

**DEPARTMENT OF BEHAVIORAL HEALTH & DEVELOPMENTAL DISABILITIES
DIVISION OF DEVELOPMENTAL DISABILITIES
DD ADVISORY COUNCIL MEETING MINUTES**

MARCH 21, 2014

ADVISORY COUNCIL ATTENDEES: Debbie Conway (Chair), Estelle Duncan, Eve Bogan, Sheryl Arno, Heidi Moore, Dr. Bruce Lindemann, Nandi Isaac, Bobby Holcombe, and Mitzi Profitt; Lynnette Bragg and Twana King (Participated via Conference)

STATE OFFICE STAFF: Sara Case, Eddie Towson, Doris E. Johnson, Mary Price, Byron Sartin, Catherine Ivy, Rhonda Flint, Annie Webb, Tara and Lynne Hutcheson (**Recorder**)

EXCUSED: William (Scott) Crain, June DiPolito, Rita Young and Nicki Wilson

Topic	Outcome
<p>Welcome & Introductions</p> <p>Ms. Debbie Conway</p>	<ul style="list-style-type: none"> ❖ The meeting began at 9:40 AM. ❖ Ms. Conway welcomed everyone in attendance and asked members to share what is going well in their work and supports of individuals with developmental disabilities.
<p>Business: Approval of Minutes</p> <p>Ms. Estelle Duncan</p>	<ul style="list-style-type: none"> ❖ There was a motion to approve the January 21st meeting minutes. <ul style="list-style-type: none"> • Ms. Issac motioned to approve the minutes. • Ms. Profitt seconded the motion.
<p>Division Report</p> <p>Ms. Sara Case</p>	<ul style="list-style-type: none"> ❖ <u>ASO/RFP:</u> <ul style="list-style-type: none"> • The ASO Service Contract was released March 20, 2014 and has to be out for 60 days. • CIS, Delmarva, APS, GCAL all up for renewal • There will be one contract for DBHDD; should improve access to all services • Go Live Date is expected to be April 2015. ❖ <u>Support Coordination Reform:</u> <ul style="list-style-type: none"> • SC roles have been redefined to facilitate ISP, monitor ISP and advocating for the individuals. • Consultant is working on development of a training curriculum for support coordination • Ms. Moore asked about Ms. Cooper’s report regarding support coordination and stated she had not received a copy of the report. Ms. King (via conference call) stated she had received it. Council members requested a copy of the report. • Dr. Li will be asking Council members for recommendations on having a comprehensive plan for the state. • Rhonda Flint, new employee at DD Division, was introduced as being over Support Coordination and Planning List Administration. ❖ <u>Regions:</u> <ul style="list-style-type: none"> • The members expressed great concern regarding the regional offices. • They feel the regional offices are slow to respond to issues and concerns of individuals and their family members.

DEPARTMENT OF BEHAVIORAL HEALTH & DEVELOPMENTAL DISABILITIES
DIVISION OF DEVELOPMENTAL DISABILITIES
DD ADVISORY COUNCIL MEETING MINUTES

MARCH 21, 2014

Topic	Outcome
	<ul style="list-style-type: none"> • Information is inconsistent across regions. • Ms. Case asked for specific instances to be forwarded to Mr. Link. Members expressed that they feel that many instances have been reported and they want to see action now. • Ms. Case stated a pilot program had started in Region 3 trying to determine what is needed now with regard to Regional support. • Ms. Conway asked what the council feels the next steps should be relative to the communication challenges at the regional level. The council feels Mr. Link should be invited back to report on what has been accomplished regarding the suggestions and recommendations the council has already made. • Ms. Bogan suggested a very brief survey about the services being provided by the region. • It was recommended that Judy Fitzgerald be invited to attend an upcoming DD Advisory Council Meeting. <p>❖ <u>ADA Settlement/Transition:</u></p> <ul style="list-style-type: none"> • The transition of individuals from the hospital setting to community settings has been ‘paused’.. Individuals are being considered on a case by case basis to allow for finding the best transition situation as possible for that individual.
<p style="text-align: center;">SELN State Transition Plan/CMS Community Definition</p> <p>Ms. Catherine Ivy</p>	<ul style="list-style-type: none"> ❖ Ms. Ivy distributed copies of the capacity study she conducted to the members of the council. ❖ CMS has changed the definition of community service. Services must be person-centered (clear parameters have been established). There will be a focus on service delivery to include size of settings, choice, meaningful activities and sharing houses. There needs to be a transition plan developed. There is a deadline for implementation of 3/17/15. ❖ There are two waiver services that are needed but we do not currently have: intensive case management and behavioral support services. The request to add these two services did not get in by 3/17/14 to DCH. Any requested changes must go through DCH to CMS. ❖ Working with DCH to create a transition plan; there will be a request for public comment ❖ Suggestions were to begin monitoring individual 60 days before transition out of the hospital and continue for 60 days following transition. ❖ Approval was obtained for a 1.5% increase in the waiver rates for CLS, CAG, CAI, PV, CRA, SEG, SEI and SC. This was a huge victory for individuals. ❖ <u>Supported Employment:</u> <ul style="list-style-type: none"> • How can Supported Employment be restructured? <ol style="list-style-type: none"> 1. Discovering components – work environment 2. Job development 3. Matching function 4. Long term follow along ❖ Providers will be asked to volunteer to participate in the pilot. ❖ Supported Employment does not have exceptional rates – this needs to be addressed in a waiver amendment.

DEPARTMENT OF BEHAVIORAL HEALTH & DEVELOPMENTAL DISABILITIES
DIVISION OF DEVELOPMENTAL DISABILITIES
DD ADVISORY COUNCIL MEETING MINUTES

MARCH 21, 2014

Topic	Outcome
	<ul style="list-style-type: none"> ❖ If one person is moved from state funded status to Medicaid – it will open up two more slots. ❖ The division is trying to create a fee for service arrangement instead of an automatic amount.
<p>Submission & Review of Ex. Rate Policy Ms. Annie Webb</p>	<ul style="list-style-type: none"> ❖ Ms. Annie Webb spoke regarding the exceptional rate policy and the intent to clarify what happens when an ER is submitted. ❖ Concerns from SPADD: <ol style="list-style-type: none"> 1. Confusing language – consistency in not adding more steps in the ER process. At 90-day make assessments and review process. 2. Believes an ER Position/Coordinator would help process ERs and maintain deadlines. 3. Requirements for documentation. Look at the wording because at any given point Regions and Division office can ask for more documentation.
<p>Quality Management Services Mr. Eddie Towson</p>	<ul style="list-style-type: none"> ❖ Mr. Towson discussed what are the next steps in QI. ❖ He is working with Ernst & Young on the performance indicator piece and looking at what data has already been collected. ❖ Ms. Conway asked for specifics regarding a timeline for next steps on the Quality Enhancement redesign. Ms. Conway and other council members questioned why this has taken so long. ❖ Mr. Towson stated he should have something in draft form for the group by the next meeting.
<p>Participant Directed Services Ms. Heidi Moore</p>	<ul style="list-style-type: none"> ❖ Ms. Moore attended 3 meetings with 10 families and all Regions except Region 5. ❖ Families are still very confused – want to become self-directed but don't understand the process. ❖ A brochure is being created for Support Coordinators to give to interested families to help explain the process. ❖ Ms. Moore would like a website to be created to help families with self-direction. ❖ 13% of all waivers are participant directed. ❖ There needs to be a presentation to the Council on participant directed services.
<p>Questions/ Recommendations Advisory Council</p>	<ul style="list-style-type: none"> ❖ Ms. Conway asked members for questions, recommendations and concerns. ❖ Committee feels Mr. Link should be invited to the next meeting to address concerns regarding the regions. ❖ Members questioned if a subcommittee on “Best Practices” was a good step and maybe not recommended until other recommendations have been heard and action taken. ❖ Policy Review Committee – need to have a standing committee that can be called upon to review proposed policies/changes. Ms. Conway, Ms. Bogan, Ms. Duncan, Ms. Moore and Ms. Profitt were asked to serve on committee. Motion was made by Dr. Lindemann and seconded by Ms. Bragg. Approved by all Council Members. ❖ Feels the group should continue to focus on communication with the Regions and Central Office. ❖ Members feel that a letter should be drafted to Commissioner Berry in regard to the systemic issues around communication. ❖ Members would like to invite Commissioner Berry to the next meeting to give feedback on how he thinks the council is doing and what suggestions he may have for future projects. Council members feel that they have made recommendations but have no feedback on if these recommendations were implemented, or not. Council feels they are not a priority in the Division of DD.

DEPARTMENT OF BEHAVIORAL HEALTH & DEVELOPMENTAL DISABILITIES
DIVISION OF DEVELOPMENTAL DISABILITIES
DD ADVISORY COUNCIL MEETING MINUTES

MARCH 21, 2014

Topic	Outcome
	❖ Council members suggested the next meeting be at 2 Peachtree and that Commissioner Berry and Mr. Link should be invited.
National Trends/IDD Ms. Diane McComb	<ul style="list-style-type: none"> ❖ Ms. McComb with Delmarva presented a slide presentation on National Trends and ID/D. ❖ Ms. McComb reported there is 56.65 Billion to support individuals with ID/D and the waiting list continues to grow. ❖ CMS has revised regulations for Provider Controlled settings to be a more person-centered plan. ❖ People with ID/D are still not being placed in jobs. ❖ Multiple policy changes are being carried out at the Federal level. ❖ Ms. McComb agreed to email the slide presentation to council members
Adjournment	❖ The meeting adjourned at 2:00 PM. The next meeting is scheduled for May 16, 2014. Council members will be notified of the time and location once determined by Ms. Conway.