



ADVANCING TECHNOLOGY ACCESS FOR PEOPLE WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES

*The 2024 National
Technology Solutions 2.0
Survey of IDD Service and
Supports Providers*



State of the States
In Intellectual and Developmental Disabilities

KU CENTER ON
DISABILITIES

ANCOR

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Executive Summary

2024 National Technology Solutions Provider Survey: Provider-Driven Innovation

The 2024 National Technology Solutions Provider Survey offers vital insights into how IDD service providers are spearheading innovation nationwide. It highlights significant progress through the COVID-19 pandemic while transparently addressing the persistent hurdles they face.

Key Takeaways

- **Applications of Technology as a Direct Workforce Shortage Solution** – 84% of ANCOR members believe technology could be a viable solution to address long-term challenges in the workforce.
- **Demonstrated ROI** – The ability of providers to demonstrate cost savings or increased efficiencies from technology investments rose from 53% in 2021 to 85% in 2024.
- **Information Gaps in Technology Funding Authorities** – State DD agencies identify a diversified blend of funding authorities for technology solutions, but providers predominantly rely upon three public funding authorities.
- **Evolving Technology Solution Adoption** - While traditional Medicaid waiver service definitions continue to guide technology investments (e.g., 65% use video conferencing, 41% use electronic/remote monitoring), providers are increasingly investing independent resources into mainstream tools (computers, tablets, smartphones) and specialized innovations like health sensors and smart home technologies, driven by both demand and transformative potential.
- **Motivation to Embrace Cultures of Innovation** - 85% of providers are seeking technical assistance in conceptualizing, drafting, or advancing internal technology-related training, policies, or initiatives.
- **Technology First Systems Change** – 64% of providers seek active engagement in Technology First Systems Change benchmarks relating to technology impact measurements and needs evaluations.

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Exploration and Expansion of Technology Solutions: A vital and immediate response to the global pandemic

On March 1, 2020, the President of the United States declared a national emergency in response to the global COVID-19 pandemic and its domestic consequences. Beginning in January 2020, federal and state governments issued emergency declarations, imposed travel restrictions, implemented social distancing protocols, limited workplace operations, and established public health surveillance measures. The disruption in everyday living for Americans was profound.

For individuals with intellectual and developmental disabilities (IDD) and their families, many of whom rely on in-person direct support professionals to assist with activities of daily living, the disruption was catastrophic. Reductions in face-to-face services, workforce instability, limited-service alternatives, and scarce resources left many families navigating significant gaps in life-sustaining care.

In response to the emergency, Congress enacted three major relief packages: the Coronavirus Aid, Relief, and Economic Security Act (CARES Act), the Consolidated Appropriations Act, 2021, and the American Rescue Plan Act of 2021. Collectively, these measures infused unprecedented federal resources into state systems of care. Beyond fiscal stabilization, this influx of funding created a policy and operational environment in which states, provider organizations, and practitioners were compelled—and enabled—to reexamine traditional service delivery models and explore innovative strategies to safeguard the health and welfare of the individuals they serve.

The 2024 National Technology Solutions 2.0 Survey of IDD Service and Supports Providers documents the service transformations catalyzed by the pandemic, highlighting a marked shift toward technology-enabled solutions and digitally-supported models of care.

Data collected through the 2021 and 2024 administrations of the National Technology Solutions 2.0 Survey of IDD Service and Supports Providers revealed trends over time in both investments and divestitures, as well as emergent and unanticipated innovations nationwide. By examining these data longitudinally, the study captures dynamic shifts in policy, funding allocation, and service delivery practices across states.

Longitudinal analysis offers distinct methodological advantages for understanding responses to economic and social shocks. Unlike other methodological approaches, it enables the examination of change over time, identification of sustained versus temporary adaptations, and assessment of how systems recalibrate in the wake of disruption. In the context of the COVID-19 pandemic, this approach provides critical insight into how IDD service systems absorbed federal investments, restructured supports, and institutionalized technology-leveraged practices.

A National Data Repository for Examining Technology Access for People with IDD and Their Families

In 2007, the State of the States in Intellectual and Developmental Disabilities—a federally designated Project of National Significance—initiated a focused examination of state-reported expenditures on technology solutions for individuals with intellectual and developmental disabilities (IDD) and their families. This analysis was embedded within its ongoing longitudinal study of state developmental disability agency financing and service delivery systems.

In fiscal year 2023, the project reported that less than one percent of the \$104 billion invested nationally in IDD supports and services was allocated to technology solutions (Tanis et al., 2025). This finding underscores the persistent underinvestment in technology-related supports despite decades of policy evolution and rapid technological advancement. Subsequent national and state-level investigations—triangulating data across stakeholder groups, service sectors, and policy domains—have further illuminated the systemic, structural, and social barriers limiting technology access for people with IDD. These analyses have informed data-driven strategic planning efforts nationwide and guided systems change models.



The present report documents the evolution of technology solution adoption and investment among IDD service providers between 2021 and 2024. Comparative analyses were conducted in collaboration with the National Association of State Directors of Developmental Disability Services (NASDDDS), within individual states, and across consumer populations. Through the intentional development of a national longitudinal database on technology solutions, the field is better positioned to challenge prevailing assumptions, quantify impact, and inform forward-looking policy and investment strategies.

National Survey Participation

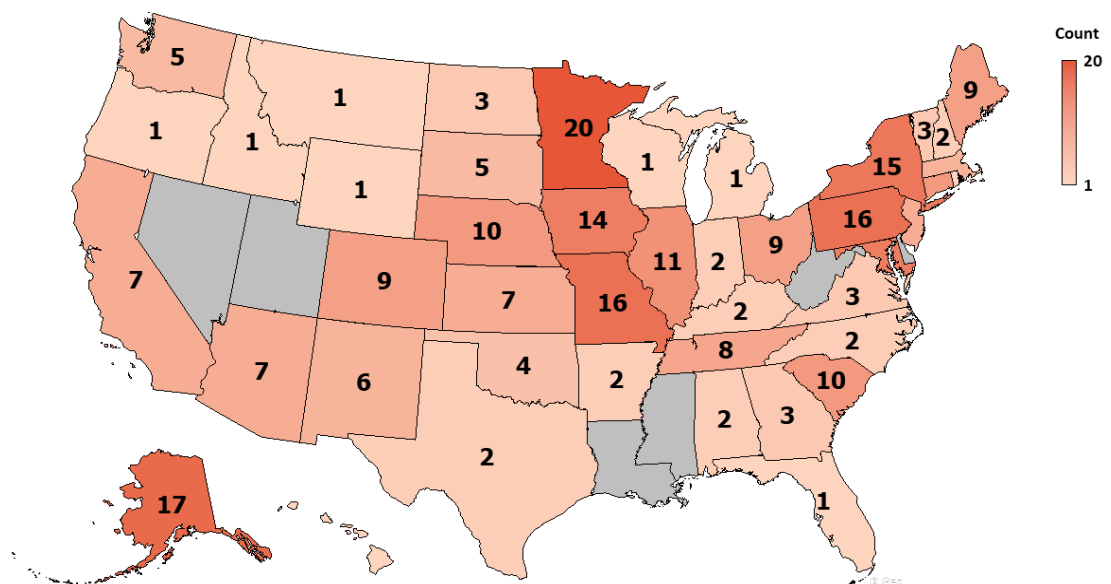


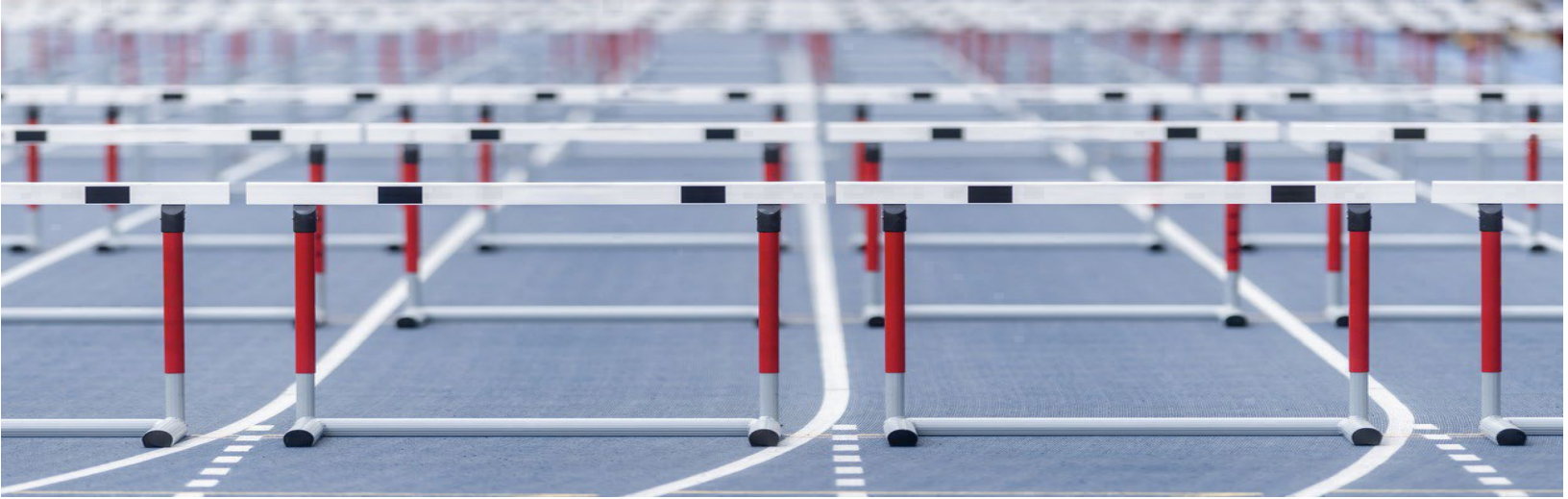
The American Network of Community Options and Resources (ANCOR), in collaboration with the State of the States in Intellectual and Developmental Disabilities Project of National Significance at the University of Kansas, launched the second national technology survey in fall 2024. The survey was designed to assess promising practices and strategic approaches to expanding technology use among providers of services for individuals with intellectual and developmental disabilities (IDD), as well as to examine the evolving access landscape shaped by flexibilities and funding introduced during the COVID-19 pandemic.

The digital survey was completed by two hundred and eighty-three IDD service providers (N = 283) representing forty-five states. Minnesota had the highest level of provider participation, with 20 provider responses (see Figure 1). The sample included organizations operating in single and multiple states and reflected a range of organizational sizes, enhancing the diversity of system perspectives represented. The overall response rate was approximately 11 percent of total ANCOR membership.

Providers from six states—Delaware, Louisiana, Mississippi, Nevada, Utah, and West Virginia—were not represented in the respondent pool. While national in scope, these geographic gaps should be considered when interpreting findings and assessing generalizability.

Figure 1. Provider Participation Across the Nation





Barriers to Technology Solutions

Historically, providers of IDD services and supports have identified several persistent barriers to the adoption and integration of technology solutions, including limited financial resources, privacy and security concerns, attitudinal resistance, and gaps in agency leadership. Between 2021 and 2024, the five most frequently cited barriers to technology access remained consistent nationwide:

1. Financial resources (55.8% in 2024)
2. Reimbursement of services (54.7% in 2024)
3. Knowledge of available and emerging technologies (50.2% in 2024)
4. Training in available and emerging technologies (43.8% in 2024)
5. Attitudinal barriers (30.0% in 2024)

Financial constraints continue to be identified as the primary impediment to technology access by consumers, family members, providers, and state agencies. However, fiscal limitations do not operate in isolation. Structural factors—including the disproportionate rates of poverty among people with disabilities, constrained state and federal budgets, limited longitudinal evidence demonstrating return on investment, and technology ineptitude—compound the challenges and inhibit system-level adoption.

At the same time, underutilized funding infrastructure exists. State Assistive Technology (AT) Act programs, authorized under the 21st Century Assistive Technology Act, provide statewide financing guidance, device loan programs, and equipment reutilization initiatives designed to increase access to assistive technology. National coordination and technical assistance are supported through the Assistive Technology Act Technical Assistance and Training Center (AT3 Center).

Research conducted by the University of Kansas examining available federal and state fiscal mechanisms for technology solutions suggests that the central barrier may not be the absence of funding streams, but rather limited awareness of, and capacity to navigate, existing financing pathways. This distinction has significant policy implications; Improving access may depend less on creating new funding authorities and more on strengthening knowledge translation, technical assistance, and cross-system coordination.

Funding Authorities

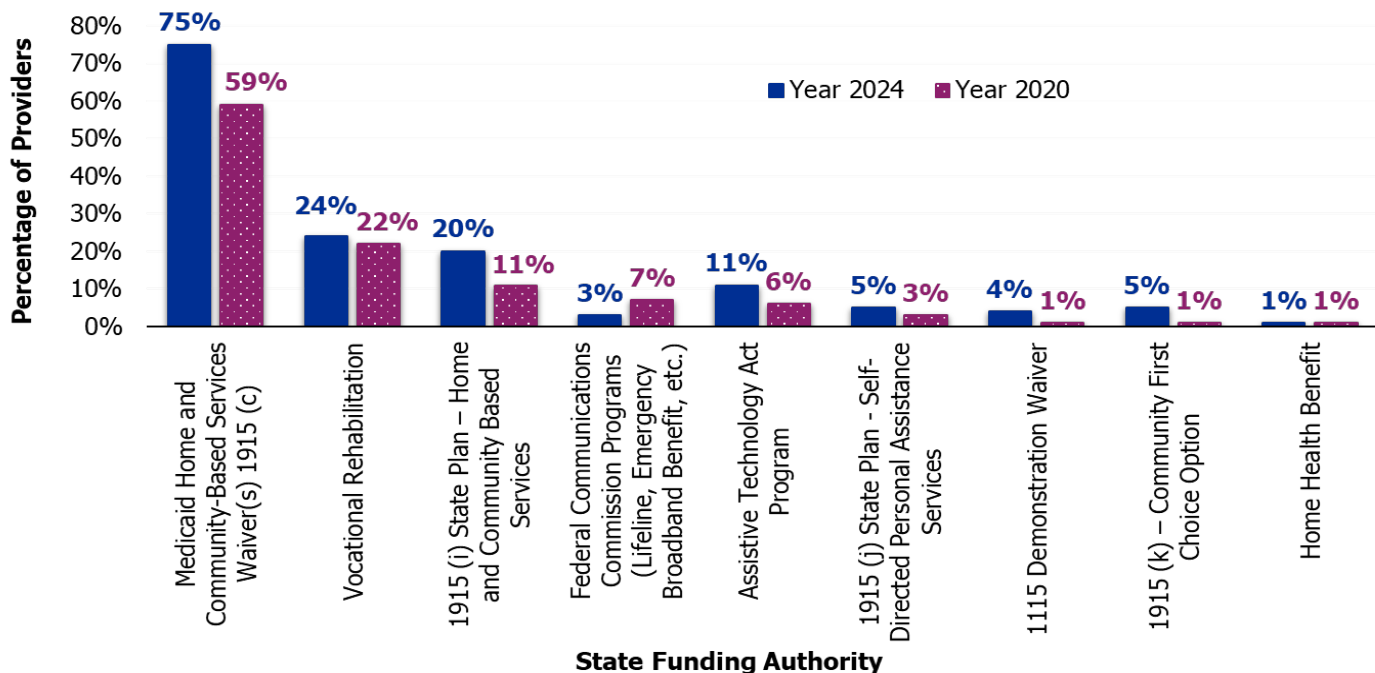
In 2019 and again in 2023, the State of the States in Intellectual and Developmental Disabilities partnered with the National Association of State Directors of Developmental Disability Services (NASDDDS) to conduct a national survey examining state agencies' investments in technology. A central focus of the survey was the evolution and application of funding authorities used to acquire, implement, train, and maintain technology solutions for individuals with IDD.

Findings from the 2023 NASDDDS national technology survey identified ten distinct funding authorities and financing mechanisms used by state IDD agencies to purchase technology solutions for individuals with disabilities. Thirty states reported the Medicaid Home and Community-Based Services (HCBS) waiver as the primary funding source. In addition, vocational rehabilitation funds and Medicaid state plan authorities were frequently utilized (Tanis, Gantt, & Zlockie, 2024).

However, comparative analysis with provider-reported data reveals a notable variance. While state agencies demonstrate diversification and blending of multiple funding streams, providers report relying on only three primary funding authorities to procure technology solutions (see Figure 2). This discrepancy suggests a significant gap in information translation and operational access to financing pathways. Although funding mechanisms may exist at the state level, they are not being fully leveraged at the point of service delivery.

This misalignment has important system-level implications. Expanding technology adoption may depend not solely on increasing funding availability, but on strengthening cross-system communication, technical assistance, and provider capacity to navigate complex financing structures.

Figure 2. Technology Funding Authorities



Which Technology Solutions Are Service Providers Administering for People With IDD?

Providers reported the technology solutions administered to individuals with intellectual and developmental disabilities (IDD) through their programs. Understanding current investments can support the alignment of training needs and innovation. The predominant technology solutions identified aligned with existing and long-standing Medicaid waiver service definitions, reflecting a continued reliance on established funding categories rather than emerging or unclassified technologies.

65%

Video conferencing is defined as a service that provides real-time video communications, including audio, to enable users to share information of the user's choosing. This technology solution may be termed as virtual delivery of service or teleservice.



64%

Adaptive Aids or Equipment/ Environmental Accessibility Adaptations (EAA)/ Environmental Controls/ Home Modifications are defined as architectural and environmental modifications and adaptations to the home, required by the person's individual support plan of care, which are necessary to ensure the health, welfare, and safety of the person or which enable the person to live with greater independence in the home. Such modifications or adaptations include the installation of ramps, grab-bars, widening of doorways, modification of a bathroom or kitchen facilities, specialized safety adaptations such as scald protection devices, stove guards, and modifications required for the installation of specialized equipment.

63%

Durable Medical Equipment is defined as equipment furnished by a supplier or a home health agency that meets the following conditions: can withstand repeated use; effective with respect to items classified as DME; has an expected life of at least three years; is primarily and customarily used to serve a medical purpose; generally is not useful to an individual in the absence of an illness or injury and is appropriate for use in the home. Examples include wheelchairs, inhalators, hospital beds, medical regulators, etc.

53%

Assistive Technology is defined as any item, piece of equipment, or product system used to increase, maintain, or improve the functional capability of a person with a disability.



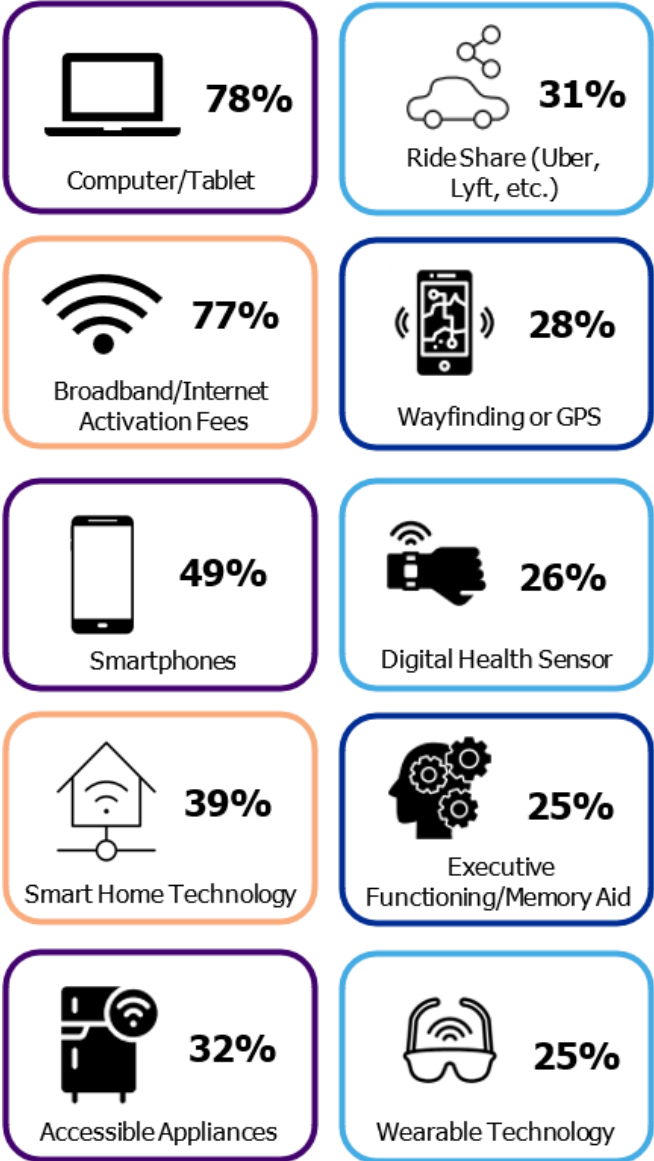
41%

Electronic or remote monitoring/supports

Thorough investigations into the service definitions related to electronic or remote monitoring/supports demonstrate that there is no one consistent definition across state programs (Tanis, Gantt, Zlockie, 2023); However for the purposes of the survey the definition of remote (electronic) monitoring included devices under an assistive technology and/or environmental modifications waiver service. In the waiver service definition, the state needs to demonstrate that the remote monitoring and/or device/technology will significantly enable the individual to live, work, or meaningfully participate in the community with less reliance on paid staff supervision or assistance.

Leading with Investment to Expand Technology Access

Figure 3. Provider Technology Investments



Technology Investments By Providers Using Independent Resources

Traditional public funding authorities often restrict access to emerging and disruptive technologies due to limited evidence demonstrating their effectiveness. In addition, multi-functional and digital technologies may face barriers because of complex purchasing requirements, unclear billing structures, or restrictions within existing funding frameworks. Despite these challenges, growing demand from people with disabilities and the transformative potential of these technologies are driving providers to broaden their funding strategies. By leveraging competitive grants, foundation support, strategic partnerships, philanthropic contributions, and other non-traditional resources, providers are facilitating the adoption of innovative technologies that enhance access and promote autonomy.

When asked which technology innovations were driving internal investments, many providers cited mainstream tools such as computers, tablets, smartphones, and internet access. Others were exploring more specialized innovations, including health sensors, connected appliances, wayfinding technologies, and rideshare

applications, reflecting a growing focus on technologies that enhance health, safety, and community participation.

To promote the adoption of emerging and nascent technological innovations, it is essential to establish adaptive funding mechanisms, agile yet consistent policies, and sustained investments in user-centered research.

Electronic or Remote Monitoring/ Support: The proliferation of use opening doors for greater technology adoption

In 2017, Ohio led the Technology First movement concentrating efforts on advancing the adoption of remote supports. Through the guidance of the Technology First Taskforce and clear goal setting, the state exceeded its initial objective of increasing remote support utilization by 15% by June 30, 2023, achieving an actual increase of 40% (Ohio Technology Goals through 2026). This remarkable growth was the result of an intentional, multifaceted strategy incorporating policy-driven implementation, strategic communication, and data-informed decision-making. The deliberate expansion of remote support services provided the foundation for accelerating investment opportunities in emerging technologies such as telehealth services, smart home technologies, and conversational agents.

Figure 4. How Providers are Using Remote Supports

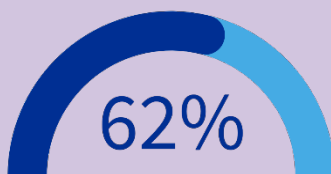


Scaling Adoption

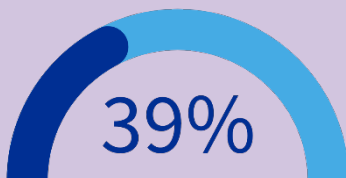
As COVID-19 pandemic and workforce shortages forced service providers and families to seek alternatives to in-person delivery of services and supports, a growing number of states followed Ohio's lead investing in remote supports as a practical and effective solution. Between 2019 and 2023, the number of state agencies funding electronic or remote monitoring/supports more than doubled from 16 to 33 states (Tanis, Gantt, & Zlockie). Not only did the funding options for electronic and remote supports shift, but so did the diversified applications of remote supports. Compared to data collected through ANCOR members in 2021, fewer providers were using remote supports for supported living and competitive integrated employment and more were using remote supports for healthcare in 2024. While this shift could be attributed to the intense focus on health monitoring during the COVID-19 pandemic, it may also signify an emergence of more sophisticated health monitoring technologies and evolving applications of remote support services and models.

Variations in Electronic Remote Monitoring/Supports Models

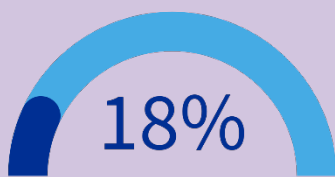
Figure 5. Percentage of Provider Organizations Investing in Vendor Models



Vendor Model 1



Vendor Model 2



Vendor Model 3

A key driver of electronic remote monitoring/support adoption and sustainability by IDD service providers is the vendor model of delivery. Findings from the 2024 national survey introduced a new element to capture IDD service provider preferences to inform effective state-level investments. The survey revealed a clear hierarchy of preference among electronic remote monitoring/supports delivery models:

Vendor Models

1. Most preferred – Vendor Model 1 (62%) Providers overwhelmingly prefer a model where a vendor supplies, installs, and maintains the technology hardware and software, while the IDD service providers maintain responsibility for hiring, training, and managing staff utilizing and responding to consumer-needs using the technology platform.
2. Moderate preference – Vendor Model 2 (39%) Fewer providers prefer the models where the vendor provides the technology and maintenance along with a centralized call center to direct response efforts.
3. Least preferred – Vendor Model 3 (18%) The least favored approach involves contracting with vendors for a “full staffing solution” where the vendor is responsible for the technology along with hiring and training direct support staff.

Discovery of Diverse Payment Options for Technology Solutions

Payment Options

To advance access to technology solutions identified through person-directed goal setting, providers, families, and technology users must often coordinate multiple, fragmented funding streams for a single solution. It may require splitting costs across hardware, software, service delivery, subscriptions, and training for high-demand mainstream technologies with advanced accessibility features. Furthermore, certain critical components (i.e. internet access) may remain unfunded by public dollars, forcing providers and families to absorb the out-of-pocket expenses. Table 1. identifies payment options known to IDD service providers across specific technology solutions.

Though the majority of payment options for various technology solutions remained consistent from 2021 to 2024, two changes warrant attention. Funding for both computers/tablets and executive functioning memory aids shifted from 'Other payment Mechanisms' (2021) to 'Indirect Payment Through Inclusion in Residential or Other Rates' (2024) as the most frequently recognized option. Critically, the 'No Payment Option Available' consistently emerged as the most frequently cited option by providers for specific technologies. These findings demonstrate that while funding mechanisms are evolving, they remain insufficient or unknown, leaving a substantial gap in the availability of financial support for mainstream technologies.

Table 1. Number of Providers Utilizing Payment Options

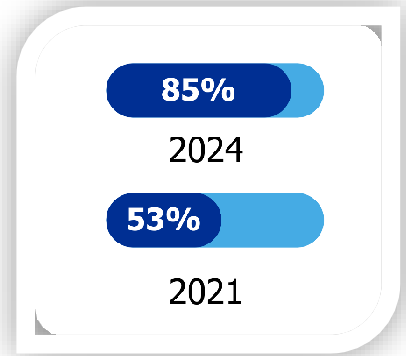
| Technology | Direct Payment as a Service | Indirect Payment Through Inclusion in Residential or Other Rate | Goods and Services | Other Payment Mechanism | No Payment Options Available |
|-----------------------------------|-----------------------------|---|--------------------|-------------------------|------------------------------|
| Internet and/or Broadband | 19 | 53 | 12 | 18 | 109* |
| Wearable Technology | 40 | 23 | 26 | 26 | 104* |
| Smartphones | 22 | 26 | 22 | 29 | 116* |
| Computers or Tablets | 36 | 37 | 35 | 23 | 88* |
| Shared Transportation | 27 | 31 | 12 | 19 | 122* |
| Smart Home Solutions | 35 | 32 | 22 | 22 | 111* |
| Wayfinding or GPS Technology | 26 | 26 | 25 | 20 | 118* |
| Executive Functioning Memory Aids | 25 | 35 | 24 | 22 | 112* |
| Digital Health Sensors | 40 | 20 | 22 | 28 | 109* |
| Accessible Appliances | 32 | 24 | 24 | 24 | 113* |

Purple shading indicates the payment option most frequently utilized

*Indicates that providers indicated no payment option available for the identified technology solution most frequently

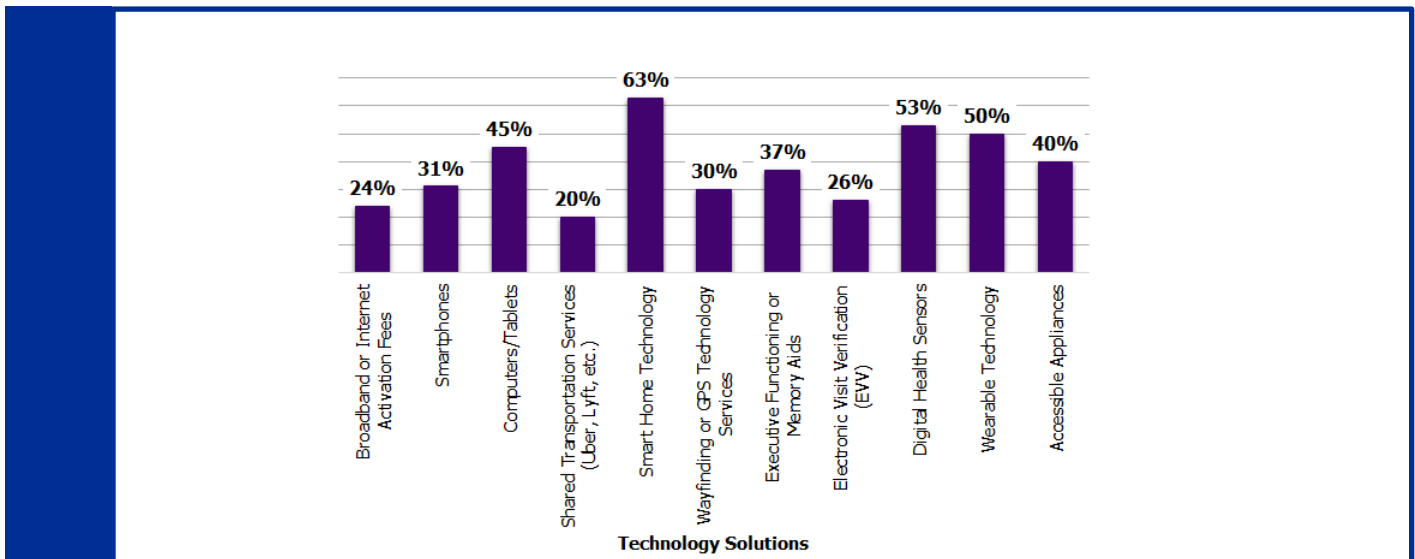
Future Technology Investments

To ensure the responsible application of public dollars, Return on Investment (ROI) remains a focal point of technology policy and practice discussions. As technology adoption reaches critical mass, impact measurement has become increasingly viable, leading several states to conduct formal financial ROI analyses on specific technology solutions. In 2021, 53% of providers surveyed indicated that they could demonstrate cost savings or increased efficiencies as a result of investing in technology solutions. By 2024, the figure rose to 85% of providers indicating that they could demonstrate cost savings or greater efficiencies as a result of investing in technology solutions. Despite fiscal gains, there is still a critical need for research into Social Return on Investment (SROI) and how technology investments directly enhance quality of life and a sense of belonging for people with IDD.



Provider investment forecasts are increasingly guided by the dual goals of service efficiencies and individual community inclusion. As states invest in smart home demonstration sites to model modern technology environments, 63% of providers surveyed anticipate dedicated funding for connected devices ecosystems. Alongside smart home technologies, providers identified digital health sensors and wearables as primary targets for upcoming capital investments, highlighting a clear trend toward tech-enabled residential supports. Figure 6 forecasts future trends in provider investments.

Figure 6. Expected Future Investments in Technology Solutions in 2024



Reimagining the Roles of Direct Support Professionals and Staff

ANCOR's 2025 State of America's Direct Support Workforce Crisis cited data from providers in 48 states and the District of Columbia, uncovered that 88% of providers faced moderate to severe staffing challenges in the past year, and 52% of providers considered further cuts in programs if recruitment and retention challenges failed to subside (Rice, Dawson, 2025).

Providers of IDD services continue to lean in on technology solutions as a strategic approach to transform direct support professionals' responsibilities through minimizing paperwork and repetitive tasks, empowering users to reach greater autonomy, and stimulating broader innovation. In 2024, 84% of providers surveyed believed that greater applications of technologies were a viable solution for the many workforce challenges.

84%

of providers believe greater applications of technology can help address the national direct support professional workforce crisis



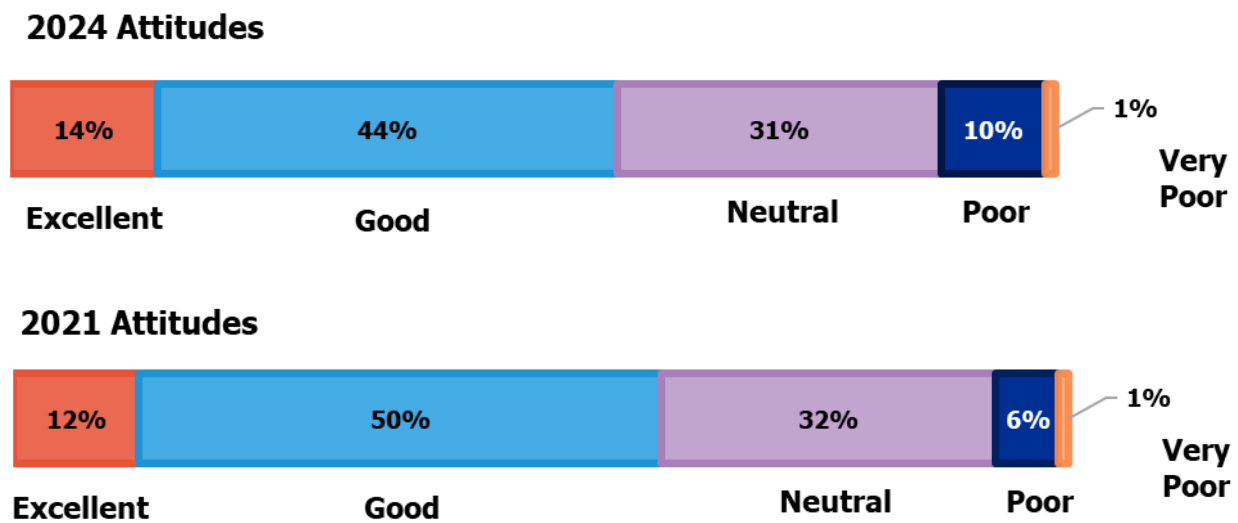
While greater applications of technology appear to be a solution to the direct workforce crisis, pervasive, perceived, and real fears surrounding technology demonstrably hinder its adoption and utilization, affecting Direct Support Professionals (DSPs) and consumers alike. This critical challenge is largely fueled by a profound lack of adequate training and understanding regarding both the benefits and potential risks of these solutions. Historically, these unfavorable attitudes among stakeholders have impeded the successful integration and consideration of technologies for people with IDD.



Staff Attitudinal Changes Over Time

Clear investments through American Rescue Act Funds (ARPA) administered by the states have expanded technology literacy training. Training is now reaching a broad network of stakeholders, including consumers, family members, DSPs, case managers, procurement personnel, and organizational leadership. Forty-two percent of providers surveyed identified the state or organization provision of training for ongoing training to learn, update, or upkeep purchased hardware, software, or technologies for the people they supported. Funding authorities such as HCBS 1915(c) waiver funds, vocational rehabilitation, State General Funds, and Assistive Technology Act Funds provided opportunities for training funds. This comprehensive approach through systems change modeling is actively shifting attitudes and increasing the acceptance of technology solutions. Figure 7. demonstrates the shift in perceived technology attitudes of provider staff from 2021 to 2024.

Figure 7. Staff and DSP Attitudes Toward Technology Solutions



The COVID-19 Catalyst

Igniting Cultures of Innovation and Active Pursuit of Promising Practices

Marking the largest infusion of federal funds into Home and Community-Based Services (HCBS) since the recovery from the Great Recession, the American Rescue Plan Act (ARPA) provided an estimated \$35 billion in funding initiatives between 2021 to 2025. This one-time financial support in enhanced Federal Medical Assistance Percentage (FMAP) rates empowered states to significantly enhance HCBS through provider payments, eligibility expansion, capacity building and training efforts, and investments in operational efficiencies. (ADvancing States, 2025). Examination of the proposed budgetary plans for ARPA funds across the nation performed by the State of the States revealed 49 states with priorities focused on technology investments from user technology training to data management systems (Tanis, E.S. 2022). Many of the states rolled out funding enhancements directly to providers and included opportunities for technology innovation competitions and organizational culture change. The ANCOR survey identified 51 pioneering provider organizations that seized the opportunity to launch pilot programs and secure grant funds to accelerate access to cutting-edge technologies and systems. These visionary initiatives span a diverse spectrum: from wearable technologies to improve self-directed health care and mixed realities enhancing job skill training, to smart home sensors for responsive living environments, shared ride services, emergency telehealth services, inclusive consumer innovation and accessibility hubs alongside the strategic adoption of Technology First Systems Change elements. Through these groundbreaking pilots and continuous integration of lessons learned, the provider community is not merely identifying promising practices but creating organizational cultures of innovation.



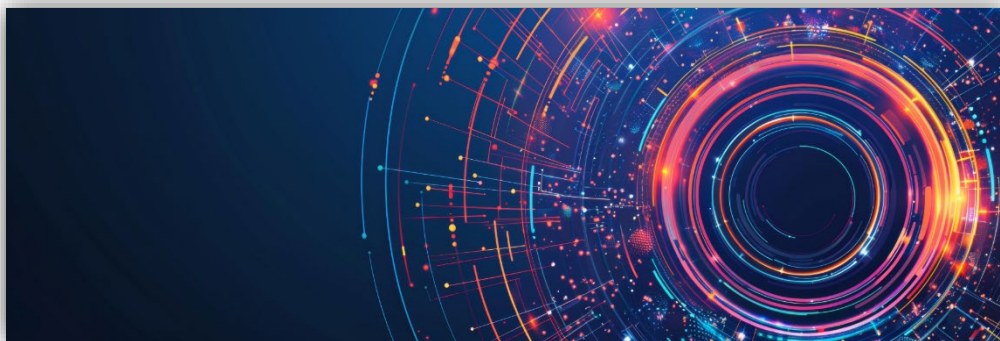
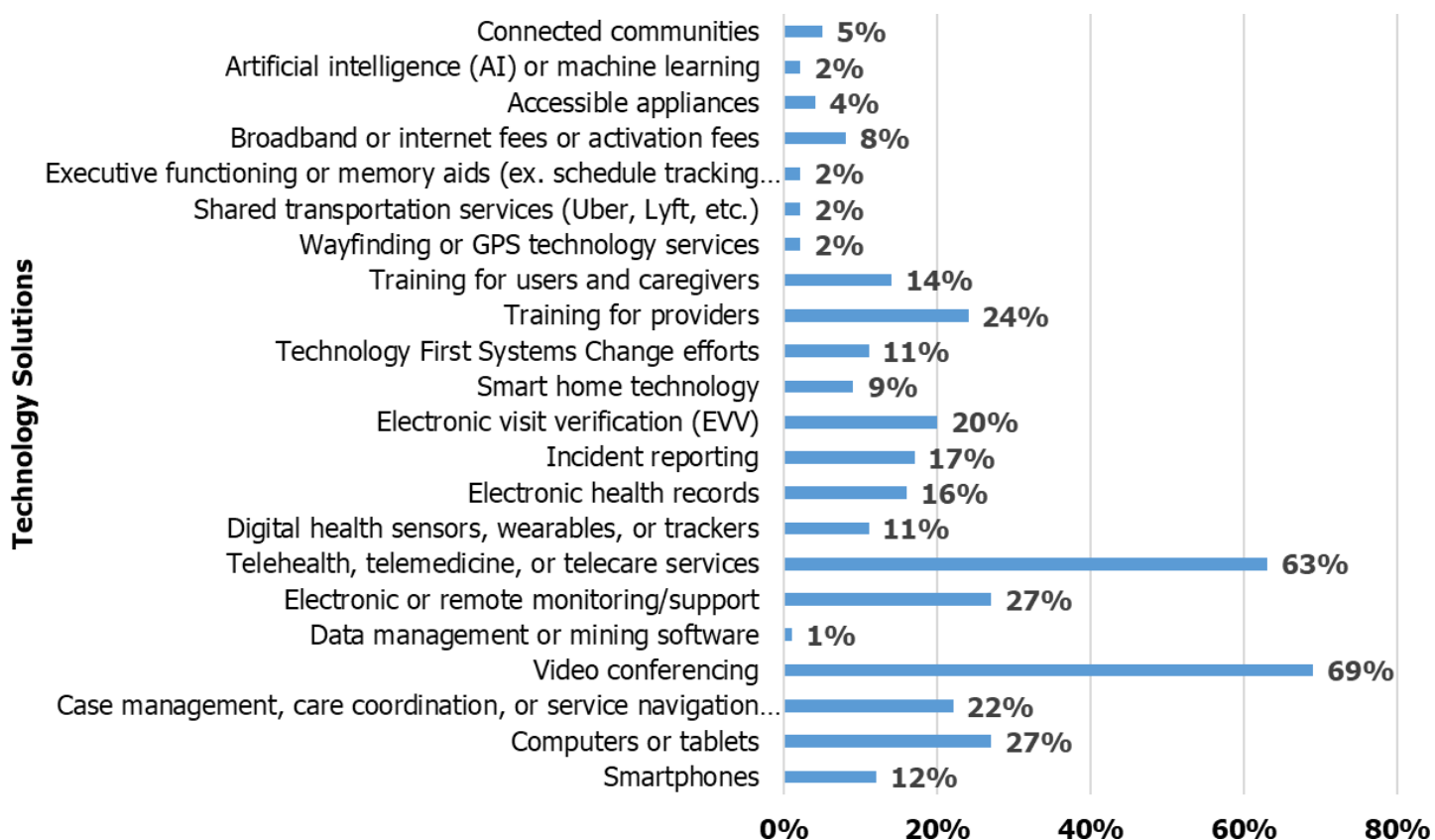
51 Organizations

initiated pilot programs or received grant funds to support access to innovative and emerging technology solutions

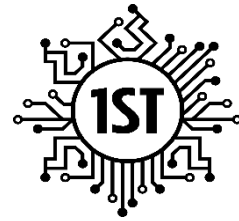
New Technologies, New Vision

Greater awareness and funding flexibilities has led to the adoption of a broader array of technology solutions for people with IDD from video conferencing tools to accessible appliances. Some of the projected impacts cited include: increased autonomy, more efficient personalized support, cost savings, enhanced participation, and improved quality of life.

Figure 8: Organization Interest in Technology First Engagement



Technology First Systems Change



Advancing Technology First Across the Nation

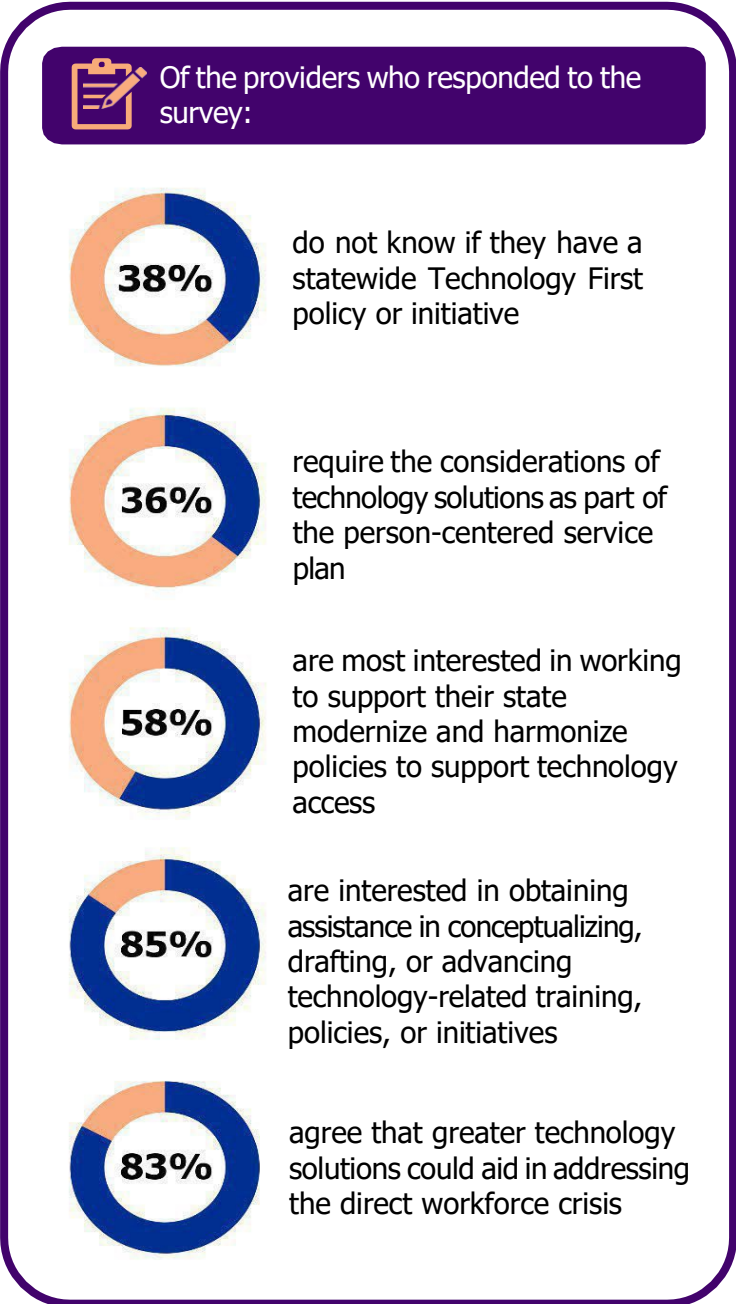
For nearly two decades the State of the States in IDD Project of National Significance has been tracking technology investments through state and federal public expenditures in the U.S. Expertise in public expenditures, systems change practices, cognitive access to technology, and meaningful stakeholder engagement through inclusive research has driven the development and strategic advancement of the Technology First Systems Change model. Thoughtfully grounded in implementation science for systems change in health and human services (Fixen, et. al, 2013) and lessons learned from states, providers, and consumers in sustaining and advancing technology access over nearly a decade, the model has been cited as one of six "principles considered pivotal to strengthening and sustaining the nation's HCBS infrastructure" by The United States President's Committee on People with Intellectual and Developmental Disabilities (PCPID, 2024).

While often misinterpreted, Technology First Systems change is not a single practice, program, or funding stream, but a process of shifting component parts of a system to form a new system that behaves qualitatively differently. This concept emphasizes understanding complex interrelationships within systems and "addressing root causes rather than just surface-level issues" (Harvard Business School, 2024). Systems change is not for the faint of heart and takes long-term strategic investments in statewide policy, implementation frameworks, fidelity, and data-driven decision making. The 2024 *Technology 2.0* report with NASDDDS established the first national benchmarking of states in Technology First Systems Change Model.

Technology First began as a movement but has transformed to a "framework for systems change where technology is considered first in the discussion of support options available to individuals and families through person-centered approaches to promote meaningful participation, social inclusion, self-determination and quality of life" (E.S., Tanis, 2019).

Meaningful Engagement of Providers in Advancing Statewide Technology First Systems Change for Sustainable Practices and Innovation

Figure 10. Provider Responses on Technology



IDD service providers are critical to advancing Technology First Systems Change. They play a key role in not only facilitating greater adoption but inspiring innovative technology designs and services through creative partnerships. However, barriers to information regarding statewide initiatives prevent meaningful engagement. When asked about their knowledge of Technology First Systems Change policies or initiatives, 38% of providers were unaware of policies and initiatives in their home state. This gap in knowledge could hinder progress, as states may not be leveraging crucial policy support or building from experiential knowledge.

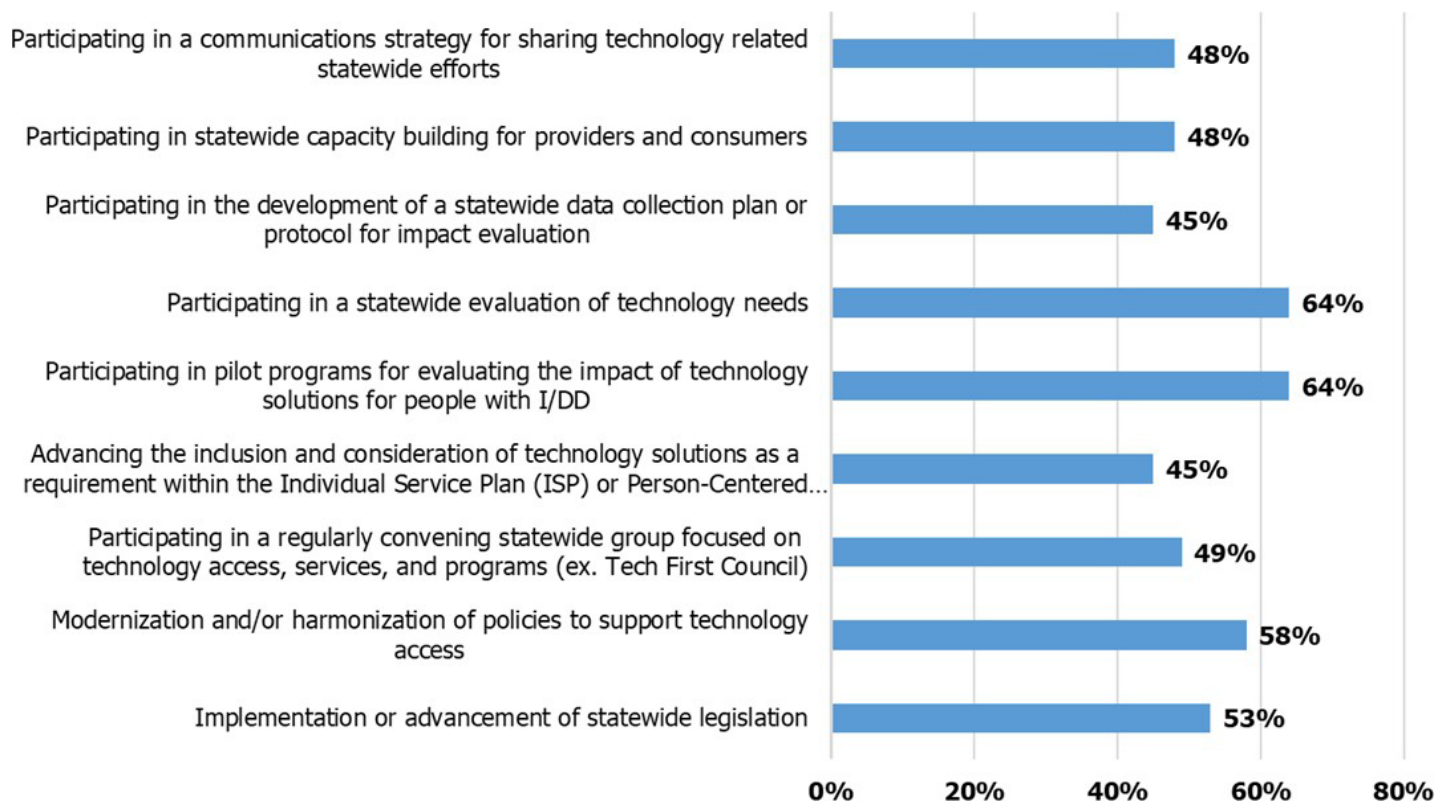
Despite gaps in information translation, providers are self-motivated to transform their own practices through conceptualizing, drafting, or advancing internal technology related training, policies or initiative. A strong majority, 85% of providers expressed an interest in technical support in these areas.



Engagement in Technology First Systems Change Benchmarks

Progress in systems change models frequently stalls because stakeholders lack sufficient information, assigned priorities, clear goals, or resources. To better understand how providers could champion Technology First Systems Change, the survey directly asked providers which benchmarks they were most keen on advancing, thereby identifying their potential supportive roles. The majority of providers were interested in participating in pilot programs for evaluating the impact of technology solutions for people with IDD (64%) and participating in statewide evaluation of technology needs (64%).

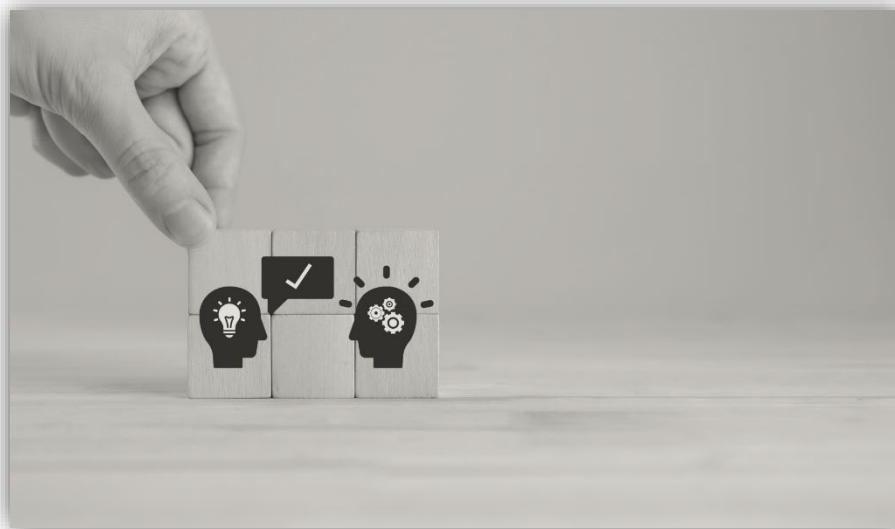
Figure 11. Organization Interest in Technology First Engagement



Conclusion

National data collection and analysis are critical for understanding the adoption of technology solutions, services, programs, funding, and systems change efforts. The survey distills insights into several formal recommendations tailored to support provider organizations in advancing technology access for consumers with disabilities.

1. **Enhance communication and awareness of state policies and funding** – develop statewide provider communication strategies to inform providers of state-level Technology First Systems Change-related policies, initiatives, and funding opportunities.
2. **Strengthen provider capacity to navigate, negotiate, and leverage diverse funding structures** –develop partnerships and capacity-building opportunities to understand access and blending of various funding streams for technology solutions.
3. **Invest in technology literacy, resilience, and agility for all stakeholders** – while capacity building for a single population (DSPs) is valuable, to ensure critical adoption and remove bottlenecks and blockades, a comprehensive technology training is needed across the entire service delivery infrastructure with consistent messaging, competencies, and expectations.
4. **Invest in data-driven decision making for consumer impact and return-on-investment** – identify and create an organizational data strategy that includes the thoughtful collection of information that will support the evaluation social return on investment, financial return on investment and quality of life outcomes.
5. **Seek out creative partnerships for collaboration and innovative technology development** –expert knowledge helps to drive innovation. Seek out opportunities to build partnerships across providers, technology developers, and other stakeholders to drive inclusive technology designs that can address pain points for both organizations and people with disabilities.



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