

Background: Ohio's Developmental Disabilities System

Scripps Gerontology Center estimates that about 1% of Ohio's population has a severe or moderate developmental disability. Of this population, about 66,000 individuals have a severe disability and about 48,000 have a moderate disability. Both groups are more likely to rely on public health care programs for long term care assistance. Through state-run and private institutions and waiver programs, Ohio's disability system provides long term care to about 41,000 individuals with DD.

System capacity is an ongoing concern. In June 2013, there were 41,260 people across Ohio on a waiting list for a Medicaid waiver. Individuals often don't move off of the waiting list until they experience an emergency, such as loss of a caregiver. There has been a lot of discussion about whether the waitlist numbers reflect current need. A recent survey by [OSU Government Resource Center](#) found that the needs of individuals on the waiting list varied greatly and a large number of individuals (47%) had no current unmet need. That being said, Ohio has a number of adults with DD who are living with their elderly parents and who are likely to need assistance with care in the future.

Health Care Coverage

Individuals with developmental disabilities are heavily reliant on Medicaid and Medicare. According to the [2012 Ohio Medicaid Assessment Survey](#) of individuals with DD, 72% had Medicaid, 43% private coverage, 24% Medicare, 8% other state health care assistance, and 3% were uninsured. Note that individuals with DD are often covered by more than one payer.

Traditionally, commercial insurance has not covered habilitative services (services that help a person learn, keep, or improve skills and functional abilities that they may not be developing normally). The Governor added habilitative services for children to Ohio's essential health benefit package in 2014, which makes it a required benefit in commercial plans. It will be interesting to see if this addition reduces reliance on Medicaid coverage for children with DD.

Service Modes: Long Term Care Services and Supports

Care and community inclusion for individuals with developmental disabilities has changed dramatically in the past 40 years – from custodial care, often in an institution, to living independently in the community. These changes have largely been pushed by individuals with DD and their parents.

There has been an increasing demand for community waiver programs and movement away from congregate institutional settings. Ohio has long been criticized for its high number of institutional beds, particularly in large institutions (defined as 16 or more beds per facility). Ohio has had a moratorium on adding new institutional beds for many years.

Developmental Centers (DCs): The state operates ten DCs around the state with a current census of 940 individuals, which will drop to 850 by the end of FY 2015. The number of individuals served in the DCs has steadily dropped since the mid-1970s as community alternatives have been developed. The department reports that the majority of admissions to DCs are the result of a crisis in the community and many of the residents have very challenging behavioral issues including violent, aggressive and/or

criminal behavior. In its FY 2016-17 budget request, the department expects to further reduce the DC census by 90 people per year, redirecting the funds to Medicaid waivers. The annual cost of the developmental centers was \$191,000 per person in FY 2014.

Private Intermediate Care Facilities (ICFs): ICFs provide health care and habilitation services to Medicaid recipients to help their functional status in a residential setting. There are about 420 private ICFs in the state with close to 100% occupancy that provide services to about 5,800 individuals. ICFs vary in size with many serving less than 50 individuals, but with a few in the state that serve over 100. The average annual cost for care in an ICF was \$101,000 in FY 2014. The Department has a commitment from providers to downsize or convert 1,200 beds to waivers over five years.

Home and Community Based Care: The Department currently operates four Medicaid waivers for home and community based care. The services available and annual cost vary by waiver. All waiver consumers must meet income and level of care requirements. Unlike institutional care, where the funding is tied to the facility, waiver funding follows the consumer allowing individuals to select where to live, whom to live with, and providers care. State GRF funding for waivers has increased in recent years, but local funding for waivers is significant. In FY 2014, local funding for waivers exceeded state GRF funding for waivers by \$106 million.

Medicaid DD Waivers: Enrollment by Waiver and Age

| Age | Individual Options (IO) | Level 1 | Self-Empowered Life Funding (SELF) | Transitions (TDD) | Total |
|----------------------------|-------------------------|----------------|------------------------------------|-------------------|---------------|
| 0 to 5 | - | 89 | 6 | 67 | 162 |
| 6 to 21 | 1,639 | 3,010 | 184 | 1,659 | 6,492 |
| 22 to 30 | 3,290 | 4,656 | 45 | 626 | 8,617 |
| 31 to 40 | 3,273 | 2,395 | 29 | 318 | 6,015 |
| 41 to 50 | 3,455 | 1,613 | 14 | 136 | 5,218 |
| 51 to 64 | 4,547 | 1,444 | 4 | 110 | 6,105 |
| 65 + | 1,560 | 226 | 3 | 12 | 1,801 |
| Total | 17,764 | 13,433 | 285 | 2,928 | 34,410 |
| Average Annual Cost | \$59,952 | \$9,247 | \$20,000 | \$21,925 | |

Source: ODDD, data through 6/30/2014, cost data from FY 14-15 LSC Redbook

System Funding

Local funding in the DD system is significant and provides about \$1.1 billion per year for DD services and includes about \$60 million in state subsidies. In FY 2015, \$392 million in local funds will be used to provide the non-federal share to support community Medicaid services including Medicaid waivers. Other local funds are used to support non-Medicaid services such as day services including sheltered workshops and other non-Medicaid supports. The state and federal government pay the full cost of care for individuals in the DCs and ICFs. Total system funding, not including local funds unrelated to Medicaid was \$2.4 billion in FY 2014.

Interactions with Other State Systems

Individuals with DD may receive services in other state systems. Major areas of interaction include:

Medicaid Managed Care and Fee for Service: Medicare covers the acute health care costs for many individuals with DD. Medicaid, through the ODM budget, covers additional costs incurred by individuals with DD waivers for services such as home health, private duty nursing, physical and occupational therapy, and behavioral health services. In addition, individuals with DD who are not receiving waiver services may be enrolled in Medicaid managed care (for example, children with autism).

Nursing Homes: According to the [Braddock report](#), there are about 2,000 individuals with DD who are in a nursing home, and this number has been stable for more than a decade. The County Boards of DD perform preadmission screenings and resident reviews for these individuals to ensure appropriate placement. Just as with behavioral health consumers, limited system capacity can lead to inappropriate placements or to longer than necessary placements while seeking a home and community based option. Nursing home care is paid from the ODM Medicaid budget.

Primary and Secondary Education: Special education services are available to qualifying children between the ages of 3 and 21. These services are funded by a combination of local, state, and federal funds. In addition, participating schools may also bill Medicaid for the federal share of providing some medical services required for children enrolled in Medicaid that are required by the child's IEP plan. Spending on the Medicaid in Schools Program is expected to total about \$46 million in FY 2015.

Early Intervention: Early intervention services are available for children under age three who have a developmental delay through Ohio's Help Me Grow/Part C program. In FY 2014, almost 23,000 children were served in this program that provides services such as service coordination, family support, speech-language pathology, physical therapy, and occupational therapy. This system is currently operated by the Ohio Department of Health.