

Florida ARF Response to iBudget Redesign

Florida ARF provides the following responses to the September 2019 APD/AHCA iBudget Redesign Plan.

- Increase funding for the APD iBudget system by \$208 (GR/Trust) so agencies can provide Florida's most vulnerable population with medically necessary services in the most appropriate settings, including:
 - Fund provider rate increase at \$88 million to raise average direct care wage to \$11 per hour for Adult
 Day Training, Personal Supports/Companion, and Residential Habilitation services to resolve the hiring
 crisis and to promote a better workforce.
 - Fund APD deficit at \$85 million to cover cost of Significant Additional Needs (SANS) requests.
 - Fund wait list at \$35 million to serve an additional 1,000 individuals each year.
- Implement the following recommendations from the APD/AHCA Redesign plan:
 - Include the iBudget waiver in the Social Services Estimating Conference;
 - Expedite amendment of the Next Generation assessment tool and eliminate algorithm requirement;
 - Train Support Coordinators regarding waiver utilization practices and use of natural supports;
 - Initiate Assistive Care billing for Group Home providers to realize a \$40 million funding shift from AHCA;
 - Implement new ICF/IID Level III reimbursement rates for individuals with extensive behavior needs;
 - Shift funding from AHCA's state plan to the iBudget waiver for individuals when they turn 21.
- The Association agrees with the Redesign Plan recommendation to maintain the carve out of the iBudget system from privatized managed care.
- The Association does not support any recommendations that result in reductions or delays of client services, service limitations, or reduction of provider services, including:
 - Centralize Significant Additional Needs approval process;
 - Cap cost plans at \$205,000 per year;
 - Limit Life Skills Development services;
 - Serve more individuals with mental health and developmental disabilities in DCF Florida Assertive Community Treatment and Community Action Team (FACT and CAT) programs.
- APD and AHCA should be tasked with development of new waiver service models to create more cost
 predictability for service units and hours. Recommendations should be based on a data system that provides
 sound data metrics. The Association has offered suggestions for efficiencies that should be implemented
 where feasible.