

**The Florida Senate**  
**BILL ANALYSIS AND FISCAL IMPACT STATEMENT**

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared By: The Professional Staff of the Health and Human Services Appropriations Committee

BILL: PCS for SB 1866

INTRODUCER: Committee on Health and Human Services Appropriations and Senator Peaden

SUBJECT: Home and Community-Based Services Delivery System

DATE: March 31, 2008                      REVISED: \_\_\_\_\_

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	Fabricant	Peters	HA	<b>Pre-meeting</b>
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____

**I. Summary:**

This bill caps the annual expenditures for clients receiving waiver services administered by Agency for Disabilities and assigned to tier one, at \$150,000. This bill will permit clients to receive services through tier two who are authorized to receive moderate levels of support for standard habilitation or minimal support for behavior focus residential habilitation.

This bill amends section 393.0661, Florida Statutes.

**II. Present Situation:**

The Agency for Persons with Disabilities has the responsibility to provide services to persons with developmental disabilities. A developmental disability is a disorder or syndrome attributable to retardation, cerebral palsy, autism, spina bifida, or Prader-Willi syndrome and constitutes a substantial handicap expected to continue indefinitely.

An individual is eligible for services if he/she has a developmental disability, and is three years of age or older. Children who are between the ages of three and five years of age and are at high risk of having a developmental disability are also eligible for services. Services provided by the agency include community services and supports as well as a limited institutional program. The agency determines eligibility, assesses service needs, and provides funding for purchasing the supports and services identified in assessments.

The range of services and supports available to an individual include employment and training services, environmental adaptive equipment, personal or family supports, residential habilitation, support coordination, and therapeutic supports. There are medical requirements specific to a

particular service or support in addition to the general eligibility criteria for services from APD. The majority of services are provided through one of two federal Medicaid waivers.

The developmental disabilities Home and Community Based Services (HCBS) waiver program is a Medicaid funded program and the largest source of funding for APD services. Services provided through the HCBS waiver program enable clients to live in a family setting in their own home or in a licensed residential setting and avoid institutionalization. Clients receiving services through the HCBS waiver are also eligible for all services in the Medicaid state plan. There were approximately 25,000 clients enrolled in FY 2007-2008.

The Family and Supported Living (FSL) waiver makes services available to clients who live with their family or in their own home. Annual expenditures per client are capped at \$14,792, and fewer services are available under this waiver. Clients are also eligible for all services in the Medicaid state plan. There were approximately 6,000 clients enrolled in FY 2007-2008.

During the 2007 legislative session, chapter 2007-64, Laws of Florida, amended section 393.0661, Florida Statutes, requiring a four tier delivery system for waiver services.

Tier one includes only the most complex clients without a cap on expenditures.

Tier two is limited to clients who are authorized for five or more hours of residential habilitation or require more than six hours of in-home support services per day. Tier two annual expenditures are capped at \$55,000.

Tier three includes clients requiring residential placements, clients in independent or supported living situations, and clients who live in their family home. Annual expenditures for clients in tier three are capped at \$35,000.

Tier four is the family and supported living waiver and is capped at \$14,792 per year.

### **III. Effect of Proposed Changes:**

This bill caps the annual expenditures for clients assigned to tier one at \$150,000. The Agency for Persons with Disabilities estimates there are 148 tier one clients who are currently receiving more than \$150,000 of services per year.

This bill changes the 5 hour residential habilitation minimum criteria to moderate levels of support for standard habilitation or minimal support for behavior focus residential habilitation.

### **IV. Constitutional Issues:**

#### **A. Municipality/County Mandates Restrictions:**

None.

**B. Public Records/Open Meetings Issues:**

None.

**C. Trust Funds Restrictions:**

None.

**V. Fiscal Impact Statement:****A. Tax/Fee Issues:**

None.

**B. Private Sector Impact:**

None.

**C. Government Sector Impact:**

The \$150,000 cap for tier one clients is expected to result in a \$5,634,451 (\$2,509,585 General Revenue) savings in Fiscal Year 2008-2009.

There is no fiscal impact resulting from the changes in tier two because tier two expenditures are capped at \$55,000 per year.

**VI. Technical Deficiencies:**

None.

**VII. Related Issues:**

None.

**VIII. Additional Information:****A. Committee Substitute – Statement of Substantial Changes:**

(Summarizing differences between the Committee Substitute and the prior version of the bill.)

None.

**B. Amendments:**

None.