**Report: Status of Participant-Directed Supports (PDS) in Pennsylvania’s Office of Developmental Programs (ODP)**

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# Introduction

 **“All people with disabilities shall have the option to design, control and direct their own services and funding.”**

 **- Pennsylvania Person-Driven Services and Supports Coalition**

The Person-Driven Services Project is funded by the Pennsylvania Developmental Disabilities Council.

Objectives of the Person-Driven Services project are to:

* Build the capacity for Supports Brokering in Pennsylvania.
* Demonstrate that person-driven service models are cost-effective and produce both greater quality of life outcomes and satisfaction with services.
* Build evidence-base for cost effectiveness and improved outcomes of person-driven services.
* Build support among Pennsylvania disability service systems policy makers and legislators for the personal and financial benefits of people with disabilities having control over their own services and supports, in particular, Cash and Counseling models.

In order to build the capacity for and improve person-driven approaches in the Commonwealth’s service systems, an examination of the current status of Participant-Directed Support (PDS) models is critical. The following report provides a basic explanation of the PDS options available to people who access services through the Office of Developmental Programs and an analysis of PDS utilization data. The intent of this report is to inform policymakers, providers, family members and people with disabilities about the status of person-driven services and supports in Pennsylvania so that gaps and barriers to person-driven approaches can be addressed.

# What is Participant-Directed Support (PDS)?

**Current Employer Authority in ODP Waivers:**

**Intellectual Disability (ID) waiver participants are afforded the decision-making authority to recruit, hire, train and supervise the individuals who furnish their services.**

**Current Budget Authority:**

**ID waiver participants have limited budget authority. Participants have the ability to determine workers’ wages from established wage ranges.**

In Participant-Directed Support (PDS) people have the option to design, control and direct their own services and funding. For Medicaid payment for PDS, the Centers for Medicare and Medicaid (CMS) have specific features that must be part of a state’s program. Medicaid reimbursable PDS options involve a program design that allows for *employer authority* and/or *budget authority*. The CMS explains these terms as:

* **Employer Authority:** participants are afforded the decision-making authority to recruit, hire, train and supervise the individuals who furnish their services.
* **Budget Authority:** participants may also have decision-making authority over how the Medicaid funds in a budget are spent.[[1]](#footnote-1)

# Participant-Directed Support in ODP

Pennsylvania’s Office of Developmental Programs (ODP) allows some participant-directed supports for two of the three home and community-based waivers it administers. Person/Family Directed Supports (P/FDS) and Consolidated waiver participants who live in private residences, (not provider operated residential settings), may elect to use “Participant Directed Supports.” This option allows employer authority and very limited budget authority (only the ability to determine workers’ wages from established wage ranges) for participants on the two Intellectual Disability (ID) waivers. The Autism waiver does not currently have any options for participant-direction.

| **Services that Can Be Self-Directed IN odp’S id wAIVERS** **(eMPLOYER AUTHORITY)** | **ID WAIVER SERVICES PURCHASED THROUGH Financial Management Services (FMS)** |
| --- | --- |
| * Home and Community Habilitation (Unlicensed)
* Homemaker/Chore
* Unlicensed Respite
* Supports Broker
* Supported Employment
* Companion Services
 | * Home Accessibility Adaptations
* Vehicle Accessibility Adaptations
* Assistive Technology
* Transportation (Mile) and Public Transportation
* Specialized Supplies
* Educational Support Services
 |

# Utilization of PDS in ODP

As of August 2015, 3,823 people were self-directing at least 1 of their ID waiver services. Use of PDS for ID waiver participants varies by county from 0-42% across the Commonwealth. Cambria and Cameron/Elk have no ID waiver participants authorized to use PDS. Allegheny, Armstrong/Indiana, Philadelphia and McKean have 1% of waiver participants using PDS. Huntington/Mifflin/Juniata, Lehigh, Butler, Luzerne/Wyoming, Forest/Warren, Potter and Venango all have greater than 30% of ID waiver participants using PDS.

##### Table 1: Number of People Self-Directing at Least 1 Service

##### on P/FDS Waiver by Region

##### Table 2: Number of People Self-Directing at Least 1 Service

##### on Consolidated Waiver by Region

| Table 3: Percentage of People Directing at Least 1 Service by County/Joinder |
| --- |
| **0-5%** | **6-10%** | **11-15%** | **16-20%** | **21-30%** | **31-40%** | **40%+** |
| * **Allegheny**
* **Armstrong/**

**Indiana*** **Bucks**
* **Cambria**
* **Cameron/Elk**
* **Clearfield/**

**Jefferson*** **Fayette**
* **McKean**
* **Philadelphia**
* **Westmoreland**
 | * **Carbon/**

**Monroe/Pike*** **Lackawanna/**

**Susquehanna*** **Lawrence**
* **Mercer**
 | * **Beaver**
* **Blair**
* **Chester**
* **Crawford**
* **Cumberland/**

**Perry*** **Franklin/**

**Fulton*** **Greene**
* **Lancaster**
* **Lebanon**
* **Montgomery**
* **York/Adams**
 | * **Bedford/**

**Somerset*** **Bradford/**

**Sullivan*** **Clarion**
* **Lycoming/Clinton**
* **Northumberland**
* **Tioga**
* **Washington**
* **Wayne**
 | * **Berks**
* **Centre**
* **Columbia/**

**Montour/****Snyder/Union*** **Dauphin**
* **Delaware**
* **Erie**
* **Northampton**
* **Schuylkill**
 | * **Butler**
* **Huntingdon/**

**Mifflin/Juniata*** **Lehigh**
* **Luzerne/**

**Wyoming*** **Potter**
* **Venango**
 | * **Forest/Warren**
 |
| **For details on waiver enrollment and PDS use by county, see Appendix B.** |

# Assistance for Participant-Direction

The CMS requirements are that people self-directing should have access to services and supports to develop a person-centered plan and individual budget. Further, people should have access to support to (a) recruit, hire and manage their workers and supports and (b) manage their individual budget to most effectively meet their needs. On the ID waivers, people who elect to direct their own services in the ID waivers choose from two models of Financial Management Services (FMS), Agency With Choice (AWC) or Vendor Fiscal/Employer Agent (VF/EA). Supports Broker Services are also funded under the waivers though the service is not available in most areas of the state.

## Financial Management Services

In order for people to exercise employer authority, administrative support related to employer functions is necessary. Pennsylvania, for all home and community-based waivers, primarily uses a Vendor Fiscal/Employer Agent to perform this function. For both the Office of Long Term Living (OLTL) and ODP waivers, the state contracts with Public Partnerships, LLC (PPL)[[2]](#footnote-2) to perform this function on behalf of roughly 16,000 waiver participants. For people on the ID waivers, the state also offers an Agency With Choice or co-employer model. The state contracts with over 20 local AWCs to provide this service.[[3]](#footnote-3) Of the 3,823 ID waiver participants who self-directed at least one waiver service as of August 2015, 3076 used AWC and 747 used the VF/EA model.

For both models of Financial Management Service, the Commonwealth pays a per member per month (PMPM) fee to the FMS and provides reimbursement for all authorized waiver services and supports processed by the FMS. In all of Pennsylvania’s waivers, FMS is an administrative service. Both FMS models provide a specialized payroll service and have the ability to purchase approved vendors services.

Use of type of FMS varies significantly across the Commonwealth. Table 4 illustrates the counties in which AWC use is above the state average of 80% and Table 5 shows counties where the VF/EA use is above the state average of 20%. The difference represented in these two tables highlights potential issues around access, representation, and choice that should be examined.

Table 4 AWC Use by County/Joinder**[[4]](#footnote-4)\***

Table 5 VF/EA Use by County/Joinder[[5]](#footnote-5)\*

## Supports Broker Services

Supports Broker Service is a billable service under the P/FDS and Consolidated waivers for people who live in their own private homes and elect to use participant-direction. The intent of Supports Broker services is to enhance the individual’s ability to direct his or her own services. Supports Brokering is an optional service to assist people with their employer-related responsibilities, enhancing natural supports, and compliance with program rules. For a detailed explanation of Supports Broker duties, see Appendix A. Though an allowable waiver service for over a decade, Supports Broker capacity is just being developed in Pennsylvania. As a result, there are very few people who use this service and very few providers who offer this service.

As of July 2015, 33 people were authorized to use Supports Broker services in the Commonwealth.

| Table 6: Number of People Using Supports Brokering by County/Joinder |
| --- |
| **County** | **# of People Using Service** |
| Carbon/Monroe/Pike | 2 |
| Delaware | 11 |
| Erie | 3 |
| Lebanon | 2 |
| Lehigh | 3 |
| Montgomery | 4 |
| Philadelphia | 8 |
| **Total** | **33** |

20 of these individuals received Supports Broker services through an agency and the remaining 13 received broker services from individuals. Currently there are 3 providers in Pennsylvania qualified for and available for brokering, Values into Action PA, NEPA Inclusive and the Barber National Institute.

Through the Person Driven Services and Supports (PDSS) Project which is funded through the PA Developmental Disabilities Council, 3 cohorts of Supports Brokers have received training (2 in the SE and 1 in the NE). Through the project a Supports Broker Network is also supported which provides opportunities for on-going training and technical assistance for Supports Brokers.

The training curriculum for Supports Brokers includes the following topics:

1. Principles of Self-Determination, Everyday Lives and Recovery
2. History of the disability rights movement and paradigm/power shift
	* Supporting Decision-making
3. Recovery Planning for Everyday Lives
4. Participant-Directed Supports
	* Employer and budget authority
	* Using financial management services
5. Roles and responsibilities of a Broker
6. Person-centered Planning
	* Important To/For
	* Visioning
	* Circle of support
	* Relationship and community mapping
7. Individual Support Plans (ISPs) and individualized budgets – connecting support to desired outcomes
8. ODP Waivers and Service Definitions
9. Dual Diagnosis - Mental Health/Intellectual Disability (MH/ID): Navigating the Systems
10. Supporting Employers in PDS
	* Basics on Employment (discrimination, wage and hour, workplace safety)
	* Recruiting, Screening and Interviewing
	* Selection and Hiring
	* Managing Support Service Workers (SSWs) - Connecting Person-Centered Plan, the ISP and job descriptions
	* Documentation
	* Reporting Incidents and Abuse

# Discussion and Recommendations

**The Adult Autism Waiver is the only waiver in Pennsylvania that serves adults that does not offer any option for self-direction.** Participant-Directed Supports have been an option in Medicaid[[6]](#footnote-6), therefore eligible for federal matching funds, since the 1990s. Major growth occurred in states using the PDS model when, in 2001, the Centers for Medicare and Medicaid revised the 1915(c) Home and Community Based Services (HCBS) waiver application to include participant-directed options. Currently, all states have at least one program that allows for self-direction.[[7]](#footnote-7) Nationally, these programs serve people across the disability spectrum including people with intellectual and developmental disability (I/DD), autism, and people who receive aging services.

Seven of the nine 1915(c) home and community based waivers in Pennsylvania allow for participant-direction. It is only the Infant, Toddler and Families and the Adult Autism waivers that do not allow for any self-direction of services. Roughly 19,000 people in the Commonwealth currently self-direct at least one service.[[8]](#footnote-8) 35% of waiver participants in the Office of Long Term Living waivers self-direct at least one service, including 50% of adults on the OBRA waiver. By comparison, 13% of people on the ID waivers self-direct at least one service. Pennsylvania has extensive experience and infrastructure supporting a variety of self-directed models and self-direction is clearly a desirable option for many adults with disabilities.

***Recommendation:*** Between civil rights issues related to segregation, demographic shifts and our economic climate, our systems require transformation to better serve people in integrated ways that are affordable and address our waiting lists. Participant-directed approaches are an essential component in this transformation. Research provides ample evidence that participant-directed services and supports are desirable, cost-effective and result in higher satisfaction and fewer unmet needs. The Autism waiver should be amended to offer self-direction.

**Wide variation in use of participant-directed supports requires greater analysis.** Examination of waiver and FMS enrollment data shows substantial variation by county/joinders (0-42%) in the use of PDS. From the available data, it is unclear why such significant variations exist. Some possible factors are:

* availability of agency providers and provider capacity in a geographic area;
* wages and employment environment in an area (Is it an area of high unemployment so the pool of available Support Service Workers is higher? Is the maximum wage allowable in PDS more attractive in some parts of the state because the job pool tends to have lower wages?)
* historical availability of the model (in some counties the model was adopted early and AWCs were operating before AWCs were available statewide)
* technical skills and experience of Supports Coordination Organizations (SCOs) and administrative entities related to participant-direction;
* availability of training, support and technical assistance for SCOs related to PDS;
* availability of support to self-direct through Supports Brokers; and
* training available for self-advocates and families on PDS.

***Recommendation:*** To ensure that all waiver participants have equal access to PDS models, ODP should identify the causes of these disparities in use and develop a plan to systematically address the issues that surface.

**Wide variation in the use of AWC versus the VF/EA model of FMS requires greater analysis.** The statewide average for people using the AWC model is 80% versus VF/EA use which averages 20%. Some possible explanations for this differential in use may be the attractiveness of the more supportive design of the AWC, the local presence of the AWC, the longevity of the AWC operating in the area, and the widespread public complaints about performance issues with the VF/EA contractor (particularly during the transition to the current contractor). Regardless, it should be looked at more closely.

Also of great concern are the outliers in these data. For example, in Berks County, of the 243 people that were self-directing a service in August of 2015, *99%* of them were using the Agency With Choice model. Similarly, in Luzerne/Wyoming of the 288 that were self-directing, *98%* were using AWC. On the other hand, in Bedford/Somerset, of the 52 people that were self-directing, *88%* of them are using the VF/EA model. The root causes of these large variations should be examined because there are significant differences in the liability that a family or waiver participant takes on in AWC versus the VF/EA model. Further, depending on the wages selected by the waiver participant or surrogate, there can be significant cost differences as well. For a person on the capped waiver (P/FDS), they may be able to purchase considerably more units of service using the VF/EA model.

***Recommendation:*** Again, the causes of these variations are unclear from the data reviewed but the issue should be examined closely to ensure that people are being provided with the information to make informed choices about the models, especially given the implications for liability and budget. Through surveys and focus groups, ODP should identify the causes of these disparities and develop a plan to systematically address issues that come to light.

**In the majority of the Commonwealth waiver participants do not have access to Supports Brokering Services.** People directing their own services often need some assistance to do so. For many people who need services, they have never managed “staff” before, never written ads to recruit support workers, never interviewed prospective employees, never submitted payroll. For many people who want to use participant-direction, they also need some assistance blending the paid and the unpaid service and supports they have in their lives. Supports Brokering has been an approved waiver service for well over a decade in Pennsylvania. As a waiver service, ODP must ensure that there is an availability of providers of this service. Some of the barriers and challenges to provision of the service that have been identified through the PDS Demonstration Project are:

* lack of understanding of PDS and the role of a Supports Broker
* lack of demand for the Supports Broker service from individuals and families because they are unaware that it is an available service in the waiver
* confusion at every level of the system about the conflict of interest provisions in the waiver related to brokering (providers of other direct waiver services *can* provide brokering just not to the same person)[[9]](#footnote-9)
* provider concern that the fee schedule rate for brokering will not cover costs
* provider concerns that the limitation on the annual units per person and the intermittent nature of the service for many users creates a scalability issue
* lack of understanding about PDS and the extent of services that can be self-directed

***Recommendation:*** ODP should develop a comprehensive plan to address the informational, operational and systemic barriers to ensure access to Supports Brokering services. At a minimum, to address the barriers that have surfaced through the DD Council funded PDS Demonstration project, ODP should: update, revise and disseminate information on PDS (*Pennsylvania’s Guide to Participant Directed Supports*); provide training to individuals and families on PDS; require SC training on PDS including detailed information on FMS and Supports Brokering; develop and disseminate a communication reiterating the Supports Broker qualifications and conflict of interest policy; and re-assess the unit rate and limitation on units of service for Support Brokering.

# Appendix A: Supports Broker Role from ID Service Definitions

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| --- |
| Appendix B: Enrollment in ID Waivers and Use of FMS by County/Joinder |
| **TABLE 1: CENTRAL REGION***Data Source: ODP Waiver Enrollment by County/Joinder 8/31/2015* | **Consolidated Waiver** | **P/FDS Waiver** | **Total # Direct at Least 1 Service** | **% Direct at Least 1 Service** |
| **Total Enroll** | **# Using FMS By Type** | **Total # Using PDS** | **% Using PDS** | **Total Enroll** | **# Using FMS By Type** | **Total # Using PDS** | **% Using PDS** |
| **County Joinder** | **AWC** | **VF/EA** | **AWC** | **VF/EA** |
| Bedford/Somerset | 167 | 5 | 36 | 41 | 25% | 148 | 1 | 10 | 11 | 7% | **52** | **17%** |
| Blair | 249 | 7 | 19 | 26 | 10% | 195 | 15 | 20 | 35 | 18% | **61** | **14%** |
| Cambria | 220 | 0 | 0 | 0 | 0% | 109 | 1 | 0 | 1 | 1% | **1** | **0%** |
| Centre | 128 | 10 | 6 | 16 | 13% | 121 | 28 | 21 | 49 | 40% | **65** | **26%** |
| Columbia/Montour/Snyder/Union | 216 | 49 | 0 | 49 | 23% | 160 | 39 | 2 | 41 | 26% | **90** | **24%** |
| Cumberland/Perry | 253 | 4 | 5 | 9 | 4% | 232 | 13 | 29 | 42 | 18% | **51** | **11%** |
| Dauphin | 465 | 66 | 20 | 86 | 18% | 238 | 73 | 17 | 90 | 38% | **176** | **25%** |
| Franklin/Fulton | 146 | 15 | 0 | 15 | 10% | 161 | 24 | 0 | 24 | 15% | **39** | **13%** |
| Huntingdon/Mifflin/Juniata | 186 | 43 | 1 | 44 | 24% | 235 | 97 | 0 | 97 | 41% | **141** | **33%** |
| Lancaster | 500 | 27 | 33 | 60 | 12% | 452 | 58 | 20 | 78 | 17% | **138** | **14%** |
| Lebanon | 106 | 3 | 2 | 5 | 5% | 118 | 13 | 12 | 25 | 21% | **30** | **13%** |
| Lycoming/Clinton | 230 | 24 | 4 | 28 | 12% | 180 | 36 | 11 | 47 | 26% | **75** | **18%** |
| Northumberland | 175 | 28 | 1 | 29 | 17% | 144 | 24 | 8 | 32 | 22% | **61** | **19%** |
| York/Adams | 557 | 23 | 16 | 39 | 7% | 350 | 66 | 22 | 88 | 25% | **127** | **14%** |
| **CENTRAL REGION TOTALS** | **3,598** | **304** | **143** | **447** | **12%** | **2,843** | **488** | **172** | **660** | **23%** | **1,107** | **17%** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TABLE 2: NORTHEAST REGION***Data Source: ODP Waiver Enrollment by County/Joinder 8/31/2015* | **Consolidated Waiver** | **P/FDS Waiver** | **Total # Direct at Least 1 Service** | **% Direct at Least 1 Service** |
| **Total Enroll** | **# Using FMS By Type** | **Total # Using PDS** | **% Using PDS** | **Total Enroll** | **# Using FMS By Type** | **Total # Using PDS** | **% Using PDS** |
| **County Joinder** | **AWC** | **VF/EA** | **AWC** | **VF/EA** |
| Berks | 466 | 69 | 2 | 71 | 15% | 394 | 172 | 0 | 172 | 44% | **243** | **28%** |
| Bradford/Sullivan | 105 | 7 | 0 | 7 | 7% | 101 | 34 | 1 | 35 | 35% | **42** | **20%** |
| Carbon/Monroe/Pike | 376 | 13 | 3 | 16 | 4% | 189 | 36 | 2 | 38 | 20% | **54** | **10%** |
| Lackawanna/Susquehanna | 433 | 6 | 12 | 18 | 4% | 245 | 17 | 6 | 23 | 9% | **41** | **6%** |
| Lehigh | 481 | 85 | 8 | 93 | 19% | 300 | 134 | 12 | 146 | 49% | **239** | **31%** |
| Luzerne/Wyoming | 372 | 92 | 4 | 96 | 26% | 361 | 191 | 1 | 192 | 53% | **288** | **39%** |
| Northampton | 327 | 58 | 0 | 58 | 18% | 219 | 98 | 3 | 101 | 46% | **159** | **29%** |
| Schuylkill | 220 | 32 | 5 | 37 | 17% | 170 | 56 | 6 | 62 | 36% | **99** | **25%** |
| Tioga | 57 | 9 | 4 | 13 | 23% | 54 | 6 | 0 | 6 | 11% | **19** | **17%** |
| Wayne | 77 | 8 | 8 | 16 | 21% | 47 | 3 | 4 | 7 | 15% | **23** | **19%** |
| **NORTHEAST TOTALS** | **2,914** | **379** | **46** | **425** | **15%** | **2,080** | **747** | **35** | **782** | **38%** | **1,207** | **24%** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TABLE 3: SOUTHEAST REGION***Data Source: ODP Waiver Enrollment by County/Joinder 8/31/2015* | **Consolidated Waiver** | **P/FDS Waiver** | **Total # Direct at Least 1 Service** | **% Direct at Least 1 Service** |
| **Total Enroll** | **# Using FMS By Type** | **Total # Using PDS** | **% Using PDS** | **Total Enroll** | **# Using FMS By Type** | **Total # Using PDS** | **% Using PDS** |
| **County Joinder** | **AWC** | **VF/EA** | **AWC** | **VF/EA** |
| Bucks | 634 | 15 | 4 | 19 | 3% | 464 | 21 | 7 | 28 | 6% | **47** | **4%** |
| Chester | 481 | 33 | 10 | 43 | 9% | 330 | 60 | 11 | 71 | 22% | **114** | **14%** |
| Delaware | 683 | 48 | 46 | 94 | 14% | 497 | 96 | 79 | 175 | 35% | **269** | **23%** |
| Montgomery | 917 | 21 | 31 | 52 | 6% | 687 | 65 | 81 | 146 | 21% | **198** | **12%** |
| Philadelphia | 2,486 | 14 | 5 | 19 | 1% | 1,571 | 19 | 14 | 33 | 2% | **52** | **1%** |
| **SOUTHEAST TOTAL** | **5,201** | **131** | **96** | **227** | **4%** | **3,549** | **261** | **192** | **453** | **13%** | **680** | **8%** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TABLE 4: WESTERN REGION***Data Source: ODP Waiver Enrollment by County Joinder 8/31/2015* | **Consolidated Waiver** | **P/FDS Waiver** | **Total # Direct at Least 1 Service** | **% Direct at Least 1 Service** |
| **Total Enroll** | **# Using FMS By Type** | **Total # Using PDS** | **% Using PDS** | **Total Enroll** | **# Using FMS By Type** | **Total # Using PDS** | **% Using PDS** |
| **County Joinder** | **AWC** | **VF/EA** | **AWC** | **VF/EA** |
| Allegheny | 2,063 | 7 | 12 | 19 | 1% | 1,364 | 6 | 8 | 14 | 1% | **33** | **1%** |
| Armstrong/Indiana | 263 | 2 | 0 | 2 | 1% | 181 | 1 | 0 | 1 | 1% | **3** | **1%** |
| Beaver | 238 | 15 | 0 | 15 | 6% | 182 | 45 | 1 | 46 | 25% | **61** | **15%** |
| Butler | 204 | 38 | 3 | 41 | 20% | 122 | 66 | 1 | 67 | 55% | **108** | **33%** |
| Cameron/Elk | 67 | 0 | 0 | 0 | 0% | 38 | 0 | 0 | 0 | 0% | **0** | **0%** |
| Clarion | 121 | 15 | 0 | 15 | 12% | 35 | 11 | 0 | 11 | 31% | **26** | **17%** |
| Clearfield/Jefferson | 198 | 7 | 0 | 7 | 4% | 107 | 7 | 0 | 7 | 7% | **14** | **5%** |
| Crawford | 163 | 22 | 0 | 22 | 13% | 135 | 23 | 0 | 23 | 17% | **45** | **15%** |
| Erie | 616 | 70 | 0 | 70 | 11% | 407 | 194 | 5 | 199 | 49% | **269** | **26%** |
| Fayette | 185 | 0 | 0 | 0 | 0% | 121 | 6 | 1 | 7 | 6% | **7** | **2%** |
| Forest/Warren | 63 | 11 | 0 | 11 | 17% | 52 | 36 | 1 | 37 | 71% | **48** | **42%** |
| Greene | 60 | 5 | 3 | 8 | 13% | 30 | 4 | 0 | 4 | 13% | **12** | **13%** |
| Lawrence | 119 | 2 | 2 | 4 | 3% | 131 | 8 | 2 | 10 | 8% | **14** | **6%** |
| McKean | 65 | 0 | 0 | 0 | 0% | 94 | 1 | 0 | 1 | 1% | **1** | **1%** |
| Mercer | 183 | 2 | 4 | 6 | 3% | 173 | 8 | 12 | 20 | 12% | **26** | **7%** |
| Potter | 18 | 0 | 0 | 0 | 0% | 19 | 13 | 0 | 13 | 68% | **13** | **35%** |
| Venango | 90 | 16 |   | 16 | 18% | 64 | 30 | 1 | 31 | 48% | **47** | **31%** |
| Washington | 243 | 20 | 2 | 22 | 9% | 127 | 50 | 2 | 52 | 41% | **74** | **20%** |
| Westmoreland | 402 | 5 | 1 | 6 | 1% | 367 | 20 | 2 | 22 | 6% | **28** | **4%** |
| **WESTERN TOTAL** | **5,361** | **237** | **27** | **264** | **5%** | **3,749** | **529** | **36** | **565** | **15%** | **829** | **9%** |
| **TABLE 5: REGION TOTALS***Data Source: ODP Waiver Enrollment by County Joinder 8/31/2015* | **Consolidated Waiver** | **P/FDS Waiver** | **Total # Direct at Least 1 Service** | **% Direct at Least 1 Service** |
| **Total Enroll** | **# Using FMS By Type** | **Total # Using PDS** | **% Using PDS** | **Total Enroll** | **# Using FMS By Type** | **Total # Using PDS** | **% Using PDS** |
| **Region** | **AWC** | **VF/EA** | **AWC** | **VF/EA** |
| Central | 3,598 | 304 | 143 | 447 | 12% | 2,843 | 488 | 172 | 660 | 23% | **1,107** | **17%** |
| Northeast | 2,914 | 379 | 46 | 425 | 15% | 2,080 | 747 | 35 | 782 | 38% | **1,207** | **24%** |
| Southeast | 5,201 | 131 | 96 | 227 | 4% | 3,549 | 261 | 192 | 453 | 13% | **680** | **8%** |
| West | 5,361 | 237 | 27 | 264 | 5% | 3,749 | 529 | 36 | 565 | 15% | **829** | **9%** |
| **Grand Total** | **17,074** | **1,051** | **312** | **1,363** | **8%** | **12,221** | **2,025** | **435** | **2,460** | **20%** | **3,823** | **13%** |

1. Self-Direction Guidelines retrieved from http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Delivery-Systems/Self-Directed-Services.html. [↑](#footnote-ref-1)
2. DHS has indicated it will be issuing an RFP for the VF/EA service in 2016. [↑](#footnote-ref-2)
3. ODP Communication Number: Memo 044-14 <http://www.temple.edu/thetrainingpartnership/resources/pds/docs/044-14_InfoMemo_AWClisting.pdf>. [↑](#footnote-ref-3)
4. \* Counties with fewer than 30 participants using PDS are not included in the table [↑](#footnote-ref-4)
5. \* Counties with fewer than 30 participants using PDS are not included in the table [↑](#footnote-ref-5)
6. Pursuant to section 1905(a)(24) of Social Security Act. [↑](#footnote-ref-6)
7. Sciegaj, M., Mahoney, K. J., Schwartz, A. J., Simon-Rusinowitz, L., Selkow, I., & Loughlin, D. M. (2014). [↑](#footnote-ref-7)
8. Data Source: Office of Long Term Living Enrollment Date Q1 2014 and Public Partnerships, LLC Enrollment Data Q1 2014; Office of Developmental Programs Enrollment Data Q1 2014 [↑](#footnote-ref-8)
9. From Consolidated Waiver: “Supports Broker Services may be provided by individual and agency providers that provide other Waiver or ID services but the Supports Broker provider must be conflict free. In order to be conflict free, the Supports Broker provider may not provide other direct or indirect waiver services or base funded ID services when authorized to provide Support Broker services to the waiver participant. In addition, Supports Broker providers may not provide administrative services such as Health Care Quality Unit, Administrative Entity functions or Independent Monitoring Program.” (p.128) [↑](#footnote-ref-9)