

Oak Hill Comments Regarding the Department of Developmental Services Five Year Plan, December 22, 2016

We welcome the direction of the DDS 5 Year Plan and commend Commissioner Murray and her staff for their work in its development.

For the Plan to be realized and have a significant positive impact on the lives of people with intellectual and developmental disabilities in Connecticut, it will be essential to include the widest range of stakeholders in developing the implementation plans necessary for success.

Non-profit providers are one of those stakeholders. The provider community can and desires to be part of the solution, for people with disabilities, their families and the State, providing both cost-effective and quality services. This is evidenced on a daily basis by the people we support and has been well-documented in the Legislative Program Review and Investigation Committee report of January 2012. It should be noted that the cost differentials described in the report have only grown even larger since that time.

A full continuum of care is needed to meet the needs of all persons with I/DD served by the DDS. This continuum needs to be designed to provide the right service at the right time at the right price. It needs to be flexible enough to meet people's needs now and when they may change in the future.

We hope this plan will be the basis of a groundswell of ideas to develop that continuum, in support of the progressive themes in the Plan. We hope that the Plan is embraced by all in the department, and that DDS as a whole will embrace the creativity of the private sector.

We believe there can be some early wins in the implementation of this Plan, starting with the idea that overregulation does not ensure quality and most definitely inhibits creativity (ref. Quality Redesign, p. 27).

- The Quality Service Review (QSR) was designed to replace the licensing process by embedding licensing requirements within the outcomes measures. Redundancy of effort in the current QA processes is costly and takes resources away from real quality improvement.
- Deemed Status is a proven alternative to the State's multiple licensing processes. The national
 accreditation processes used in lieu of licensing meet and often exceed the standards of licensing.
- Community Companion Homes (known more generically as 'Host Homes') can be an integral part of
 the Continuum of Care. However, the current licensing process acts as a disincentive to prospective
 hosts. A vetting process that focuses on outcomes and provides the incentive of startup funding could
 go a long way in making this a more viable (and quite cost efficient) way to support more individuals.

Opportunities of efficiency and effectiveness through the use of Electronic Health Records (EHR) are not being realized as the DDS has not accepted a common platform or developed the capacity to interact with those agencies that themselves are utilizing electronic records to better serve their program participants and their families. Solutions are currently available and, if utilized, could produce another early win. (ref. Modernizing data Systems, p. 26).

Developing a rational rate system will be critical to further developing the capacity in the private sector to meet the needs of those served through the DDS system. A move from the LON-based system to one which recognizes a broader array of factors in determining rates is needed and can be developed consistent with the Centers for Medicare and Medicaid Services' framework of being Person-driven, Inclusive, Effective and Accountable, Sustainable and Efficient, Coordinated and Transparent and Culturally Competent. Incentives for achieving the Triple Aim should be part of the rate process as well.

Again, we believe this to be an ambitious, progressive and challenging Plan. The private non-profit provider community can be a key to its success.

Our Mission: Oak Hill sets the standard, partnering with people with disabilities, to provide services and solutions promoting independence, education, health and dignity.