Navigating the DDS ISP Process

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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!

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