



South Carolina Department of Disabilities and Special Needs

Ways & Means Healthcare Budget Subcommittee

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January 24, 2017

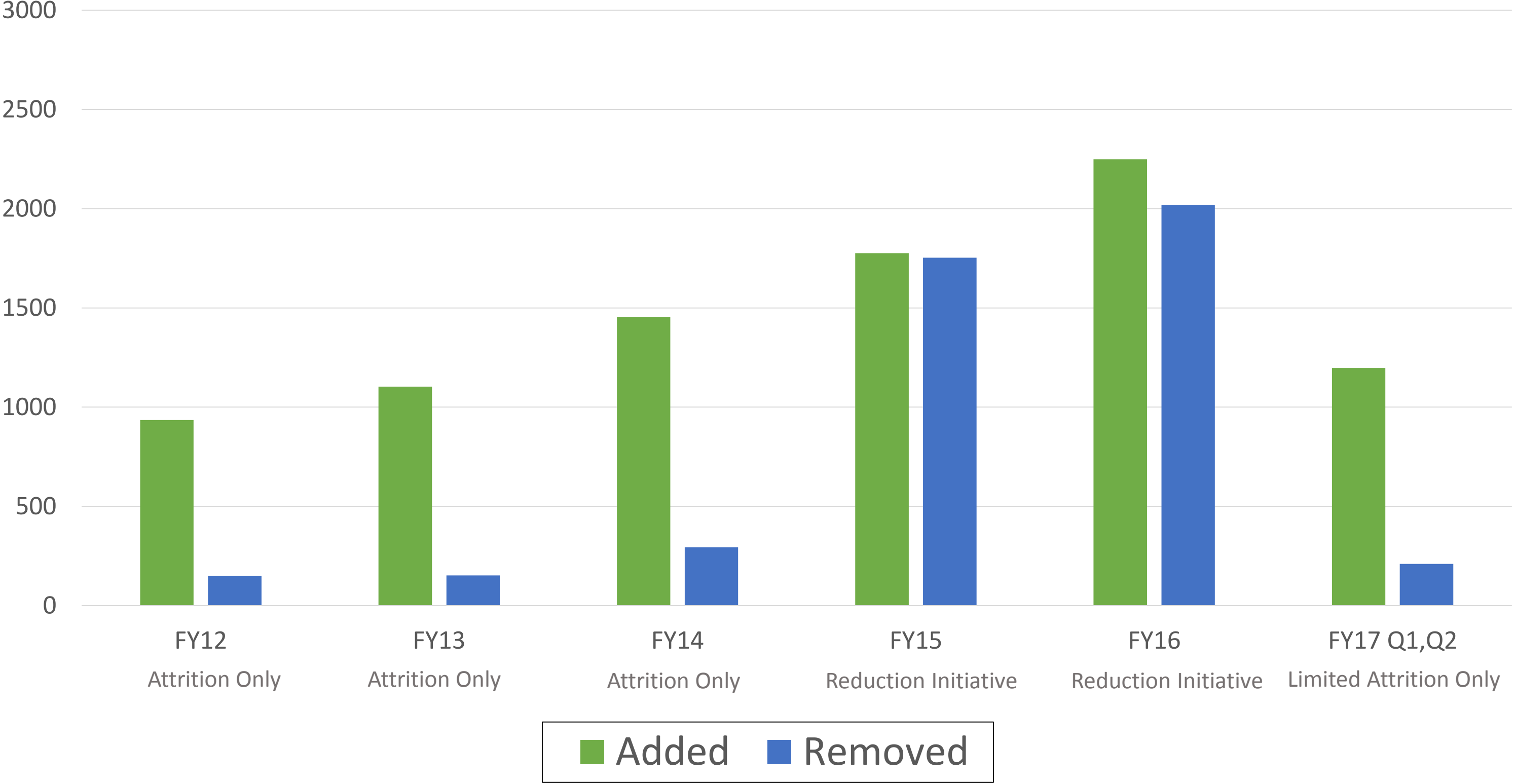
Waiting List Reduction Initiatives



- A major emphasis of the agency is to reduce the number of people waiting for services.
- The generous funding from the Governor and General Assembly in recent years has enabled the agency to make substantial progress and provide essential services to individuals and families.
- Waiting list reduction efforts are ongoing and require extensive coordination and resources within DDSN's statewide provider network.

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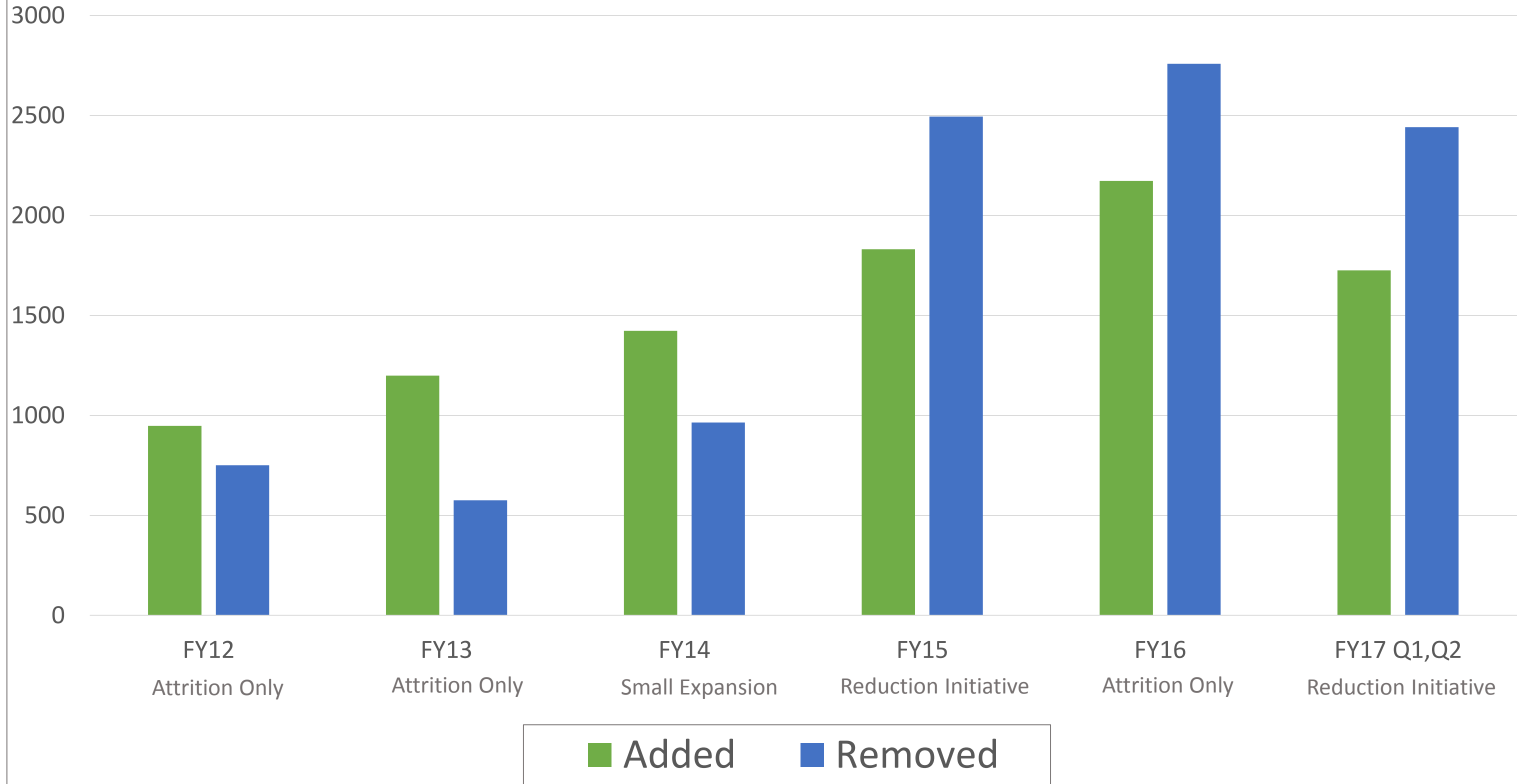
Intellectual Disability/Related Disabilities Waiver Waiting List Individuals Added and Removed by Fiscal Year



*As of January 3, 2017

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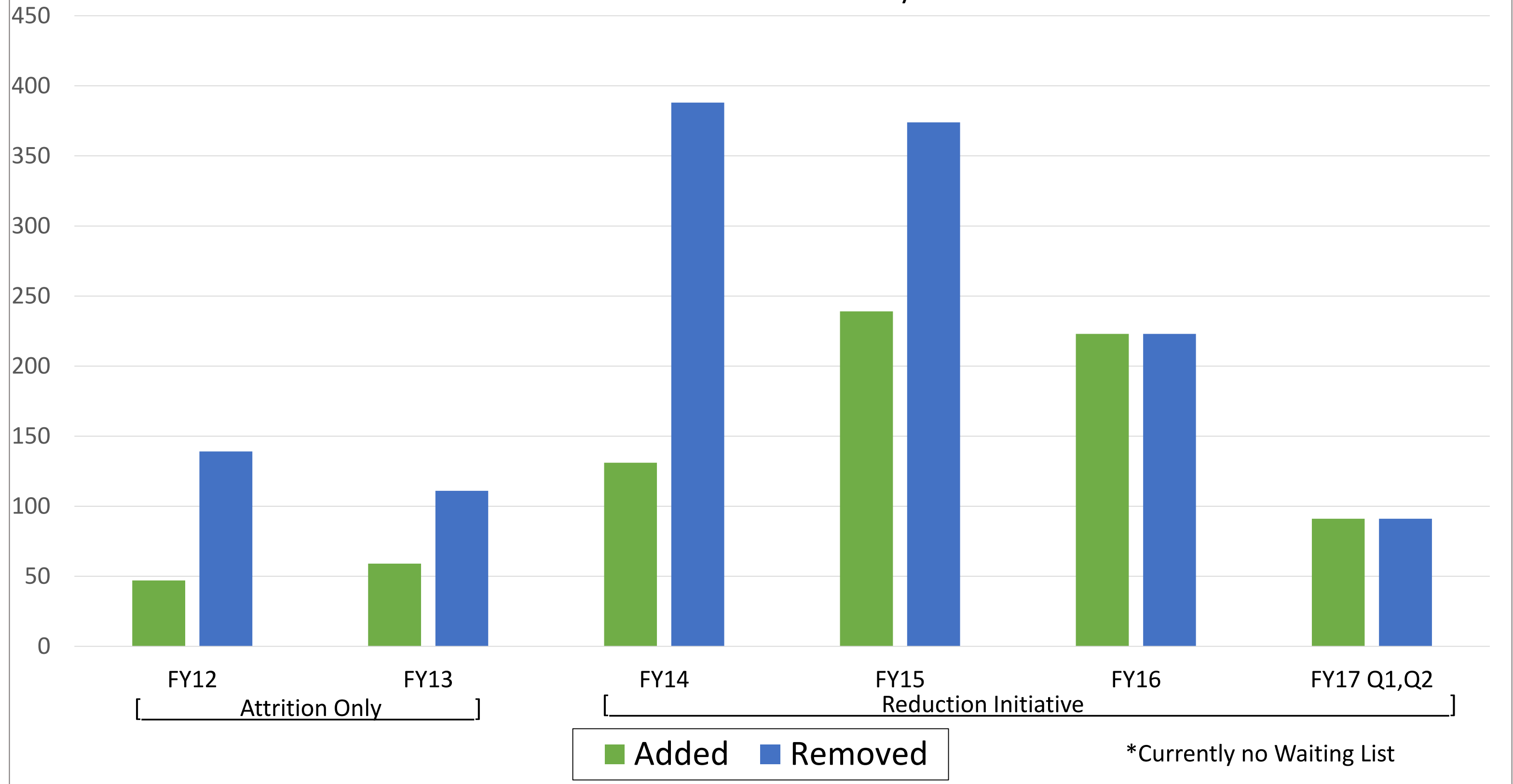
Community Supports Waiver Waiting List Individuals Added and Removed by Fiscal Year



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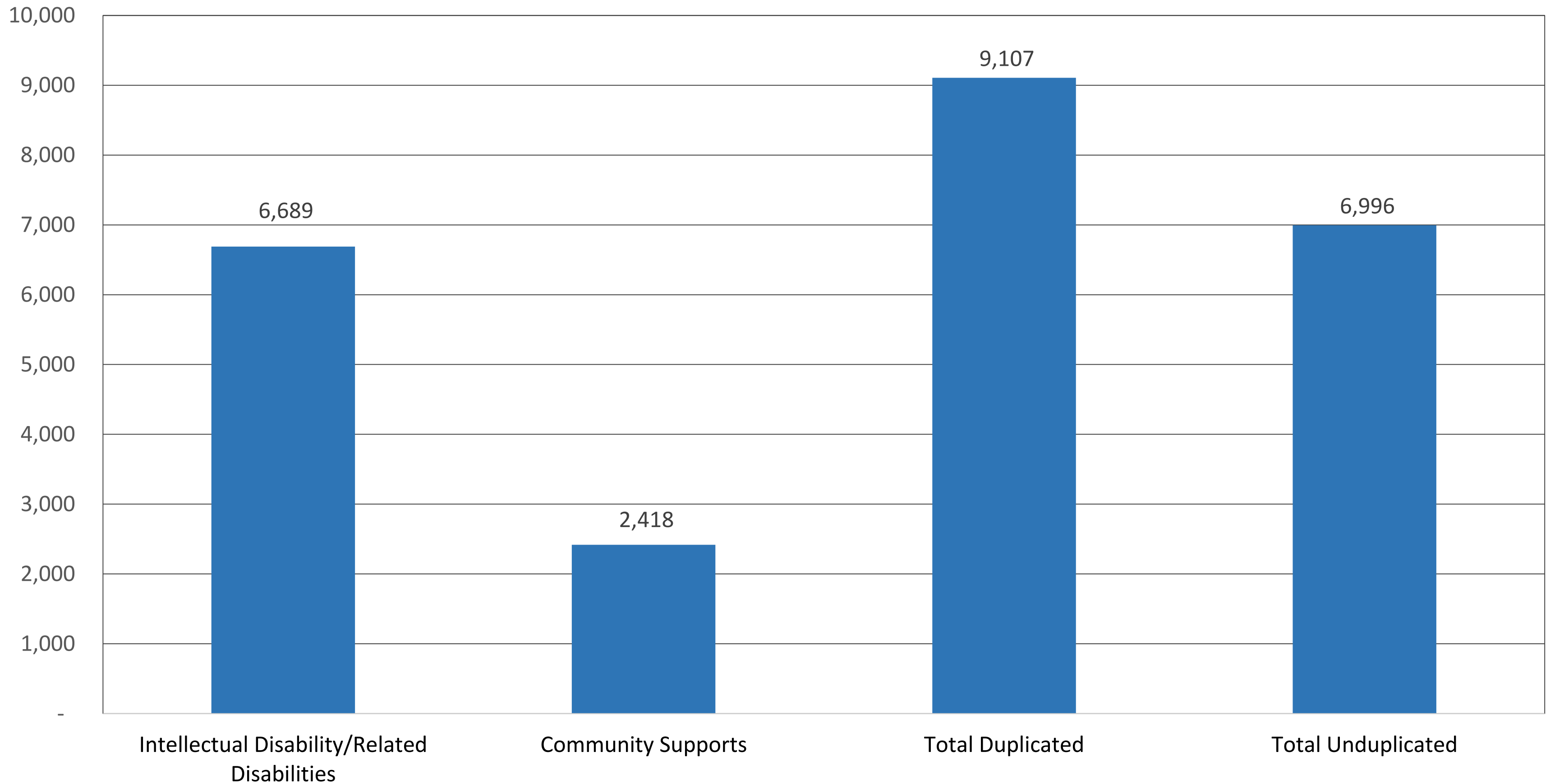
Head and Spinal Cord Injury Waiver Waiting List Individuals Added and Removed by Fiscal Year



*As of January 3, 2017

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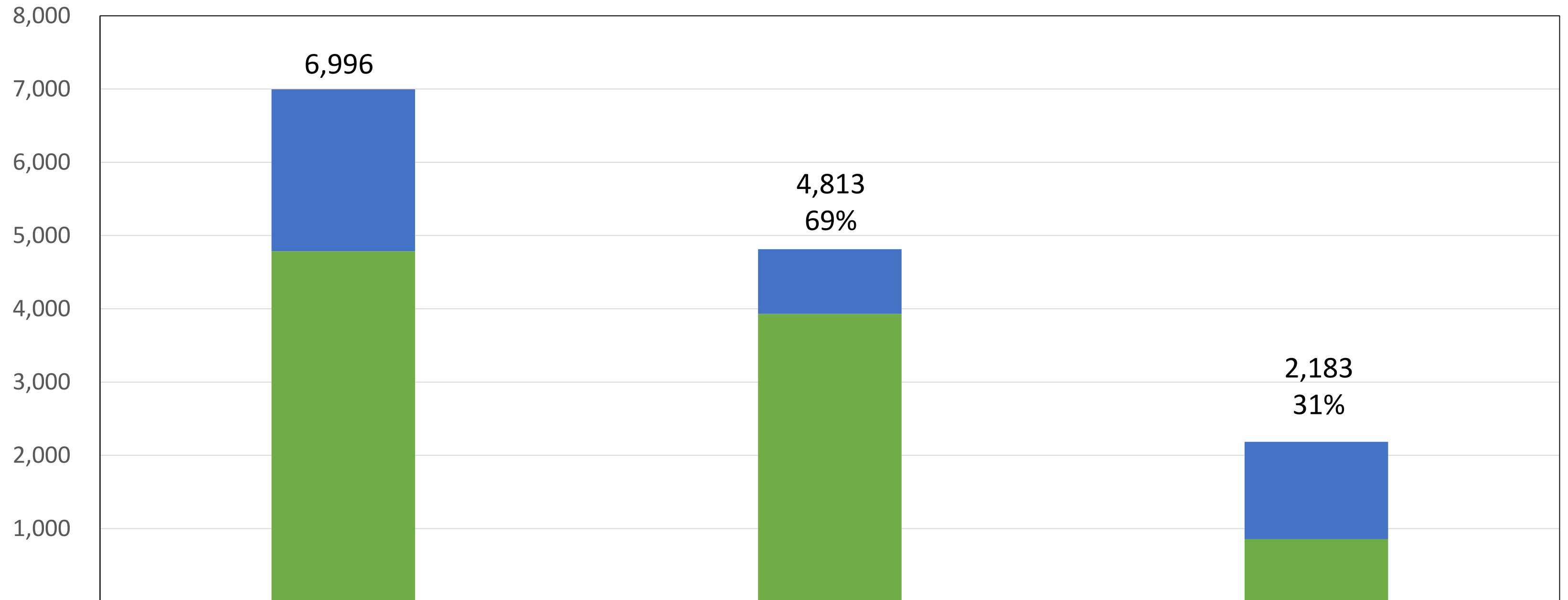
Intellectual Disability/Related Disabilities and Community Supports Waiver Waiting List Numbers



*As of 1/3/2017

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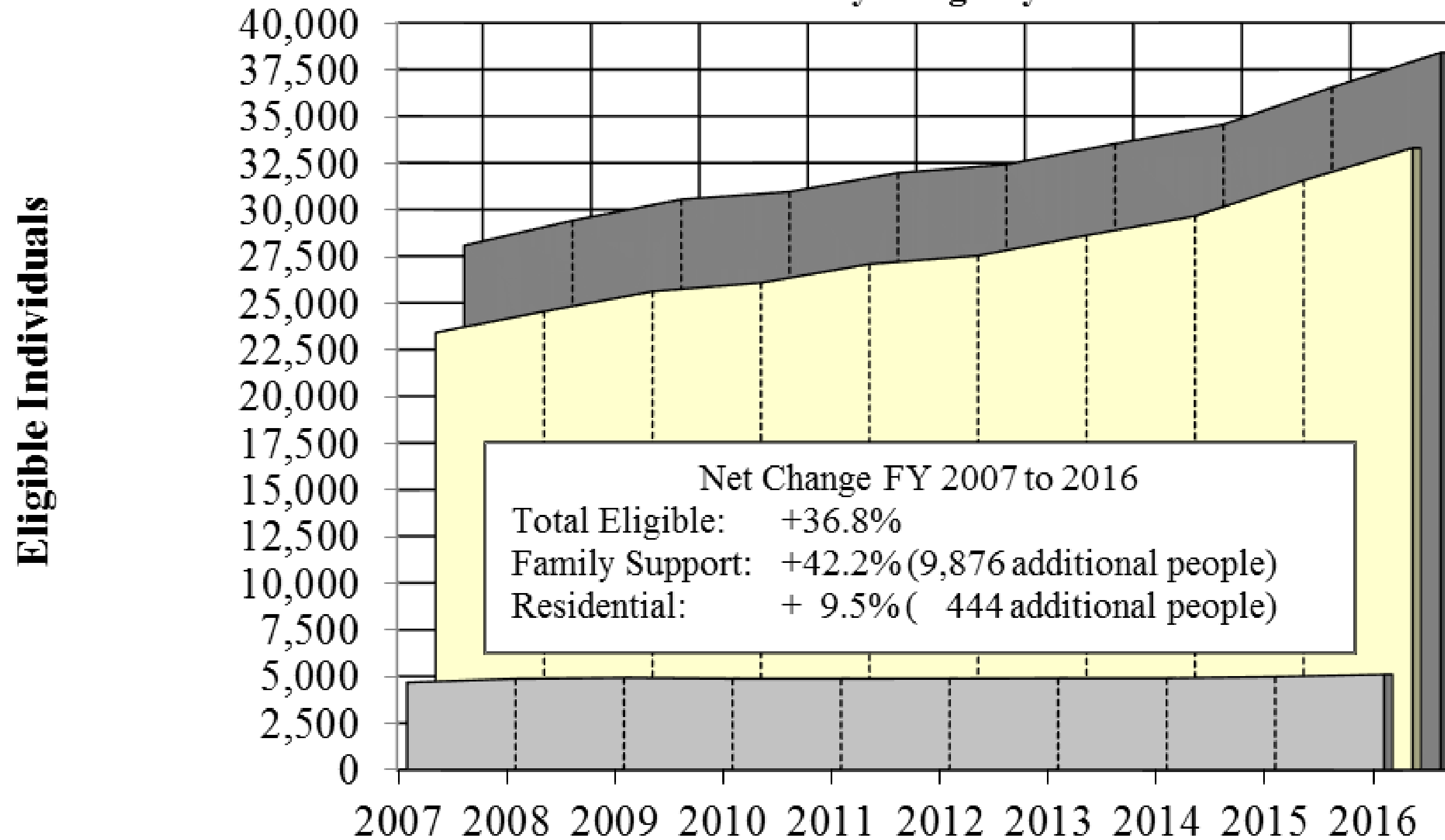
Additional Analysis of the Number of Individuals Waiting for DDSN Services



*These services may include: DDSN Family Support Funding, DDSN Family Arranged Respite Funding, and/or Medicaid Services such as prescriptions, personal care, nursing, incontinence supplies, dental, vision, medically necessary Durable Medical Equipment services, etc.

■ Under 21 Years of Age ■ Age 21 and older

South Carolina Department of Disabilities and Special Needs Summary of Agency Services

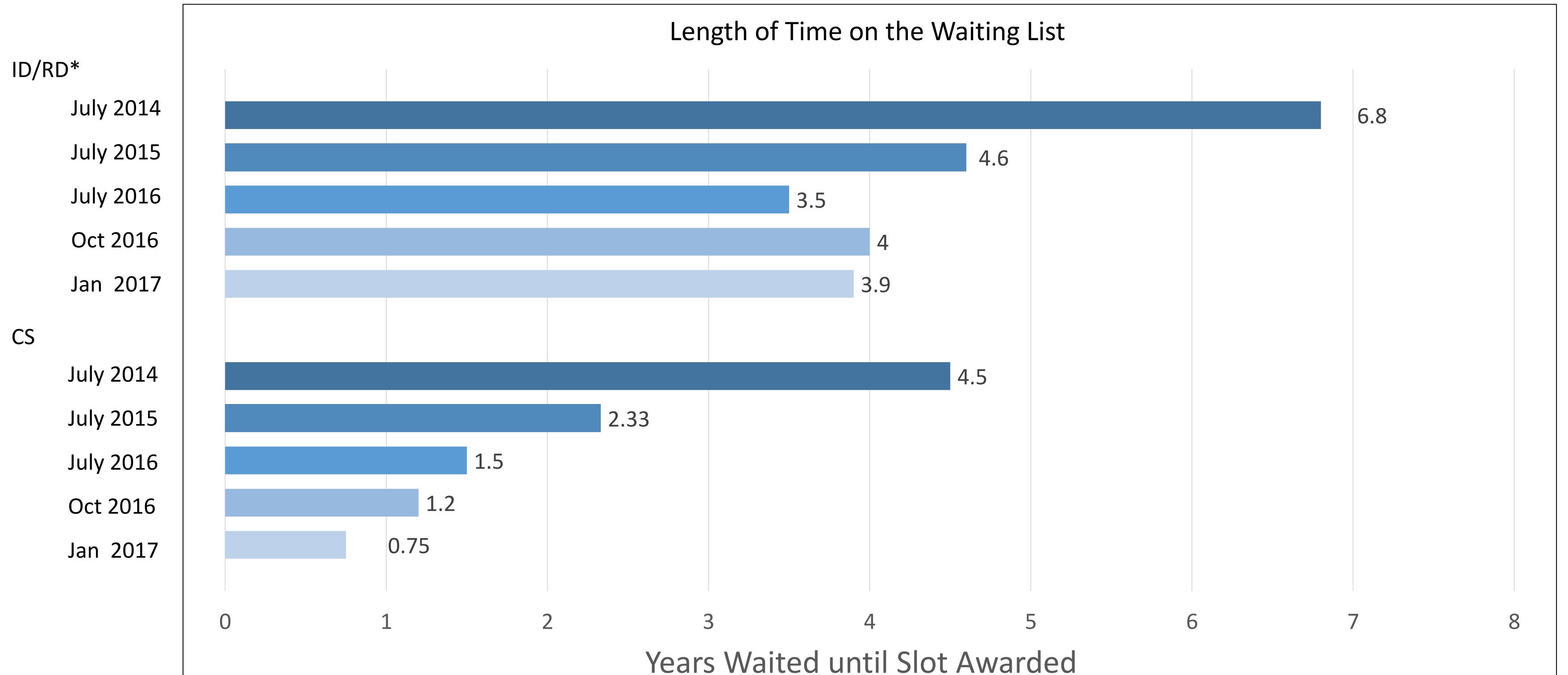


Summary of Agency Services



- Serving people with severe lifelong disabilities in their homes with family is best for the person, preferred by families and is the most cost-efficient service alternative for taxpayers.
- Of the approximately 39,000 individuals eligible or receiving DDSN services, 87% live at home with their families or in their own home.
- In the ten-year period shown, there has been a 42% growth in the use of cost-efficient family support services compared to only 9% growth in residential services, which are more expensive.
- DDSN policies reflect federal and state laws by supporting people in the least restrictive setting possible.

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*In May 2016, movement of the ID/RD Waiting List was limited to only individuals meeting Critical Needs Criteria. On December 5, 2016 attrition slots only were restarted.

ID/RD – Intellectual Disability/Related Disabilities Waiver
CS – Community Supports Waiver

*As of January 3, 2017



**Almost 12,000
individuals (11,833) have
been removed from
DDSN Waiting Lists since
the Reduction Effort
began!**



DDSN Budget Request Fiscal Year 2017-2018

In Priority Order

1. Safety and Quality of Care/Work Force Needs - \$10 M



- Workforce issues must be addressed in order to recruit and retain quality staff who provide essential 24/7 nursing and supervisory care of consumers.
- Direct care wages are no longer competitive. Providers have significant difficulties hiring and retaining staff. There are more vacant direct care professional positions than in previous years. This negatively affects service quality.
- Requesting \$9 M to bring the hiring wage to \$11.00 per hour.
- Significant wage compression of long term staff compared to newly hired staff. Difficult to maintain long term trained staff.
- Requesting \$1 M to address compression and retention of existing direct care professionals.

2. Increase and Improve Access to In-Home Individuals and Family Supports and Residential Supports by Moving the Waiting Lists - \$6.4 M



- Provide in home supports to an additional 950 individuals currently on the waiting list.
- Keeping families together is best for the individuals, their families and is the most cost effective option.
- The number of people requesting DDSN services continues to increase.
- Provide needed residential services to approximately 100 people currently living at home with caregivers who are over the age of 72.
- Allows the individual and families to transition to residential services proactively, not only when a crisis occurs.

3. Crisis Intervention and Stabilization for Individuals - \$3.8 M



- Develop regional crisis intervention services for one of five regions within the state. Crisis response team to provide supports necessary to keep people at home or in their current placement.
- Develop four beds for intensive short term crisis stabilization.
- Time limited inpatient specialized neuro-behavioral treatment for 3-4 individuals with a traumatic brain injury.
- Increase access to psychiatric supports for people living in the community.
- Develop 50 high management/forensic residential beds. Funds to increase the provider rate to serve this extremely difficult to serve population.

4. Transition of Individuals with Very Complex Needs from Institutional (Regional Centers) Settings to Less Restrictive Community Settings while Maintaining Quality of Care - \$1.2 M



- Agency is legally required to serve people in the least restrictive setting.
- This request supports the ability to continue to move people with very complex needs from regional centers to less restrictive community settings while maintaining quality of care.
- This request supports the movement of 28 people into the community from regional center settings.

5. Community ICF/IID Provider Rate Increase - \$1.5 M



- This setting serves individuals with very significant medical and behavioral needs.
- Request provides sufficient funding to providers of community residential ICF/IID (Intermediate Care Facility for Individuals with Intellectual Disability) services to cover actual cost of care.
- Ensures compliance with current federal regulations.

6. Strengthen Provider Support, Oversight and System Changes - \$1.65 M



- DDSN intake function has been decentralized bringing the entry point back to the local providers and increasing family satisfaction.
- Increase training opportunities for providers and families.
- Strengthen DDSN's oversight system to focus on quality outcome measures.

7. Assure Statewide Access to Genetic Services - \$500,000



- Maintain and expand statewide access to genetic services provided by Greenwood Genetic Center.
- Assure all babies identified to have a genetic metabolic disease through newborn screening will receive prompt curative treatment.
- Increase access to services for people with disabilities and genetic disorders in remote rural areas through tele-medicine.

8. Increase Access to Post-Acute Rehabilitation that is Specialized for Traumatic Brain or Spinal Cord Injuries - \$500,000



- Provision of time limited services immediately after injury reduces overall severity of the disability.
- Serves an additional 8 to 10 people who experience a traumatic brain or spinal cord injury who are not insured or are under insured.

9. Ensure Compliance with Federal Regulations - \$6.7 M



- New federal Final Rule requires supporting people in a more individualized way.
- Establishes job coach and job retention services to increase the number of individuals in integrated community based employment.
- Federal mandate for states to transition to a system in which case management is not performed by the same entity that provides direct services to the individual and eliminate conflict of interest.

Budget Actions Requested for FY 2017-2018



- Reduce \$20 M of authorization in Other Funds.
- Realign FY 2016-2017 base funds in the amount of \$2,432,455 state funds within existing programs.
- Allocate Statewide Employee Benefits contained in the FY 2016-2017 Appropriations Act.

Proviso 36.7 (DDSN: Unlicensed Medication Providers) – Explanation of Requested Changes



- DDSN is requesting amending proviso 36.7. The new language clarifies and strengthens current practice.
- The proposed language makes it clear which activities may or may not be performed. DDSN staff worked with DHEC licensing staff to understand the specifics of DHEC's practice.
- The activities included in the proviso are consistent with the manner in which DHEC operationalizes licensure of Community Residential Care Facilities.
- Proposed language also expands categories of licensed professionals who may conduct the training. This will help DDSN providers identify professional licensed trainers.



DDSN is not requesting new capital funds for FY 2017-2018.

DDSN is not requesting new FTEs for FY 2017-2018.



On behalf of the
individuals and families
we serve and our
provider partners,

THANK YOU!