

# Healthcare and Regulatory Subcommittee Meeting

Monday, July 30, 2018

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# AGENDA

# South Carolina House of Representatives



## Legislative Oversight Committee

### *HEALTHCARE AND REGULATORY SUBCOMMITTEE*

*Chairman Phyllis J. Henderson  
The Honorable William K. Bowers  
The Honorable MaryGail K. Douglas  
The Honorable Bill Taylor*

*Monday July 30, 2018*

*11:00 a.m.*

*Room 317 - Blatt Building*

*Pursuant to Committee Rule 6.8, S.C. ETV shall be allowed access for internet streaming whenever technologically feasible.*

### AGENDA

- I. Approval of Minutes
- II. Discussion of study of the Department of Disabilities and Special Needs
- III. Adjournment

# MEETING MINUTES

## **Legislative Oversight Committee**

*First Vice-Chair:  
Laurie Slade Funderburk*

*Katherine E. (Katie) Arrington  
William K. (Bill) Bowers  
Neal A. Collins  
MaryGail K. Douglas  
William M. (Bill) Hixon  
Jeffrey E. (Jeff) Johnson  
Robert L. Ridgeway, III  
Bill Taylor  
John Taliaferro (Jay) West, IV*

*Jennifer L. Dobson  
Research Director*

*Cathy A. Greer  
Administration Coordinator*



### **South Carolina House of Representatives**

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*Bruce W. Bannister  
Gary E. Clary  
Chandra E. Dillard  
Phyllis J. Henderson  
Joseph H. Jefferson, Jr.  
Mandy Powers Norrell  
Tommy M. Stringer  
Edward R. Tallon, Sr.  
Robert Q. Williams*

*Charles L. Appleby, IV  
Legal Counsel*

*Carmen J. McCutcheon Simon  
Research Analyst/Auditor*

*Kendra H. Wilkerson  
Fiscal/Research Analyst*

### **Archived Video Available**

- I. Pursuant to House Legislative Oversight Committee Rule 6.8, South Carolina ETV was allowed access for streaming the meeting. You may access an archived video of this meeting by visiting the South Carolina General Assembly's website (<http://www.scstatehouse.gov>) and clicking on *Committee Postings and Reports*, then under *House Standing Committees* click on *Legislative Oversight*. Then, click on *Video Archives* for a listing of archived videos for the Committee.

### **Attendance**

- I. The Healthcare and Regulatory Subcommittee is called to order by Chair Phyllis J. Henderson on Thursday, February 1, 2018, in Room 110 of the Blatt Building. All members of the Subcommittee are present for all or a portion of the meeting.

### **Minutes**

- I. House Rule 4.5 requires standing committees to prepare and make available to the public the minutes of committee meetings, but the minutes do not have to be verbatim accounts of meetings. It is the practice of the Legislative Oversight Committee to provide minutes for its subcommittee meetings.
- II. Representative Douglas moves to approve the meeting minutes from the November 30, 2017 meeting.

Representative Douglas moves to approve the meeting minutes from the November 30, 2017 meeting.	Yea	Nay	Not Voting (Absent)	Not Voting (Present)
Rep. William K. Bowers			✓	
Rep. MaryGail Douglas	✓			
Rep. Henderson	✓			
Rep. Taylor	✓			

## Meeting

- I. Chair Henderson explains that this is the sixth meeting with the Department of Disabilities and Special Need (DDSN).
- II. Chair Henderson explains that the purpose of today's meeting is to address public input and to hear testimony from Interim DDSN Director Pat Maley about the agency's provider payment system.
- III. Chair Henderson explains that all testimony given to this subcommittee, which is an investigating committee, must be under oath. She reminds those sworn in during prior meetings that they remain under oath.
- IV. Pat Maley, Interim DDSN Director, provides testimony on the provider payment system.
- V. Subcommittee members ask questions regarding the provider payment system, which Pat Maley and Tom Waring, Associate State Director, answer.
- VI. There being no further business, the meeting is adjourned.

# STUDY TIMELINE

## Study Update - Department of Disabilities and Special Needs

- March 2015 - Agency submits its **Annual Restructuring and Seven-Year Plan Report**, which is available online.
- January 11, 2016 - Agency submits its **2016 Annual Restructuring Report**, which is available online.
- January 10, 2017 - **Full committee votes to schedule the Department of Disabilities and Special Needs for study**. Video of the meeting is available online.
- February 9, 2017-March 13, 2017 - Committee solicits input from the public about the agency in the form of an **online public survey**. The results of the public survey are available online.
- March 2, 2017 - Committee holds **public input meeting** (Meeting #1) about Department of Archives and History; DDSN; and John de la Howe School. Video of the meeting is available online.
- May 1, 2017 - Agency submits its **Program Evaluation Report**, which is available online.
- September 18, 2017 - Subcommittee holds meeting #2 to discuss agency **history, governance, services, and customers**.
- October 10, 2017 - Subcommittee holds meeting #3 to discuss **agency finances and responses to questions** from September 18, 2017 meeting.
- October 24, 2017 - Subcommittee holds meeting #4 to continue to discuss **agency finances and responses to questions** from the September 18, 2017, and October 10, 2017 meetings.
- November 6, 2017 - Subcommittee holds meeting #5 to discuss **human resources and responses to questions** from the October 24, 2017 meeting.
- November 30, 2017 - Subcommittee holds meeting #6 to receive testimony from the **Department of Health and Human Services, Vocational Rehabilitation Department, and directors of Disabilities and Special Needs Boards and other providers**.
- February 1, 2018 - Subcommittee holds meeting #7 to receive testimony about an **internal review of the provider payment system**.
- Ongoing - Public may submit written comments on the Oversight Committee's webpage on the General Assembly's website ([www.scstatehouse.gov](http://www.scstatehouse.gov)).



# AGENCY OVERVIEW

## Snapshot

# Department of Disabilities and Special Needs

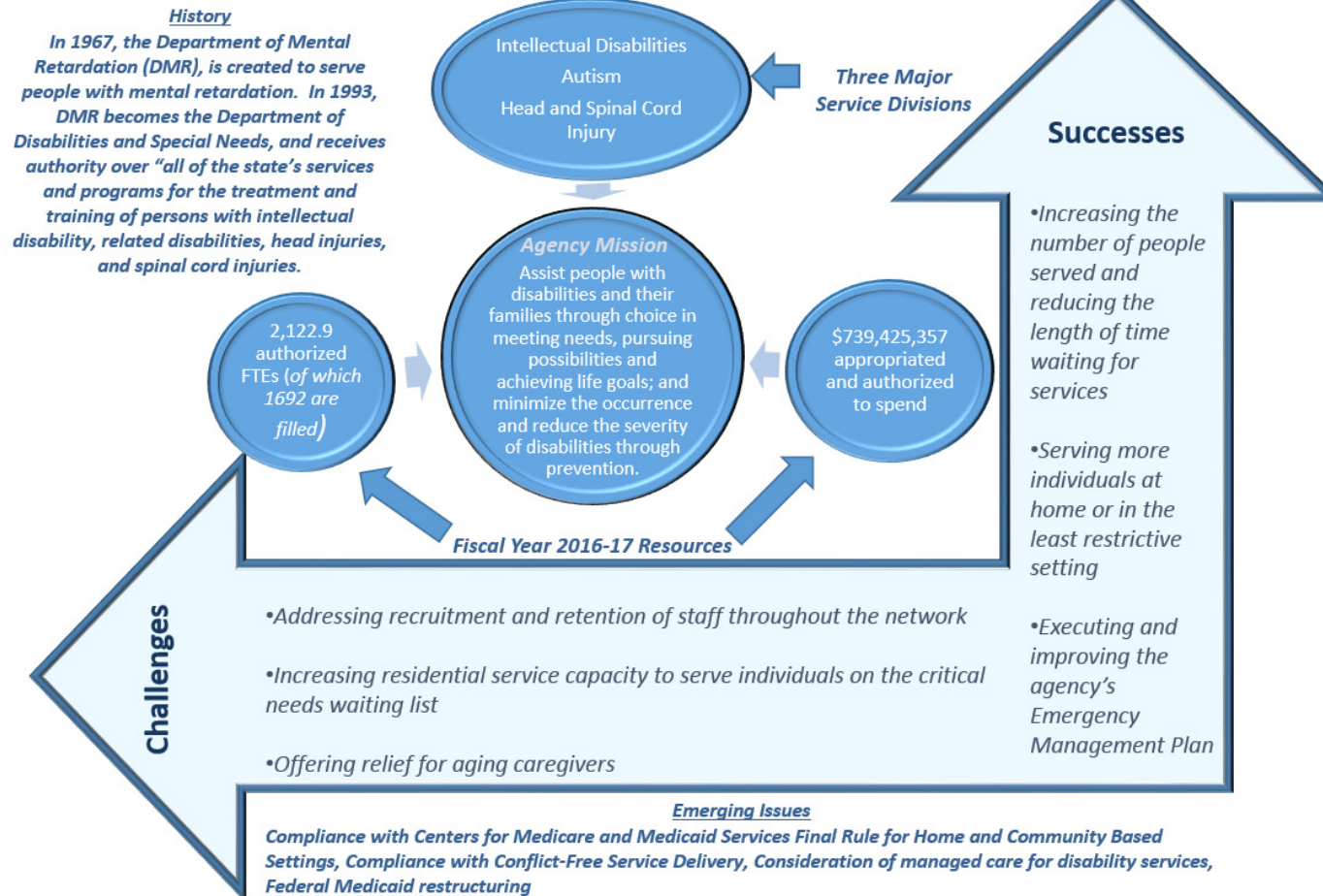


Figure 1. Snapshot of agency that includes its history, mission, resources, successes, challenges, and emerging issues. Source: Agency PER

# AGENCY PERFORMANCE

## *Types of Measures Utilized*

*There are four types of performance measures, which are explained below.*

- ***Inputs** are human or material resources used, such as number of staff hours or classroom space used to conduct welfare-to-work programs.*
- ***Outputs** are the amount of service, effort, or activity produced or delivered, such as number of clients receiving job training or number of students in AP courses.*
- ***Efficiency** measures are the amount of output or outcome achieved in terms of input, such as cost per participant in welfare-to-work programs, or cost per student.*
- ***Outcomes** are results or the effectiveness of a service or effort, such as the number of clients employed for at least half time within six months of job training or the percentage of students who graduate from high school.*

## Targets and Results of Measures

DDSN provides performance measure data in its Program Evaluation Report (May 2017) and its Annual Accountability Report (September 2017).

### GOAL 1 PREVENT DISABILITIES AND AMELIORATE IMPACT OF DISABILITIES

- Strategy 1.1 Reduce the Incidence of Neural Tube Defects and Metabolic Disorders
  - Objective 1.1.1 Annual NTD Birth Rates in SC will remain at or below national average (7.0 per 10,000 live births)
  - Objective 1.1.2 Provide Curative Treatment to 100 Children with Metabolic Disorders
- Strategy 1.2 Reduce the severity of disabilities
  - Objective 1.2.1 At risk children will receive Early Intervention services prior to third birthday
  - Objective 1.2.2 Individuals with TBI/SCI will have increased access to Post Acute Rehabilitation Services

Performance Measure	Type of Measure	Agency selected; Required by State; or Required by Federal	Best Performer	Time Applicable	Target and Actual	Target and Actual Results (Time Period #1)	Target and Actual Results (Time Period #2)	Target and Actual Results (Time Period #3)	Target and Actual Results (Time Period #4)	Target and Actual Results (Time Period #5)	Target Results Time Period #6	Trend	National Benchmark
Annual Rate of NTD Births Per 10K Live Births	Outcome	Agency selected		July 1 - June 30	Target:	7	8	8	6.9	6.9	7.5		7
					Actual:	7.2	8.5	6.9	6.9	7.5			
Annual # of Children with Metabolic Disorders Receiving Curative Treatment	Output	Agency selected		July 1 - June 30	Target:	125	190	190	208	208	203		
					Actual:	118	174	208	208	203			
Average % Gain in Standardized Adaptive Behavior Domain Scores for Children in the Pervasive Developmental Disorder (PDD) Waiver after Two	Outcome	Agency selected		July 1 - June 30	Target:	11%	11%	11%	10.40%				
					Actual:	10.40%	10.40%	10.40%					
Percentage of children over 36 months receiving Early Intervention services prior to third birthday	Outcome	Agency selected		1-Jul	Target:	77%	87.50%	87.50%	86.20%	86.20%	87.50%		
					Actual:	75.60%	84.40%	86.20%	86.20%	88.90%			
Number of individuals receiving Post Acute Rehabilitation Services				July 1 - June 30	Target:					54	54		
					Actual:				54	61			

*GOAL 2 PROVIDE SERVICES IN COMMUNITY INTEGRATED AND LEAST RESTRICTIVE SETTINGS AND PROMOTE INDIVIDUAL INDEPENDENCE*

- Strategy 2.1
  - Objective 2.1.1 Maximize use of supports and services to enable individuals to live at home with family or in their own home
    - South Carolina will rank in the top 10 of all states on UCPs Community Inclusion Report
  - Objective 2.1.2 Avoid institutional placements of children
- Strategy 2.2 Utilize least restrict residential settings/supports
  - Objective 2.2.1 Maintain a ratio of at least 7.5 to 1 of persons served in HCB waivers compared to ICF/IID
  - Objective 2.2.2 South Carolina will serve fewer individuals with ID in NFs than the national average (6.6 per 100K)
  - Objective 2.2.3 South Carolina will serve fewer individuals per 100K population in 16 + bed institutions than the national average (18.9 per 100K)
  - Objective 2.2.4 Increase number of less restrictive settings
  - Objective 2.2.5 Move individuals from residential centers to community settings.
- Strategy 2.3 Create opportunities for independent living, community inclusion and increased consumer/family choice and control of services
  - Objective 2.3.1 The % of individuals receiving day services in integrated employment settings will be at or above the national average (19%)

Performance Measure	Type of Measure	Agency selected; Required by State; or Required by Federal	Best Performer	Time Applicable	Target and Actual	Target and Actual Results (Time Period #1)	Target and Actual Results (Time Period #2)	Target and Actual Results (Time Period #3)	Target and Actual Results (Time Period #4)	Target and Actual Results (Time Period #5)	Target Results Time Period #6	Trend	National Benchmark
United Cerebral Palsy Community Inclusion Ranking (National Benchmark)	Outcome	Agency selected	Arizona	Annual Report	Target:	6th	6th	6th	14th	9th	14th		25th
					Actual:	6th	9th	14th	9th	14th			
# Children Served in PRTFs	Outcome	Agency selected		1-Jul	Target:	70	70	55	64	64	45		
					Actual:	75	62	64	64	39			
# Children Served in Regional Centers	Outcome	Agency selected		1-Jul	Target:	4	4	5	5	5	5		
					Actual:	6	6	5	5	4			
Ratio of Persons Served In HCB Waivers Versus ICF/IID	Efficiency	Agency selected	Arizona	1-Jul	Target:	8	8.5	8.5	9.6	9.6	9.6		
					Actual:	7.4	8	9.6	9.6	9.8			
# of Persons Served in Nursing Facilities Per 100,000 General Population & Compare to National Benchmark	Outcome	Agency selected	Ohio	1-Jul	Target:	3.8	4	4	4.6	4.6	5		8.9
					Actual:	3.9	4.4	4.6	4.6	5			
# of Persons Served in 16 + Bed Institutions Per 100K General Population	Outcome	Agency selected	Hawaii	1-Jul	Target:	20.1	20.1	20.1	19.7	19.7	19.7		25
					Actual:	20.3	20.2	19.7	19.7	19.5			
# of Persons Served Less Restrictive Residential Settings				1-Jul	Target:					940	926		
					Actual:					926			
% of Individuals Receiving Day Services Who are Served in Integrated Employment Settings	Outcome	Agency selected	Washington	1-Jul	Target:	30%	30%	30%	29%	29%	29%		19%
					Actual:	29%	29%	29%	29%	29%			
Number of individuals moving from Regional Centers				July 1 - June 30	Target:					24	24		
					Actual:					26			


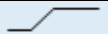
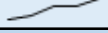
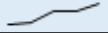
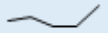
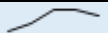
*GOAL 3 PROTECT HEALTH AND SAFETY OF INDIVIDUALS SERVED*

- Strategy 3.1
  - Objective 3.1.1 Average length of wait for individuals placed on Critical Needs List will be less than 110 days
  - Objective 3.1.2 Increase wage for direct support professionals
- Strategy 3.2
  - Establish service directives and standards which promote consumer health and safety and monitor compliance
  - Objective 3.2.1 Average Annual Overall Non-ICF/IID Provider Review Compliance will be 85% or higher
  - Objective 3.2.2 Average Annual ICF/IID certification surveys will produce no more than 13 standard and condition level citations
  - Objective 3.2.3 Revise licensing and contract compliance reviews to strengthen emphasis on outcomes
  - Objective 3.2.4. Revise Internal Audit review and reporting process
  - Objective 3.2.5 Establish provider sanctions for report adverse internal audit findings
- Strategy 3.3
  - Systemically monitor and review critical incident reporting, remediate substandard performance and facilitate system improvement
  - Objective 3.3.1 Annual rate of critical incidents per 100 persons served will be less than 25
  - Objective 3.3.2 Annual rate of falls leading to injury per 100 persons served will be less than 3.0
  - Objective 3.3.3 Revise critical incident monitoring system to focus on incidents more directly related to adverse consumer outcomes

Performance Measure	Type of Measure	Agency selected; Required by State; or Required by Federal	Best Performer	Time Applicable	Target and Actual row labels	Target and Actual Results (Time Period #1)	Target and Actual Results (Time Period #2)	Target and Actual Results (Time Period #3)	Target and Actual Results (Time Period #4)	Target and Actual Results (Time Period #5)	Target Results Time Period #6	Trend	National Benchmark
Average Length of Wait for Individuals Removed from Critical Needs List (days)	Outcome	Agency selected		July 1 - June 30	Target:	45	50	50	60	85	110		
					Actual:	51	56	88	88	119			
<b>Minimum Wage of Direct Support Professionals (per hour)</b>					Target:					\$11.00	\$12.00		
					Actual:					\$11.00			
% Average Annual Overall CCR Indicator Compliance	Outcome	Agency selected		July 1- June 30	Target:	93.30%	94%	94%	91.50%	91.50%	91.50%		
					Actual:	92.70%	93.60%	91.80%	91.10%	91.50%			
Annual # of Community Service Providers with less than 70% CCR Key Indicator Area Compliance	Outcome	Agency selected		July 1- June 30	Target:	7	7	5	19	19	10		
					Actual:	10	6	20	20	4			
% Average Annual Overall Licensing Survey Compliance	Outcome	Agency selected		July 1- June 30	Target:	95%	95%	95%	91.80%	91.80%	91.80%		
					Actual:	94.50%	92.40%	91.70%	91.70%	92.20%			
Annual # of Community Residential or Day Facilities with less than 70% Licensure Compliance	Outcome	Agency selected		July 1- June 30	Target:	0	0	0	0	0	7		
					Actual:	0	0	1	1	7			
Average # of Deficiencies in Annual Compliance Review of Community ICF/IID Facilities	Outcome	Agency selected		July 1- June 30	Target:	9	9	8	7.5	7.5	7.6		
					Actual:	10	8.4	7.5	7.5	7.6			

Performance Measure	Type of Measure	Agency selected; Required by State; or Required by Federal	Best Performer	Time Applicable	Target and Actual row labels	Target and Actual Results (Time Period #1)	Target and Actual Results (Time Period #2)	Target and Actual Results (Time Period #3)	Target and Actual Results (Time Period #4)	Target and Actual Results (Time Period #5)	Target Results Time Period #6	Trend	National Benchmark
Average # of Deficiencies in Annual Compliance Review of Regional Center ICF/IID Facilities	Outcome	Agency selected		July 1-June 30	Target:	12	12	12	9.6	9.6	9.6		
					Actual:	12	12.9	9.6	9.6	16.9			
Annual # of Community ICF/IID with Two or More Condition Level Citations				July 1-June 30	Target:					5	5		
					Actual:				6	2			
Annual # of Regional Center ICF/IID with Two or More Condition Level Citations				July 1-June 30	Target:					0	1		
					Actual:				0	1			
Annual # of Community ICF/IID Immediate Jeopardy Findings	Outcome	Agency selected		July 1-June 30	Target:	0	0	0	0	0	1		
					Actual:	0	0	0	0	1			
Annual # of Regional Center Immediate Jeopardy Findings	Outcome	Agency selected		July 1-June 30	Target:	0	0	0	0	0	0		
					Actual:	0	0	0	0	0			
Use of Council on Quality and Leadership (CQL) review protocol for review of providers				July 1-June 30	Target:					Yes	Yes		
					Actual:					No			
Internal Audit report includes clear indication of Seriousness of Findings				1-Jul	Target:					Yes	Yes		
					Actual:					Yes			
Financial sanctions are attached to Internal Audit Health and Safety findings				1-Jul	Target:					Yes	Yes		
					Actual:					Yes			



Performance Measure	Type of Measure	Agency selected; Required by State; or Required by Federal	Best Performer	Time Applicable	Target and Actual row labels	Target and Actual Results (Time Period #1)	Target and Actual Results (Time Period #2)	Target and Actual Results (Time Period #3)	Target and Actual Results (Time Period #4)	Target and Actual Results (Time Period #5)	Target Results Time Period #6	Trend	National Benchmark
Annual Rate of Substantiated Allegations of Abuse/Neglect/Exploitation Per 100 Served in Community Residential Settings	Outcome	Agency selected		July 1-June 30	Target:	quarterly trend analysis	quarterly trend analysis	0	0.07	0.07	0.17		
					Actual:	0.3	0.1	0.07	0.07	0.17			
Annual Rate of Substantiated Allegations of Abuse/Neglect/Exploitation Per 100 Served in Regional Centers	Outcome	Agency selected		July 1-June 30	Target:	quarterly trend analysis	quarterly trend analysis	0	0.25	0.25	0.28		
					Actual:	0	0	0.3	0.3	0.28			
Annual Rate of Critical Incidents Per 100 Served in Community Residential Settings	Output	Agency selected		July 1-June 30	Target:	15	15	15	19	19	21.1		
					Actual:	15.61	16.53	19.14	19.14	21.1			
Annual Rate of Critical Incidents Per 100 Served in Regional Centers	Output	Agency selected		July 1-June 30	Target:	29	29	29	39	39	45.9		
					Actual:	29.6	31.9	40.1	40.1	45.9			
Annual Rate of Fall Related Critical Incidents Per 100 Served in Community Residential Settings	Outcome	Agency selected		July 1-June 30	Target:	1.25	1.3	1.3	1.12	1.12	2.11		
					Actual:	1.38	1.56	1.12	1.12	2.11			
Annual Rate of Fall Related Critical Incidents Per 100 Served in Regional Centers	Outcome	Agency selected		July 1-June 30	Target:	0.45	0.75	0.75	1.12	1.35	1.35		
					Actual:	0.53	0.93	1.54	1.54	1.28			
% of Critical Incidents which measure consumer behavioral adverse event or inquiry				1-Jul	Target:						85%		
					Actual:					28%			

*GOAL 4      SERVE MAXIMUM NUMBER OF ELIGIBLE INDIVIDUALS WITH AVAILABLE RESOURCES*

- Strategy 4.1      Maximize utilization of in-home supports
  - Objective 4.1.1      The % of total individuals served who are receiving services in home will be at or above the national average (56%)
- Strategy 4.2      Assure services are provided in the most cost effective manner
  - Objective 4.2.1      The % of individuals served at the regional centers with severe or profound disabilities will be at or above the national average (76.0%)
  - Objective 4.2.2      Administrative expenses will be less than 2% of total expenses
  - Objective 4.2.3      Average annual per person HCB waiver cost and ICF/IID cost will be less than national average (HCB - \$44,160; ICF - \$100,556; Regional Center - \$237,250)
  - Objective 4.2.4      Establish financial audit requirement for private service providers
  - Objective 4.2.5      Centralize Waiver Service authorization
  - Objective 4.2.6      Restructure Post Acute Rehabilitation Services to achieve better outcomes and serve additional individuals.
- Strategy 4.3      Avoid duplication of services
  - Objective 4.3.1      Greater than 90% of DDSN consumers will not be served by multiple state agencies
- Strategy 4.4      Increase availability of new resources to meet unmet needs and serve more individuals
  - Objective 4.4.1      The # of individuals on DDSN managed HCB waiver waiting lists will decline by 5%
  - Objective 4.4.2      Average time of wait for individuals enrolled in DDSN managed HCB waivers will be less than 5 years
  - Objective 4.4.3      The % growth in residential service capacity to eliminate the residential waiting list will be less than the national average (18.4%)
  - Objective 4.4.4      Increase number of DDSN operated community residences serving persons with behavioral challenges
  - Objective 4.4.5      Limit agency funding carryover to 1 percent or less of funding allowance to net Medicaid settlements
  - Objective 4.4.6      DDSN will authorize all consumer service levels

Performance Measure	Type of Measure	Agency selected; Required by State; or Required by Federal	Best Performer	Time Applicable	Target and Actual row labels	Target and Actual Results (Time Period #1)	Target and Actual Results (Time Period #2)	Target and Actual Results (Time Period #3)	Target and Actual Results (Time Period #4)	Target and Actual Results (Time Period #5)	Target Results Time Period #6	Trend	National Benchmark
% of Total Served Supported In Home	Output	Agency selected	Arizona	1-Jul	Target:	73%	73%	73%	71%	71%	71%		56%
					Actual:	72%	71%	71%	71%	71%			
# of Persons Served Per 100,000 General Population	Output	Agency selected	Ohio	1-Jul	Target:	369	371.5	371.5	365.9	369.2	365.9		358.8
					Actual:	368.6	370.4	365.9	365.9	365.9			
% of Individuals Served in Regional Centers w/ Severe or Profound ID	Efficiency	Agency selected	Kentucky	1-Jul	Target:	86%	86%	86%	84.50%	84.50%	80%		76%
					Actual:	84.50%	84.50%	84.50%	84.50%	80%			
Administrative Expenses as a % of Total Expenses	Efficiency	Agency selected		July 1 - June 30	Target:	1.25%	1.25%	1.25%	1.29%	1.29%	1.33%		
					Actual:	1.34%	1.30%	1.29%	1.29%	1.33%			
Average Annual Per Person HCB Waiver Cost	Efficiency	Agency selected	Mississippi	July 1 - June 30	Target:	\$30,000	\$37,500	\$37,500	\$29,689	\$29,689	\$29,911		44160
					Actual:	\$29,966	\$36,260	\$29,689	\$29,689	\$29,911			
Average Annual Per Person Community ICF/IID Cost	Efficiency	Agency selected	Alabama	July 1 - June 30	Target:	\$80,000	\$92,500	\$92,500	\$98,957	\$92,500	\$89,487		100552
					Actual:	\$76,661	\$89,487	\$98,957	\$89,487	\$89,487			
Average Annual Per Person Regional Center Cost	Efficiency	Agency selected	Mississippi	July 1 - June 30	Target:	\$120,000	\$130,000	\$130,000	\$126,655	\$126,655	\$126,655		237250
					Actual:	\$114,245	\$126,655	\$126,655	\$126,655	\$121,910			
Requirements for private providers to have an annual financial audit				1-Jul	Target:					Yes	Yes		
					Actual:					Yes			
Annual carryover from operating revenue				July 1 - June 30	Target:					1%	1%		
					Actual:					0.85%			

Performance Measure	Type of Measure	Agency selected; Required by State; or Required by Federal	Best Performer	Time Applicable	Target and Actual row labels	Target and Actual Results (Time Period #1)	Target and Actual Results (Time Period #2)	Target and Actual Results (Time Period #3)	Target and Actual Results (Time Period #4)	Target and Actual Results (Time Period #5)	Target Results Time Period #6	Trend	National Benchmark
Entity that approves Medicaid waiver authorization				1-Jul	Target:					DDSN	DDSN		
					Actual:					Case Management Providers			
% of DDSN consumers served by only DDSN	Efficiency	Agency selected		1-Jul	Target:	93.50%	93.50%	93.50%	93%	93%	93%		
					Actual:	93%	92.50%	93%	93%	93.50%			
% of DDSN consumers served by DDSN and one other state agency				1-Jul	Target:					6.10%	6.10%		
					Actual:				6.10%	5.70%			
% of DDSN consumers served by DDSN and more than one other state agency				1-Jul	Target:					0.90%	0.90%		
					Actual:				0.90%	0.80%			
# Individuals on DDSN Managed HCB Waiver Waiting Lists	Outcome	Agency selected		1-Jul	Target:	10500	10000	10000	10300	10300	12600		
					Actual:	11212	10660	10464	10464	12598			
Average Time of Wait (in years) for Individuals Enrolled in ID/RD Waiver	Outcome	Agency selected		July 1 - June 30	Target:	5	5.5	5.5	3.4	3.4	3.9		
					Actual:	6.7	6	3.5	3.5	3.9			
Average Time of Wait (in years) for Individuals Enrolled in CS Waiver	Outcome	Agency selected		July 1 - June 30	Target:	3.5	3	3	1.4	1.4	1.4		
					Actual:	4.1	3.4	1.5	1.5	0.8			
Average Time of Wait (in years) for Individuals Enrolled in HASCI Waiver	Outcome	Agency selected		July 1 - June 30	Target:	1	0	0	0	0	0		
					Actual:	2.2	0	0	0	0			
% Growth in Residential Service Capacity Needed to Eliminate Residential Waiting List				1-Jul	Target:					4.50%	5%		
					Actual:				4.50%	5%			
# of persons with significant behavioral needs served in DDSN operated community residences					Target:					3	9		
					Actual:				0				

NEW MEASURES NOT YET ASSIGNED TO A GOAL

Performance Measure	Type of Measure	Agency selected; Required by State; or Required by Federal	Time Applicable	Target Results Time Period #6
<i>NEW in FY 16/17: # of Transfers from Regional Centers to Community Residential Settings</i>	Outcome	Agency selected	July 1 - June 30	24 by 6/30/2017
<i>NEW in FY 16/17: Complete Re-examination of Post Acute Rehabilitation Service Contracts</i>	Outcome	Agency selected	July 1 - June 30	complete by 6/30/2017
<i>NEW in FY 16/17: # of New Residential Settings Developed</i>	Outcome	Agency selected	July 1 - June 30	50 by 6/30/2017
<i>NEW in FY 16/17: # of DDSN Directly Operated Community Homes Developed</i>	Outcome	Agency selected	July 1 - June 30	6 by 6/30/2018
<i>NEW in FY 16/17: Begin Centralization of Annual Service Authorization by DDSN</i>	Outcome	Agency selected	July 1 - June 30	complete by 6/30/2017
<i>NEW in FY 16/17: Complete the Modification of the Licensing and Contract Compliance Review Requirements and Submit RFP</i>	Outcome	Agency selected	July 1 - June 30	complete by 6/30/2017
<i>NEW in FY 16/17: Begin the Modification of the Critical Incident Reporting Program</i>	Outcome	Agency selected	July 1 - June 30	complete by 6/30/2017
<i>NEW in FY 16/17: Complete Assessment if a Policy is Needed Requiring Private Health Care Providers Furnish an Annual Certified Financial Statement to DDSN</i>	Outcome	Agency selected	July 1 - June 30	complete by 6/30/2017
<i>NEW in FY 16/17: Assess if a Policy is Needed Establishing Monetary Penalties on Providers with Repeat Audit Findings of Substantial Non-compliance</i>	Outcome	Agency selected	July 1 - June 30	complete by 6/30/2017
<i>NEW in FY 16/17: Carryforward Will Be Less Than 1% Net of Estimated Medicaid Settlement Cost Needs</i>	Outcome	Agency selected	July 1 - June 30	1%
<i>NEW in FY 16/17: Establish Budget Priority Request to Increase Direct Care Workers' Wages and Proactively Advocate in all Appropriate Forums</i>	Outcome	Agency selected	July 1 - June 30	complete by 6/30/2017

## *Agency Performance Trends*

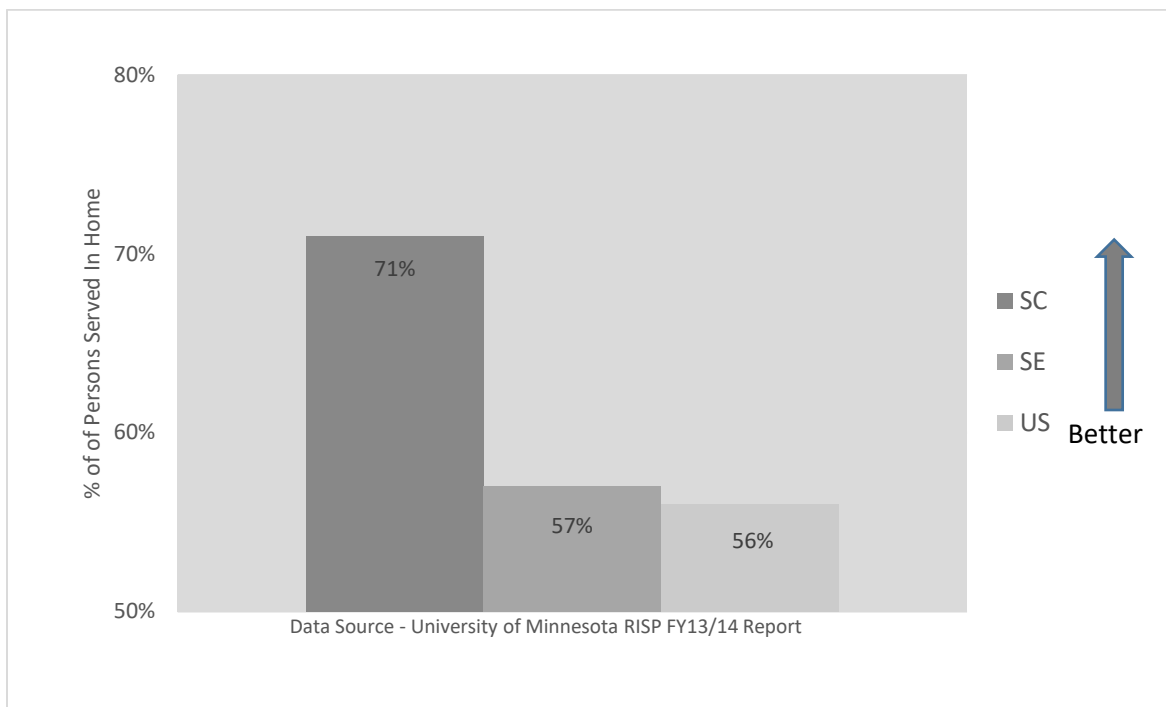
In its Program Evaluation Report, the Subcommittee requested DDSN submit graphs and charts which show trends over the last five time periods for at least three performance measures agency staff believe are vital to knowing whether the agency is successful.

DDSN provided charts for the following performance measures:

- Living Arrangements for Persons with Intellectual Disability/Related Disabilities (ID/RD) Receiving Services Comparing South Carolina with Southeast and United States
- Large Residential Settings and Resource Utilization Comparing South Carolina with the Southeastern Region and United States
- Delivery of Services per Consumer Need and Choice - Home and Community Based Settings (Waiver) Versus Institutional (ICF/IID)
- Number of Persons with Intellectual Disability/Related Disabilities (ID/RD) Served (Consumers) Comparing South Carolina with the Southeastern Region and United States
- Length of Time Individuals on Critical Needs List Wait for Services
- Community Supports Waiver Waiting List Individuals Added and Removed by Fiscal Year
- Intellectual Disability/Related Disabilities Waiver Waiting List Individuals Added and Removed by Fiscal Year
- Head and Spinal Cord Injury Waiver Waiting List Individuals Added and Removed by Fiscal Year
- Length of Time on the Waiting Lists
- Additional Analysis of the Number of Individuals Waiting for DDSN Services

## SCDDSN Performance Measure

### Living Arrangements for Persons with Intellectual Disability/Related Disabilities (ID/RD) Receiving Services Comparing South Carolina with the Southeastern Region and United States



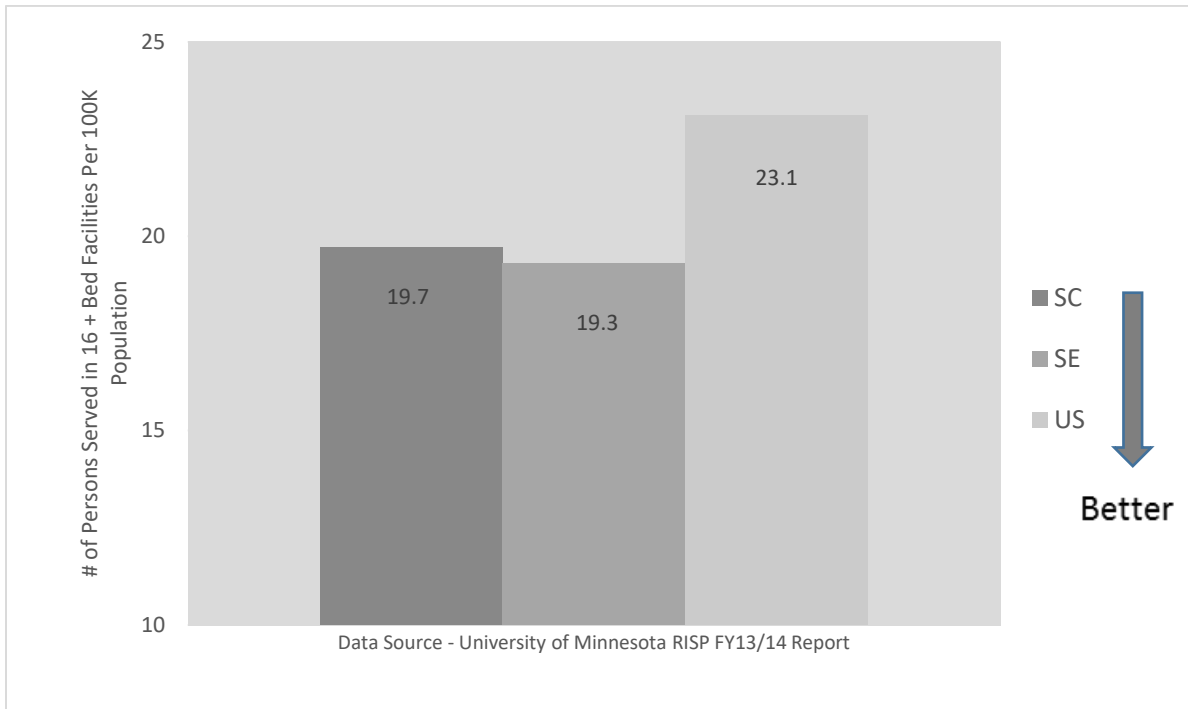
Serving people with severe lifelong disabilities in their homes with family is best for the person, preferred by families and is the most cost-efficient service alternative for taxpayers. Of the thousands of persons with intellectual disability and related disabilities (ID/RD) and Autism Spectrum Disorder receiving services from DDSN, 71% live with family caregivers compared to 56% nationally. DDSN is doing a better job of keeping families together utilizing day services, respite, personal care, and other needed supports than the Southeastern region and United States.

**Note:** Approximately 85% of *all* individuals served by DDSN, not just those with ID/RD, live at home with their families or in their own home. National data is unavailable to compare to the broader population served in South Carolina.

# SCDDSN Performance Measure

## Large Residential Settings and Resource Utilization

### Comparing South Carolina with the Southeastern Region and United States



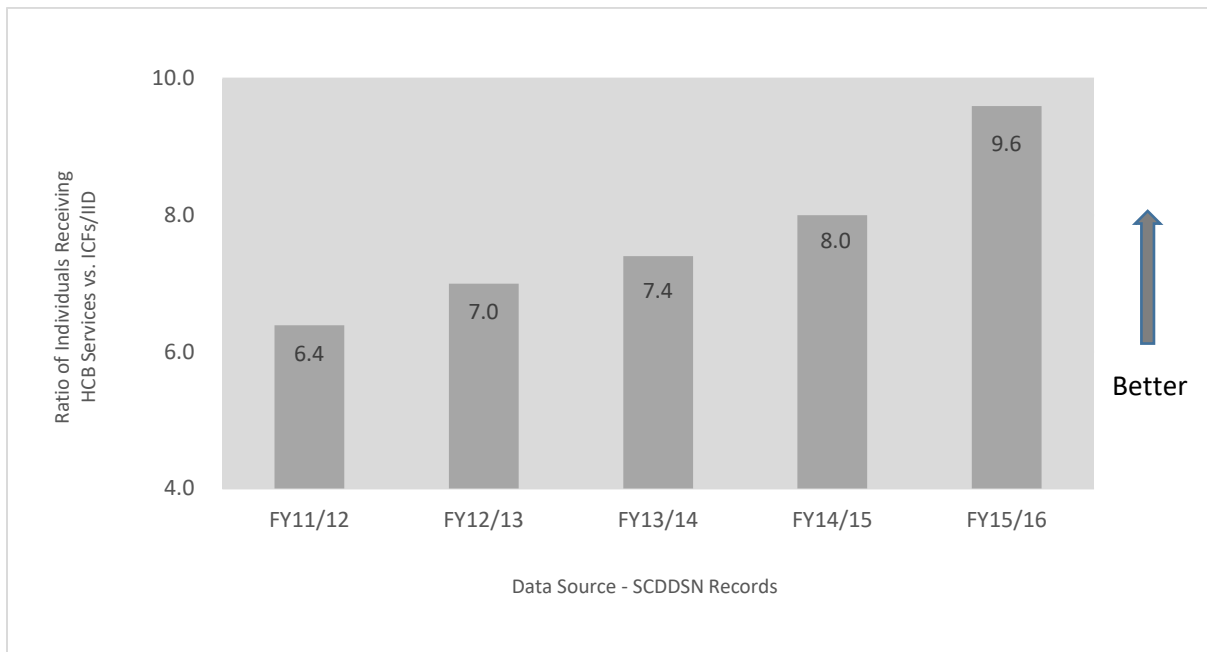
DDSN serves 15% fewer person that the national average of persons per 100,000 population living in large (16 + beds) institutions. Federal and South Carolina state laws require that people with intellectual disability and related disabilities (ID/RD) live in the least restrictive environment. Receiving services in a smaller, family-like setting is preferred by individuals and families and is a more cost-efficient service alternative for taxpayers.



# SCDDSN Performance Measure

## Delivery of Services per Consumer Need and Choice

### Home and Community Based Settings (Waiver) Versus Institutional (ICF/IID)

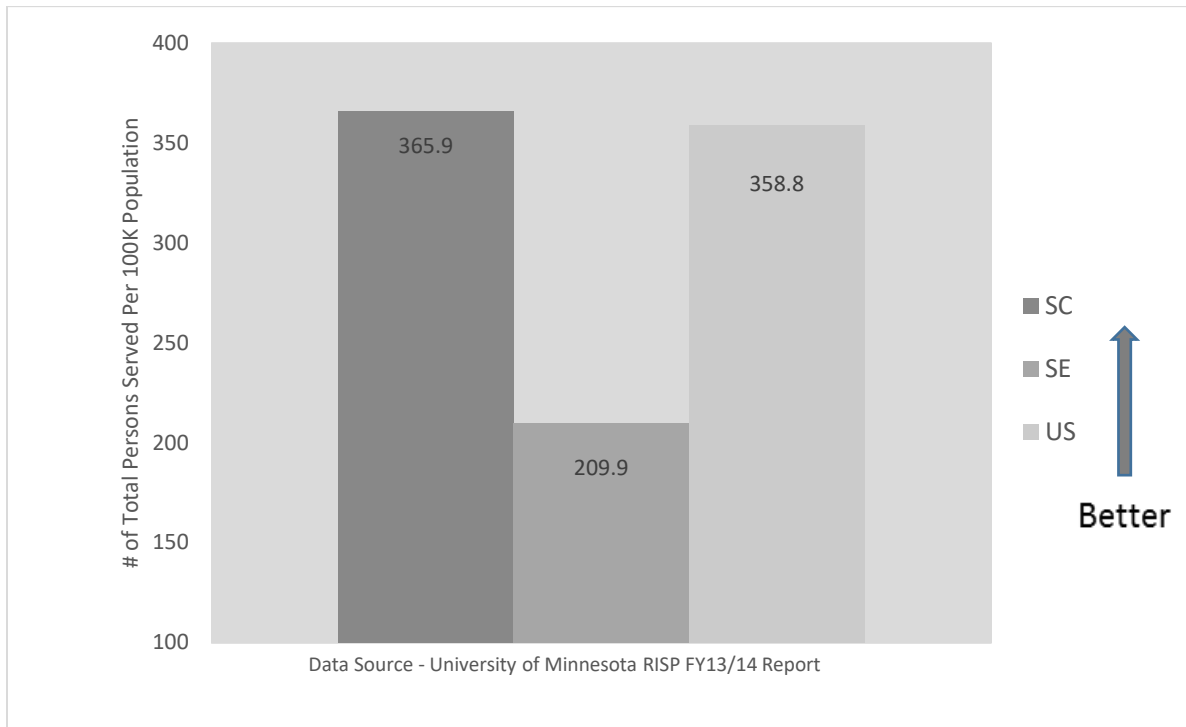


DDSN provides services to consumers based on their level of need and choice of either institutional (Intermediate Care Facility for Individuals with Intellectual Disability - ICFs/IID) or home and community based waiver services. DDSN designed and implemented home and community based options to facilitate people moving out of ICFs/IID and prevent people from having to move into ICFs/IID when determined to need out of home placement.

# SCDDSN Performance Measure

## Number of Persons with Intellectual Disabilities/Related Disability (ID/RD) Served (Consumers)

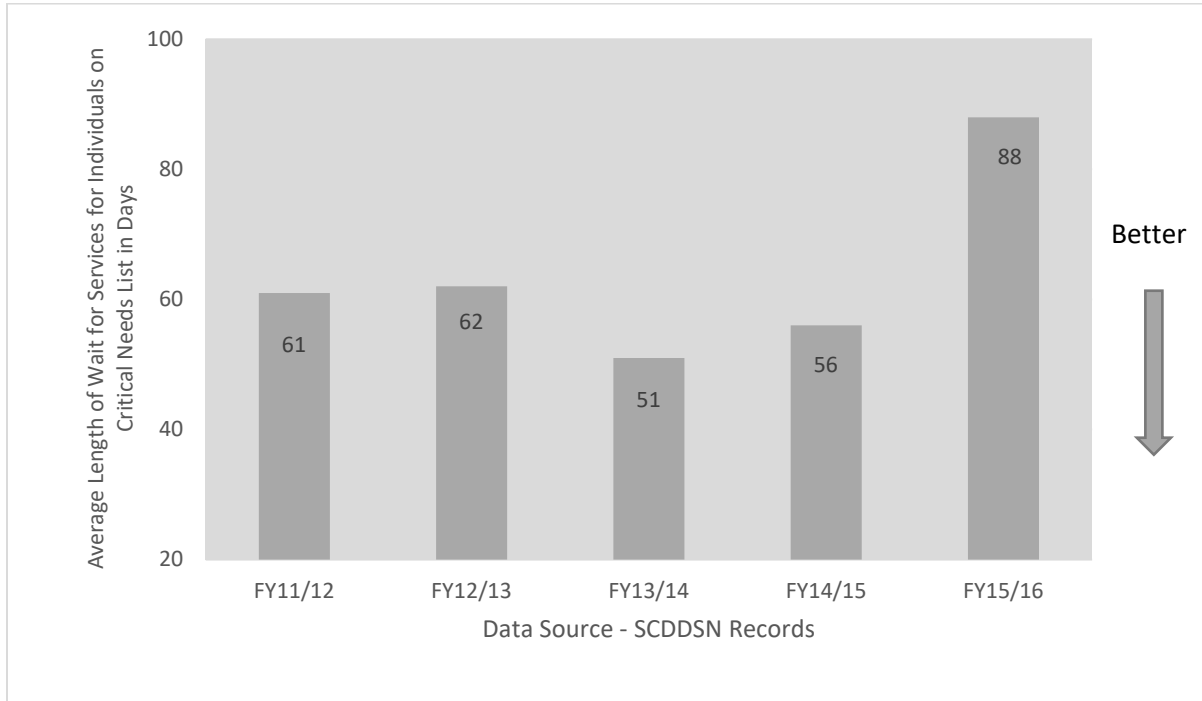
### Comparing South Carolina with the Southeastern Region and United States



This graph reflects the number of persons per 100,000 general population receiving in-home family support services and out-of-home residential services. Compared to the national average, DDSN serves more persons with less expensive in-home family supports. Utilization of this service delivery strategy has enabled DDSN to serve proportionately more persons with disabilities than are served in other states.

# SCDDSN Performance Measure

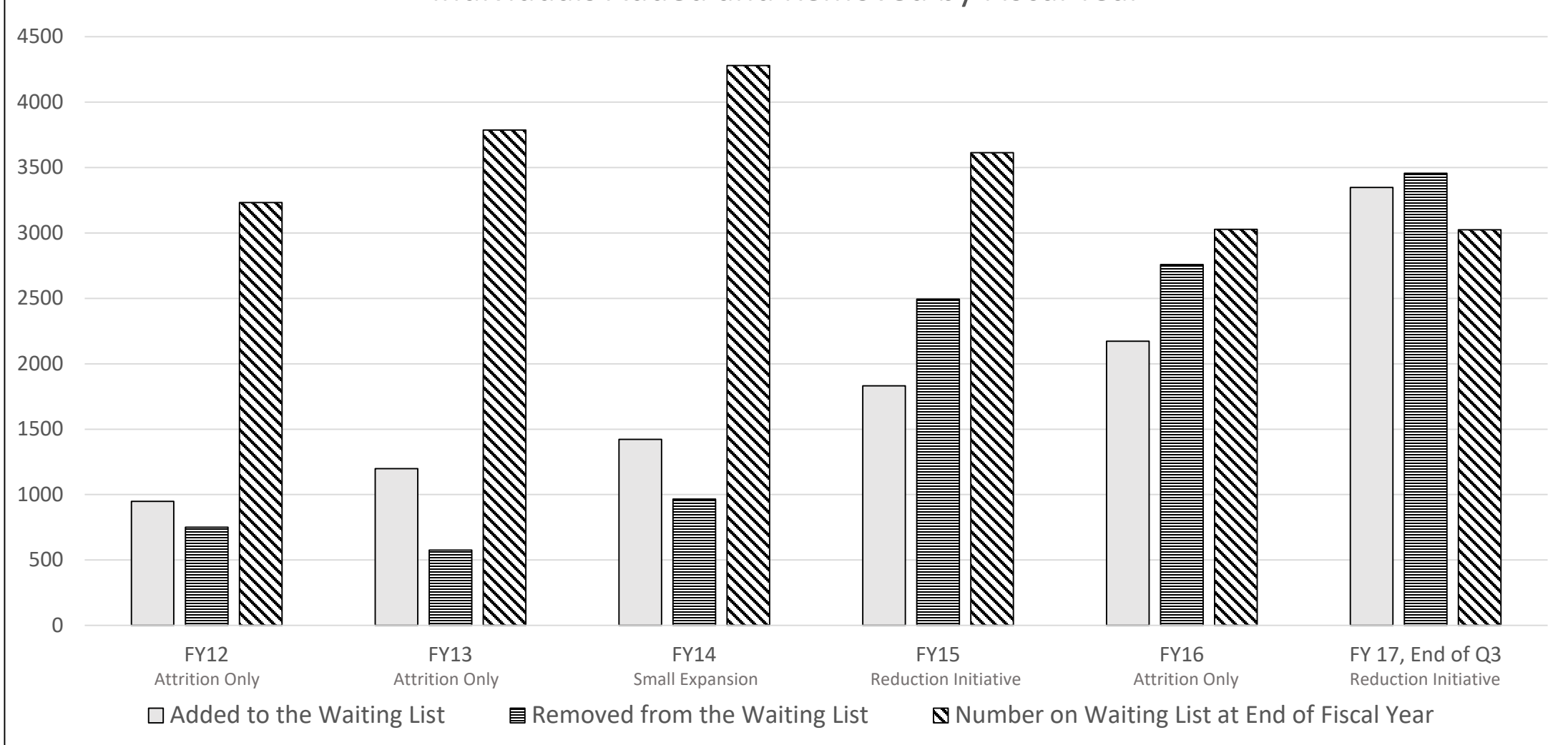
## Length of Time Individuals on Critical Needs List Wait for Services



DDSN prioritizes services to those persons with lifelong disabilities who have the greatest need. Individuals whose health and safety are at risk, who cannot care for him/herself and who meet critical criteria are served first. DDSN has experienced difficulty finding appropriate placement for individuals identified as having Critical Needs as a result of significant behavioral needs or legal considerations. DDSN provider network has been less willing to serve high management individuals and therefore individuals are waiting for services longer.

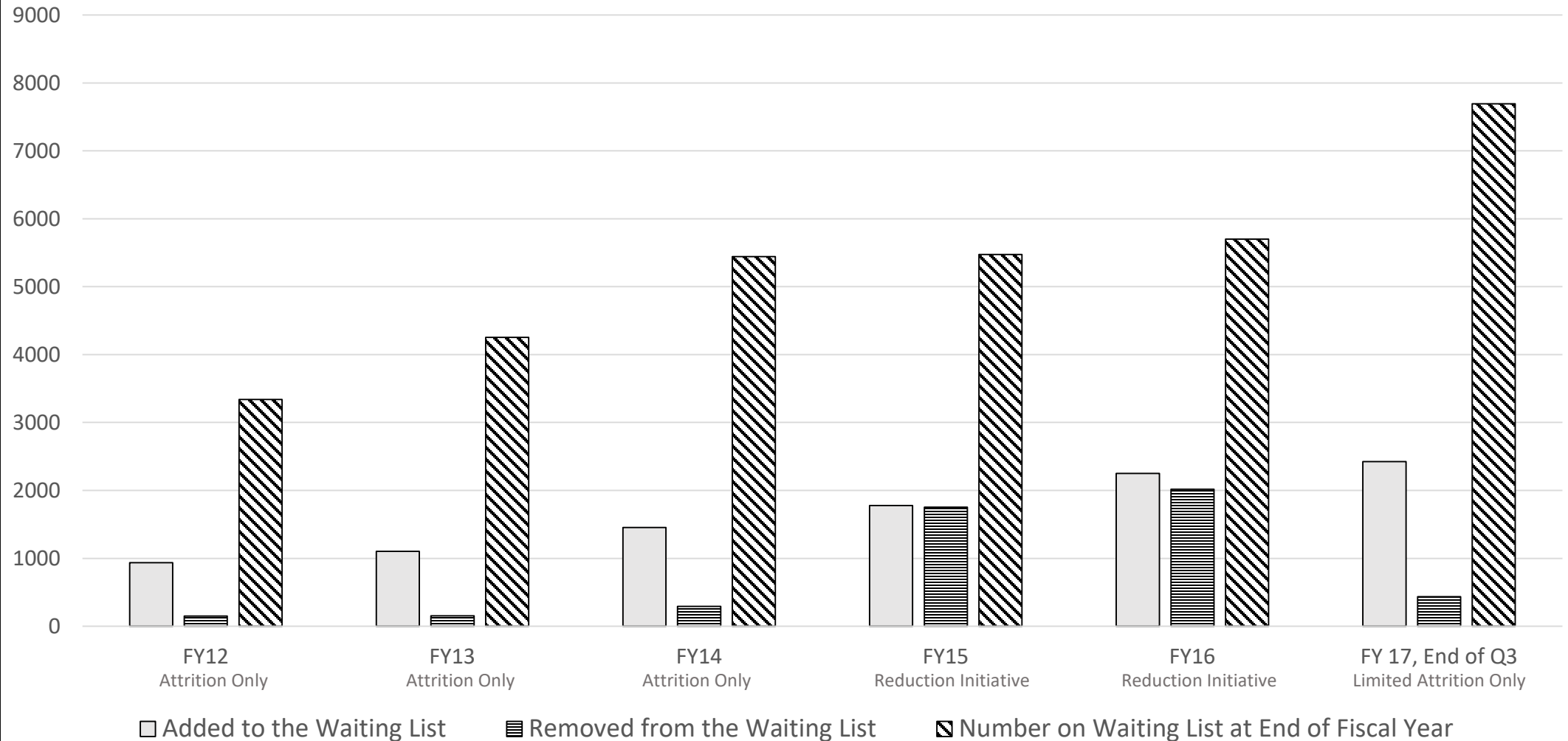
# SCDDSN Performance Measure

Community Supports Waiver Waiting List  
Individuals Added and Removed by Fiscal Year



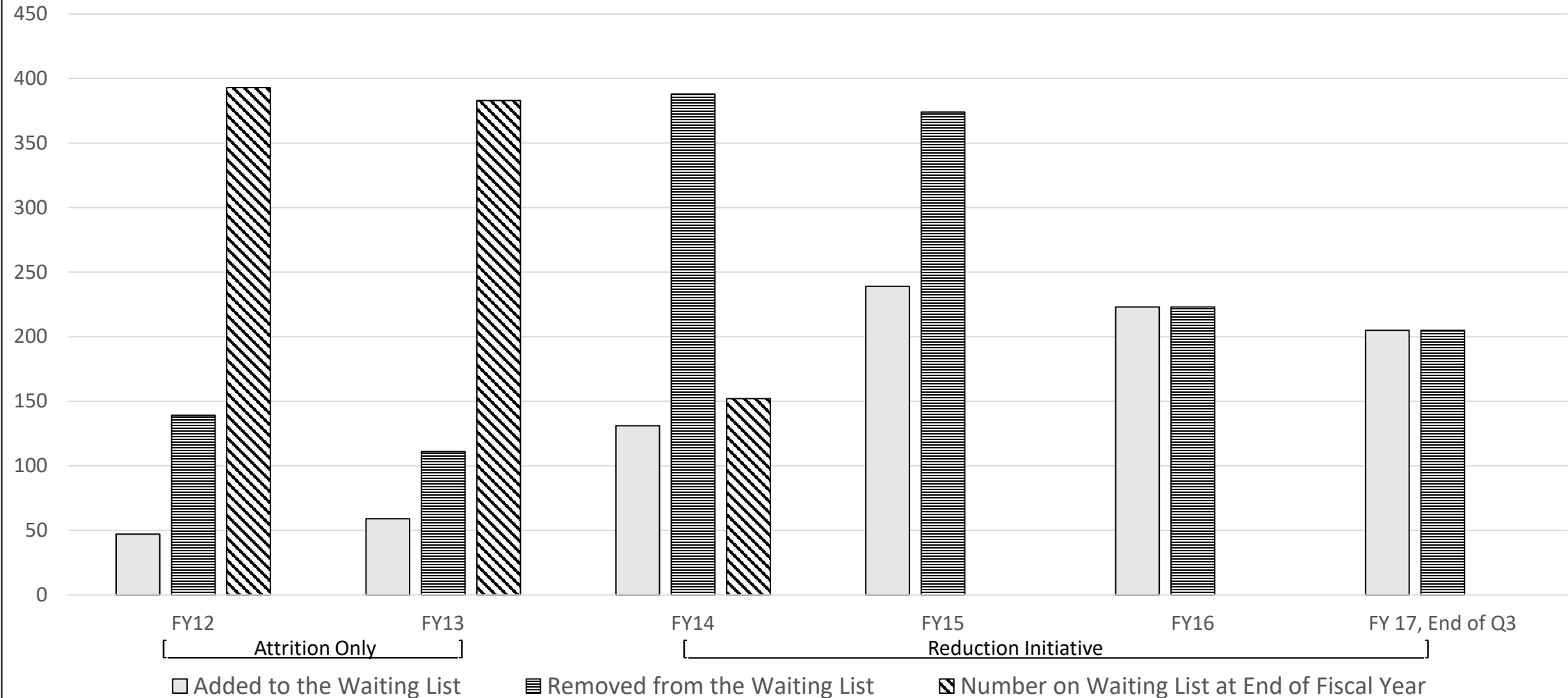
# SCDDSN Performance Measure

Intellectual Disability/Related Disabilities Waiver Waiting List  
Individuals Added and Removed by Fiscal Year



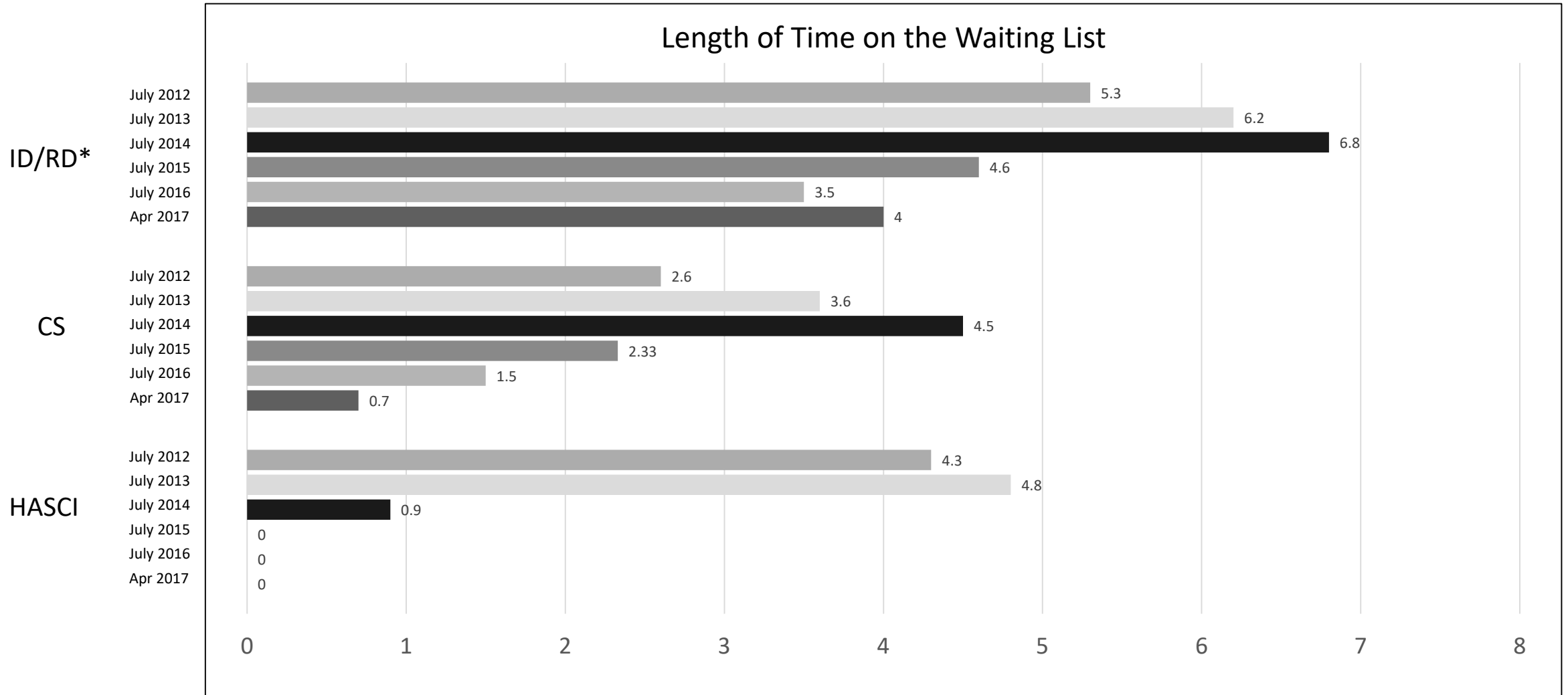
# SCDDSN Performance Measure

Head and Spinal Cord Injury Waiver Waiting List  
Individuals Added and Removed by Fiscal Year



\*As of April 1, 2017

# SCDDSN Performance Measure

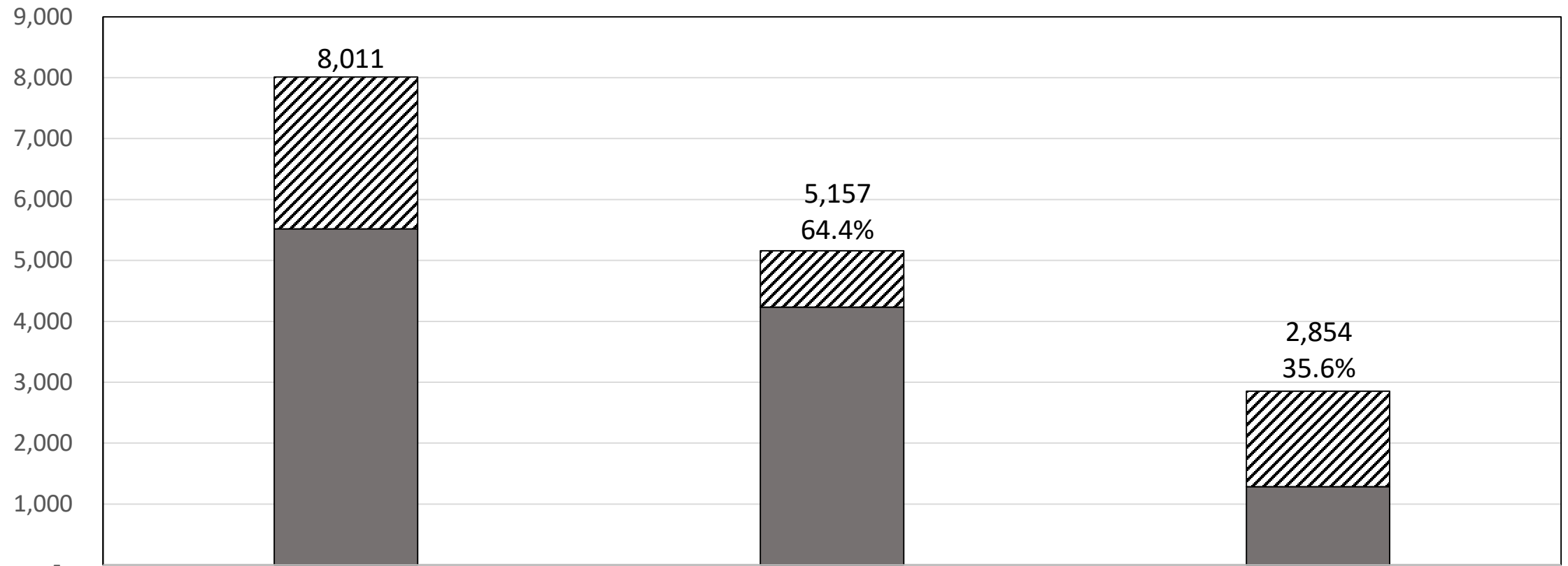


ID/RD – Intellectual Disability/Related Disabilities Waiver  
 CS – Community Supports Waiver  
 HASCI – Head and Spinal Cord Injury Waiver

\*As of April 1, 2017

# SCDDSN Performance Measure

## Additional Analysis of the Number of Individuals Waiting for DDSN Services



\*These services may include: DDSN Family Support Funding, DDSN Family Arranged Respite Funding, and/or Medicaid Services such as prescriptions, personal care, nursing, incontinence supplies, dental, vision, medically necessary Durable Medical Equipment services, etc.

■ Under 21 Years of Age      ▨ Age 21 and older



## National Benchmarks

During the Healthcare and Regulatory Subcommittee's October 24, 2017, meeting, there was a discussion on national benchmarks. What follows are the agency presentation slides of DDSN in comparison to national benchmarks.

SC Department of Disabilities and Special Needs

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# National Measures and Benchmarks

## What are other states doing well?

National Benchmarks

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- What other states exemplify service to populations served by DDSN?
- How do we know? How is it measured?
  - Case for Inclusion annual report by UCP
  - State of the States in Intellectual and Developmental Disabilities – University of Colorado
  - In-Home and Residential Long-Term Supports and Services for Persons with Intellectual or Developmental Disabilities - The University of Minnesota
  - The National Report on Employment Services and Outcomes – University of Massachusetts/Boston
  - National Community of Practices for Supporting Families of Individuals with I/DD Across the Lifespan

Links to the full reports referenced are available in the DDSN supplemental notebook, Tab 3.

## UCP Case for Inclusion Report

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- The most comprehensive rating of state ID/DD service systems is conducted by United Cerebral Palsy (UCP).
- UCP is a national disability advocacy organization that was founded in 1949.
- UCP has been conducting annual independent assessments of states' use of Medicaid and other public supports to promote individuals with intellectual and developmental disabilities participating in all aspects of community life since 2006.

The full report UCP Case for Inclusion 2016 is available in the DDSN supplemental notebook, Tab 2.

## UCP Ranking Description

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- All 50 states and the District of Columbia are assessed .
- Data from twenty-five measures are compiled.
- Measures are grouped into five overarching areas:
  - Promoting Independence
  - Health Safety & Quality of Life
  - Keeping Families Together
  - Promoting Productivity
  - Reaching Those in Need

The full report UCP Case for Inclusion 2016 is available in the DDSN supplemental notebook, Tab 2.

## UCP Ranking Description (continued)

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- Measures were selected based upon family and advocate input on those areas most important to individuals with intellectual and developmental disabilities.
- Each measure was weighted to reflect importance.
- Data used was from other nationally recognized sources (e.g., Universities of Minnesota, Colorado, Massachusetts; National Core Indicators).

The full report UCP Case for Inclusion 2016 is available in the DDSN supplemental notebook, Tab 2.

## UCP Five Major Ranking Categories

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Category	Measures	Weight of All Measures
Promoting Independence	8	50%
Health, Safety and Quality of Life	5	14%
Keeping Families Together	3	8%
Promoting Productivity	5	12%
Reaching Those In Need	4	16%

The full report UCP Case for Inclusion 2016 is available in the DDSN supplemental notebook, Tab 2.

## UCP Rankings Over Time

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	Average	2016	2015	2014	2013	2012
Arizona	1	1	1	1	1	1
South Carolina	15	14	9	6	12	13
Southeastern Average	41	35	32	47	46	42

Southeastern Average defined by CMS SE region

The full report UCP Case for Inclusion 2016 is available in the DDSN supplemental notebook, Tab 2.

## UCP Category Rankings - 2016

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Category	Arizona	South Carolina	Southeastern Average
Promoting Independence	4	36	34
Health, Safety and Quality of Life	25	4	15
Keeping Families Together	1	3	27
Promoting Productivity	27	21	37
Reaching Those In Need	5	31	42

The full report UCP Case for Inclusion 2016 is available in the DDSN supplemental notebook, Tab 2.

## UCP National Findings

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- “All states have room to improve.”
- Top performing states have no common characteristic.
  - Urban and rural
  - Wealthy and poor
  - High and low tax burden
  - High and low spenders on services
- Waiting lists for residential & community services continue to climb.

The full report UCP Case for Inclusion 2016 is available in the DDSN supplemental notebook, Tab 2.

## UCP SC Findings

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- SC is one of the top performing states in supporting individuals with intellectual/developmental disabilities actively participate in their communities.
- SC has been successful despite our low per person service expenditures.
- SC excels in helping individuals with disabilities remain with their families.
- SC is effective in protecting the health and safety of individuals with disabilities.
- For individuals with disabilities who are not able to remain with their families, SC needs to support more individuals in smaller living situations.

The full report UCP Case for Inclusion 2016 is available in the DDSN supplemental notebook, Tab 2.

## COMMITTEE CONTACT INFORMATION



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