

Olmstead Advisory Committee July 20, 2016 Meeting Summary

Department of Rehabilitation, Room 242
721 Capitol Mall, Sacramento, California

Committee Members Present:

Brenda Premo (Chair)	Mike Humphrey	Robert Taylor
Patricia Blaisdell	Kathy Kelly (Phone)	Greg Thompson
Mareva Brown	Sunny Maden (Phone)	Ed Walsh
Richard Chambers	Jim McAleer	Janet Morris (Phone)
Susan DeMarois	Peter Mendoza (Phone)	Marty Omoto
Deborah Doctor	Ellen Schmeding	Michelle Rousey
Barbara Hanna	Timothy Schwab	

State Staff Present:

Secretary Diana Dooley
Eileen Carroll (DSS)
Pete Cervinka (DSS)
Lora Connolly (CDA)
Jennifer Harris (DDS)
Jennifer Kent (DHCS)
Jim Knight (DSS)
Marko Mijic (CHHS)
Joe Xavier (DOR)

Agenda Item 1: Welcome and Introductions

Committee Chair Brenda Premo called the meeting to order and welcomed attendees. Secretary Dooley welcomed the Committee Members. She also acknowledged the contribution of Laurie Hoirup and asked for Committee Members to join her in a moment of silent to reflect on her life and work. Committee Members adopted the minutes from the March 16, 2016 meeting.

Agenda Item 2: Updates from the Health and Human Services Agency

Secretary Dooley noted that the FY 2016-17 Budget Act was passed on time, which provided modest increases in a number of areas within health and human services. The Secretary provided an overview of the following items included in the Budget Act.

Department of Health Care Services

- **Medi-Cal 2020 Waiver**—The Budget includes \$2.2 billion in federal funds for the new Medi-Cal 2020 Waiver. California and the federal government reached an agreement on the Section 1115 Waiver renewal that began on January 1, 2016. The waiver includes a number of initiatives to improve health care quality including Public Hospital Redesign and Incentives in Medi-Cal, the Global Payment Program, Whole Person Care Pilots, and the Dental Transformation Initiative.

- Institutional Deeming—The Budget includes \$1.1 million General Fund to provide transition assistance to approximately 433 children currently enrolled in the Home and Community-Based Services Waiver for Persons with Developmental Disabilities. Under federal law, these children will likely lose their Medi-Cal eligibility with the transition of Behavioral Health Treatment from a waiver benefit to a state plan benefit in March 2017. The assistors will facilitate enrollment into appropriate, comprehensive health coverage.

Department of Social Services

- Restoration of IHSS 7-Percent Reduction—The Budget includes \$265.8 million General Fund in 2016-17 to reflect restoration of the 7-percent reduction to IHSS. The restoration remains in effect during the duration of the managed care organization tax, which is scheduled to expire on June 30, 2019.
- IHSS Overtime—The Budget Includes \$437.3 million General Fund in 2016-17 to reflect costs associated with implementing federal requirements regarding overtime. Exemptions from state limits on overtime usage will be available for live-in family care providers who, as of January 31, 2016, reside in the home of two or more disabled minor or adult children or grandchildren for who they provide services. A second type of exemption will be considered for recipients with extraordinary circumstances and granted on a case-by-case basis. Under either exemption, the maximum number of hours a provider may work cannot exceed 360 hours per month.
- Supplemental Security Income Outreach—The Budget includes one-time funding of \$45 million General Fund to establish a county matching grant program designed to provide outreach to homeless person with disabilities who may be eligible for disability benefits programs.
- State Supplemental Payment Cost-of-Living Adjustment—The Budget includes increases of \$36.5 million General Fund in 2016-17 and \$74.8 million General Fund in 2017-18 to reflect a 2.76- percent increase to the State Supplementary Payment portion of the Supplemental Security Income/ State Supplementary Payment grant, effective January 1, 2017.
- Adult Protective Services—The Budget includes a one-time augmentation of \$3 million General Fund in 2016-17 to expand Adult Protective Services training for county social workers.

Department of Development Services

- Community Services—The Budget includes augmentations totaling \$337 million General Fund between targeted investments in the developmental services system (\$50 million) and the additional funding provided in Chapter 3, Statutes of 2016, Second Extraordinary Session (ABx2 1) (\$287 million).
- Developmental Center Closures—The Budget provides funding and authority to: (1) extend special managed care provisions to Medi-Cal eligible individuals that are transitioning from developmental centers into the community; (2) provide an exemption to allow developmental center employees working at facilities slated for closure to go through the process of becoming community-based service

providers; and (3) provide retention incentives for developmental center staff during the closure process to maintain services during the transition.

Agenda Item 3: Updates from the CHHS Departments

Department of Social Services (DSS) Deputy Director Eileen Carroll provided updates on IHSS program changes. She noted that the minimum wage increase will take effect on January 1st and overtime pay is approved; approximately 22% of providers receive overtime pay. Ongoing outreach has significantly reduced violation errors and the trend continues to decrease. Family member or guardian caregivers and non-family caregivers with extraordinary circumstances are exempted from violation under prescribed guidelines. All seven (7) Coordinated Care Initiative (CCI) counties will be under the California In-Home Supportive Services Authority (IHSS Statewide Authority) beginning in August. The Universal Assessment Tool process is in the final development phase and will be piloted in the first quarter of 2017.

Department of Developmental Services (DDS) Assistant Deputy Director Jim Knight discussed the DDS's budget; a major portion is marked to provide direct services to consumers. Funding levels are divided by consumer need in order to channel funds proportionately. Investments are occurring in Competitive Integrated Employment (CIE) by means of incentives and internships. Funding is also being used to purchase service disparities, seek modifications to the Home and Community Based Services (HCBS) program, and to provide wrap around to support consumers moving to the community and consumers already in the community. New models of care are in development as part of center closures and regulations those models are being finalized.

California Department of Aging (CDA) Director Lora Connelly reported on CDA's budget that includes a one-year augmentation for the Home Delivered Meals program that helps consumers transition from institutional settings and remain in their home. A Letter of Intent has been issued so providers can modify their contracts. She also discussed the Adult Day Health Care and Community Based Adult Services (CBAS) programs, which is now a managed care benefit as a result of the Darwin vs. Douglass lawsuit. Workgroups were formed to address quality and compliance issues for both programs. Long-term implementation guidelines will be deployed in August.

Department of Rehabilitation (DOR) Director Joe Xavier updated the committee on activities resulting from Workforce Investment Opportunity Act (WIOA). The Unified State Plan for the California Workforce System has been submitted approved. The next component necessary are regional and local plans. The State Plan for Independent Living, which prioritizes services youth, systems change, and transitions has been submitted for review to the Administration for Community Living (ACL). Promise Program enrollment goals have been achieved. DOR received a budget increase for the TBI program. Work on CIE continues with state partners and the team working to transition consumers in subminimum wage settings to competitive employment.

Lunch Break

Agenda Item 4: Discussion of Cal MediConnect Survey and Poll

Megan Juring from The SCAN Foundation introduced the Dr. Steve Kaye from the Community Living Policy Center who presented on the Cal MediConnect (CMC) survey. Dr. Kaye's presentation described a beneficiary survey to collect quantitative data measuring access and coordination of care experiences between CMC participants, non-CMC participants, and those who opted-out. Data sets included continuity and access to care, opt-out rates, impact of care coordination, and characteristics of LTSS duals participants. Other factors examined involved satisfaction rates among LTSS duals and Managed Care Organizations involved in CMC. A follow up survey is planned for 2017 to provide more granular data. Following the presentation time was allowed for comments, questions, and answers from the Committee Members.

Agenda Item 5: Discussion of NF/AH Waiver Renewal

Department of Health Care Services (DHCS) Jaycee Cooper presented an overview of the NF/AH Waiver renewal process that has a proposed effective date in January 2017. She noted that waiver strengths include the provision of self-direction, flexibility, and maximization of independent living for consumers. Stakeholder meetings have identified various challenges including cost-neutrality, care management, the budget structure, and more efficient fiscal processes. Technical workgroups recommend a local intensive Care Management model, standardization of existing tools, outreach and education to planners and social workers, and annualized waiver capacity increases with specific goals to deinstitutionalize participants. A draft of the waiver renewal is posted on DHCS's webpage for review and comment. Following the presentation time was allowed for comments, questions, and answers from the Committee Members.

Agenda Item 6: Legislation Watch List

No items to report

Agenda item 7: Next Steps and Closing Comments

The meeting was adjourned at 3:30 p.m.