

Participant-Directed Programs Policy Collaborative (PDPPC) Agenda

Date and Time: Wednesday, **January 24, 2018 1:00 pm – 4:00 pm**

Location: **Community First Foundation, 5855 Wadsworth Bypass, Unit A, Arvada CO 80003**

Teleconference: **Toll (720) 279-0026; Toll Free (877) 820-7831, Participant Passcode: 308112#**

- Please remember to mute and unmute your phone (press *6)
- Please do not put the meeting on "Hold"

I.	1:00 – 1:05	Welcome & Roll Call	John Barry
II.	1:05 – 1:15	PDPPC Attendance Record/Voting Members	Linda Skaflen
III.	1:15 – 1:25	December PDPPC Draft Minutes: edits, vote	Julie Reiskin
IV.	1:25 – 1:35	Open Forum Topics	All
V.	1:35 – 2:05	IHSS Sunset Review	Erin Thatcher
VI.	2:05 – 2:30	CDASS FMS Satisfaction Survey	Kady Hetherington
VII.	2:30 – 2:40	Break	
VIII.	2:40 – 3:20	CDASS Attendant Billing	Rhyann Lubitz/Curt Wolff
IX.	3:20 – 3:35	Department Response to PDPPC Recommendation	Katie McGuire
X.	3:35 – 3:45	Open Forum	All

Next Meeting: Wednesday, February 28, 2018, 1:00 pm – 4:00 pm

Location: Colorado Health Foundation, Community Room-1st Floor, Denver CO 80203

Reasonable accommodations will be provided upon request for individuals with disabilities. Please notify John Barry at (303) 866-3173 or John.R.Barry@state.co.us or the 504/ADA Coordinator at hcpf504ada@state.co.us at least one week prior to the meeting.

Official Attendance List and up to date Voting Members are identified on the [PDPPC website](#). See the documents, sorted by meeting date.

PDPPC Agreements:

- We are trying to work together and will stay solution-focused
- Be honest, forthright, accountable and respectful
- Step up and step back – this means someone should say their piece but then listen to other comments and feedback and keep an open mind
- Don't repeat what others have said – just say ditto
- Ask people who have not spoken to speak
- Do not use acronyms
- Provide quick background on complex topics at beginning of long discussions
- Stay focused on the Agenda and use a time keeper
- Make this meeting a safe place to talk about issues
- Discuss what is working as well as what is not working
- Allow for flexibility
- Provide consistent follow through and closure to recommendations
- Agenda items requesting information will follow the Communication Protocol. Agenda item ideas for upcoming meetings will be sent to the PDPPC Co-Chairs by the second Wednesday of each month
- Share timely and accurate information with persons not in attendance
- Allow for agreement and disagreement
- Do not personalize anger or mistake passion for anger

PDPPC Voting Structure Approved: June 2012: Amended 3/27/13 : 8/28/13 : 4/23/14 : 9/23/15

Members of the PDPPC are identified in the following groups:

- CDASS participants
- IHSS Participants
- Family Members of CDASS and IHSS participants (employees or not)
- Authorized Representatives
- Advocates
- IHSS Providers
- Single Entry Point (SEP) agencies
- Independent Disability advocates (organizations or individuals in partnership with people with disabilities that specifically advocate for changes with and on behalf of persons with disabilities. Such organizations do not receive Medicaid funding and do not have a conflict of interest specific to LTSS service delivery.
- Employees of CDASS or IHSS Participants
- FMS (Fiscal Management Service) contracted providers
- HCPF

The ability to vote on the PDPPC is based on consistent participant activity demonstrating investment in the process and commitment to the development and implementation of the outcomes associated with the committee's work.

Voting Structure

1. State employees representing HCPF or CDHS in any capacity will not have a vote.
2. Any currently defined voting member must have participated, in person or by phone, at a minimum of three (3) PDPPC meetings. This group is inclusive of:

- CDASS and IHSS participants, family members (employees or not), Authorized Representatives and employees
- Single Entry Point (SEP) agencies, 1 vote per SEP
- Independent Disability Advocates 1 vote per individual advocate or 1 vote per organization
- IHSS Home Health Agencies: This representation cannot exceed 20% of the available and present voting members for any given decision. If it exceeds 20% the IHSS agencies will need to determine who is voting in this circumstance and it must meet the requirements below.
- Each contracted FMS has 1 vote. The person carrying the vote is determined by each contracted FMS but must meet the requirements below.

Any Voting member may have a conflict of interest for specific decisions requiring a vote. "A conflict of interest is a set of circumstances that creates a risk that a personal or professional judgment or action regarding the primary interest of the PDPPC and the role of individual members in the process of PDPPC decisions will be unduly influenced by a secondary interest."

3. Voting must be done by attendance (in person or on phone) at a meeting
4. Votes cannot be by proxy
5. Any new voting members in any of the categories included in #2 above will have a vote after attending three (3) consecutive meetings
6. Three (3) consecutive unexcused absences will result in the loss of a vote
7. Excused absences are given with notification to one of the PDPPC co-chairs
8. After three (3) consecutive excused absences a voting member will have a vote for the fourth consecutive meeting. If not present for the fourth consecutive meeting #5 above must be met.

The goals for the voting structure are to:

- Maintain consistency and knowledge of the issues and recommendations
- Allow new members into the process.
- Prevent any option to “occupy”/“control” any one meeting to get an outcome.
- Maintain a 60% voting participation by CDASS participants, family members (employees or not) and Authorized Representatives.

DRAFT