

REAL LIVES LAW WORK PLAN

September 7, 2016 Meeting Update – Previously Completed Items Removed

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| <p>1.(b)</p> | <p>DDS shall offer SD to all individuals eligible through the DDS. SD shall be based on the participant’s judgment and preferences set for in their PCP. ...not Mass Health eligible but otherwise eligible for DDS may participate.</p> | <p>This item was discussed at the March 2, and May 4, 2016 meetings and will be on the September meeting agenda.</p> | <p>DDS Posts a document titled “The Individual Choice, Portability and Provider Selection 2010 User Guide for Individuals and Families” on the DDS internet site. The document was distributed to all individuals and guardians at the Annual ISP in 2010, and offered at each subsequent ISP meeting. Comprehensive information about self-directed service options needs to be further developed to distribute to individuals and guardians at service junctures.</p> <p>All services provided in Autism Waiver program are self- directed. SD services are also an option for people participating the in Department of Elementary and Secondary Education Program.</p> <p>All of the waiver services available on the 3 DDS Home and Community Based Waivers are posted on the DDS website.</p> <p>The <i>Choosing Which Service Method is Best for Me</i> brochure has been updated and is posted on the DDS website.</p> <p>DDS proposed adding language to the eligibility determination letter at the May 4, 2016 meeting. The committee discussed the wording considerations and clarity. Proposed revised wording will be reviewed at the September meeting.</p> |
| <p>1.(e)</p> | <p>DDS shall</p> | | |
| | <p>(6) ensure value of individual budget is equivalent to amount DDS would have spent through a traditional service model... DDS shall develop an appeals process for decisions re individual budgets;</p> | <p>Appeal process is in place.</p> | <p>If there is disagreement around an allocation, DDS would utilize the existing ISP appeal process. Appeal Forms were provided to the SDAB at the March 4’ 2015 meeting.</p> |

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| | | | <p>This item was discussed at the March 2, 2016 meeting. The outcome of the discussion was that 1) the committee was unanimous that budget allocations should be determined on needs, not on what would have been spent in a traditional service model, and 2) DDS will prepare guidance for determining and adjusting budget allocations for AWC and PDP to be presented at a future meeting.</p> <p>Guidance is in development.</p> |
| 1.(o) | The State Auditor, pursuant to..., shall audit the SD option as the Auditor determines necessary and shall make recommendations to DDS, the House and Senate Ways and Means Committee and Joint Committee on Children, Families and Persons with Disabilities about changes in law or regulation that may improve the efficiency of the SD option, decrease costs, improve services or prevent waste, fraud or abuse. | | |
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| SEC 5 | Section 4 is repealed. <i>[See Section 8]</i> | | |
| SEC 7 | The State Auditor, pursuant to..., shall audit the SD option established under..., at least once during the first 4 years of its operation. <i>[By 8/18]</i> | | |
| SEC 8 | Effective date of Section 5 is 3 years from date of this act. <i>[8/6/17]</i> | | |

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| | ONGOING ITEMS | | |
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| 1.(d) | <p>The DDS and the SDAB shall develop informational materials and training for the DDS staff regarding SD. Training to include concept and practice of SD, inform DDS staff about the mechanics of SD, including, but not limited to, the development of individual budget selection, purchase and use of services, supports and goods by participants; information regarding the types of services that may be utilized; about the selection and supervision of the vendors; the respective roles of independent facilitator, financial management service and the DDS.; methods of identifying and reporting instances of suspected waste, fraud and abuse. DDS to educate all staff except janitorial, maintenance, secretarial, on all service options including, but not limited to, SD annually.</p> | Ongoing | <p>Materials handed out at the 1/9/15 meeting were: DDS Self Determination Policy; Implementing the Principles of Participant Direction in Everyday Lives –State Advisory Committee Presentation, November 14, 2008; Summary of DDS Report to the Governor and Legislature, Implementation of a Self Determination Model at the Department of Developmental Services, July 2009;</p> <p>The Massachusetts Medicaid Home and Community Based Waiver Program “Choice Portability, Provider Selection” June 23, 2010;</p> <p>DDS Self-Directed Supports Pilot 2012 – 2013; Real Lives Law August 6, 2014.</p> <p>Additional informational materials provided at 3/4/15 meeting include: Choosing Which Service Method is Best for Me Brochure; SDAB appointed member list; DDS ISP forms and End Notes; DDS Waiver Services Definitions; MA Participant Directed Program Required Packets Forms per Service; MA Participant Directed Program New Provider Paperwork Matrix; PPL on line budget as seen through the portal; DDS ISP appeal documents; PPL Timesheet/invoice; PPL Monthly Budget Expenditure Report; Agency with Choice Qualified Providers; and CORI form.</p> |

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| | | | <p>Training program developed with review and input from self-advocates and the full SDAB on May 6.</p> <p>It was posted on PACE in June for staff to be trained. It has also been posted on the DDS SD web site. An update on the status of staff trained will be provided at the Sept. meeting.</p> <p>The PACE training module has been posted on the DDS SD website.</p> <p>The module will be updated in the coming months and DDS staff will be trained annually thereafter.</p> <p>The draft Participant Directed User Manual for DDS support brokers and service coordinators was provided to board members at the January 6, 2016 meeting. The final manual was distributed to all Area and Regional Office staff involved with the Participated Directed Program.</p> <p>A document titled DDS Staff Information and Outreach, Training and Support Activities for 2016 is being distributed and reviewed at the September 7, 2016 meeting and will be posted on the website.</p> |
| <p>1.(e)</p> | <p>(12) facilitate individual and family understanding of SD and related issues of budgeting, planning, service and provider selection and staff and employee management;</p> | <p>Ongoing</p> | <p>DDS Support Brokers work individually with participants and families to plan and budget based on their vision and needs. Support Brokers provide guidance, support and facilitation to increase learning & comfort with the process based on the participant/family's experience. Support</p> |

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| | | | <p>Brokers provide guidance around recruitment and employee management. The Regional Liaisons will develop: 1) training for participant/family & Support Brokers on tools for employee management such as developing job descriptions, advertising etc., 2) Peer & Family support opportunities to share learning and best practice.</p> <p>A document titled DDS Staff Information and Outreach, Training and Support Activities for 2016 is being distributed and reviewed at the September 7, 2016 meeting and will be posted on the website.</p> |
| | <p>(18) provide in consult with SDAB an annual report to chairs of the House and Senate Ways and Means and to the Chairs of the Joint Committee on Children, Families, and Persons w/ Disabilities not later than September 1; (i) any modification or improvements made by DDS on the administration of SD, (ii) recommended legislation, (iii) assessment of performance of providers, vendors and persons who received funds for services, supports and goods(iv) number of participants using SD in previous year, (v) number of participants per region, (vi) types and amounts of services, supports and goods purchased under SD in a manner that facilitates year to year comparisons, (vii) ranges and averages for expenditures from all individual budgets, including adjustments made (pursuant to subsection (i), and (viii) the number who withdrew voluntarily from the option;</p> | <p>Report submitted to committee Chairs Sept. 1, 2015.</p> <p>The 2016 report was submitted to EHS in August.</p> | <p>Data collection completed. Report was drafted in July, reviewed by SDAB and EHS in July/early August, final edits and data updates was drafted in August. Report was submitted to committee Chairs Sept. 1, 2015.</p> <p>FY 2016 report was submitted to EHS.</p> |
| | <p>(19) provide except as necessary to comply with privacy laws, any information requested by Attorney General, State Auditor, Inspector General, senate or house committees on post audit and oversight, DPPC, any DDS, agency or law body</p> | <p>Ongoing</p> | <p>DDS will comply and provide as requested.</p> |

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| | investigating suspected neglect or physical, emotion or financial abuse. The Superior Court to have jurisdiction over disputed requests for information. | | DDS has received information requests from the IG, has responded and will continue to do so. |
| 1.(m) | (1) Any chosen planning team member, SDAB, mandated reporter of DPPC, and other persons involved in the preparation or implementation of SD plan who suspects, by action or inaction, financial abuse, including, but not limited to, mismanagement, misappropriation or waste of participants SD funds or individual budget shall immediately report such actions or inactions to the DPPC. DPPC shall evaluate and forward the report to the appropriate law enforcement or state agencies and forward all reports of suspected financial abuse to the State Auditor. DPPC shall provide an annual itemization to the Chairs of the Joint Committee on Families, Children and Persons with Disabilities detailing the number, types, geographic locations of specific reports and the agency (or agencies) to which the complaint was referred. | Annual Report sent to committee chairs on/about September 15, 2015. | DPPC's current practice is to forward reports of financial abuse to the appropriate law enforcement or state agency. DPPC has coordinated with the State Auditor's Office and forwarded all reports of financial abuse received by DPPC for November & December of 2014 and January through June 2015. DDS reviewed these reports of suspected financial abuse and determined that none of the reports received by the DPPC during this time period involved DDS self-determination participants' funds. |
| 1.(p) | The Attorney General or the DDS may independently investigate any allegations of mistreatment, waste, abuse, fraud or breach of any explicit or implied duties under this section. The Attorney General or DDS, on behalf of the participant, may seek to recover any monies lost due to mismanagement, waste, abuse, fraud or breach of any explicit or implied duties under this section in the superior court. | Ongoing | All complaints regarding mistreatment and abuse are filed with DPPC. When a complaint is screened out due to being outside the scope and authority of DPPC, (e.g. waste, fraud), DDS will refer the matter to other authorities, or if appropriate, conduct an investigation of the matter. DDS will seek to recover money lost based on the outcome of the investigation. |
| SEC 2 | DDS shall submit a report to Chairs of House and Senate Ways and Means Committee and of the Joint Committee on Children, Families and Persons with Disabilities on the feasibility and cost of facilitating participant access to comparative information by making available searchable online repository of | Ongoing | The Department of Developmental Services completed a legislative report in response to the reporting requirements specified in the Real Lives Law. The Department is soon ready to pilot, with the INDEX program of the UMASS Medical School, a data repository system. The |

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| <p>providers of SD services, supports and goods, not later than 6 months from effective date of act. Report may be limited to providers serving multiple participants, who receive \$75k or more of SD funds per year, within the 2 years preceding the year in which DDS requires said info, or any other provider that voluntarily submits information to DDS. Said report shall also include a proposed method to establish standardized units and descriptive categories for the searchable website. Such standard units and descriptive categories may include:</p> <ul style="list-style-type: none"> (i) organization structure, history and performance, including, but not limited to, (A) the complete legal name of the provider, vendor or supplier, (B) legal structure and org type, (C) accreditation and licensure status, (D) web address location and recent formal audits, reports and investigations and (E) contact info and website information; (ii) services, supports and goods offered at each geographic location by provider including, but not limited to, (A) hours and schedules of availability of each service, support or good; (B) populations served, (C) provisions regarding the supervision, storage and dispensation of prescription meds and (D) any special non-standard eligible or requirements or restrictions; (iii) facilities available and in good operating condition at each geographic location including, but not limited to, (A) precise street address of each geographic location (B) availability or proximity of public transportation (C) hours of operation and (D) accessibility by mobility impaired individuals; (iv) medical and non-medical professional staff at each geographic location including, but not limited to, (A) number of staff in each category, (B) education and professional attainments of staff, (C) ratio of staff to client for each shift and (D) average tenure in yrs. and mo., of staff who | | <p>INDEX is a web based data search engine that gathers and delivers information about programs, providers, and services for people with disabilities throughout Massachusetts. They have developed the DisabilityInfo.org and the Massachusetts Network of Information Providers (MNIP) websites both of which provide disability-related information to the public free of charge.</p> <p>The data system developed by INDEX includes modifying INDEX's existing technology to capture the information specified in the law such as: Organization Name, Address, Contact Email, Website, Transportation Options, Accessibility Features, Hours of Operation, Services offered, Populations served, Accreditation, etc. The proposal also includes as part of Index's standard service the commitment of accessibility, compatibility with assistive technologies, support of the application and its users as part of INDEX's existing support structure, purchase and management of the domain name and hosting the system in INDEX's datacenter.</p> <p>The pilot data system was presented at the November 9, 2015 meeting. Information and a link to use the system was sent to all members the following week. A follow up discussion is scheduled for the January 4, 2016 meeting.</p> <p>Even though the repository was originally limited to 14 providers meeting a certain criteria, the statute clearly states that “..any provider can voluntarily submit agency information for the repository.” The Department has continued to make the repository as robust as possible. The website now has 164 provider agencies listing over 560 programs. The Department continues to reach out to other provider agencies for inclusion on the website, with many being added daily. The Department is also working with the INDEX to make the site more</p> |
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| | <p>(v) work at least 16 hr/wk; and characteristics of individuals receiving services, supports and goods at each geographic location including, but not limited to, number of clients, age range and gender distribution. If DDS finds a form or alternative form of the searchable online repository is not cost prohibitive, DDS shall develop and implement the repository within 18 mo. of the date of this act.</p> | | <p>accessible and “reader friendly”. The INDEX is developing applications to provide more information about the services listed along with photos and videos of the program sites.</p> |
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| SEC 3 | <p>Subject to appropriation, DDS shall contract with an independent research organization or academic institution not later than 8/1/19 to evaluate SD authorized in Section 19.... and recommend improvements to the SD option.</p> | Ongoing | <p>This topic was a discussion item on Sept. 2015 agenda.</p> <p>At the November meeting board members were invited to join a subcommittee charged with developing the evaluation.</p> <p>An update on the membership and projected work of the subcommittee was discussed at the January 6 meeting.</p> <p>This topic will continue to be discussed at future meetings as appropriate. As the contracted evaluation will not be completed until FY 19, this item will be moved to the items listed as ongoing.</p> <p>A subcommittee of advisory board members was established to develop the parameters of the Request for Response (RFR) and the tool for the Evaluation of the Self-Determination Program. The RFR was drafted and reviewed with the advisory board at the March 2016 meeting and was then issued with proposals due June 1. Four (4) subcommittee served on the selection committee. Human Services Research Institute Inc. was selected. The work is expected to begin on September 1, 2016 and to be completed on June 30, 2019.</p> |
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