

REPORT HIGHLIGHTS



CONSUMER-DIRECTED ATTENDANT SUPPORT SERVICES
PERFORMANCE AUDIT, MAY 2015

DEPARTMENT OF HEALTH
CARE POLICY AND FINANCING

CONCERN

The Consumer-Directed Attendant Support Services (CDASS) Program appears to be more costly than other service delivery options available to HCBS clients, but the Department needs to conduct a more thorough cost-effectiveness analysis. Further, the Department lacks controls to ensure that enrollment requirements are consistently met, client funding allocations align with client needs, and case managers adequately monitor clients.

KEY FACTS AND FINDINGS

- The Program lacked documentation showing that all enrollment requirements were followed for 22 (70 percent) of the 30 clients in our sample, including documentation that clients were in stable health and that background checks were conducted on all attendants.
- Of the 30 clients we reviewed, 27 (90 percent) purchased attendant care that varied by more than 10 percent, either higher or lower, from the hours that their case managers determined were needed when setting their funding allocations for each type of care, indicating problems with the processes case managers use to assess clients' needs and monitor clients.
- The rates set by the Department to estimate clients' allocation amounts for health maintenance care were higher than necessary to meet client needs. Specifically, we found that in Fiscal Year 2014 clients paid attendants an average of \$16.68 per hour compared to the \$28.36 per hour clients were allocated to purchase this care.
- The Program lacked evidence that case managers conducted required client check-ins for 5 (33 percent) of the 15 clients files we reviewed.
- A study conducted by the Department in Fiscal Year 2013, reported that the cost to provide services to clients through the Program may be 58 to 86 percent higher than providing similar services to clients through alternative service delivery options. However, the Department reported that the study lacked reliable data to draw definitive conclusions and has not assessed Program outcomes such as nursing home placements, hospital admissions, and critical incidents to fully assess the Program's cost-effectiveness.

BACKGROUND

- The purpose of the CDASS Program (Program) is to allow clients who qualify for the Department's Home and Community-Based Services (HCBS) waiver programs to manage their own care and hire their choice of attendants.
- During Fiscal Year 2014 the Department spent \$82.3 million on the Program, which served 3,124 clients.
- The Department contracted with 23 single entry point (SEP) agencies and one financial management services (FMS) provider to provide day-to-day administration of the Program during the period we audited.
- Under the Program, case managers calculate clients' funding allocations based on clients' needs and clients are responsible for managing their allocations to hire attendants.

KEY RECOMMENDATIONS

The Department should:

- Improve its oversight of the Program's enrollment process to ensure that case managers verify that all required steps have been completed and that FMS providers perform required background checks.
- Ensure that clients' funding allocations are based on their documented need for services by making improvements to the care planning process and evaluating the rates used to estimate client allocations.
- Strengthen its controls designed to ensure that case managers monitor clients' spending and use of attendant hours and provide additional guidance and training to case managers.
- Conduct a comprehensive analysis of the Program to assess its benefits, outcomes achieved, and costs compared to other service delivery options, report the results to policymakers, and make changes to the Program as determined necessary based on the analysis.