

Planning List Report:

Multiyear Plan

Prepared by
Department of Behavioral Health and
Developmental Disabilities

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Table of Contents

Executive Summary.....	1
Purpose.....	3
Introduction to the Planning Lists.....	4
General Overview	5
Key Strategies	8
Conclusion	11
Appendices	12
A. Strategic Plan Goals and Objectives	
B. General Overview of Disability Services	
C. DBHDD Organization Charts	
D. NOW and COMP Waiver Services	
E. Current Issues with NOW and COMP Services	
F. 2016 Annual Mortality Report	
G. Planning List Redesign	
H. Addressing the Planning Lists through Other Programs and Services	
I. Six-Month Planning Lists Trend	
J. Service Impact to the Planning Lists	
K. Services' Relative Relationship Overview	
L. Family Support Services	
M. 2016 Autism Report	
N. Individuals with ASD Admitted to NOW and COMP Waivers FY16 and FY17	
O. Number of Children Admitted to NOW and COMP Waivers in FY2017	
References.....	13

Executive Summary

Georgia is the tenth fastest-growing state in the United States with an increase of over 732,000 people in the last seven years. Compounding this growth, the prevalence of developmental disabilities has increased by 17.1 percent during a twelve-year period, as reported by parents through a Centers for Disease Control and Prevention research project (Boyle et al., 2011). These factors may contribute to the increased demand for support for individuals with developmental disabilities, including waiver services.

As of December 2017, 8,555 individuals are on the planning lists waiting for New Options Waiver (NOW) or Comprehensive Waiver (COMP) program services in Georgia. From June 2014 to June 2017 the number on the planning lists increased by 1,551 individuals. This trend is expected to continue and the demand for services is expected to further increase. In response to this potential growth of the planning lists, the Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD) is committed to addressing the growing number of individuals on the planning lists with unmet needs by connecting them with available resources, as well as increasing the number of people who receive the NOW and COMP waivers.

In Georgia, it was estimated in fiscal year 2015 that there were 160,930 individuals with intellectual and developmental disabilities (Braddock et al., 2017). NOW and COMP waivers served 7.5 percent of the estimated population of individuals with intellectual and developmental disabilities in Georgia, while state-funded programs served approximately 2.5 percent. Combined, all programs served approximately 10 percent of the overall estimated population of individuals with intellectual and developmental disabilities in Georgia. To better respond to the anticipated growth of those seeking support on the planning lists, DBHDD proposes to provide the individuals with less significant needs on the planning lists early supports and connect them to available resources, with the goal of preventing circumstances that may require more significant support through a program like the NOW or COMP waiver.

The department's strategy for addressing this growing need is to:

- Improve its process and operational efficiency
- Increase the number of individuals entering the waiver services via the planning lists with a total of 3,500 new waiver participants over five years.
- Expand other nonwaiver programs and initiatives

By targeting these focus areas, DBHDD will:

- Optimize scalability
- Increase responsiveness to individuals' more significant needs by increasing the new waiver services offered to those on the planning lists

- Enhance stability by offering a robust selection of preventive services to meet individuals' immediate needs

Providing alternative support prior to the need for more comprehensive NOW or COMP waiver services is expected to reduce, postpone, or eliminate the needs for waiver funding. Each strategy identified by DBHDD plays a critical role in building a scalable and robust infrastructure to better meet the changing needs of the population with intellectual and developmental disabilities in Georgia. To further facilitate the anticipated changes, DBHDD will develop a user-friendly informational guide to assist families during the transition period and facilitate comprehensive training opportunities for DBHDD staff, with the goal of improving customer service. Subsequent to implementing infrastructure changes in preparation for a more comprehensive plan, the department has experienced a steady decrease in the planning lists count, as well as an increase in the number of individuals entering waiver program services. With this knowledge, the department continues its commitment to making necessary improvements.

The overall anticipated cost of this transformation is \$143,546,340 over the next five years, the department is committed to building a stronger bridge between the community and available resources. This plan will require operational improvement strategies, a workforce development plan, and overall program development funding. Continued engagement and commitment to strengthening the department's partnerships with other agencies, provider networks, and community organizations will contribute to the success of this effort. DBHDD will continue to work closely with internal and external stakeholders for ongoing feedback to develop programs that best serve individuals on the planning lists. The goals, strategies, and activities included in this plan acknowledge the role that nonwaiver services can play in supporting individuals currently on the waiver planning lists.

DBHDD is committed to making the necessary changes to respond to the evolving and growing needs of the community of persons with intellectual and developmental disabilities in Georgia and upholding its commitment to the DBHDD vision statement of "Easy access to high-quality care that leads to a life of recovery and independence for the people we serve."

Purpose

The Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD) was asked by the 2016 Georgia General Assembly to “develop and report to the Georgia General Assembly on a multiyear plan to reduce and eliminate the planning lists for New Options Waiver Program (NOW) and Comprehensive Supports Waiver Program (COMP) waivers with yearly outcome measures by December 31, 2017.”

DBHDD prepared the Multiyear Planning Lists Strategic Plan in response to this request. The strategic plan addresses the gap between individuals receiving a nonwaiver service while on the planning lists and those not receiving any services while on the planning lists. DBHDD established long-term goals and five-year objectives to connect all planning lists individuals who have an identified need for supports and have indicated the desire to use nonwaiver services (See Appendix A for the full strategic plan). This multiyear plan is expected to receive final review and approval in 2018, and the first objectives are scheduled for completion by June 30, 2019.

Introduction to the Planning Lists

Currently, the department manages a Short-Term Planning List (STPL) and a Long-Term Planning List (LTPL) for individuals who are waiting for the NOW Program or COMP Program. As of December 2017, the combined total of individuals waiting for services on these two lists is 8,555. Descriptions of how those most in need are determined, prioritization, and the anticipated changes are outlined in Key Strategy C.

Planning lists are for individuals with intellectual and developmental disabilities, who have:

-  Applied for DBHDD services
-  Undergone the intake and evaluation processes
-  Been determined pre-eligible for the NOW or COMP waiver programs

Current Planning Lists Prioritization

Currently, planning lists are managed as either short-term or long-term. While this format of prioritization will change based on the operations improvement plan (See Strategy C), current management and distinction is as follows, in the order of prioritization:

- STPL Immediate
- STPL Level 1
- STPL Level 2
- STPL Level 3
- LTPL

Examples of Who May Be Placed on the Planning Lists

Short-Term Planning List	Long-Term Planning List
Individuals who may be experiencing a gap in support	Individuals who may be planning for future needs
Individuals who may be experiencing a loss of a caregiver	Individuals who may not require immediate support

Key Characteristics of the Planning Lists

- Prioritization is based on most in need, not first come first serve
- Prioritization or the placement on the planning lists is fluid, not a stagnant process
- Prioritization is based on assessing individuals' current needs, not based on unknown future needs

General Overview

Planning Lists Overview

Prioritization is based on most in need, not first come, first served

Consideration for individuals most in need facilitates the prioritization of the planning lists. In determining those most in need, two key areas are reviewed:

- Health and safety
- Caregiver and support system

To further prioritize the lists, the department is in the process of implementing a new objective tool that captures individuals' status regarding the following:

- Level of unmet need
- Functional capacity and existing support system
- Impact of behavioral and medical challenges on functional capacity

This tool is designed to be updated as needs change, and individuals and families are encouraged to update the department as their needs change. This approach allows the department to manage the planning lists in a way that remains fluid to individuals' changing needs, ultimately facilitating the department's efforts to be more responsive to the individuals most in need.

Examples of individuals on the planning lists

STPL — An individual with an intellectual or developmental disability who has:

- Become homeless
- Medical or behavioral needs that will result in an out-of-home placement without support

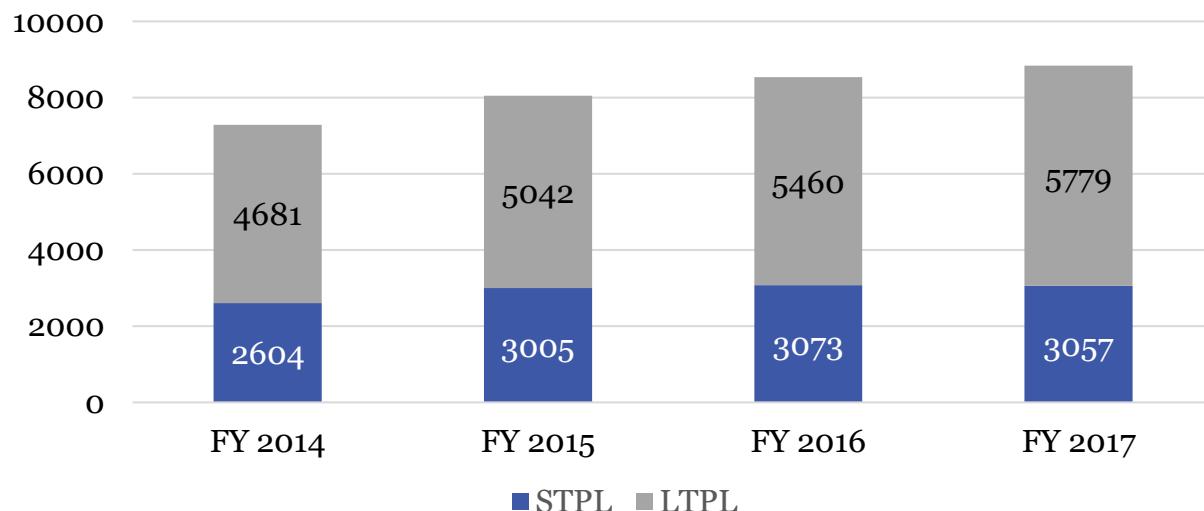
LTPL — An individual with an intellectual or developmental disability who:

- May need support in ten years when transitioning from the education system
- Is preparing for the anticipated loss or decline of a caregiver due to age

Trends of the Planning Lists

The number of individuals on the planning lists has steadily grown over time. From June 2014 to June 2017, DBHDD experienced an increase in the number of individuals on the planning lists by 1,551. Figure 1 depicts the total planning lists number by short-term and long-term planning lists in June of each fiscal year (FY).

Fig. 1. Annual Planning List Count (June of each FY)



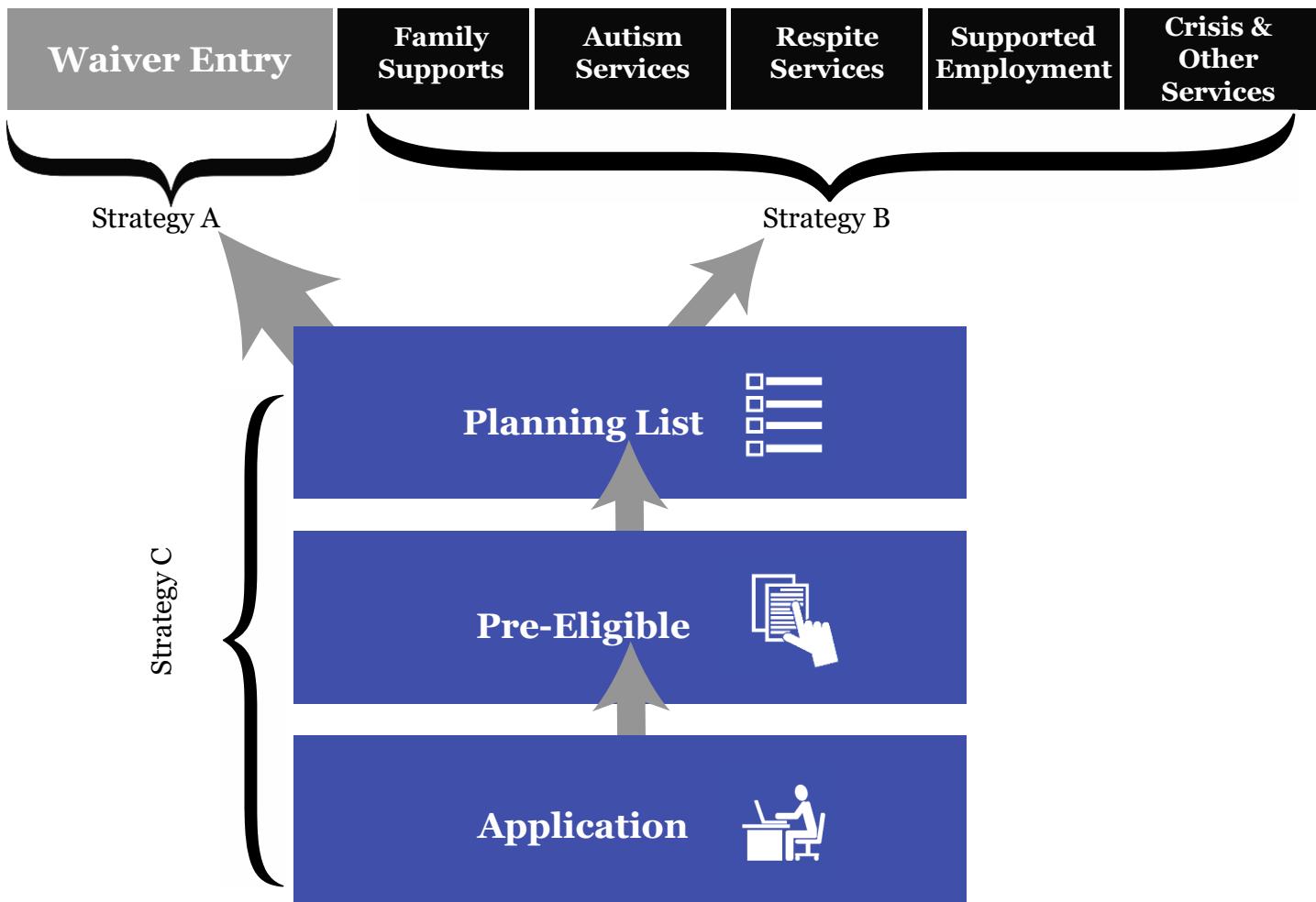
Population Overview



Strategies Overview

Figure 2 depicts the flow of application to admission and the factors that influence the size of the planning lists on any given day. This figure indicates how the three primary strategies will impact the number of people on the planning lists. The details of the strategies are provided in the subsequent sections.

Fig. 2. Key Strategies for Addressing the Planning Lists



Key Strategies

Strategy	Strategy Description	Key Activities
Strategy A	Increase the number of new waiver recipients via the planning lists by 3,500 over five years.	<ul style="list-style-type: none">• Increase number served capacity• Increase workforce capacity
Strategy B	Expand other nonwaiver programs and initiatives	<ul style="list-style-type: none">• Expand programs and services• Enhance provider capacity
Strategy C	Improve the planning lists processes and operations	<ul style="list-style-type: none">• Improve processes• Improve performance• Improve technology

The anticipated outcome of the strategies focuses on building an infrastructure that allows DBHDD to increase adaptability and scalability, and improve its operations. If the need and demand for services continue to grow, the necessary staffing and infrastructure must accommodate the change. DBHDD seeks to address this need by targeting three primary areas, in the following order of priority:

- Increase the number of new waiver recipients via the planning lists
- Expand other nonwaiver programs and initiatives
- Improve planning list processes and operations

Anticipated Cost Breakdown

Strategy A	\$126,968,342
Strategy B	\$16,577,998
Strategy C	\$ Cost neutral
Total	\$143,546,340

Key Strategy A: Increase the Number of New Waiver Recipients via the Planning Lists

Key Activities	Goals
Increase number served capacity	<ul style="list-style-type: none">• Increase the number of new NOW waiver recipients via the planning lists• Increase the number of new COMP waiver recipients via the planning lists
Increase workforce capacity to manage more planning list individuals preparing for service entry	<ul style="list-style-type: none">• Increase staffing for the clinical team to manage more clinical evaluations of those preparing for service entry

Additional funding is required to increase the number of individuals receiving the NOW or COMP waiver via the planning lists. Historically, the focus of funding has been targeted to support hospital transitions. While this is an area that continues to require financial support, additional funding will be necessary to respond to the growing needs in the community as the planning lists grow. For example, the following needs are anticipated:

- Funding increases
 - To support additional waiver recipients
 - For clinical positions to assess new individuals
 - For managing and strengthening initiatives
- Cost-neutral staffing achieved through improved efficiency and performance

Historical Funding

FY	NOW Planning List	COMP Planning List	COMP Hospital Transition	Total
2014	20	80	150	250
2015	20	80	150	250
2016	60	20		80
2017	120	80	150	350
2018	20	80	150	250

Key Strategy B: Expand other Nonwaiver Programs and Initiatives

Key Activities	Goals
Expand programs and services	<ul style="list-style-type: none">• Integrate Crisis Services• Expand Family Support Services• Refer to Medicaid Autism Benefits• Expand access to Respite Services• Expand access to Supported Employment
Increase provider capacity	<ul style="list-style-type: none">• Improve provider network development

By expanding these initiatives and goals, DBHDD will be able to:

- Capture individuals' potential eligibility for other available services
- Collect data and manage referrals
- Improve individuals' access to available services
- Narrow the gap between individuals and their unmet needs
- Provide early support to minimize or remove the need to be on a planning list

Key Strategy C: Improve Planning List Processes and Operations

Key Activities	Goals
Improve processes	<ul style="list-style-type: none">• Minimize redundant or noncritical assessments• Streamline processes and operations• Create statewide prioritization and assessments
Improve performance	<ul style="list-style-type: none">• Provide focused caseload management• Improve customer service• Conduct statewide oversight
Improve technology	<ul style="list-style-type: none">• Provide telephonic case management• Track work queue and status• Prepare predictive analysis for timeline

Changes in the process of managing the planning lists are already producing tangible results, such as improved customer service, uniform determination of needs, a reduction in the number of individuals on the planning lists, and an increase in the number of individuals receiving waiver services.

As the implementation of the redesign continues, additional benefits will be realized by:

- Reducing the time it takes to begin services once eligibility is determined

- Increasing the number of individuals in the NOW and COMP waivers
- Increasing responsiveness to the needs of the individuals with developmental disabilities
- Increasing referrals to suitable resources

Conclusion

This report highlights the changes that DBHDD is and will be undertaking to shorten the planning lists and serve more individuals with intellectual and developmental disabilities in the community by using three approaches: increased funding for the number of waiver participants, a redesign of the planning lists for waiver services and improving access to nonwaiver services for those on the planning lists. The total projected cost for the planned reduction of the planning list is \$143,546,340, with \$126,968,342 requested for 3,500 slots for new waiver participants over the next five years.

The purpose of the planning list redesign is to encourage efficiency through centralization of the Division of Developmental Disabilities' functions; strive for consistency and quality assurance through standardized processes and tools; and improve responsiveness and customer service. Implementing these strategies to support individuals with intellectual and developmental disabilities will require increased funding to provide additional waiver allocations as well as workforce development to implement these strategies.

DBHDD is committed to reducing the current gap between the needs of individuals with intellectual and developmental disabilities in Georgia and the current system of supports. The demand for support is expected to grow based on the increase in population and increase in prevalence of intellectual and developmental disabilities. Though the department cannot control the number of people requesting support, the department will meet this increased need by improving performance and providing early support through services such as Family Support Services, the Medicaid Autism Benefit, Vocational Rehabilitation, Respite Services, and Crisis Services. The projected cost for the enhanced supports is \$16,577,998.

This early and matched support will serve a preventive role and delay the need for more extensive services. All services are designed to encourage and build upon existing social networks and natural sources of support, promote inclusion in the community, and enhance safety in the home environment. Through partnerships with other public agencies in Georgia, provider networks, individuals and families, and advocacy groups, DBHDD is committed to providing expedient and appropriate services with the goal of helping individuals attain independence and lead meaningful and fulfilling lives.

Over the next five years, DBHDD will continue to:

- Research innovative ways to better serve individuals on the planning lists

- Explore opportunities to prudently leverage all available resources to provide appropriate supports
- Implement tools and processes to improve efficiency, consistency, and quality
- Track and manage the defined goals, objectives, and targeted outcomes

Appendices

The following items are either referenced in the report or in an appendix, or are included to provide more in-depth information.

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