THE TRUE PROFESSIONAL™

The Professionalism Imperative: Improving Outcomes and Strengthening Stewardship

A Research-based Model for Services for Adults with Intellectual and Developmental Disabilities ("IDD")

June 2026

The True Professional is a 501(c)(3) nonprofit corporation whose mission is to elevate the quality of services for adults with Intellectual and Developmental Disabilities.

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I. Executive Summary

A. Adults with Intellectual and Developmental Disabilities ("IDD") Need Higher Quality Outcomes

Adults with IDD experience significant health disparities, poorer access to care, reduced life expectancy, and more expensive healthcare compared with the general population. This disparity underscores their need for service models that enhance experiences, independence, healthy living, and social opportunities. By improving the quality of services, adults receiving services will experience improved quality of life, health outcomes, independence, community inclusion and dignity.

B. Stewardship of Public Resources Must be Strengthened

Fraud, Waste, and Abuse ("FWA") in health and human services provision must be prevented, detected and penalized to protect public funds and preserve the integrity of systems serving vulnerable populations. Federal data show that improper payments remain a major Medicaid integrity concern, and DOJ False Claims Act recoveries continue to be driven heavily by provider fraud. Currently, recovered funds are rarely reinvested directly into affected programs.

C. The Professionalism Imperative: Sustaining Professionalism through a Dedicated Function

Professionalism is the consistent application of ethical behavior, competence, accountability, communication, and client-centered practices while meeting organizational standards. As such, it is core to the provision of quality human services. Increasing professionalism by staff and management supporting adults with IDD offers a pathway to both increase service quality and prevent and detect FWA. Service delivery is typically evaluated based on compliance with mandated safety requirements rather than adherence to quality standards and attainment of meaningful outcomes.

Current professional development models rely heavily on limited online training due to cost constraints. Because professionalism is fundamentally behavioral, it is best developed through live, in-person workshops followed up by ongoing structured opportunities for modeling, skill practice, and coaching between experienced mentors and support staff. Currently, there is a misalignment between operating models and what is needed for providers to achieve their goals.

Additionally, organizations with strong professional cultures are less likely to engage in fraudulent billing, service failures, documentation deficiencies, and other forms of misconduct. This is due to the fact that professionalism influences the behaviors, expectations, and accountability systems that shape service delivery. Higher levels of professionalism create an environment in which misconduct is both less likely to occur and more likely to be identified when it does.

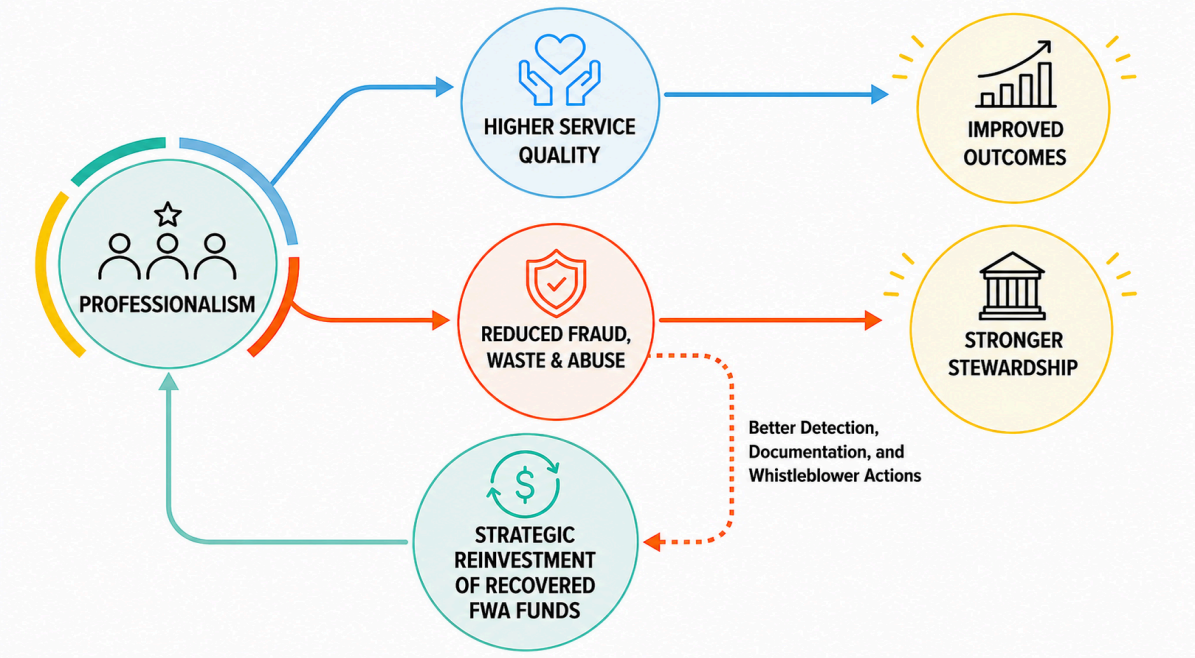
The Professionalism Imperative is a *call to action* to integrate professionalism development into provider organizations through a dedicated, permanent function that is focused on Excellence in Supports and Outcomes ("ESO").

D. Directing Recoveries from FWA to Enhance Professionalism

To fund this important and impactful initiative, recovered FWA funds can be allocated back into provider models that promote and sustain professionalism. This creates a cycle in which outcomes for adults with IDD are improved, stewardship of public funds is strengthened, and the entire system becomes more sustainable over time.

The Professionalism Imperative

How Professionalism Creates a Self-Sustaining Cycle for Improved Outcomes and Stronger Stewardship of Public Funds



When professionalism leads:

1. quality improves,
2. FWA decreases, and
3. recovered funds are returned to the vulnerable populations for which they were originally intended.

The Professionalism Imperative creates a **self-sustaining model** that delivers better outcomes and stronger stewardship of public resources.

II. Adults with IDD Need Higher Quality Outcomes

Prioritizing professionalism as an imperative leads to improved service quality and positive outcomes. Organizations that foster and prioritize professionalism deliver more effective, dependable, and client-focused services, while achieving stronger organizational performance and stakeholder trust.[1]

A. High Quality Services Improve Health and Quality of Life Outcome

Individuals with IDD deserve to be treated with dignity and respect and lead lives that are rich in experience, with as much independence as possible.[2] As these individuals reach adulthood, they and their families often rely on residential providers for critical services that determine their quality of life and physical and mental health outcomes.

Providing high quality services with positive outcomes in residential services, however, is challenging. Service providers face numerous obstacles, such as complex compliance requirements, an underdeveloped and undercompensated workforce, lack of quality outcome tracking, and misaligned staff support models. These all undermine even the best efforts to provide quality services. The result is that most adults with IDD do not receive the level of services they need to thrive and may, in fact, regress or suffer neglect or abuse. Indeed, ineffective supervision, management intimidation, and a lack of senior leadership involvement are directly associated with *increased abuse* in group residential settings.[3]

Meaningful engagement is a major determinant of health and quality of life outcomes for adults with IDD. Adults with IDD experience significantly poorer health outcomes and substantially shorter life expectancies than the general population, often due to higher rates of chronic illness, barriers to healthcare access, and preventable health complications.[4] Increasing engagement can alleviate some of these disparities by improving physical health, mental well-being, adaptive functioning, independence, and overall quality of life. Active participation in social relationships, community activities, and structured cognitive programs is strongly associated with better outcomes for adults with IDD.[5] Indeed, it is well established that:

Mentally stimulating activities improve cognition.[6]	Physical activity boosts brain and overall health.[7]	Socialization increases the quality of life.[8]	Recreation leads to increased emotional wellbeing.[9]

Providing high quality services will increase mental, emotional, and physical health as well as quality of life for individuals with IDD.

B. High Quality Services Lower Lifetime Healthcare Costs

Improving the health and quality of life of adults with IDD significantly reduces lifetime healthcare costs and government healthcare expenditures. Adults with IDD experience higher rates of chronic illness, avoidable medical complications, emergency department utilization, and institutional care than the general population, making them among the highest-cost populations served by Medicaid. Individuals with better health outcomes, stronger daily supports, and greater overall stability require fewer high-cost medical interventions over time.[10]

Improvements in quality of life contribute directly to these cost reductions. Adults with IDD who experience greater autonomy, stronger social supports, improved emotional well-being, and higher levels of community participation are more likely to maintain stable health and independence, reducing reliance on expensive healthcare services. Poor health outcomes and unmanaged chronic conditions are associated with substantially higher Medicaid expenditures, while healthier individuals with stronger support systems require fewer costly interventions throughout adulthood.[11]

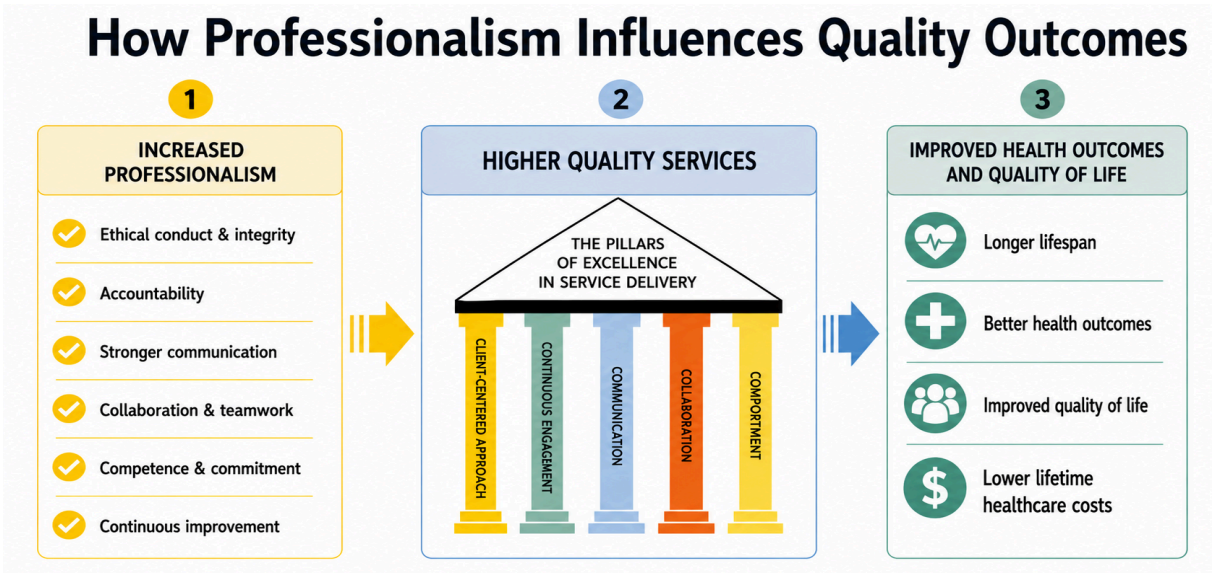
Investments in high quality services generate substantial long-term savings by reducing lifetime healthcare utilization and reliance on high-cost medical care.

C. The Professionalism Imperative: Professionalism is the Gateway to Quality

Professionalism is increasingly recognized as a critical driver of high quality services across health-related and professional service industries. Research shows that organizations with strong professional cultures consistently achieve better outcomes, more effective communication, stronger client relationships, and more reliable service delivery. Studies in health-related services have linked professionalism to improved teamwork, collaboration, trust, organizational effectiveness, and operational excellence, while leaders of high-performing organizations identify professionalism as a key factor in client-centered services and continuous improvement.[12]

Professionalism improves quality by strengthening accountability, ethical conduct, coordination, and execution. Studies have found that higher levels of professionalism are associated with stronger communication and more effective service delivery systems, while broader organizational research shows that professional workplace cultures consistently improve employee accountability, customer satisfaction, and public trust.[13]

The graphic below sets forth the mechanisms through which professionalism influences outcomes.

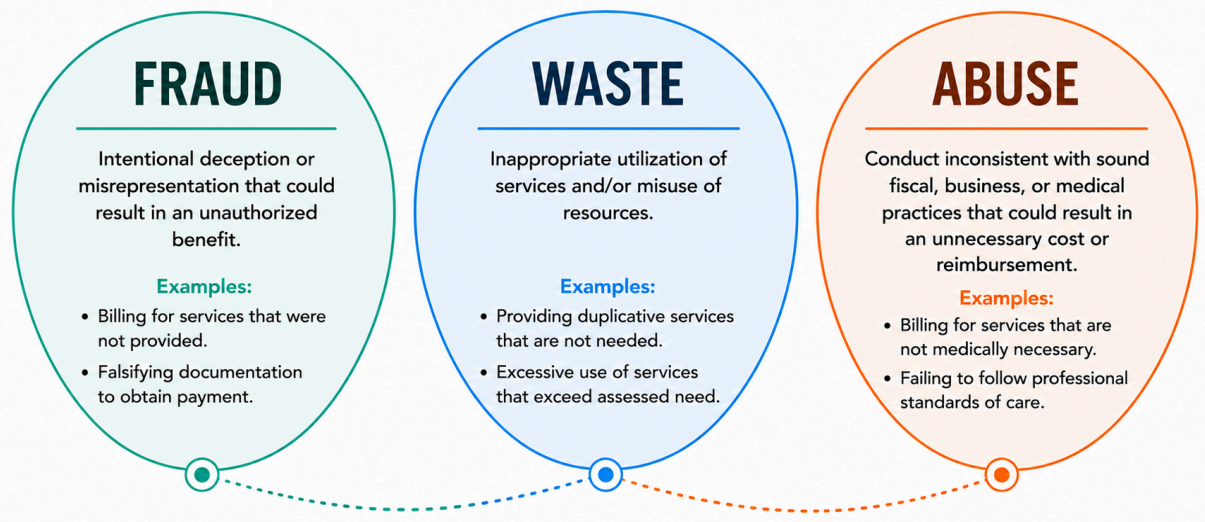


Professionalism elevates service quality, improves outcomes, and lowers lifetime healthcare costs for adults with IDD.

III. Stewardship of Public Resources Must be Strengthened

A. An Overview of FWA and its Costs

FWA costs the federal government hundreds of billions of dollars annually, with federal HHS programs among the most affected systems. The graphic below sets forth definitions and common examples of FWA in IDD services: [14]



In FY2024, there were approximately $162 billion in improper federal payments and more than $31 billion in improper Medicaid payments alone.[15] In FY2025, the Department of Justice recovered a record $6.8 billion under the False Claims Act, including approximately $5.7 billion tied to healthcare-related fraud and abuse.[16] These cases and figures do not specifically address the unnecessarily high healthcare costs for adults with IDD due to a lack of quality services, which further contribute to the problem.

This issue is especially critical as it relates to services for vulnerable populations. In 2026, federal prosecutors charged 15 individuals in the largest autism services fraud case ever prosecuted, alleging that certain Minnesota autism service providers billed $46.6 million in fraudulent claims and received $21 million from Medicaid for services that were allegedly unnecessary, inflated, or never provided.[17] Earlier in the year, in California, federal authorities announced prosecutions involving sham hospice and home-based care providers accused of generating more than $50 million in fraudulent billings through false patient enrollments and ineligible hospice claims, highlighting significant vulnerabilities in home-based healthcare reimbursement systems.[18]

Because waste is inherently more difficult to identify, quantify and prove than fraud or abuse, these figures likely underestimate the full extent of improper payments relating thereto. Waste frequently results from inefficiency, poor quality, inadequate training, weak supervision, preventable adverse outcomes, or services that technically comply with program requirements but fail to deliver meaningful value. For example, failure to provide timely primary and preventive care leads to avoidable emergency department visits, preventable hospitalizations, and poorly managed chronic disease that cost the U.S. health system an estimated $30 billion annually. As a result, many forms of waste do not trigger investigations, enforcement actions, or recoveries and therefore are not captured in traditional program-integrity statistics.[19]

At the core, FWA are professionalism issues. Through internalized ethical norms, stronger documentation and transparency, and a culture of accountability and continuous improvement, organizations with higher levels of professionalism experience few instances of impropriety, and when they do occur, they are easier to detect and recover.

Specific Example: the Worthless Services Doctrine

The False Claims Act's "**worthless services**" **doctrine** recognizes that services so deficient that they are "the equivalent of no performance at all" may constitute fraud. This is particularly relevant in Medicaid-funded services for IDD, where reimbursement is legally tied to habilitation, skill development, community integration, informed choice, and person-centered supports under the HCBS Settings Rule (42 C.F.R. § 441.301(c)(4)). As the Government increasingly pursues FWA, **providers may face liability when services documented as developmental or habilitative fail to deliver these outcomes.**

B. The Professionalism Imperative: Professionalism is the Key to Reducing FWA

The Government increasingly recognizes that FWA are professionalism challenges. Organizations with strong professional cultures establish clear expectations for ethical behavior, accountability, communication, and performance. These environments reduce the likelihood of misconduct while increasing the likelihood that concerns will be identified, reported, and addressed. As a result, professionalism serves as an important organizational safeguard that supports both service quality and program integrity.[20]

Professionalism, in particular, drives the elimination of waste. Waste frequently results from avoidable administrative inefficiencies, inadequate job preparedness, weak supervision, or services that meet compliance requirements but fail to produce meaningful outcomes – in other words, a lack of professionalism.[21] Efforts to increase professionalism will naturally drive down waste and improve the efficiency as well as effectiveness of service providers.

Federal Medicaid initiatives increasingly recognize these connections between professionalism and FWA reduction. The Centers for Medicare & Medicaid Services has identified workforce accountability, transparency, performance monitoring, and continuous quality improvement as core elements of effective program integrity and stewardship of public resources.[22] The inverse relationship between professionalism and FWA has become particularly important as regulators and courts have expanded the application of the False Claims Act's "worthless services" doctrine. The impact of professionalism on FWA is set forth in the graphic below:

Professionalism serves not only as a driver of higher-quality services but also as a proactive strategy for reducing FWA and legal risk

IV. The Professionalism Imperative: Sustaining Professionalism through a Dedicated Function

A. Overview of the Excellence in Supports and Outcomes ("ESO") Function

The ESO function was developed based on cross-industry research that reveals that elevating professionalism - and in turn, service quality and client outcomes - requires an organization to do the following:

1. Create an Infrastructure and Invest in Continuous Professional Development
2. Provide Ongoing Hands-On Development Opportunities
3. Equip Teams with Effective and Accessible Tools
4. Develop Leaders Who Prioritize Quality
5. Shape Middle Management Practice to Enforce Standards and Develop Accountability

ESO identifies a target operating model that defines the service delivery model, organizational structure and governance, policies, and procedures needed to:

1. Continuously prioritize, assess, and improve quality in an effective and efficient manner, while maintaining compliance standards.
2. Create a culture in which consistent hands-on professional development and assessment is prioritized and sustainably elevates professionalism and the quality of support to residents.
3. Ensure that every employee embraces the Pillars of Excellence in Service Delivery (referred to as the 5Cs™), as set forth below, and is accountable to their implementation.

- **Client-Centered Approach** - always doing what is in the best interest for the client
- **Continuous Engagement** - always being present
- **Communication** - actively listening, effectively sharing information, and conveying the right message
- **Collaboration** - working with others towards a common purpose
- **Comportment** - presenting yourself as a professional

Critical to the success of the ESO function is ongoing observation in situ, regular data collection and assessment, and hand over hand modeling to professionally develop frontline staff delivering services.

B. The Challenge to Implementing ESO: Available Funding

A primary barrier to implementing an ESO function is that Medicaid reimbursement structures generally compensate providers for delivering services directly to beneficiaries rather than for maintaining quality improvement and workforce development infrastructures. Consequently, providers often struggle to fund activities such as professional development, outcome measurement, and continuous quality improvement despite their importance to service quality, and thus achieving sustained positive outcomes.

This creates a structural misalignment between what is funded and what is required to deliver high-quality services. While policymakers increasingly emphasize client-centered outcomes, the infrastructure necessary to achieve those goals often lacks financial support. Without sustainable funding mechanisms for quality-focused functions such as ESO, providers lack the resources necessary to build and maintain the systems that make high quality service delivery achievable.

V. Directing Recoveries from FWA to Enhance Professionalism

A. Current Selected Models for Recovering and Reinvesting Proceeds from FWA

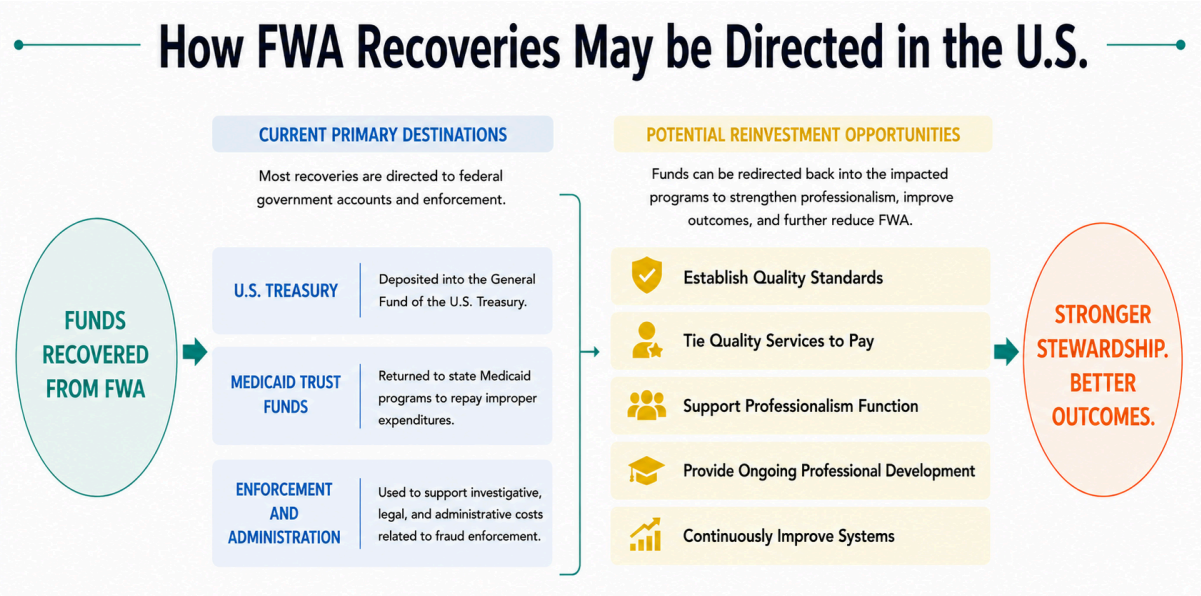
Federal HHS programs rely on three primary mechanisms to recover losses from FWA:

1. **Civil Recovery:** Recovery of improperly paid funds to restore government funds and deter future misconduct.[23]
2. **Criminal Restitution and Forfeiture:** Recovery pursued through criminal prosecution of intentional fraud schemes, which may include fines, asset forfeiture, and other penalties.[24]
3. **False Claims Act ("FCA"):** A uniquely powerful enforcement tool that bridges traditional civil and criminal approaches to target fraudulent conduct and authorize damages and statutory penalties. The civil FCA also allows private whistleblowers to bring actions on behalf of the government and share in recoveries, significantly expanding enforcement capacity.[25] The criminal FCA authorizes prosecution for the knowing submission of false or fictitious claims that can result in incarceration and is frequently applied alongside the separate Forfeiture of Fraudulent Claims Act.

Once funds are recovered, how they are directed depends on how the recoveries were obtained. When a provider is found to have received an **overpayment**, the recovered funds are effectively credited against Medicaid expenditures and shared between the federal government and the state.[26] Under the **False Claims Act**, settlement proceeds may include compensatory damages, penalties, relator (whistleblower) awards, state shares, and federal shares.[27] In **criminal fraud** cases, courts may order restitution. When Medicaid programs are the victim, restitution is generally paid back to the affected government entity.[28] Finally, some recoveries indirectly support future fraud prevention through mechanisms such as the **Health Care Fraud and Abuse Control Program,** which receives dedicated funding to support investigations, audits, enforcement, and program integrity activities.[29]

These models do not, however, include a federal statute, regulation, or specialized program that designates recovered funds to be used for quality improvement. Indeed, there is a critical need for a **program improvement reinvestment**, in which recovered funds are directed toward strengthening the underlying systems affected by FWA. This model reflects a growing view that recoveries can serve not only to replace lost dollars but also to address the systemic weaknesses that allowed losses to occur in the first place.

The graphic below sets forth how FWA recoveries may be directed:



Recovered funds are typically credited back to the federal program or trust fund that incurred the loss or reinvested in oversight and enforcement. There is, however, precedent to use funds to directly strengthen the underlying systems affected by FWA.

B. The Professionalism Imperative: How Professionalism Creates a Self-Sustaining Cycle for Improved Outcomes and Stronger Stewardship of Public Funds

The evidence presented throughout this paper demonstrates a clear and compelling relationship between professionalism, service quality, and the prevention of FWA. While enforcement mechanisms remain necessary to identify and address misconduct, lasting improvements in program integrity require a broader strategy—one that prioritizes the quality of services delivered to vulnerable populations and strengthens the professionalism of the organizations entrusted to serve them.

For individuals with IDD, quality service and desired outcomes are the foundation upon which health, independence, community integration, and long-term well-being are built. Yet current reimbursement systems largely focus on compliance with administrative requirements without also focusing on the quality and effectiveness of services delivered.[30] Thus, financial considerations incentivize compliance management and not quality services and outcomes. Providers receive payment regardless of whether services meaningfully improve outcomes for the individuals they support. To address this gap, policymakers should pursue reforms that elevate service quality as a central component of accountability, while creating incentives for organizations to invest in professionalism and continuous improvement.

Accordingly, we recommend the following:

1. **Establish and Require Adherence to Service Quality Standards**
   Federal and state governments should develop and implement meaningful service quality standards for programs serving adults with IDD. These standards should extend beyond process based compliance measures and evaluate whether services achieve their intended outcomes, including improvements in health, independence, community participation, informed choice, and quality of life. Reimbursement should increasingly be tied to adherence to these standards and the delivery of demonstrably high-quality services.

2. **Strategically Reinvest FWA Recoveries to Promote Professionalism Enhancements**
   Professionalism is a foundational driver of service quality and a powerful safeguard against FWA. When funds are recovered through fraud investigations, civil settlements, restitution, or other enforcement actions, policymakers should prioritize reinvestment strategies that promote professionalism at agencies that serve vulnerable populations. These professionalism building efforts should be focused on sustainable solutions that improve the operating model, such as creating a permanent, dedicated ESO function. By investing in professionalism, organizations can simultaneously improve outcomes for the individuals they support and reduce one set of the conditions that enable FWA to occur.

   By aligning quality expectations, professional development, and reinvestment strategies, policymakers can create a self-sustaining system in which better services produce better outcomes, stronger organizations reduce fraud risk, and recovered funds are used to further strengthen the systems designed to support the most vulnerable individuals. Such an approach moves beyond a reactive enforcement model and toward a sustainable framework that simultaneously advances accountability, quality, and public trust.

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