

PDPPC Meeting Minutes August 26, 2015

Executive Summary

The meeting covered a review of IHSS data and request to have the group meet directly with budget staff, an explanation on the timing of adding the CDASS option in the Supported Living Services (SLS) along with several CDASS topics including the two-signature requirement going into effect 10/1, discussion of a client run attendant registry, the audit follow up, rate increases and discussion of the Google group run by PPL.

John Barry and Curt Wolff called the meeting to order at 1:00 PM

Present on the phone were: Margaret Proctor, Stephanie Holsinger, Kelly Morrison, Candie Dalton, Missy Tichha, Diane Wald, Heather Jones, Craig Morrison, Renee Farmer, Sheryl Venerstrom, Hanni Raley, Sueann Hughes, Tim Moran, Kelly Brown, Caitlin Brady, Mica Bessmanin, Cathey Forbes, Christy Michaels, Lisa Dutkiewicz, Julie Farrar, Alisha Singleton, Leslie Taylor, Roberta Aceves, Maria Rodriguez

Present In the room were: John Barry, Debbie Miller, Jennifer Martinez, Sharita Richmond, Anaya Robinson, Heather Kampar, Keith Copen, Gabrielle Steckman, Curt Wolff, Grace Herbison, Bonnie Rouse, Rhyann Lubitz, David Bolin, Kevin Smith, Kirk Miller, Ryan Zeiger, Christina Ulmer, Jenny Smith, Brent Salner, Jeff Pratt, Kari Vinopal, Jason Smith, Linda Skaflen, and Linda Medina.

Guests: Betsy Murray – Lobbyist with home care association

It was announced that we are going to be allowed to stay at the MS Society— thanks are due to Sharon O'Hara.

Voting Rights/Attendance: Linda Skaflen reviewed voting rights and attendance and organizational representatives for voting purposes were confirmed. If anyone's name is spelled wrong please email Linda Skaflen at lskaflen@arcadams.org or call John Barry at 303-866-3173 INSTEAD of trying to manage name spelling during minute corrections. The attendance sheet will be changed to reflect only the past nine months because there is too much data to do more than that.

Agenda: The agenda was deemed acceptable.

July Minutes— The minutes had a question mark about who from Consumer Direct attended: It was Kari Vinopal and Sherri Vogart: Linda will correct on her sheet and John will change in

the final minutes. Cathey Forbes had several changes including using Department capitalized, and the spelling of her name. John Barry noted all changes and they will be made in formal minutes. Christina Ulmer said she felt the changes were not necessary as they were more a reflection of personal speech. Tim Moran from Acces\$ should be added as present.

David Bolin moves and Keith Copen seconds that the minutes are approved as corrected. Carried unanimously.

SLS: Roberta Aceves was asked to speak about the progress of getting CDASS into SLS:

Background: The Legislature and department have determined CDASS should be available to people in The Supported Living Waiver (SLS). The waiver amendment was submitted to CMS on 8/6. In the meantime the Department is working on rules and sent them out for public comment. That comment period ends August 29th. After 8/29, HCPF staff will review comments and then make changes if appropriate. Then HCPF staff will send final rule through clearance and then present to the Medical Services Board (MSB). This means it will not even be in place by October but the whole implementation is pending Center for Medicaid and Medicare Services (CMS) approval. The Department is trying to get everything else ready so that when CMS approves we will be ready to implement.

Leslie asked if we agreed to have the rules process occur before the waiver was approved.

Answer: Yes we did several months ago. Leslie said the minutes should reflect that PDPPC approved having HCPF begin the rule process before there was waiver approval so it is perfectly clear that HCPF is working with the community.

IHSS UPDATE: GRACE HERBISON:

In April the Department submitted a request to expand IHSS to four HCBS waivers: They were Supported Living Services (SLS), Children's Extensive Support (CES), Brain Injury (BI) and Community Mental Health Supports (CMHS) waivers. PDPPC then asked questions through our own stakeholder process. A document which was provided before and at the meeting was sent out with answers. This document had to do with cost analysis. The study looked at various clients before and after receipt of IHSS and what they used in terms of other services.

Questions and discussion:

Ryan: CHCBS did all clients in pre group have access to a waiver before they used IHSS or did they have straight Medicaid? If they had waiver access and for what amount of time?

Ryan: How did overall utilization go up and what happened? What are the claims breakdowns? Where does the \$69K come from because it seems like there were more costs or even hospitalizations with IHSS and this is not his experience as the largest provider? He said it looks like there are very expensive clients dragging average up instead of using median. He said we need to understand how this is distributed and asked if they could break the data into

segments of \$20,000. This would give number for how many clients under \$20K a year, how many between \$20-40K a year, etc.

Linda M said it would be helpful to clarify what services children on CHCBS were receiving given that before IHSS there were no services other than case management.

Linda S. said that the small IHSS work group needs to meet with budget directly so we do not constantly have to have Grace be the middle person. Even though she has done a great job, it is not efficient communication to have us share info at a meeting, and then Grace has to come back and explain it to budget, get the answer from budget and report back to us and have us ask more questions. Each step is a month or longer. Linda Skaflen moved and David Bolin seconded that we formally request to meet with budget. We will ask the questions ahead of time so they can prepare. The motion carried unanimously.

Questions are due to Grace or John in two weeks or September 9th

Linda S: Time frame for IHSS implementation was in 2018—waiver simplification that was supposed to include consumer direction in all services is to be implemented in 2016. She does not understand why do IHSS 2 years later?

Ryan asked breakdown for EBD as well.

David this is a very slow implementation for a program for people who have a hard time directing their care and do not have an AR and cannot do a budget. He and others did not understand why is it taking so long to submit waiver amendment when bill was passed in 2014? Why have they not even submitted to CMS yet?

David moves that we make a recommendation that we decouple IHSS form other issues in waiver approval process. This was seconded by both Ryan and Leslie. The motion is to just do amendment for HB 14-1357 to make the IHSS changes (relative personal care, services in the community, waiver expansion, allow spouse to provide care and allow client to decide level of nurse oversight).

Motion carried unanimously. David will write up and email to Curt for formal submission.

Anaya also pointed out that the nursing facility data does not make sense because we do not know how long the person had been in a facility. She said in the transition program IHSS is highly utilized because most home health agencies will not serve these clients. She said and others agreed that it would be good to compare rates between the same amount of time for people in facilities and IHSS.

Grace said that an IHSS workgroup is needed again for implementation of a few programmatic changes. This includes determining the level of nurse oversight and allowing clients without an AR to participate in IHSS. Also forms have not been updated in a decade. Grace also reminded

the group that the changes have not been approved by CMS, so it may be a while before the group meets. She wanted the following mix:

-2 clients, 2 agencies and 2 case managers

The group selected the following to participate:

Agencies Ryan and David,

Clients Kevin and Dawn Russell—if either of them cannot do it Christina Ulmer said she would.

For case managers Jenny said Colorado Access will send someone and Heather Jones said Mesa would participate. Linda Medina offered if a CCB perspective was needed and Leslie suggested approach SEP in Montezuma to get a rural perspective.

CDASS Issues: Rhyann led these discussions:

- 1) **FAS response:** This group made a recommendation to implement the Fund for Additional Services or FAS which allows people to make certain approved purchase of goods with saved money. Rhyann said that before implementing this we have to address the audit findings. She said she understood people were not happy with another delay but the fact is we need to address the audit.
- 2) **Google Group Discussion:** There have been questions about what is the Google Group, who runs it, etc. This is a group run by PPL. It is an online forum. PPL Moderates the posts. Anyone can post but PPL moderates what is actually posted.
 - a. Leslie says she was banned from the group
 - b. Leslie was also concerned that protected health information was being put on the site and that people may not be aware of this, she gave the example of a question that was posted for users of the site saying “what do you do all day?” She said that many people in answering that question would unknowingly disclose a lot of information about their disability and was concerned about this. She also felt a moderated group by any FMS is not appropriate. Leslie said there is an unmoderated group available on YAHOO that has been there for 10 years.
 - c. Question as to if this is a conflict of interest to have paid PPL staff moderate and if there is a moderated group should that be run by HCPF.
 - d. Jennifer from PPL wanted to clarify intent of the Google group. It was created some time ago and brought to PDPPC and department and the purpose was to give the community have online forum to discuss questions. The group is open to anyone with interest in CDASS including clients, case managers, and even others. There are no restrictions other than rules related to posting such as HIPAA and make sure information is accurate. Gabrielle said it is for anyone even a private pay client who may want to know how to deal with hiring aides. She said it is for people interested in consumer direction to share info and learn from each other.

- e. Sara H asked for link to group
 - f. Leslie no one should own a group and at the very least PPL should put disclaimer on the group site that they are FMS.
- 3) **Rate changes:** The 30 day notice has been sent to clients for .5% increase. This is across the board for all CDASS services effective 10/1/15 HCPF has notified case management agencies and FMS vendors regarding the rate change. After the notice from HCPF which is generic you will get notice from your case manager that gives you the new monthly and annual CDASS allocation. . Authorized Representatives need to ask clients to give them the notice because notices are mailed to the clients, not the AR. Rhyann is doing a SEP technical assistance call in early September.
- a. Leslie asked will this increase taxes? Julie answered no this does not affect show me the money so does not change tax payments.
- 4) **Targeted rate increase work papers** were sent (this is the paperwork related to agencies trying to get a 9% increase for personal care and homemaker that would exclude CDASS) and if people have not read them they should. Those who read them indicated that they understood them and that they were helpful in identifying what happened. They are online at the PDPPC website.
- 5) **2 signature requirement:** Since Acces\$ and Morningstar are already requiring this PPL is the one FMS that has to implement a change. PPL has gone forward with noticing. Since we cannot change this it is really important that we spread the word and make sure all attendants and clients know what they need to do.
- a. Leslie asked if only people on electronic timesheets are signing up for this particular issue effective 10/1 referencing a communication from PPL that is titled "E-timesheets". She wanted to know if this was only for electronic and will PPL still accept paper timesheets faxed. Jennifer said that PPL still accepts fax and they have always had to have two signatures on paper timesheets and that stays the same.--
 - b. The way it works is attendant fills in hours and client or AR approves. There was discussion about reversing the order---Rhyann said she would check to see if this was permissible by HCPF (she did after the meeting and learned HCPF legal will not allow it because HCPF legal views attendants as Medicaid providers).
 - c. There was a comment that we tried to do this 5-6 years ago and it was a disaster--- --aides do not know what goes where, they care about hours---it is not going to well this time. Rhyann said she understands but not able to change this so that the big issue is to make sure the messaging is out there so people implement this change ASAP.
 - d. There was a discussion about whether the client should be given the login information for the attendant portal. Julie said that in most employment situations the employer or supervisor has all passwords that the employee may use

in her or his duties so yes, client or AR should absolutely have attendant login info.

- e. Renee asked if there can be a box where attendant can just check YES this is accurate (or employer can just check yes). PPL will ask IT if that can be done.
- f. AR issue is still a problem--what if they quit? It was agreed that this is a problem and goes beyond this specific issue.
- g. Suggestion that for the first month or two there are two extra days to submit

6) Audit Follow Up:

- a. Rhyann drafted 2 attendant protocol and reached out to stakeholder group. She also reached out to a few others because no clients were on that subcommittee
- b. Another meeting is tomorrow re task sheet and management plan and third group is meeting Monday.
- c. Rhyann asked if we could shorten next meeting and do subcommittee work. After discussion it was agreed that Rhyann and Curt will see if they can make it work to have a subcommittee on the same day and will let us know.
- d. If people want to review protocols email Rhyann and John Barry

- 7) **Attendant Registry:** Each FMS has to have a registry. Christina Ulmer volunteered to create a client driven registry. Before she does the work she wanted to know if we wanted a master list. Is having one for each FMS a specific competitive advantage? We want the FMS to do what they can to compete. Many people felt that a client driven one that went across FMS agencies and that could be searched for area of the state, hours desired, any restrictions, etc. would be really helpful. Leslie mentioned that her SEP keeps one. Julie said she likes the idea –said it would be great to be able to identify features like geography. Craig mentioned that Acces\$ has a product that does all of this. Christina said she would like a couple people to help volunteer help. Rhyann is pricing this out to see if the state can do this as a contract through some entity. Christina is willing to do a client driven list as a volunteer—if anyone wants to help reach out to Christina directly.

New Business/Public Forum:

- John Barry asked about changing the schedule for the holidays. After discussion and a motion by David seconded by Linda Skaflen the November meeting will be on the 18th and the December meeting will be on the 16th. Motion carries unanimously. John will check availability of room and if that works he will send out a revised invitation.
- Minutes and Attendance: John said that the same people have done this for many months as volunteers and asked if anyone else wanted to take over either attendance or minutes: Sara Horning would be willing to help Linda with attendance. Julie and Linda both said that they are willing to continue doing the work but cannot promise to have the work done early. This may be a problem with snail mail. If anyone is interested in

participating to let Rhyann or John know. Linda will write up all that goes into attendance

- Cathy Forbes asked is it mandatory that HCPF take control of registry, can attendants do it on their own. Answer is that anyone can do what they want but there is already a volunteer doing one that is client driven.
- Bonnie said that it may be Conflict of Interest (COI) to have FMS as voting members. Julie said our policy has been that they should declare any conflict—once a conflict is declared they cannot vote on that specific issue. Gabrielle said should it apply to all companies—we already have COI statement and process that should apply to all companies involved.
- Kelly Tobin suggested we have a key for the attendance list to understand who is a client, who is from FMS, who is from IHSS agency, etc.
- Debbie Miller said she has an issue with SEPS changing allocations and not letting her know. This has happened more than once with people where she the AR. She wanted to know how they can change midstream. Rhyann said they are working with FMS vendors on all of this. Also please notify your SEP agency administrator if your case manager is changing your task worksheet/allocation without notifying you. Julie also pointed out that when there is a change in the allocation for any reason the AR is not notified. Clients should know to get their AR any notices and information.
- Leslie wanted to thank John Barry for work on contracts with out of state medical care providers.

The meeting adjourned at 4:00 p.m.

Respectfully submitted

Julie Reiskin