HHS COMMITTEE #1
April 2, 2015

MEMORANDUM

March 31, 2015

TO: Health and Human Services Committee

FROM: Linda McMillan, Senior Legislative Analyst

SUBJECT: **Update: Resource Coordination**

Those expected for this session
Uma Ahluwalia, Director, Department of Health and Human Services
Dr. John Kenney, Chief, DHHS Aging and Disability Services
Susan Hartung, Chair, Developmental Disabilities Committee of the Commission on People with Disabilities

At this session, the HHS Committee will (1) receive an update from the Department of Health and Human Services on a recent decision by the Developmental Disabilities Administration (DDA) that Montgomery County Government may no longer be a Resource Coordination/Targeted Case Management provider, (2) be informed about the County Executive's recommendation to eliminate the funds for this program as a part of FY16 budget actions, (3) receive comments from Ms. Hartung, Chair of the Developmental Disabilities Advisory Committee which began convening in January, and (4) provide staff with any questions and issues for follow-up as a part of the FY16 budget worksessions.

This session is not a budget worksession. Public hearings on the budget are scheduled for April 14-16 and the HHS Committee budget worksession on Aging and Disability Services is scheduled for April 28th at 2:00 p.m.

Previous Committee Discussion and Recommendations

Last spring and fall, the HHS Committee had extensive discussions about changes to the State's program to provide Resource Coordination (or Targeted Case Management) to Developmentally Disabled Adults in Montgomery County. For many years, Montgomery County Government has been a Resource Coordinator and received funding from the State to

provide these services. The State transitioned to a bill-for-service Medicaid model in 2013. The issue of whether Montgomery County would continue to be a Resource Coordinator under this new model was first raised as a part of the FY14 budget. Because of difficulties the State had in bringing on private providers who would be part of the new "choice" model, the State asked Montgomery County to continue to provide Resource Coordination in FY14 and in FY15 until all clients could be transitioned to private providers. During both FY14 and FY15, the Council was informed that the new billing model would not cover the cost of providing this service through County Government and that the Executive recommended not continuing to provide Resource Coordination once the new providers were in place.

Last spring, the Executive and the Council were also informed by family members and caregivers about significant problems with the transition to private providers and the implementation of client "choice." The Executive's office was very concerned and convened a Developmental Disability Transition Advisory Workgroup which provided its recommendations in September 2014 (©5-8). The Workgroup recommended:

1. DHHS should remain one of the choices of providers of Resource Coordination with a cap on capacity of 1,100 individuals and the right to decline some referrals to allow it to serve priority groups including (1) County residents on the wait list of the Developmental Disabilities Administration; (2) Transitioning Youth; and homeless residents or those in crisis on the DDA waitlist or residents that require coordination with other County services. (Unanimous)

   If the State does not allow Montgomery County to decline referrals, the ***majority*** of the Workgroup recommends DHHS remain a Resource Coordination service provider for 1,100 clients regardless of the population served.

2. Montgomery County should request that DDA offer residents a minimum of three (3) Resource Coordination providers as choices. (Unanimous)

3. Montgomery County will draft State legislation to create an independent Montgomery County Developmental Disability Advisory Council, stipulating that the Director of DDA or his/her representative meet with the DD Advisory Council on a regular basis. (Unanimous)

4. The County Charter should be amended to allow the Montgomery County Commission on People with Disabilities to advocate within the County, and at the state and federal level. (Unanimous) *(Staff Note: This change can be made in the County Code.)*

5. The County should immediately (FY15) establish a professional unit of County merit staff working within DHHS who would be responsible for responding to specialized needs of the Developmental Disability community. The unit must be able to maintain access to the State DDA database. (Unanimous)

6. All merit and contract Resource Coordination staff employed by DHHS should receive adequate training, which at a minimum would be the required training cited in Medicaid regulations. (Unanimous)

7. Montgomery County Government should request all public and private agencies providing Resource Coordination to establish: (1) in person (not only virtual) relationships with the individuals, and their families, that they serve; (2) professional relationships with local community providers of services in Montgomery County; (3) familiarity, and knowledge of, the generic resources accessed and available to people with disabilities and their families. (Unanimous)

The HHS Committee met in October and November to discuss these recommendations and reviewed models and cost for several options including continued Resource Coordination and creation of a navigation unit. At the November session, **the Committee recommended that Montgomery County continue to provide Resource Coordination for 1,100 clients. The memo from then-Council President Rice and then-Council Vice President Leventhal to the County Executive informing him of the Committee's recommendation and urging him to include about $1 million in County General Funds in the FY16 Operating Budget to cover the costs that would not be recovered through billing is attached at © 1-2.**

DDA Decision – Montgomery County Cannot be a Resource Coordintor

The Department of Health and Human Services was informed in early March that since all clients have been transfered from Montgomery County Government to one of the two private providers, Montgomery County is no longer a Resource Coordinator and DDA is not, at this time, allowing any new providers. Director Ahluwalia and Dr. Kenney will provide more detail on this decision and their discussion with DDA.

Based on this information, the County Executive's FY16 Recommended budget eliminates 12 FTEs and cuts $3,252,730 from the DHHS budget. This eliminates the program.

Resource Coordination is a State program and the State determines which organizations may provide this service. However, the County and the State specifically discussed that, if the County decided to have a capped program (1,100 clients), during this first "choice" process, all clients would transition to one of the private providers. During the next "choice" period, Montgomery County would be listed as a choice and the first 1,100 choosing Montgomery County would be assigned. That the State would now decide that Montgomery County is a "new" provider is puzzling. Additionally, this means that Montgomery County residents will only have two "choices" when most people in the State have three.

DDA has indicated that maybe, after they complete their review and revisions to the Targeted Case Management program, the County might be able to be a provider again. Council staff does not think it is realistic to think that after the program is dismantled it can be re-established.

Developmental Disabilites Committee of the Commission on People with Disabilities

The Executive's Workgroup recommended an independent Developmental Disabilities Advisory Committee. In response, the Commission on People with Disabilities has established a Development Disability Advisory Committee. The invitation letter is attached at © 3.

An e-mail to the County Executive and Council President Leventhal from Ms. Hartung expressing the Advisory Committee's dismay is attached at © 4. Ms. Hartung will provide additional comments to the HHS Committee on the views of parents and advocates regarding the State's decision.

Mr. Bernie Simons, Deputy Director for the Developmental Disabilities Administration, has agreed to attend the Advisory Committee's April 13th meeting to discuss several items including the decision regarding Resource Coordination in Montgomery County. The Advisory Committee has asked Mr. Simons to address:

Resource Coordination – Oversight of Resource Coordination, Caseload standards, Plans to monitor its effectiveness, Satisfaction of clients and families, Plans to have County service coordinators be knowledgable about services in Montgomery County, Minimum training requirements for Resource Coordinators.

Waiting Lists – Plans for securing funding, Securing funding for crisis prevention, Securing funding for crisis resolution.

Expansion of Service Providers – Specific timeline of DDA plan and intended outcomes, Plans for security, additional funding for service providers in the County.

Plans for Those NOT Eligible for Waiver Services – What does Mr. Simon believe the State's role is for those who meet the DDA definition of care need but are not eligible for waiver services?

Council staff notes that DDA has been a participant of the Advisory Group and has provided information on the wait list for DD services. For example, at the Advisory Group's February meeting, Ms. Stallworth said that as of January 20, 2015 there were 8,169 people in the State of Maryland on the waiting list for DD services. In Montgomery County, there were 830 DD eligible of which: (1) 26 were in crisis resolution, needing services within 3 months; (2) 97 were in crisis prevention, needing services within a year; and (3) 707 have a current need, needing services within 3 years.

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MONTGOMERY COUNTY COUNCIL
ROCKVILLE, MARYLAND

MEMORANDUM

November 28, 2014

TO: Isiah Leggett, County Executive

FROM: Craig Rice, Council President
George Leventhal, Council Vice President

SUBJECT: **Continued Resource Coordination for 1,100 Clients**

The County Council's Health and Human Services Committee met on November 18th to continue its discussion of the current transition of Resource Coordination from the County's Department of Health and Human Services (DHHS) to one of two private providers chosen by the State to serve Montgomery County adults with developmental disabilities. This was a follow-up to our October meeting where we heard from representatives of the Developmental Disability Transition Advisory Group, which was convened by Mr. Short this past summer. As a result of these meetings and, after considering the Advisory Group's recommendations, the HHS Committee recommends that Montgomery County continue to provide Resource Coordination for 1,100 clients and we are asking you to include the necessary funding in your FY16 Recommended Budget.

As you know, this transition has been very problematic and stressful for clients and their families and caregivers. Most people do not have enough information to make a true "choice" and we have heard from families who are unclear who their Resource Coordinator is and about constant turnover which negatively impacts their ability to ensure that plans and services are in place. We appreciate all the efforts undertaken by Director Ahluwalia last spring to try to reach an agreement with the State for a way to continue to be the Resource Coordinator for certain targeted populations (such as transition-aged youth). We also appreciate your commitment to continue to assist families seeking information and help troubleshooting problems through your proposal to create an ombudsman or support connector unit. It was after careful consideration of the cost estimates for continuing to provide Resource Coordination and creation of a ombudsman/support connector unit, as well as the operational pros and cons, that the recommendation for continuing Resource Coordination for 1,100 was made.

By continuing as a Resource Coordinator, the County will have access to the client data base and will be a part of workgroups and meetings convened by the State for Resource Coordinators. It also means that there will be three Resource Coordinators for the County, as there are for other jurisdictions throughout the State. While Director Ahluwalia hoped to have a memorandum of understanding with the State to address some of these issues if the ombudsman/support unit were created, there is no certainty that such an agreement could be reached. There is also no indication from the State that it will add a third provider if the County does not continue.

The information provided by your staff estimates that there will be a cost to the General Fund of about $1.036 million in FY16 to serve 1,100 clients. The model includes time for DHHS to assist people with questions and problems as they do now. We ask that your FY16 Recommended Operating Budget include the appropriation needed and the assumed revenues associated with serving 1,100 clients.

We would like to thank you and Mr. Short for convening the Advisory Workgroup. It was so helpful to hear first hand from the family members and providers about the impacts of this transition and the need for quality improvements and stability to this system that serves some such vulnerable residents. While the Workgroup advocated for serving both 1,100 clients and the creation of an ombudsman/support connector unit, the feedback we received was that the most critical element is to make sure the County is a Resource Coordinator with a clear program structure and permanent staffing. We look forward to your FY16 recommendation.

Please feel free to call either of us if you have any questions.

C: Councilmembers
Charles Short, Special Assistant to the County Executive
Uma Ahluwalia, Director, DHHS
Jennifer Hughes, Director OMB

COMMISSION ON PEOPLE WITH DISABILITIES

December 23, 2014

Dear Participant:

We are writing to you today to invite you to participate in a Developmental Disabilities Advisory Committee that has been established in December 2014 by the Commission on People with Disabilities. Patricia Gallalee, Chair of the Commission, has appointed me to serve as the committee's chair. The meeting will be held on Monday, January 12, 2015 from 4 – 5:30 pm in the first floor tan conference room at Department of Health and Human Services Administration Building, 401 Hungerford Drive, Rockville, MD. The purpose of this group is to explore avenues that will positively impact people with Developmental Disabilities and their families in the County. All meetings are open to the public.

As you are well aware this population is growing at a rate that exceeds the State of Maryland's Developmental Disability Administration's capacity to serve them. There are currently 914 County residents on the State waiting list for services. To meet not only their needs, but the needs of all individuals with developmental disabilities in the County, we feel it is important to establish this committee that represents agencies, individuals, and providers that serve this population. A similar organization has been formed in Prince George's County with the goal of insuring that all residents and their families receive the services they need to live safely and successfully in the community. Our tentative agenda for the first meeting includes:

- Introductions
- Discuss Strategy to End the DDA Waiting List
- How to secure more providers of services
- Expanding opportunities within the County for people with developmental disabilities
- Status of Resource Coordination
- Other items of mutual interest

If you need a sign language interpreter or any other reasonable accommodation to participate in this meeting, please contact Carly Clem, Administrative Specialist, Commission on People with Disabilities at least 3 working days in advance at Carly.Clem@montgomerycountymd.gov or 240-777-1246. We hope you will take the time to attend this very important meeting. If you cannot attend, we hope you will send a representative that can speak for your organization. We are enclosing the Commission's enabling legislation and by laws for your review. Please RSVP by replying to this email.

Sincerely,

Sue Hartung

Sue Hartung, Chair
Developmental Disabilities Committee

Department of Health and Human Services

401 Hungerford Drive • Rockville, Maryland 20850 • 240-777-1246 • 240-777-1288 FAX
www.montgomerycountymd.gov/hhs

Dear Mr. Leggett and Mr. Leventhal,

I am writing to you today on behalf of the Developmental Disability Transition Advisory Workgroup which Mr. Charles Short convened. This past summer we worked throughout to address the best way to continue to provide quality Resource Coordination Services to individuals with Developmental Disabilities in Montgomery County. As you know, we recommended, and the County Council supported, that Montgomery County's Health and Human Services continue to be a service provider to a portion of this population.

The Commission on People with Disabilities received information from Mr. Jay Kenney last night that the Developmental Disabilities Administration has decided it will not allow this to occur. Currently there are two private providers in the County, and DDA is not allowing any "new" providers to serve Montgomery County. Their position is that since Montgomery County stopped providing services within the last month, they would now be considered a "new" provider, and for that reason will not allow their participation.

As you may expect, our group is extremely upset to hear this news. We worked diligently, many hours, to submit a variety of recommendations to ensure that the citizens of Montgomery County would be well served. This action negates all of our work and our recommendations. Most importantly, there is great concern over the quality of resource coordination services currently being provided to citizens and service providers, and in contrast to the very high level Montgomery County experienced for 25 years is very disturbing.

We have asked Mr. Simons to meet with the Developmental Disability Advisory Committee (a subcommittee of The Commission on People with Disabilities) to express our concerns. We wanted to make you aware of our position and ask your support to continue to make sure that individuals and their families with developmental disabilities receive the support and services they deserve and need to lead fulfilling lives.

Sincerely,

Susan Hartung
Commission on People with Disabilities
Developmental Disabilities Advisory Committee

Developmental Disability Transition Advisory Workgroup

1 Saint Regis Court
Montgomery Village, MD. 20886

Charles Short,
Special Assistant to the County Executive
Office of the County Executive
101 Monroe Street
Rockville, Maryland 20850

Dear Mr. Short:

The Summer Resource Coordination Work Group that was charged developing recommendations regarding resource coordination has completed its work. Our recommendations reflect many hours of discussion and perspectives from county staff, parents, members of the Montgomery County Commission on People with Disabilities, and service providers. We look forward to meeting with you to discuss our recommendations, operational details, and address any questions or concerns.

We believe these recommendations reflect best practice for Montgomery County residents with developmental and intellectual disabilities and their families, and are achievable under the current systems which impact services.

Thank you for the opportunity to give input, and we look forward to assisting in any way we can to implement these recommendations.

Sincerely,

Susan Hartung

Susan Hartung

p.p. Lu Merrick, Claire Funkhouser, Dana Cohen, Susan Ingram, Karen Lee, Whitney Ellenby

Developmental Disability Transition Advisory Workgroup Recommendations

The members of the Developmental Disability Transition Advisory Workgroup present the following recommendations which reflect a collaborative effort to resolve the crisis in Resource Coordination ("RC") in Montgomery County for the past two years. We are prepared to support these recommendations at all levels within the state. We thank the staff of Montgomery County Government and Public Schools who spent considerable time working with the group to arrive at these unanimous recommendations.

Recommendation 1 (*Unanimous*): **Montgomery County Department of Health and Human Services (HHS) should remain one of the choices of providers of RC with a cap on capacity of 1,100 individuals and the right to decline some referrals.** Allowing HHS to differentiate between and decline referrals allows them to serve priority groups including: (1) County residents on the wait list of the Developmental Disabilities Administration (DDA); (2) Transitioning Youth; (3) homeless residents or those in crisis on the DDA waitlist, or residents that require coordination with other County services. The County should immediately hire and train merit employees to provide this specialized service, and be listed as an additional provider on choice letters being sent out by DDA. HHS will accept or decline referrals based on needs of the individual and current capacity. The current transfer process of individuals to existing private resource coordination providers should be changed with Montgomery County being listed as a choice.

Rationale: The events of the last two years have created an unstable and dangerous situation for Montgomery County's most vulnerable population. For over twenty years, the County has provided quality services and it is recommended that Montgomery County continue as a Resource Coordination service provider specializing in services for high risk populations. The two private providers currently available as choices for county residents do not have sufficient capacity, expertise, or familiarity with county resources to advocate for individuals in these high risk categories. The capping of 1,100 individuals is consistent with the County's January 2013 application to DDA to remain a provider, and has already been approved by DDA.

There is precedent for declining referrals in the state. In Prince Georges County, Resource Connections, Inc. has been permitted to reject referrals based on demographics. Just as residents can choose among the service providers, each service provider can decline to serve a specific person. Service providers regularly accept referrals based on their own expertise, ability to provide the service(s) requested, and capacity. The process for selecting a resource coordination provider should mirror the selection of a service provider; individuals may choose HHS or other private providers, and HHS will accept, or decline, referrals.

In the event that the state does not allow Montgomery County to decline referrals, the ***majority*** of the work group recommends that Montgomery County remain a resource coordination service provider for 1,100 clients regardless of the population served.

<u>Recommendation 2</u> (*Unanimous*): **Montgomery County should request that DDA offer residents a minimum, three (3) Resource Coordination providers as choices.**

Rationale: Every other county in the state has a minimum of three choices. As a matter of parity, and to ensure that our citizens have the same breadth of choices as other Maryland citizens, at least one other private resource coordination provider should be approved by DDA to service Montgomery County.

<u>Recommendation 3</u> (*Unanimous*): **Montgomery County will draft state legislation to create an independent Montgomery County Developmental Disability Advisory Council, stipulating that the Director of DDA or his/her representative meet with the Council on a regular basis.**

Rationale: There is precedent for this Council in Prince George's County. The many changes within DDA, and corresponding RC crisis within our County, demonstrates the need for an independent group of stakeholders in the developmental disability community work collaboratively and directly with the state DDA and other state and local agencies. This would ensure that our County have a "place at the table" regarding advocacy on behalf of our residents with developmental and intellectual disabilities and allow us to engage in regular dialogue with DDA and others to keep them informed about the status of services. It would work to alleviate the misunderstandings that have marked past communications between County officials and DDA, and would hold DDA accountable for any changes in regulations or failure to respond to needs of our residents. It would also allow the input of persons with disabilities and their family members, educators, community providers and transition specialists in the County who are impacted by DDA policies and procedure.

<u>Recommendation 4</u> (*Unanimous*): **The County Charter should be amended to allow the Montgomery County Commission on People with Disabilities to advocate within the county, and at the state and federal level.**

Rationale: Issues that the Commission is charged with addressing (*i.e.*, housing, transportation, RC for the developmental disability community) are directly impacted by state and federal regulations and policies. The work of the Commission cannot be effectively conducted if it is not permitted to make recommendations to organizations that guide policy regarding these issues.

<u>Recommendation 5</u> (*Unanimous*): **The County should immediately establish (FY2015) a professional unit of county merit staff working within HHS who would**

be responsible for responding to the specialized needs of the developmental disability community including, but not limited to, the following groups: Transitioning Youth; individuals with a dual diagnosis; homeless persons with developmental disabilities; people with autism; and people in crisis due to chronic or acute health issues. This group must be able to maintain access to the state DDA database.

Rationale: As this segment of the disability community continues to grow at an accelerated rate, it is essential that professionals with expertise in developmental disabilities provide consultation, resource development, coordination between services, and oversight to individuals and their families, as well as other professionals working in the County. This cadre of professionals within DHHS should exist regardless of any outcome related to the provision of resource coordination services.

Recommendation 6 (*Unanimous*): All merit and contract staff employed by HHS should receive adequate training, which at a minimum would be the required training cited in Medicaid regulations, in providing RC services.

Rationale: Adequate training is essential to ensure that all providers possess the requisite skill and expertise to provide quality RC. Currently HHS contractors performing RC are receiving only minimal training.

Recommendation 7 (*Unanimous*): **In order to effectively coordinate services for those they support, Montgomery County Government should request all public and private agencies providing RC to establish: 1) in-person (not only virtual) relationships with the individuals, and their families, that they serve 2) professional relationships with local community providers of services in Montgomery County 3) familiarity, and knowledge of, the generic resources accessed and available to people with disabilities and their families.**

Rationale: One part of the current RC crisis has resulted from the fact that the private providers do not have a history of providing services in Montgomery County, and do not have specific knowledge about the resources, both generic and disability specific, available to refer the people they support to. Facilitating resource providers to develop professional relationships with community DDA providers and other generic service providers will assist providers to remain apprised of opportunities for the people they support.