

# 2022 Tennessee State VOR Report

## ICF/IIDs

Tennessee has moved away from state-operated facilities and instead largely uses privately-operated residential community ICF/IID homes now. 135 privately-operated ICF/IID homes may serve 4-8 supported persons each, providing care for 892 individuals with intellectual disability statewide. Unlike other group home settings such as Community Living Support (CLS/CLS-FM), these residential community homes must adhere to ICF/IID regulations, consistent with CMS guidelines, including active treatment. Two provider agencies, Open Arms and RHA, operate 57% of the state's ICF/IID privately-operated homes. Other provider agencies include Comcare, D&S Residential, Life Bridges, Michael Dunn, Mur-Ci Homes, Orange Grove, RHA-Salem Villages, Shelby Residential and Vocational Services (SRVS), Sunrise Community, and Tennessee Family Solutions. Quality Rating Systems scores were not performed for most across 2020 and even 2021 due to COVID, but QRS scores are now coming current and available for public review.

<https://www.tn.gov/didd/divisions/quality-management/icf-iid.html>

## HCBS

Tennessee continues to expand access to HCBS services. The American Rescue Plan Act boost increases HCBS FMAP in Tennessee to 82% for 2022. Additionally, TN has allocated \$3,000/member via enhanced FMAP HCBS funding to provide Family Caregiver Support for ECF CHOICES group members and members with a 1915(c) waiver. This \$3,000 FMAP amount must be used by March 31, 2024. What is allowable under the benefit varies by group designation for the member, but some allowable options include Respite, Enabling Technology, Assistive Technology, Adaptive Equipment and Supplies, and Minor Home Modifications. HCBS members are encouraged to contact their Support Coordinator to discuss options.

<https://www.tn.gov/content/dam/tn/tenncare/documents/FamilyCaregiverSupportsBenefitProtocol11022021.pdf>

## Legislation

SB 2042, takes effect July 1, and effectively bans 14c waiver programs in the state of Tennessee. The bill was introduced 1/27/2022, sponsored by Senator Yarbrow, passed unanimously 3/28/2022 and signed by Governor Lee on 4/14/2022. SB2042 has been assigned Public Chapter Number 870 by the Secretary of State. TN VOR members continue to advocate with their federal legislators to protect 14(c) on the federal level, highlighting concerns we already see in Tennessee. Currently, even basic foundational programs such as Exploration available in the HCBS model, deny services for individuals severely impacted with IDD and complex medical or behavioral health needs—the very population that 14(c) serviced. If these individuals cannot be provided services to even determine what types of jobs they might like, how can it reasonably ever be assumed they will be eligible for competitive employment? We encourage supporters of 14(c) elimination to engage in discussions for next steps to ensure our loved ones are not collateral damage of this movement.

<https://wapp.capitol.tn.gov/apps/BillInfo/Default.aspx?BillNumber=SB2042&ga=112>

Sen. Watson, Rep. Doggett, a very determined mom, Chrissy Hood, and multiple state disability organizations worked tirelessly to promote SB 602 / HB 905, a Universal Changing Tables bill. In the end, the bill became unneeded with a surprise vote on 4/29/2022 that provided \$1 million to the TN Dept of Intellectual and Developmental Disabilities (DIDD) to offer grants to community groups and businesses to install adult-sized changing tables, doubling the amount originally requested by the advocates. The Dept. of Transportation has agreed to install changing tables in all rest areas and welcome centers. The Dept. of Environment and Conservation has agreed to install changing tables in all state parks. This was a truly remarkable grassroots effort that yielded a monumental step forward for dignity of individuals with disabilities in Tennessee. <https://wapp.capitol.tn.gov/apps/BillInfo/Default.aspx?BillNumber=SB2042&ga=112>

## IDD Crisis Support

### TN START AST

Tennessee DIDD has launched a new crisis support program, TN START AST (Assessment & Stabilization Teams), for individuals with IDD and behavioral health needs. The program provides individualized cross systems person centered crisis intervention and prevention plans with the goal of reducing and preventing hospitalizations and police interactions. The program launched phase 1 last summer, and they've launched phase 2 in March 2022.

<https://www.youtube.com/watch?v=sWrJAXCcs8&t>

### CIT Training

DIDD and NAMI are also providing training to law enforcement agencies when invited to create Crisis Intervention Teams that focus on de-escalation interventions. Our loved ones with IDD who may experience a behavioral health crisis will benefit from CIT response, hopefully reducing miscategorizing IDD behavior episodes as domestic disputes.

<https://www.tn.gov/behavioral-health/need-help/training/law-enforcement-training.html>

### IDD-Specific Emergency Department Stabilization Protocols

Vanderbilt University Medical Center, the TN Council on Developmental Disabilities, TN DIDD, the Center for START Services, and others developed a team to create IDD-Specific Protocols for Emergency Department Stabilization. They are now published and available for distribution across all hospitals. You can download a copy on the Behavior Services section of the TN DIDD website. <https://www.tn.gov/didd/divisions/health-services/behavior-services.html>

## Conclusion

Tennessee is making great progress in IDD crisis response but gaps for everyday long-term care that remain leave a system woefully unprepared to provide appropriate care for many severely impacted individuals with IDD and complex physical and severe behavioral health needs. Every VOR advocate for TN's team shared with their legislators their own accounts of gaps that continue to fail our loved ones. These included years sitting on HCBS waitlists, the daunting and heartbreaking task of finding a safe ICF placement with limited information excused by COVID, lack of acute stabilization options, difficulty acquiring approvals, difficulty finding providers once services had been approved, and more. We remain convinced that one size does not fit all, and that our loved ones deserve safe choices for care. We greatly appreciate that every US Congressional office and both US Senatorial offices in Tennessee participated in the VOR Legislative Initiative for 2022. It is our hope that continued active civic engagement and sharing our battle-worn stories will lead to continued progress and a future in which our loved ones severely impacted by IDD will have true choice of setting and all necessary services to enjoy a dignified, safe, and enjoyable life.

Respectfully Submitted,

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