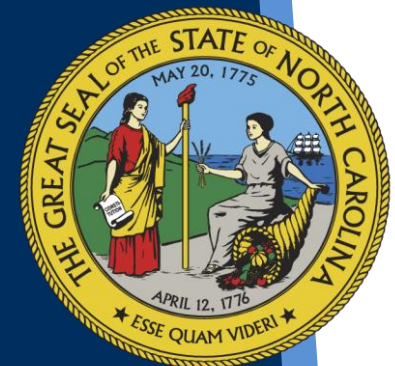


NC Department of Health and Human Services

Inclusion Connects Report Summary

Oct. 15, 2025



Inclusion Connects: Report Summary

Summary views of key metrics from the [Inclusion Connects Quarterly Report](#) are available in the following sections.



Report Overview

- In May 2024, NCDHHS and DRNC agreed to improve community-based services for people with Intellectual and Developmental Disabilities (I/DD).
- This report highlights the progress made toward this goal and NCDHHS's commitment to better supporting the I/DD community.



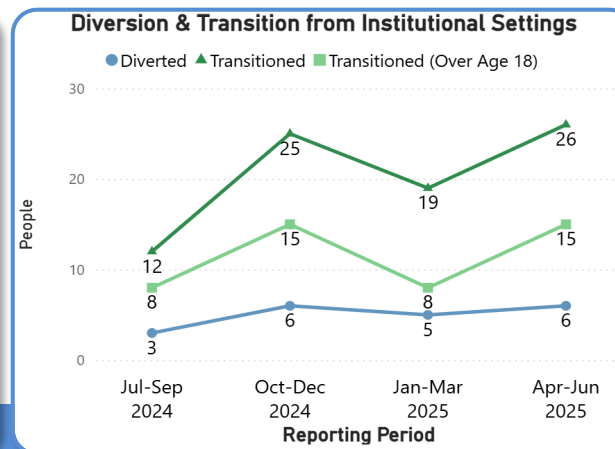
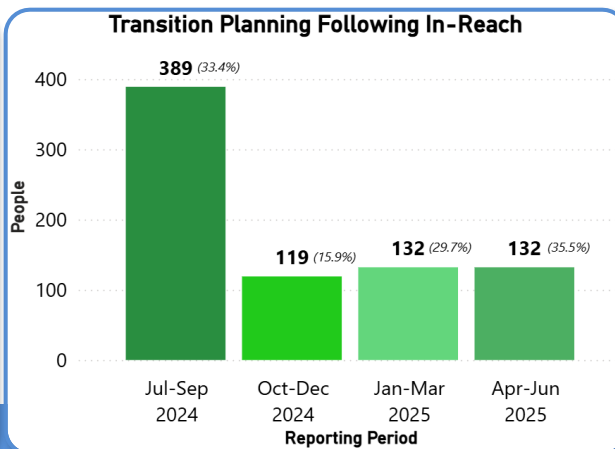
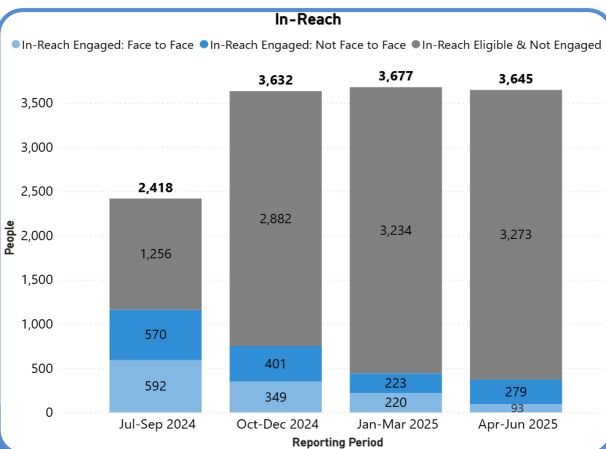
Data Sources

- The Inclusion Connects Quarterly Report uses data collected from LME/MCOs reporting requirements
- NCDHHS reviews reports from LME/MCOs and collaborates with them to address any gaps
- Read the [full Quarterly Report](#)

Last updated October 15, 2025

Transition & Housing Overview

Please note metrics may fluctuate as data quality improves, reflecting more accurate populations and cleaner, reliable data. Current data is sourced from LME/MCO reporting.

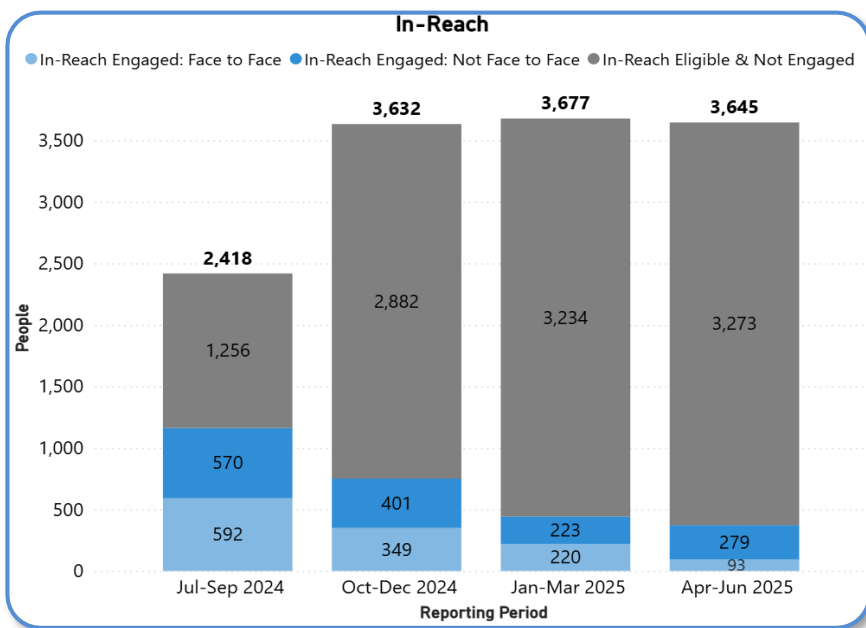


- The number of members living in institutional settings remained consistent due to regular trainings with the LME/MCOs.
- In-Reach efforts reflect internal policies of each LME/MCO.

- Percentages are calculated using the number of people eligible for In-Reach each reporting period. This includes all those living in institutional settings.

- NCDHHS continues to work with the LME/MCOs to ensure people eligible for diversion are tracked correctly.
- Diversion and Transition data from the Money Follows the Person program are included.

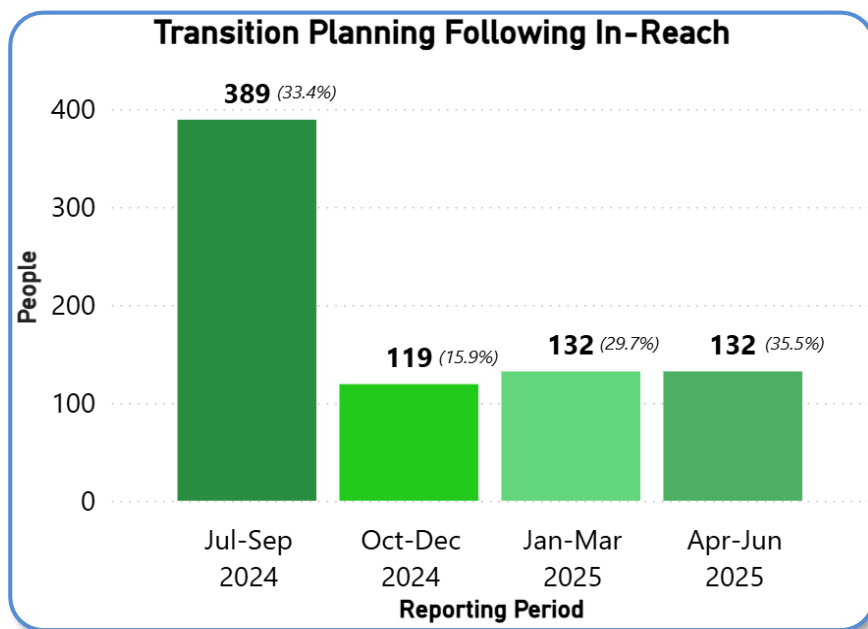
Transition & Housing



In-Reach

- In-Reach involves educating people with disabilities in institutional settings on the benefits of community-based services.
- In-Reach staff also offer visits to community-based settings and opportunities to meet other people with disabilities who are living, working and receiving services in inclusive settings.
- In-Reach involves face-to-face and virtual discussions with each person, depending on their preference. The goal is to support people in making the best living decision for them.

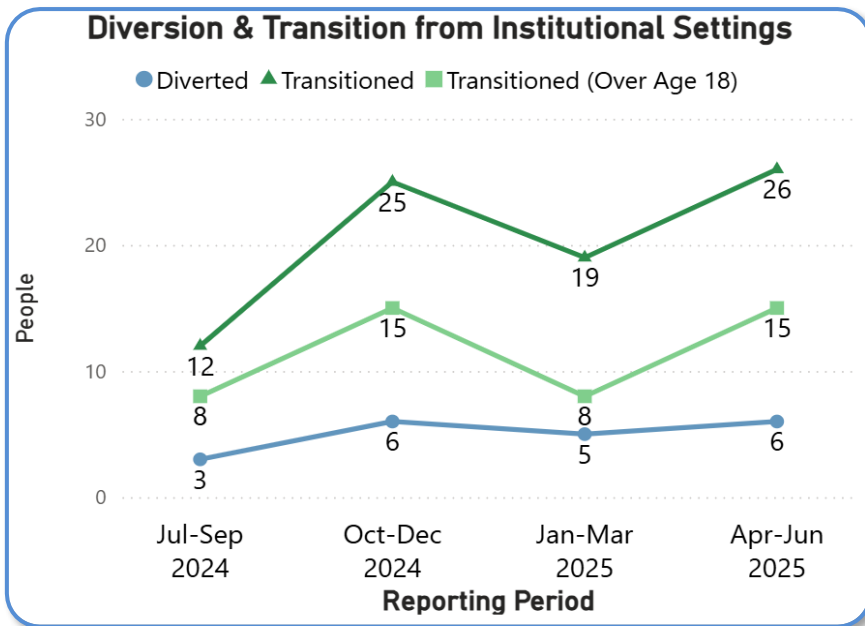
Transition & Housing



Transition Planning

- In-Reach education allows people with disabilities to make an informed choice about where they want to live and receive services.
- The goal of transition planning is to make sure the person has the supports they need to move into the community living option of their choice, if it is a good fit.
- In Fiscal Year 2025, the **Department recorded 82 transitions!** This exceeds the benchmark of 78 transitions needed from July 2024 – June 2025.

Transition & Housing

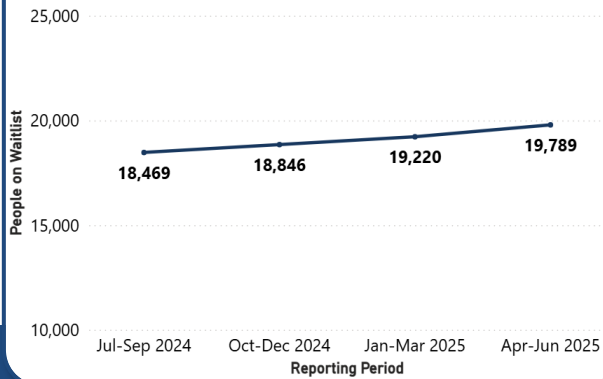


Diversion

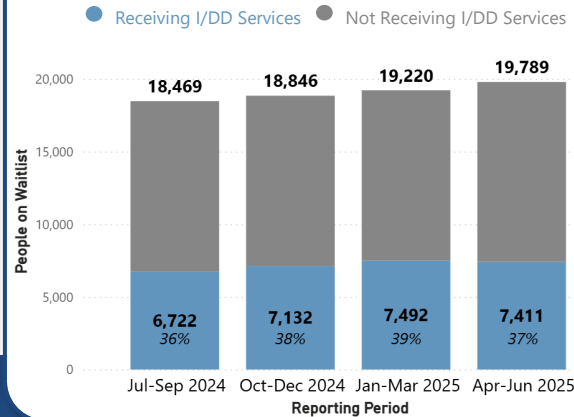
- Diversion involves identifying people with I/DD who may be at risk of moving into an institution and **providing them with extra supports and services** to help them stay in their own homes and neighborhoods.
- Diversion means making sure every person can get important services like Medicaid Home and Community-Based Services (HCBS), special waivers, or state programs. These supports help them stay independent and avoid moving into an institution.

Services Overview

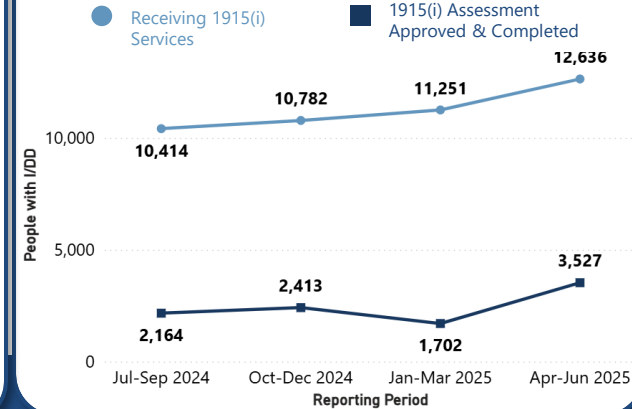
Total Innovations Waiver Waitlist Count



Innovations Waiver Waitlist – I/DD



1915(i) Services

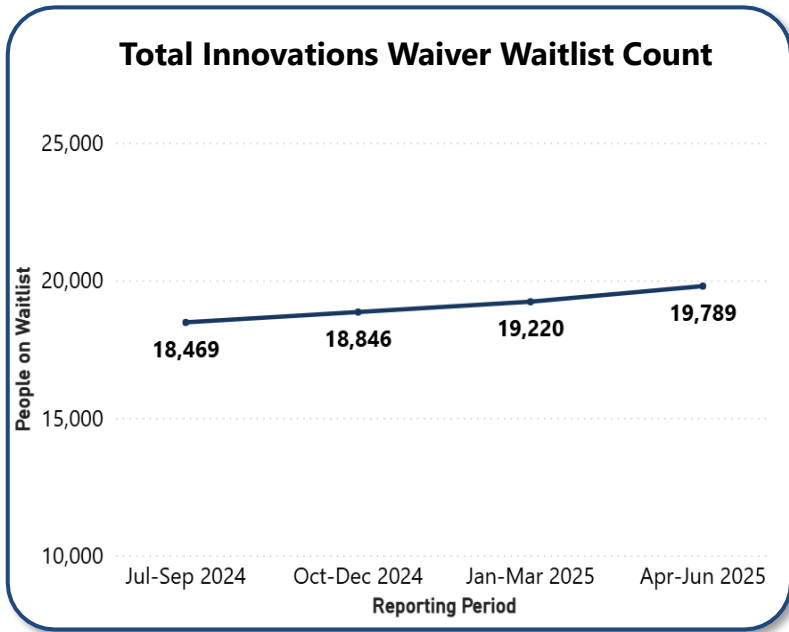


- The Innovations Waiver Waitlist continues to grow, reflecting **increasing awareness and need for services among the I/DD community.**

- The number of people receiving I/DD services continues to grow relative to growth of the Innovations Waiver - showing that while the **demand for services increases, access is also expanding.**

- People with approved 1915(i) assessments are new each reporting period, but those receiving 1915(i) services may overlap across periods.

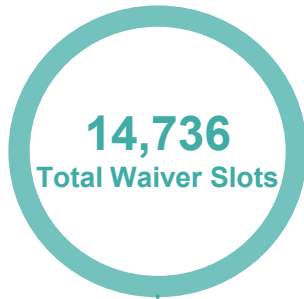
Services



Innovations Waiver

- The Innovations Waiver gives people with I/DD the most services and support at home, in the community, and at work. It helps them live and do well in community settings. The waiver offers person-centered plans made to fit each person’s needs.
- Unfortunately, there are not enough waiver slots to allow for everyone, which leads to a growing waitlist.
- Values for Oct – Dec 2024 and Jan – Mar 2025 have been updated to reflect more complete data identified during routine data checks.

Innovations Waiver



Active Slots	14,089
Remaining Reserve Slots	14
Inactive Assigned Slots	633
<u>Total Waiver Slots</u>	<u>14,736</u>

Inactive Assigned Slots - Some Reasons Slots May be Assigned to Member but Inactive:



At Beginning of Slot Assignment Process
(Can last up to 90 days)



Disability Determination In Progress



Deceased
(Slot Not Yet Reassigned)

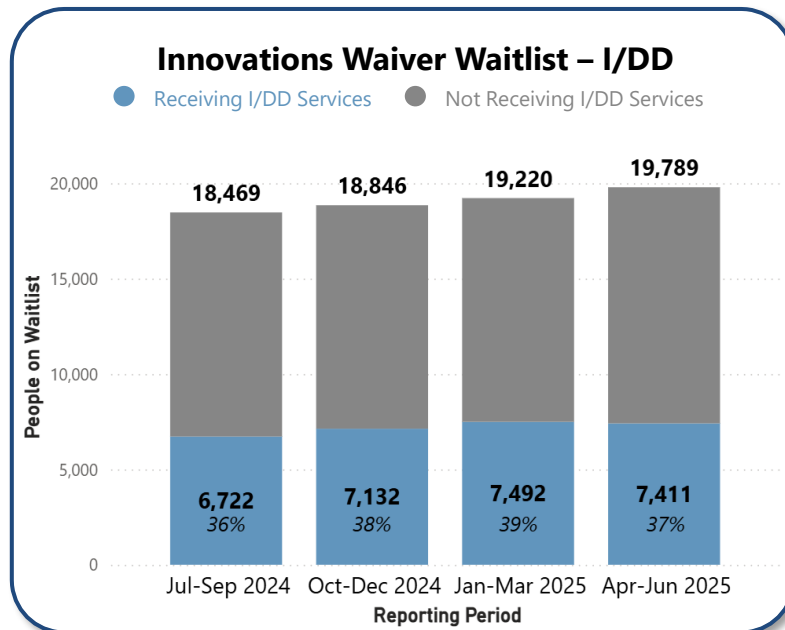


In Institutional Setting
(Assigned Slot Temporarily Held at Member's Request)



Inpatient and Transitioning

Services

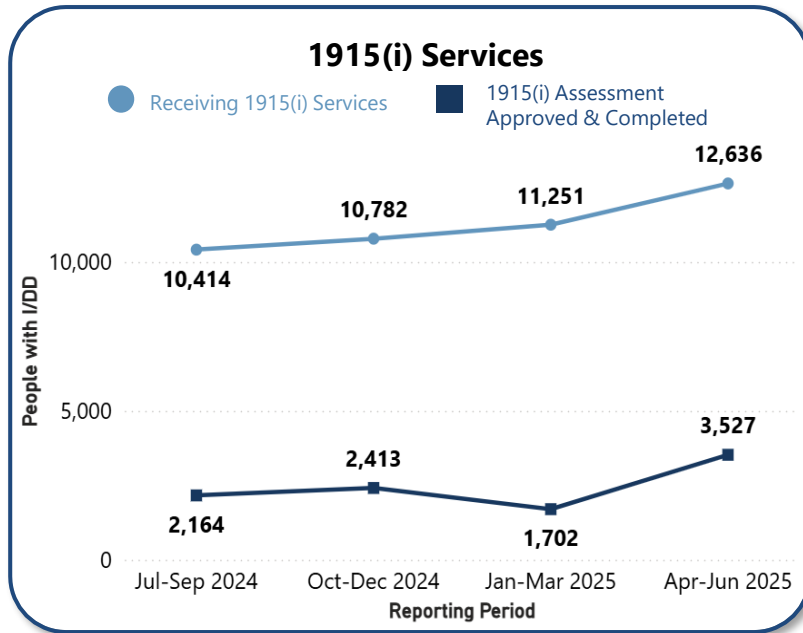


I/DD Services

- Like the Innovations Waiver, I/DD services in North Carolina provide for people with I/DD to help them live independently and fully in their communities. This can help improve quality of life and reduce reliance on institutional care.
- Approximately **one third of people** on the waitlist are currently receiving I/DD services outside of the Innovations Waiver while they wait on a slot.

Services

1915(i) Services



1915(i) Services Include:*

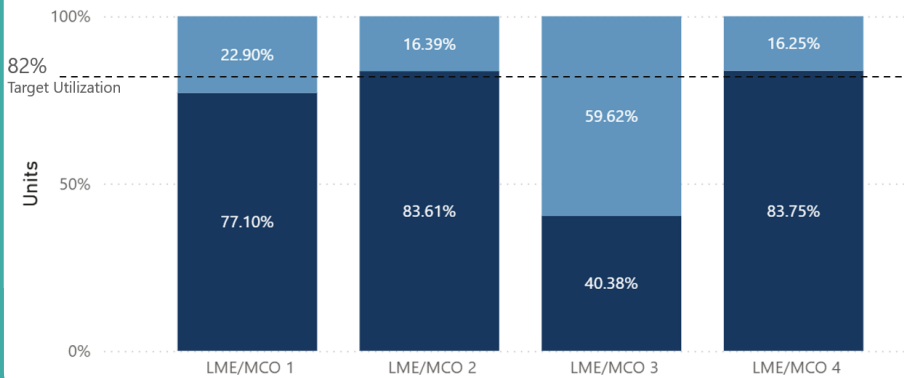
1. Community Living and Supports
2. Supported Employment
3. Respite
4. Community Transition

*1915(i) Services do **NOT** include Tailored Care Management (TCM).

- 1915(i) is a Medicaid program in North Carolina that helps people with I/DD, mental health needs, substance use disorders, or traumatic brain injuries get care at home or in their communities.
- To get started, a person contacts their LME/MCO to request an assessment, which is completed within 90 days. After this, a personalized support plan is created for each person.
- The program gives people important services that can help with all their needs. It also supports people who need extra help while they are on the Innovations Waiver waitlist.

Direct Support Professional (DSP) Workforce Overview

April – June 2025
Percentage of Units Billed vs Authorized
 ● Units Billed ● Units Authorized But Not Billed



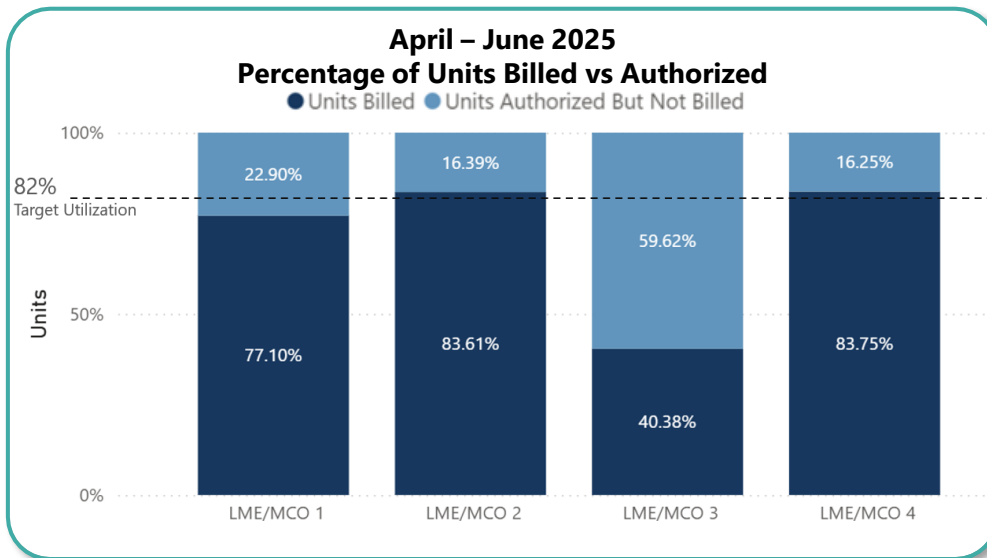
July 2024 – June 2025
Percentage of Units Billed vs Authorized
 ● Units Billed ● Units Authorized But Not Billed



- **Utilization rates** represent authorized Community Living and Support (CLS) services provided to people on the **Innovations Waiver**.
- The Department is looking into utilization rate data quality and taking necessary steps to ensure all LME/MCOs report this information in the same way.

- The annual data for Fiscal Year 2025 is affected by data quality concerns during the first two quarters of reporting (July – Sept and Oct – Dec 2024).
- Significant improvements in data quality have been seen, and the Department is confident improved reporting will continue into Fiscal Year 2026.

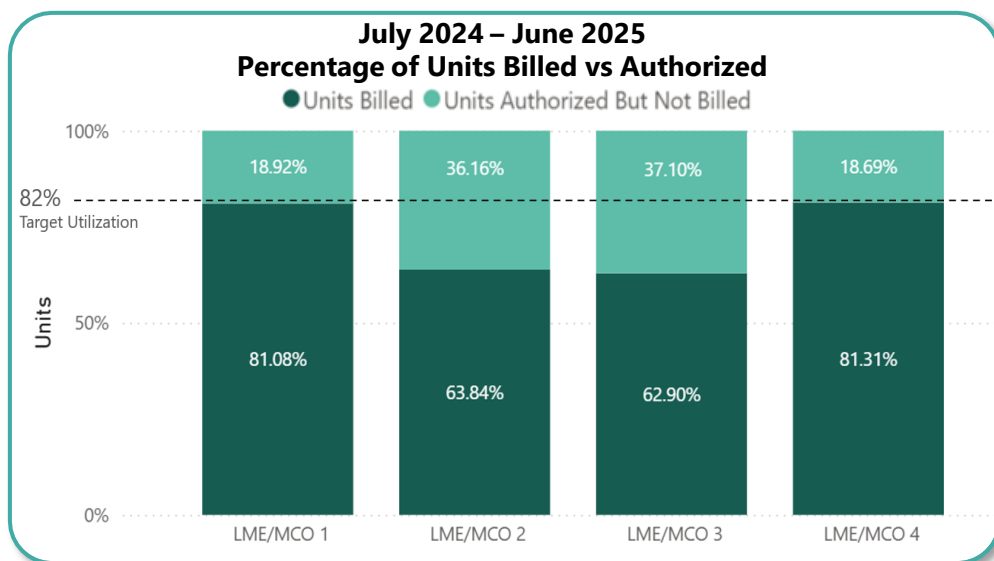
DSP Workforce



Direct Support Professionals

- **Direct Support Professionals (DSPs)** help people with I/DD. They give support with things like getting dressed, brushing teeth, taking medicine, learning everyday skills, and joining activities in the community.
- **Authorized units** refer to the specific amount of service time. Time is counted in 15-minute blocks, and this is written in each person's care plan.
- Each service provided by a DSP is billed in units (also in 15-minute blocks).

DSP Workforce



CLS Staffing

- North Carolina currently does not have enough **Direct Support Professionals (DSPs)**. This makes it harder for people with I/DD to get the help they need at home and in their communities.
- To give good care, **Community Living and Support (CLS)** services need DSPs who are well-trained, supported, and have clear paths to grow in their jobs. This helps make sure people with I/DD get steady and high-quality support.
- Utilization rates represent CLS services provided to individuals on the **Innovations Waiver**.