





The Division of Services for People with Disabilities (DSPD) supports and manages services for some of the most vulnerable persons in Utah. Specialized teams orchestrate access to short-term and ongoing services. To do this, DSPD continuously engages with persons with disabilities, their families, national experts, service providers, and state leadership.

Services and supports should help a person reach their vision of a good life, which includes their expressed goals, needs, and desires. Through partnership and research, DSPD continues to enhance the service system. Significant effort is made to improve person-centered planning and increase the role of employment. An individualized approach to planning services and supports helps the person get both what is important to them and important for them. Employment has a positive impact on personal well-being and adds to the workforce, which in turn contributes to the Utah economy.

DSPD also oversees operations at the Utah State Developmental Center.



To promote opportunities and provide supports for persons with disabilities to lead self-determined lives

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Angie Pinna

Fiscal year 2023 was a year of growth and change for the Division of Services for People with Disabilities (DSPD). We have made great progress towards our goal to promote opportunities for persons with disabilities to lead self-determined lives. I am grateful to division staff, our community partners, and to community members for working tirelessly to support persons with disabilities in our community.

With the help of community partners, DSPD supported 88 persons in moving from Intermediate Care Facilities (ICFs) to home and community-based services (HCBS). Over the past 4 years, 283 persons have transitioned out of ICFs into HCBS. This exceeds the goal of transitioning 250 persons that was set in the *Christensen v. Miner* settlement. Many of these individuals have shared their experiences of choosing to move into a community setting. Their stories highlight a newly discovered sense of community, connection, independence, and an ability to engage in meaningful pursuits of their choosing. This all comes from the opportunity to make self-determined choices. We look forward to continuing to provide support and education to persons who are interested in moving into an HCBS. We are also especially grateful to the peer mentors who have shared their own experiences both in person and in one-on-one discussions. Their engagement and leadership has been critical to the success of the ICF transition program.

Through a historic level of funding from the legislature, DSPD was able to bring 63 persons onto the Limited Supports Waiver, and an additional 296 persons with critical needs were also brought into services. This funding provided life-changing supports for the individuals and their families. I am grateful to the legislature for their continued support of the division and persons with disabilities we serve.

The Settings Rule took effect on March 17, 2023. In the years spent preparing for this date, our partners, including both providers and support coordinators, worked hard to help us meet this deadline. Their continued engagement was invaluable. DSPD has developed software, resources, and fact sheets to prepare for the rule's effective date. The division held numerous trainings and technical assistance sessions to promote further understanding of this rule. In 2023, the Department of Health & Human Services (DHHS) and DSPD were recognized by several national organizations for our person-centered approach, planning tools, software development, service delivery, and collaborative process for meeting the Settings Rule requirements.

Thank you to all our community partners and community members for your continued support. We will continue to address new challenges as they arise and seek enhancements to our service system to meet the needs of persons with disabilities in Utah.

Settings Rule update

The Settings Rule took effect on March 17, 2023. The Settings Rule is a set of rules that providers, support coordinators, and states must follow in regard to HCBS settings and the person-centered planning process.

Published guidance



DSPD published several new informational fact sheets and updated many existing resources to support understanding of the Settings Rule and help persons in services and their families to make person-centered choices about their services. These fact sheets and resources cover topics including an overview of the HCBS Settings Rule, human rights, rights restrictions, and more.

Technical assistance and training



DSPD made significant efforts to educate, train and provide technical assistance to our community partners impacted by the rule. The division trained persons with disabilities, families, case managers, support coordinators and service providers. This training addressed informed consent, informed decision making, choice and delivery of services, person-centered planning tools, and person-centered competencies recognized by the National Center on Advancing Person-Centered Practices and Systems (NCAPPS).

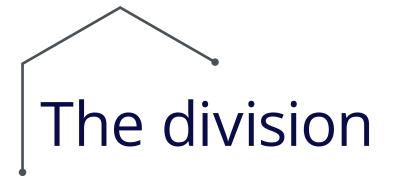
DSPD offered open office hours twice monthly along with in-person and virtual technical assistance sessions for support coordinators to ask questions and seek guidance in meeting the March 2023 deadline.

Person-centered planning tools



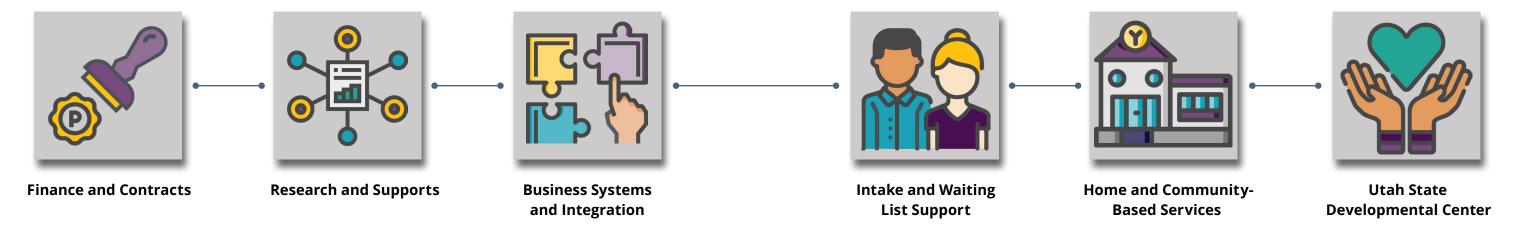
DSPD worked with NCAPPS along with other state and national partners to develop a new software to help case managers, support coordinators, and persons in service to develop and complete person-centered support plans. The software integrates all steps of the planning process and serves to give persons in services principle control over their plans. This helps the division align with requirements outlined in the Settings Rule.

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DSPD provides support through home and community-based services (HCBS) and facility-based care. Five teams manage HCBS through state funding and Medicaid waivers. In addition, a sixth team of clinical experts and experienced direct support professionals operate the Utah State Developmental Center.



6,851 persons served during FY 2023

88 residents

of an ICF moved into HCBS

2023 highlights 655 persons entered services

Settings Rule took effect

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Caregiver compensation

\$5.1M One-time general fund

This program began in response to the public health emergency. It allows parents and guardians to be paid for the extraordinary care of their family member, which kept individuals healthy and safe through the COVID-19 pandemic. This funding allowed the service to continue through June 30, 2023.

DSP rate increase

\$24M Ongoing general fund

In 2015, the legislature pledged funding to improve recruitment and retention of direct care staff through increased wages. Utah recognizes that adequate and stable staffing is crucial to successful service delivery. This was the final installment in the original pledge to DSPs.

Waiting list needs

\$6M Ongoing general fund

This funding was used to bring 63 persons onto the Limited Supports Waiver and 296 persons who had the most critical needs into services.

Mandated additional needs

\$6.7M Ongoing general fund

As a condition of the 1915(c) waiver approved by the Center for Medicare and Medicaid Services, DSPD is obligated to support changes to the health and safety needs of persons already enrolled in waiver services. Each request for services (RFS) undergoes a comprehensive review of need by the RFS committee before being approved. This allocation also includes budgeting for youth who are transitioning out of DCFS/JJYS.



Ongoing wage increase

\$8.3M Ongoing general fund

During the Public Health Emergency, all services with a direct care compnent were given a 5% supplemental payment. This state funding allowed the rate increase to continue ongoing.

Direct service provider rate increase

\$24M One-time general fund

This appropriation was the start of a historic 19.54% wage increase for direct care service providers which was implemented on April 1, 2022. This funding helped stabilize the direct service provider staff shortage.

Wage increase for USDC

\$3.2M Ongoing general fund

This funding was used to increase wages for the staff at the Utah State Developmental Center and the Utah State Hospital to address the ongoing staffing crisis.

Comprehensive therapy building at USDC

\$24M One-time general fund

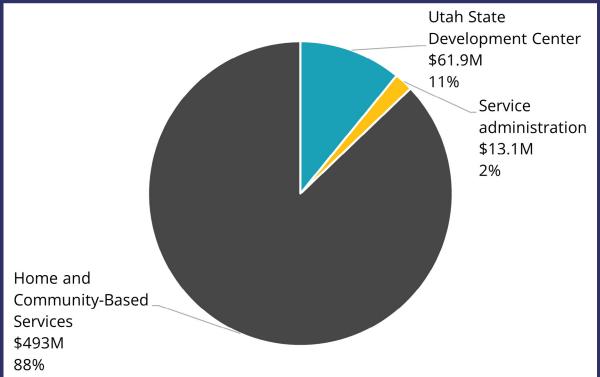
This one-time appropriation will create a more efficient treatment space for individuals being served at USDC. This project will create space to replace 3 outdated buildings on the USDC campus.



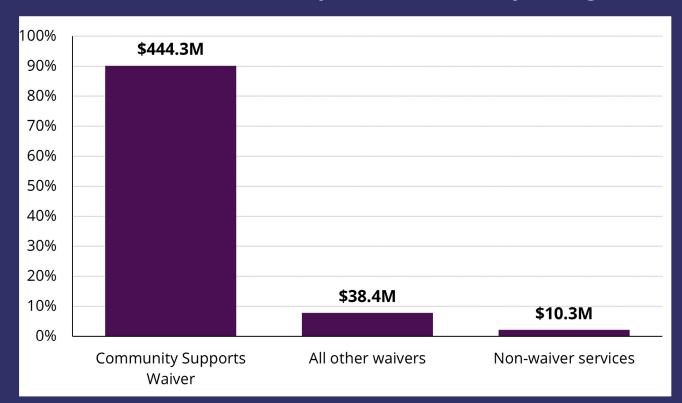
Each year, DSPD uses the Federal Medicaid Assistance Percentage (FMAP) to calculate the percentage of federal matching funds received for every state dollar spent. All reported fiscal year 2023 dollar amounts use the fiscal year 2023 FMAP of 33.868%.



\$568M FY 2023 operating budget

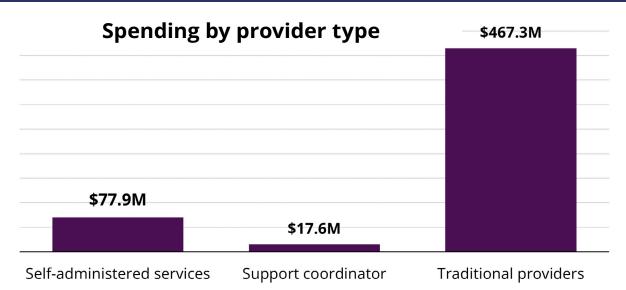


Home and Community-Based Services spending



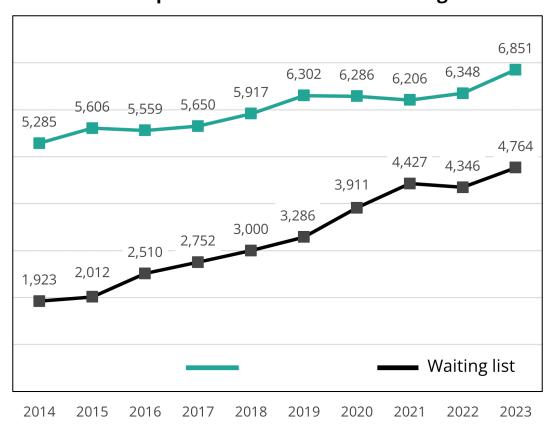
Historical budgets

FY 2022: \$464.7 million FY 2019: \$364.8 million FY 2021: \$426.9 million FY 2018: \$327.7 million FY 2020: \$404.7 million FY 2017: \$298.0 million



Historical trends

Annual count of persons in-services and waiting for services



Limited supports: P's story

P's father passed away a year ago leaving his aging mother to provide for his care. Her age began to limit her ability to support him. At first, his mother was skeptical about someone else helping with P's care. That changed when P and his mother met their attendant care worker. Together they completed a service plan and met several times a week to develop skills to help him better navigate his life at home and in the community.

P and his mother are now very grateful for the new support and connection to community he has received. P has gained a greater sense of freedom, independence, and security from LSW services.

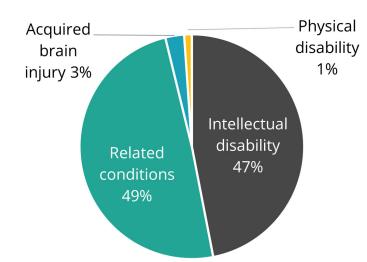


J lives at home with his parents and 4 siblings. All 5 children in the home have disabilities. This creates a lot of challenges for the family. Before receiving LSW services, J struggled maintaining his health and helping his family at home. With the help and support of his attendant care worker, J now regularly swims at his local recreation center and engages there with others in the community. His health has improved so much he was able to get a part time job. He now rides his bike to the bus stop when going to work, which has further improved his health.

His attendant care worker also helped him develop life skills to help with chores including cleaning, shopping, planning menus, and cooking meals for his family. The limited support services he receives have created a much more manageable home environment for J and his family and given him more self-confidence and independence.

Waiting for services

DSPD uses all available funds to provide services to as many eligible persons as possible. Following fiscal year 2021 system changes, DSPD now offers enrollment based on most critical need for comprehensive services, and time spent waiting for persons with limited support needs.



Waiting for so	ervices
Persons waiting	4,764
Average age	23
Average wait time In years	5.4

Service	Percentage*	
Personal assistance and supported living	36.8%	
In-home support and respite	54.6%	
Residential services	6.7%	
Host home and professional parent services	1.9%	
Day supports	18.2%	
Supported employment	19.6%	

^{*}Table does not add to 100%, as persons can be waiting for more than one service



Short-term services

Persons may be eligible to receive one or more of the limited short-term services available while waiting for ongoing DSPD supports. Funding comes from a combination of ongoing and one-time appropriated general fund dollars allocated each fiscal year.

Supported work independence

106 persons served

SWI is designed to help eligible persons who are waiting for ongoing services, obtain and maintain competitive employment in an integrated setting, earning at least minimum wage.

Caregiver Compensation

633 families served

In order to support families while waiting for ongoing services, DSPD was able to offer onetime caregiver compensation services. In FY23, non-lapse funding provided this support to

Respite

169 families served

To relieve caregiver burnout, DSPD was able to offer relief to a person's caregiver through limited, one-time respite services. In FY23, non-lapse funding was used to provide respite to 169 families waiting for services.

Home & Community-Based Services



Services
support the
person's
choice to
remain
in their
community.

Home and Community-Based Services (HCBS) provide an alternative to institutional care that offers habilitation services to persons with disabilities.

HCBS providers are available throughout Utah. DSPD offers 2 different service models: provider agencies and Self-Administered Services (SAS). The SAS model allows a person and their family to hire and train employees to provide supports. As needed, these models may be combined.

6,851

persons served during FY 2023

Community Supports Waiver

6,065 persons

A comprehensive lifespan waiver that serves persons with an intellectual disability or a related condition, and who meet Intermediate Care Facility (ICF) level of care need.

339 persons A comprehensive lifespan waiver that serves persons with an

Community

Transitions Waiver

A comprehensive lifespan waiver that serves persons with an intellectual disability or a related condition who move out of an Intermediate Care Facility (ICF).

Acquired Brain Injury Waiver

166 persons

Serves persons who are 18 years of age or older, have a brain injury, and meet Skilled Nursing Facility (SNF) level of care need.

Physical Disabilities Waiver

90 persons

Serves persons who are 18 years of age or older, have a physical disability that results in the functional loss of two or more limbs, and meet Skilled Nursing Facility (SNF) level of care need.

Limited Support Services

95 persons

Lifespan assistance that serves persons with an intellectual disability or a related condition. This waiver serves persons whose needs are less than those required for the comprehensive services waiver, who meet DSPD eligibility requirements, and do not require out-of-home residential supports.

Non-Medicaid Waiver Services

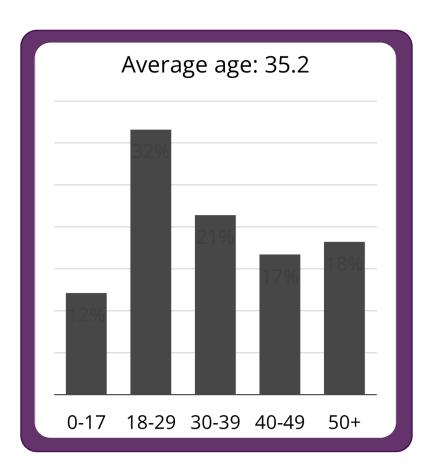
71 persons

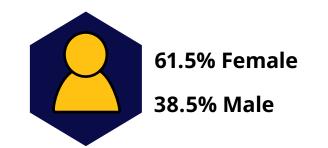
Lifespan assistance for persons who meet DSPD eligibility requirements, but are not eligible for Medicaid funding.

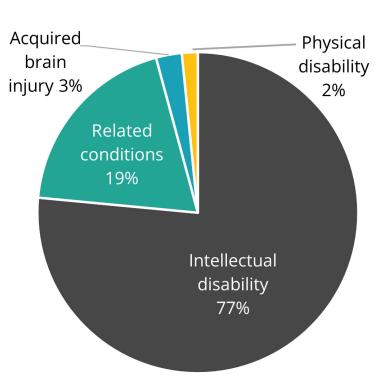
Note: 25 persons were transitioning into services and not included in waiver counts.

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Demographics & diagnoses







82.6% White

9.5% Hispanic/Latino

1.9% American Indian

2.4% Black or African American

2.1% Asian or Pacific Islander

1.5% Other

Eligibility for division services requires a person have a minimum of one qualifying diagnosis.

A qualifying diagnosis must give rise to mental or physical impairments that cause, at least, 3 substantial functional limitations in a major life activity. Qualifying diagnoses can include: self-care, language, mobility, capacity for independent living, and economic self-sufficiency.

The 4 disability types are broken down by the percentage of each qualifying diagnosis. Tables may not add to 100% due to rounding.

Intellectual disability

Diagnosis	Percentage
Mild	42.7%
Moderate	29.3%
Profound	9.3%
Severe	16.0%
Unspecified	2.6%

Acquired brain injury

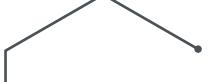
Diagnosis	Percentage
Concussion	15.1%
Head Injury	31.1%
Hemorrhage	16.0%
Laceration	4.2%
Other	28.8%
Stroke	4.7%

Related	conditions
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Diagnosis	Percentage
Autism	67.7%
Cerebral Palsy	11.7%
Chromosomal Abnormality	8.5%
Congenital Anomalies	1.2%
Epilepsy	3.2%
Other	3.6%
PDD	2.7%
Spina Bifida	1.4%

Physical disability

Diagnosis	Percentage
Cerebral Palsy	9.7%
Multiple Sclerosis	6.8%
Muscular Dystrophy	14.6%
Other	21.4%
Paraplegia	4.9%
Quadriplegia	42.7%



New service recipients

A person's state budget is the amount of General Funds allocated for their services. The total budget includes the amount of federal matching funds received for waiver services. In FY2023, 655 Persons enrolled in services.

Appropriation funding

The legislature allocates funding to DSPD from the General Fund every year to support services.

Appropriation Funding	Individuals served	Average state budget	Average total budget
ICF to HCBS	88	\$41,185	\$121,604
Limited supports	63	\$5,619	\$16,592
Most critical needs	296	\$19,366	\$57,180

Attrition funding

Every year some persons leave DSPD services, and DSPD reinvests the money used for their services into the waiting list. Attrition funding allows DSPD to enroll persons who qualify for emergency services and persons court-ordered into services.

Attrition Funding	Individuals served	Average state budget	Average total budget
Moved out of ICF	4	\$43,449	\$128,288
Individuals in crisis	90	\$31,800	\$93,893
Most critical needs	37	\$16,474	\$48,643



Transfer funding

DSPD collaborates with other divisions in the Department of Health and Human Services (DHHS) and ICFs to enroll persons in HCBS.

Transfer Funding	Individuals served	Average state budget	Average total budget
Enrolled in HCBS	13	\$31,270	\$98,233
Transitioned out of USDC	9	\$42,231	\$123,845
Transitioned out of DCFS/JJYS	61	\$31,221	\$91,556

Contracted providers

346 Provider companies

Provider Companies offer direct support staff and structured programming designed to maintain health and safety in integrated, educational, and self-determined settings.

70 Support coordination companies

Support Coordination Companies are a network of Qualified Intellectual Disability Professionals. Support coordinators help persons and their families coordinate Medicaid waiver services and other community resources.

4 Fiscal agents

Fiscal Agents provide fiscal management services as part of the self-administered service model. Fiscal agents assist persons and their support team with fulfilling employer requirements, including: hiring, payroll, and taxes.

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Service categories

DSPD uses validated assessments, self-reporting, and provider experience to tailor a person-centered service plan (PCSP). Person-centered planning offers the person and their planning team choice from an array of community integrated programs to promote and foster self-determination.

The resulting PCSP organizes available services to meet the person's needs, preferences, and goals by annually identifying the person's changing strengths and priorities. Individual budgets within each service category vary based on need. Category counts do not include individuals that did not bill a service during fiscal year 2023.

2,496 persons

Residential support

Average age: 40.4 years

As an alternative to institutional settings, residential habilitation offers 24-hour support in supervised apartments and group homes. Individualized assistance helps the person to obtain and maintain independent living skills in their chosen community. Medication monitoring, behavior consultation, employment, and day support are some of the services that often accompany residential support.



Host home & professional parent

Average age: 33.1 years

Host family residential services offer a shared living experience for youth and adults with exceptional care needs who want a family environment, but cannot live with immediate family members. The host family provides assistance with independent living skills and supervision that helps the person engage in their community and avoid isolation.



Supported living

Average age: 49.5 years

A variety of supported living options offer hourly, intermittent care for persons who live in their own home. Services are designed to maintain health and safety and avoid isolation. These include transportation, personal care, homemaking, chores, medication monitoring, advocacy, communication assistance, and other activities of daily living.



In-home provider-based

Average age: 33.6 years

An enrolled person and their family can access respite, companion, homemaker, chore, and personal assistance through a contracted provider agency. The person and provider agency collaborate to design a service plan that maintains health and safety, and avoids isolation.



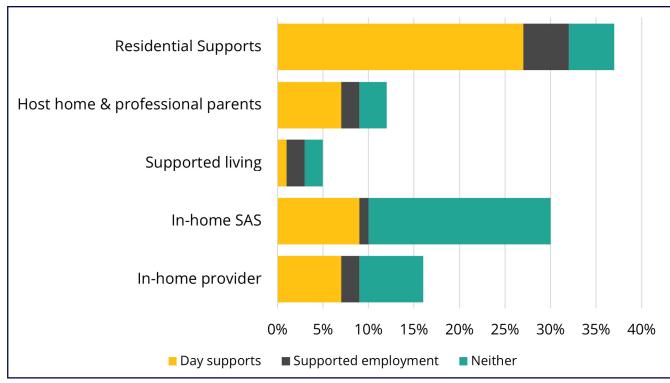
In-home self-administered

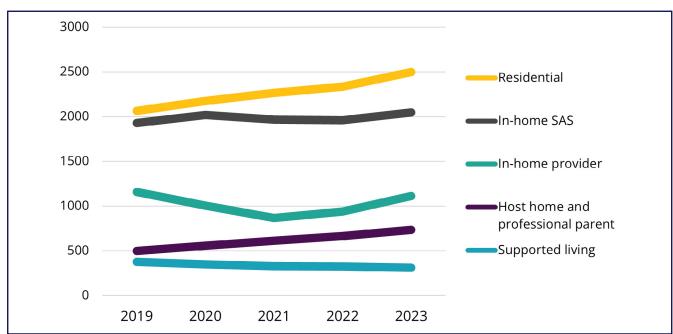
Average age: 28.2 years

Self-Administered Services (SAS) allows a person and their family to employ their own direct service staff. SAS includes access to a fiscal management agent that provides payroll and budget management services. Waiver services offered under SAS include: respite, companion, homemaker, chore, and personal assistance.

Service spending

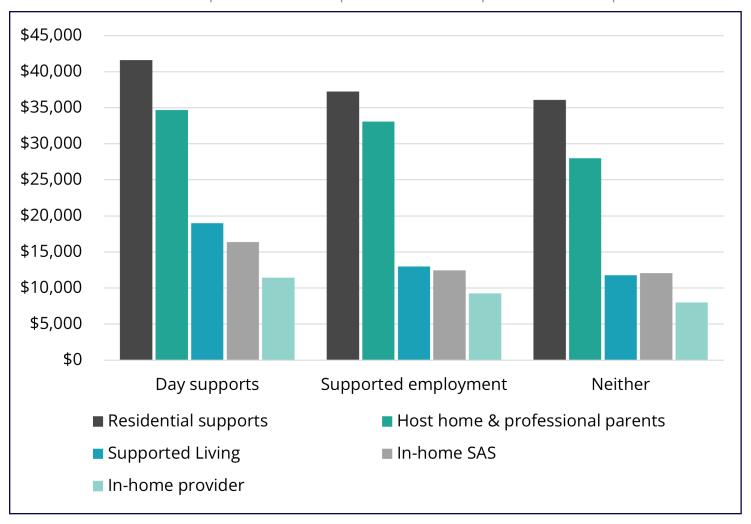
DSPD may offer many similar services within a service category. Tracking category usage and spending helps DSPD evaluate service access and trends. Service data informs strategic planning and improvement efforts. The following graphs and data identify how many persons use a category, how categories are combined with each other, and what spending looks like in each category.





Service category spending

Category	Average annual total cost	Average annual state cost	Total cost	Total state cost
Residential supports	\$117,292	\$38,692	\$292.8M	\$96.6M
Host home and professional parents	\$96,051	\$31,685	\$70.6M	\$23.3M
Supported living	\$40,365	\$13,316	\$12.5M	\$4.1M
In-home self- administered services	\$38,060	\$12,555	\$77.9M	\$25.7M
In-home provider-based	\$27,170	\$8,963	\$30.2M	\$10M



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Day activities

Committed to the Employment First initiative, DSPD recognizes the benefits of prioritizing meaningful, competitive employment opportunities for persons enrolled in services.



Supported employment spending five year trend

Fiscal year	State dollars	Total dollars
2023	\$2.6M	\$7.1M
2022	\$2.2M	\$6.0M
2021	\$2.2M	\$6.0M
2020	\$2.6M	\$7.1M
2019	\$2.8M	\$8.0M

Supported employment historical counts

In-services	812	868	853	957	948
Waiting list	106	131	172	218	232
_	2023	2022	2021	2020	2019

Day support

Daytime supervision and support, in either an individual or group setting, designed to help develop and maintain habilitation skills, including: self-help, community living, and communication skills. Structured programs provide socialization, skill building, and leisure activities. During fiscal year 2023, 3,402 persons with an average age of 36.2 years used day support.



Supported employment

Supported employment provides assistance for adults who want to obtain, maintain, and advance in competitive integrated employment and entrepreneurship paying at least minimum wage, or in self-contained business locations. A job coach or co-worker supports either an individual or group. Employment support offers the flexibility to customize work hours and setting in order to follow the person's interests and achieve the person's goals. During fiscal year 2023, 812 persons with an average age of 40.9 years used supported employment.

Supported work independence

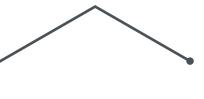
Supported Work Independence (SWI) provides skill development and job coaching to adults waiting for ongoing services.

52% Employed

\$8.42 Average hourly wage

Average hours worked per week

234 Participated in SWI



Utah State Developmental Center

Dedicated to providing evidence-based resources

USDC serves all ages in a comprehensive residential setting. On-site services include: habilitation, medical, dental, employment, and recreation. Dormitory style living matches 4 to 6 persons as roommates who share common areas. Staff assist with grocery shopping, cooking, and cleaning. During fiscal year 2023, USDC admitted 16 persons and discharged 11 persons.

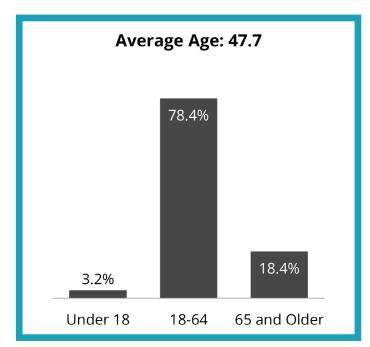
USDC typically offers respite support for persons enrolled in DSPD services. Families report that this valuable service supports continued caregiving at home. The COVID-19 pandemic however, added new challenges to supporting the health and safety of residents and staff. Risk of spreading the virus meant that USDC could not offer respite during fiscal year 2023.

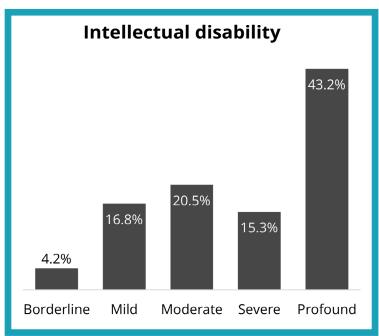
190 persons served





64.74% Female





ICF Transition Program

The ICF Transition Program provides an opportunity for persons who live in an intermediate care facility to move into a home and community-based setting.

As part of the *Christensen v. Miner* settlement, the program will move 250 persons who want to live in the community from an ICF into HCBS between fiscal years 2020 and 2024. Program specialists educate ICF residents and persons requesting admission to an ICF about HCBS. Interested ICF residents can visit HCBS providers and service sites to gain a better understanding of available services.

ICF converted to an HCBS model

residents moved into HCBS in FY23

283persons transitioned to HCBS in the past 4 years



HCBS transition stories



J's story

J chose to move into a community setting in early 2023. She has made great progress with her activities of daily living and advocating for her needs. J has complex medical needs, but she, her provider, and medical team have made sure all of her health needs are well managed. J's mobility has improved and she relies less on her walker. She has learned vocational skills through her EPR program and now feels confident to explore community employment. J got engaged this year and plans to get married next spring. She is excited for what the future holds for her in her new supported community setting.

A's story

A recently transitioned from an ICF to a community based setting. She had a lot of fear about moving, which was related to her diagnosis of paranoid schizophrenia. Her provider was very understanding and supportive and took the time A needed to help her develop skills to understand her disorder, feel safe in a new community setting, and learn to live independently. A has come a long way. She has learned to manage her fears and anxieties. Now, she is much happier living independently in her community. She now serves as a mentor to others in her community setting and frequently provides help and support when they need it.

T's story

T lived in an ICF for nearly 30 years. He has recently transitioned into HCBS and is now living at home with family members. Since moving home and engaging with supportive services, T has reconnected with the community he grew up in. His health has improved, and he has been able to move from taking dozens of medications to only 4. He is active in his community and has been able to attend several family trips. He also has a job at his church cleaning the pews and organizing the hymn books. T is happy, thriving and pursuing activities that are interesting and meaningful to him.

M's story

At first, M was hesitant to move out of her ICF. She was interested in moving into the community, but was nervous about making a big life change. M began attending a day program and engaging in other community activities which offered her more personal choices than she previously had. In a short time, she found she fit in wonderfully in her new community setting. She now holds a leadership position at her day program and is working towards finding a job. M's negative assumptions and views of herself have decreased significantly and she is happy living in the community with her friends and family.

