

**An Overview of Life Choices**

Illinois Department of Human Services  
Division of Developmental Disabilities

April 2017

Life Choices System Transformation Recorded Series - Webinar 1

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**History of Life Choices**

- Life Choices began in the Fall of 2012
- Illinois Council on Developmental Disabilities (ICDD) funded this project
- Grant to National Association of State Directors of Developmental Disabilities Services (NASDDDS)
- Working with the Division of Developmental Disabilities (DDD)

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**The Initial Focus of Life Choices**

- Streamlining Prioritization of Urgency of Need for Services (PUNS) database
- Improving service planning, service implementation and service monitoring

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### What We Heard People Say They Wanted.....

- Respect
- Job & money
- My own bedroom
- Friends
- To be treated like an adult
- Family to support and love me
- More freedom
- The opportunity to make meaningful choices



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### Division of Developmental Disabilities Outcomes

People with intellectual/developmental disabilities who receive services...

- Will be healthy and safe
- Will have real relationships with family and friends
- Will have a paying job, if they want to work
- Will make decisions about their lives
- Will have opportunities to contribute to their community

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Life Choices is made up of

**6 Work Teams  
&  
Steering Committee**



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Work Teams	Steering Committee
<ul style="list-style-type: none"> <li>• Family members</li> <li>• ISC representatives</li> <li>• Service Provider representatives</li> <li>• Statewide Membership organization representatives</li> <li>• Staff members from Bureaus of the Division of Developmental Disabilities</li> </ul>	<ul style="list-style-type: none"> <li>• Illinois Council on Developmental Disabilities</li> <li>• National Association of State Directors of Developmental Disabilities Services</li> <li>• Division of Developmental Disabilities</li> </ul>

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### Life Choices Teams

**Team 1: Support Coordination Enhancement**  
Define role of service coordinators under the new system

**Team 2: Intake and Eligibility**  
Develop strategies to help individuals and families better navigate our complex system

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### ...Life Choices Teams

**Team 3: PUNS and HCBS Enrollment**  
Respond to feedback from individuals and families regarding PUNS

**Team 4: Plan and Provider Selection**  
Person Centered Planning

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### ...Life Choices Teams

#### Team 5: Monitoring and Quality

Establish better collaboration of ISC and provider agencies; better quality, improved health and safety outcomes

#### Team 6: Business Process

Resources and supports needed; changes in business rules and practices



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### The Steering Committee

- Review team recommendations.
- Determine implementation and impact.



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### Federal Mandates Impacting Life Choices

- Centers for Medicare and Medicaid Services (CMS) Home and Community Based Services (HCBS) Regulations
- Published in January of 2014
- Effective March 2014
- Impacts all 1915c HCBS Waivers



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### 1915C HCBS Waiver

Within Federal guidelines, States can develop home and community-based services waivers (HCBS Waivers) to meet the needs of people with disabilities who prefer to get long-term care services and supports in their home or community, rather than in an institution.

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### 1915c HCBS Waivers in the DD System:

- Children’s In Home Support Waiver 
- Children’s Residential Waiver 
- Adult Waiver   

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### What’s the purpose of the 2014 HCBS Regulations?

To ensure that individuals receiving long-term services and supports through HCBS programs have:

- Full access to the benefits of community living
- The opportunity to receive services in the most integrated setting appropriate

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**HCBS Regulations Addresses  
3 Broad Areas:**

- 1) Conflict of Interest Free Case Management
- 2) Person Centered Planning
- 3) Settings

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**Conflict of Interest Free  
Case Management**

*CMS requires* States to separate case management from service delivery functions.



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**What does Conflict of Interest Free mean?**

- ✓ Case Management must be done by someone other than a relative of the person served
- ✓ Case Management must be done by someone other than a direct provider of service
- ✓ Case Management must be done by someone who does not have a financial interest in a provider or is not employed by a provider

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**How will this be different from our current system?**

Currently:	Beginning July 1, 2017:
<ul style="list-style-type: none"> <li>• Qualified Intellectual Disability Professional or Service Facilitator at the provider agency serves as the case manager</li> <li>• The Qualified Intellectual Disability Professional or Service Facilitator at the provider agency coordinates all services for the person. According to CMS, this is a <u>conflict of interest</u>.</li> </ul>	<ul style="list-style-type: none"> <li>• ISC serves as the case manager</li> <li>• ISC will coordinate services and the provider agency will implement services = <u>conflict of interest free</u></li> </ul>

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**Conflict of Interest Free Case Management**

“A case manager's job is to help the person and family become well-informed about *all* choices that may address the needs and outcomes identified in the plan”

CMS, Division of Long Term Services and Supports Disabled and Elderly Health Programs Group Center for Medicaid and CHIP Services

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**What is the role of the Case Manager?**

- To determine eligibility
- To assist with identifying the provider of choice
- To develop the Personal Plan
- To monitor the Plan



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**Person Centered Planning** 

- Addresses health and long-term needs in a manner that reflects the persons preferences and desires
- Is directed by the person receiving Waiver services
- Includes others chosen by the person

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**...Person Centered Planning**

- Assists people to achieve defined outcomes in the most integrated setting
- Ensures services are delivered in a manner that reflects personal preferences and choices
- Contributes to the assurance of health and welfare of the person receiving services

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**...Person Centered Planning**

- Must include evidence that the setting is chosen by the person receiving services
- Must include opportunities to seek employment & work in competitive integrated settings



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**Person Centered Planning Includes opportunities to:**

- Engage in the community
- Control personal resources
- Receive services in the community to the same degree of access as those not receiving Medicaid HCBS

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**Person Centered Planning**

- Identifies risk factors and the measures to minimize risk
- Must be developed in plain language that can be understood by the person who receives services

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**How will this be different from our current system?**

Currently	Beginning July 1, 2017
<ul style="list-style-type: none"><li>• Qualified Intellectual Disability Professionals or Service Facilitators at the provider agency coordinates supports and services</li><li>• Individual Service Plan is developed for the person.</li></ul>	<ul style="list-style-type: none"><li>• Independent Service Coordinator coordinates supports and services.</li><li>• A Person Centered Plan is developed by the person and the Independent Service Coordinator</li></ul>

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## Settings

“CMS is moving away from defining home and community-based settings by **what they are not**, and toward defining them by the nature and quality of individuals’ experiences. Setting provisions in this final rule establish a more outcome-oriented definition of home and community-based settings, rather than one based solely on a setting’s location, geography, or physical characteristics.”

Robin Cooper, NASDDDS

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## Settings Overview

- Medicaid Waiver provider agencies have a 5 year window, beginning March 2014, to become compliant with this regulation.
- Medicaid Waiver provider agencies completed a self-assessment of their compliance to the new Rule.
- Bureau of Accreditation, Licensure and Certification (BALC) verified the self assessments by conducting on-site visits to a sample of the agencies.
- The Division of DD, Healthcare and Family Services and BALC review agencies Corrective Action Plans.

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## Settings

- The setting is integrated in and supports full access to the greater community
- Is selected by the individual from among setting options
- Ensures individual rights of privacy, dignity and respect, and freedom from coercion and restraint

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### ...Settings

- Optimizes autonomy in making life choices
- Facilitates choice regarding services and who provides them



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### Settings: Provider-owned or controlled housing

- ✓The person has a lease or other legally enforceable agreement providing similar protections
- ✓The person has privacy in their unit including lockable doors, choice of roommates and freedom to furnish or decorate the unit

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### Settings: Provider-owned or controlled housing

- ✓The Person controls his/her own schedule including access to food at any time
- ✓The Person can have visitors at any time
- ✓The setting is physically accessible

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**Want More Information?**

- **Medicaid, Home & Community Based Services**  
<https://www.medicaid.gov/medicaid/hcbs/index.html>
- **Federal Register**  
<https://www.federalregister.gov/articles/2014/01/16/2014-00487/medicaid-program-state-plan-home-and-community-based-services-5-year-period-for-waivers-provider>
- **Fact Sheet- Settings Final Rule**  
<https://www.medicaid.gov/medicaid/hcbs/downloads/hcbs-setting-fact-sheet.pdf>

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**...More Information**

- **Life Choices**  
<http://www.dhs.state.il.us/page.aspx?item=70455>
- **PUNS Database**  
<http://www.dhs.state.il.us/page.aspx?item=85196>

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**What's Next?**



- **Additional Information/Training Sessions:**
  - Person Centered Planning
  - Discovery Tool & Personal Plan Development
  - Implementation Strategies
  - Monitoring of the Person Centered Plan
- Phase in Person Centered Plan process beginning July 1, 2017
- Revision of current Rules and forms to align with CMS regulations

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### Contact Information

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