HJR 16: State-Operated Institutions Community Developmental Disability Services

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Background

Montana's system of services for individuals with intellectual disabilities serves about 2,300 adults, ranging from transportation to supported work programs and various levels of group or supported housing arrangements. Most people receive services in a community setting. The Montana Developmental Center (MDC) provides treatment to about 50 adults who have been found by a court to be in need of commitment to the facility or who are at MDC because they have been sentenced for a crime. MDC is the most restrictive setting in the continuum of care and serves the fewest number of people receiving state services.

This briefing paper provides information on how people qualify for services and how community services are developed and paid for.

Who Qualifies for Services?

Montanans who meet the state's criteria for a developmental disability are eligible to receive state-funded services. Generally, a person must have:¹

- an I.Q. score of 70 or lower: and
- an adaptive behavior score, measuring the ability to perform daily personal care and social activities, of 70 or lower.

In addition, the person's disability:

- must have originated before the person's 18th birthday; and
- must be expected to continue indefinitely.

If eligible, a person may apply for services. If programs offering the services are full, the person is placed on a waiting list for services.

The Department of Public Health and Human Services reports that 4,596 adults and children were receiving some type of community-based service through the Developmental Disabilities Program as of Oct. 23, 2013, including evaluation and diagnostic services. Another 806 were on the waiting list for services, and 467 of those were not receiving any services at all. The remainder were receiving some services, but not all the services for which they qualified.

¹ William Cook, "Determining Eligibility for Services to Persons with Developmental Disabilities in Montana: A Staff Reference Manual (4th Edition)," *Department of Public Health and Human Services*, July 1, 2007, P. 60.

About half of the individuals in community services — 2,258 — were adults in a Medicaid waiver program that pays for services to be provided in a home or community-based setting rather than a state institution.

Who Provides Services?

Title 53, chapter 20, of the Montana Code Annotated establishes the state's policy of providing DD services in a community setting when possible, limiting the use of institutional services only to those instances "when less restrictive alternatives are unavailable or inadequate and only when a person is so severely disabled as to require institutionalized care."²

Sixty-seven different organizations operate community services around the state. An organization that wants to provide community services may apply to DPHHS to become a qualified provider. Applicants must provide detailed information about the services they will provide and how the services will be provided; the duties, qualifications, and pay levels for all employees; and their budgets and sources of financing. Existing providers may add services to their programs through a similar process.

Providers usually go into business because they believe they will have enough clients to make the effort successful. DPHHS pays providers a certain amount of money for each service a client receives.

How Are Providers Paid?

DPHHS uses the Montana Resource Allocation Protocol (MONA) to start the process of determining the services that a person will need in the community. Based on the MONA, the agency develops a plan of services for each individual. That plan is used to determine the financial resources necessary for purchasing the needed services. This process results in an Individual Cost Plan (ICP) for each person.

The person uses funds from the ICP to pay for services that have been identified as needed. For example, the ICP may pay the for the costs of housing, through a group home or other arrangement, and for a day program in which the person receives habilitation services or subsidized employment in the community.

Depending on an individual's needs, a cost plan can range from a few thousand dollars to, in rare instances, \$200,000 or more. The average cost for adults is currently \$41,709.

The cost plan may not reflect the full cost of providing community-based services to individuals who also need mental health services. Those services are overseen by a different division of DPHHS, offered through a different set of providers, and paid for through a different state payment system.

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²53-20-101, Montana Code Annotated.