

Item 314 #1s

Health And Human Resources

Department Of Behavioral Health And Developmental Services

Language:

Page 285, after line 18, insert:

"M. At least six months prior to the closure of a state intellectual disabilities training center, the Commissioner of Behavioral Health and Developmental Services shall conduct a comprehensive survey of each individual residing in the facility slated for closure to determine the services and supports the individual will need to receive appropriate care in the community. The survey shall also seek input from the individual's authorized representative to determine the desired placement of the individual and how that desired placement will be accommodated. The survey shall also determine the adequacy of the community to provide care and treatment for the individual, including but not limited to, the appropriateness of current provider rates, adequacy of waiver services, and availability of housing. The Commissioner shall report quarterly findings to the Governor and Chairmen of the House Appropriations and Senate Finance Committees beginning October 1, 2013."

Explanation: (This amendment requires the Commissioner of DBHDS to evaluate the needs of individuals residing in Intellectual Disabilities Training Centers at least 6 months prior to its closure. The survey is designed to assess the patients medical and care treatment needs and the capacity of the community to address those needs. The Commissioner is required to provide quarterly reports on his findings beginning October 1, 2013.)

Item 314 #3h

Health And Human Resources

Department Of Behavioral Health And Developmental Services

Language:

Page 285, after line 18, insert:

"M.1. The Commissioner of the Department of Behavioral Health and Developmental Services (DBHDS) shall provide quarterly reports to the House Appropriations and Senate Finance Committees on progress in implementing the plan to close state training centers and transition residents to the community. The reports shall provide the following information on each state training center: (i) the number of authorized representatives who have made decisions regarding the long-term type of placement for the resident they represent and the type of placement they have chosen, (ii) the number of authorized representatives who have not yet made such decisions; (iii) provider capacity in the region in which each training center is located by type of service to meet the needs of individuals choosing community placement, (iv) barriers to discharge, and (v) the general fund and nongeneral fund cost of the services provided to individuals transitioning from training centers, including the cost of any wrap-around services being provided, and (vi) the use of increased Medicaid reimbursement for congregate residential services to meet exceptional needs of individuals transitioning from state training centers in fiscal year 2014, provided in item 307, paragraphs BBB.1. and BBB.2.

2. The department shall convene quarterly meetings with authorized representatives, families, and service providers in Health Planning Regions I, II, III and IV to provide a mechanism to (i) promote routine collaboration between families and authorized representatives, the department, community services boards, and private providers, (ii) ensure the successful transition of training center residents to the community, and (iii) gather input on Medicaid waiver redesign to better serve individuals with intellectual and developmental disability.

3. In the event that provider capacity cannot meet the needs of individuals transitioning from training centers to the community, the department shall work with community services boards and private providers to explore the feasibility of developing (i) a limited number of small community group homes or intermediate care facilities to meet the needs of residents transitioning to the community, and/or (ii) a regional support center to provide specialty services to individuals with

intellectual and developmental disabilities whose medical, dental, rehabilitative or other special needs cannot be met by community providers. The Commissioner shall report on these efforts to the House Appropriations and Senate Finance Committees as part of his quarterly report, pursuant to paragraph 1."

Explanation: (This amendment adds language requiring the Commissioner of the Department of Behavioral Health and Developmental Services to provide quarterly reports to the House Appropriations and Senate Finance Committees to determine how many residents of state training centers are choosing community placements, the existence of provider capacity in the health planning region in which the training center is located, barriers to discharge, and costs to transition individuals into the community including additional Medicaid reimbursement for congregate residential services to meet the complex medical or behavioral needs of individuals transitioning from state training centers. Language also requires the Department to convene quarterly meetings with families, authorized representatives, community services boards and private providers to provide a mechanism for communication and collaboration to ensure successful transition to the community. Finally, language requires the agency to work with community services boards and private providers to explore the feasibility of developing a limited number of small group homes, intermediate care facilities or regional support centers if provider capacity cannot meet the needs of individuals transitioning from training centers to the community.)