



DDRS Advisory Council

Wednesday, April 16, 2025
In-Person and Livestream



ALL people are empowered to live, love, work, learn, play and pursue their dreams.



Agenda Item	Time	Discussion Leader
Welcome, Introduction, Video, DDRS Advisory Council Meeting Schedule	15 Mins	Jessica Harlan-York Lexi Westerfield
DDRS Updates	15 Mins	Kelly Mitchell
Bureau of Rehabilitation Services Update	1 Hour	Theresa Koleszar
Break	15 Mins	
BDS Update	1 Hour	Holly Wimsatt
Parking Lot	15 Mins	Jessica Harlan-York



Video



Supported Employment MythBusters: Intro to Employment



DDRS Updates

Kelly Mitchell
DDRS Director

Conference Registration is Open!



- Bloomington, IN June 12 & 13
- 2 full days of conference sessions
- Mix of traditional one-hour and longer in-depth sessions
- 2 full days of virtual live streaming from the main conference room
- In-person - \$125
- Virtual - \$75

<https://earlyintervention.iu.edu/registration/index.html>



Bureau of Rehabilitation Services Update

Theresa Koleszar

Comprehensive Statewide Needs Assessment (CSNA)



- Purpose
- Takeaways and Themes
- Targeted recommendations



CSNA: Purpose

Evaluate the vocational rehabilitation needs of Hoosiers with disabilities, with a focus on those who:

- Have the most significant disabilities, including their need for supported employment;
- Who have been unserved or underserved;
- Are served through other components of the statewide workforce development system;
- Are youth and students with disabilities.*

Evaluate the need to establish, develop, or improve Community Rehabilitation Providers.

- **including their need for pre-employment transition services or other transition services and needs of individuals with disabilities for transition services and pre-employment transition services, and the extent to which such services provided under this part are coordinated with transition services provided under the Individuals with Disabilities Education Act.*

CSNA – Takeaways and Themes



- 78.8% were individuals with a most significant disability
- 27.9% were students or youth; 43.4% are under age 30
- 19.7% were members of racial or ethnic minority groups
- Portion of individuals served by region proportional to population size
- Intellectual/development disability most common primary impairment (36.3%), mental health condition most common secondary impairment (46.3%)
- Individuals in rural communities closed successfully at slightly higher rate than individuals in urban settings
- Average cost per case = \$6,606

Themes:

- transportation & loss of benefits commonly cited barriers especially by VR & providers
- services not provided quickly enough
- staff capacity challenges
- increased training needs
- improved communication
- reduced complexity
- improved services for mental health population

Individuals Served by Disability

Primary Disability	Percent
Intellectual and Developmental Disability	36.3%
Behavioral/Mental Health Disability	29.5%
Physical Disability	20.7%
Sensory Disability	13.6%

Secondary Disability	Percent
Intellectual and Developmental Disability	28.0%
Behavioral/Mental Health Disability	46.3%
Physical Disability	21.5%
Sensory Disability	4.3%



Individuals with MSD

- Represent a supermajority of participants served (78.8%)
- Among participants with closed cases, MSD had highest rate of exit with employment, but lowest average wages and weekly hours worked
- Individuals meeting MSD criteria remained in services, on average 1,076 days from eligibility through exit with employment, and 794 days from eligibility to other closure.



Recommendations

1. Improve services for target populations, including individuals with mental health conditions
2. Review processes to maximize efficiency
3. Improve the transition process for students entering VR Services
4. Expand access to postsecondary education and training
5. Help employers create opportunities
6. Consider Establishment projects to improve capacity of CRPs



CSNA – Recommendation 1

Improve services for targeted populations, including individuals with mental health conditions

- Continue to strengthen partnerships and coordination with aligned organizations and those serving targeted populations
- Build on existing practices to increase capacity of current providers and to build on successes
- Success stories representative of population of individuals engaged in services



CSNA – Recommendation 2

Review Processes to Maximize Efficiency

- Opportunities to streamline administrative practices and policies
- Improved consistency of policy interpretation across offices



CSNA – Recommendation 3

Improve the Transition Process for Students Entering VR

- Training and resources to secondary settings to connect students to appropriate workforce programs sooner
- Expand engagement with diploma-track students



CSNA – Recommendation 4

Expand Access to Postsecondary Education and Training

- Expand partnerships with postsecondary institutions to improve collaboration in supporting individuals to obtain postsecondary training and make a smooth transition to the workforce
- Expand VR Counselor awareness of short-term postsecondary credential attainment, apprenticeships, and other training pathways



CSNA – Recommendation 5

Help Employers Create Opportunities

- Increase access to work-based learning opportunities for students and other individuals transitioning to the workforce
- Evaluate strategies to gather ongoing employer feedback on their workforce needs.



CSNA – Recommendation 6

Opportunities for establishment, development, or improvement of CRPs

- Strengthen capacity of current providers
 - Reduce wait times for services, increase capacity for provision of services, and improve the number and quality of employment outcomes



Additional Updates – Establishment Projects

- 18 VR providers awarded establishment projects through request for funding
- Improve and expand current employment service programs to serve VR participants
- Improve service delivery and timeliness
- Increase the quantity and quality of employment outcomes
- [Establishment project webpage](#)
- \$8.2M in awarded funds over a 4-year period
 - \$1.8M CRP match / \$6.5M federal VR share over the 4-year period
 - Will enable IN VR to draw, on average, another \$1.5M in federal funds each year

Additional Updates – Employment Service Streamlining and Clarifications



- VR Employment Advisory Group recommendations
 - Streamlining/simplifying employment services documentation
 - Joint training to VR/provider staff throughout March
 - Reduce burden/increase efficiencies
- VR employment service expectations and clarification
 - Participant engagement
 - Faster movement toward job development
 - Better alignment with capacity and resources
 - Increased employment outcomes

[June 2025](#)
[Check and](#)
[Connect](#)
[Sessions](#)



Bureau of Disabilities Services Updates

Holly Wimsatt



Waiver Amendments submitted in February

- Health & Wellness Amendment
- Traumatic Brain Injury Amendment
- PathWays for Aging Amendment (b) & (c)

Health & Wellness Waiver Amendment



- Reflect the engagement, responsibilities, and oversight of the Level of Care Assessment Representative (LCAR) contractor
- Revise unduplicated number of participant counts and corresponding cost neutrality demonstration information
- Add new purpose for state to reserve waiver capacity
- Modify the level of care evaluation /re-evaluation language to remove references to the e-screen and reflect the use of the InterRAI suite of instruments
- Make technical changes to revise or delete obsolete language/provisions/web references throughout.



Traumatic Brain Injury Waiver Amendment

- Reflect the engagement, responsibilities, and oversight of the Level of Care Assessment Representative (LCAR) contractor
- Modify the nursing facility level of care evaluation /re-evaluation language to remove references to the e-screen and reflect the use of the InterRAI suite of instruments
- Revise cost neutrality demonstration information
- Make technical changes to revise or delete obsolete language/provisions/web references throughout.

PathWays 1915(c) Waiver Amendment



- Reflect the engagement, responsibilities, and oversight of the Level of Care Assessment Representative (LCAR) contractor
- Revise unduplicated number of participant counts and corresponding cost neutrality demonstration information
- Add new purpose for state to reserve waiver capacity
- Modify the nursing facility level of care evaluation /re-evaluation language to remove references to the e-screen and reflect the use of the InterRAI suite of instruments

PathWays 1915(b) Waiver Amendment



- Replaced references to AAAs conducting options counseling with Level of Care Assessment Representative (LCAR) vendor.

Waiver Renewals submitted in March



- Family Supports Waiver
- Community Integration and Habilitation Waiver
- Associated (b)(4) for selective contracting of Case Management

Community Integration & Habilitation Waiver Renewal



- Updated reference to 1915(b)(4) waiver
- Revised unduplicated number of participant counts
- Revised cost neutrality demonstration
- Technical changes to revise or delete obsolete language/provisions/web references

Family Supports Waiver Renewal



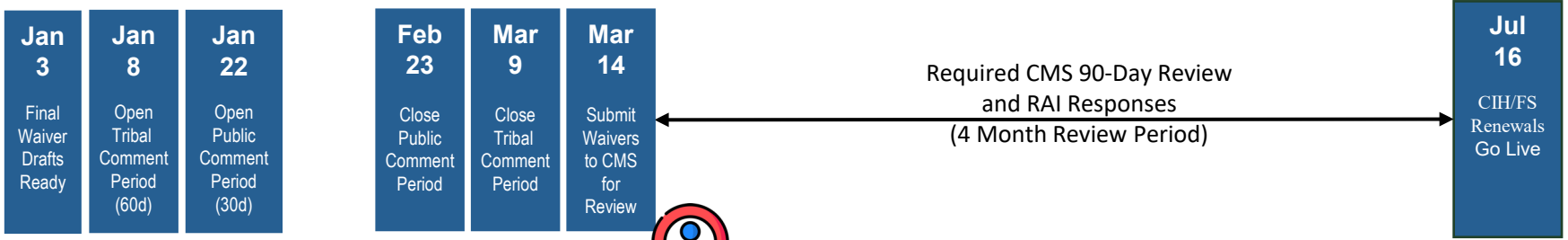
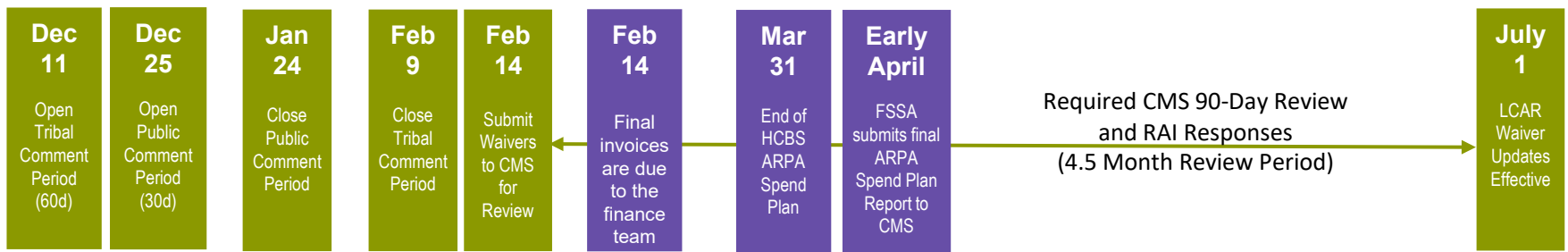
- Updated reference to 1915(b)(4) waiver
- Revised unduplicated number of participant counts
- Revised reserved waiver capacity counts
- Revised waitlist description
- Revised cost neutrality demonstration
- Technical changes to revise or delete obsolete language/provisions/web references



1915(b)(4) Case Management Waiver Renewal

- Revised waiver name to “HCBS Case Management Selective Contracting Program”
- Updated estimated individuals served
- Updated case load values for case managers
- Updated monitoring methods to reflect current practice
- Updated Waiver Cost-Effectiveness and Efficiency Projections
- Technical changes to revise or delete obsolete language/provisions/web references

2025 Waiver Amendment Timeline



Key:

- LCAR Related (H&W/TBI/PW)
- Waiver Renewal (CIH/FS)
- Fall 2025 Changes
- ARPA Related Activities



2025 Legislative Budget Session



Winter Amendments

- Extraordinary Care

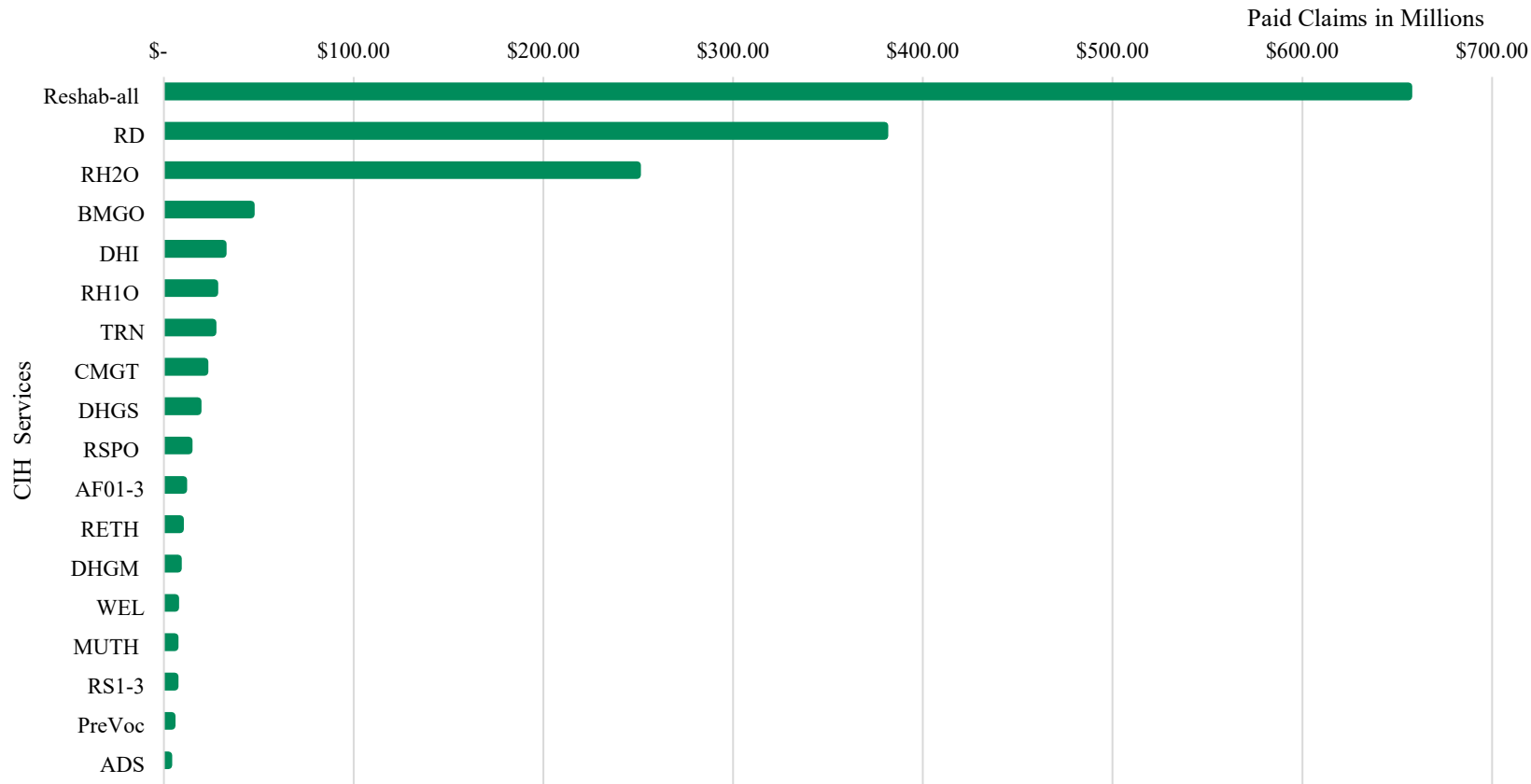


Case Management Only

Waiver	SFY25 (7/1/24-3/31/25)			Mar-25		
	0-17	>17	Total	0-17	>17	Total
CIH	0	70	70	0	83	83
FSW	2452	1327	3779	2608	1408	4016
H&W	0	0	0	0	0	0
TBI	0	0	0	0	0	0

CIH Services Utilized Budget SFY 2024

CIH SFY 2024 Paid Claims by Service



Mean:
\$93,934.36

Median:
\$99,384.34

Mode:
\$2,274.72



Level of Care Assessment Representative (LCAR)

- As of July 1, FSSA will utilize a statewide vendor (Maximus) to complete nursing facility level of care assessments.
- Nursing facility level of care requirements have not changed.
- InterRAI Peds-Home Care and Early Years tools will be utilized to better assess the needs of youth seeking nursing facility level of care
- This impacts:
 - Health & Wellness Waiver
 - Traumatic Brain Injury Waiver
 - PathWays for Aging Waiver
 - Pre-Admission Screening for nursing facility placement



Did you know...

Transportation services are services to transfer individuals in a vehicle from the point of pick-up to a destination point.

Transportation services enable individuals to access nonmedical community services, resources, destinations or places of employment, as well as maintain or improve their mobility within the community, increase independence and community participation and prevent institutionalization as specified by the PCISP.

Transportation can be via a private, public, or commercial vehicle.

Bus passes or alternate methods (Uber, Lyft, etc.) of transportation may be used for Level 1 or Level 2.



Waiver Utilization

- Individual budgets are not decreased in subsequent year if full allocation is not utilized in the previous year.
 - If an individual only needs to utilize \$15,000 of services on the FSW in 2024, they still have access to the full \$26,482 in 2025.
- Medicaid State Plan services should be utilized before Waiver services
- Waiver services should be commensurate with the need
- Cost neutrality

Medicaid Recipient and Provider Fraud



The FSSA Chief of Investigations takes all reports where concerned individuals, employees, sub-recipients and contractors wish to report a fraud concern. If you suspect fraud by a recipient, service provider, healthcare professional or employee for any of the assistance programs listed below:

- SNAP/food assistance
- Medicaid and other state health care plans
- TANF/cash assistance
- Child Care Development Fund
- Other FSSA public assistance programs

The following are ways to contact are:

- FSSA fraud hotline: Call toll-free: 800-403-0864. Monday to Friday, 8 a.m. to 4:30 p.m. Select option 5. When prompted, enter your ZIP code.
- Email: ReportFraud@fssa.IN.gov
- Mailing address:
FSSA Compliance Division
Room E-414
402 W. Washington St., Indianapolis, IN 46204
- Fax: 317-234-2244
- For fraud policy, [click here](#).

Reports can be made anonymously, and all reports are kept completely confidential.

Parking Lot





Next Meeting!

- Wednesday, June 18, 2025, in-person, IGC, Conference Room 1&2! BDS will be giving their update.

