



Navigating the DDS ISP Process

Hillary Dunn Stanisz, Esq.
Disability Law Center

Agenda

- Available Services and Supports
- Prioritization
- ISP Development
- Rights in the ISP process
- Home and Community Based Waivers and Plan of Care
- Human Rights



DDS Adult Services and Supports

- Service Coordination
- Employment Supports
- Community Based Day Supports (CBDS)
- Individual Supports
- Family Supports
- Residential Services*
 - Shared Living & Community Residences
- Self-Directed Supports



MassHealth/Medicaid Funded Services and Supports

- Personal Care Attendant (PCA) Services
- Adult Family/Foster Care (AFC)
- Day Habilitation
 - Day Habilitation Supplemental Services (1:1)



DDS Adult Services and Supports: Prioritization Process

- Remember: No entitlement!
- Assessment of level of need
- Massachusetts Comprehensive Assessment Profile (MASSCAP)
 - ICAP, CCA & Professional Judgment
- Supports Intensity Scale (SIS)



DDS Adult Services and Supports: Prioritization Process

First Priority/Priority One:

- The service or support requested is necessary for health or safety reasons.

Second Priority/Priority Two:

- The service or support is necessary to meet one or more identified needs.

No Priority Assigned:

- Do not qualify for the requested service.

DDS Individual Support Plans (ISP)

Ongoing Planning Process

Who gets an ISP?

- Special eligibility
- DDS residential, day or employment supports
- Day habilitation funded all or in part by DDS
- “Minimal supports” may or may not

ISP Team

- Individual served by DDS
- Guardian, if applicable
- Family authorized by the individual
- DDS Service Coordinator
- Providers of the supports and services
- Anyone who the individual/guardian feels could be helpful

ISP Timelines

- ISP meeting → within 60 days after individual begins receiving supports
- Service Coordinator consult with individual (& guardian) → within 15 days of start of supports OR at least 45 days prior to ISP meeting
- Notification of time, date & place of meeting → at least 30 days prior
- Annual meeting to review/update; new ISP every 2 years

Assessments & Professional Consultations

- Required assessments & additional/optional assessments
- Assessments & professional consultations should begin at least 30 days prior to the ISP meeting
- If requested, Service Coordinator must provide the assessments & professional consultations at least 7 days prior
- Provider must provide report on implementation of ISP at least every 6 months

What is in the ISP?

- Vision
- Current Supports
- Safety/Risk
- Legal/Benefits/Financial
- Successes/Positive Events
- Challenges and Emerging Issues
- Unmet Needs
- Goals and Objectives



The goals, objectives and any supports or strategies in the ISP **must promote the following outcomes:**

- Rights and Dignity
- Individual Control
- Community Membership
- Relationships
- Personal Growth and Accomplishments
- Health, Safety and Financial Security

Distribution of the ISP

- Within 45 days of the ISP meeting
- Upon request and within 10 days of receipt, individual & guardian have the right to meet with the Service Coordinator for an explanation of the ISP.
- Notice of appeal rights

How Can I Change My ISP?

- Meet annually to review/update
- New ISP developed every 2 years
- Request an ISP Team meeting
- Request ISP Modification
- Appeal the ISP

Appeal Rights

- Denial of eligibility
- Assignment of priority for services
- Whether the assessments performed to serve as the basis for developing the ISP were sufficient
- Whether the goals in the ISP promote the required DDS outcomes
- Whether the supports identified in the ISP are the least restrictive, appropriate and available supports to meet ISP goals

Appeal Rights continued

- Whether the use of behavior plans, medication and limitations of movement are consistent with DDS regulations
- Whether the ISP team recommendation about the person's ability to make personal and financial decisions is appropriate
- Whether the ISP was developed, reviewed, or modified in accordance with DDS regulations
- Whether DDS and/or the provider agency are implementing or following the ISP

ISP Appeal Process

- **File written appeal** to the Regional Director within 30 days*
 - Unsigned ISP does NOT = appeal or rejection
- Informal Conference
- Fair Hearing, if issues not resolved at the Informal Conference



Home and Community Based Services Waivers

- Receive services in home/community vs. institutions
- Combination of federal and state funds
- 3 DDS administered Intellectual Disability Waivers:
 - Adult Supports Waiver, Community Living Waiver & Intensive Supports Waiver
- ABI/MFP Residential Habilitation (DDS); non-residential (MRC)

HCBS Waivers & Plan of Care

- Waiver services and non-waiver services
 - Ex. Day Habilitation Supplemental Supports
 - Ex. Service Coordination
- Amount or frequency of waiver services
- Who provides the waiver service
- Right to appeal

Human Rights

- Dignity and respect
- Self-determination and freedom of choice
- Dignity of risk
- Live and receive services in the least restrictive and most typical setting possible
- Communication
- Visits
- Reasonable expectation of privacy

Community Integration

- DDS supports should help people not just be “in” the community but “of” the community.
- Federal Law
 - Title II of the ADA
 - Olmstead
 - CMS HCBS regulations
- DDS regulations

Rights Violations: What can I do?

- Abuse or Neglect → Disabled Persons Protection Commission
- Disability Law Center
- DDS Office for Human Rights
- Human Rights Complaint/Grievance with the provider agency
- Human Rights Officer and Human Rights Coordinator
- Human Rights Committee
- ISP meeting and ISP appeal



Becker Family Trust Grant:

Community Integration Opportunities in Day Habilitation

- The issue
- The goals
- *How you can get involved*



Questions & Answers

THANK YOU!

Hillary Dunn Stanisz, Esq.

Disability Law Center

(617) 723-8455

www.dlc-ma.org