

Participant-Directed Programs Policy Collaborative (PDPPC)

Minutes for April 22, 2015 approved on 06-25-15

Date and Time: Wednesday, April 22nd, 2015
Location: Health Care Policy and Financing, 303 E. 17th St. Denver, CO 80203
Room 11B

Roll Call on the Phone:

Margaret Proctor
Liz Wuest
Linda Andre
Diane Albergie- Aces\$
Cheryl Vennerstrom
Craig Morrison-Aces\$
Sueann Hughes
Hanni Raley (Arc)
Bonnie Silva

Renee Farmer
Kelly Morrison- DHS
Maria Rodriguez
Kelly Brown- Aces\$
Leslie Taylor
Tim Moran- Aces\$
Kristy Michael
Marc Fenton- PPL
Julie Reiskin

Curt Wolff
Stephanie Holzinger
Morene Peppin- Aces\$
Ryan Zeiger
Lance Wheeland
Daniel Holzer
Emily Murillo– Omni
Deborah – HCPF

In the Room

Connie McCloud- CDCO
Jeff Pratt- Consumer Direct
Roberta Aceves- HCPF
Gabrielle Steckman- PPL

Kari Vinopol- CDCO
Kurt Miller- ADAPT
Linda Skafien- Arc
Rhyann Lubitz-

Jason Smith- Aces\$
Julie Farrar
Gerri Frohne
Grace Herbison-HCPF

Whitney Ray-HCPF
John Barry-HCPF
Anaya Robinson-
Mark Simon

Sarah Roberts-HCPF
April Boehm-PPL
Jennifer Martinez-PPL
Debbie Miller

Bonnie Rouse- HCPF
Candie Dalton- AoI
Caitlyn Brady

PDPPC Attendance Record/Voting Members (Linda Skaflen)

One vote per FMS, April will take PPL's vote.
Candie representing Accent on Independence vote.
Morning Star- Cheryl Vennerstrom will take the vote today.
Christina Ullmer
Jeff voting for Consumer Direct.
Jason for ACES\$ has vote today.

March Draft Minutes

Roberta: Under the Executive Summary of the March draft minutes, there are 4 positions that handle consumer direction, not 3.
John: Anyone opposed to the March Minutes? None.
Linda A. makes motion to approve, Leslie seconds it. No one opposed to March draft minutes. Minutes approved unanimously.

Today's Agenda: Additional Topics to Add

Add to the agenda: topic of interviewing for Candie's former position and we can put it anywhere on the agenda.

Grace Herbison: wants to add discussion about self-direction and self-assessment.

Mark Simon wants to add to the agenda the following: Caitlin had an issue about procurement rules; the Pennsylvania FMS report; the client information comparison and the FMS's; comparison of employer models; comparison of two employer models; list of attendants that are able to take on new CDASS clients; and open enrollment issue.

John Barry: Six issues have been brought up here, we have an agenda that is full for today, do we move other things after them for today, and see how far we get? Group Agrees.

Mark Simon: 5–10 minutes each, but they may trigger more discussion. Mark has been asking for 3 months, and frustrated not being listened to.

Linda Skaflen: Two other items: desire for stakeholder involvement, and Linda Andre's position as Stakeholder Co-Chair has to be filled.

Maria Rodriguez: Let's address the ongoing things first and the FAS issue.

New FMS issue, what are the differences between the models and the basics that are getting swept under from the new things? Let's take care of the old items first.

FAS is on the agenda for today.

Leslie Taylor: It's clear that Consumer Direct is up and running. Her question is, who are they affiliated with, are they affiliated with Hewlett-Packard (HP)? She wants to make sure CDCO is not involved with HP, and needs to know if there any corporate affiliations between these two.

Linda Skaflen: We need to know the employer model comparison topic with FMS today, whatever we don't get done with Mark's list, we should do first on next month's agenda.

Client Information Comparison of the FMS's

Mark Simon:

- In the last meeting, the client comparison information, applies to the employer models and what's on Consumer Direct website is not okay and far less informative and worse than original information from January. Mark had 11 questions and some were answered okay and some not at all, and a simple yes or no, is not okay and not enough detail. The employer model is biased and steers people towards F/EA model and away from AWC. If we look at the Pennsylvania Report, this reveals about client liability.
- One FMS was criminally charged with fraud in another state, from 34 FMS's to one and some FMS didn't have w2's. Causes included complaints with social security, and this involves IRS going after clients.
- Clients are going into F/EA and not knowing their exposures. It says the client is shared jointly between client and F/EA.
- Consumer Direct has not shown adequately in a manner that is clear, understandable and through information, and needs to be taken care by a sub-committee of this group. We can't rely on cdco to do this, we need subcommittee to help us with this task to re-create.
- Ultimately, when Mark checked the website with CDCO and FMS comparison sheet, it was not accurate, and more "iffy".

John: Can we get feedback about the desire for a sub-committee to oversee getting this done? Can we have the group form this?

Sarah Roberts: Let's (staff) talk with Jed, and not make a decision yet, we need to look at contracting (legal) issues.

Bonnie Rouse: We are looking at this and we are aware, we are working on this.

Leslie Taylor: I appreciate that we are looking at it, but looking at things doesn't get things done, better to take action now, then put it off to later. Staff should include stakeholders to work with the Department, to get this done and get the stakeholders in this subcommittee.

Linda Skaflen: Generally when PDPPC makes a recommendation, we have to make a motion. If approved, a formal recommendation then would go to HCPF. Is Mark asking for formal recommendation for a subcommittee of the PDPPC?

Mark: Says he will put a motion forward that an oversight subcommittee of the PDPPC be put together to work with CDCO to further address the client information with comparison of models of the FMS's to work with stakeholders and the subcommittee.

Kari vinopal (CDCO): All the info was taken from questions that Mark had asked, it was answers from the FMS's. It was approved by HCPF, before it had been published. There were time constraints, folks wanted just to go forward and provide training to people. We need to break it down in simple terms. And for people who don't understand, and make it less wordy.

John: A motion has been seconded to form this PDPPC subcommittee

Maria Rodriguez: Is someone investigating all the FMSs and CDCO, is there an audit going on? Or an audit of PPL?

Linda Skaflen: I think the audit is about the CDASS audit being proposed last May 2014, specific to CDASS in general.

The group voted and approved the formation of the Subcommittee.

Continuation of Agenda Items added today: Open Enrollment

Mark: The Pennsylvania FMS audit report needs to be distributed to all the PDPPC, there are a lot of lessons we can learn from Pennsylvania.

Mark: Regarding open enrollment, we have a 30-day open enrollment once a year. Other states range from 30 day open quarterly or 30 day semiannually, or 15 day. Do we want to stay with 30 days once a year? This will drive more competition between the FMS's.

Leslie: Agrees with Mark. And with Nevada.

Maria Rodriguez: Agrees with Mark and Leslie, thinks we should have open enrollment at least every 3 months.

Julie Farrar: Back when we had the original FMS model, there were a lot of problems and it almost felt like we dropped the contract with them, and there's some kind of way, a trial period, 3 months of a trial period to figure out what the glitches are. This is a new learning process for all of us, twice a year at the least, or add the option to opt out in the first 90 days, since this is so brand new. If it's not a fit for a client and they don't need health insurance, or if an attendants needs a change, we need to make sure that employees are given all the information they need.

Leslie Taylor: The waiver itself, with the insurance portion is going to be approved and they are still doing assessments on it, and conflict within other states. Either make the client whole and no insurance premiums come out of the client's allocation, and as for IRS and CMS to be exempt situation. Does CMS matter with this point in time?

Bonnie Rouse: The contractor, OMNI, pulled a report looking at quarterly open enrollment. Findings are it can go either way. July 1, 2015 we are going to offer quarterly open enrollment.

FAS:

Linda Andre: PDPPC has to do a formal recommendation to reinstate it, which she has said for the last 6 months. Last June, Julie moved to recommend FAS and promote independent living and Maria seconded the motion.

Mark: Yes, let's move the motion forward.

Linda Skaflen: Did this motion not get made into a recommendation already? There was discussion about a committee and they got together 3-4 times, but never got what the administrative costs of FAS were. And the motion never went into a recommendation to HCPF.

Maria R: More work has to be done on this. Suggestions were made to include more in FAS, and expand it. This discussion occurred before it was made into a recommendation.

Leslie: In terms of expansion, let's modify the language instead of placing it into certain categories and what your FAS can be used for. Anything that is necessary with regional accommodation for promoting independent living, in addition to the first three specifics, and with FAS as to what they are used for.

Julie Farrar: Thought that this was CMS language and CMS said we couldn't do FAS anymore, but we wanted FAS to continue, and word we got from CMS was that it was not possible. Let's make sure we follow CMS guidelines about this and don't open it up to something we can't do.

Linda Andre: The research Candie did, was that FAS was not possible, but we can move ahead with a recommendation.

Candie: How FAS was done during the pilot is what CMS does not allow. They do allow goods and services. It has to be identified as a good and service for CMS to approve.

Maria: Wants to address comment by Leslie. When the pilot program ended it was interpreted very strictly, and was a part of the reason to make it more specific.

Mark: Let's go forward with FAS and allow the broadest interpretation of goods and services that federal regulation will allow.

Linda A: It has to be part of the personal service plan. So set the policy in the modification.

John: The PDPPC needs to submit a written recommendation for this. How do folks propose it be drafted and run it by stakeholders?

Linda A: Linda-may not be the lead on this. A lot of information still needs to be involved.

April from PPL: How should a written recommendation be done?

Mark: Do we need to re-make the motion? I propose a modification to the prior motion, move forward with recommendation to HCPF to re-implement FAS within allowed scope of federal regulations for goods and services.

Maria R: Let's put this into our allotment amount, and put it in a year before, so it can't be subtracted from the in-home health services.

Mark: Modify your plan in month 11, if you have money left over, you can modify your plan to add those in.

Linda A: And if you deal with your case manager several times during the year, you can do this.

Gabrielle: It's not FAS as it existed in the pilot before, or is it a change in the waiver to offer goods and changes, yes it is FAS.

Leslie: You don't need it in your plan at the beginning of a year, and put it in the 11th month. It has to be put in our plan at the beginning of the year, it can be changed at any time, why do the plan at the beginning of the year?

Linda Skaflen: We have a motion and second on the floor and expansive under CMS requirements

John: Is anyone against recommendation for FAS recommendation?

Linda A: We never got calls to talk about FAs before. Let's work out these details, in one or two meetings, and in a month or two, submit the recommendation.

John: Is there anyone who votes no with the recommendation?

Linda A: Does anyone remember when the FMS outline was sent to the group? Outline sent had 5 pages at a handout, and everyone got one, and talks about the latest that came from CMS. Candie, Linda A and Leslie got it, but they didn't find anything else.

Linda A: We are talking about formal recommendation and Mark made reinstatement motion.

Mark: Let's re-instate the recommendation with goods and service, as permitted under federal regulation and statute.

Maria R: Yes, votes in favor, but having it in the plan at the beginning of the year, then it would be appropriate.

John Barry will follow up with Linda Andre to put recommendation, and get more information to Maria Rodriguez, about amending the plan mid-year, Maria's concern, thinks it has to go in the plan in the beginning of the year.

Linda Andre will give this info to Maria R. When we do the budget plan at beginning of year and FAS.

Leslie- the FTP is wrong, during the 11th month, take money from there and FAS was very strict about what we can take away from the FAS fund we have and not.

John: The proposed subcommittee will work on this research and do the discovery on this.

Leslie- will help Maria R. with more information on this, and understanding if this has to be in our budget at beginning of year.

IHSS Update (Grace Herbison)

Update on IHSS programmatic changes, has not received approval from CMS yet. Will let PDPPC know when we have more information.

Sarah Roberts: We don't have more information at this point, we are having weekly phone calls with CMS central and regional offices. The hold ups didn't have anything to do with this issue, its multiple issues in each waiver. It's not IHSS issues, it's a combination of multiple waiver issues.

Question: Has CMS pulled out any specific provisions?

Sarah: We are having conversations with them, and a lot of detail, rates and being more specific, addressing them all at once.

Grace: The same bill that mandated us, also expanded us to do the brain injury and we submitted this plan to CMS on Monday, and sent it out before this meeting, and we want to give everyone time to review this doc and discuss it at the next PDPPC. Several members of HCPF did the plan.

Linda S: Why was it delayed until 2018?

Grace: HCPF worked together, we thought 2018 was the most realistic timeline and to implement things well. The plan was submitted to the legislature, and we need the legislature to pass it.

Leslie: We don't have to worry too much about the timeframe, the political arena is all wrong, including Washington, and it is out to 2018, and it could be implemented sooner, but CMS is reluctant in almost every region looking at waivers.

John: Put IHSS on the agenda for next month?

Group: Yes.

Background checks and Barrier Crimes (Bonnie Rouse)

Bonnie: Reads off the form from PPL of the barrier crimes list: for barrier crimes when looking at potential attendants, with this list some attendants are ruled out to be an attendant. [See list from today's handout—entire list was read from the PPL handout]

Bonnie: There's no way to waive one of these crimes, but this form can waive a DIFFERENT crime not on this list. Bring this to the group so we are all aware and can give feedback.

Julie Farrar: Why are the financial exploitation crimes not on there, or a marijuana related crime in the last 10 years, some of the crimes are so situational, and if there's a domestic violence crime, or a really bad driving record, how do you know what comes up with the background check?

Kurt Miller- What about an attendant that has committed one of the lesser crimes, but the client still insists on having that attendant?

Linda A: If it's a misdemeanor it's okay.

Gabrielle: This is the list from the previous vendor not PPL's list. If a barrier crime comes up, it is not allowed, no negotiation.

Julie F:..You can ask what the barrier crime is and it should be disclosed to the client.

Maria R: This is difficult to recruit for us and the majority and people and employers don't run across this problem, and for a lot of us, this is a problem, we need to have put in place, some kind of assistance, and how to make it to have a way to find good attendants.

Mark Simon: Where does the list of barrier crimes come from?

Linda A: The AR's are in charge of hiring, not required to have a background check.

April Boehm: As far as the financial exploitation, we talk to the Office of the Inspector General. We do this as part of a response. We conduct OIG checks and run monthly.

Caitlin Brady: If a background check has come up negative, are they only ones held responsible if they did something to this client? If there's been a background check and a minor crime or something was looked over, who is held responsible? The FMS?

Julie Farrar: Why are these crimes on the list and not others? Identity theft and larceny, are not on there. I had a situation and fired an attendant for all the duplicate keys the attendant had. Why did Accent use this previously? Is it from the PPL List? There should be some exemption process for some people, and if your family member is convicted of welfare fraud, because of food stamp or something irrelevant, this could be exempted.

Sarah Roberts: When meeting with FMS vendors and talking about timesheets, should we have AR included or not, and put this on the agenda for next month, or we do a work group, like we do for the FAS?

Group: Put this on next month's agenda.

Julie: Yes who will be in the workgroup?

Maria R, bonnie Rouse, Caitlin Brady and Julie Farrar would like to be in it would like to be in it.

Linda Skaflen: What does CFC do with background check?

Timesheet Issue (Bonnie Rouse)

Bonnie: Timesheet issue. PPL only requires the client or AR to sign the timesheet, we've reached out to the program integrity Department about requiring both signatures on the timesheet.

Julie Reiskin: This will be a problem for people who are AR's. Julie is AR for several people. If you do this, for someone who lives in Aurora, and a person who lives in Denver, and no scanner on home, how to get this in on time. Workers have to submit, this is a huge issue and is a huge issue for AR's serving multiple clients. It becomes a health and safety issue, and we have to make sure the AR is communicating with everyone.

Gabrielle: This not our design (PPL), it is the state's design. It came to the advocacy world, it's not just our process and we are willing to change it.

April: Paper timesheets, electronic timesheets, are offered.

Craig Morrison: All three methods offered for Aces\$.

Julie Reiskin: Submit the timesheet for everyone, but does not have to have the signature from the attendant, most of the attendants are not computer people.

Julie Farrar: My attendant won't like this, because she takes care of everything, wonders about the contact, they don't get a breakdown, and if the attendants are short and over, there is a huge obligation and need to know what opportunities are available to them, things can be improved, does this open up for exploitation.

Maria R: This underlines the problem where we don't have the office equipment as AR's, scanners, etc. and no budget for this. The time limit was changed awhile back, and then the PA's get paid late for submitting the timesheet on time.

Debbie Miller: Ditto on all. As an AR for 3 different clients, including family, this can be difficult making it happen with submitting timesheets on time, and makes payroll very lengthy, and it's more difficult for the attendant doing the timesheet, votes to not do the two signatures.

Tim Moran: It is not the best practice, discrepancies within the state, CDASS rules current writing, the practice differs between fax submission and the online process. We do dual submissions for paper and online. Our software is capable of doing either process. We make sure we are expediting on time.

Mark Simon: Two signature issue presents other barriers that have not been talked about, something happened to one of the employee's timesheet, and it's a 45 min drive, just to give her signature to the client, and its driving attendants away, and it's a barrier.

Tim Moran: The rules say we can't, so let's change the rules.

Maria R: Online is nice, and some do not have online timesheet submissions, and cannot afford online, and we have to do this by snail mail, and wants to know from Tim Moran what he recommends.

Tim Moran: Paper, online, fax. We do payroll every week.

Maria R: What about attendants who don't have computers?

Tim Moran: If you do direct deposit, we have a period for the timesheet to be due, it takes longer for someone who doesn't have a computer. Timesheets are due two days prior to the pay date.

Kurt Miller: Two items:

#1. Clients are unable to have the control to sign.

#2. U.S. mail has gone now 3-5 days to arrive on time for paper timesheets (snail mail).

Leslie: If we solve the FAS problem, we solve the two signature on timesheet problem.

Julie R: The two signature problem is just bureaucracy and you can't enforce it, if it's online. Anyone who votes no? Change the rule to get rid of two signature requirement and you are responsible to verify it.

Linda A: Opposed.

Tim Moran: Does this include paper and electronic?

John: Change the rule, the two signatures will not be required. And this will be put in recommendation.

Linda A: Votes no.

Passed. And will send this to HCPF in writing.

CDASS in SLS Waiver Update (Roberta Aceves)

Roberta: We convened the SLS task group on March 30th, and F/EA model in the non-DD waivers, keeping CDASS in SLS waiver moving forward. The F/EA model only in SLS waiver we want to move forward, it would constitute a significant change (once the technical issues are resolved and once HCPF has responded). The recommendation is to add respite in SLS waiver and move forward with the change in the waiver.

Gerrie Frohne: The issue including respite, does this go back to PDPPC, before submitted to CMS, so PDPPC can see what we're dealing with? Six strong recommendations were ignored by the IDD division, we compromised making respite a priority. The recommendations of the task group, and willing to reconsider respite, because it is a participant-direction issue.

Leslie: Would Gerrie like to make a motion?

Linda Skaflen: Recommendations are into HCPF and we have not heard back yet, there is a conflict of interest and we want respite to go in there.

Roberta: It will go out for public comment.

Julie Farrar: I want to reiterate what Gerrie said, it feels like we are moving forward with CDASS and choice, the rule was introduced at MSB with respite in a facility, and only get reimbursed for 4 hours instead of 24 hours, and moving to implementation, makes all this work on a systemic level, but it needs to move upwards.

Julie Farrar: We have recommendations from stakeholders, and we need this system change from up and down, just because we say something, doesn't mean the recommendations are taken seriously.

John: any other updates about this?

Roberta: No.

Stakeholder involvement for interviewing for Candie's Position (Sarah Roberts)

Sarah R: We are looking for someone who will join Sarah Roberts in the interview process, would like to interview 1st or 2nd week of May.

Leslie: Agree, there should be stakeholder participation in this selection and because we know the program so well.

Linda A: How many people from HCPF will be there? I was thinking of 1-2 stakeholders.

Sarah Roberts: Two from HCPF and one stakeholder, and the one stakeholder help with the questions to help develop a rapport with this person. Too many people can make it uncomfortable for the candidates.

Leslie: That puts the majority on the state. Leslie would be happy to participate in this.

Linda A: Would you be open to having one advocate and one stakeholder?

Sarah Roberts: Yes, and then reduce the number of HCPF employees, and we can entertain this. As soon as I get the list from stakeholders, I will need to get hold of the candidates and have back-ups.

Linda Skaflen: Strongly recommends the two advocate/stakeholder be people who receive services.

Julie Farrar: The state used to have it as an advocate, and a state employee for the interview process. Is there flexibility helping with the design of questions? Now people with disabilities can apply for state jobs, and it was removed on the description about having experience with the BUS. Have back-up candidates and make sure there availability is there, and get this going ahead of time, give the names and info to Sarah Roberts.

Julie Reiskin: Would be willing to do this the 2nd week of May and would be happy to help if the PDPPC would be okay with this.

Leslie Taylor: Does anyone want to make these choices now?

John Barry: Send me names of nominees.

Linda Skaflen: Hiring over the phone is very difficult, need to have a face to face interview.

Linda A: And be able to give input and questions.

Leslie T: It's discriminatory to do it in the metro area, what if we had skype?

Sarah Roberts: If people have questions and about who will be leading this program from LTSS side with Roberta and get the questions to Sarah, and then on a separate note, if any stakeholder/advocate is interested in being in the interview, let Sarah Roberts or Linda Andre know. Send the interview questions to Sarah.

Mark: Can you send out the old interview questions to PDPPC?

Sarah: No, we can't send out to PDPPC because people have already applied and the state can't release them. Stakeholders can send questions about specific program and interaction type questions.

Leslie T: The interview will be in Denver, and if we have duplicate or new interview questions, send them to Sarah Roberts. This is discriminatory method.

Sarah Roberts: The interview will be in Denver and others can participate by phone or by skype. And if you're interested in being a part of the interview process, let's entertain this, and does PDPPC want to run this through Linda Andre?

Leslie T: Keep the numbers limited.

Sarah R: Keep it to 2 to 3 people.

John B: Who will be the 2 to 3 people from PDPPC to help in this process?

Linda A: Whoever is interested in helping with this process, let Linda A. know. When do you need the names by, Sarah?

Sarah Roberts- By Tuesday, April 28th at 5pm and interview questions of who is interested from the PDPPC and interview questions to Linda A. for Candie's position.

Self-Direction and client Self-Assessment Tool (Grace Herbison)

Grace: HCPF is working with new contractor, interest is in capability and had a lot of participation, the questions seemed like too much, if you were being asked about self-direction, the client being in stable health, and this is only a requirement for CDASS only. We would like feedback about what to provide initially and how to approach it, and Grace will work with Tim Cortez and contractor and bring this back to PDPPC.

Linda A: Tried to do this phone call with HCBS Strategies, and no one heard her, and you could only hear the moderator, and there were loads of people in there for HCBS Strategies.

Julie Farrar: How does it differ from regular service delivery, and how can we work on this, that way the information can be left, make a judgment, if this is something that becomes standard as a part of the assessment process.

Leslie: Is the assessment tool being used by FTP? Who is the vendor re-vamping this?

Grace: HCBS Strategies.

Leslie: We have a good assessment tool but it could use tweaking, what to do with the current assessment tool? We have people working with FTP and with AA degree, occupational therapist and using with assessment tool.

John Barry: HCBS Strategies is a small group and works with a lot of other states.

Grace: Are there any volunteers from the PDPPC that would like to participate with the HCBS Strategies group?

Leslie: Yes will help Grace and Linda A.

Candie: About taking the self-direction module, drafting an introductory paragraph about self-direction, this already happened a while ago, talk to Steve, Gary Montrose, David, and a whole group drafted this paragraph with HCBS Strategies.

Linda Skaflen: What is the stakeholder input process?

Grace: They are attending for the next few months.

Linda Skaflen: Put the assessment tool on the agenda for next month, and discuss other components with this.

John: **We want input about the stakeholder involvement in the interviews, how are things going in the past month, did we miss anything?**

John: Since there is no one in Candie's position yet, is there anything in CDASS and IHSS that need to tell Sarah?

Leslie: Is having some problems with PPL and the FTP's and putting in allocation, one month PPL gave Leslie \$16,000. And confusion with the FTP's, what is the purpose of consumer direct meetings? The FTP's may get paid to drive to Durango, and Leslie is not happy with the consumer direct trainings. Need work with FTP's, and don't just have them only in regions, areas in the southwest, San Miguel county and Miguel County, seem to be behind in training, and getting confused.

Leslie: Let's reconsider what the duties are with Consumer Direct organization and take it on a broader scale, and have better CDASS trainers. Please tell Sarah Roberts.

Mark Simon: Background check, as it stands, we only require in-state background check. For example, for a new attendant from Oregon. Mark figured out how to do a national background check and the FMS was great to do it, and it cost \$12 more, and it was a nominal expense, Mark paid for. Get a background check and get a social history of where they lived, costs \$3, and major omissions, run checks just on the states the new out-of-state attendant has lived in, and not on the whole nation. Mark would like to see all the FMS's make this available to all clients and use some of the client's allocation to pay for this, so client doesn't have to pay for it out of their pocket. Two steps- ask them when we hire them, ask what area, what pay rate, and get someone to maintain a database of the available to hireable attendants.

Maria R: The registry that PPL has is a list of available of attendants, and if you call them, none of them are available on this registry.

Cheryl Vennerstrom: There is a registry of available attendants for Morning Star too.

Caitlin Brady: Per member, per month, allotment that each FMS gets, is there something more we get, because we spend more money?

Gabrielle: The PM/PM doesn't affect their allotment.

Mark Simon: Why aren't we using the provider low-bidding standard? This is what Caitlin is asking, why can Ace\$ do it or Morning Star, a \$30 PM/PM spread in all FMS's?

Bonnie Rouse: That's what the contractors bid in at those price points, and we will take this question to Sarah Roberts.

Ryan.Zeiger: Is there way to discuss the fastest timeline?

Maria R: We appreciate all the searching that Leslie has done about FMS's, send this to Maria R.

Linda A: Would like feedback from PDPPC, what kind of search, and who would be okay in Linda A's co-chair position, and address this next month. Linda A. will be with PDPPC, until find another Co-Chair. John sent out snail mail and electronically about what are the duties of the co-chair position, after speaking with Linda A.

Linda Skaflen: The co-chair needs to be someone who receives services in CDASS or IHSS, and the document is here on the table today and went out by mail.

John: Next month's meeting in May we'll be back at the MS Society.

The meeting adjourned at 4:00 pm

Respectfully submitted by Whitney Ray of HCPF (thanks, Whitney!) and John Barry