

MEMO

To:	Office of the Budget
From:	Brian J. Hartman
Subject:	FY 07 Division of Developmental Disabilities Services Budget
Date:	November 22, 2005

Please consider this memo a summary of the oral presentation of Brian J. Hartman on behalf of the Developmental Disabilities Council, the State Council for Persons with Disabilities, and the Disabilities Law Program. We are addressing two (2) components of the DDDS budget today: 1) the community-based residential program; and 2) the family support Medicaid waiver.

I. COMMUNITY-BASED RESIDENTIAL PROGRAM

As you know, Delaware has historically lagged behind the Nation in providing non-institutional services to residents with mental retardation. However, Delaware is improving. For example, the American Association on Mental Retardation [“AAMR”] rates states based on fiscal support for institutions versus community programs. Delaware’s ranking improved between 2000 and 2004, demonstrating a shift in resources to a community-based system:¹

	2000	2004	Rank Improvement
Fiscal Support for Institutions	5	18	13 states
Fiscal Support for Community Programs	31	30	1 state

Similarly, the University of Minnesota compiles data on institutionalization rates of persons with mental retardation on an annual basis. Over the past five (5) years, Delaware’s ranking has improved from 47th to 33rd among the states (and D.C.):²

	6/01 Report	6/02 Report	6/03 Report	6/04 Report	6/05 Report
Rank	47	46	38	33	33
Institutionalization Rate Per 100,000 of Population	32.3	26.9	22.5	20.3	16.3

¹D. Braddock, Ph.D., et al, AAMR, The State of the States in Developmental Disabilities, Table 17 (2004) and Table 17 (2005). [Attachment “A”] The tables measure fiscal effort, defined as “a state’s spending for MR/DD services per \$1,000 of total state personal income.

²R. Prouty, University of Minnesota, Residential Services for Persons with Developmental Disabilities”: Status and Trends Through 2004, Table 1.5 (June, 2005). [Attachment “B”] The table measures the number of residents with MR/DD in large (16+ beds) institutional settings per 100,000 of the general population. Tables from 2004, 2003, 2002 and 2001 reports could be provided on request.

Much of this improvement is attributable to implementation of the Division's strategic plan which contemplates significant progress in diverting clients to a community-based support system. The plan envisions offering 60-80 individuals from Stockley and the community waiting list (a/k/a "Registry") to an appropriate community-based residential setting annually.³ In conformity with the plan, the Stockley census has been significantly reduced to approximately 99 residents.

Recommendation

We understand that the Department's proposed (FY 07) budget incorporates funding for an aggregate of approximately 73 new community residential placements covering Stockley residents, "at-risk" individuals from the "Registry", and special school graduates. This is roughly equivalent to the number of similar placements included in the FY 06 budget and conforms to the Division's strategic plan.

We wholeheartedly support continued diversion of Division clients to community options. With proper planning, the fiscal impact of implementation need not be burdensome. For example, the Stockley Center per diem rate exceeds \$510.00, approximately \$186,000. annually. Group homes, apartments, and foster homes are far less expensive alternatives, especially if subsidized by the Division's existing HCBS Medicaid waiver.

II. FAMILY SUPPORT WAIVER

Delaware has historically underutilized Medicaid HCBS waivers to support persons with developmental disabilities. In 2004, Delaware ranked 50th among the states (and D.C.) in the number of participants in Medicaid HCBS waivers.⁴ Only 9 states (and D.C.) had fewer participants in HCBS waivers as a percentage of population.⁵ Moreover, Delaware ranked 50th among the states (and D.C.) in the net increase in waiver participants between 1995 and 2004.⁶

The Division would like to implement a new family support waiver. The waiver would primarily serve DDS clients living with natural families. The proposed waiver would cover case management; family education and training; day services (including supported employment and habilitation); and consolidated developmental services (including personal care, respite, environmental modifications, and assistive technology).

A recent Wall Street Journal article highlighted the critical need for these types of family supports.⁷

³Division of Developmental Disabilities Services, Shaping the Future: Strategic Plan (FY 2002-2007) (Rev. 1/04) at 18. [Attachment "C"]

⁴R. Prouty, University of Minnesota, Residential Services for Persons with Developmental Disabilities: Status and Trends Through 2004, Table 3.8 (June, 2005). [Attachment "D"]

⁵Id., at Table 3.11. [Attachment "E"]

⁶ Id., at Table 3.5b. [Attachment "F"]

⁷"Needing Assistance, Parents of Disabled Resort to Extremes", Wall Street Journal (September

The article provided insightful descriptions of the overwhelming obstacles faced by families attempting to meet the needs of adults with developmental disabilities. Delaware is no exception. Earlier this year, the National Association of Directors of Developmental Disabilities Services published a report comparing consumer outcomes among 15 participating states. Delaware ranked second to last in the category of “proportion of persons who report that needed services were not available”.⁸ It is clear that families would benefit from the availability of flexible support services. The financial advantage to the Division is the leveraging of Federal funds to provide these services through its proposed HCBS waiver.

Recommendation

We are very supportive of this initiative. We recommend that the Division be accorded sufficient funds to ensure the availability of the State match for the waiver.

Thank you for your consideration of our comments.

Attachments

F:pub/bjh/legis/ddbud07

20, 2005) [Attachment “G”]

⁸National Association of State Directors of Developmental Disabilities Services, Consumer Outcomes, Phase VI Final Report, FY 2003-2004 Data (January, 2005), p 78. [Attachment “H”]