



***Department of Intellectual &  
Developmental Disabilities  
Budget Hearing***

***December 2, 2014***



# Customer-Focused Government Goals

## Health & Welfare

## Fiscal Strength & Efficient Government

### Key Operational Goals

- Continue to integrate population DIDD serves into the broader community by transitioning 100 percent of the people residing within CBDC to Middle TN Community Homes.
- Operate the Home and Community Based Medicaid Waiver Programs to ensure continued federal reimbursements and minimize state liabilities in order to maximize the number of persons receiving services.

- Implement Annual Individual Expense Cap for people in the Statewide Waiver.

### Strategic Initiatives

- Manage existing and any new resources in the most cost effective manner in order to increase enrollment across HCBS programs to address people waiting for services who have intellectual and developmental disabilities (including existing 1915 (c) waivers operated by DIDD and the new MLTSS program, Managed Care)
- Improve customer's quality of life by being the first state delivery system for intellectual disabilities to be accredited by January 2015.

- Continue development and implementation of Project Titan, an integrated information management system.



# DIDD Successes

## Program Operations

- **Legal**
  - Dismissal of Arlington Lawsuit Dec 2013
  - Initiated court-ordered mediation in the Clover Bottom lawsuit
- **Employment**
  - Executive Order 28 - TN Employment First Initiative. Completed 1<sup>st</sup> year report
- **Health Services**
  - Centralized Assistive Technology
  - Launched IDD toolkit
- **Policy and Innovation**
  - Assisted TennCare in waiver renewal submission to CMS on October 1
  - Worked with TennCare to develop a concept paper for future programs
- **Quality Assurance**
  - Assumed responsibility from DOH for surveying private ICF/IID's

## Administration

- **Fiscal Services**
  - Closed FY2013-14 on-time and within budget
  - Completed centralization
- **IS & Project Management**
  - Implemented the first stage of Project Titan
  - Developing reporting functions necessary for implementation of annual individual expense cap for HCBS waiver-funded programs
- **Facility Management**
  - Moved from leased space
  - Completed construction of 4 homes in middle TN and 3 homes in east TN
- **Human Resources**
  - Completed first annual performance evaluations under new SMART performance planning
  - Completed centralization



# DIDD Challenges

- **Cost Containment**

- HCBS waiver individual annual expense cap – coordinating implementation based on an unknown approval date by CMS
- Serving an aging population with increasing health needs
- Continued operation of a developmental center with a census below 100 people
- West Regional Office utilities - use of former developmental center buildings as office space

- **Information Systems**

- Project Titan – implementation vendor contract expired. Currently seeking a qualified implementation CRM vendor to complete the project.

- **Waiting list for services**

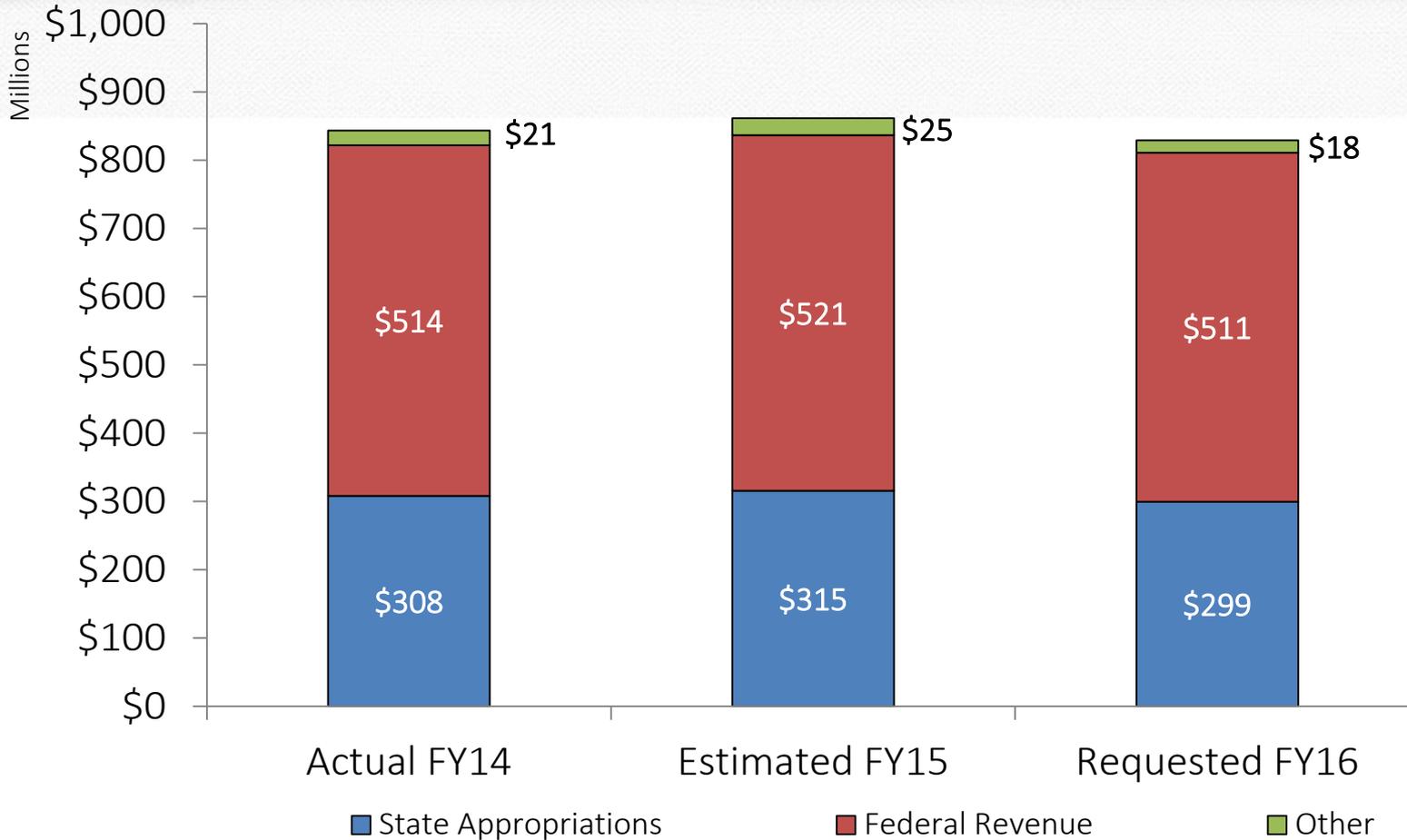
- Serve more people with limited resources
- Serve people with developmental disabilities

- **Human Resources**

- Continuing to operate existing waivers for 7800 people while expanding DIDD's role in managed care
- CMS approved transition plan requires DIDD self-assessment and oversight of provider self-assessments
- Continuous work necessary to maintain system accreditation once awarded



# Revenue Sources





# Proposed Reduction Plan

Priority	Category	Reduction Description	State Savings
1.	Program & Operations	Cost reallocation	\$1,477,700
2.	Program & Operations	Reduce 61 filled and 8 vacant positions, payroll expenses, some operating expenses, and service contracts at Developmental Centers and public ICFs.	\$2,216,800
3.	Program & Operations	Reduce waiver payments for special needs adjustments	\$1,151,700
4.	Program & Operations	Eliminate 7 filled and 2 vacant positions and reduce payroll and operational expenses at Resource Centers	\$592,300
5.	Program & Operations	Abolish 14 filled and 2 vacant positions and reduce payroll and operational expenses in administration (Additional State Savings in Department of Health of \$13,600)	\$497,500
6.	Program & Operations	Reduce travel, training, support program contract funding, various contracts, and funding for people who have aged out of DCS services	\$314,700



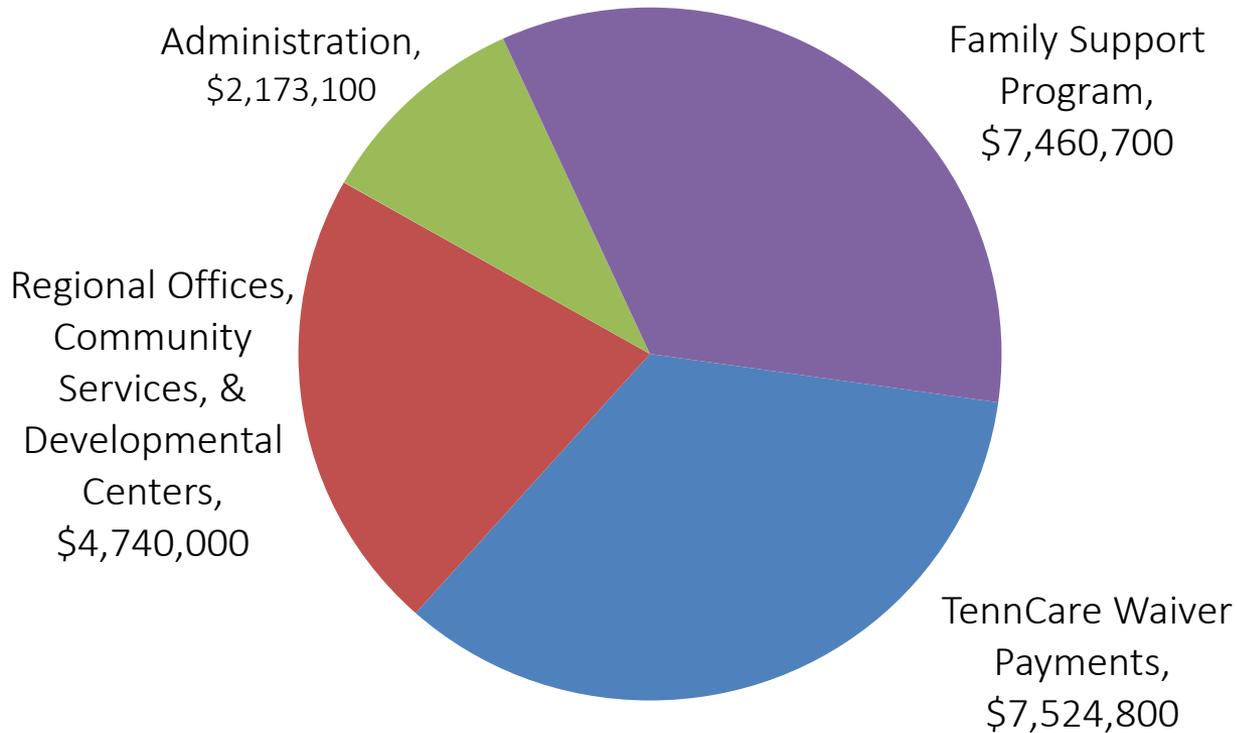
# Proposed Reduction Plan

Priority	Category	Reduction Description	State Savings
7.	Program & Operations	Abolish 4 filled positions in Protection from Harm.	\$101,100
8.	Program & Operations	Reduce 17 filled and 3 vacant positions in regional offices and reduce payroll and operational expenses.	\$1,354,800
9.	Program & Operations	Reduce 6 filled positions in administration.	\$197,900
10.	Program & Operations	Reduce 4 filled positions; 2 at the middle and east assistive technology clinics.	\$160,300
11.	Program Elimination	Eliminate the Family Support Program, reduce 1 filled position ( <b>Offered in past years</b> )	\$7,460,700
12.	Program & Operations	Implement a 2.75% across-the-board rate reduction of waiver services excluding dental services.	\$6,373,100
	<b>Total Savings</b>		<b>\$21,898,600</b>



# Proposed State Dollar Savings By Program

Total Reductions = \$21,898,600



# Proposed Cost Increases

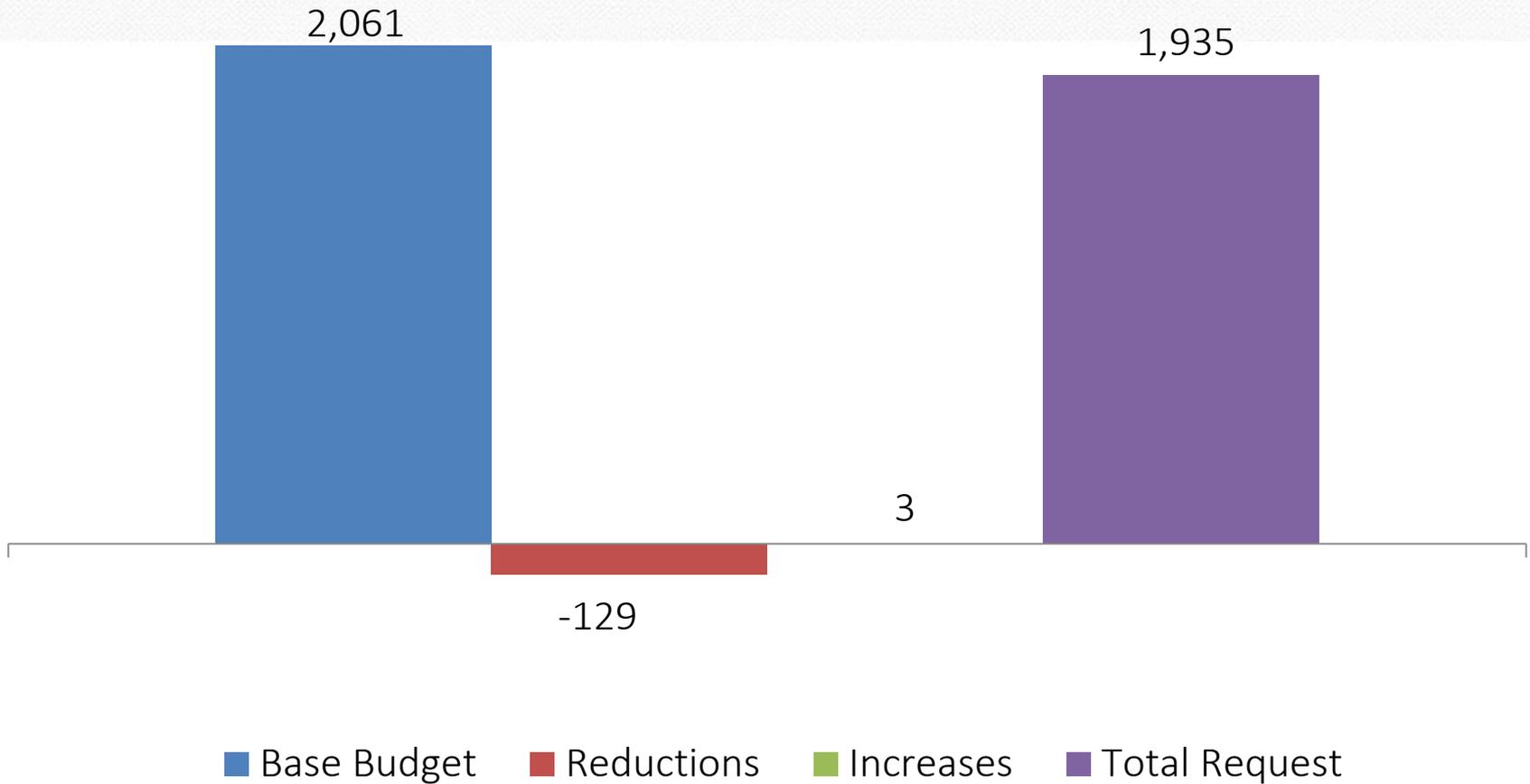
	Increase	Total	State	Federal	Other	Positions
1.	Organized Health Care Delivery System – To correct an erroneous revenue estimate	\$0	\$1,004,700	\$(1,004,700)	\$0	0
2.	Transition Therapy Services – To help with the transition from Clover Bottom to community homes, 2 months of payroll costs for 3 therapists	\$38,000	\$13,300	\$24,700	\$0	3
3.	Facility Study – A facility study for a new west regional building in Shelby County	\$50,000	\$50,000	\$0	\$0	0
4.	DIDD recommendation for TennCare Waiver Payments	\$19,489,800	\$6,808,800	\$12,681,000	\$0	0
	<b>Total Cost Increases</b>	<b>\$19,577,800</b>	<b>\$7,876,800</b>	<b>\$11,701,000</b>	<b>\$0</b>	<b>3</b>



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# Request Summary

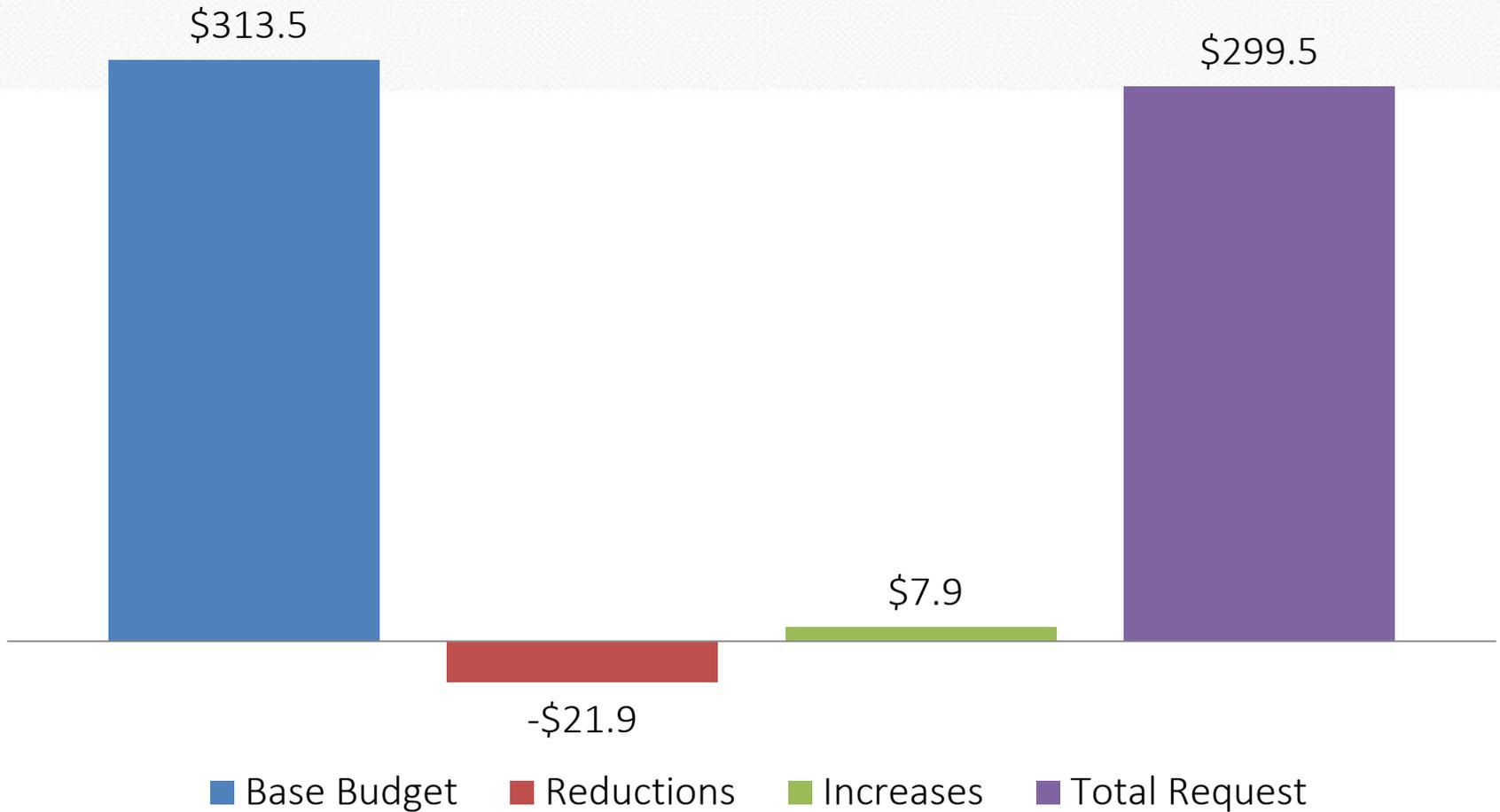
## *Authorized Positions*





# Request Summary

*State Appropriations (in millions)*



# Authorized Positions

