
AGING IN PLACE



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OUR HISTORY

- Our service system has historically been very regimented and inflexible
 - Adopted a service model similar to institutional operations
 - Did not consider general community supports



A CHANGE IN PERSPECTIVE

- Service Delivery System Redesign
 - Service model did not meet the needs of 2/3 of DDDS service recipients
 - Need to better support individuals living with families
 - Need to better access community resources



CMS HCBS SETTINGS RULE

- 2014 CMS HCBS Settings Rule
 - Clarified CMS expectations for HCBS settings
 - “Community Based” is defined by:
 - the character of the setting
 - The experience of the individual



DDDS AGING IN PLACE TASKFORCE

- Some DDDS service recipients living in provider managed community settings are entering their “golden years”
- How could DDDS better support our aging population
- Aging in Place Taskforce in 2014



INITIAL TASK FORCE FINDINGS

The Taskforce identified 9 problem areas to explore:

1. Retirement
2. Hospice Care
3. Private Duty Nursing
4. Accessibility
5. Knowledge of Healthy Aging
6. Nutritionist Services
7. End of Life Planning
8. Choice
9. Data Collection



WHERE WE ARE TODAY

- Amended the DDDS Medicaid Home and Community Based Waiver – Now the Lifespan Waiver
- CMS HCBS Settings Rule and Transition Plan
- Retirement – it is happening!
- Hospice Services



WHERE WE ARE TODAY (CONTINUED)

- Access to nursing services in the home
- Prioritize accessible homes
- Develop a more robust Person-Centered Planning process
- Planning discussions include aging and end of life decisions



LOOKING AHEAD

- DDDS Lifespan Waiver Amendment renewal
 - Medical Residential Habilitation
- CMS HCBS Statewide Transition Plan continued implementation
- Technology Consortium: expand the use of technology supports





THANK YOU