

Proposed DDS Service Center Model

Q and A

What's a DD Service Center?

- A one-stop organization that serves every person with a developmental disability that resides in the community/county/area in which the Service Center is located.
- All DD related services are provided by the Service Center through its employees or contractors. Non DD related services such as prescription drugs, medical care, mental health care, etc. would continue to be provided by other Medicaid providers.
- The nature of the organizational entity and the geographic scope would have to be defined.
- Well care services such as smoking cessation, diabetes control, and weight control would be addressed.

What would DD services look like in a Service Center model?

- Consumer presents themselves to DD Service Center provider.
- Provider uses universal assessment tool to determine individual needs.
- Provider/Consumer begins interdisciplinary Person Centered Planning process.
- A single prescription would be processed
- Consumer begins receiving services.
- Assessment and Person Centered Plan completed annually or more frequently if conditions/needs change.
- Care Coordination services provided to all consumers.
- An integrated standards and licensure process would allow DDS to provide oversight.

What services would a DD Service Center be required to provide?

- Core DD services are identified for provision by DD Service Center providers. Services may be provided by DD Service Center employees or contracted entities/employees. An organization must be prepared to provide all core services in order to be a DD Service Center. An organization that chooses to provide some, but not all services, may contract with a DD Service Center provider in order to remain a provider of services. Suggested core services are:
 - All current HCBS Waiver services,
 - DDTCS Pre-School Services and accompanying therapies (Phase II),
 - DDTCS Adult Development Services
 - The current services options would be modified w/ respect to staffing and services criteria.

How will a DD Service Center deal with cases in which the service needs are too challenging for the Service Center to provide?

- DD Service Center organizations may contract with specialty providers (HDCs, Pediatric ICFs, etc.) to provide clients specialized services when necessary.

What is a Universal Assessment and how will it be used?

- A tool that will provide valuable information to interdisciplinary teams for individual plan development.
- Can be completed by QDDPs at the DD Service Center organizations.
- Can possibly place consumers into payment/expenditure categories.
- Can possibly be used to set rates based on categories with adjustments for geographical elements and case mix.
- Can possibly be used to set service limits.
- Would likely need a separate assessment and categorization/rate setting methodology for pre-school children.

What would be the role of the Care Coordinator?

- Ensure the assessments and Person Centered Plans are completed timely.
- Coordinate any care provided, including non-DD care such as primary health care, episodic health care, chronic disease care.
- Function as the primary liaison between the consumer, the DD provider staff, and the Primary Care Physician (when necessary).
- Maintain the electronic records.

How will services provided by a DD Service Center be funded?

- The total of state and federal funds (including Medicaid) expended on services identified as DD Service Center services is aggregated into one amount.
- The aggregate funding is allocated to Service Center organizations based on a formula that takes into account the number of residents in the area that require services.

Challenges:

- Do we divide the state into regions/areas or let providers continue to serve whoever chooses their services?
- We need to fight hard to ensure that the services provided in the DDTCS centers (Pre-School, Adult Development) retain their entitlement status.
- Provider organizations will have to form working relationships with primary care providers, mental health providers, and/or provider organizations that provide services that the Service Center does not provide.
- Provider organizations would need to decide if they are going to be a standalone DD Service Center, or will they become an associate/partner (perhaps through contractual arrangements) with one or more provider organizations to provide a portion of Service Center services?
 - Providers who specialize in only one area (Adult Day Program, Pre-School, etc.) may choose to become a contractor for a larger provider organization that is becoming a Service Center.
- Initial rate setting, including geographical adjustments and case mix adjustments, along with service limits will be most challenging.
- How do the HDC's, 10-Beds and Pediatric ICFs fit into this model?
- How do we deal with the current DDS Waiver waiting list?
- How do we deal with setting rates for current and future waiver providers?
- We may not have the resources to cover all of the individuals who might desire waiver like services.
- The funding for care coordination, assessment, and electronic health records must be secured.
- Providers will have to make allocation decisions in the event sufficient funding is not available to provide all of the services the assessment instrument indicates individuals require.

