

# PDPPC June Minutes June 22, 2016

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## DRAFT FOR APPROVAL AT JULY MEETING

**Executive Summary:** The group learned about the rate review process, provided input on the ASMP and one other form. The group made a recommendation that restoration of the FAS was the top priority and made recommendation that HCPF include IHSS expansion in their budget that they send to the Governor.

The meeting was called to order by co-chairs Curtis Wolf and Kevin Smith at 1:00 pm. With both Linda Skaflen and John Barry out Rhyann Lubitz called roll and announced voting rights.

The following were in attendance

Room: Alisha Singleton, Betsy Murray, Brent Salner, Candie Dalton, Curt Wolf, Erica Weidenfeld, Gerrie Frohne, Jeff Epp, Julie Reiskin, Kate McGuire, Kady Hetherington, Kathy Sargent, Kevin Smith, Linda Medina, Linda Andre, Louise Apodaca, Matt Dotson, Rebecca Sturdervant, Rhyann Lubitz, Ryan Zeiger, Sara Horning, Sharita Richmond.

Phone: Adam Tucker, Ann Dyer, Cheryl Vennerstrom, Craig Morrison, David Bolin, Gabrielle Steckman, Hanni Raley, Heather Jones, Heather Kamper, Julie Miller, Kari Vinopal, Kelly Brown, Margaret Proctor, Maria Rodriguez, Marsha Unruh, Renee Farmer, Sivani Rasanayakam, Sarah Hoerle, Stephanie Holsinger, Tim Moran, Valerie Baker.

Rhyann said she wanted to acknowledge the great work Linda S. does on a regular basis regarding attendance and voting. There were no concerns or challenges to the list read of who is eligible to vote and the attendance and voting policy were discussed.

The following are excused: Linda Skaflen, Leslie Taylor, Mark Simon, Kirk Miller, John Barry, and Jason Smith

**May Minutes:** May minutes were sent out: Maria Rodriguez said there was something in minutes about her discussed "docking" attendants and that is not what she meant. Her exact words were "is there anything that can be done about this (this being attendants breaking things) regarding pay but she did not use the word docking. She wanted to delete the last two sentences of the page 7 third from bottom bullet. The group agreed to remove those two sentences for the approved version of the minutes.

There were no other edits. *Kevin moves to approve the minutes as amended -Curt seconded and the motion carried unanimously.*

Rhyann mentioned that we will need volunteer to take minutes in July and August.

### **Open Forum #1:**

Linda Andre said that we need to get back to discussing Funds for Additional Support or FAS. There was STRONG AGREEMENT.

Consumer Direct: Katy said in the last four weeks Consumer Direct (CD) and Fiscal Management Services agencies (FMS) have received conflicting info on SUTA exemptions. SUTA= State Unemployment Tax Act. They did research and found that parents employed by adult child are NOT exempt from SUTA in Colorado. All materials were updated. SUTA was not being withheld anyway. They are still exempt from federal exemptions (FUTA) and the SUTA exemption applies others with complex care live in situations. Anyone that wants an updated manual should ask Consumer Direct. They can send it out by mail or give you link for online. Linda Andre and Sara both asked for manual.

Gerrie Frohne asked for clarification of who is exempt from what: She was given a sheet that explains this and info is on CD website. The exemption based on who holds the FEIN (Federal Employer Identification Number).

This may or may not be the client. If there are questions on a specific situation people should contact Consumer Direct.

Rhyann introduced Erica Weidenfeld who is the new participant directed liaison replacing Grace. Erica has mostly worked in the CCB system. She worked at Envision and Foothills and RMHS. She is excited about the IHSS program and she has personal experience as being an AR for her brother in IHSS. Rhyann also announced the other position has been filled and that Mallory Cyr is joining the team replacing Bonnie Rouse. Julie Reiskin and a few others said that this was a great choice.

**PDPPC agreement time frame discussion:** We discussed last month that we wanted to have limits on time regarding how much time we spend on a particular topic at any given meeting or overall. We want to make sure that we let people talk-- but not go on and on and repeat the same issues. The specifics are still a work in progress. There was more discussion about three or five minute limits and when they should or should not be applied. Julie asked if we could allow the co-chairs or even members to "call the question" to stop discussion on a topic and either vote or move on—and if that was called by anyone then we would let the whole group vote on if they wanted to continue a specific discussion.

Linda said people can say a lot in 3 minutes. It is co-chair discussion.

Curt said he agreed with Julie and there is a way to figure out dissention in the room and wondered if we should allow to have chairs say "you are on the clock" –then the group can vote on whether or not we start implementing time limits. Curt said that the details still in works and they will come back to next meeting with a better plan.

Maria said that was concerned about how it would be implemented. She said that all rules need to apply to everyone including the co-chairs. She said it was often a co-chair that goes over the 3 or 5 minute time limit. Rhyann said it is good that we have two co-chairs so if there is a problem they can police each other.

**Attendant Registry Status:** Rhyann announced that this is moving along and the meeting on this is tomorrow (June 23) at 10-:30 at HCPF – only 7 people expressed interest and she wanted to make sure that there were no other people interested in the development.

**CDASS Forms:** Rhyann said that there were two forms she needed the group to review:

1) Attendant Support Management Plan (ASMP\_-Form was provided before the meeting: There are some changes suggested by consumer direct (CD) based on consistent errors and confusion they are seeing.

a. Linda suggested that at top add ASMP after the words  
Attendant Support Management Plan—Rhyann will change this.

b. Changes proposed by CD:

i. Page 4 under par 4 limitations on payment to family:  
Separate two sections by a line. Often people only answer to one—they have to say yes or no to spouse and family member. Julie asked if we can merge and ask only if we say family—and include spouse. We also make it clear that question pertains to the client and who the client hires, not the AR. In other words if the AR hires her spouse or relatives but they are not related to the client that is not a 40 hour limitation. Only relatives of the client have the limit.

1. Linda asked if the hour limitation differed based on if the family member lived in the home. The answer is NO.

2. Mesa County asked does it matter if there is extraordinary care. The answer is that this is considered if person lives in home regarding shared space but that is an issue discussed during allocation development. Family members are

limited to 40 hours a week of pay regardless of anything else.

- ii. Page 6 budget: Bolded box –often the form does not have monthly allocation so that was bolded Paragraph at bottom explains that managing allocation and budget is ongoing task.

1. Linda A said she had some confusion about how the PPL statements look and they make it hard to follow. Jeff Epp agreed. He said there is confusion about what the FMS is supposed to do. Linda will send Sharita what she was talking about and they will figure it out.

2. Shivanni said she is fine with change but last sentence has grammatical problem (change you to your).

3. Heather said extraordinary care should be in ASMP for any family members in the home.

4. Curt said that in the training manual it says the same thing. There is confusion about what comes from the case manager what comes from FMS. Katy said that the FMS sends the statement out but that she will talk about building up the manual. This will also discuss ability to access online expenditures.

5. Jeff Epp says that there is not information on online about the different FMS agencies except for the FMS comparison sheet. Katy said she will beef up the chapter, stress this more.

c) Julie made comments about the form

- 1) Could it be shorter for allocation changes? Rhyann is working on short form?

2) Do we need first part of care needs in paragraph form and the checklist –Trainers said they liked having both and it was important to have this to help people think about their needs.

3) Do we need as much or anything on page 5 other than what is your backup plan? Curt said that the first few items on page 5 people can go through quickly. He said asking these questions about emergencies and such is important as it makes people realize they are in charge of managing backup. He said he thinks people should think about these issues (example, unexpected illness) and form is place for trainer to talk about making sure client can manage these situations. Curt said people thanked him for having a plan when they were caught in Lyons flood. There are a lot of emergencies and people have to plan. Jeff Epp said important to have first responders know where people are—PWD should notify first responders. Many people do not have medical form filled out and if in ambulance people do not have information about allergies, etc. Maria said in broader sense it is easy to sit in office and make rules and criticize but it is different in reality. She said that there are regulations that employers and ARs are supposed to follow and it is sometimes not as easy as it seems talking about it. She said that we do not have functional registries that work for people in the rural areas. She said it is not easy to find employees in the rural areas but she thinks that these are problems that programs need to address. She said there seems to be a disconnect amongst the people sitting around in offices and make rules that people have to follow in rural Colorado. Curt said there is a meeting regarding an attendant registry tomorrow. He said Maria was welcome to attend. Sarah H and Linda A. both thanked Consumer Direct for the registry.

Louise –agreed that new clients should give thought for potential of what could come up. She said that this is applicable for rural and urban. She gave an example of her apartment building when a flood was caused by a fire. The water was so deep it knocked her backwards. This was before she had CDASS so she had to call an agency to ask for help and the attendant quit on the spot. She called the emergency line for the agency

and they said there was nothing they could do. She called the fire department to say she could not clean up and move around her unit. They sent six firemen to her apartment and did solve the problem. The same issue happened again in current building but she was outside and had to figure out what to do but with CDASS she has control and had thought through what to do ahead of time.

Based on this feedback Julie withdrew suggestion to change or reduce page 5 of the ASMP.

**RATE REVIEW PROCESS:** Lila Cummings from the HCPF operations section was introduced (via the phone). She gave the group an overview of what she does and how rate reviews work. She is the rate review stakeholder relations specialist. The process is new and was created by 2015 legislation. They are about finished with reviewing year 1 services, will begin working on what is reviewed in year two and so on. This process is a more comprehensive and transparent approach. Before this process there were targeted rate increases proposed by HCPF –or the legislature might increase a rate here or there--and the rate review process replaces targeted rate increases. The legislation created the process for these reviews and the legislation also lists who must be on the advisory committee. There are 24 members with specific expertise. Committee reviews reports, take public comment and creates space for stakeholder comment. The Committee also provides HCPF with recommended process improvements with rate review.

Rate setting narrow the process that is always going on and addresses specific codes.

Rate review looks at full complement of access and utilization of broader services.

HCPF is not asking committee to look at every single code. There are over 17,000 codes; the Committee does not review every single rate. However, they review in aggregate, they can provide comments or make suggestions

but HCPF is not asking stakeholders to review each code. Each year, HCPF authors an Analysis Report (due May 01) and a Recommendation Report (due November 01). There is 5 year cycle that is on HCPF web site. Lila said that the codes about CDASS are coming up next year so it is good that we are discussing now. She said that the internal process of pulling data will start soon and that engagement with stakeholders will start next fall.

Internal analysis provides analysis of utilization, access and quality of services (this is for all services). In the first year, they analyzed 6 services. They were home health, private duty nursing, laboratory services, physician-administered drugs, EMT (emergency medical transportation), and NEMT (non-emergency medical transportation).

Others will be reviewed next year:

They look at utilization around the state which often varies by area. They have an actuary consultant firm that specializes in Medicaid and Medicare research. They also look at whether reimbursements are sufficient to allow for provider retention, client access, and reimbursement of high valued services. That language is pulled directly from the statute. That first report was 120 pages. The committee is asking for improvements on writing the report for year two.

Another report due on 11/1 to JBC and advisory council and that report is the recommendation report. The committee will make recommendations and HCPF will investigate what legislative authority they need, what budget changes they would need, etc. to implement the committee recommendations. HCPF will then write its own recommendation report. So there are two recommendation reports:

- 1) From committee informed by data and stakeholders that makes recommendations
- 2) From HCPF responding to recommendations

This is the first year and they are still working through the process of the committee. She said that they are looking for stakeholder involvement as

they host meetings that pertain to our areas of expertise. They want us to make public comment. This is structured during committee meetings but there are informal opportunities rate review information sharing sessions. The sharing sessions are focused on smaller issues and allows for a group to take a deep dive into the issue. They can ask what issues are and answers questions. She said she would love providers\* to attend meetings, submit comments, both formal and informal and to submit documentation of codes we want examined. The rate review FAQ was in the meeting packet.

\*\* In this context providers means clients or AR//the employers but can also include attendants

#### Questions:

- Sara—when is next rate information sharing session? Answer: Those dates are not set yet. There is no list serve so interested people have to go to website to figure it out. There is no committee meeting set yet, and when there is that meeting will focus on process improvements. It is likely that this committee meeting will be in late August. Lila said that when our services come up we will be noticed ahead of time though Rhyann.
- Renee asked if we could get website links. Yes they were on the document we got with the notice for this meeting.
- Maria asked if these meetings accessible other than through the internet. Answer: Meetings are at the department and there is webinar and phone in access. John Barry will send this out to everyone when there is a meeting. If people want the committee to consider information this information is needed at least two weeks before the meeting.
- Curt this is a major issue---seems like they are months out and asked if they are prepared to have anything presented before the next long bill? He said in terms of year 2 services going through the process and going to JBC seems like it could not happen until the following

fiscal year (17/18). He was concerned because agencies that provide the same service got increase without going through a process last year. Answer: For all budget related issues the Department will still work through the governor's office. Comment that this is a disconnect and that year 2 services will not get in the long bill.

Lila said on November 1 there will be 2 documents released about budget and rates

1. Governor's budget –HCPF recommends to Governor and his office takes all agency recommendations and does what they feel best for whole state in the budget they propose to the legislature. They cannot discuss what they recommend before it is released on 11/1
2. Rate review recommendations report

The JBC understands these two might not align but that is OK. There are separate processes between the two.

Maria said she would like contact information for Lila. This was in the material but again the phone number for Lila Cummings is 303-866-5158.

The website for the rate review committee is

<https://www.colorado.gov/pacific/hcpf/medicaid-provider-rate-review-advisory-committee>

**2<sup>nd</sup> Form to review**: is the Acknowledgment of Travel and OT responsibility: This form was in material sent ahead of this meeting. Rhyann did a lot of research and worked with a small committee on this. This is geared towards those who direct and manage care for more than one person. This is for the AR population. The group reviewed the form and Rhyann said she was seeking suggestions for improvement.

Comments/questions:

- Alicia: Should this be on file by case managers? Answer: No it will be on file with FMS
- Julie and Curt suggested that it be made very clear that you cannot allow someone to share attendants and incur overtime.
- Gerrie asked about the rule of not allowing more than 12 hours in a day without paying overtime and said that we need to define a day. Is it midnight to midnight or any 24 hour period?
- Answer: There is guideline in state rules re 12 hour days but it needs to be made clearer. The state rule says 24 hours versus midnight to midnight. Candie said she did not remember it this way.
- People were reminded that there are no shared attendants there is no issue—even if there is an AR.
- Curt said that the Department of Labor wants people to get their time and a half for over 40 hours.

Since there seems to be lack of clarity on some rules Rhyann will do more work on it and bring back either next month or the following month. She is open to comment in the meantime, her goal is to give people the right guidance, not scare people from being an AR.

### **Future work items:**

Last month we talked about things we were pursuing now that we were mostly done with audit and through most of fair labor standards act adjustments.

Last month the following issues were raised:

- FAS
- SLS expansion
- IHSS expansion
- Expand consumer direction to other service options

Rhyann said that the work plan is similar in terms of time, difficulty, etc. She also said that Julie Farrar had raised the issue of CDASS in SLS and that we need more peer trainers and to explain that the term AR means

something different in the DD system so we need to educate around that concept. AR training is also something that has been mentioned.

Rhyann said that Adam Tucker will be working on CDASS and SLS taking over for Roberta and after the waiver approval he will figure this out and work with folks on how to do this. Gerrie asked about IHSS and SLS. The bill to do this was killed in the last hours of the legislative session. Adam will come to our meeting next month.

Katy said that she went to the Alliance Summit last week in Breckenridge and presented about consumer direction and got a very positive response. She said that people are anxious and excited for this and the summit was a good opportunity to share in more detail.

Rhyann asked how we prioritize all of these items.

Question: Would CFC council be part of SLS expansion? Julie said that while we should loop in but CDASS and IHSS as they are today but for future it should be CFC—however the CFC works out in terms of what personal care is in the state plan. CFC will affect CDASS but should only expand the reach.

Gerrie said that during the waiver redesign of comp and SLS together she felt that to expect they would get involved in increasing number of services under CDASS would be too much. She said unfortunately no one is looking at CDASS for COMP waiver.

People want more consumer direction in respite and what they do during the day –there is a lot of pushback.

Gerrie reminded the group about CLAG—IDD wanted to do the first model of waiver simplification. Rhyann said that Sarah Hoerle is involved with LTSS waiver simplification and Gerrie will invite her to meetings

One other question is “How long have some things on the list been pending in the system and should that affect priorities?”

After discussion *Linda Andre moves Julie Reiskin seconds making return of the FAS program the top priority. This motion passed unanimously.*

Candie suggested following up on IHSS in all other waivers. She said that the expansion report was submitted and that gave HCPF authority to expand. She asked can we do anything other than legislation. Ryan said he thought there are steps HCPF can take. It was suggested that PDPPC makes recommendation to HCPF to include IHSS expansion in the budget. *Julie Reiskin moved and Ryan Zieger seconded that we recommend that HCPF put IHSS expansion in the budget. This passed unanimously.*

**Comprehensive analysis of consumer direction:** This is the one remaining item from the audit. This will involve looking at everything, including but not limited to health benefits, ER visits, hospitalizations, DME, and more. Rhyann is working on a survey. They want to survey 500 clients in CDASS and 500 clients getting agency services. Ryan asked is survey designed, and will it come to group first? Rhyann said that it is modified NCI survey so already vetted for reliability and she is seeing what stakeholder input has already been done as they were doing client input. Julie asked about if they are looking at length of time clients were on various program (CDASS or agency) and Rhyann said she was not sure.

Rhyann said it would be a mail survey

## **Public forum #2**

- Maria said a survey done only by email excludes people that do not have internet. Rhyann repeated that if they did a survey it would be sent out by mail
- Renee asked about committee for attendant registry –Rhyann provided info to group
- Curt said he was disappointed that PPL did not mention PDPPC this month in the newsletter and asked if other FMS agencies are sending

notice about PDPPC. Sharita said last month they did not have room but it would go back on future newsletters. Linda A. suggested just doing a small insert. Rebecca from Morningstar said she would try to get it on the Colorado page.

- Louise said that for a few months she got PPL newsletter 3 days after the meeting and was taken off of the list by not showing up because she did not know.
- ACES\$ does not do a monthly newsletter. Sarah requested that ACES\$ to put this info on their website. Katy will make the request of ACES\$ Jeff said that PDPPC should be mentioned in the training manual. Katy said that Consumer Direct will also post info about PDPPC on their website

The meeting adjourned a few minutes before 4:00 PM.

Respectfully submitted

Julie Reiskin