



# **Quarterly Report on Agency Services to Floridians with Developmental Disabilities and Their Costs**

First Quarter Fiscal Year 2009/2010  
(July, August, and September 2009)

Submitted November 2009



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Director

Charlie Crist  
Governor

## Introduction

Each month, the **Agency for Persons with Disabilities (APD)** serves approximately 35,000 people across Florida who have autism, mental retardation, spina bifida, cerebral palsy, or Prader-Willi syndrome, and or are children aged 3 to 5 who are at high risk of being diagnosed with a developmental disability. The great majority of APD's services are provided through four Medicaid waivers administered by the agency.

To meet the needs of the diverse and often medically complex population it serves, APD offers a wide array of services. Some of the 28 services currently provided by the agency include supported employment, supported living, occupational therapy, behavior analysis, adaptive and medical equipment, physical therapy, and adult day training. Companies under contract with the agency determine the medical need for a service and authorize it prior to delivery.

From July through September 2009, more than 1,000 people on the wait list received General Revenue services through the agency, and more than 9,000 received some state services through Medicaid State Plan, which leaves about 9,000 people on the wait list who did not receive any services through APD or the Medicaid State Plan. The number without services is something this agency hopes to address even as it works to hold spending within the budget appropriated by the legislature. APD's strategies to limit spending in response to declining state revenues have concentrated on greater system efficiencies that will minimize any adverse impact on those we serve.

On October 15, 2008, the agency implemented a new, four-tiered waiver system as mandated by the Florida Legislature, after working with stakeholders to develop the implementation plan. The waiver tiers are actually four separate waivers, with three of them having financial caps. Tier 1 was formerly known as the Developmental Disabilities Waiver, and Tier 4 was formerly the Family and Supported Living Waiver.

- Tier 1 - No cap
- Tier 2 - Capped at \$55,000/year
- Tier 3 - Capped at \$35,000/year
- Tier 4 - Capped at \$14,792/year

Most agency clients have not been subject to reductions in service as a result of this new waiver system. But for some, it means that the state will not pay as much for services as in the past. The agency's goal in implementing these changes is to ensure the health and safety of the people served by APD while making adjustments to control and reduce costs. APD worked with the Agency for Health Care Administration to obtain the federal approval for this new program.

Please share with us any comments or suggestions you have regarding this report. Our Chief of Staff, Tamara Demko, may be reached at 488-4879.

## Glossary of Terms Used in Report

**APD**-Agency for Persons with Disabilities

**CDC+ Program**-Consumer-Directed Care Plus Program

**FSL Waiver**-Family and Supported Living Waiver

**DD/HCBS Waiver**- Developmental Disabilities Home and Community-Based Services Waiver

**IFS**-Individual and Family Supports

This report is prepared and distributed pursuant to section 393.0661(5), Florida Statutes.

“The Agency for Persons with Disabilities shall submit quarterly status reports to the Executive Office of the Governor, the chair of the Senate Ways and Means Committee or its successor, and the chair of the House Fiscal Council or its successor regarding the financial status of home and community-based services, including the number of enrolled individuals who are receiving services through one or more programs; the number of individuals who have requested services who are not enrolled but who are receiving services through one or more programs, with a description indicating the programs from which the individual is receiving services; the number of individuals who have refused an offer of services but who choose to remain on the list of individuals waiting for services; the number of individuals who have requested services but who are receiving no services; a frequency distribution indicating the length of time individuals have been waiting for services; and information concerning the actual and projected costs compared to the amount of the appropriation available to the program and any projected surpluses or deficits...”

## 1. Services Received by Waiver Enrollees

Tables 1a, 1b, 1c and 1d provide information on services received by persons enrolled in APD waivers.

Table 1a: Waiver Enrollment and Payments

Month	Tiers 1, 2, and 3 *		Tier 4		Both Waivers	
	Enrolled Clients**	Total Waiver Payments	Enrolled Clients**	Total Waiver Payments	Enrolled Clients**	Total Waiver Payments
Jul-09	17,434	\$75,077,449.23	12,329	\$9,604,343.22	29,763	\$84,681,792.45
Aug-09	17,509	\$62,410,485.87	12,249	\$8,073,636.86	29,758	\$70,484,122.73
Sep-09	17,630	\$66,127,940.39	12,156	\$8,106,939.77	29,786	\$74,234,880.16

\*CDC + enrollment is included. Effective October 15, 2008, a tier structure was established which changed the basis for defining enrollment in the waivers. Beginning with the third quarter of FY 08-09, FSL enrollment is reported as enrollment in tier 4, and DD/HCBS comprises all other waiver enrollment, including new enrollees for whom a tier has not yet been assigned. The implementation caused the shift of several thousand clients between tiers. Since waiver payments are reported in this table by month of payment rather than by month of service these clients likewise may show claims payments simultaneously under both waivers.

\*\*As of the first day of the month.

Source: Allocation, Budget, and Contracts (ABC) Database and Medicaid EDS Data Warehouse as of November 1, 2009.

Table 1b summarizes types of services received by waiver enrollees. In addition to the tier waivers, individuals may receive services through the Consumer-Directed Care Plus (CDC+) Program, offered as an option under the Medicaid state plan. The CDC+ Program offers comparable services to the tier waivers, but it allows much greater flexibility and choice in client selection of providers and services. Table 1b also includes two types of services funded by APD that are not part of Medicaid: Individual and Family Supports (IFS) and Room and Board. The former, paid from General Revenue and the Social Services Block Grant, comprises services to persons not eligible for waiver services, services to persons waiting for waiver enrollment, and non-waiver services to persons enrolled in a waiver. Room and Board, paid entirely from General Revenue, provides payment to residential providers for clients with identified support and income needs.

Table 1b: Types of Services Received by Waiver-Enrolled Clients

Service Month	Client Counts by Service Category for Billed Services					
	Tiers 1, 2, and 3	CDC+	Tier 4	IFS	Room\Board	Client Total*
Jul-09	17,072	928	12,073	749	801	29,112
Aug-09	17,054	928	11,923	907	768	28,953
Sep-09	17,121	924	11,902	868	709	28,967

\*Clients are counted only once regardless of the number of different services they received. Based on historical payment patterns, waiver and General Revenue services are undercounted due to the anticipated unsubmitted claims for the reported service months as of the database effective date. Effective October 15, 2008, a tier structure was established which changed the basis for defining enrollment in the waivers.

Source: ABC Database and Medicaid EDS Data Warehouse as of November 1, 2009.

## 1. Services Received by Waiver Enrollees (continued)

In addition to the services cited above, many waiver enrollees receive Medicaid State Plan services. Table 1c summarizes the number and percent of waiver enrollees who use these services.

Table 1c: Clients Using Medicaid State Plan Services  
by Month of Service

Service Month	Total Waiver Enrollment	Medicaid State Plan	
		#	%
Jul-09	29,763	19,304	64.9%
Aug-09	29,758	12,512	42.0%
Sep-09	29,786	19,084	64.1%

\*Enrolled as of the first day of the month in which the services were received.

Source: ABC Database and Medicaid EDS Data Warehouse as of November 1, 2009.

Table 1d lists the number of clients using individual waiver services. Because clients typically use multiple services, the client total at the bottom of the table is an unduplicated count.

Table 1d: Clients Using Individual Waiver Services  
by Month of Service

Service Description	Tier 1, 2 and 3			CDC+			Tier 4		
	Jul-09	Aug-09	Sep-09	Jul-09	Aug-09	Sep-09	Jul-09	Aug-09	Sep-09
Adult Day Training - Faculty Based	8,054	7,627	7,713				2,767	2,538	2,684
Adult Day Training - Off Site	4	4	5				3	2	3
Adult Dental Services	1,133	1,020	1,055						
Behavior Analysis Level 1	1,960	1,791	1,860				301	284	310
Behavior Analysis Level 2	747	698	727				152	147	145
Behavior Analysis Level 3	1,046	925	1,038				266	222	261
Behavior Assistant Services	542	532	537				36	35	35
Behavioral Analysis Services Assessment	39	51	56				19	19	18
CDC Consultant Services				549	537	535			
CDC Monthly Allowance				928	928	924			
Companion	4,355	4,247	4,332						
Consumable Medical Supplies	4,289	3,850	4,138				2,748	2,418	2,644
Dietician Services	118	96	120						
Durable Medical Equipment	32	26	35				8	18	21
Environmental Accessibility Adaptations	2	8	5				5	5	6
Environmental Accessibility Assessment	2	2	6				5	13	4
In-Home Support Services (Awake) Qtr. Hour	1,140	1,114	1,158				3,802	3,758	3,828
In-Home Support Services (Live-In) Day	1,621	1,574	1,551				5	5	7

# 1. Services Received by Waiver Enrollees (continued)

Table 1d: Clients Using Individual Waiver Services (continued)

Service Description	Tier 1, 2 and 3			CDC+			Tier 4		
	Jul-09	Aug-09	Sep-09	Jul-09	Aug-09	Sep-09	Jul-09	Aug-09	Sep-09
Medication Review	578	271	341						
Occupational Therapy	479	473	465						
Occupational Therapy Assessment	2	7	8						
Personal Care Assistance	4,008	3,955	4,082						
Personal Emergency Response - Installation	3	1					2		
Personal Emergency Response - Service	118	61	68				14	11	13
Physical Therapy	899	895	921						
Physical Therapy - Assessment	24	21	20						
Private Duty Nursing	94	93	100						
Private Duty Nursing - RN	6	6	7						
Residential Habilitation - Behavior Focused Day	26	25	25						
Residential Habilitation - Behavior Focused Month	972	938	975						
Residential Habilitation - Intensive Behavior Day	489	462	486						
Residential Habilitation - Quarter hour	83	85	69						
Residential Habilitation - Standard Day	356	259	271						
Residential Habilitation - Standard Monthly	5,335	5,186	5,217						
Residential Nursing Services	165	167	140						
Residential Nursing Services - RN	43	43	37						
Respiratory Therapy	18	19	20						
Respite Care - Day	249	256	241				172	159	129
Respite Care - Quarter Hour	1,335	1,330	1,319				1,762	1,731	1,733
Skilled Nursing - LPN	50	52	52						
Skilled Nursing - RN	17	15	11						
Special Medical Home Care	14	13	13						
Specialized Mental Health - Assessment	9	11	14						
Specialized Mental Health - Therapy	432	400	402						
Speech Therapy	834	804	811						
Speech Therapy - Assessment	10	10	12						
Support Coordination	15,122	14,743	15,012				7,895	7,677	7,764
Support Coordination - Transitional	10	8	6						
Support Coordination Limited	303	285	296	39	231	249	3,484	3,383	3,354
Supported Employment	1,201	1,092	1,186				1,229	1,142	1,229
Supported Living Coaching	2,701	2,537	2,600				1,024	943	992
Transportation - Mile	71	65	68				47	51	53
Transportation - Month	987	853	865				270	213	261
Transportation - Trip	5,684	5,455	5,531				1,967	1,891	1,893
<b>Unduplicated Client Count</b>	<b>17,072</b>	<b>17,054</b>	<b>17,121</b>	<b>928</b>	<b>928</b>	<b>924</b>	<b>12,073</b>	<b>11,923</b>	<b>11,902</b>

Note: Based on historical payment patterns waiver services are incomplete due to anticipated unsubmitted claims.  
Source: Medicaid EDS Data Warehouse as of November 1, 2009.

## 2. Services Received by Persons on the Wait List

Table 2a lists non-Medicaid APD services received in July, August, and September 2009 by individuals who requested enrollment in a waiver but were not enrolled as of the first day of the respective months. Funding for these services came from General Revenue and the Social Services Block Grant. Individuals on the wait list aged 21 or younger may also receive services from the Florida Department of Education and other state and local resources.

Table 2a: Client Counts of Non-Medicaid Services Provided by APD to Clients Waiting for Waiver Services as of July 1, August 1, and September 1, 2009\*

	Service Month		
	Jul-09	Aug-09	Sep-09
<b>Total Wait List at Beginning of Month*</b>	<b>18,925</b>	<b>18,912</b>	<b>18,961</b>
<b>Paid Service</b>			
ADULT DAY TRAINING	162	162	155
BEHAVIOR ANALYSIS	16	20	23
COMMUNITY BASED EMPLOYMENT	370	354	341
DENTAL SERVICES	1	2	5
ELIGIBILITY DETERMINATION AND SUPPORT PLANNING	14	6	8
HOME ASSISTANCE	34	34	32
MEDICAL SERVICES	5	4	4
OCCUPATIONAL THERAPY	2	0	0
PERSONAL AND FAMILY CARE SERVICES	24	21	21
PRESUPPORTED TRANSITIONAL LIVING	2	2	2
PSYCHOLOGICAL THERAPY	82	81	77
RECREATIONAL THERAPY	1	0	0
RESIDENTIAL HABILITATION SERVICES	31	29	26
RESPIRE	13	12	19
SUPPLIES AND EQUIPMENT	32	29	41
SUPPORT COORDINATION	330	342	350
SUPPORTED LIVING	50	48	50
TRANSPORTATION	136	124	118
LONG TERM RESIDENTIAL SERVICES	18	14	16
<b>Unduplicated Client Total</b>	<b>1,067</b>	<b>1,063</b>	<b>1,079</b>

\*The implementation of tiers changed the definition of the wait list to exclude those on the FSL waiver (now Tier 4). See Tables 1a, 1b, 1c and 1d for information on services used by waiver enrollees. Source: Wait List and ABC Databases as of November 1, 2009.

Table 2b provides client counts of persons on the wait list who received APD non-Medicaid services (see Table 2a) or Medicaid State Plan services. APD non-Medicaid services are provided with state General Revenue and grant dollars. Because some clients received both APD non-Medicaid and State Plan services, the client count in the third row is an unduplicated total rather than a sum of the two prior rows. The last two rows in the table provide information on wait list clients who received neither non-Medicaid nor Medicaid State Plan services.

Table 2b: Client Counts of Non-Medicaid and Medicaid State Plan Services Received by Clients Waiting for Services as of July 1, August 1, and September 1, 2009\*

	Service Month		
	Jul-09	Aug-09	Sep-09
<b>Total Wait List at Beginning of Month*</b>	<b>18,925</b>	<b>18,912</b>	<b>18,961</b>
<b>Client Count for APD Non-Medicaid Services**</b>	<b>1,067</b>	<b>1,063</b>	<b>1,079</b>
<b>Client Count for Medicaid State Plan Medical, Facility, and Pharmacy Services***</b>	<b>9,459</b>	<b>7,993</b>	<b>9,645</b>
<b>All Wait List Clients Receiving Services**</b>	<b>10,051</b>	<b>8,691</b>	<b>10,233</b>
<b>Count of Wait List Clients Not Receiving Services</b>	<b>8,874</b>	<b>10,221</b>	<b>8,728</b>
<b>Percent of Wait List Not Receiving Services</b>	<b>46.9%</b>	<b>54.0%</b>	<b>46.0%</b>

\* The implementation of tiers changed the definition of the wait list to exclude those on the FSL waiver (now Tier 4).

\*\*Clients are counted only once regardless of the number of different services they received.

\*\*\*Based on historical payment patterns, Medicaid State Plan services are undercounted due to the anticipated unsubmitted claims for the reported service months as of the database effective date.

Source: Wait List and ABC Databases and Medicaid EDS Data Warehouse as of November 1, 2009.

### *3. Waiver Enrollment Offers for Persons on the Wait List as of October 1, 2009*

Tables 3a and 3b provide the number of individuals on the wait list as of October 1, 2009, who were offered waiver enrollment in FY 2005/06, FY 2006/07, FY 2007/08, FY 2008/09 and FY 2009/10 to date, with results of those offers indicated. Over 11 percent of the clients on the wait list as of October 1, 2009, have been previously offered waiver enrollment since June 2005. These two tables formerly included those on the FSL waiver. However, as noted in the footnotes, the wait list definition has changed with the implementation of the tier structure.



Table 3a: Waiver Enrollment Offers for Persons on the Wait List as of October 1, 2009

	Number	Percent
<b>Total Wait List Count*</b>	19,012	100.0%
<b>Wait List Clients Offered Waiver**</b>		
<b>FY 2009/10 to date</b>	0	0.0%
<b>FY 2008/09</b>	0	0.0%
<b>FY 2007/08</b>	3	0.0%
<b>FY 2006/07</b>	6	0.0%
<b>FY 2005/06</b>	2,160	11.4%
<b>Total</b>	2,169	11.4%

\*With the implementation of tiers in October 15, 2008, the definition of the wait list was revised to exclude those on the FSL waiver (now Tier 4).

Source: Wait List Database and Waiver Enrollment Tracking System as of October 1, 2009.

Table 3b: Outcomes of Waiver Enrollment Offers for Persons on the Wait List as of October 1, 2009

Disposition of Waiver Offers	Offers in FY 2005/06	Offers in FY 2006/07	Offers in FY 2007/08	Offers in FY 2008/09	Offers in FY 2009/10	Total	
						Number	Percent
<b>Waiver Enrolled</b>	70	6	3	0	0	79	3.6%
<b>Remained in FSL Waiver</b>	24	0	0	0	0	24	1.1%
<b>Remained on non-Medicaid Services</b>	10	0	0	0	0	10	0.5%
<b>Ineligible for Waiver</b>	276	0	0	0	0	276	12.7%
<b>Received and Declined Offer</b>	541	0	0	0	0	541	24.9%
<b>Offer Sent--No Response</b>	1,098	0	0	0	0	1,098	50.6%
<b>Other</b>	141	0	0	0	0	141	6.5%
<b>Total</b>	2,160	6	3	0	0	2,169	100.0%

The implementation of tiers changed the definition of the wait list to exclude those on the FSL waiver (now Tier 4).

Source: Wait List Database and Waiver Enrollment Tracking System as of October 1, 2009.

#### 4. Waiver Enrollment in Fiscal Year 2009-10

Table 4 summarizes new waiver enrollment to date in FY 2009-10. The counts are broken out by client category, waiver, and month of enrollment. Brown v. Bush enrollments are placements of institutionalized persons on a waiver pursuant to the lawsuit settlement. Crisis cases are enrollees whose needs for services have been determined to require priority enrollment. Foster kids are children on the wait list for the DD/HCBS Waiver who have open cases in the Department of Children and Families' child welfare system. Pursuant to proviso language in the General Appropriations Act of 2006, these children have been given priority enrollment over other persons on the wait list for waiver services, with the exception of crisis enrollments.

Table 4: New Waiver Enrollment by Waiver and Enrollment Type

Month Enrolled	DD/HCBS Waiver/Tier 1, 2 3			FSL Waiver/Tier 4		Total Crisis Cases	Total Foster Kids	Total Enrolled
	Brown v. Bush	Crisis Cases	Foster Kids	Crisis Cases	Foster Kids			
Oct-07	1	42		29		71		72
Nov-07		36		24		60		60
Dec-07	1	27		18		45		46
Jan-08	3	48		21		69		72
Feb-08	21	22		12		34		55
Mar-08	2	34		26		60		62
Apr-08	1	16		18		34		35
May-08	4	47		22		69		73
Jun-08	7	32		22		54		61
Jul-08	5	39		27		66		71
Aug-08	2	36		23		59		61
Sep-08	5	51		16		67		72
Oct-08	2	NA		NA		37		39
Nov-08	2	NA		NA		58		60
Dec-08	2	NA		NA		46		48
Jan-09	2	NA		NA		33		35
Feb-09	4	NA		NA		53		57
Mar-09	2	NA		NA		38		40
Apr-09	6	NA		NA		56		62
May-09	4	NA		NA		58		62
Jun-09	6	NA		NA		64		70
Jul-09	3	NA		NA		66		69
Aug-09	2	NA		NA		90		92
Sep-09	9	NA		NA		76		85
								0
Total	96	430	0	258	0	1363	0	1459

Source: ABC Database as of November 1, 2009, and other APD tracking systems. Due to the implementation of the tiers on October 15, 2008, crisis enrollee clients are no longer offered enrollment specifically in either HCBS or FSL waivers.

## *5. Length of Wait for Waiver Services*

Table 5 displays a frequency distribution of the length of time individuals have been waiting for waiver services. Currently, agency policy allows people to remain on the wait list if they refuse services, don't qualify for services, or do not respond to enrollment offers. These counts include those who may have refused one or more earlier waiver enrollment offers and those who have received other state assistance.

Table 5: Length of Wait for Any Waiver Services  
as of October 1, 2009

Length of Wait	Date Placed on Wait List	Wait List Clients	
		#	%
6 Months or Less	April 1, 2009 or later	1,205	6.3%
6+ to 12 Months	October 1, 2008 - March 31, 2009	1,206	6.3%
12+ to 18 Months	April 1, 2008 - September 30, 2008	1,274	6.7%
18+ to 24 Months	October 1, 2007 - March 31, 2008	1,266	6.7%
24+ to 30 Months	April 1, 2007 - September 30, 2007	1,309	6.9%
30+ to 36 Months	October 1, 2006 - March 31, 2007	1,466	7.7%
36+ to 42 Months	April 1, 2006 - September 30, 2006	1,483	7.8%
42+ to 48 Months	October 1, 2005 - March 31, 2006	1,297	6.8%
4+ to 5 Years	October 1, 2004 - September 30, 2005	2,089	11.0%
More than 5 Years	On or before September 30, 2004	6,417	33.8%
<b>Total Wait List*</b>		<b>19,012</b>	<b>100.0%</b>

The implementation of tiers changed the definition of the wait list to exclude those on the FSL waiver (now Tier 4).  
Source: Wait list Database as of October 1, 2009.

## *6. Projected Waiver Costs and Appropriations*

Table 6 provides information concerning projected waiver costs compared to the available appropriations and any projected surpluses or deficits.

Table 6: Fiscal Year 2009-10 Waiver Budget Forecast

	<b>General Revenue/Other</b>	<b>Federal Match</b>	<b>Total</b>
<b>Appropriation</b>	<b>\$ 268,774,378</b>	<b>\$ 580,925,307</b>	<b>\$ 849,699,685</b>
<b>Deficit Carried Over from FY 08-09</b>	<b>\$ (8,670,493)</b>	<b>\$ (18,123,366)</b>	<b>\$ (26,793,859)</b>
<b>FY 09-10 Expenditures Projected</b>	<b>\$ 318,271,985</b>	<b>\$ 665,263,196</b>	<b>\$ 983,535,181</b>
Adjust for PCA Kids Under 21 (Transferred to AHCA)	\$ 6,419,161	\$ 13,417,554	\$ 19,836,715
Adjust for CDC PCA Kids Under 21 (Transferred to AHCA)	\$ 2,912,400	\$ 6,087,600	\$ 9,000,000
Adjust for PCA Rate Reduction to \$15/hr from the Rate as of Jan 1, 08	\$ 2,064,020	\$ 4,314,286	\$ 6,378,306
FY 09-10 Expenditures Prior to Policy Changes	\$ 306,876,404	\$ 641,443,756	\$ 948,320,160
<b>Surplus/Deficit Prior to Policy Changes</b>	<b>\$ (46,772,518)</b>	<b>\$ (78,641,815)</b>	<b>\$ (125,414,334)</b>
<b>Projected Effect of Policy Changes</b>			
Tiers Savings	\$ (26,448,190)	\$ (55,282,930)	\$ (75,192,630)
Cost Plan Re-Basing on Jan 1, 2009	\$ (3,236,000)	\$ (6,764,000)	\$ (10,000,000)
Eliminating Medication Reviews on Oct 1, 2009	\$ (97,697)	\$ (204,210)	\$ (301,907)
Consolidating DME on Jan 1, 2010	\$ (301,625)	\$ (630,468)	\$ (932,093)
<b>Total Savings Due to Policy Changes</b>	<b>\$ (27,967,657)</b>	<b>\$ (58,458,973)</b>	<b>\$ (86,426,630)</b>
<b>Projected APD Waiver Surplus/Deficit</b>	<b>\$ (18,804,861)</b>	<b>\$ (20,182,842)</b>	<b>\$ (38,987,703)</b>

\*Budget and expenditures for the CDC+ Program are included.

\*\*The GAA has been corrected to reflect the FMAP reduction effective October 1, 2009.