Intellectual and Developmental Disabilities and Medicaid

The Data Mine

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Introduction

The Bureau of Developmental Disabilities Services (BDDS) envisions a community where all people have equal access and opportunity to realize their best life. Our core value is that all people have the right to live, love, work, learn, play and pursue their dreams. Our mission is to connect people with disabilities and their families to resources and supports to live their best life. BDDS administers programs that support children and adults with intellectual and developmental disabilities through community support and residential options. Services are delivered using an individualized, person-centered approach where all people have equal access and opportunity to realize their good life.

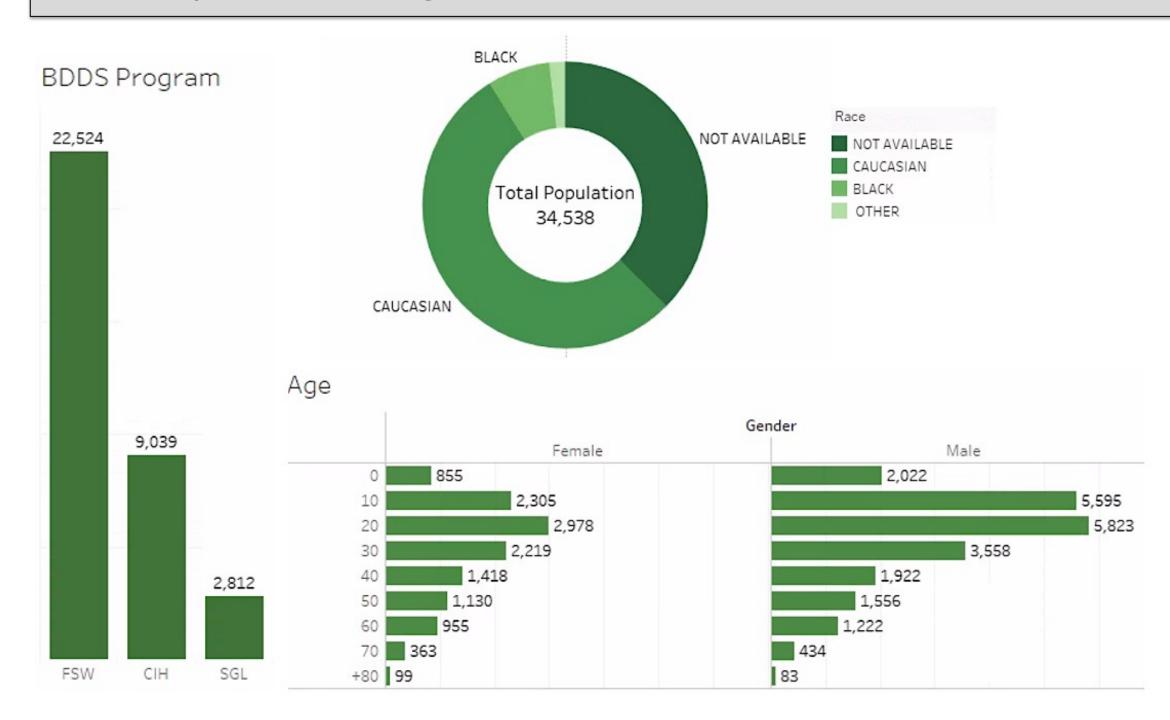


Figure 1. Baseline population

Background

FSSA Division of Disability and Rehabilitative Services (DDRS) has two main responsibilities for children and adults with physical and cognitive disabilities:

- Facilitate partnerships that enhance the quality of life
- Provide continuous, life-long support

The Indiana Bureau of Developmental Disabilities Services (BDDS) within DDRS, operates various services:

- Two Home and Community Based Services (HCBS)
- Family Supports Waiver (FSW)
- Provides meaningful home and community-based services for individuals with developmental disabilities to remain in their home.
- Community Integration and Habilitation (CIH) Waiver
- Provides services to help individuals with disabilities to transition and remain in community-based setting.
- Supervised Group Living (SGL)
- SGL is a residential option for eligible individuals with intellectual/developmental disabilities needing services.



Our team's approach to understanding the data and creating useful visuals began with learning about the programs background and data science concepts in State Government. This allowed our team to get a general understanding of the range of data and populations of interest. Then, using FSSA Cloud Analytics Environment in Azure, we analyzed and manipulated the data based on various variables of interest and created graphs to effectively communicate insights into the individuals enrolled in August 2022. The graphs allow our group to display baseline information from Indiana's Medicaid program to be communicated in a concise and insightful way.

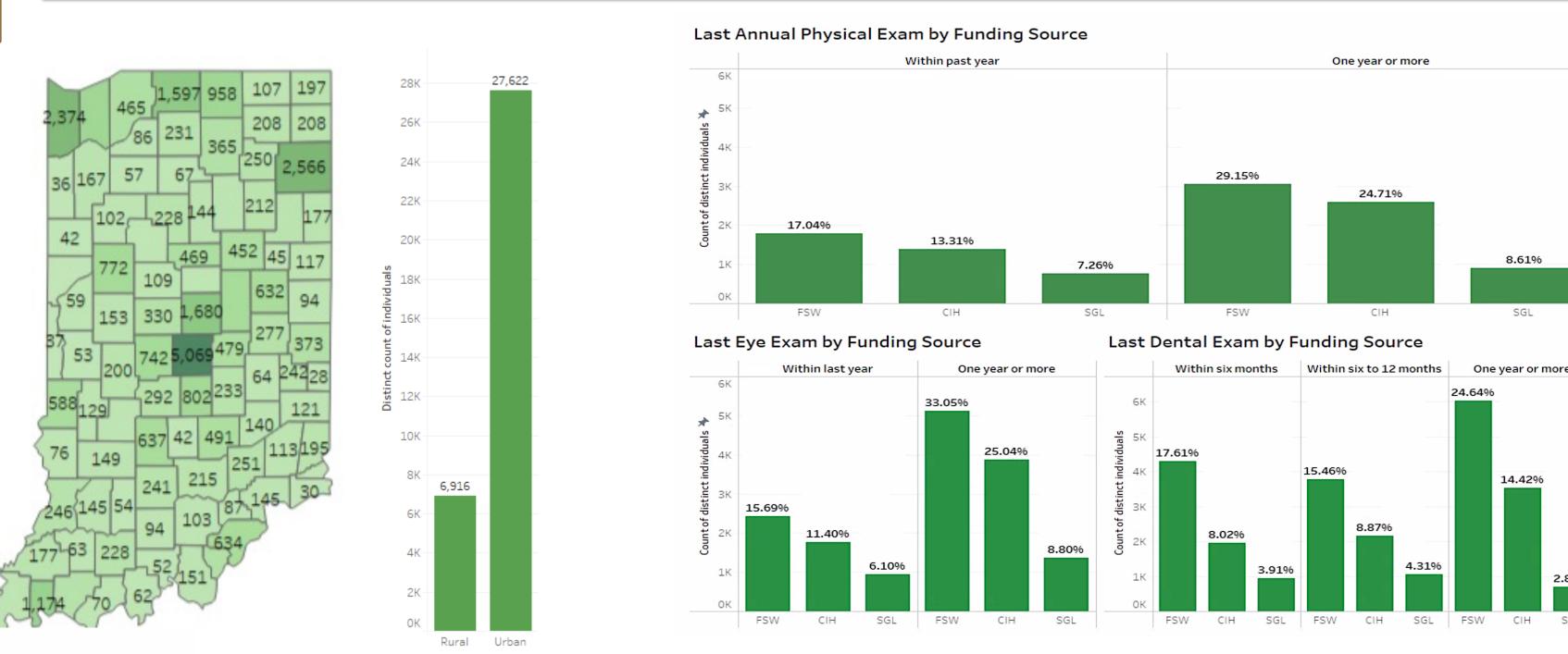


Figure 2. Basic Healthcare



Figure 3. Emergency Room Visits

Emergency Room Visits

Results

- The FSW, CIH, and SGL individuals are very diverse, and reside in mostly from urban Indiana counties (Figure 1).
- Individuals receive basic healthcare services at various time periods and vary in percent totals depending on funding source. SGL residents receive in-house basic healthcare services that may not be captured in Medicaid claims data. Medicare claims data were not used in this analysis that may account for the low utilization for certain individuals who use Medicare insurance (Figure 2).
- Individuals were admitted to the emergency room consistently throughout the seasonality of a year. Many psychiatric disorders were diagnosed at the time of the ED visit including schizophrenia, mood, and behavioral disorders (Figure 3).

Future Work

Evaluate and understand the relationship of psychiatric disorders and chronic health conditions among FSW, CIH, and SGL populations

*This data is for research purposes and is not intended to be used for reporting. Due to difference in geographic aggregation, time period considerations, and units of analysis, these numbers may differ from those reported by FSSA