



KEEPING THE PROMISE ALIVE:
ENSURING A SUCCESSFUL TRANSITION TO MANAGED CARE
Executive Summary

Formed in 1977 as a not-for-profit membership organization, IAC is comprised of voluntary service providers supporting individuals with intellectual and developmental disabilities in the New York metropolitan area. IAC currently represents over 160 member agencies and organizations helping 90,000 individuals and their families in New York City; and Nassau, Suffolk, Westchester and Rockland counties.

OPWDD has undertaken an extraordinarily complex set of tasks to simultaneously convert its long-term supports to a managed care system; transform existing services to meet new CMS requirements while addressing the unmet needs of individuals residing at home with their families. As OPWDD's system undergoes its transformation, we must remain committed to ensuring that all people with I/DD, regardless of the extent of their disability, will be supported in a manner that allows them to achieve personal dreams and goals so that they can live, play, be educated and employed within the communities of their choosing. It is widely acknowledged that New York has one of the largest and most comprehensive systems of HCBS supports in the nation, yet OPWDD is imminently poised to shift to a managed care framework. Significantly, there are virtually no models of other states that have transitioned a similarly complex statewide system of long-term I/DD services to a managed care model. This paper is intended to offer real solutions to meet the challenges related to this complex system transformation.

RECOMMENDATIONS:

The OPWDD Transformation Agenda and its challenges

- OPWDD must establish a comprehensive system of identifying unmet needs and create a plan for addressing them. This system must be comprehensive (paying special attention to those individuals requiring 24 hour supports who remain living at home with their families).
- OPWDD, ACCES-VR, and SED must implement true transition planning in accordance with federal guidelines. The outcome must be significantly more students exiting the school system prepared with the skills necessary to be successfully employed in a job in an integrated work environment.
- Supported employment (SEMP), supported living and consolidated support services (CSS) afford significantly more opportunities for activities in integrated environments than other HCBS services. Historically, their reimbursement rates have been inadequate to address the needs of individuals with intense and/or complex needs. Therefore these individuals are often relegated to more

segregated environments. There must be flexibility built into these and other rate formulas that maximize integrated opportunities for all individuals.

- Day habilitation must remain a support option available to individuals who are assessed to need such a service.

Transition to Managed care

- There are a series of significant issues yet to be addressed before New York State is prepared to responsibly move into a managed care approach to long-term supports for individuals with I/DD.
- It is significant that even after two years of planning, NYS has not yet stated where the funds will be found to pay for the new infrastructure, care coordination and IT systems, and administrative expenses incurred by the new managed care system. Additional funds must be found from new appropriations above and beyond OPWDD's historical level of funding for service, thus avoiding a further drain on existing financial resources dedicated to services being provided.
- Managed care entities must be incentivized through both contract language and funding levels to support individuals with even the most complex needs.
- Electronic Records and other Health Information Technology must be funded *prior* to OPWDD's move to managed care to ensure universality of a data collection system and the actual collection of data.
- Prior to implementing managed care, OPWDD must ensure the CAS system has been scientifically validated as an assessment tool as well as a tool for determining appropriate allocation of resources to meet each individual's identified needs.
- We recommend a formal process be established that involves families, individuals with I/DD and providers to review how the proposed assessment tool will be used to direct resources that ensure the individual and their caregivers' needs are met.
- Each service plan must also address the needs of the family caregiver raised during the assessment process to achieve a person- and family-centered service plan that best serves the individual with I/DD.
- Given the substantial property investments made by many providers, it is imperative that NYS policies be implemented that ensure the continued reimbursement of historically approved properties.

This summary is intended to highlight some of the relevant issues facing services to individuals with intellectual and developmental disabilities. Our full report addresses three major issues facing OPWDD and DOH (the transformation agenda, the transition to managed care and new approaches to assessment with its relationship to rate setting) and includes a complete list of IAC's recommendations to address them.