Alliance for the Betterment of
Citizens with Disabilities

Empowering People: Providers Shaping Policies

The Provision of Behavioral Supports in the IDD Community Part II

Time to Reset the Policy

DHS is to be commended for continuing to ramp up the mental health service system for individuals with IDD. Sadly, one of its current policies is unnecessarily limiting their access to care.

Since November of 2022 ABCD has advocated for DDD to shift from its overreliance on one model to a multidisciplinary approach for behavioral and mental health care, which accounts for the heterogeneity of the IDD population. We understood that even if DDD agreed with our position, this would require CMS to approve an amendment to the definition of BS in the 1115 Waiver, a methodical process.

Earlier this year upon review of the 1115 Waiver, we noted that unlike the definition of BS, CMS left the qualifications for the provision of BS to be determined by DHS/DDD. In our July 2023 white paper and subsequent testimonials, we made the case that since quality and competency would not be compromised, licensed professionals like social workers, psychologists, psychiatrists, and psychiatric nurse practitioners must be permitted to provide BS by assessing, developing, and evaluating behavioral support and monitoring, training, and supervising staff. [1] And since there are not enough BCBAs, the diversification of service providers would infuse more professionals into the service of care in addition to expanding treatment modalities and care models.

In October of this year, we noted that the 2021/22 NCI In Person Survey reported that for NJ the percentages of individuals who had a behavior plan was 13%, and among those who take medication for a behavior challenge was 35%, significantly lower than NCI IDD averages of 26% and 56% for all surveyed states, respectively. [2] This data supports the concerns voiced by many, that plan approvals are delayed, and providers are out of compliance. NJ states as recently as October 2023, NCI surveys are often used to establish policy direction.[3] Why not here?

DHS/DDD's choice to severely limit qualified licensed professions from the provision of BS, unnecessarily restricts the IDD population's access to care, negatively impacting the individuals we serve. To reduce the number of people waiting for behavioral health plans, we recommend a common-sense and heterogenous approach in the service of care. Time to reset the policy.

December 14, 2023

[1] Demonstration Approval-Temporary Extension, January 26, 2023. Service Definitions. Behavioral Supports, p. 110.

[2] *In Person Survey State Report. 2020-2021 New Jersey Report*. National Core Indicators, p. 91. https://idd.nationalcoreindicators.org/wp-content/uploads/2022/08/NJ-IPS-20-21-State-Report-508.pdf

[3] *Overview: National Core Indicators (NCI) Surveys*. NJDDD. October 2023, p.1.

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