

## **Individualized Home Supports (IHS) Work Group Summary Report – December, 2010**

The Individualized Home Support/Residential Work Group, consisting of representative from the private provider community and DDS was convened to address the impact of the pending transition to fee for service rates on residential services, beginning with Individualized Home Supports (IHS). IHS provides assistance with the acquisition, improvement and/or retention of skills to enhance an individual's ability to live in one's own home or family home.

The work group has discussed the diverse supports and types of settings provided under the category of Individualized Home Supports. These include: supports provided within a family home versus an apartment setting; 24 hour settings versus less than 24 hour supports; "cluster" supports; specialized support settings (multi-lingual, hearing impaired, mental health) versus settings for individuals with intellectual disability; and direct versus indirect supports. The work group collected and analyzed data via a survey to all IHS support providers.

The work group has established a new service category for non-licensed settings providing 24 hour support called Continuous Residential Supports (CRS) and analyzing a new funding methodology based around the individual's level of need.

The work group's initial recommendations include:

- An annualized funding amount and the number of hours of support determined by the individual's level of need.
- The individual would be able to customize the type of supports within the identified annualized amount.
- Development of a new IHS rate based on the costs associated with providing direct supports to the individual.
- Development of a "Safety Net" (indirect support) rate. Based on a participant's Level of Need (LON), the provider would receive a fixed amount for providing at least one unit of residential IHS supports during the month. The monthly amount would reimburse agencies for providing 24 hour access to staff and emergency supports and for maintaining an individual's entitlement funding, Title 19 health insurance, etc. As long as a unit of IHS support was provided for the month, the safety net amount would be paid.
- A mechanism to pay agencies for overnight supports provided by one staff to a number of DDS participants living in separate apartments within a close geographical area.
- A mechanism to determine the number of hours and rate for Healthcare Coordination based on the health and behavioral scores from the LON.

The IHS work group expects to make final rate structure recommendations in early 2011.