## Alternative Funding Models for People with IDD: Quality Outcomes and Measurement Metrics

# IDD MLTSS workgroup

www.c-q-l.org/MLTSS

Starting in 2018, a Managed Long-term Services and Supports (MLTSS) Workgroup set out to develop a common understanding of value-based quality measures for people with intellectual and developmental disabilities (IDD). As the industry moves to managed care, the workgroup aims to ensure that quality metrics are meaningful for people with IDD.

## About the Report

Our report *Alternative Funding Models for People with Intellectual and Developmental Disabilities: Quality Outcomes and Measurement Metrics* includes recommendations regarding goals and outcomes for managed LTSS and people with IDD, as well as existing metrics to measure outcomes at individual, provider, payer, and state levels.

## Goals and Outcomes

We have framed goals according to three levels:

1. *Foundational goals:* Building blocks upon which everything else is built.
2. *Essential element goals:* Ensure that people have a meaningful life.
3. *Innovation goals:* Represent excellence and innovation.

Goals should be used as benchmarks to have a quality LTSS system and to promote quality of life. Within each goal, outcomes can examine progress and/or achievement of the goals. All of the goals and outcomes should be understood through the lens of the following core philosophies which we believe should be embedded within all quality outcomes:

- Dignity of risk is paramount
- All choice should be informed choice
- Community integration should truly be integration
- Person-centered practices are not optional
- Services must be responsive to the life cycle, and
- Attention must be drawn to social determinants of health.

# Foundational Goals

## People live, work, and recreate in places that are safe, and are free from abuse, neglect, mistreatment, and exploitation

Outcomes include prevention of abuse and neglect, with robust systems to investigate, address, and mitigate abuse and neglect. Outcomes include survivor/victim support systems.

## People are healthy, and health and wellness services are person-centered, self-directed, and follow a whole person approach

Outcomes include reducing health disparities and increasing access to high quality healthcare and trauma-informed mental health services. Doing so requires healthcare providers be trained to provide services to people with IDD, and the use of interdisciplinary care coordination teams. There is also an emphasis on person-centered healthcare.

## The workforce is sufficient, stable, and high-quality

Outcomes include the continuity of the workforce and decreased turnover. Outcomes emphasize best practices for staff development, job matching, and people with IDD self-directing their workforce and helping train their staff.

## People are treated with respect and dignity

Outcomes include treating people with IDD with dignity and respect. This involves person-centered service delivery, informed choice, presuming competence, people with IDD being in control of day-to-day decisions, and person-centered and trauma-informed behavior support plans.



## People choose where and with whom to live

Outcomes include people with IDD choosing where they live and who they live with. There is a focus on smaller settings, people living in their own homes, and reduced housing waiting lists.

## There is a proactive approach to rights protection and promotion

Outcomes include people with IDD exercising their rights, and having effective due process for rights restrictions. This includes decreasing guardianship, and education for staff and people supported about rights.

## People have access to effective communication, including communication supports

Outcomes include people with IDD having access to communication supports and mainstream technologies, AAC devices, and translation and interpretation services. Staff should be trained in communication skills.

## People have meaningful, reciprocal relationships

Outcomes include building and strengthening people with IDD's relationships with family, friends, romantic and sexual partners, and natural supports.

# Essential Element Goals

## People have true community integration and inclusion
Outcomes include people truly belonging to their communities, by being engaged in, and contributing to, their communities in ways they desire, and having social capital.

## People have access to accessible, on-demand, low cost, and safe transportation
Outcomes include people with IDD having the same access to transportation as everyone else.

## People have a meaningful day of their choosing, including integrated, competitive employment
Outcomes include people choosing what they do during the day, including more people in competitive integrated employment, fewer people in day programs, and fewer people being paid subminimum wage.

## Family members and caregivers are supported
Outcomes include increased family supports, an increase in family caregivers being paid to provide support, and an increase in caregiver health and wellness.

## There is an expansion of self-advocacy, self-determination, and empowerment
Outcomes include informed choice and self-direction in supports to make this possible. Outcomes also include supporting self-advocacy and peer mentoring.

## Support providers and payers increase their business acumen regarding LTSS for people with IDD
Outcomes include providers having effective and integrated quality management systems. Outcomes also emphasize strengthening of relationships between providers and payers.

> "There's something incredibly important about **having consistency** in what practices we all do."
>
> - Stella, human services provider

## People have person-centered and directed goals
Outcomes include people choosing and realizing personally meaningful goals through strengthened person-centered planning. This includes people with IDD contributing to their plans, accessible plans, and increased choice.

# Innovation Goals

## Technology is leveraged, creatively
Outcomes include access to communication, information, remote technologies, and telehealth.

## Shared living is more readily available and utilized more frequently
Outcomes include an increased availability of shared living, and emphasize people with IDD choosing the staff and agencies that provide their services, and having control over their staff.

## There is increased community capacity building and a strong community infrastructure
Outcomes include a stronger infrastructure to support people with IDD in the community with increased HCBS funding, reduced waiting lists, and increased community integration.

## The direct support workforce is certified and recognized as a profession
Outcomes include increased training for DSPs, strengthened DSP wage funding structures, and people with IDD being involved in hiring, training, and evaluation.

## Providers of LTSS are accredited
Outcome includes more LTSS providers being accredited by recognized accrediting bodies.

## Peer support and mentoring is utilized to increase people's quality of life and the quality of services
Outcomes include an expansion of peer support and mentoring by creating pathways for people to increase their skills and become peer mentors, and increased funding for peer mentorship.

# Measurement Matrix

The report culminates in a robust matrix which crosswalks the 21 goals and 129 associated outcomes with existing quality metrics, that can be used to measure progress for each outcome. These metrics are used to examine outcomes at three different levels:

1. *Individual Level:* Metrics that can be utilized to examine outcomes for individual people with IDD.
2. *Provider/Payer Level:* Metrics that can be utilized to examine outcomes at a provider/payer level.
3. *State Level:* Metrics that can be utilized to examine outcomes at a state level.

## Access The Full Report

Access the full report *Alternative Funding Models for People with Intellectual and Developmental Disabilities*, which includes the full listing of recommended goals and outcomes, along with measurement metrics:

www.c-q-l.org/MLTSS