



Maryland Developmental Disabilities Council

TO: Developmental Disabilities Administration, DHMH
FROM: Maryland Developmental Disabilities Council
RE: Recommendations regarding Community Pathways Service Definitions
DATE: May 22, 2017

EMPLOYMENT & DAY SERVICES

EMPLOYMENT SERVICES

Recommendation: Add language to clarify the definition of On-going Job Supports to include supports needed to complete job tasks (e.g. setting up work station; taking notes, etc.) so it is clear these job supports are not personal care only and differ in scope and duration from personal care services provided through Community First Choice (CFC).

Recommendation: Add language to Section N. 1 under Service Requirements to clarify: Employment Services does not include volunteering ***or internships***, unless part of the discovery process and time limited.

Recommendation: Add the following language to Section R to clarify what is meant by DORS service must be “accessed first:” ***if the service the individual needs is provided and available by DORS and funding is authorized.***

Recommendation: Reimbursement for Job Development services should not be based solely on one milestone payment for getting a job. Setting a payment structure that only pays upon placement in a job provides a disincentive for providers and/or job developers to work with someone with more significant supports needs for whom getting a job may take longer.

Recommendation: Add language to clarify the frequency of Job Development services to once per year, ***unless otherwise authorized by the DDA.*** A similar allowance was provided for discovery services and ensures flexibility to meet each person’s needs.

Recommendation: Revise the requirements for staff to allow demonstrated competencies associated with the outcomes for each service instead of requiring certain certificates.

TRANSITIONAL EMPLOYMENT

Recommendation: Add language to allow more than 40 hours per week of Small and Large group employment ***if customary and typical for that specific job.***

COMMUNITY DEVELOPMENT SERVICES

See related recommendations below related to Home Supports.

SUPPORT SERVICES

COMMUNITY DEVELOPMENT SERVICES AND HOME SUPPORTS

Recommendation: Re-combine community integration & engagement supports with home supports as it was in the previous iteration called Community Personal Supports and raise the hour limit. This will provide greater flexibility and ensure CDS is not just considered a day service. Combining the two will also help when activities occurring in the home are actually designed to prepare and support the individual's engagement in the community rather than focused on home the development of home skills. We recommend re-instating this language: *Community integration and engagement skills development needed to be part of a community such as using public transportation, making and keeping medical appointments, attending social events, joining community organizations or clubs, any form of recreation or leisure activity, volunteering, and participating in organized worship or spiritual activities.*

Home Supports are defined as assisting individuals who live in their own homes in "acquiring the skills" necessary to maximize their personal independence. Some individuals cannot develop certain skills like cooking and cleaning because of their disability, but instead need someone to do those tasks for them. Their options should not be limited to Supported Living, which is provider managed and likely more costly. Home Supports that are different than state plan services should be permitted. **Recommendation:** Expand the service definition to not limit it to "skill development" if someone's person-centered plan documents that the individual cannot gain this skill. By doing so, Home Supports will differ in scope from personal care through CFC.

Recommendation: Instead of limiting these services to a certain number of hours a day or week, allow a certain number of hours per year to be used as an individual needs and wants.

Recommendation: Maintain ratio requirements of no more than 4:1 for Community Development Services to ensure person-centered activities and real community involvement.

TRANSPORTATION

Recommendation: Raise the \$1400 cap on transportation services. Transportation services are expensive and essential. A little more than \$100/month is insufficient. For many people without access to mass transit or paratransit, this would amount to barely one trip, if that. In addition, a higher transportation amount is necessary to ensure DDA's Employment First priority and expectations of meaningful days for everyone.

RESIDENTIAL

SUPPORTED LIVING

Recommendation: Add language to Section A. 4 to clarify: Services may include up to 24 hours of support *per day*, including a combination of habilitation and/or personal supports as specified in the person centered plan.

SELF-DIRECTED SERVICES

INDIVIDUAL DIRECTED GOODS AND SERVICES

Recommendation: Add highlighted text to Service Definition, A. 2. **Maintain or** increase independence.

Recommendation: Clarify what is meant by “the service is available from any source” in this service requirement: H. The goods and services provided are cost-effective (i.e., the service is available from any source, is least costly to the State, and reasonably meets the identified need) alternatives to standard waiver or State Plan services.

Recommendation: Allow coverage of service dogs with restrictions to ensure certification.

Recommendation: Add highlighted text: Individual Directed Goods and Services are limited to \$2,000 per year from the total self-directed budget, **unless pre- authorized by DDA.**

SUPPORT BROKERAGE

Recommendation: If allowable by CMS, we recommend adding the highlighted text under Service Requirements for clarification given that most families provide what could be considered unpaid services and support: E. Individuals and organizations providing Support Brokerage services may provide no other **paid** service to that individual.

IMPLEMENTATION & TRANSITION

While the proposed changes regarding the utilization of state plan services such as Community First Choice and EPSDT may be necessary to comply with CMS requirement, the transition must be well-planned and coordinated and allow adequate time to minimize disruption in people’s lives. Individuals and their families who currently receive waiver services should not lose any support they need through the transition. Waiver services are meant to wrap around state plan services.

As such, the DD Council recommends:

- Continuously monitor the transition to identify service gaps and challenges related to coordinating the use of CFC/EPSDT and waiver services, including any loss of vital services.
- Continuously monitor and respond to communication and training needs. Develop ongoing communication using varied strategies for individual, families, providers, CCS agencies and DDA staff to maximize understanding about the changes and consistent implementation. This should start well before the transition begins so people can understand and prepare for any changes that will personally impact them.
- Identify and train specific staff in each regional office to be responsible for monitor the transition and ensure quick and accurate responsiveness to issues that arise and inquiries.

Thank you for the opportunity to provide feedback.