

# Unbundling Residential Services IDD Workgroup

10 AM – 12 PM  
7/11/2023

## Meeting Attendance

Organization	Representatives
WSU	Cy Rogers, Zane May
KDADS	LaTonia Wright
CALM	Amy Harmon
DSNWK	Janet Bolander
Johnson County Developmental Supports	Sarah Schlitter
Tri-Ko Inc	Michelle Chester
	Kathy Brayton
Sedgwick County CDDO	Shelley Herrington
UHC	Carrie Kimes
CDDO of Butler	Rikki Lane
	Ronisha Coleman
Mosaic	Ambrosia Belchic
Mandala	Chelsea Jackson
	Ed Bokern
	Chelsea Jackson

## Welcome/Introduction

Agreements Suggested:

- Focus on individual and keep them in mind when making recommendations

## Workgroup Background

Notes from meetings will be sent out after the first round of meetings. Once the first round of meetings has been completed the notes will go out and will be posted on the website. Participants will be able to provide comments on these notes and other groups work. These comments will be folded into the next notes.

There were no questions on the background of the workgroups or how they were established.

## Purpose & Resources

A participant asked if states in the report had been found to be in compliance/more in compliance than Kansas with the Final Rule. There was no data available during the meeting to answer this question.

I think behavioral residential settings are interesting, because complex needs are a concern across the state, so if these settings can help, it's worth looking into.

I believe the 15 minute increment billing for residential services would be a nightmare for accounting and billing. There was agreement from others in the group.

Reimbursing providers adequately for services provided is important.

Looking into remote staffing and smart home technology as enhanced supports when appropriate.

Since day service providers can only bill for up to 5 hours per day it has put more responsibility on the residential providers.

Back to the first question about definitions. We would like to see the definitions different between children in Foster Care vs. Children Residential.

Make sure the implementation is practical on a daily basis and meets the state goals

I would agree. Not that we're here to discuss day services, but some day programs only allow people to be dropped off after 10 am or picked up by 2 or 3 pm. Which can be difficult for staffing.

There should be some type of adjustments to billing for different levels of support. (in person, technology, 24 hours care, etc).

Independent Living supports - being able to bill for services that aren't technically "in person." There was support for this from others in group.

Residential services being available to all individuals 24 hours of the day if they DONT WANT to go to Day Services. Too often we are seeing an automatic push for individuals to have Day services if they are allocated Residential Services

## **Discussion**

### Setting Type Definitions

#### Group Home

Residential habilitation provided in a single residential setting accommodating at least four, but no more than eight persons which is licensed by the state and in which services and supports are provided to persons with intellectual and developmental disabilities.

Unrelated people who have an IDD diagnosis, who choose to live in the same residence. On a side note, we have group homes that consist of 3 - 5 people. Sometimes siblings would like to live together, I would leave the unrelated word out. There was agreement on this. Doesn't Final Rule include individuals who do not have intellectual or developmental disabilities in settings? LaTonia – Yes, Final Rule should allow individuals to have choices of where they live, including residential settings with people who do are not on the IDD waiver.

## Independent Living

I like Missouri's definition of Individualized Supported Living in the summary report. This received a thumbs up.

3<sup>rd</sup> line down community activities (more of a definition for day service than what they receive in home such as ADL).

Having an option for more than 2 people to live together, if that is their preference. I'm not sure why we would limit it to 1 - 2 people living together.

## Shared Living/Host Homes

No recommendations.

## Children's Residential

There's been an overlap of definitions between KDADS and DCF and there needs to be better definitions and clarity to show different programs. CPAs license all foster homes as required by regulations, after SRS divided into KDADS and DCF it also split oversight between the two agencies for children on HCBS waivers in foster care, but we are trying to get clarification about whether CMS regulations apply to these children since they are in DCF custody and providers are following DCF rules and regulations.

Isn't there a difference between children in DCF custody and children going through residential who are not in custody? LaTonia – it's not clear going back and forth between the agencies. It has been a concern with Final Rule compliance. Participant - I think it should depend on the funding source. CPAs receive money for custody services due to abuse and neglect. There's also money from KDADS for children who are not under DCF custody, but they are receiving HCBS services. There are children on IDD waiver who are in temporary foster care and the money is to support them as they get ready to return to their family. There are children who might thrive if they could be in larger homes with more peers, and it could be in the best interest of the foster family because limiting their choice when they foster children with IDD could isolate them from the community. Adults are being given the choice to live with people who don't have IDD, but children are being forced into homes together.

That is like Shared Living for children. Arizona does something similar. Home gets licensed by state to care for children in an integrated environment. Participant will share more information with WSU to send out to the group.

Children Residential prior had a definition called Supported Family Living – is funded by Medicaid only. It provides 24/7 services for a child qualified for IDD Children Residential. A licensed professional home, sponsored by a licensed CPA (Child

Placement Agency) is the provider regulated by DCF for compliance of children in licensed homes. KDADS utilizes licensed homes for out of home placements (Children Res) Children placements providers are licensed by DCF for all compliance of children care in KS. These parents are not foster parents for children utilizing for KDADS– who is defined as a parent who fosters a child in DCF custody. Children Residential supports are professional providers - requirements for “professional’ training and continuing education per oversize of CPA

Congregate Residential (over 8, inappropriate for HCBS)

Why do we need to define it?

LaTonia – We have found these settings when doing Final Rule assessments, and it needs to be defined so that we can stop HCBS funding for them until they come into compliance.

Other Settings Types to Consider

Colorado provides a service where Family Caregivers can provide residential care for a family member receiving IDD services. This is provided intermittently and 24 hour.

Should we add ages to distinguish between children and adult residential in definitions? Children’s Residential includes ages, could be useful to other definitions. The inclusion of age 22 is a buffer for people who remain in educational services until they are aged out. We have included 18 and over as adult residential.

Private Respite for children and adults.

Other resources needed?

No responses.

What would be helpful before the next meeting?

No responses.

Do the states approved for Final Rule have ideas for setting types? LaTonia – Their information is online and you can look at their plans and their services.

## **Wrap Up**

WSU and KDADS will share the draft definitions with group to review. Please send any other ideas or resources you think of as soon as possible to include them.

# Unbundling Residential Services IDD Workgroup

9 AM – 11 AM  
8/1/2023

## Meeting Attendance

Organization	Representatives
WSU	Cy Rogers, Zane May
KDADS	LaTonia Wright
CALM	Amy Harmon
DSNWK	Janet Bolander
Johnson County Developmental Supports	Sarah Schlitter
Tri-Ko Inc	Michelle Chester
	Kathy Brayton
Sedgwick County CDDO	Shelley Herrington
UHC	Carrie Kimes
CDDO of Butler	Rikki Lane
	Ronisha Coleman
Mosaic	Ambrosia Belchic
Mandala	Chelsea Jackson
	Ed Bokern
DPOK, Inc.	Mieke Hoeffner
AbleLight	Thomas Beattie

## Welcome/Introduction

Group reviewed the workgroup member agreements and did not have questions or request changes. Group called out focusing on the individuals who receive residential services.

## Purpose & Resources

Group reviewed purpose and did not have questions or request changes.

## Discussion

Residential definitions – Group reviewed current definitions for adult residential, group home, and shared living. Group considered whether to update language to change references of “his or her” and replace with gender neutral language. The group agreed to recommend making this change to the language.

A group member asked to make sure we include reference to person-centered living as a factor in the person living in one of these settings. Another group member echoed this comment and said large group homes become provider-centered.

Group home – KDADS shared that the current definition includes up to eight people because of conversations with DCF and their definition. There are some providers who provide over eight and there's concern that it is close to institutionalization. Some providers have said four is the most to be home and community based. A group member shared their view that eight people is too many in an HCBS residential setting. Another group member said their preference would be four to seven for group homes and eight or more for institutional. A group member said the State had done work in the past and identified eight as a cap and communicated it for policy manuals and KMAP tracking, and that there are settings connected to common spaces with that many people and it will be a challenge to define these settings and how they should operate. KDADS informed the group that through on-site visits after the pandemic they have identified many settings that are operated closer to institutions and they will be required to make changes to continue providing HCBS. KDADS informed the group that some states are moving their settings to shared living arrangements and getting away from group home settings.

A group member shared the following definition: "A residential facility serving 8 or fewer residents, similar in appearance to a single-family dwelling and providing basic health supervision, habilitation training in skills of daily and independent living and community integration, and social support."

The group reviewed Colorado's definition: "Group Residential Services and Supports (GRSS) means residential habilitation provided in a single residential setting accommodating at least four, but no more than eight persons which is licensed by the state and in which services and supports are provided to persons with intellectual and developmental disabilities."

The group reviewed Georgia's definition: "Group Homes are licensed homes that serve up to four individuals with developmental disabilities who require intense levels of residential support. Group Homes provide a range of interventions that focus on training and support in one or more of the following areas: eating and drinking, toileting, personal grooming and health care, dressing, communication, interpersonal relationships, mobility, home management and use of leisure time."

A group member said there's been information that old settings are allowed to have four to eight and new settings must have four or less.

Group discussed allowing people to choose a roommate who is a family member. Need safe guards for people who choose to live with family because there are risks of financial abuse and overworking natural supports. KDADS informed the group that Final Rule permits people to live with who they want, but the current IDD waiver excludes family. Group shared that there would need to be clear parameters to show how services are provided to person and families not expecting providers to give them uncovered support. Group discussed allowing people with different providers to live together to support choice.

Group discussed standards around adult residential services for people living with family. Group member said 24/7 support would be difficult for 1:1 and would be better for people receiving intermittent supports based on specific need. Another group member said providers would set up monitoring as they do now in the environment. A group member said states like Illinois, Kentucky, Colorado, and Oregon are starting to include family in shared living.

Group reviewed their definition of Independent Living. Group discussed that this is often for up to three people in the setting. In Kansas there are a lot of settings with two. A group member mentioned up to four could be appropriate. Group discussed that this type of setting definition could help alleviate the waiting list with the new waiver and services that are being developed. A group member said including language about community could cross line into day services.

Group member asked "How are we defining creativity, flexibility, responsiveness and diversity? Interpretations can be difficult if that becomes a measure of services." A group member said this often looks like providers responding quickly to people in unique situations and this flexibility helps people remain in their home or community. Group member recommended amending to "ISL *could be* characterized" to be flexible.

Group discussed schedule and access. Including 24-hour availability could create an entitlement is beyond the needs of the person receiving services. Group member recommended 24-hour access, not 24 hours staffing.

Shared living definition – Group discussed how this definition from the shared living manual could be applied to the IDD waiver. A group member asked if there could be temporary situations where there are three people without turning it into a group home. KDADS said this might conflict with the other people's choice if they don't want to have temporary roommates move in with them.

Group member asked the group to consider adding family caregiver as an intermittent residential service.

Group member asked if definitions should include information about duplication from different agencies and their checkups and assessments to reduce duplication but provide quality services. There are three agencies doing the same checks. KDADS informed the group that there will be more checkups because CMS told the State they don't assess enough. Group said there might be better ways to do it. KDADS encouraged the group to share any recommendations.

#### Other Adult Residential Setting types

Group member said the three types identified by this group is simple and covers settings. There was agreement.

#### Children's Residential Setting Definition

Group reviewed the definition and considered changes. A group member recommended changing the name to show it's family living and not institutional, and recommended Supportive Family Living. Overtime the definition has become more restrictive, as shown by changing the definition from two unrelated children to two children who are Medicaid recipients, which makes it more restrictive for children who want to be integrated in a family setting. Another group member agreed with language that reflects supported living with foster family.

A group member asked about the status of foster care group homes. KDADS said there are around 10 or fewer. Group member said there should be two definitions to differentiate. A group member said they thought providers were getting out of this type of setting and becoming more like PRTFs. There are residential settings where children can't live with natural family but live with a foster family to avoid going to a PRTF.

Group reviewed Arizona definition from <https://des.az.gov/services/disabilities/developmental-disabilities/certification-licensing/developmental-home-licensing>

Group discussed ages of people and their ability to live together. Group member informed the group that families licensed to provide children's care is regulated through DCF and requires a CPA. There are regulations that prevent five year olds and twenty year olds from sharing rooms. KDADS asked about trans and non-binary children's rooming options. A group member informed the group that children are roomed by the gender identity in their plan. The program has dwindled and needs to be revitalized.

KDADS informed the group that they are working with multiple types of stakeholders to create these changes. A group member said they appreciate KDADS including different voices and stakeholders.

## **Wrap Up**

Notes will be sent out to this group and notes from other groups will be made available soon.

Group decided to review recommendations in email and there will be a shorter meeting for people who want to review live before concluding.

# Unbundling Residential Services IDD Workgroup

3 PM – 5 PM  
8/21/2023

## Meeting Attendance

Organization	Representatives
WSU	Cy Rogers, Zane May
KDADS	LaTonia Wright
CALM	Amy Harmon
Johnson County Developmental Supports	Sarah Schlitter
Tri-Ko Inc	Michelle Chester
SLI	Kathy Brayton
Sedgwick County CDDO	Shelley Herrington
UHC	Carrie Kimes
CDDO of Butler	Rikki Lane
Mandala	Chelsea Jackson
Mosaic	Molly Kennis

## Discussion

### Adult Residential

#### Independent Living

- Individualized Supported Living (ISL) services provide individualized supports, delivered in a personalized manner, to individuals who live in homes of their choice with four or less individuals. Individuals receiving ISL supports may choose with whom and where they live and participate in the community and community at their own discretion. ISL could be characterized by creativity, flexibility, responsiveness and diversity.
- The group did not ask questions or recommend changes.

#### Group home

- Group reviewed KAR 30-63-30 (b)(2)(B) which is a reference point for the justification of why eight is the maximum number of people in residential settings.
- A group member asked if a group home is a facility that is operated by the residential provider. Group member asked if people choose to live in settings with more people how it's not considered independent living.
- Group member said they appreciate seeing independent living be expanded to four instead of one to two. See independent living being a model where people require less services, and group homes often have people who have enhanced supports.
- Think there should be a difference between provider operated and independent living where people have their own leases/mortgages.

- Discussion about different provider models. Some providers maintain the ownership and lease of a setting, whereas some providers do not own or lease any of the settings where they provide services for people.
- Group raised the issue of needing to understand whether the definition is about the service or the setting.
- KDADS informed the group that the State is needing to define setting types for continued partnership with CMS.
- Group member identified the need to have clear guidance about how setting type impacts billing procedures, and how determination is made.
- Group member said as a provider it would be important to their settings and services to differentiate between provider owned/operated and not provider owned/operated.
- KDADS informed the group that CMS has mandated all settings where IDD residential is provided to be included in Final Rule requirements. Even if the setting is not owned, it is considered provider operated.

#### Shared Living Adult

- No questions or recommended changes.

#### Children's Residential

##### Shared Living

- No questions or recommended changes.

##### Supportive Family Living (Children's IDD Residential)

- Change language to no more than four children. CPAs can help homes with processes in special circumstances.

Group member asked what the difference between this service and a foster family receiving a service in home. Group member shared that there are different service codes used. There are situations where children are in private placement outside of natural family home, and billing children's residential will help clear up confusion about foster care and HCBS. There would be no impact for children in custody because the foster family received reimbursement through DCF and the child is still eligible for HCBS supports.

State does not allow more than four children in a home without special permission.

## **Wrap Up**

KDADS thanked the workgroup for their time and work in helping to improve the system.