation” by the American Association on Mental Deficiency, 1977 Revision. Mental retardation is synonymous with mental deficiency.

Mental Retardation

Mental retardation is defined as significantly sub-average general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the developmental period. Persons of borderline intelligence may be considered mentally retarded if there is also serious impairment of adaptive behavior.

Adaptive behavior means the effectiveness or degree with which an individual meets the standards of personal independence and social responsibility expected for age and culture group.

Oregon uses a variety of cognitive assessments, over time. If cognitive results show a pattern under full scale IQ of 65, an adaptive assessment may not be required.

Full scale 66 to 75 always requires an adaptive assessment before mental retardation can be ruled in/out.



Structure

SPD Eligibility Structure:

In SPD, there are a variety of service delivery models:

- Disability Services Office (DSO)
- Multiple Services Office (MSO)
- Councils of Governments (COG), or
- Area Agencies on Aging (AAA)

We usually offer services based upon city or a portion of a community. Some are state offices and some are contract agencies.

Whichever structure is used, they all have the responsibility of administering our programs.

DD Service Delivery Structure:

Although DD is under SPD, their field structure is quite different.

- Most DD offices are administered on a County level.
- Most offices are County employees (with the exception of Coos County - which is a state office).

Lots of times, their offices do not “match” up well with SPD eligibility offices.

Services Available



There are a variety of DD services available

- Case Management Services or Services Coordination
- Adult Services
- Children Services



Supports for Adults

Support Services

Supports in the home are available to help individuals to live as independently as possible on their own or in the family home or apartment. Individuals have the opportunity to enjoy freedom and choice over where, how, and with whom they live. All in home supports are developed based on the principles and values of Self Determination. The type, frequency, and duration of supports will depend upon the individual needs and environmental issues identified in the Individual Support Plan (ISP).

- Brokerage Services to Allow Individual to Fully Participate in Community Life, Including Work
- Brokerage and Personal Agent help individuals access community resources.
- Person Centered Plan is developed to help them stay safe at home and engaged in the community.
- An individual budget is established to assist them in purchasing services.
- Focus is on use of natural and other community and agency resources.
- Living in Family/Individual Home
- Person centered plan less than \$20,000



Supports for Adults

Comprehensive Services

Comprehensive Services provide adults the opportunity to design and manage the supports they need to live in their own home or their family home. Adults and their legal representatives receive assistance to identify needs, design formal and informal support strategies, gain access to a variety of resources, direct staff, fulfill employer responsibilities and monitor the quality of supports delivered. In home and other support costs for adults in this service cost \$20,000 or more per year.

- 24 Hour Residential Supports and Community Inclusion Supports
- Allows Individuals to Live as Independently as Possible in Their Own/Family Home/Apartment
- 24 Hour Care and Support Provided Outside Immediate Family/Individual Home * OR*
- Supports Provided in Family Home of \$20,000

Crisis Care and Nursing Facility Specialized Services
Are Also Available



Supports for Children

Foster Care

- 24 Hour Residential Care
- Proctor Care

Medically Fragile Children

Children's Behavior Waiver

Crisis Care and Nursing Facility Specialized Services
are Also Available



Eligibility

“DD eligibility is a categorical right, not dependent upon the availability of services.”



The DD case manager handles eligibility for **DD Services** (waivered or general fund).



The SPD eligibility office handles eligibility for **Medicaid**.



If a person is eligible for a DD waiver, they get to use the waiver income limit (300% of SSI) when determining Medicaid eligibility.



DD clients age 65 and above can choose to be on a DD waiver or the APD waiver, whichever serves them the best.



A person may be on DD services (waivered or general fund) and not Medicaid eligible.



If a person is Medicaid eligible and DD waiver eligible, they get more services on the DD side.

How Can I Look?



DD Coding is available on the SL01 Screen. To access this screen, type in:

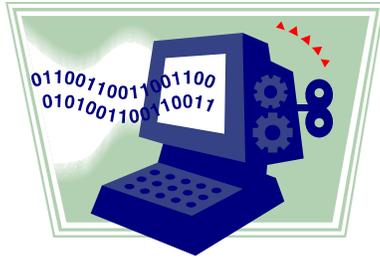
SL01,(PrimeNumber)

If I type in: SL01,AA12345A, the following screen will appear:

<u>Sel</u>	<u>Beg Svc Cat Dt</u>	<u>End Svc Cat Dt</u>	<u>Cat Cd</u>	<u>Updated Lst</u>	<u>Updated Racf Id</u>	<u>Svc Off</u>
-	02/24/2004	12/31/9999	DDC	05/08/2004	HMAMB00	9002
-	12/19/2003	02/23/2004	DDS	05/08/2004	HMAMB00	9002
-	03/28/2003	12/18/2003	DDP	01/16/2004	HMAMB00	9002

Msg JM123 NO RECORDS SELECTED; SELECT OR PRESS F10 TO ADD
F10=SL03 F12=SLTC

16/63



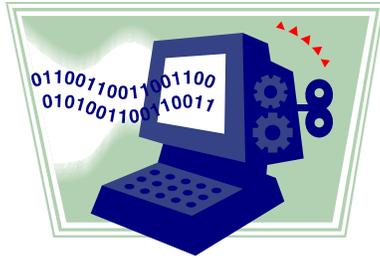
SL01 Coding

Waiver Coding

- DDC
- DDS
- DDB (See Rarely)
- MFW (See Rarely)

Other Codes – Non-Waivered

- DDP
- DDG (We shouldn't see)
- BPD
- BPM



DD Waiver Coding

DDC Developmental Disabilities Comprehensive Home and Community Based Care 1915C ICF-MR Waiver

- Comprehensive Services
- Up to 24 hour Care (if needed)
- Adults or Children
- Services may be provided in the home or out of the home.
- Plan is \$20,000 or more per year.
- Coding: Residential - DAN/MVC or GCH/MRF
In-Home - Only DDC

DDS Developmental Disabilities In-Home Supports Home and Community Based Care 1915C ICF-MR Waiver

- Brokerage Services
- Provides Support Services to Adults (18 and Older)
- Coding: DDS Only

Level of Monthly Benefit (Based Upon Need/Assessment)			
	Basic	Mid-Range Base Plus (5%)	Full Base Plus (5%)
General Fund	\$ 320	\$ 480	\$ 667
Waivered	\$ 800	\$ 1,200	\$ 1,667

**DDB In-Home Supports, Children's Home and
Community Based Care 1915C ICF-MR
Model Waiver**

- Referred to as the "Children's Behavior Waiver"
- Small Group of Children - Caps at 150
- Services Provided at Home – Gives Parents Respite
- Coding: DDB Only

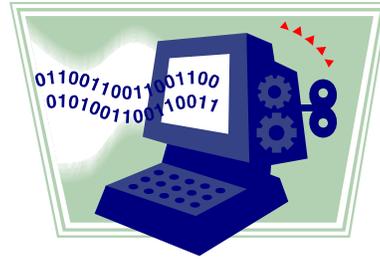
**MFW Medically Fragile Children; Home and
Community Based Care 1915C Hospital
Model Waiver**

- "Medically Fragile Kids"
- Currently about 200 Being Served.
- Ran through SPD System
- Coding: MFW Only



NOTE: A person can be receiving DD services and not be on any waiver.

Other Codes Used on SL01



DDP Not a Specific Waiver - It=s a Placeholder

- DD Waiver Pending - Either DDC or DDS
- Waiting for Financial Eligibility Determination
- Allows Income Bypass to Waiver Standard
- SL01 Must be Set Up BEFORE updating UCMS
- Coding: DDP Only

DDG General Fund Payment - Not Waivered

- Either Level of Care has not been established or has been disapproved; and/or
- Individual is not receiving a waiverable service (in DD CPMS).
- Coding: DDG Only

Angel Bringelson (503-945-6985) sets up SL01 Coding –
Call her for questions on the SL01 Screen

What is a Service Element?



DD uses the term service elements to describe the type of service a person is receiving. Often it indicates placement.

Here's a list of the most common:

- 48 – DD Case Management
- 49 – Family Support (Long-Term Only)
- 50 – Residential
- 51 – Supported Living
- 54 – Employment & Alternative (Voc)
- 58 – Non-Relative Foster Care

When involved with Medicaid, the DD case managers usually refer to service elements 50, 51, and 58.

Residential Supports



Within the 24-Hour Comprehensive Residential Supports, you will see five different types:

- Foster Care Homes
- Group Care Homes
- Supported Living Services
- State Operated Community Programs (SOCP)
- Eastern Oregon Training Center

However, you will encounter Foster Care, Group Care Homes and Supported Living the most.



Foster Care

A **DAN** is the code used for a Adult Foster Home licensed by the Department to provide residential care and support to individuals with developmental disabilities. The Adult Foster Home maximum capacity is limited to five adults who require care and are unrelated to the provider by blood or marriage.

You may remember the term **DAR**, which was a DD Adult Foster Home, able to serve relatives. (However, we no longer have any DAR's, only DAN's.)

Like any other foster home within our system, DD Foster Homes are paid through the 512 system, but they are managed centrally. The DD case manager submits the information to Central Office for processing.

The coding for a DAN would be:

- Case Descriptors: DAN
DDC or DDG (see SL01)
CBF
- Needs/Resource Codes: MVC (Continuous and Zero)

Group Care Homes



A **GCH** is the code used for Group Care Homes. This living situation is used for 24-Hour Residential or Supported Living.

Residential facilities in the community designed to provide 24-hour supervised care, training and support for individuals with developmental disabilities. Group homes provide room and board as well as an array of services to residents. Group homes can vary in the number of individuals who live there and the number of staff, depending on the support needs of the individuals. There are some group homes designed to serve individuals with complex medical needs, as well as those with challenging behavioral needs.

Supported Living is also coded as a GCH, even though some times people are in their own apartment. The level of service is considered a residential service as defined by the waiver and these people have to pay a service contribution (if not SSI eligible or DAC) like people in 24 hrs residential or foster care.

The coding for a **CGH** would be:

- Case Descriptors: GCH
DDC or DDG (see SL01)
CBF
- Needs/Resource Codes: MRF (Continuous and Zero)

ICF/MR



- **ICF/MR** stands for Intermediate Care Facility for Persons with Mental Retardation.
- It is the Waiver Equivalent of a Nursing Facility
- Eastern Oregon Training Center

What about MRS?



The Monthly Tracking System (MRS) is used to track income on a monthly basis.

Only a small population of DD individuals needs to be in the reporting system.

The only people that need to be placed in MRS are those that meet ALL of the following criteria:

- Not SSI Eligible;
- Not in a Protected Eligibility Group;
- Not in EPD;
- In a DAN or GCH: **and**
- Have Monthly Earned Income of at Least \$65

Isn't there a Liability?



So who pays what and to whom?

Liability varies based upon the living situation and the payment system being used.

Living Situation	Liability Type	System
Comprehensive Services in Their Home	Offset	CPMS
Comprehensive Services in Family Home	Offset	CPMS
Comprehensive Services in Group Home	Offset	CPMS
Comprehensive Services in DD Foster Home	Service Liability	512
Brokerage Services	Brokerage Plan Calculations	Brokerage Personal Agent
Comprehensive Services EPD Client	Offset	CPMS
Brokerage Services EPD Client	Client Contribution	Manual

REMEMBER: We are NOT responsible for collecting and monitoring the liability payments. This is a function of the DD case manager. (Except EPD Clients in a brokerage.)

Liability Deductions



The various DD payment systems use the data from UCMS to calculate liability.

- DD staff cannot see UCMS
- Medicaid Coding Affects Liability

Using liability deductions is a new process for the DD offices.

- Medicare Part D Expenses (MDC)
- Other Incurred Medical (OIM)
- Other Health Insurance (OHI)

Information to DD staff has been limited and they are in the process of creating new forms and establishing procedures to make it flow more smoothly.

Disabled Adult Children (DAC's)

- Liability for DAC's was removed in July 2005.
- A large percentage of the SPD DAC's have a DD Diagnosis
- Need to be Under \$2,000 in Resources to Maintain Medicaid Eligibility
- Options

Partnership Ideas



- 💡 Remember we have the same goals – Meeting the Needs of our Clients
- 💡 Get to Know the Local DD Case Managers and Brokerage Personal Agents
- 💡 Speak the Same Language
 - 🌟 Learn Their Language
 - 🌟 Teach Them Our
 - 🌟 Create an Open Dialogue

Who to Call



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