

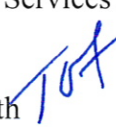
Thomas O. Forslund, Director

Governor Matthew H. Mead

MEMORANDUM

Date: October 1, 2014

To: Joint Appropriations Interim Committee
Joint Labor, Health and Social Services Interim Committee

From: Thomas O. Forslund, Director
Wyoming Department of Health 

Subject: Legislative Report: Wyoming Life Resource Center Selected Services and Fiscal Information

Ref: F-2014-481

W.S. § 25-5-105(b), states:

By October 1 of each year, the director shall report to the joint labor, health and social services interim committee and the joint appropriations interim committee regarding the number of clients served by the center, the reason for provision of services to each client at the center rather than in a community program, the staff to client ratio and the total state and federal cost of all services provided to clients, including the current Medicaid reimbursement rate for intermediate care facilities for people with intellectual disabilities.

Attached is the annual report that fulfills the legislative mandate. For additional information, please contact Chris Newman, M.H.A., Senior Administrator, Behavioral Health Division, 6101 Yellowstone Road, Suite 220, Cheyenne, Wyoming 82002, (307) 777-6494, chris.newman@wyo.gov.

TF/CN/kp/jg

Attachment: Legislative Report

c: Governor Matthew H. Mead
Legislative Service Office (3 copies)
State Department Depository (electronic copy)

Wyoming Department of Health

Report to the Joint Appropriations Interim Committee and
the Joint Labor, Health and Social Services Interim Committee

Wyoming Life Resource Center Report W.S. § 25-5-105(b)

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October 1, 2014

WYOMING LIFE RESOURCE CENTER REPORT

Table of Contents

1. Executive Summary.....	1
2. Specific Requirements of Statute	1
3. Responses to Specific Requirements of Statute	2
4. Recommendation for Future Changes	6
5. Detailed Supplementary Information	7

Section 1. Executive Summary

Specific Requirements of Statute

W.S. § 25-5-105 requires an annual report on the Wyoming Life Resource Center (WLRC), to include specific data on number of clients, staffing, services provided, and cost.

Response to Specific Requirements of Statute

The WLRC is Wyoming's only Intermediate Care Facility for the Intellectually Disabled (ICF-ID). It is a residential facility with a 94-acre campus located in Lander, Wyoming.

The WLRC served 90 clients in 2014. The reason for each individual's placement at the WLRC instead of in community programs is detailed later in this report, but in general, the WLRC serves those who have complex medical, behavioral, and therapeutic needs. WLRC also serves some clients who could be served in the community, but whose guardian(s) choose to keep them at WLRC.

Direct staff-to-client ratio varies from 2.25 at the Canyons program, 2.55 at the Visions program to 8 at the Horizons Health Care Center, but overall staff-to-client ratio at the WLRC was 3.96 in 2014, which includes direct and non-direct care staff.

The total cost of service provision for all clients was \$25,643,314; the current Medicaid reimbursement rate is \$717.92 per client/per day.

Section 2. Specific Requirements of Statute

W.S. § 25-5-105(b) states:

By October 1 of each year, the director shall report to the joint labor, health and social services interim committee and the joint appropriations interim committee regarding the number of clients served by the center, the reason for provision of services to each client at the center rather than in a community program, the staff to client ratio and the total state and federal cost of all services provided to clients, including the current Medicaid reimbursement rate for intermediate care facilities for people with intellectual disabilities.

In order, this report therefore describes:

- The number of clients served in each component of the WLRC (Canyons/Visions/Horizons), the staffing needs and the costs of providing services to those clients.
- Medicaid reimbursement rates for the Canyons program.
- Units of therapy delivered to clients.
- Reasons for placement at WLRC.
- The relevant characteristics of clients at WLRC and considerations for placement.

Section 3. Response to Specific Requirements of Statute

Clients served per program, staffing and costs

Canyons ICF/ID (142 licensed bed capacity)

	FY10	FY11	FY12	FY13	FY14
Clients Served (unduplicated)	90	82	79	78	75
Total State and Federal Cost of Service*	\$21,549,706	\$23,090,121	\$24,769,191	\$23,530,140	\$22,402,156
Medicaid Reimbursement Rate Per Day	\$717.92	\$717.92	\$717.92	\$717.92	\$717.92
Direct Care Staff	206	206	206	206	188
Direct Care Staff: Client Ratio	2.48	2.48	2.48	2.64	2.50
FY14 Canyons ICF/ID Program = 37 vacancies = 169 filled positions and a ratio of 2.25					

Horizons Health Care Center

	FY10	FY11	FY12	FY13	FY14
Clients Served (unduplicated)	2	2	2	2	1
Total State and Federal Cost of Service*	\$272,676	\$275,946	\$289,788	\$285,564	\$153,114
Direct Care Staff	10	10	10	10	8
Direct Care Staff: Client Ratio	5	5	5	5	8

Visions - Acquired Brain Injury Program (12 licensed bed capacity)

	FY10	FY11	FY12	FY13	FY14
Clients Served (unduplicated)	11	11	12	10	9
Total State and Federal Cost of Service*	\$2,849,336	\$3,137,102	\$3,533,341	\$3,435,476	\$3,088,044
Direct Care Staff	31	31	32	31	23
Direct Care Staff: Client Ratio	3.1	2.3	2.6	3.1	2.55

* This cost includes direct program costs and the allocated costs for healthcare, training, administration, and other indirect costs

Non-residential programs (individuals served)

	FY10	FY11	FY12	FY13	FY14
Therapies and Equipment Program	125	99	136	110	252
Rothwell Training Center	2,184	2,006	1,941	1,836	1,954
Aquatic Therapy	450	448	457	308	300
Therapeutic Riding	226	208	136	101	146
Total	2,985	2,761	2,670	2,355	2,652

Wyoming Life Resource Center Total

	FY10	FY11	FY12	FY13	FY14
Total Expenditures	\$24,702,400	\$26,530,537	\$28,525,519	\$27,254,401	\$25,643,314
Total Staff (FTE)	433	433	429	418.5	337*
Staff : Client Ratio	4.2	4.17	4.56	4.65	3.96*

*Over the last fiscal year as a result of the WLRC Study mandated by the legislature, the WLRC has reduced the direct care staffing ratio to 2.5 for the facility and is working to reduce the overall staffing ratio for the facility to 3.5.

Reasons for providing services at WLRC instead of community programs

Three factors are significant in answering this question:

- (1) The purpose and function of the ICF-ID level of service.
- (2) The process of evaluation for placement and continued placement.
- (3) The specific considerations of each individual served.

The role of the Canyons ICF/ID is to serve those who may not be as well served in another setting because of the intensity and specialization of services required. Only people with a significant intellectual disability (ID), acquired before the age of 21, and who need intense and specialized treatment are eligible for service in this program. This would include individuals who fall under the following categories of demonstrated need:

- (1) Individuals who have complex medical needs, multiple medical conditions and can be considered medically fragile and requiring considerable medical oversight.
- (2) Individuals with co-occurring moderate, active mental illnesses, and/or disruptive behavior disorders.
- (3) Individuals with severe or profound ID who exhibit a degree of aggression or self-injurious behavior, which places others or themselves at risk.
- (4) Individuals with profound physical disabilities who need specialized interventions that is therapeutic and ongoing. These citizens require more intensive services to maintain their health and safety.

Per statute, no person is admitted unless an interdisciplinary team has determined that the WLRC offers the professionally recommended and most appropriate services in a least restrictive and most integrated environment, and is consistent with the informed choice of the person and/or his/her guardian.

It is a Medicaid condition of participation for all persons admitted to the Canyons ICF/ID to have an individual program plan (IPP) developed by an interdisciplinary team of professionals who are experts in the field of disability treatment and training. The team is headed by a Qualified Intellectual Disabilities Professional who is responsible for overseeing the plan. The person and his/her guardian are on the team and involved in every aspect of the process. Other professionals are involved as needed and may include the following: physician or physician's assistant, psychologist, nurse, behavior specialist, occupational therapist, physical therapist, speech therapist and/or language pathologist, respiratory therapist, vocational/educational specialist, client rights specialist, program manager, and direct support professional from the home where the person lives.

These residential, vocational, medical, and therapeutic professionals assess the function of the individual, the need for specialized service, and quality of life issues, to determine if the Canyons Program offers the most appropriate services in a least restrictive and most integrated environment. This entire process is completed as part of the admissions process and each year thereafter.

The following table summarizes the conditions and needs of individuals served by the Canyons ICF/ID, Visions Acquired Brain Injury (ABI), and Horizons Healthcare Programs in FY14.

	Level of Intellectual Disability					Guardian and Individual Program Information			Service Need Indicators		
	MILD	MODERATE	SEVERE	PROFOUND		PERSON OR GUARDIAN CHOSE WLRC SERVICE	INDIVIDUAL PROGRAM PLAN IN FY14	ALTERNATIVE PLACEMENT CONSIDERED AT EACH INDIVIDUAL PROGRAM PLAN	MEDICAL CONCERNS	BEHAVIORAL CONCERNS	THERAPY NEEDS
Canyons ICF	6	4	11	54	0	75	75	75	65	46	68
Canyon ICF (%)	8%	5%	15%	72%	0%	100%	100%	100%	87%	61%	91%
Visions ABI					9	9	9	9	8	8	9
Visions ABI (%)					100%	100%	100%	100%	89%	89%	100%
Horizons Healthcare					1	1	1	1	1	0	1
Horizons Healthcare (%)					100%	100%	100%	100%	100%	0%	100%
Total	6	4	11	54	10	85	85	85	74	54	78
Total (%)	8%	5%	15%	72%	100%	100%	100%	100%	87%	64%	92%

Notes:

(1) Every person residing in a WLRC home is there by his/her own choice or the choice of his/her guardian.

(2) Every person receiving service for longer than 30 days has an Individual Program Plan (IPP), which includes professional assessments of the need for service. For every person admitted, alternative placements are reviewed and considered at the 30-day and 60-day intervals, then quarterly for the first year, and then annually thereafter.

(3) For every person with an IPP, alternative placements are annually considered.

(4) Every resident's need for service is assessed by a medical practitioner, and other therapeutic and intellectual disability professionals. All clients have at least one significant area of need and require active treatment. Most clients have complex medical, behavioral, and therapeutic needs as demonstrated on the chart above.

In FY14, one client was transferred to the WLRC from Wyoming State Hospital; one client was transferred from the WLRC to the LifePoint Hospital-Lander Pineridge Unit; and five clients passed away.

The WLRC census includes the following as of June 30, 2014:

Canyons ICF Program - 75
Visions ABI Program - 9
Horizons Healthcare Center - 1

This summary demonstrates the high level of need of the individuals served in the Canyons ICF/ID, Visions ABI and Horizons Healthcare Programs. In every case, the unique combination of intellectual, physical, medical, and behavioral issues are the primary reason these citizens are receiving services at the WLRC rather than in a community program. In all cases, the WLRC staff work with guardians to serve clients in the least restrictive and most appropriate placement setting. Any person or his/her guardian who requests service in an alternative location is facilitated to achieve that alternative placement without delay.

The detail for each resident's primary reason for the provision of services at the WLRC is presented in level of intellectual disability, individual program plan, and service need indicators.

Section 4. Recommendations for Future Changes

WLRC has implemented many changes in order to become more efficient and effective. These changes have included consolidating operational departments to decrease overhead, reducing direct care staffing ratio to 2.5, reducing of staff through attrition, closing of The Canteen, reorganization of therapy departments to allow for fewer supervisory positions, consolidating clients into fewer houses to ensure safety under the new client-to-staff ratio, closing a number of buildings to save operating costs, and closely watching expenditures for any cost savings available.

Section 5. Detailed Supplementary Information

During the 2013 General Session, the Wyoming Legislature passed House Enrolled Act (HEA) No. 81. HEA81 directed the Wyoming Department of Health (WDH) to conduct a study of the most effective and efficient means of providing care to clients of the WLRC. The Buckley Group, L.L.C. who are expert consultants in both ICF and ABI services were consulted for the study.

Another study conducted was the Facility Master Plan created by HDR Architecture, Inc., Plan One/Architects. This study provides a coordinated, clear, and concrete recommendation for planning each WDH facility to become a vibrant, cohesive, efficient embodiment of the State's mission for care. Currently, the Governor appointed Joint Legislative and Executive Task Force on Department of Health Facilities members are producing recommendations for each facility to present in the upcoming Legislative Session starting in January 2015.

The 2008 session of the Wyoming State Legislature significantly amended W.S. § 25-5-101 through 25-5-135, also known as the Wyoming State Training School Act. The amendments changed the name of the facility to the WLRC and included specific criteria for admission.

Outpatient and outreach services are provided to people across the state through the therapies, therapeutic riding, aquatics, and therapeutic equipment programs.

The Rothwell Training Center on the campus provides training to WLRC staff, as well as caregivers, providers, other individuals, and groups. Through collaboration with State agencies and local entities, there are non-Department of Health functions housed on the campus in leased buildings. The operation and maintenance costs of those buildings are included in the total budget.

People with intellectual disabilities are served in the Canyons Intermediate Care Facility for people with ICF/ID (Canyons), a residential program with a bed capacity of 142. The ICF/ID is disbursed over eight separate residences and seven other support buildings. The FY14 Medicaid per diem rate includes allowable costs for all services required by the ICF/ID, including residential, therapy, vocational, training, recreational services and all medical services, provided at the WLRC.

People with ABI are served in the Visions Program. The program's physical capacity in FY14 was 12 and is disbursed over two residences and one additional support building. The number of clients served in FY14 was nine. There is no license category for this program resulting in the program being funded entirely through State General Funds. The services and buildings follow the standards set by the ICF/ID, but are specialized for people with ABI, which includes residential, therapy, vocational, training, recreational services, and all medical services provided at the WLRC. A nursing facility licensing category is being currently considered.

The Horizons Healthcare Center (HHC) is an inpatient healthcare facility staffed by licensed nurses, physician, pharmacy, x-ray, laboratory, dental and program nursing.

Acute medical services are provided for clients requiring services on a temporary basis until they are medically stabilized to return to their home.

The referral process begins at a single point of entry through the Behavioral Health Division (BHD). Each applicant must qualify for the ICF/ID level of service. Once a person has been determined to meet the eligibility requirements, they are offered a choice of service providers, including the WLRC.

All clients are professionally evaluated at admission to the WLRC and annually thereafter to determine if the placement is in the best interest of the individual. A screening team consisting of a community representative, a BHD staff member, and two WLRC staff members review each referral applicant. A recommendation for admission is then forwarded to the BHD Administrator for an admission decision. Admission determination is based on what will be the least restrictive, most appropriate, and most integrated environment with informed choice per statute.