



DEVELOPMENTAL DISABILITIES SECTION ANNUAL REPORT *STATE FISCAL YEAR 2019*

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The Wyoming Department of Health, Developmental Disabilities Section (Section) is pleased to share this annual report on the Comprehensive and Supports Waivers for State Fiscal Year (SFY) 2019, which features a review of the efforts that the Section has undertaken in the past year. We encourage people who receive services, family members, agency partners, legislators, and other members of the community to take a moment to read our annual report.

SECTION MISSION

The Developmental Disabilities Section (Section) administers programs to facilitate community-based services for people with developmental and intellectual disabilities, and acquired brain injuries. We coordinate technical assistance and education for providers and case managers that promote the delivery of quality services for participants to experience lives that they choose.

DEPARTMENT OF HEALTH AND DD SECTION STRUCTURE

The Department of Health is the Medicaid State Agency that has the administrative authority to administer the Home and Community Based Waivers. The Developmental Disabilities Section was relocated under the Division of Healthcare Financing, a division of the Department, on August 16, 2016.

Figure 1
Department of Health Simple Organizational Chart

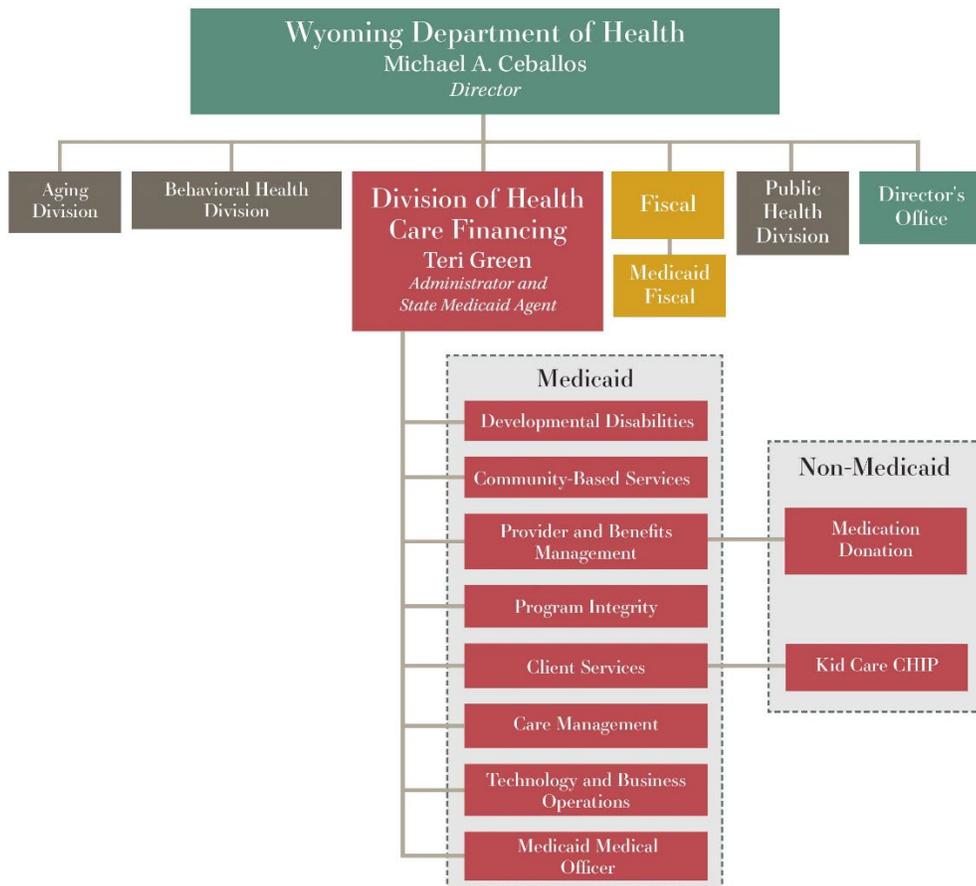
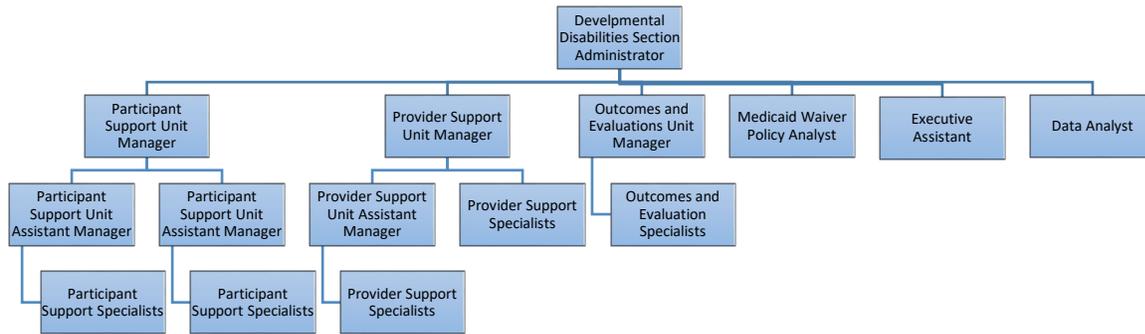


Figure 2
Developmental Disabilities Section Organizational Chart



SECTION AT A GLANCE

The Section is responsible for planning, coordinating, administering, monitoring, and evaluating state and federally funded Home and Community Based (HCB) services for people with intellectual and developmental disabilities (IDD) and acquired brain injuries (ABI). The Section administers the Comprehensive and Supports Waiver programs, offers technical assistance and training, assures program monitoring and standards compliance, and implements continuous quality improvement strategies.

Participant Support Unit

The Participant Support Unit is comprised of eleven (11) full time employees who are responsible for assuring that waiver participants have current and complete plans of care and that participants are funded according to Section policy. This Unit is also responsible for determining initial and continuing eligibility for waiver services, providing technical assistance to case managers in developing plans of care, and facilitating access to HCB services to waiver participants in emergency situations.

Provider Support Unit

The Provider Support Unit is comprised of nine (9) full time employees who are responsible for assuring that providers of waiver services comply with Medicaid Rules. This Unit is also responsible for certifying and recertifying providers, reviewing and responding to complaints, and managing critical incidents.

COMPREHENSIVE AND SUPPORTS HOME AND COMMUNITY-BASED WAIVERS

The Comprehensive and Supports Waivers (DD Waivers) are offered through the Centers for Medicare and Medicaid Services (CMS) Home and Community Based Waiver Program under Section 1915(c) of the Social Security Act. Under the Act, states can develop HCB services to meet the needs of people who prefer to get long-term care services and supports in their homes and communities as

opposed to an institutional setting. According to Medicaid.gov, nearly one million individuals are receiving HCB services nationwide.

In order for Wyoming to offer services through the DD Waivers, the State must demonstrate the following:

- The cost of providing waiver services does not exceed the cost of providing services in an institution;
- Participant health and welfare is protected;
- Adequate and reasonable provider standards to meet the needs of participants are implemented, and;
- Services follow an individualized and person-centered plan of care.

The DD Waivers represent Wyoming's commitment to funding services so eligible participants with IDD ages birth through the lifespan, and eligible participants with an ABI ages 22 and older, can actively participate in the community, be competitively employed, and live as independently as possible according to their own choices and preferences. The DD Waivers require a person-centered approach to determining the needs of participants, which are specifically outlined in an individualized plan of care (IPC).

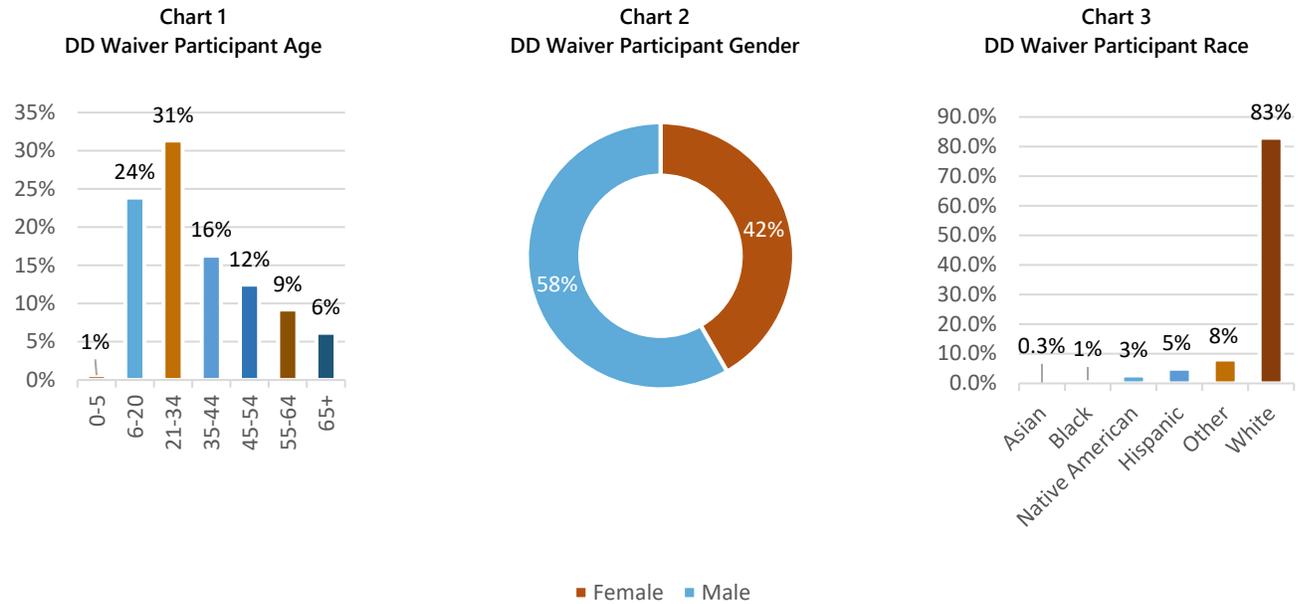
Services funded through the DD Waivers support participants to develop and change their service plans, provide resources and training to assist participants, families, and providers in learning the service system, and, through self-direction, give participants the ability to hire, terminate, and train their own staff. On the Supports Waiver, participants have a capitated budget amount that they use to purchase services from providers. The Comprehensive Waiver offers expanded supports, such as 24-hour services. Each participant on the Comprehensive Waiver receives an individual budget amount (IBA) based on their assessed level of need.

PEOPLE SERVED

Before qualifying for DD Waiver services, an individual must meet specific residency, financial, and level of care eligibility criteria. Although the DD Waivers support people of all ages with an IDD or ABI, individuals with an IDD must also meet the institutional level of care for an intermediate care facility for individuals with IDD. Individuals with an ABI must meet the institutional level of care for a nursing facility.

Demographics

The charts below outline the demographics of waiver participants.



Working and Living in the Community

Living and employment situations vary, and are summarized in the following charts.

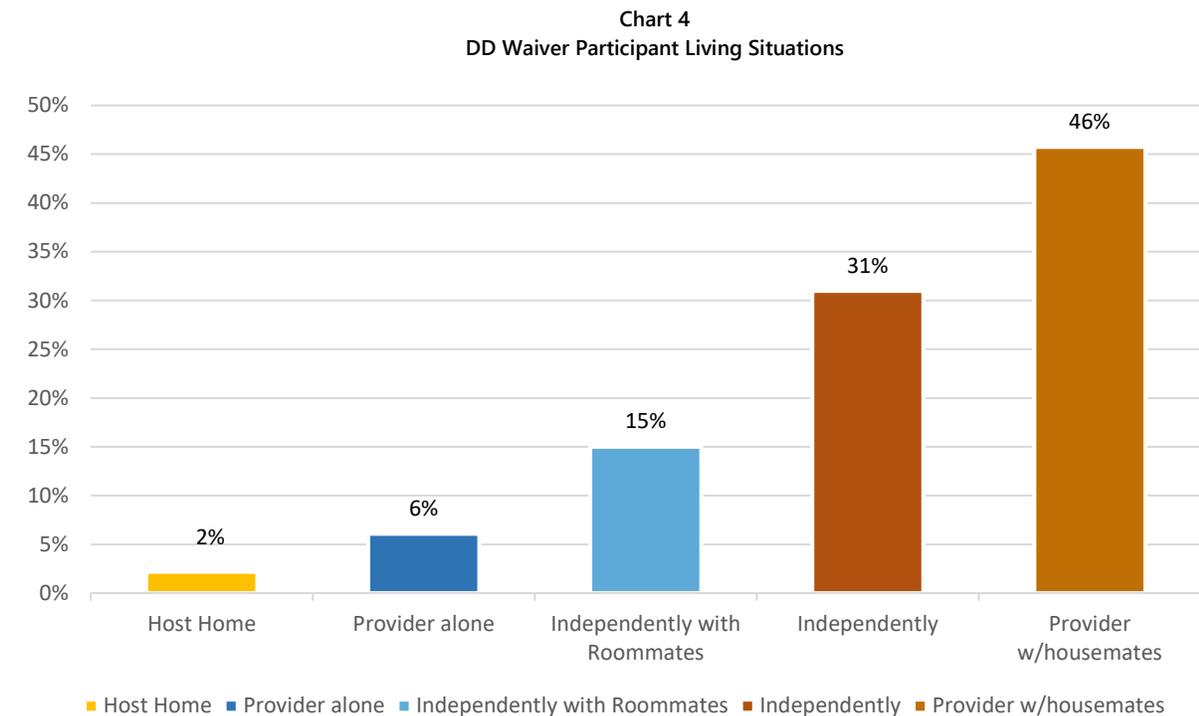
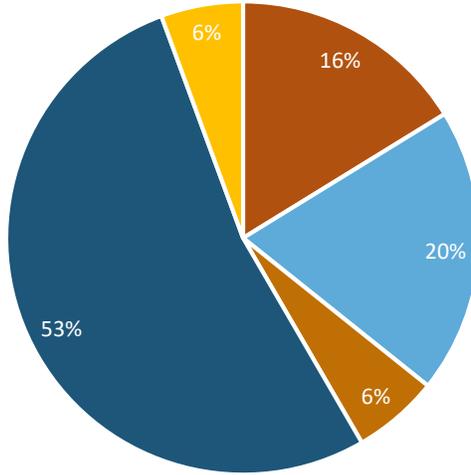


Chart 5
DD Waiver Participant Employment Situations



■ Competitively
 ■ Supported
 ■ Unemployed
 ■ Not seeking employment
 ■ Has not explored, but is interested

Waiver Participation

The number of participants served on DD Waivers has, on average, increased over the last five years. In SFY2019, 2,494 participants received DD Waiver services.

Chart 6
Participants Served on the DD Waiver
SFY2019

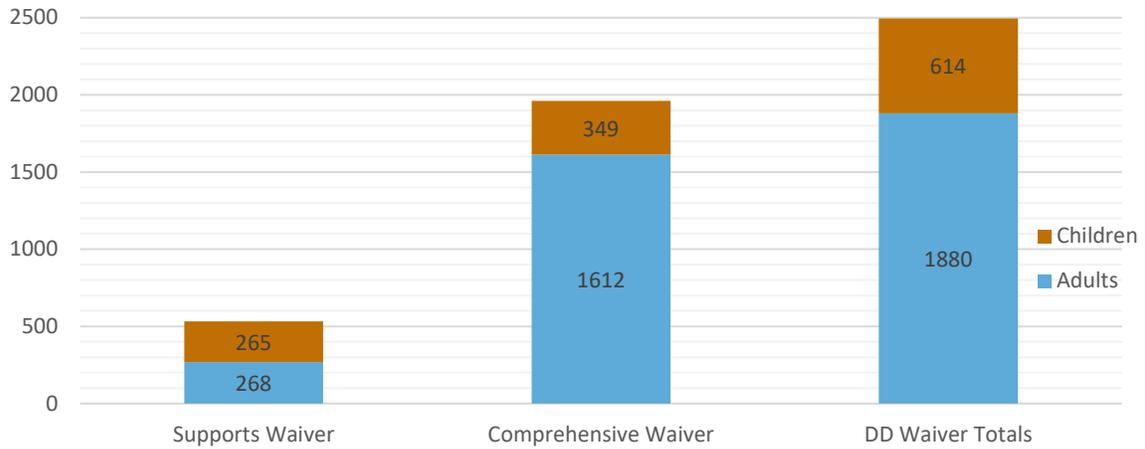
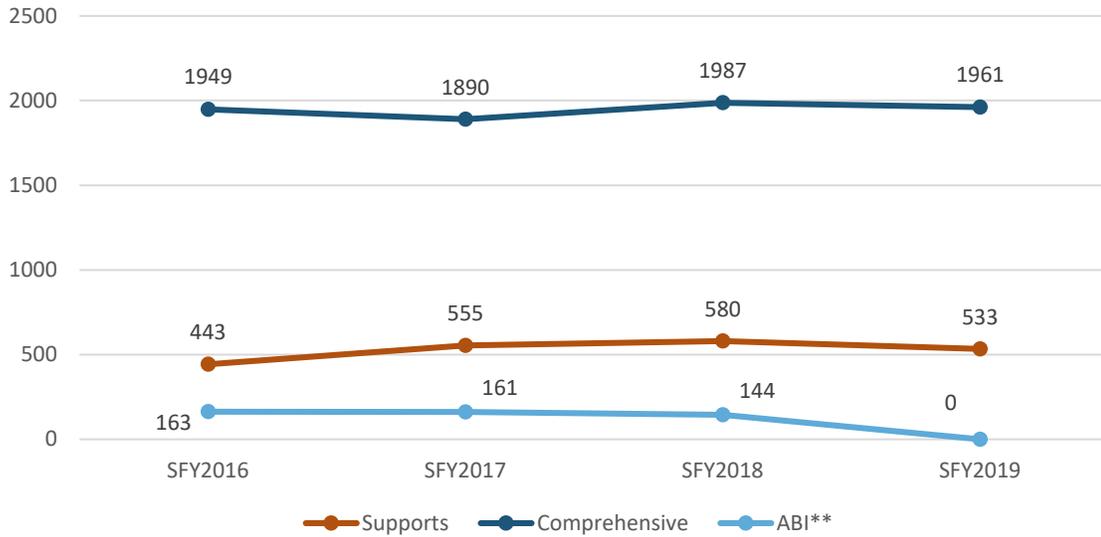


Chart 7
Participants Served on DD Waivers
SFYs 2016 – 2019



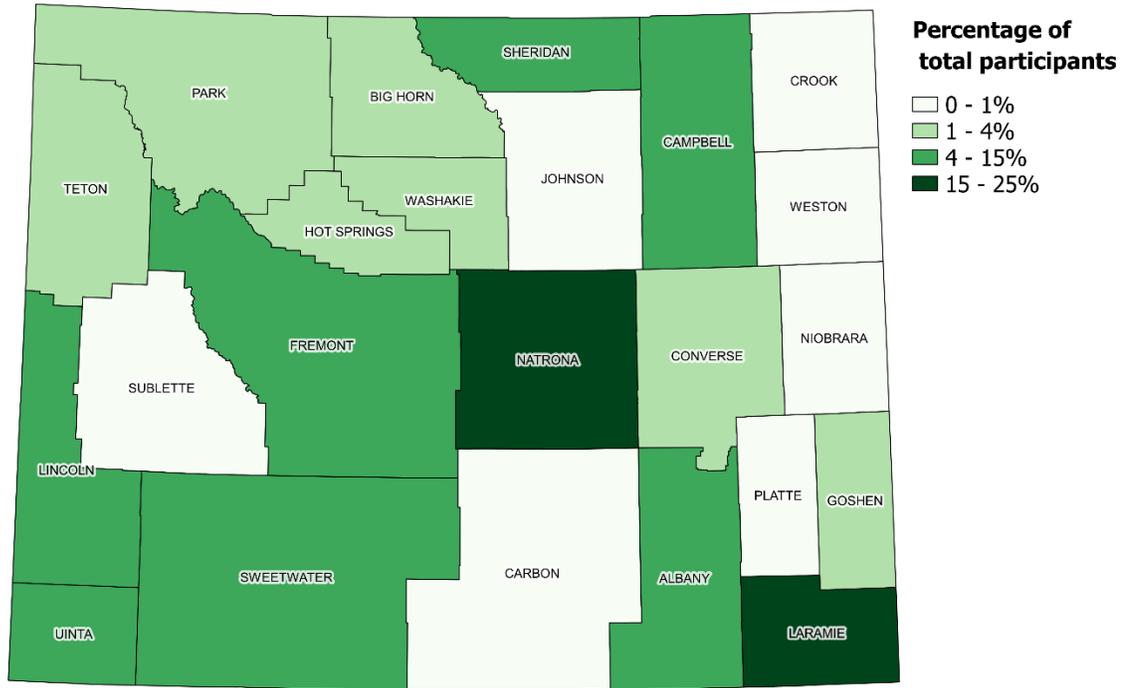
** The ABI Waiver was discontinued on April 1, 2018

Participants reside and receive services in all 23 Wyoming counties. Many areas of Wyoming are considered to be rural or frontier, which can make service providers more difficult to find. Self-directed services are an option on the DD Waivers, and allow participants or their legally authorized representatives to act as the employer of record so they can recruit and hire their own employees.

Table 1
Number of Participants Served on DD Waivers by County
SFY2019

County	Number of Participants	County	Number of Participants
Albany	155	Natrona	438
Big Horn	32	Niobrara	Fewer than 5
Campbell	123	Park	120
Carbon	12	Platte	17
Converse	40	Sheridan	162
Crook	14	Sublette	10
Fremont	205	Sweetwater	175
Goshen	55	Teton	51
Hot Springs	40	Uinta	145
Johnson	19	Washakie	37
Laramie	516	Weston	18
Lincoln	83		

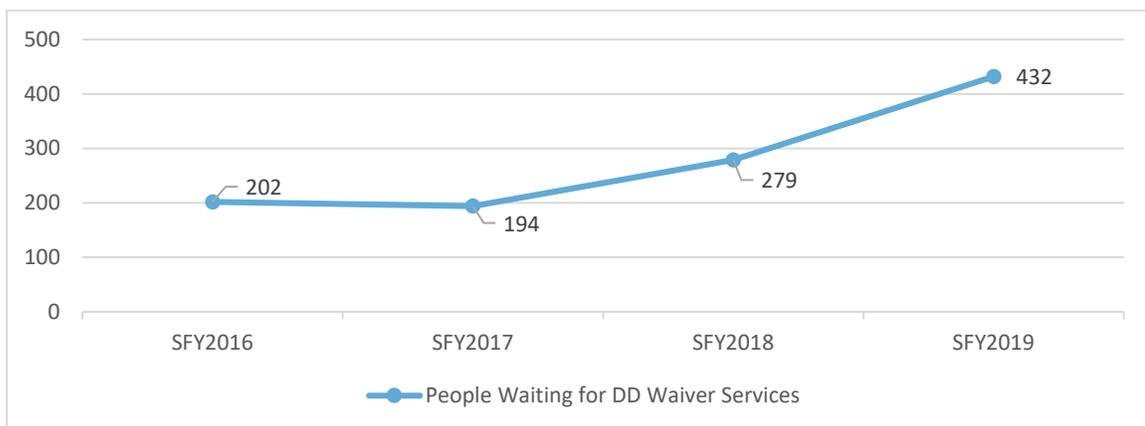
Figure 3
Percentage of Participants Served on the DD Waivers by County
SFY2019



Waiting for Services

Once an individual is determined eligible for waiver services, they are placed on a waiting list until a funding opportunity becomes available. People are funded off of the waiting list on a first come, first served basis. As of June 30, 2019, there were 432 individuals waiting to receive DD Waiver services.

Chart 8
Number of Individuals Waiting for DD Waiver Services
SFYs 2016 – 2019



BUDGETS AND EXPENDITURES

Funding for the DD Waivers is appropriated by the Wyoming Legislature. Pursuant to Wyoming Statute 42-4-120(g), the State must rebase provider service rates for the DD Waiver programs every two to four years. The current rate methodology, which increased the DD waiver budget by 10% and projected expenditures by 11.5%, was implemented on July 1, 2018. Individual participant budgets were also increased to account for the increase in service rates.

Waiver participants receive funding for specific waiver services, as well as Medicaid State Plan benefits such as physician, hospital, and prescription drug services. Information on expenditures related to waiver services and Medicaid benefits can be found in the following graphic.

Chart 9
Legislative Appropriations
Biennial Fiscal Years 2017 – 2018 and 2019 – 2020



Table 2
DD Waiver Expenditures
SFYs 2016 – 2019

Waiver Expenditures	SFY2016	SFY2017	SFY2018	SFY2019*
ABI	\$6,748,171	\$6,960,893	\$4,948,202	\$0
Comprehensive	\$88,377,607	\$88,527,446	\$94,568,471	\$112,591,876
Supports	\$2,780,450	\$4,378,255	\$5,795,651	\$6,483,153
Grand Total	\$97,906,228	\$99,866,594	\$105,312,324	\$119,075,030

Medical Expenditures	SFY2016	SFY2017	SFY2018	SFY2019*
ABI	\$1,470,018	\$1,211,223	\$575,512	\$0
Comprehensive	\$25,986,468	\$21,106,234	\$15,405,710	\$12,742,387
Supports	\$2,371,351	\$3,476,854	\$3,795,863	\$3,373,890
Grand Total	\$29,827,837	\$25,794,311	\$19,777,085	\$16,116,277

Total Expenditures	SFY2016	SFY2017	SFY2018	SFY2019*
ABI	\$8,218,189	\$8,172,116	\$5,523,714	\$0
Comprehensive	\$114,364,075	\$109,633,680	\$109,974,181	\$125,334,263
Supports	\$5,151,801	\$7,855,109	\$9,591,514	\$9,857,043
Grand Total	\$127,734,065	\$125,660,905	\$125,089,409	\$135,191,306

* Providers have 1 year from the date of service to submit a claim for payment. These numbers are anticipated to increase as providers submit claims over the next year.

DD WAIVER SERVICES

The DD Waivers offer a variety of services from which a participant can choose. All services have specific definitions and limitations. The Comprehensive and Supports Waiver Index is available on the [Section website](#).

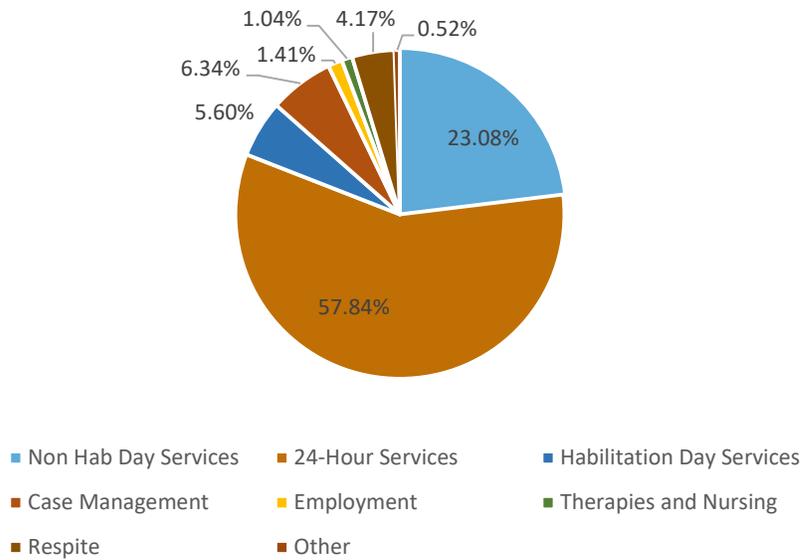
In SFY2019, case management was a required service for all people who received waiver funding. Residential services were only available on the Comprehensive Waiver, but supporting living services were available on both the Comprehensive and Supports Waivers.

Habilitation services are services that require the participant to establish and work toward a goal, and include specific education and skill development to help the participant reach that goal. In SFY2019, these services included community support services, child habilitation, and individual habilitation training. There are also services available that do not require a participant to establish and work toward a specific goal; however, the participant and provider should work together to

develop a plan of what the participant wants from that service so the service can be delivered in a way that supports the participant's wants, needs, and preferences. In SFY2019, these services included adult day and companion services.

Employment services offer a variety of supports for people to find and maintain self-employment or a job in a competitive, integrated work setting for which a person is paid at least minimum wage. In SFY2019, individual and group supported employment services were available. Follow along services were also available, and allowed for follow up with an employer on behalf of a participant if the participant was not present.

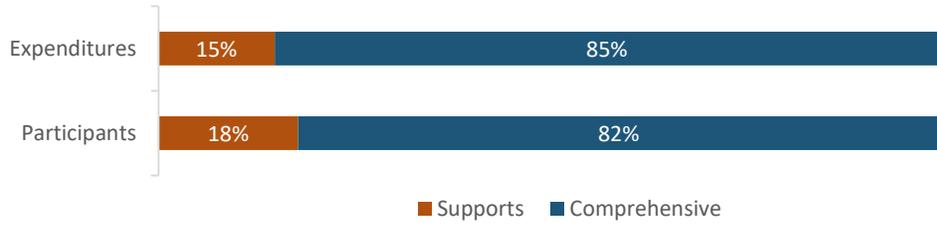
Chart 10
DD Waiver Services Utilization
SFY2019





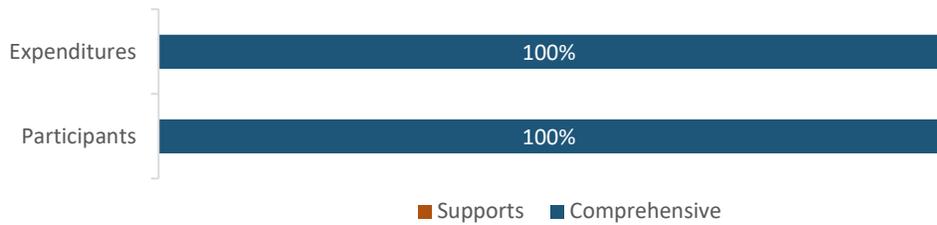
Case Management Services – SFY2019

Number of Participants	2,494
Total Expenditures	\$7,854,537
Average Cost per Participant	\$3,149
Number of Providers	105



Residential Services – SFY 2019

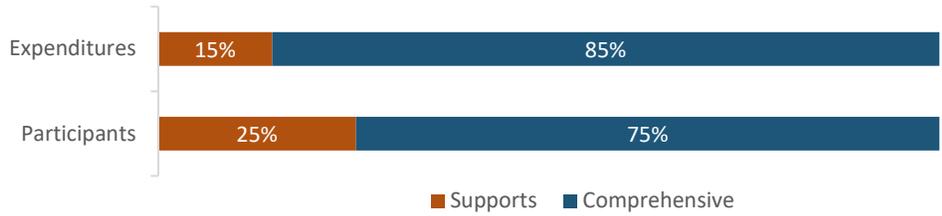
Number of Participants	865
Total Expenditures	\$59,240,233
Average Cost per Participant	\$68,486
Number of Providers	202





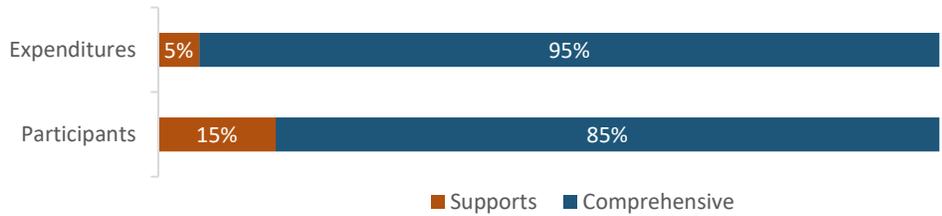
Supported Living Services – SFY2019

Number of Participants	700
Total Expenditures	\$9,240,265
Average Cost per Participant	\$13,200
Number of Providers	226



Day Services – SFY2019

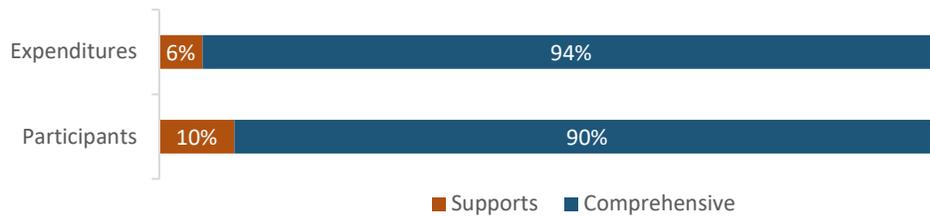
Number of Participants	1,657
Total Expenditures	\$24,369,422
Average Cost per Participant	\$14,707
Number of Providers	245





Employment Services – SFY2019

Number of Participants	292
Total Expenditures	\$1,674,595
Average Cost per Participant	\$5,735
Number of Providers	41



SERVICE CAPACITY

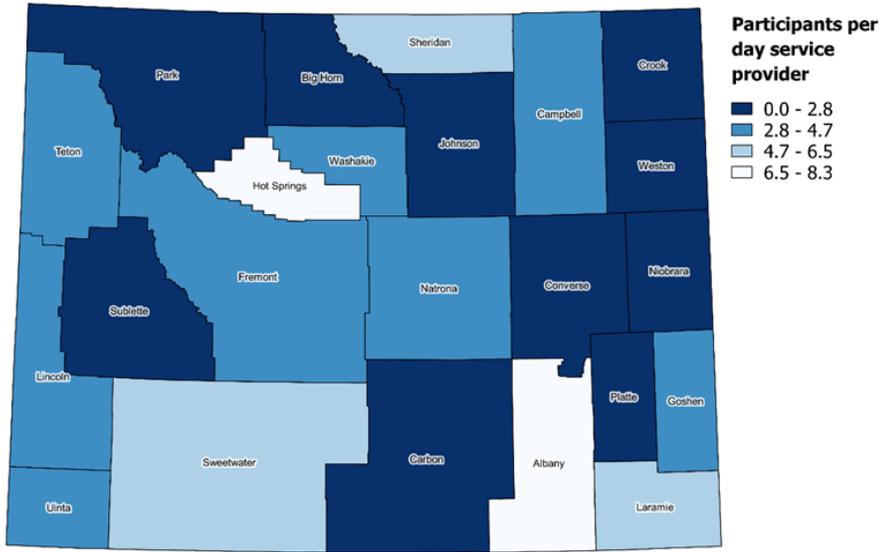
In SFY2019, the Section certified over 680 providers and case managers statewide in order to ensure that waiver participants had access to quality services and supports in their communities. As displayed in Table 3 below, the number of certified providers continues to grow.

Table 3
Provider and Case Manager Count
SFYs 2015 - 2019

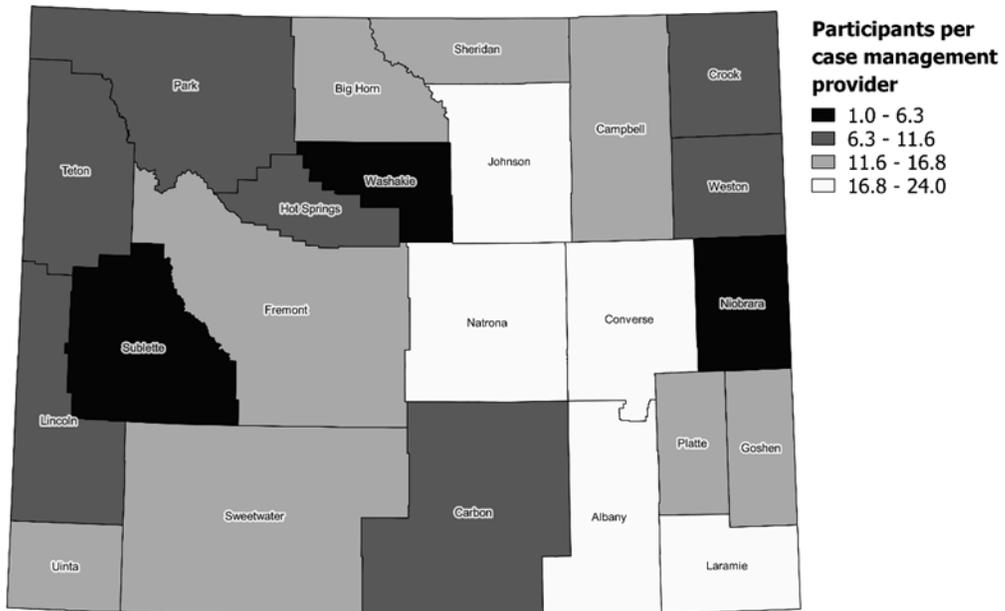
Year	All Waiver Providers	Case Managers
2015	558	84
2016	539	79
2017	644	104
2018	679	103
2019	681	105

The Section continues to monitor the number of providers certified to deliver waiver services. This monitoring, which includes a comparison of providers and participants by county, offers insight into provider capacity and potential provider shortages within the DD Waiver system. The following figures demonstrate the number of participants receiving services compared to the number of providers available to offer the service in the area.

Day Services

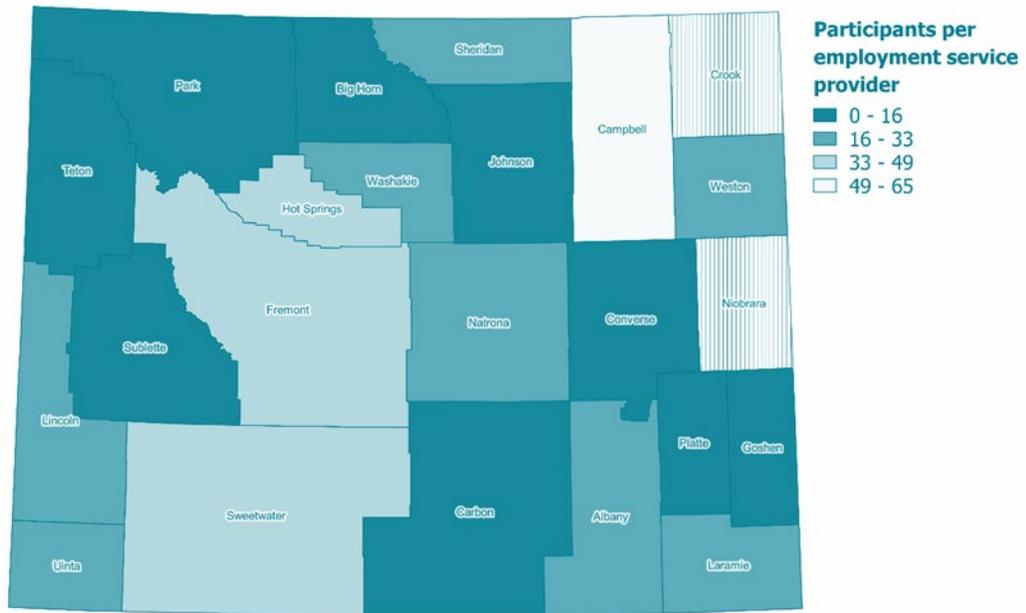


Case Management



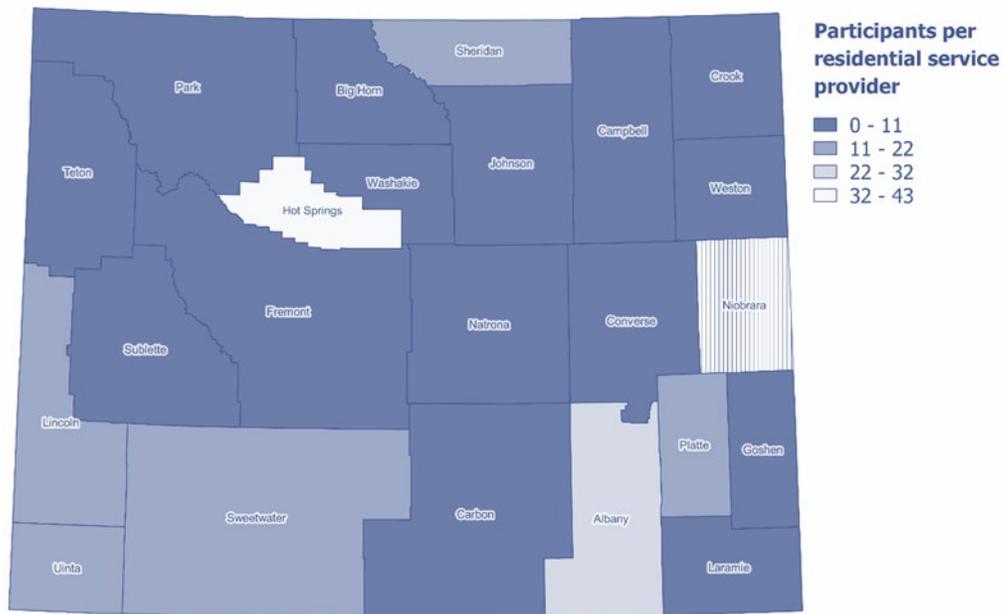
Employment Services

1/18/18



Residential Services

1/18/18



WAIVER RENEWAL AND RULES REVISIONS

The State must renew its 1915(c) application for waiver services every five years, and in doing so, must ensure rules, regulations, and policies align with the waiver application once it is approved by CMS. CMS approved the most recent applications for the DD Waivers effective April 1, 2019. As part of an effort to ensure all rules, regulations, and policies align with the waiver documents, the Section engaged a Rules Advisory Committee (RAC) comprised of large, medium, and small providers; case managers; legally authorized representatives; a self-advocate; and representatives from Protection and Advocacy, the Wyoming Institute for Disabilities, and the Wyoming Governor's Council on Disabilities. The RAC was tasked with identifying sections of the rules that could require clarification, and developing recommendations for revisions to rules that could create barriers for the participants receiving services.

The Section compiled the recommendations from the RAC, and conducted statewide community engagement sessions to obtain informal public input on the recommendations. The recommendations and subsequent public input were considered when developing revised Chapters 44, 45, and 46 of Wyoming Medicaid Rules, which were published for formal public comment in September 2019.

DD SECTION PROJECTS

In addition to day to day tasks related to participant eligibility and plan of care quality, provider and case manager certification and rule compliance, and critical incident and complaint management, the Section has completed several projects in SFY2019.

National Core Indicators (NCI)

The Human Services Research Institute (HSRI) and NASDDDS established the National Core Indicators in 1996 to provide states with a tool for developing and implementing performance outcomes, measures, and collection strategies related to individuals with developmental disabilities. Wyoming participated in the project in previous years, and recommenced project participation in SFY16. Wyoming, along with 45 states, the District of Columbia, and 22 sub-state entities participated in the project in SFY18. While there are several surveys included within the National Core Indicators, Wyoming participates in the Adult Consumer Survey.

The report consists of 134 tables covering the following areas:

- Choice and decision-making
- Work
- Self-determination
- Community inclusion, participation, leisure
- Relationships
- Satisfaction
- Service coordination
- Access
- Health
- Medications
- Wellness
- Respect and rights
- Safety

For a copy of the most recent report, please click [here](#).

In early 2019, the Section identified a need for assistance with conducting the NCI Adult In Person Surveys. The Section followed the competitive procurement process and selected Vital Research to conduct these surveys. Vital Research is a highly experienced quality management company based in California. The company is currently involved in over 2000 quality projects spanning 30 states and conducting research on 6 continents. Vital Research has employed and trained 11 Wyoming residents to conduct NCI surveys across the state.

Three year comparison

The current NCI work plan states that the Wyoming Department of Health will use data from the survey to compare the work in Wyoming to that in other states, in order to understand areas that are working well in Wyoming, and to identify areas in need of improvement. While not an inclusive summary of the results, the Section has prepared a report that highlights specific Wyoming results compared to the NCI average. The current data suggests that Wyoming is in-line with, or above, the NCI average in most categories.

The following table provides an example of Wyoming results compared to national averages.

Table 4
Wyoming NCI Results
SFY 2018

	2017-2018 Wyoming Results	2017-2018 NCI Average
Chose or had some input in choosing where they live	58%	57%
Chose staff or could request change	67%	65%
Chose or has help choosing what to buy or has set limits on what to buy with their spending money	89%	87%
Shopping at least once in the past month	95%	89%
Eating out at least once on the past month	92%	86%
Errands	90%	86%
Entertainment	87%	74%
Had friends who were not staff or family members	83%	78%

For a copy of the full Three Year Comparison report, please click [here](#).

Staff Stability

Wyoming elected to participate in the 2018-2019 Staff Stability Survey, which provides ongoing data on workforce turnover, wages, benefits, and recruitment and retention strategies. As surveys are ongoing for this collection year, data results for this survey will be included in the annual report for SFY20.

Incident Management

In accordance with Chapter 45, Section 20 of Wyoming Medicaid Rules, all waiver providers must report identified incidents to the Section. Additionally, Wyoming state law (W.S. 14-3-205 and 35-20-103) mandates that any person who suspects the abuse, neglect, or exploitation of a vulnerable adult is required to report their suspicions.

On an annual basis, Section staff review approximately 4,500 incidents. These incidents are reported to the Section through a variety of methods, including provider and provider staff reports; participant, parent, or guardian concerns; referrals from other agencies; and reports from members of the public. Incidents are reviewed on a daily basis to determine if they are reportable per Medicaid rule, and reportable incidents are triaged to allow for appropriate follow-up action dependent on provider and participant need. Table 5 offers insight into the types of reportable incidents the Section reviewed in SFY19.

Table 5
Incident Report Types
SFY 2019

Incident Type	Number of Incidents Reviewed	Percentage of Incidents Reviewed
Crime Committed by a Participant	28	0.60%
Death	45	0.96%
Elopement	115	4.46%
Intimidation	12	0.26%
Medical/Behavioral Admission	1,741	37.25%
Medication Error	1,328	28.41%
Other Injury	151	3.23%
Police Involvement	569	12.17%
Serious Injury	90	1.93%
Suspected Abandonment	2	0.04%
Suspected Abuse	174	3.72%
Suspected Exploitation	75	1.60%
Suspected Neglect	61	1.31%
Suspected Self Abuse or Neglect	149	3.19%
Use of Restraint	134	2.87%
Total	4,674	

CONTACT US

For additional information regarding this report, or for information related to services on the Comprehensive or Supports Waivers, please visit the Developmental Disabilities Section website at <https://health.wyo.gov/healthcarefin/dd/>, or call 307-777-7115.