Texas Self-Directed Care Project

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Dallas, Texas
What is Self-Directed Care?
(as defined by CMS)

• Funds ordinarily paid to service provider agencies are controlled by service recipients
• Person-centered plans for recovery are developed by the participant
• Individual budgets are developed to allocate dollars to achievement of the plan’s goals
• Support is provided to “broker” services and help a person manage their plan
• Fiscal intermediary handles billing, payroll, taxes, & other administrative functions
What values underlie SD?

- Individual level - freedom of choice, control over one’s life, access to support & assistance, taking personal responsibility
- Systemic level - consumer satisfaction, service quality, efficiency & effectiveness, budget neutrality, reliance on free market forces
- Societal level - fairness, freedom from coercion, egalitarian approach
SDC Promotes Recovery by Enhancing Choice & Responsibility

From the 2003 *President’s New Freedom Commission on Mental Health Report*…

“… consumers and families will play a larger role in managing the funding for their services, treatments, and supports. Placing financial support increasingly under the management of consumers and families will enhance their choices. By allowing funding to follow consumers, incentives will shift toward a system of learning, self-monitoring & accountability.”
How Well Does SDC work?…

Randomized evaluation of Cash & Counseling programs (developmental & physical disabilities & the elderly)

- Outcomes of SDC participants were as good or better than regular fee-for-service (FFS)
- SDC participants received more services than their FFS counterparts
- Budget neutrality prevailed by end of 2nd year
- Consumer satisfaction was significantly higher among those served in SDC
- Incidences of fraudulent behavior were low
- Hiring (& firing) friends/family members not problematic

(Foster, Brown et al., Health Affairs, 2003)
How Well Does SDC work?...

- Pretest/Posttest Study of original Florida SDC Program for people with psychiatric disabilities
  - Participants spent a significantly higher number of days in the community in the year after joining the program
  - Participants scored significantly higher on global functioning in the year after program initiation
  - Only 16% were hospitalized (5% involuntarily admitted)
  - At follow-up, 33% held paid employment, 19% receiving job skills training, 16% in volunteer activities, 7% enrolled in postsecondary education, & 3% in GED classes.
  - Of approximately $58,000 in direct expenditures by participants over 19 months of operation, 47% was spent on traditional psychiatric services, 13% on service substitutions for traditional care, 29% on tangible goods, 8% on uncovered medical care, and 3% on transportation.  
    (Cook, Russell et al., Psychiatric Services, 2008)
How Well Does SDC work?...

- Outcomes of Florida SDC programs currently operating in Districts 4 and 8 were contrasted with a matched comparison group of clients receiving services in those districts (matched on gender, minority status & education)

- No significant differences in re-hospitalization rates between self-directed care participants and non-participants

- SDC participants had significantly lower rates of usage of crisis stabilization and crisis support than comparison group

- SDC care clients had significantly higher numbers of assessments, medical services including psychiatry, outpatient psychotherapy, and supported employment than comparison group members

- SDC participants had no differences in residential stability or number of days worked in the past month vs. matched group

(Department of Children and Families, R. L. Hall, January 2007)
Other SDC Programs for Participants in MH Recovery

• Florida SDC: Circuit 3 program operated by provider agency (Mental Health Resource Center) & Circuit 20 program operated by NAMI of Collier County

• Oregon Empowerment Initiatives: operated by an independent, peer-run not-for-profit organization

• Iowa SDC: operated by a provider agency (Hope Haven) and managed care company (Magellan)
Employment Initiatives, Inc.
Oregon

Core Value: SDC Involves Having Choices
Person-Centered Plan

Helps people to identify…

❖ Who they are & how they want to live
❖ Future goals based on how they want to live
❖ Barriers to their goals
❖ Supports & services that can facilitate success
❖ Action plan & timeline related to their goals
Individual Budget

- Budget flows from the person-centered plan
- Line items relate directly to goals specified in the plan
- Direct connection between budgeted goods, services, or supports & achievement of a goal
- Participant monitors budget on ongoing basis
## Person Centered Plan & Budget: OR Empowerment Initiatives

**Name:** Wanda B. Wurking

**Customer Number:** 1234

**Today's date:** 02/25/05  
**Phone #:** 503.123.4567  
**Plan Begins:** 06/01/05  
**Plan Ends:** 06/30/06

### What is my goal? What personal outcome do I expect as a result of this request?  
(Describe the specific symptoms or experiences related to your illness that this service will improve or relieve)

I will have a job where I am able to support myself in an independent lifestyle, and feel positive about my role in society. My self-esteem will improve dramatically through becoming self-sufficient. I have experience as an administrative assistant.

### Specific description of request

<table>
<thead>
<tr>
<th>Resource analysis</th>
<th>How will this purchase help me achieve my goals</th>
<th>What it might cost</th>
<th>When will we start and end</th>
</tr>
</thead>
</table>
| **List provider here if needed**  
(All the ways to get what I need, include family, friends, community supports) | **1) Dressing professionally will help me be more confident and look more employable during interviews.**  
**2) A solid resume will help me appear professional – cover the gaps in my work history.**  
**3) It will allow me to get to job interviews.** | **$250** | **06/05 one time** |
| **1) I will purchase clothes at Clothes 'R Us. Pants, shirt, shoes, jacket, belt.**  
2) Resource broker will arrange for resume assistance with volunteer career developer working out of Do Drop-In center.  
3) I will purchase monthly bus pass from mass transit service.** | **$-0-** | **06/05** |
| **PLAN TOTAL:** $2143 | **$56 / mo** | **06/05-10/05** |

### SIGNATURES

<table>
<thead>
<tr>
<th>Individual:</th>
<th>Date:</th>
<th>Legal Representative:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resource Broker:</td>
<td>Date:</td>
<td>Other:</td>
<td>Date:</td>
</tr>
</tbody>
</table>

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Services Research & Policy
Role of the Support Broker

- May help develop person-centered plan
- Help ensure plan is implemented & modified if needed
- Help navigate community resources & form connections
- Assist with managing the individualized budget
- Help recruit, hire, & negotiate rates with providers
- Help train & supervise (if requested) & discharge providers (if requested)
- Help develop & implement emergency plan
- Assist with billing through the Fiscal Intermediary
- Always a co-pilot - never the pilot

(Adapted from My Voice/My Choice, Idaho Dept of Health & Welfare)

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FloridaSDC Recovery Coaches

- [http://www.floridasdc4.com/participants_recovery.htm](http://www.floridasdc4.com/participants_recovery.htm)
Core Value: SDC Participants
Take Control
Participants are able to choose their service providers

FloridaSDC Circuit 20 Providers

• http://www.flsdc.org/program/direct.htm#Hemmings
Participants Can Choose Service Substitutions

Less restrictive, more flexible goods & services, that the participant chooses, to achieve similar traditional service recovery goals

- Replace formal services with informal services
- Replace services with “normal” community activities
- Replace public services with private services
- Replace services with goods

Examples from Florida SDC - attending Weight Watchers, yoga classes, martial arts classes, joining the “Y”, taking college courses, certification courses, correspondence courses, buying self help books and classes, school supplies, clothes for job interview
Name: Red E. Toolieve
Customer Number: 9874

Today's date: 05/25/05
Phone #: (503) 987-6543
Plan Begins: 07/01/05
Plan Ends: 07/31/05

What is my goal? What personal outcome do I expect as a result of this request? (Describe the specific symptoms or experiences related to your illness that this service will improve or relieve.)
To be discharged from Oregon State Hospital and live in my former residence with extra services and supports in place to help me cope with living in the community.

Specific description of request | Resource analysis | How will this purchase help me achieve my goals | What it might cost | When will we start and end
--- | --- | --- | --- | ---
1) A health club membership. | 1) Broker has made arrangement with YMCA for sliding scale fee based on my income. | 1) Strenuous exercise helps me sleep and night and feel more relaxed during the day. | $9 / mo $108 / yr | 7/05 – 6/06
2) a) Light therapy panel. b) Full-spectrum lighting. | 2) a) Light panel through OHSU light therapy program. b) Full spectrum lights from local hardware store. | 2) Light therapy and full-spectrum lights (no UV) will help me maintain a positive mood. | a) $200 b) $150 | 07/05 one time
3) Eye Movement Desensitization Reprocessing therapy series. | 3) Broker will assist me in obtaining a referral from Veteran’s Association. | 3) I believe this treatment will help me resolve the trauma that lead to my diagnosis of Post Traumatic Stress Disorder. | $100 / session 8 weekly sessions | 08/05 10/05
4) Naturopathic Doctor and Nutritional Supplements. | 4) I will receive sliding-scale services through the National College of Naturopathic Medicine. My medical provider will coordinate with my naturopathic provider. | 4) Fish oil, flaxseed oil, and antioxidants such as CQ-10 are widely believed to help keep moods level. | $50 / mo 12 months | 07/05 06/06

PLAN TOTAL: $1558

Page total: $1558

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Purchasing Services

• http://www.floridasdc4.com/provider_fee.htm
# Provider Fee Schedule

**Provider Name:**

<table>
<thead>
<tr>
<th>Services you provide</th>
<th>Reimbursement to Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychological Assessment</td>
<td>$70.00 per hour</td>
</tr>
<tr>
<td>Resource Coordination (sometimes called intensive case management)</td>
<td>$60.00 per hour</td>
</tr>
<tr>
<td>System Guidance (sometimes called case management)</td>
<td>$47.45 per hour</td>
</tr>
<tr>
<td><strong>Medical Services</strong></td>
<td></td>
</tr>
<tr>
<td>Psychiatric Evaluation</td>
<td>$208.85 per hour</td>
</tr>
<tr>
<td>Medication Management</td>
<td>$52.21 / 15 minutes</td>
</tr>
<tr>
<td><strong>Counseling Services</strong></td>
<td></td>
</tr>
<tr>
<td>Psychologist</td>
<td>$70.00 per hour</td>
</tr>
<tr>
<td>LMHC, LCSW, LMFT</td>
<td>$70.00 per hour</td>
</tr>
<tr>
<td>Group</td>
<td></td>
</tr>
<tr>
<td>Psychologist</td>
<td>$17.46 per hour</td>
</tr>
<tr>
<td>LMHC, LCSW, LMFT</td>
<td>$17.46 per hour</td>
</tr>
<tr>
<td><strong>Psychoeducational Services</strong></td>
<td>$17.46 per hour</td>
</tr>
<tr>
<td><strong>Behavioral Services</strong></td>
<td></td>
</tr>
<tr>
<td>Certified Behavior Analyst</td>
<td>$70.00 per hour</td>
</tr>
<tr>
<td>Certified Associate Behavior Analyst</td>
<td>$43.20 per hour</td>
</tr>
<tr>
<td>Sheltered Employment</td>
<td>$58.00 per day</td>
</tr>
<tr>
<td>Supportive Employment</td>
<td>$49.00 per hour</td>
</tr>
<tr>
<td>Supportive Living</td>
<td>$48.00 per hour</td>
</tr>
<tr>
<td>Transportation</td>
<td>$0.29 per mile</td>
</tr>
<tr>
<td>Drop-in Self-help Center</td>
<td>No Charge</td>
</tr>
<tr>
<td>Support Groups</td>
<td>No Charge</td>
</tr>
</tbody>
</table>
Fiscal Intermediaries

Common Fiscal Intermediary Administrators

- Colleges & universities
- Larger non-profits
- Managed care organizations
- Insurance groups
- Disability service cooperatives

Role of Fiscal Intermediaries

- Pay claims & process vouchers
- Independent, 3rd party administrator
- Manages provider network
SDC Provider Network

• http://www.floridasdc4.com/provider_being.htm
Good Communication with Providers is Essential

• https://www.magellanprovider.com/MHS/MGL/about/whats_new/providerfocus/new/archives/fall07/regionnews/tenncare/article2.asp
Considerations When Choosing A Fiscal Intermediary

• Knowledge & experience with SDC in healthcare for people with disabilities
• Established mechanisms for receiving, holding, authorizing, distributing & accounting SDC funds & managing individual accounts
• Willingness to be available to program participants, advisory board, & providers
• Free of conflict of interest
• Clean audit records & no public complaints on file
• Ability to administer the program’s Purchasing Policy
What Is A Purchasing Policy?

A policy document describing how people can spend their money in accordance with their own individual budgets
• Lays out what expenses are allowed and not allowed
• Describes the process of having one’s budget approved
• Specifies the manner in which goods and services can be purchased (cash, voucher, debit card, reimbursement)
• Specifies limits on amounts that can be spent within line items
• Describes the individual’s ability to shift $ between line items
• Explains sanctions in the event of policy violations
• Explains what will happen with unspent monies (carried forward, returned to the system)

http://www.dhhs.state.nc.us/mhddsas/rfa9/rfa9-attach1policyquestions4-04.pdf
General Guidelines for Approval of Purchases
(Florida SDC Purchasing Policy & Guidelines (2006))

Does the purchase…

• provide for diagnosis/prevention/tx of DSM-IV condition?
• meet standards of good & generally accepted practice, as reflected by scientific/peer literature & best practices?
• meet standards of good common sense?
• directly relate to self-identified needs in the life analysis?
• meet standards of efficiency, safety & effectiveness?
• promote independence?
• use public tax money wisely?
• enhance employability or productive activity?
• ultimately purchasable through earned income?
Core Value: Absence of Conflict of Interest

"Under disclosure rules, I'm required to tell you I own stock in the company whose drug I'm prescribing."

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What Considerations Go Into Funding an SDC Program?

• In budget neutral programs, the annual amount participants’ have to spend depends on current service costs (in Texas this will be based on the cost of service package 3)
• Programs can be time-limited vs. ongoing
• Decide how to staff the program
• Decide where to locate the program
• Funds for staff training may be necessary
How Much $ is Available to Consumers in Individual Budgets?

Examples:
Florida SDC - a person without Medicaid can spend up to $3700/year, and a person with Medicaid will continue using it whenever possible and have an extra $1924/year, ongoing
Oregon Empowerment Initiatives - $3,000/year for 2 years only
Iowa Program - $2,000 devoted to a single recovery goal, ongoing
Most Common Funding Sources for SDC

Medicaid

- Medicaid State Plan – under Rehab Option (person-centered planning as part of treatment planning, financial management & supports brokerage approved as administrative expenses)
- Waivers - 1915(c), 1915 (b), 1115
- System Change Grants – Independence Plus programs

State General Revenue

- Monies re-directed from traditional to SDC programs
- Combined with MHBG funding & other state funding
- May require state legislation

CMHS/SAMHSA State MH Block Grant

- Included in a state plan along with its relationship to the current system & fiscal intermediary arrangements
Building a Strong Design & Planning Team: Team Member Roles

- Program participants are #1 stakeholders
- Community grass-roots advisory board
- Program staff (project director & support brokers)
- Third-party fiscal administrator (conflict of interest-free)
- Community service providers (private & public)
- Mental health & disability advocacy organizations
- Larger community
Evaluation Plans

- Independent evaluation will be conducted by the University of Illinois at Chicago, National Research & Training Center on Psychiatric Disability http://www.cmhsr.uic.edu/nrtc/default.asp
- Focus on recovery outcomes, participant satisfaction, & costs
- Want to conduct research with the rigor to inform public policy in the state, with potential to support model’s replication in other communities
- Want to involve program participants & other community stakeholders in the research process
Next Steps for SDC in Dallas…

• Locate a home for the program
• Identify a fiscal intermediary - ValueOptions
• Decide on an advisory/planning group structure
• Spread the word to interested parties
• Invite reactions from larger community
• Next meeting in approximately 4 weeks