

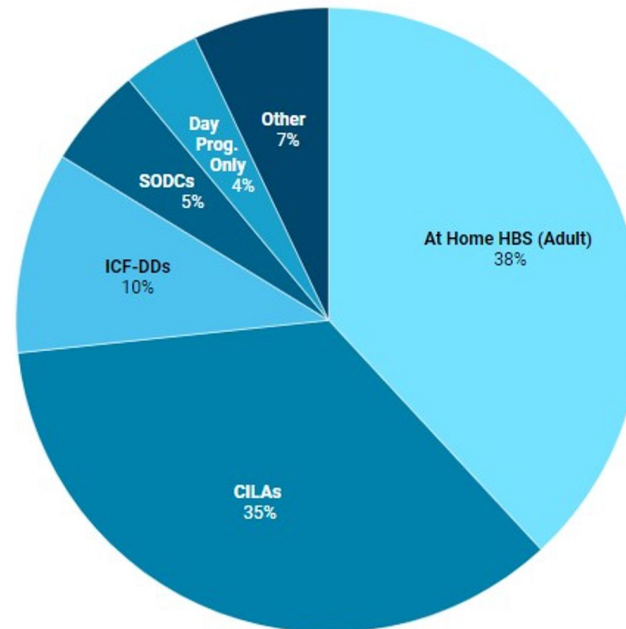
Division of Developmental Disabilities Update

April 25, 2024

Division of Developmental Disabilities

31,087 Individuals Served in DDD Funded Settings

At Home HBS (Adult) CILAs ICF-DDs SODCs Day Prog. Only Other

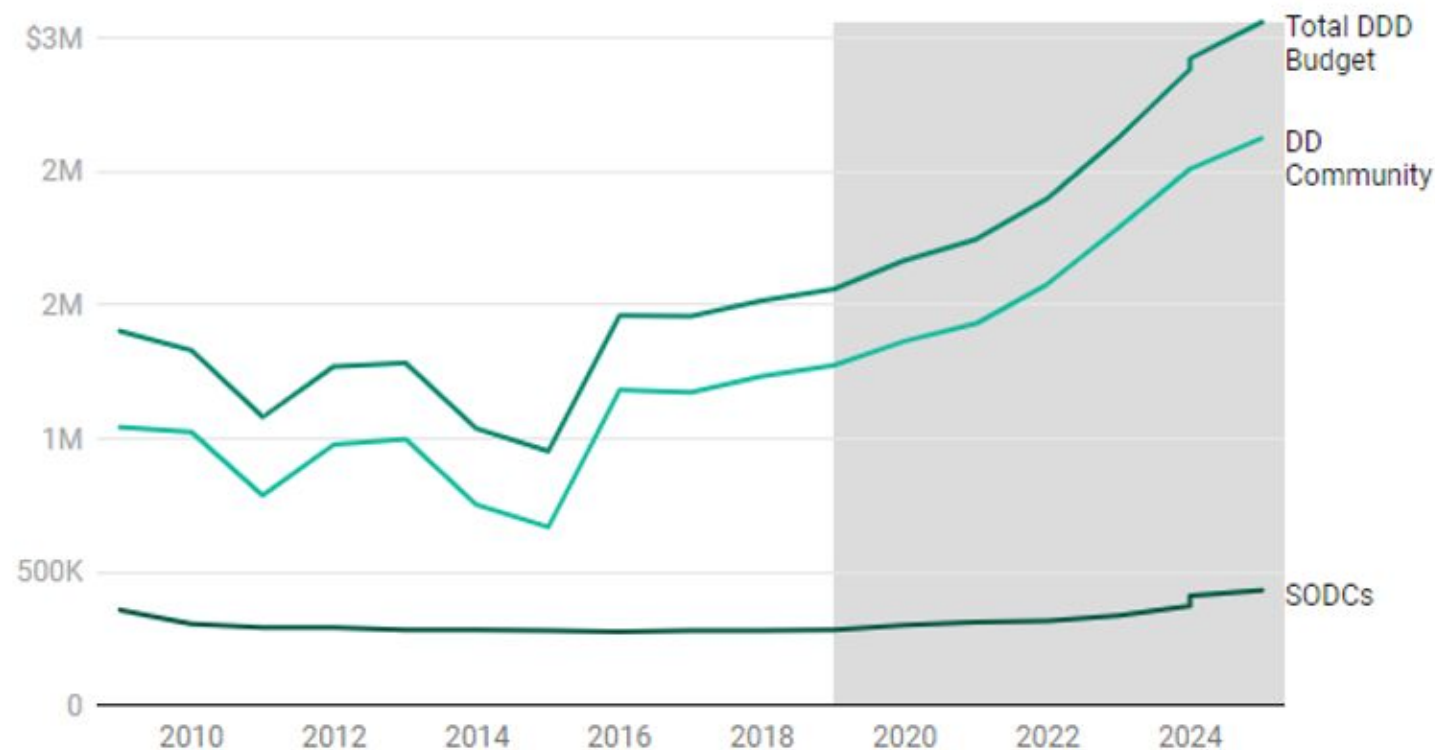


"Other" includes At Home HBS (Children); MCDD; CLF; Children's Residential

Source: IDHS Division of Developmental Disabilities, 2/1/2024 • [Get the data](#) • Created with [Datawrapper](#)

Setting	Individuals
At Home (Adult)	11,848
CILA	10,950
ICF	3,246
SODC	1,613
Day Program Only	1,244
Children's Home Based	975
MC/DD	803
CLF	288
Children's Residential	120

State of Illinois DDD Budgets, FYs2009-2025



Numbers are in the thousands (so 1M represents \$1 billion dollars)

Source: IDHS Budget Office • [Get the data](#) • Created with [Datawrapper](#)

(Note: these figures do not include additional resources from the State Medicaid program [Illinois Department of Healthcare & Family Services], the Illinois Department of Human Services Divisions of Mental Health and Rehabilitation Services, the Illinois Guardianship & Advocacy Commission, or the Illinois Council on Developmental Disabilities. All of these agencies have also experienced record increases during Gov. Pritzker's tenure.)

FY25 Proposed Budget Highlights - DDD

- \$100.0M to support mid-year implementation of a \$2.50/hour wage increase for DSPs (\$70.0M in new GRF and \$30.0M from other State funds).
 - Preserves 2 million+ statewide service hours for community group home staff (DSPs)
- \$30.1M for 630 new adult PUNS placements in FY24 and 630 more placements in FY25.
- \$11.7M proposed for a 3.2% increase in Homebased program liability related to SSI increase.
- \$4.0M to annualize the cost of 500 FY24 children PUNS selections (to receive home-based services).

Budget Continued

- Increases for ISCs to support their case management work
- Moving Housing Navigator from a pilot to a permanent part of the ISC role.



PUNS Selection

- The PUNs list is the list of children and adults with I/DD who want home and community based services now or in the future.
- Individuals access services by being selected off the PUNs list, unless they go into crisis.
- Since 2012, 14,909 children and adults have been selected for waiver services from PUNs (1064 kids in 2022, 2023)
- Wait time for adult services is 50 months.
- In FY25, we anticipate adding at least 630 people to the Adults with Developmental Disabilities waiver by selected almost 1,200 individuals off of PUNs.

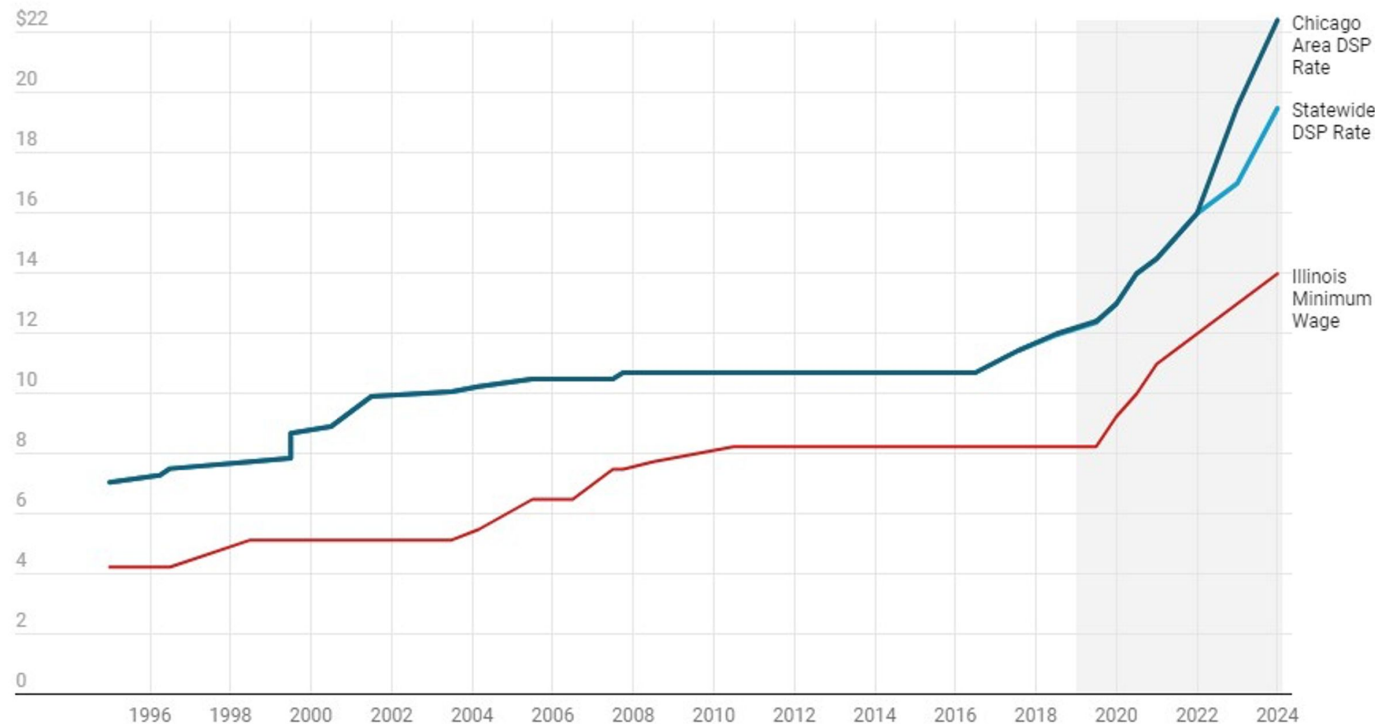
Investing in the Community

- Since its 2020 publication, Illinois has been implementing these recommendations over a multi-year period (FY22-FY25). The study's authors recognized the pressures faced by the state in these recommendations, thus leading to a 5-year phase-in of their recommended \$792M increase.
- With the FY25 proposed budget, the state will have invested almost half a billion (\$488.2M) in furtherance of the Guidehouse recommended increases:
 - FY22: \$108.9M
 - FY23: \$136.2M
 - FY24: \$143.1M
 - FY25: \$100M

Wage Investment

- Consistent with the study's recommendations, effective January 1, 2024, wages for Direct Service Professionals (DSPs) were increased to \$22.08/hour in the most populous region of the State (Chicago; Cook, DuPage, Kane, Lake, McHenry, and Will counties) and to \$19.50/hour everywhere else in the state, representing an increase of \$6.50/hour+ since January 1, 2020. This represents a **50% increase in wage reimbursement rates** over a 4-year time span:

Illinois I/DD DSP Hourly Wage Reimbursement Rates, 1995-2024

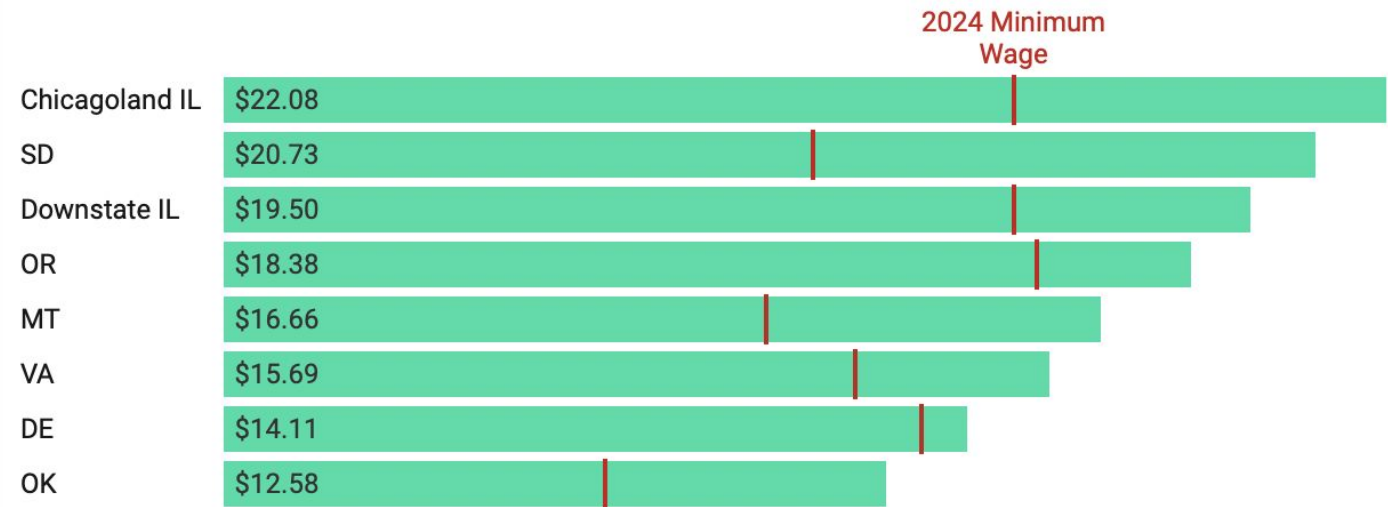


Wage Investment

Division of Developmental Disabilities

DSP Hourly Wage Reimbursements

Rates paid by States to providers to pay DSPs working in CILAs (Community Integrated Living Arrangements; sometimes called group homes) serving people with developmental disabilities.



Chicagoland includes the Metro Region Including: the city of Chicago; all of Cook, DuPage, Kane, Lake, McHenry, and Will counties. More than 8.4 million people (about 67%) of Illinois' total population, reside in the Metro Region.

Source: Guidehouse • [Get the data](#) • Created with [Datawrapper](#)

Other Capacity Efforts

Support for Providers:

- \$12.5 million for staff retention for about 160 CDS and SEP eligible organizations
- Refresh New Provider Orientation (resulted in moving from 1 new CILA provider in FY23 to 11 thus far in FY24)
- Create new Technical Assistance (TA) unit and hired 2 staff
- New \$18,000 incentive to open new 3 person (with single bedrooms) licensed 24 hour CILA

Other Capacity Efforts

Growing Focused Supports:

- Increased funding for Stabilization Homes (Short Term, Long Term, Transition) – currently supports 32 people and working to expand an additional 40)
- Support Services Team efforts to expand training and support (currently supports 800 people on a rolling basis)
- Updated nursing services calculations, which will increase payments for nurses providing services to individuals with complex medical needs
- \$5 million in funding made available for supporting providers to train frontline staff in de-escalation techniques.
- Funding for contract for provider mentor for at least two years.

Other Capacity Efforts

A Few More Activities:

- Housing Navigators Pilot made permanent – As of Dec 31, 2023: 68 people have moved out; 337 referred to navigation; 296 enrolled in navigation; 261 enrolled in Statewide Referral Network (SRN); 100+ – housing owner outreach
- Money Follow the Person Program
- Respite Services - FY23 respite grants supported 7224 individuals and the first two quarters of FY24 have seen 3538 individuals being supported. The FY24 budget for respite services includes:
 - In Home/Residential – \$3,800,000.00
 - Voucher – \$1,800,000.00
 - Group - \$850,000.00
- Illinois Lifespan Respite - \$1.3 Million 5 year grant (July 2021-June 2026)

Challenges and Changes for the I/DD Community

Challenges-

- Individuals with IDD are more likely to develop major mental illness.
- Individuals with IDD may have different manifestations of mental illness.

Changes needed to increase resources, inclusivity and accessibility-

- Diagnostic overshadowing is common and a barrier to appropriate psychiatric treatment/supports.
- There is little training regarding dually diagnosed IDD/MI individuals in medical schools, psychiatric residency programs, or other professional training programs.
- Training of both professional and direct care staff regarding the manifestations of mental illness in individuals with IDD is important.

Questions/Comments