



**Montgomery County Commission on People with Disabilities
Developmental Disabilities Advisory Committee
Meeting Summary – March 14, 2022**

Larry Bram, Co-Chair • Karen Morgret, Co-Chair

Attendees: Betty Bahadori; Larry Bram; Odile Brunetto; Onesta Duke; Susan Hartung; Lisa Hazell; Scottie Holton; Susan Ingram; Carmen Izurieta; Julia Jensen; Lisa Lorraine; Jenn Lynn; Laurie Lyons; Kim Mayo; Seth Morgan; Karen Morgret; Sara O’Neil; Patricia Sastoque; Beth Shuman; Susan Smith; John Whittle
Staff: Betsy Luecking; Carly Clem

Approval of the February 2022 Meeting Summary Minutes

A motion was made to approve the February 2022 Meeting Summary Minutes. The motion was seconded. A vote was taken and the February 2022 Meeting Summary Minutes were unanimously approved as written. Approved minutes are available online at www.montgomerycountymd.gov/ddac.

DDA Updates and Information You Need to Know – Patricia Sastoque, Director of Programs Developmental Disabilities Administration (DDA), Maryland Department of Health (MDH) and Onesta Duke, Regional Director, Southern Maryland Regional Office (SMRO)

Onesta reported that effective March 1, 2022, awake overnight supports have been added as a component of Personal Supports. This new provision will be available in all three DDA waivers (Community Pathways, Community Supports, and Family Supports) to promote participant personal independence; enhance access to person-specific safeguards and skills that are foundational to ensuring a person’s health and safety; and further promote the vital role that families serve in supporting their loved ones.

- Memo: <https://files.constantcontact.com/f401fd14401/fac02c74-b59a-4798-a7a9-bba9c8c45d2a.pdf>
- Previously participants had the option to obtain awake overnight supports under supported living services.
- Personal Supports provides habilitative services to assist participants, who live in their own or family homes, with development or maintenance of skills related to daily and community living. Services include in home skills development, community integration and engagement skills development – and now awake overnight supports as well.
- Participants should work with their CCS to request awake overnight supports, if there’s an assessed need.
- Waiver participants’ assessed needs must demonstrate there is a behavioral or medical risk that requires awake overnight supports, and this information must be documented in the participant’s current person-centered plan (PCP) and approved Nursing Care Plan and/or Behavior Plan.
- To support the assessed needs and service flexibility, teams can consider daily and weekly needs and schedules.
- Some participants may need additional supports during school breaks and summer months which can be taken into consideration during the PCP process.
- Overnight support must be documented in the PCP Risks section as one of the mitigation efforts in addressing applicable behavior or medical risk.
- The Detailed Service Authorization Tool along with other supporting documents will be used to determine the types, the amount and duration of services a person needs in order to support and help them achieve their goals and help them stay healthy and safe.
- Awake overnight supports are available to participants in the traditional service delivery model as well as self-directed services.
- DDA has updated the Personal Supports policy to include the provision of overnight supports when appropriate and based on a participant’s assessed need. The updated policy is located on DDA’s website under the PolicyStat platform: <https://dhmh.policystat.com/policy/11317246/latest/>

Onesta reported data on Montgomery County Transitioning Youth.

TY19 / FY20 – 150 TYs

- 127 people are enrolled in a DDA waiver program and have identified providers.
- 11 people have declined services.
- 12 people have not been placed.
 - 11 are in a waiver and are working to identify placement options or additional services that would address current needs.
 - 1 is working with their CCS to enroll in the waiver.

TY20 / FY21 – 164 TYs

- 106 people are enrolled in a DDA waiver program and have identified providers.
- 12 people have declined services
- 46 people have not been placed.
 - 25 are currently enrolled in the waiver.
 - 9 have waiver enrollments that are pending with the Eligibility Determination Division.
 - 12 waiver enrollments are in progress.

TY21 / FY22 – 188 TYs

- 65 people have been placed.
- 117 people are pending placement.
 - 53 are currently enrolled in the waiver.
 - 29 have been approved.
 - 65 are working with their CCS to enroll in a waiver program.
 - Regional Office continues to work with CCSs to ensure those waiver enrollments occur and that people are able to access or identify meaningful day programs. They also have the option to explore support services such as personal supports or respite. Some individuals are asking for environmental modifications in different services based on their assessed needs once they are enrolled in the waiver.
- A few individuals declined services – one due to citizenship issues.

The COVID-19 pandemic and public health emergency over the last three years has had a significant impact on the TY population and their ability to acquire meaningful day services.

- DDA extended the waiver enrollment time frame for TYs to enroll in the DDA waiver to ensure TYs do not miss an opportunity to obtain needed services.
- All TYs that are currently pending and are eligible to access services in FY20 and FY21 have until June 30, 2022, to work with their CCS and enroll in a DDA waiver program.
- DDA has noticed an increase in waiver enrollment for FY20 and FY21 TYs.
- There are a number of families that are interested in Personal Supports, respite care and assistive technology that are working with their CCSs to access these services at this time while waiting to figure out meaningful day services.

Larry Bram noted that the TY FY22 numbers have increased substantially from past years. He asked if the CCS agencies have the capacity to absorb that many new participants.

- Patricia reported DDA receives between 400 to 500 TYs every year.
- At this time there is capacity for this many TYs and there are no issues.
- While there has been CCS turnover, Patricia noted that Montgomery County Government has very low turnover rates and good stabilization for case management.

Montgomery County Waiting List - 910 individuals

- 858 in current request
- 46 in crisis prevention
- 6 in crisis resolution
 - These individuals are immediately assigned a CCS to work with them and initiate the waiver enrollment process and identify placements.
- Individuals in current request and crisis prevention are also assigned a CCS that is working to assess needs, make referrals to community based resources, and in the event of a crisis situation will submit a priority category upgrade as needed.

- If an individual has the need for a personal care attendant they have the option to access the Community First Choice services to have a personal care attendant at the home to assist with activities of daily living (ADL).
- Younger individuals that are placed on the future need registry are not assigned a CCS.
 - If they are determined to be eligible for DDA services and at minimum prioritized at the current request category then they are able to obtain a CCS.
 - If anything changes with the individual's current situation that warrants an upgrade to current request then the family would need to contact their regional office in order to initiate that process.
- If an individual has an aging parent (age 65 or older) they would automatically be placed in the crisis prevention priority category. If the situation is dire, they would be upgraded to crisis resolution.
- Individuals and families are always encouraged to reach out to their regional office if situations change so staff can assist with facilitating priority category upgrades and assist with obtaining a CCS, if needed.

Updated DDA Funded Services Participant Rights and Responsibilities

- The document has been improved and enhanced to be more user-friendly.
- There are now three options for individuals to review and sign:
 - [One is a written document](#)
 - [One is a checklist](#)
 - [One has simple visuals](#)
- This document must be signed every year by the participant as part of the PCP process.
- DDA has asked CCSs to have their participants sign during their next quarterly visit or the next PCP plan – whichever comes first.

Appendix K Update

- Some flexibilities are scheduled to be terminated on March 31, 2022.
- Secretary Dennis Schrader and Deputy Secretary Bernie Simons are reviewing requests from advocates and providers to extend those flexibilities.
- Information should be released within the next few days if the flexibilities will be extended to June 30, 2022.
- **UPDATE:** The Maryland Department of Health (MDH) has confirmed that all Appendix K flexibilities, scheduled to end on March 31, 2022, will extend through June 30, 2022. Specific to meaningful day service billing in PCIS2, MDH will propose new emergency regulations from April 1, 2022 through June 30, 2022, which will increase the provider required billing minimum from previous Appendix K flexibility of one (1) hour to three (3) hours of billing per day. All DDA Appendix K topic specific guidance memos and At a Glance documents flexibilities scheduled to end on March 31, 2022 have been updated in accordance with the recent announcement of the extension through June 30, 2022. Reference:
 - [Appendix K and Executive Orders Flexibilities - March 14, 2022](#)
 - [DDA Appendix K At-A-Glance Document and Topic Specific Guidance](#)

Community Settings Rule

DDA has had several meetings with Centers for Medicare & Medicaid Services (CMS) last week about the community settings rule.

- All states must be in full compliance with the community settings rule by March 17, 2023.
- Medicaid takes the lead and DDA manages the waivers on their behalf.
- Medicaid will be sending correspondence to providers to make sure they are in compliance with community settings rule.
- The Community Settings Rule states that services provided in facilities, congregate settings, farmsteads, and/or services that have the effect of isolating individuals from the broader community are considered to have institutional qualities and therefore may not be in compliance.
- Susan Ingram, Community Support Services (CSS), asked about the community settings rule compliance process for providers.
- Day sites and residential sites much get approved when a new request for a new location is made.
- DDA first approves it for CMS and then the request goes to OHCQ for licensing approval.
- Providers are still asked to check as non-compliant for CMS in the e-prep system – has DDA been tracking sites that have been approved by visits or the pre-approval process?
- Patricia said providers will not be using e-prep for compliance – everything will be handled by DDA.
- DDA needs to start sending communication to providers about the process and compliance requirements.

- DDA is taking Medicaid's lead and working with Marlana Hutchinson, Deputy Director, MDH – gave them information obtained 2016 – where DDA is in the process, what needs to be completed, who is in compliance, who is not in compliance, any providers that are high scrutiny, and how DDA is working with providers to get them into compliance.
- Compliance checklists were completed in 2019 and want to see if providers and CCSs can fill out a self-assessment.
- CCSs are supposed to fill out a community settings rule questionnaire every site visit – reviewing these to identify if the questionnaire can be used to check providers off as compliant.
- DDA asked CMS for extra time due to the pandemic but at this point they have said no to every state.
- CMS is accepting both site visits and provider participant interviews – some states are doing both and DDA is trying to figure out how to move forward.
- Due to the pandemic, CCSs may have only been conducting virtual visits.

DDA Webinars / Trainings

Patricia reported that DDA recently held two webinars for CCSs and providers.

- Webinar held on February 24 on person-centered planning, service considerations and flexibilities.
 - Focused on meaningful day habilitation, employment services, pre-planning before meeting with the family and the individual, and creating a plan that ties into that individual's trajectory and matches the DDA's flexibility of services.
- Second webinar held March 4 that focused on residential services and support services.
 - Presentation made by three early adopters [CCS, Montgomery County provider and an Eastern Shore provider] of the LTSS Maryland fee-for-service model that shared their own experiences, lessons, and recommendations.
 - Webinar was attended by 1,123 participants – including 640 case managers (or 95%).
 - Just because it worked at one agency does not mean it will work at other agencies.
 - Providers need to think about their business models, how to help their staff and teams understand service definitions, and work with case managers on how to create good PCPs as well as how to input those PCPs into the LTSS Maryland system for authorization and approval by the DDA.
- Received good feedback for both webinars.
- DDA is working to address and answer questions that were asked during the webinars.
- DDA will be developing some lunch and learn sessions where providers can mentor and learn from one another.
- Webinars are recorded and can be found on the DDA's website under webinars along with handouts: https://health.maryland.gov/dda/Pages/Maryland_Community_of_Practice_for_Supporting_Families_Webinar_Series.aspx

CCS Updates and Announcements

Laurie Lyons, Service Coordination, Inc. (SCI), reported their Montgomery County team only has one vacancy currently. They are actively hiring and have new teammates starting soon.

- Other priority is working with traditional providers who are moving into full billing within LTSS Maryland and ensuring all PCPs are accurately documented to ensure a smooth transition in April, May or June.

Sara O'Neil, MMARS, reported the goal is for MMARS to become fully staffed by June.

- This should reduce caseload numbers and help with CCS burnout and turnover.
- Received a list of providers that will be early adopters of the LTSS Maryland system and working with them to get PCPs into the system.
- MMARS will be meeting again with Patricia and her team in the upcoming weeks.

Patricia reported that DDA has been having meetings one-on-one with CCS agencies directors.

- Meetings have been positive with great conversations – collaborative approach.
- Include discussions regarding recruitment and retention of staff as well as trainings and tracking PCPs.
- Goal is to have met with all 17 CCS agencies within Montgomery and Prince George's County by the end of this month.
- Another goal is to stabilize the case management system, determine why staff are leaving and why some staff are staying, and make the positions into a good career ladder.
 - Received good feedback already on how to make improvements.

Kim Mayo, Community Support Network (CSN), Montgomery County Department of Health and Human Services (MCDHHS), reported she met with Patricia and Onesta earlier this morning.

- Conversation was very helpful as they had an engaging and transparent discussion and reviewed data.

Other Updates and Announcements

Susan Smith, Housing Opportunities Commission (HOC) reported HOC was awarded 118 Emergency Housing Vouchers (EHVs) from the U.S. Department of Housing and Urban Development (HUD).

- Vouchers are for individuals who are homeless, at risk of becoming homeless, or are fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking or human trafficking.
 - Includes persons with all disability types.
 - Susan is working closely with an individual who has I/DD.
- Vouchers will be moving individuals from shelters and streets into permanent supportive housing.
- Kayrine V. Brown continues to be Acting Executive Director.
- High staff turnover in the unit that process paperwork and vouchers.

Odile Brunetto, Chief, Aging and Disability Services, MCDHHS, reported County Executive Marc Elrich will release his proposed FY23 Operating Budget tomorrow March 15.

- InterACC/DD requested funding for development disability supplement be included in the budget.
 - Still uncertainty as DDA rates will not be published until April 1.
- Update – Proposed FY23 Operating Budget:
<https://apps.montgomerycountymd.gov/BASISOPERATING/Common/Index.aspx>
- She also reported that the County's rate of COVID transmission is 1.1%.

Larry Bram reported he was on a national Easter Seals advocacy prior this meeting which included a discussion on the direct support professional workplace.

- Report shared by the Ohio Alliance of Direct Support Professionals titled [Stabilization and Beyond, Ohio's Workforce: A Call to Action](#)
- Report discusses career matrix, value based credentialing, and more.

Scottie Holton, Parent, asked how DDA is helping providers with direct support professional staffing issues.

- DDA is working with MDOD and the Maryland Department of Labor to let providers know where to get assistance with recruiting as well as sharing job openings within their agency.
- Also looking at how to recruit at community colleges and institutions.
- Susan Ingram, CSS, said the provider community is concerned about staffing shortages.
 - Many providers have 30% to 50% turnover or opening rates – some of this is due to increased services.
 - Thanked Linda McMillian, Senior Legislative Analyst, Montgomery County Council, and other County staff that worked with Montgomery Works, community colleges and other projects that the county has employment.
- Question if self-directed services are seeing a 30% to 50% turnover rate.
 - Participants often times utilize relationships that they already have -- not the same turnover rate as with traditional services and opportunity to have more flexibility in their rates.
- Scottie said more work needs to be done for DSPs, how to make the positions better and attract more people to the field.
 - She suggested having a future meeting on this topic.

Betty Bahadori, Parent, asked for an update on DDA's project to nominate health care professionals that did something extraordinary during the pandemic.

- Patricia will need to check with the Maryland Department of Disabilities (MDOD) to see how many were collected and where they are at in the process.
- Received more than 60 nominations.
- Betty made a nomination but noted that she would have liked the ability to provide more information on the form than what was allowed.

Planning for Future Meetings – Karen Morgret

Given that Patricia will be meeting with CCS providers individually monthly one on one, Karen asked Committee participants how often this group should meet.

- Some members suggested the Committee continue to meet monthly as it is a source of information for families as well as the community at large. Another option is to meet quarterly and have family members and staff sign up for updates and webinars from DDA. Sign up for the DDA Join Our Mailing List <https://health.maryland.gov/dda/Pages/home.aspx> The County ceased serving 3,200 persons for resource coordination in 2015 because the state had changed its rates and it would cost the County too much money. As a result a group of parents started meeting with Uma Ahluwalia and Dr. Jay Kenney to advocate for the return of resource coordination. As a result, the Commission set up this committee in 2015 to advocate for DDA to allow that resource coordination be returned to the County which did take place in 2016 returning up to 500 persons for this service.
- Betsy asked if DDA has trainings and webinars for parents and family members. Webinars specifically for families are offered on a weekly basis with Mary Anne Kane Breschi, Director of Family Supports. March's topic is case management, April will be self-direction and May will be behavior support services. Webinars offer opportunities for parents or self-advocates to talk to and listen to other families.
- Previous webinar was hosted by Deputy Secretary Simons and regional directors to discuss the [resiliency of families during the pandemic](#).
- DDA webinars are live streamed and recorded – recording posted the following day on their website.
- Also partner with the Maryland Developmental Disabilities Council to provide training on PCPs, self-advocacy training for TYs and services, and the role of the case manager.
- Available trainings can be found on [DDA's training calendar](#).
- DDA updates and training notifications are shared via Constant Contacts – sign up for these notifications by joining DDA's mailing list.
- Users can indicate whether they are a family member, professional (staff person or provider), or self-advocate – notifications are tailored to the selection.
- Larry suggested that CCSs recommend to their participants and families to sign up for Constant Contact.
- Betsy said parent expectations of CCSs are not the same.
 - Patricia has heard the same from families and Mary Anne is developing a training to address this.
- Section on DDA's website titled "What's New at DDA" highlights all communication that has been sent out in a particular month including updates, memos and information obtained during meetings: <https://health.maryland.gov/dda/Pages/new%20updates.aspx>.
- Patricia asked for questions that need to be addressed at future meetings to be sent to Betsy.
- Committee does not meet in July or August.
- Staffing shortages create provider waiting lists – first consideration for taking on a new participant is if there are enough staff.

Respectfully Submitted,

Carly Clem, Administrative Specialist

Betsy Luecking, Community Outreach Manager

Next Meeting

Monday, April 11, 2022

4pm to 5pm – via Zoom

Instructions to attend will be included on the meeting agenda.