



Transformation Panel

MEETING TITLE: Transformation Panel: Housing

DATE/TIME: April 7, 2015

Panel Members Attendees:

- Kerry A. Delaney, Acting Commissioner, Office for People With Developmental Disabilities
- Charles A. Archer Evelyn Douglin Center for Serving People In Need, Inc. (EDC-SPIN)
- Gerald Archibald, The Bonadio Group (via conference call)
- Nick Cappoletti, Developmental Disabilities Advisory Council Chairperson, Parent
- Donna Colonna, Services for the Underserved
- Susan Constantino, Cerebral Palsy Associations of New York State
- Barbara DeLong, Parent
- Stephen E. Freeman, Freeman and Abelson Consulting
- Ann Hardiman, New York State Association of Community and Residential Agencies
- Steve Holmes, Self-Advocacy Association of New York State, Inc.
- Steven Kroll, NYSARC
- Clint Perrin, Self-Advocate
- Peter Pierri, Interagency Council of Developmental Disabilities Agencies
- Michael Seereiter, New York State Rehabilitation Association
- Seth Stein, Moritt, Hock & Hamroff (via conference call)
- Arthur Webb

OPWDD Staff:

- Neil Mitchell, Special Assistant to the Commissioner
- Diane Woodward, Statewide Assessment Coordinator
- Helen DeSanto, Deputy Commissioner, Division of Service Delivery
- Deb Franchini, Director of Advocacy Services
- Lucinda Grant-Griffin, Director, Home and Community Living
- Henry Hamelin, Home and Community Living
- Jennifer O'Sullivan, Director of Communications
- Greg Roberts, Director of Intergovernmental Affairs
- Kevin Valenchis, Deputy Commissioner, Division of Enterprise Solutions

Other State Staff:

- Jim Huben, Developmental Disabilities Planning Council
- Lou Raffaele, Division of Budget

KPMG

- John Druke

WELCOME AND OVERVIEW OF THE MEETING: ACTING COMMISSIONER DELANEY

- Welcome and thank you for joining us today
 - Materials related to Managed Care will be shared with Panel members
 - Panel members are invited to a planning session to help prepare for the managed care sessions. A call in number will be provided.
 - The transportation subcommittee has formed and is meeting over the next two weeks. If you have not already done so, please let us know if you would like to participate.
 - Recommendations and areas for improvement are being captured in the meeting summaries. Going forward, a separate list of recommendations related to each topic area will be provided.

- Our vision statement for housing: *As our support system has evolved from institutional to community living, we now need to evolve to a system with multiple, flexible options of housing and a greater focus on independent living. This shift will promote greater participation in the community, self-esteem and societal acceptance for people with developmental disabilities*
 - We want to offer people the opportunity for community based living
 - We've had great success in helping people leave institutions. In the 1970's there were over 20,000 people in institutions. Now, there are about 500
 - We have invested heavily in the provider community, and helping to purchase housing
 - Currently, our system does not have the flexibility needed that allows for maximum independence
 - One of the barriers to achieving this flexibility is our substantial investment in property. This hampers creativity and finding new solutions
 - We need the Panel to help us think about going in a new direction
 - We want to invest in technology, and serve individuals as their wants and needs change over time
 - Creative and innovative thinking is needed to achieve sustainable and flexible housing options

- **THE FOLLOWING NOTES PROVIDE A SUMMARY OF THE DISCUSSION THAT TOOK PLACE DURING THE POWER POINT PRESENTATION BY OPWDD**
 - OPWDD's Housing Capacity Building Initiative
 - To move from institutions to independent living we have developed relationships with important Federal and State partners.
 - Going back to 1996, OPWDD was ahead of the curve and concentrated on non-traditional housing.
 - There were a number of regulations that would preclude a state agency from becoming a housing counseling agency. It was important to OPWDD to offer support services along with housing, such as counselling.
 - HUD granted permission to OPWDD to become a certified housing agency
 - OPWDD is a housing counselor, we help those moving into the community
 - The US Department of Health and Human Services also agreed to partner with OPWDD and provided funding to support the counselling aspects.
 - USDA Rural Development became an important partner to help address rural challenges
 - The State of New York Mortgage Agency (SOMA) partnered with us to help develop specialized mortgage products for individuals with a developmental disability, such as 100% financing
 - Additional New York State partners include: NYS Homes & Community Renewal, the Department of Health, Office of Mental Health, Office of Substance Abuse Services, and the Office of Temporary & Disability Assistance

- Under the Medicaid Redesign Team (MRT), the Federal and State partners came together to assess how we could work together to strengthen the housing infrastructure
- We began to access developers, to meet with them and learn about their services, and teach them about our needs. This was the beginning of a relationship with the Supportive Housing industry
- In 2013, CMS decided that they would give us a grant to provide a housing building initiative and trained us in how to work with public housing authorities.
- We began to cultivate a relationship with public housing authorities to help us achieve our goals.

— Traditional and Non Traditional Housing Opportunities

- There is a continuum of traditional housing opportunities:
 - Developmental Center, Intermediate Care Facility (ICF), Supervised IRA, Supportive IRA, Family Care
- Family Care is the oldest program in NY. This is a setting where homes of families are certified to support the individuals who live there
- The challenge is to improve the system, but recognize that we have made a large investment in the current model.
- There is a continuum of non-traditional housing opportunities:
 - Home Ownership, Rental Apartments, Subsidized Apartments, Shared Living Arrangements, Customized Residential Options, Manufactured Housing/Mobile Homes (mostly rural NY), Public Housing, Senior Housing
- With regard to homeownership, now of individuals can pool their resources together to buy a house. SONYMA has helped to champion this.
- The Panel noted that, in addition to home ownership, other services need to be considered, such as self direction and wrap around support services.
- The Panel noted that there is an opportunity to look into more use of the assisted living model, and that it may be an appropriate option for individuals with developmental disabilities over a certain age. It appears there are individuals currently served in IRAs who may be able to transition to assisted living.
- The Panel noted the opportunity to help people move to community day hab programs.
- It is important for OPWDD to develop relationships in the wider community to help advocate for the right partnerships, for example with public housing and senior housing.
- OPWDD has made forays into supportive housing, and partnered with OTDA on a number of supportive housing projects.
- The Panel noted the importance of providing both supportive services and rent subsidies. Engaging property managers to understand the importance of integrating people with developmental disabilities into the community is an important step in securing access to housing.
- Integrated housing is an important component of supporting individuals with developmental disabilities.
- We want people to be able to live in the housing environment that meets their needs – people should be served according to their preferences.
- We have a lot of data about traditional and non-traditional settings. However, it's more difficult to catalog what we're doing in non-traditional settings

— The Role of Support Agencies

- The Panel discussed the role of support agencies in working with owners and property managers to understand self direction and the impact on housing.
- There is a need for more clarity on certification, what it means and why we use it.

- The Panel recognized that both housing and supports are required, and the new model must focus on both. There are regional differences, between upstate and downstate, on the services available. The costs of these supports can be very high, especially if 24 hour support is required
- We want housing units for people with developmental disabilities to be integrated within the general housing stock. This is part of the certification discussion
- The legal framework makes it clear that housing units need to be affordable. We can't lose sight of that.

— Current Housing Data

- There will be a difference in cost as we move from an institutionalized setting to a community based setting. We expect the average costs to come down.
- There are costs related specifically to the transition itself
- The costs related to housing in institutionalized settings are higher, can be almost double and exceed the individual rate. However, the costs in a community setting may be higher as it relates to accessing services
- The Panel reviewed the Percentage of New York Residents Living in a Residential Setting (please see chart on page 13 and 14 of the presentation)
- There is a trend recognized that less investment is made downstate. Most investments were made in relation to where institutions were closed.
- The Panel noted the importance of looking at the services available in the communities that had closures, and the long term availability of the services.
- The legacy system, of the money following the person, remains. We want to be able to build options for people that meet their needs. We should consider what drove a less integrated approach and how we can overcome these barriers
- People want to live in communities they grew up in
- The past is not a predictor of the future. Let's not get focused on the percentages. We need to transition out of the legacy system into something new. We can regulate the future, for example increasing opportunities for shared living. There is a lot of innovation to be discovered and we can't over regulate it.
- We need flexibility to identify opportunities and arrange housing.
- The concern with the data is that we are looking at historical patterns to develop new services.
- Other states provide more flexible options and wrap around services.
- The Panel noted the need to understand the population coming into the program, as well the population already in the system and look at how we address their service needs. People within the system are scared and have different concerns than new people requiring housing. People who have been living in an institutionalized setting for 30-40 years have different needs going forward. It is also important to support their families.
- The new population coming into the program are younger and have different needs, require more flexibility.
- However, we do not want to run two separate systems - the legacy and the new. We need to consider the population as a whole.
- We need to also look at how we can help providers help people move to community based settings and the impact it has on providers (mortgages, etc.).

— Thinking about the new models and the right way forward

- There are three questions we need to ask:

1. Do we have the right models?
 2. What are the right ways to support the models?
 3. How do we address the problems of the legacy system while we ramp up to a new model?
- We need to help people who are in institutional settings to be exposed to new things and share with them where there has been success and what it looks like. It is easier if people have a personal connection and can understand it. We can't ask people to move without any exposure to where they are moving.
 - People coming into the system are just as diverse as people who are already in the system
 - We can leverage technology to help provide access to 24 hour care
 - We need to think about the legacy services, the new services and then give providers options and directives to help people transition
 - We should consider natural times in the life cycle for transition
 - Families don't have extra money to spend while we transition to a new model, we need to account for this.
 - All of us are here to do the same thing. We have the right ideas and the right direction, but we're struggling with how to get there. We want to be responsive without waiting too long.
 - We have trust building within the community to do.
 - Key themes in self direction are related to employment and new housing. We are redefining the community habilitation units to be more flexible and serve the needs of individuals. We need tools, building blocks, then we need providers to have incentive to create models that work and then publish the models. The models need to be universally available.
 - Providers need to understand that they will be supported financially
 - Rate rationalization can cause a lot of problems, leveraging self direction can provide more flexibility and better meet individual need.
 - There are barriers related to community habilitation. This includes overnight service support, medical appointments and clinical visits. There are a lot of regulations attached.
 - We need to think about a new system that is real time, flexible, has wrap around services, and helps pay the rent and supports required, and addresses needs like roommates, or changes in roommates and the impact that has on services.
 - How can we access our current housing stock and capital investments? The rental market is not very good and we may be losing money.
 - Can we create a strategy that is similar to the Health Homes model, but focuses on the needs related to developmental disabilities?
 - We need to create the opportunity for providers to do the right thing. Self direction will provide flexibility. OPWDD should not necessarily structure the entire model.
 - We need to move away from a system that is focused on hours and auditing. We need something that is risk adjusted, acuity based and flexible for both the providers and the individuals. Flexibility is key.
 - There is a need to better understand the Medicaid funding – and if OPWDD can have access to capital funding. Some of the projects are still under review by DOH.
 - There are areas we should consider such as home ownership and shared arrangements. Providers can support these conversations. We need to keep the needs of the individual at the center.
 - We can learn from other States, such as Oregon. The potential for small homes clustered together – this might also support our rural communities.
 - Our rural and country communities have different challenges – socially and economically.
 - We should explore flexible service offerings, and providers can work together – what services can we centralize?

- **OVER THE COURSE OF DISCUSSION THE PANEL IDENTIFIED A NUMBER OF AREAS THAT CAN BE IMPROVED:**

- **Flexible Models:** We need to move away from a system that is focused on hours and auditing. We need something that is risk adjusted, acuity based and flexible for both the providers and the individuals. Flexibility is key.
- **Supportive Service:** The Panel noted the importance of providing both supportive services and rent subsidies. People need to make sure they have access to the services they need and support that is required. There are regional differences, between upstate and downstate, on the services available
- **Community building:** There is an important opportunity to engage with the community and providers. People need to understand the needs of individuals with developmental disabilities and the importance of integrated housing. We need to build trust in the community.
- **Engagement with Individuals:** It is important to make sure we engage with individuals and their families to educate them on what models exist and what the new housing options look like.
- **Education:** There is a need for more clarity on certification, what it means and why we use it.
- **Funding:** It is important to understand the funding model and the opportunities available to OPWDD.

NEXT STEPS:

- A subgroup on housing will be created to revisit the topic of housing in working towards recommendations in this area
- The next meeting is on Thursday, April 23, from 11:00 am to 2:00 pm and will address Managed Care