

ANNUAL STATUS REPORT



**The Kentucky Commission on Services and Supports for
Individuals with Intellectual and Other
Developmental Disabilities**

Submitted in Accordance with KRS 210.577 to:

**Governor Andy Beshear
and the General Assembly
December 2020**

KENTUCKY COMMISSION ON SERVICES AND SUPPORTS FOR INDIVIDUALS WITH INTELLECTUAL AND OTHER DEVELOPMENTAL DISABILITIES

Fiscal Year 2020

INTRODUCTION

In accordance with KRS 210.577(3), the Kentucky Commission on Services and Supports for Individuals with Intellectual and Other Developmental Disabilities respectfully submits the following report for the period of July 1, 2019 through June 30, 2020. The Kentucky Commission on Services and Supports for Individuals with Intellectual and Other Developmental Disabilities was created and established by KRS 210.575 through the enactment of House Bill 144 by the 2000 General Assembly. This commission, hereafter referred to as the HB 144 Commission or the commission, serves in an advisory capacity to the Governor and the General Assembly concerning the service system that affects the lives of people with intellectual and other developmental disabilities (I/DD).

MEMBERSHIP

The commission's membership in 2020 included 24 individuals representing an array of stakeholders. Nine of these positions are appointed by the Governor to serve four-year terms and include representation of family members, provider organizations, advocacy groups, and self-advocates. Four members of the General Assembly are appointed and the remaining 11 members are stipulated in KRS 210.575 and include representation from the Secretary of the Cabinet for Health and Family Services (CHFS), departments within CHFS, the University Center of Excellence in Disabilities at the University of Kentucky, and the Commonwealth Council on Developmental Disabilities.

During the 2020 reporting period (July 1, 2019 to June 30, 2020), the following membership changes occurred:

- Six members were appointed/re-appointed to serve 4-year terms representing family members, self-advocates, direct service providers, and advocacy organization(s).
- In January 2020, Mr. Darrel Wayne Tipton, self-advocate, resigned his position. Mr. Tipton had been appointed in November 2018 to fulfill the unexpired term of a vacated position. Mr. Tipton's term was set to expire July 15, 2020. The commission chose not to immediately seek a replacement for Mr. Tipton's position.
- In January 2020, recruitment of applicants to represent family members, self-advocates, direct service providers, and business leaders was initiated to replace members whose terms expired July 15, 2020. Eligible applicants were submitted to the Office of Boards and Commissions for review and appointment in May, 2020. As of October 15, 2020, appointments had not been named. Per KRS 210.575(4), members whose terms expired July 15, 2020 continue to serve on the commission until new appointments are announced.

The list of commission members and their term expirations as of June 30, 2020, are included in Appendix A of this report.

STATUTORY REVISIONS AND UPDATES

The Cabinet for Health and Family Services submitted proposed legislation to revise KRS 210.575 and KRS 210.577. The legislation passed and statutory amendments became effective July 15, 2020. Amendments were sought to update commission membership, meetings, purpose, and goals. The amendments were intended to broaden stakeholder representation, permit CHFS officials and other designated stakeholders the ability to send designees or delegates, and institute a mechanism for removal from the commission members who do not attend meetings on a routine basis. The commission's purpose and goals were updated to be reflective of current and ongoing needs of people with intellectual and other developmental disabilities. A summary of changes for each statute follows:

KRS 210.575 – Kentucky Commission on Services and Supports for Individuals with an Intellectual Disability and Other Developmental Disabilities – Membership – Chair – Compensation. (Effective July 15, 2020)

- Permit CHFS secretary to designate the commission chair;
- Permit CHFS officials to send delegates as representatives to meetings;
- Added the Commissioner of the Kentucky Department of Education or designee as a member of the commission;
- Broaden representation of direct service providers beyond 2 special-interest groups;
- Reorganize family member representation for alignment with purpose and intent of the commission; and
- Add mechanisms to request removal of legislative and public members who do not attend meetings.

KRS 210.577 – Commission's meetings, purposes, and goals – Report. (Effective July 15, 2020)

- Purpose of the commission is to serve in an advisory capacity to accomplish the following:
 - Advise the Governor and General Assembly concerning needs of individuals with intellectual or other developmental disabilities;
 - Develop a statewide strategy to increase the quality and availability of community-based services and supports; and
 - Review quality assurance and consumer satisfaction data and submit recommendations that address areas of need to CHFS annually.
- Submission of an annual report to the Governor and the Legislative Research Commission by December 1.

COMMITTEE ORGANIZATION

The commission organized committees in September 2018 based on identified areas of need. During fiscal year 2019, each committee determined 5-year goals respective to the identified area of need. Committee membership is inclusive of stakeholders with special interest and/or expertise in the respective committee's goals and objectives.

The committee structure is organized as follows:

- Employment Committee collaborates with the KentuckyWorks Project, the Employment First Council, and other similar initiatives to advance Kentucky as an Employment First state, including a review of transportation needs;
- Community Education/Outreach Committee is responsible for the topical areas of resources and self-advocacy; and
- Health/Wellness Committee is responsible for the topics of psychotropic medication usage, inclusion of individuals with complex medical needs, increased capacity of specialty clinics, and crisis intervention.

FY 2020 COMMITTEE REPORTS

During FY 2020, the committees met and continued work on the 5-year goals and short-term objectives adopted in FY 2019. Each committee has focused efforts on one or more of the identified goals and objectives. Following is each goal, short-term objectives (as applicable), and a summary of each committee's efforts related to the identified goal(s) in FY 2020. Committee recommendations and the cabinet's responses to those recommendations are outlined in the section "FY 2020 Status Updates and Recommendations" of this report, beginning on page 7.

EMPLOYMENT COMMITTEE

The Employment Committee is tasked to collaborate with the KentuckyWorks Project, the Employment First Council, and other similar initiatives to advance Kentucky as an Employment First state. The committee established the following goal and short-term objectives:

GOAL: Shape and influence policies on employment to increase social, civic, and economic contributions of people with intellectual and other developmental disabilities.

Objective 1: To facilitate the development of a comprehensive memorandum of understanding to promote the integration of Employment First policies across state government.

Objective 2: To directly influence Medicaid's restructuring of employment services and payment methodology in the redesign of 1915c waivers.

Objective 3: To engage with the transportation planning process to ensure needs of people with I/DD receive proper consideration.

Committee Chair/Co-Chair Report

The purpose of the Employment Committee is to continue to improve collaboration with an array of employment initiatives to advance Kentucky as an Employment First state.

The Employment Committee held 2 meetings during the fiscal year:

- October 29, 2019
- May 26, 2020

The committee reviewed objectives and expanded membership by inviting additional pertinent stakeholders including representatives from the Kentucky Department of Transportation and the Transportation Initiative in the Human Development Institute at the University of Kentucky.

Committee members engaged in other employment groups dedicated to the objectives. Cross-over engagement includes the Kentucky Employment First Council, KentuckyWorks Partnerships in Employment project, Kentucky Works Collaborative, and the Department of Medicaid Services Medicaid Waiver Rate group.

The committee began a partnership with the Community Education and Outreach Committee on similar efforts to remove barriers to employment. The committee identified a lack of outreach and education existing on competitive employment wages and disability benefits for self-advocates and families. The committee reviewed existing resources while noting the information needs to be shared with a concerted effort to reach people on a personal level.

Committee members noted barriers to employment cross over issues when people have state guardianship. The committee discussed inviting stakeholders who work directly in state guardianship and with people who have guardians.

Presentations to the committee included updates on the Transportation Initiative, the Inclusive Workforce Summit, and the Visionary Opportunities to Increase Competitive Employment (VOICE) grant project.

The committee submitted recommendations for commission review and acceptance. The committee reviewed the CHFS Recommendation Response report over several meetings. The committee agreed to add a recommendation pertaining to guardianship to address barriers to employment in FY 2021. The committee worked towards updating the objectives to address emerging issues. Notably, Objective 1 will include collaboration to embed Employment First initiatives into state government employment practices for Kentucky to be a model state.

COMMUNITY EDUCATION / OUTREACH COMMITTEE (CEOC)

The CEOC was tasked with the responsibility for topical areas of resources and self-advocacy. The committee established the following goals and short-term objectives:

GOAL: Identify currently available resources, barriers to accessing resources, and gaps in resources.

GOAL: Develop one (1) self-advocacy group across each of the fifteen (15) area development districts.

GOAL: Explore community inclusion efforts across the lifespan to identify promising practices.

Objective 1: Define community inclusion.

Objective 2: Identify community inclusion best practices.

Committee Chair/Co-Chair Report

The CEOC held 5 meetings during FY 2020. Meetings included presentations from First Steps, KentuckyWorks Program, and Social Security benefits. Based on these meetings the committee made a recommendation to CHFS, Department for Medicaid Services related to the accessibility of a continuously updated resource manual for use by Medicaid waiver case managers. In addition to identifying the need for accessibility to an electronic resource manual, the committee identified 2 areas of need where gaps in services or supports currently exist.

First, the committee identified a gap in funding of First Steps services for children with summer birthdays. Children within the First Steps program who have birthdays from April through August could lose services because schools are not open and it is difficult to transition from First Steps to the school system. Members of the committee reached out to a number of House and Senate members in an effort to obtain the additional funding added to the budget requests. While the committee was able to get the funding request on the Senate budget spreadsheet, it did not go any further due to a needed statutory change. The committee members continue to work with members of the General Assembly to propose legislation for appropriate statutory amendments and a funding request for the 2021 Legislative Session.

The second gap identified by the committee is within employment transition. Families and individuals are concerned if they get a job they may lose some of their Supplemental Security Income (SSI) and Medicaid services. Based on a meeting with KentuckyWorks personnel and a SSI specialist we determined there is a need for more community partner work incentives counselors (CPWIC) throughout the state. Currently there are 2 agencies, Goodwill Industries and Center for Accessible Living, which provide these resources. Prior to the COVID-19 pandemic, meetings were generally conducted by phone. Committee members believe it would help if there were more resources to provide this assistance, preferably in-person once the COVID-19 pandemic has subsided. Committee representatives are partnering with the HB144 Employment Committee to develop a recommendation for consideration in FY 2021.

The committee continued to work with the Arc of Kentucky in establishing a self-empowerment network throughout the state using a local group in Lexington as a model. To date there are 7 active groups located in Louisville, Lexington, Owensboro, Bowling Green, Ashland, Richmond, and Northern Kentucky. The committee is working with the University of Kentucky's Human Development Institute (UK-HDI) to ensure these groups are listed in the "Kentucky Disability Resource Manual". Additionally, the committee continues to identify ways to promote the local chapters of the self-empowerment network, especially in the Medicaid waiver programs. Unfortunately, the creation of new groups, as well as promoting existing ones, has been slowed due to the pandemic.

HEALTH/WELLNESS COMMITTEE

The Health/Wellness Committee was given the following topics identified during the commission's planning session: psychotropic medication usage, inclusion of individuals with complex medical needs, increased capacity of specialty clinics, and crisis intervention. In FY 2019 the committee developed the following goal and objectives:

GOAL: Maximize good health and reduce health disparities for people with intellectual and other developmental disabilities (I/DD).

Objective 1: Continue collaboration with the Division of Developmental and Intellectual Disabilities to access and evaluate all available data sources that lead to recommendations for the reduction of polypharmacy, and the development and implementation of appropriate training for provider agencies and health care providers.

Objective 2: Assess available data to identify the current parameters and barriers of crisis intervention services and propose policy level changes to increase availability of outcome driven services and decrease barriers and disparities.

Objective 3: Research and recommend a definition of “medically complex” that is inclusive of people dually diagnosed with I/DD and mental/behavioral health conditions and propose outcome-driven policy amendments that decrease barriers to all available services.

Objective 4: Reduce existing health disparities for people with I/DD utilizing data from a variety of sources to promote an increase in the number of people following physical activity guidelines, increase the collaboration among community organizations and service providers that leverage existing local health and wellness programs, and improve the overall health and well-being of people with I/DD and their direct support staff.

Committee Chair/Co-Chair Report

The Health/Wellness Committee held 3 meetings during FY 2020. Guest presenters were invited to share information with the committee related to the topics of polypharmacy, community-based housing options for individuals with I/DD with complex medical issues, healthcare disparities for individuals with neurodevelopmental disabilities, and health care disparities in dental services for individuals with I/DD.

The committee recommendations previously presented to the commission during FY 2019 were reviewed during the December 2019 quarterly meeting. Recommendations were amended with input from the commission and submitted to CHFS for review and response. The CHFS responses were reviewed by the committee and additional comments and clarifications were submitted to the commission during the June commission meeting.

FY 2020 RECOMMENDATIONS AND STATUS UPDATES

The commission received committee recommendations during FY 2019. However, due to the lack of quorum, actions to accept, amend, or reject for additional consideration by the committee was not taken until December 2020. Following are recommendations submitted by the commission to CHFS for consideration and response during FY 2020. Included are responses and status updates from CHFS for each recommendation as well as any subsequent committee response as of June 30, 2020.

Employment Committee

Recommendation 1: The Employment First Executive Order (EO 2018-328) will expire June 30, 2020. The HB 144 Employment Committee strongly recommends that the Executive Order be extended either by 1) subsequent executive order or 2) legislation prior to expiration.

The strides that have been made in the short time since Kentucky has become an Employment First state have been remarkable. The 27-member Employment First Council has identified

policy barriers, made recommendations around policy and practice to promote change, developed and identified training and resources, and established measurable goals and metrics to reach them. We must take the next steps forward in implementing recommendations and assess progress toward our goals. We respect individual choice and recognize that Kentucky can be seen as a leader in ensuring that, for all Kentuckians of working age who communicate a desire to become employed, that competitive and integrated employment in the community shall be considered the first and primary option.

Response: Kentucky's Employment First Executive Order expires during June 2020. Initial discussions were held regarding an attempt to have it attached to SB 53 (a bill regarding the payment of sub-minimum wages through a Department of Labor 14(c) certificate) but the consensus of the KentuckyWorks policy team was that it would be unwise to attach this effort to such a controversial bill. Contact has been made with the Governor's office regarding the possibility of an updated Executive Order that would allow time for necessary system changes to be initiated.

Status Update: On June 29, 2020 Governor Beshear signed Executive Order 2020-552 that continues Kentucky as an Employment First state and the work of the Employment First Council through June 30, 2022.

Recommendation 2: Present a Proclamation of Collaboration for Kentucky agencies and organizations to declare their commitment that community integrated employment shall be the first and primary option for persons with disabilities of working age who want to become employed. This proclamation would continue the Kentucky Employment First philosophy.

Response: This proclamation is in the process of being developed by the HB 144 employment committee. The plan is to construct it in a manner that allows agencies, organizations, businesses, and citizens to electronically endorse the document. It will be posted on the Kentucky Employment First webpage. Virtual signing will also be promoted at the Inclusive Workforce Summit sponsored by UK-HDI, Commonwealth Council on Developmental Disabilities (CCDD), Workforce Investment Board, and the Kentucky Chamber of Commerce on May 5, 2020 at the Griffin Gate Marriot in Lexington.

Status Update: Due to the Covid-19 pandemic and state of emergency, the Inclusive Workforce Summit was not held. Therefore, the committee will continue to seek alternative methods of promoting the proclamation and seeking commitment from agencies and organizations that community integrated employment is the first and primary option for persons with disabilities of working age who want to become employed.

Recommendation 3: Explore options to create more certifications for community partners to be Community Partner Work Incentives Counselors (CPWIC). Currently, Kentucky has two community organizations offering work incentives planning and assistance (WIPA): Goodwill Industries of Kentucky and the Center for Accessible Living.

Response: In addition to Kentucky's two WIPA programs, there are a number of CPWICs employed by community partners in Kentucky and the Office of Vocational Rehabilitation. CPWIC training, funded by the Social Security Administration, is provided by the WIPA National Training and Data Center at Virginia Commonwealth

University. Online training at an intensity below that of certification is available, also without cost, and could contribute to a strategy to expand educational opportunities.

Recommendation 4: Facilitate the development of Employment First initiatives to be embedded in state government personnel/hiring best practice and identifying Kentucky as an Employment First state.

Response: State as a model employer, included in the Work Matters report published May 15, 2018, is an important aspect of Kentucky's Workforce Development Plan. The KentuckyWorks Collaborative, created through Executive Order in 2019, continues to work towards the implementation of this plan. In addition, assistance is available through the Federal Office of Disability Employment Policy to provide assistance from subject matter experts in the area of "state as a model employer."

Recommendation 5: Ensure all state regulations and Medicaid policies align with Employment First Executive Order 2018-328.

Response: DMS will collaborate with the Department for Behavioral Health, Developmental & Intellectual Disabilities (DBHDID), Division of Developmental & Intellectual Disabilities (DDID) and KentuckyWorks Collaborative to ensure the policies align with the Executive Order.

Status Update: Governor Beshear signed Executive Order 2020-552 on June 29, 2020 thereby extending the state's commitment to being an Employment First state. The original response continues to remain in effect to ensure the policies align with the new Executive Order effective from July 1, 2020 through June 30, 2022.

Community Education / Outreach Committee Recommendation

Recommendation 1. The Community Education / Outreach Committee requests links for the "Kentucky Disability Resource Manual" maintained by the Human Development Institute at the University of Kentucky be included on the Medicaid Waiver Management Application (MWMA) as a resource for case managers and other Medicaid Waiver providers.

Response: The Department for Medicaid Services (DMS) will explore the feasibility and associated costs with Deloitte.

Status Update: The "Kentucky Disability Resource Manual" was added to the MWMA as a resource tool for providers in June, 2020.

Health / Wellness Committee

RECOMMENDATION 1: Explore efforts being done to analyze healthcare costs and pharmacy utilization.

Response: The recommendation is overly broad in scope. DBHDID respectfully requests further clarification from the committee as to what specific areas of healthcare costs and pharmacy utilization are being requested in relation to the committee's intended outcomes.

Committee Response: The Health/Wellness Committee would like to know what efforts are being done by the Cabinet for Health and Family Services (CHFS) to identify the prescribing of polypharmacy, specifically psychotropic medications, to individuals that result in individuals receiving multiple medications from different medical providers

that may result in adverse reactions, medication errors, or ineffective treatment due to medications contradicting each other.

Status Update: A response from CHFS is expected in FY 2021.

RECOMMENDATION 2: Explore partnerships to provide interdisciplinary training in the reduction of polypharmacy.

Response: DBHDID is researching existing training resources and potential collaborations to educate medical students and medical providers related to the potential over-reliance on polypharmacy for people with intellectual and other developmental disabilities.

Committee Response: The committee would like to know the process for making referrals of community members, professionals, or other training resources to DBHDID for consideration of education of students and medical providers of the potential over-reliance on polypharmacy, specifically psychotropic medications, for individuals with intellectual or other developmental disabilities.

Status Update: A response from CHFS is expected in FY 2021.

RECOMMENDATION 3: Request that the CHFS provide our committee with a list of what reports are currently used to track polypharmacy of waiver recipients.

Response: DBHDID and DMS are collaborating with the Office of Health Data and Analytics to establish a reporting process that helps to track and discover polypharmacy. In addition, the DDID is implementing a quality improvement measure through the utilization of the Health Risk Screening Tool (HRST) to review and monitor polypharmacy for participants in the Supports for Community Living (SCL) Medicaid Waiver program. While the current reports are individualized, if an aggregate report is subsequently developed it will be shared with the committee.

Committee Response: The committee thanks the cabinet for their response and work on data collection in the area of polypharmacy. The committee will seek specific data related to the utilization of psychotropic medications as the committee continues work on this specific topical area.

RECOMMENDATION 4: Define and emphasize the difference between behaviorally complex needs versus medically complex needs of people with I/DD and educate providers, direct support professionals, and medical community on the differences which can lead to diagnostic overshadowing.

Response: DBHDID agrees that broad education across medical disciplines and provider types is needed. Much of this training occurs in academic programs and through professional organizations. DBHDID will look to partner with appropriate institutions/organizations to promote program specific curriculum and offer continuing education opportunities and speakers when feasible. In conjunction with the exploration of existing training resources and opportunities to collaborate with partners noted in the response to Recommendation 2, DBHDID will also explore the development and/or adaptation of existing training to further educate direct support professionals and other professionals on opportunities to improve health outcomes for participants.

Committee Response: The committee thanks the cabinet for their response.

RECOMMENDATION 5: Add board certified behavioral analyst (BCBA) expertise as a qualification for those determining budgets for those identified with behavior support needs for exceptional supports funding with home- and community-based Medicaid waivers programs.

Response: The functional assessment and positive behavior support plan should contain sufficient documentation to provide reviewers with relevant information to make a determination of the need for exceptional supports as outlined in the plan.

Status Update: The committee thanks the cabinet for the response. The committee is satisfied that if required, the exceptional support review committee requests additional information prior to a final determination of the request from the professionals submitting the request for exceptional supports.

RECOMMENDATION 6: Update provider training to include defining medical complexity, how and where to refer participants for needed services, and current services available from an array of providers.

Response: New case management training will include referral for needed services, availability of services, and service delivery practices.

Committee Response: The committee thanks the Cabinet for their response.

RECOMMENDATION 7: Provide financial incentives to home- and community-based (HCB) Medicaid waiver providers to offer supports and services to individuals with I/DD and with medically complex needs who might require additional staffing to live in the community. Funding would be available through completion of the needs assessment process for both participant directed and traditional services and person-centered levels of funding.

Response: Options to support this are being explored through waiver redesign and the additional level of care task force.

Committee Response: The committee seeks further clarification and updates related to the cabinet's response:

- The committee requests that the Level of Care (LOC) Task Force resume meeting and open its membership to members of this committee.
- The committee requests that the LOC Task Force report be provided to the HB 144 Commission.
- The committee requests that the Department for Medicaid Services (DMS) I/DD Technical Advisory Committee submit a copy of their reports and recommendations to the HB 144 Commission.

Status Update: A response from CHFS is expected in FY 2021.

RECOMMENDATION 8: Conduct a feasibility study and a cost analysis for a pilot program for individuals with I/DD with medically and behaviorally complex needs as an alternative to institutionalization.

Response: Your comment has been captured and will be explored as part of subsequent phases of waiver redesign.

Committee Response: The committee respectfully requests that interested members of the HB 144 Commission be included or made a part of the conversations focused on feasibility studies and cost analysis of the identified population.

Status Update: A response from CHFS is expected in FY 2021.

RECOMMENDATION 9: Develop an inclusive list of hospitals, psychiatric service providers, and mental health providers in their area that are waiver providers or in network with managed care organizations (MCOs) or take Medicaid (medical card) for services to allow greater access for individuals with I/DD and medically and behaviorally complex needs.

Response: DBHDID currently maintains a web-based provider directory that provides the requested information. The provider directory may be accessed at: <http://dbhdid.ky.gov/kdbhdid/default.aspx>. In addition, each community mental health center (CMHC) maintains a list of providers within their service delivery area that accept Medicaid recipients as patients.

Committee Response: The committee thanks the Cabinet for their response.

RECOMMENDATION 10: Have DDID or other waiver management agencies develop a list of questions to be reviewed with agencies at certification audits that would highlight local connections with increasing health and wellness.

Response: In addition to agency specific technical assistance, DDID continuously offers programming, training, and technical assistance on health/wellness initiatives through a Centers for Disease Control and Prevention (CDC) funded project titled “Community Health Education and Exercise Resources” (CHEER), provider webinars, and notices of available health/wellness opportunities.

Committee Response: The committee thanks the cabinet for their response and respectfully requests that any specific topics be communicated to Austin Nugent as a member of Project CHEER staff and Barb Locker as DDID staff to provide ongoing training/technical assistance in areas of identified need.

RECOMMENDATION 11: Improve quality of healthcare among community health care providers through physician education and training (i.e. collaboration with University of Louisville, University of Kentucky, and other institutions).

Response: The Human Development Institute (HDI) at the University of Kentucky has Preservice Health Training (PHT) modules available online in the areas of women’s healthcare, nurse practitioners, physician’s assistant, medical students, and dental healthcare. The PHT modules are utilized by practitioners across the country. HDI is currently working to expand the existing PHT modules to include physicians. For additional information visit: <https://www.hdilearning.org/>.

Committee Response: The committee thanks the cabinet for their response and respectfully recommends that the University of Kentucky’s Human Development Institute also consider collaborative efforts with physician education and training initiatives at the University of Louisville and the University of Pikeville, College of Osteopathic Medicine.

Status Update: A response from CHFS is expected in FY 2021.

RECOMMENDATION 12: Effect policy change to allow providers appropriate access and usage of the Health Risk Screening Tool (HRST) by Medicaid waiver providers as a tool to promote improved health/well-being of participants.

Response: The Department for Medicaid Services (DMS) is anticipating opening the Medicaid Waiver Management Application (MWMA) to all waiver providers in 2020. The date is yet to be determined. Uploading completed HRST documents is required. When providers have access to MWMA, they will also have access to documents uploaded into the records of the people for whom they provide services. Until all waiver providers have access to MWMA, they can request the completed HRST from the case manager.

Committee Response: The committee thanks the Cabinet for their response.

Status Update: The Medicaid Waiver Management Application (MWMA) was opened to all direct service providers on October 3, 2020.

STATISTICAL INFORMATION

Following is the status of programs providing supports to individuals with I/DD through FY 2020.

Community Mental Health Center (CMHC) Service Provision 2020

- Based upon data reported by the CMHCs, 9,360 people with I/DD were supported by the 14 CMHCs in FY 2020.
- CMHC adult I/DD crisis services were utilized by 1,026 individuals during the calendar year 2019.

ICF Average Census FY 2011 through FY 2020

The number of people who reside in state intermediate care facilities for individuals with intellectual disabilities (ICFs/IID) has decreased significantly following a 2006 settlement agreement between the Department of Justice and the Commonwealth of Kentucky in regards to the operation of the Oakwood ICF/IID. Pursuant to this settlement, a statewide transition process was implemented at all ICFs/IID to successfully transition individuals into the community.

Facility	FY11	FY12	FY13	FY14	FY15	FY16	FY17	FY18	FY19	FY20
Oakwood	133	120	121	119	114	111	106	105	112	108
Hazelwood*	158	146	135	123	116	105	104	96	65	86
Bingham Gardens	28	24	23	21	21	24	24	21	24	23
Outwood	50	46	42	40	38	36	35	34	31	31
Total	369	336	321	303	289	276	269	256	232	248

*Hazelwood Center census includes the three 8-bed ICF community homes.

As part of the settlement agreement with the US Department of Justice, each of the state-owned ICFs/IID continues transformation into a Center of Excellence. There are three medical specialty clinics in Kentucky. One is located on the campus of Oakwood, one on the campus of

Hazelwood, and one on the campus of Bingham Gardens. These centers serve as a resource to individuals, families, and community providers by offering specialized supports and services that otherwise are not accessible in the community.

Waiver Slots Funded FY 2015 through FY 2021

New Slots Funded

Waiver	FY15	FY16	FY17	FY18	FY19	FY20	FY21
Supports for Community Living (SCL)	200	240	0	0	0	0	0
Michelle P (MP)	250	250	0	0	0	0	0
Acquired Brain Injury (ABI)	90	93	0	0	0	0	0
Acquired Brain Injury Long Term Care (ABI-LTC)	60	60	0	0	0	118	0
Home and Community Based (HCB)	0	0	0	0	0	0	0

Total Waiver Slots

Waiver	FY15	FY16	FY17	FY18	FY19	FY20	FY21
Supports for Community Living (SCL)	4,701	4,701*	4,941	4,941	4,941	4,941	4,941
Michelle P (MP)	10,250	10,500	10,500	10,500	10,500	10,500	10,500
Acquired Brain Injury (ABI)	200**	383	383	383	383	383	383
Acquired Brain Injury Long Term Care (ABI-LTC)	200**	320	320	320	320	438	438
Home and Community Based (HCB)	17,050	17,050	17,050	17,050	17,050	17,050	17,050

*240 slots were appropriated by the legislature for FY16; however, CMS approval of the SCL waiver renewal did not occur until March 2018, therefore they were not available until then.

**Although additional slots were appropriated by the legislature for FY15, the slots were added to the waiver during FY16.

CLOSING THOUGHTS

It has been a privilege for the Kentucky Commission on Services and Supports for Individuals with Intellectual and Other Developmental Disabilities (I/DD) to serve in an advisory capacity to the Governor and the General Assembly regarding the needs of persons with I/DD. Commission members extend their gratitude to Governor Beshear for his support of the Employment First Initiative. We also extend our appreciation to the members of the General Assembly for their continued support of quality services across the lifespan for individuals with I/DD. Along with the Department for Behavior Health, Developmental, and Intellectual Disabilities, the commission looks forward to meeting its goals to improve the quality of supports for the citizens of Kentucky.

The Cabinet for Health and Family Services and the Department for Behavioral Health, Developmental and Intellectual Disabilities extends its appreciation to the members of the commission for their advocacy on behalf of Kentucky's citizens with I/DD. Their continued advocacy has positively produced change in such efforts as the Work Matters Task Force, community inclusion, and improving the health and wellness of people with disabilities across the lifespan.

APPENDIX A – Kentucky Commission on Services and Supports for Individuals with Intellectual and Other Developmental Disabilities

Cabinet for Health and Family Services Secretary	Eric Friedlander, Secretary 275 East Main St. Frankfort, KY 40621 (502) 564-7042 Eric.Friedlander@ky.gov	Direct Service Provider- Representative of Kentucky Association of Regional Providers TERM EXPIRES 7/15/2023	Steve Shannon, Executive Director KARP, Inc. 152 W. Zandale Drive, Suite 201 Lexington, KY 40508 (859) 272-6700 (o) or (859) 509-5411 (c) sshannon.karp@gmail.com
Department for Behavioral Health, Developmental & Intellectual Disabilities Commissioner	Wendy Morris 275 East Main St 4WF Frankfort, KY 40621 (502) 564-4527 Wendy.Morris@ky.gov	Family Member TERM EXPIRES 7/15/2023	Robert A. Napolilli 2807 Mockingbird Court Prospect, KY 40059 (502) 472-8052 Napolillir@gmail.com
Department for Medicaid Services Commissioner	Lisa Lee 275 East Main St. 6WD Frankfort, KY 40621 (502) 564-4321 Lisa.Lee@ky.gov	Family Member TERM EXPIRES 7/15/2023	Julie Sweets 1342 Blue Level Providence Road Rockfield, KY 42274 (270) 782-2132 JulieBakerSweets@gmail.com
Office of Vocational Rehabilitation Executive Director	Becky Cabe 275 East Main St. 2-EK Frankfort, KY 40621 (502) 782-3437 Becky.Cabe@ky.gov	Family Member TERM EXPIRED 7/15/2020	POSITION VACANT
University Center for Excellence in Developmental Disabilities - Human Development Institute Director	Kathy Sheppard-Jones, PhD, CRC 126 Mineral Industries Bldg. University of KY Lexington, KY 40506-0051 (859) 257-3045 kathleen.sheppard-jones@uky.edu	Family Member TERM EXPIRED 7/15/2020	Rita D. Wooton 2025 Bullcreek Road Hyden, KY 41749 (606) 672-6279 Rita.Wooton@yahoo.com
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