



Developmental Disabilities and Medicaid

With the introduction of prior service authorizations over eight years ago, the developmental disabilities waiver services system in Florida began implementing principles of managed care. The State also moved to support coordination, a form of case management independent of the service delivery system responsible for coordinating care between Medicaid medical state plan services and waiver services.

As a solution for long term care, the developmental disabilities system operated by The Agency for Persons with Disabilities (APD) is a care diversion program. Medicaid Waiver operates as an institutional diversion program, with individuals served in the waiver supplanting more expensive institutional placements.

The service delivery system has continued to implement components of managed care, most recently with the scheduled implementation of the iBudget at the beginning of 2011. With this step the system will operate totally within a managed care type environment.

APD manages the service system for developmental disabilities. The Agency provides licensure, provider enrollment and oversight and contracts for quality assurance using National Core Indicators with a national peer review organization. Implementation of the iBudget uses available appropriations and allocates the funding in a fair and equitable manner. Families use their allocation to purchase the services they need from the APD provider of their choice. APD will continue to oversee provider quality and maintain expenditures within the Agency's budget allocation.

The Arc of Florida supports:

- Implementation of the iBudget system for a fair and equitable distribution of funds
- Continuing APD's responsibility for managing the developmental disabilities service delivery system. APD using the allocation methodology of the iBudget, will stay within the appropriation
- Holding waiver administration costs to no more than 5 percent of the budget allocation to administer the program. It is vitally important that administrative costs for the program should remain below the 5 percent margin as those dollars come directly out of constituent services. It is unconscionable to use available dollars for increased administrative costs.
- Use of the "Money Follows the Person" initiative at The Agency for Health Care Administration (AHCA) as a means of moving individuals who wish to move out of costly institutional care into the community and the funds move with them.
- Continuation of the current provider system where Individuals and families have their choice of providers best suited to meet their individualized needs. The current system makes it possible for even those in very rural areas to have access to approved waiver providers of their choice.