



**Master Plan for Developmental Services Workgroup 5 Meeting #2 -
Summary
Friday, September 13, 2024
11:30 a.m. – 2:30 p.m.
Virtual Zoom Meeting**

Attendance

Workgroup Members in Attendance

- Adrian Hugo
- Anna Lansky
- Claudia Center
- Elizabeth Hassler
- Glenis Ulloa
- Hyun S. Park
- Isabel Torres
- Jay Kolvoord
- Jonathan Padilla
- Joyce Cabrera
- Kavita Sreedhar
- Kendra Wagner
- Katharine Hayward
- Mark Klaus
- Mitra Ordibehesht
- Shella Comin-DuMong
- Susan Stroebe
- Viri Salgado

Facilitators and Workgroup Chairs/Leads in Attendance

- Kavita Sreedhar (Co-Chair)
- Elizabeth Hassler (Co-Chair)
- Mark Klaus (Equity Lead)
- Anna Lansky (Facilitator)

Public in Attendance

Over 140 public attendees attended the meeting via Zoom video conference.

Welcome and Self Introductions

Workgroup 5 Facilitator Anna Lansky, Workgroup 5 Co-Chairs Kavita Sreedhar and Elizabeth Hassler, and Workgroup 5 Equity Lead Mark Klaus welcomed the workgroup members and members of the public to the meeting. They thanked everyone for their willingness to participate and engage in this work and then facilitated a round of introductions. Each workgroup member introduced themselves.

Timeline and Process for Creating Ideas and Recommendations (Slides 5-6)

Workgroup 5 Timeline (Slide 5)

Anna Lansky reviewed the timeline for upcoming workgroup meetings. The workgroup will meet once per month over the next 6 months to discuss and establish recommendations for each workgroup priority. The September and October meetings will focus on priority 1. The November, December, and January meetings will focus on priorities 2 & 3. Recommendations will be finalized and sent to the Master Plan Stakeholder Committee in February.

Developing Our Recommendations (Slide 6)

Anna reviewed the process for developing recommendations in the workgroup. The first step is to discuss ideas for the workgroup priorities one at a time. Then, the workgroup will create a list of recommendations to revise and send to the Master Plan Stakeholder Committee for review and approval.

Workgroup 5 Priorities (slides 7-8)

Workgroup 5 Co-Chairs Kavita Sreedhar and Elizabeth Hassler gave an overview of the workgroup's priorities and shared newly created versions in plain language. Elizabeth reminded the attendees that plain language is important when discussing complicated issues. It is also important for self-advocates and for people whose first language is not English.

The co-chairs asked the workgroup members for feedback on the priorities. The workgroup emphasized that housing and other essential services should remain a central focus in the priorities. Workgroup members suggested that specific services should be listed in each priority to be clearer. Workgroup members also raised the idea that priority 1 may put too much responsibility on families to handle enrolling in Medicaid and that it should be the regional center's responsibility. There was also a call for coordination of different funding sources to ensure that systems work more efficiently to serve individuals while maximizing available resources.

There was broad agreement on the need to maximize funding, give regional centers the flexibility to offer services even if generic services are available elsewhere, and educate service providers to reduce unnecessary referrals and transitions for individuals and families.

Additionally, the need for data to understand the number of individuals on waivers, the impact of eligibility criteria, and how to maximize federal funding was highlighted. Several stories were shared about the barriers individuals face in accessing services and supports through other systems, such as behavioral health. Having data could shine a light on existing gaps in services and funding. Overall, members stressed that while solutions are crucial, they must be supported by effective communication and transparent updates for individuals and families.

Break (5 minutes)

California Medicaid Background Information (Slides 9-14)

Jim Knight, Deputy Director of Administration at DDS, presented information about Home and Community Based Services and California's Medicaid program. He also gave an overview of the Lanterman Act and provided basic background data about Medicaid financing and coverage statistics. He took questions and comments from workgroup members

Workgroup members highlighted how funding thresholds affect service access and emphasized the need for long-term solutions. One member asked why clients are directed to generic services even when funds are available for specialized services. Jim explained some of the restrictions that the Lanterman Act places on Regional Centers. There was workgroup member interest in how other states manage similar issues and how the workgroup could get more information on this for a future meeting. Workgroup members also asked about additional funding sources and whether other agencies could support funding service delivery. Smaller potential funding sources were acknowledged, and the potential for using private insurance was questioned.

Priority 1 Recommendation Ideas (Slides 15-27)

Anna Lansky revisited the equity tool for creating recommendations and explained that the group would be considering Priority 1 through determining universal goals, problem statements, causes of the problems, and information needed to address the problems.

Think About the Equity Tool: Our Goal (Slide 17)

Anna discussed how the goal of priority 1 is to ensure everyone who is eligible is enrolled in the DDS Waiver and with MediCal through a simple process with supports. Anna then asked workgroup members to provide their opinions on this goal. Members emphasized simplifying the process and suggested creating a

new position at Regional Centers to handle the paperwork and process. Many families, especially those who speak Spanish and Korean, need more information on waiver programs that is accessible to them. Service Coordinators and Direct Support Professionals could help families navigate and sign up for services, but Service Coordinators would need more resources and training. Providers face challenges like low reimbursement rates, complex billing processes, and staff shortages, which complicate access to services.

Equity Tool: Develop Problem Statements (Slides 18-19)

Anna then asked workgroup members to think through example problem statements indicating where we are now and who is left behind because of the problem. An example included immigrant communities who speak English but are unfamiliar with the system's processes. They also included process issues such as complex requirements to receive services and lack of community knowledge about waiver eligibility.

To address these problems, workgroup members highlighted the need for an information hub with different tools like process visuals, information toolkits, workshops, and instructional videos. There was acknowledgment of varied practices across different regions and the importance of consistency for families moving between states to avoid service disruption. Emphasis was placed on raising awareness about developmental disabilities and waivers, especially among minority groups. Additionally, leveraging individuals with lived experience to help others navigate the system was considered a good idea, and the workgroup members recognized the potential role of community-based organizations in providing training and information.

Due to time constraints, slides 20-22 were skipped.

Brainstorming Priority #1 Big Ideas (Slides 23-27)

Anna Lansky introduced more big ideas and themes the workgroup has discussed so far related to priority 1. These themes included "making it as easy as possible for individuals to enroll in I/DD Waivers and Medi-Cal through one simple process." Another big idea was to "make supporting individuals and families through eligibility process an expectation for Regional Centers." The last big idea Anna reviewed was "changing language about eligibility to be simple

and not intimidating." Anna then asked workgroup members to share more of their own ideas.

Ideas that workgroup members introduced included:

- Cultural Humility: Emphasizing the importance of incorporating cultural humility training for employees in the service delivery sector to foster a more inclusive and person-centered approach.
- Minimizing Service Delays: Advocating for strategies to reduce delays in service provision while maintaining cultural sensitivity.
- Support for Community Organizations: Suggesting that community organizations across the state be supported to implement cultural humility practices effectively.
- Medicaid Awareness: Highlighting the need to educate people about the significance of Medicaid funding and targeting enhanced case management for those not enrolled in Medicaid waivers.

Upcoming Workgroup Meetings (Slide 28)

Before moving to public comment, Anna reviewed the dates of the upcoming Workgroup 5 meetings.

Public Comment (Slide 29)

At the end of the meeting, the workgroup co-chairs and facilitator supported a 30 minute public comment period. A summary of public comments is included in the Public Comment summary document which is available with other meeting documents are available on the [Master Plan web page](#).

Meeting Materials:

- Discussion PowerPoint and other meeting documents are available on the [Master Plan web page](#).