

Developmental Disabilities Waiver Talking Points

The Florida waiver was established in 1982 allowing up to 2,631 individuals to receive home and community-based services.

During the 1990s, the waiver was expanded to serve more individuals and to provide more service options to individuals on the waiver. The 1999 Prado-Steinman settlement agreement resulted in offering waiver enrollment to everyone on the waiting list, full funding for medically necessary services and due process rights for individuals.

During the 2000s, the waiver underwent several changes. The Consumer Directed Care program was implemented. A standard rate structure was implemented, and thousands of individuals were enrolled onto the waiver. The waiver began running a deficit and service rates were reduced, services were eliminated or reduced, and the tier waiver system was implemented as a cost containment measure.

During the 2010s, funds were provided to address past deficits and the iBudget waiver system was implemented as a cost containment measure. The 2013 Moreland ruling required the cost allocations of 6,000 individuals be restored to pre-iBudget levels. The 2013 Wheaton settlement agreement required the timely processing of requests for additional amounts. The 2014 iBudget rule challenge required that 14,000 individuals have their iBudget amounts increased to the individuals' algorithm amounts.

Over a five-year period beginning in Fiscal Year 2013-14, \$140 million was appropriated to offer waiver enrollment to over 6,500 waiting list individuals. Statutory changes were made to automatically enroll individuals diagnosed with Phelan McDermid syndrome, individuals entering extended foster care and dependents of military individuals transferring from another state where they were receiving waiver services.

The 2017 State of the States in Intellectual and Developmental Disabilities report concludes that “the need for long-term services and supports for people with IDD and their families will continue to increase. Three powerful demographic and legal forces impose pressure on the states and the U.S. Government to increase public financial commitments for out-of-home services and to support families.” Reasons identified are, “...as family caregivers age beyond their caregiving capabilities, supported living options must be established to support their relatives with IDD. ...A second factor promoting growing demand for IDD long-term care services and supports in the near future is the increasing lifespan for people with IDD. ...A third growth factor is the stimulus of class-action litigation.”¹

Florida is experiencing the trends described in the State of the States report. There are increased needs for long-term supports and services and associated costs for a growing number of Crisis enrollments due to Caregiver unable to provide care (55% in FY2017-18) and requests by existing waiver clients for Significant Additional Needs (SAN) funding (20% average cost per recipient increase from FY2015-16 to FY2017-18). There have also been a number of litigations brought against the Agency which have caused cost plans to increase.

The Agency for Persons with Disabilities and the Agency for Health Care Administration have worked collaboratively to identify roots causes associated with the growth in expenditures. Findings include that the population served by the iBudget waiver appears to be aging, and the average cost per recipient increases with age. Between the ages of 21 and 30, irrespective of living setting, costs rise significantly. Three main services, Residential Habilitation, Personal Supports, and Life Skills Development account for over 70% of total waiver costs, with the average cost increasing per recipient each year from FY2015-16 to FY2017-18.

¹ The State of the States in Intellectual and Developmental Disabilities: 2017, 11th Edition <http://www.stateofthestates.org/>

Developmental Disabilities Waiver Talking Points

As the State of the States report illustrates, the increased demand for services is nationwide trend. Below is a comparison of Florida to other similarly sized states in population, waiver and waiting list enrollment. According to The State of the States report, Florida ranks in the bottom two in the nation in Total Fiscal Effort, spending less than \$2.00 per \$1,000 of statewide personal income for Intellectual/Developmental Disability (IDD) services.

2017 - State of the States Report (FY2015) I/DD									
Location	U.S. Census Bureau Population Estimate (as of July 1) - 2016 ²	Waiver Enrollment	Total Fiscal Effort \$s per \$1,000 of personal income	State Ranking in Total Fiscal Effort	Federal-State Waiver Spending per Participant	% of Waiver to Census Population	2016 - Waiting List Enrollment KFF.org I/DD ³	Combined Waiver & Waiting List	Combined Waiver & Waiting List to % of State Population (2016)
United States	323,405,935	741,285	\$4.30	-	\$46,500	0.23%	423,735	1,165,020	0.36%
Texas	27,904,862	31,821	\$2.19	49	\$29,700	0.11%	196,248	228,069	0.82%
Florida	20,656,589	30,958	\$1.99	50	\$30,100	0.15%	20,751	51,709	0.25%
New York	19,836,286	73,815	\$9.06	1	\$68,200	0.37%	N/A	73,815	0.37%
Illinois	12,835,726	21,542	\$2.72	44	\$36,000	0.17%	8,470	30,012	0.23%
Pennsylvania	12,787,085	29,107	\$5.26	17	\$72,400	0.23%	9,728	38,835	0.30%
Ohio	11,622,554	34,886	\$6.77	10	\$40,800	0.30%	64,546	99,432	0.86%
Georgia	10,313,620	12,106	\$2.47	45	\$41,100	0.12%	8,698	20,804	0.20%
North Carolina	10,156,689	11,494	\$4.66	24	\$68,000	0.11%	10,000	21,494	0.21%

² Annual Estimates of the Resident Population: April 1, 2010 to July 1, 2017 U.S. Census Bureau, Population Division
https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=PEP_2017_PEPANNRES&src=pt

³ Kaiser Family Foundation analysis of Medicaid HCBS Program survey <https://www.kff.org/health-reform/state-indicator/waiting-lists-for-hcbs-waivers>

Developmental Disabilities Waiver Talking Points

As of March 28, 2019, 34,628 individuals are enrolled on the iBudget waiver, and 21,812 individuals are on the waiting list.

