



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

Karen Morgret, Chair

Attendees

Parents: Jeneva Stone; Betty Bahadori; Annette Jolles; Mary Keyser

DDA Providers: Susan Ingram; Tom Liniak; John Whittle

Support Brokers: Liz LaFrance; Alarice Vidale de Palacios

CCS Staff: Rosemary DiPietro (Community Support Network); Laurie Lyons (Service Coordination, Inc.); Susan Hartung (MMARS); Julia Jensen (Total Care)

MCPS Staff: Margie Parrott

HHS Staff: Odile Brunetto; Kim Mayo; Shawn Lattanzio

DDA: Onesta Duke; Nicholas Burton; Nova Evans

County Council: Beth Shuman

County Executive Staff: Dale Tibbitts

Commission Members: Karen Morgret; Seth Morgan; Susan Smith

Commission Staff: Betsy Luecking; Carly Clem

Approval of the September 2022 Meeting Summary Minutes

A motion was made to approve the September 2022 Meeting Summary Minutes. The motion was seconded. Betty Bahadori noted a typo on the first page. A vote was taken and the September 2022 Meeting Summary Minutes were unanimously approved with the correction. Approved minutes are available online at www.montgomerycountymd.gov/ddac.

DDA Updates – Onesta Duke, Regional Director, Southern Maryland Regional Office (SMRO), Maryland Developmental Disabilities Administration (DDA); Nicholas Burton, Director of Programs, DDA; and Nova Evans, Deputy Director of Federal Programs and Integrity, DDA

Onesta reported on Montgomery County's waiting list. The current data available is:

648 people on the waiting list for individuals who are eligible for DDA services

- 2 are in crisis resolution
 - These individuals are working with their assigned CCS to access needed services in order to mitigate the current crisis
- 50 are in crisis prevention
 - These individuals will more than likely need services within the next year or so.
- 596 are in current request

Transitioning youth (TY) data for the following fiscal years:

FY21 – 164 TYs total

- 122 placed
- 42 not placed
 - 13 declined services
 - 1 waiver denial due to citizenship issues
 - 2 waivers pending
 - 22 waivers approved but no provider identified at this time
 - 4 opted to not complete the TY process

- Taking into consideration those that declined services, the waiver denial, and those who opted to not complete the waiver process **24 individuals have not been placed for FY21.**

FY22 – 192 TYs total

- 97 placed
- 95 not placed
 - 10 declined services
 - 19 waivers pending
 - 53 approved waivers
 - 1 individual in the Family Supports Waiver that needs to switch over to the Community Supports Waiver
 - 12 opted to not complete the TY process
 - Taking into consideration those who declined services and those who opted to not complete the waiver process **73 individuals have not been placed for FY22.**

FY23 – 179 TYs total

- 70 placed
- 109 not placed (have until June 30, 2023 to be enrolled in the waiver and identify a provider)
 - 4 declined services
 - 2 waiver denials
 - 31 waivers pending
 - 45 waivers approved
 - 27 in the process of completing waiver enrollment
 - Taking into consideration those who declined services and waiver denials **103 individuals have not been placed for FY23.** DDA is working with CCS agencies to continue to enroll the 103 individuals in the waiver and identify providers.

Some barriers to placement is due to providers not having capacity to accept TYs at this time.

- Number of individuals seeking employment providers that were not able to identify one.
- Nationwide staffing crisis that is impacting placement of TYs.
- DDA continues to work with CCS agencies to identify providers and place TYs as soon as possible.
- At this time there is no risk of anyone losing waiver enrollment. As long as a TY is enrolled in the waiver, they can continue to work with their CCS to identify a provider – this holds their eligibility and they will not be unenrolled from the waiver during the federal public health emergency.
 - The only exceptions to unenrollment are if the individual passes away, voluntarily withdraws, if they enter into a long term facility or move out of state.

Appendix K - Updated Guidance:

<https://health.maryland.gov/dda/Documents/COVID%2019%20Documents/Appendix%20K/10.17.22/DDA%20Appendix%20K%20with%20Authority%20and%20Termination%20Date%2010.17.22%20.docx.pdf>

- Targeted flexibilities under the approved Appendix K application have been extended to January 31, 2023.
 - Flexibilities extended include staffing ratio exceptions that are specific to 1-to-1 and 2-to1 staffing support and hiring relatives and legally responsible individuals; increased isolation rate; providers can continue to bill for an entire day if the individual is provided with at least three hours of cumulative supports; residential shared hours; and training.
- Some flexibilities did expire on September 30, 2022.
- Providers and individuals in self-direction should continue to ensure all staff meet required service qualifications including having current required trainings such as CPR and first aid by January 31, 2023.
- Onesta encouraged attendees to visit the Appendix K website to stay up to date: https://health.maryland.gov/dda/Pages/DDA_Appendix_K.aspx

Deputy Secretary Bernie Simons' latest webinar:

https://health.maryland.gov/dda/Documents/COVID%2019%20Documents/Dep%20Sec%20Webinars/Deputy%20Secretary%20Webinar_9.30.2022FINAL.pdf.

LTSSMaryland Transition

- DDA's official timeline for certified and licensed providers to transition into LTSS Maryland fee-for-service system will occur within a 24-month time frame.
- Between January to April 2023, regional offices will be working closely with providers that have expressed an interest in transitioning into the system.
- At this time, approximately 40 providers will begin the process.
- Rolling transition between July 2023 through December 2023.
- Regional directors continue to scope provider readiness in order to begin the transition process.
- Regions continue to support providers that have already transitioned and are conducting post-transition meetings to assist providers with any challenges they may be experiencing with the system.
- Medicaid Provider Services (MPS) and DDA Headquarters team are monitoring all exceptions and assisting with resolving issues.
- DDA is planning a collaborative effort between providers and CCSs to further address the LTSS Maryland transition and to engage in conversations regarding person-centered planning (PCP) flexibilities, virtual supports, and staffing, rating and blending in regard to employment services to ensure those flexibilities are maximized within services within LTSS Maryland.
 - Due to overwhelming interest and exceeded capacity, the date is being rescheduled in order to locate a venue to accommodate the number of larger number attendees.
- There is significant interest from families wanting to have a conversation about these topics.
- A separate forum will be scheduled for families to learn more about the flexibilities, PCP, the role and responsibilities of the PCP process, and how we can all best support families.
- Collaborating with Mary Anne Kane Breschi, Director of Family Supports, and UMKC to develop an agenda with partners – event would include a panel and have more of an engagement process with the audience.
- DDA is looking into providing a virtual option.
- Jeneva Stone, Parent, has recently spoken with a few families across the state about the lack of coordination between DDA services and REM services. She asked DDA to include staff from the Coordinating Center to the family forum due to the significant number of individuals in DDA waivers who are also dually-enrolled in REM.
- Nicholas said there are opportunities for a broader conversation about nursing and nursing supports. Topics/suggestions can be emailed to Nicholas at Nicholas.Burton@maryland.gov.

Waiver Renewal

- Public comment period ended October 6 – received approximately 125 pages of comments from over 315 unduplicated.
- DDA has been consolidating comments into a document that will be publicly shared.
- Proposed changes based on stakeholder feedback are now under department review.
- Once approved, revised documents will be sent to Medicaid for review.
- Once the revised documents are approved by Medicaid they will be added into the CMS portal.
- Projected time frame for January 1, 2023 to submit to CMS.
- Projected effective date of July 1, 2023 once approved by CMS.
- Once the submission is approved by CMS, DDA will post the revised documents with the tracked changes highlighted in yellow to show changes made as a result of the stakeholder comment period.
- Communications received from CMS will be shared with stakeholders.
- DDA will also post summary document of all public comments.
- Nova noted that many comments received were very positive and constructive and included helpful ideas, implementation and different language suggestions.
- Further questions can be emailed to Nova at Nova.Evans@maryland.gov.

Fiscal Management and Counseling Services (FMCS) - Provider Onboarding and Open Enrollment - <https://health.maryland.gov/dda/Pages/Financial-Management-and-Counseling-Services.aspx>

- June 2022 Maryland Department of Health (MDH) announced a selection of three FMCS providers for current participants in self-directed services (SDS) – GT Independence; Public Partnerships LLC; and The Arc Central Chesapeake Region.
- In order to make an informed vendor decision, all participants received information about the available FMCS vendors, services, and fees.

- DDA CCS Coordinator reached out to individuals, conducted webinars and virtual meetings.
- During the open enrollment period, current participants were to select from available FMCS providers and indicate their choice on a dedicated form.
- Current participants who do not select a FMCS vendor will be randomly assigned a FMCS vendor. FMCS services will have an effective date of October 1, 2022 or January 1, 2023.
 - Most participants have already chosen a provider – less than 100 participants had not chosen as of today’s meeting. They have until 5pm tomorrow to choose.
- Huge collaborative effort between families, participants, regions, headquarters and FMCS providers.

Question: Family was told by CCS they must pick a provider that does day services and could not choose a provider that does personal supports. **Clarification:** Once the individual is enrolled in the waiver and if they have an assessed need for personal supports or respite, that individual can access those services without having a day provider. Nicholas offered to add information regarding this issue to upcoming agendas with CCS entities.

Question: Can an individual receive personal support hours if they are also enrolled in Community First Choice (CFC)? **Clarification:** An individual can receive personal supports as long as the services align with the waiver definition. Community integration and skill development does include intermittent personal care when those specific activities are provided. Individuals should work with their CCS to demonstrate a need and provide DDA with a personal support schedule. If an individual requires assistance with activities of daily living (ADL) those services should be sought out from the CFC program.

CCSs, families or individuals who have questions should reach out directly to their regional office for more information or to resolve issues.

Commission on People with Disabilities (CPWD) – FY24 Budget Policy Priority - County to Establish Developmental Disability Advisory Council (DDAC) to the County Executive and County Council

- This Committee was convened in 2015 by CPWD to advocate for DDA to allow coordination of community care (CCS) to be returned to the County, which did take place in 2016 returning up to 500 persons for this service.
 - Community Support Network is one of six CCS agencies that provider services in the county.
- Historically, state government is responsible for funding of services for individuals with I/DD.
- Previously individuals were placed in institutions. When institutions were closed and individuals were placed in the community, state continued providing funding for services using a match of state and federal Medicaid dollars.
 - DD Providers in Montgomery County are paid a total of \$240 million from the state and the county provides a \$20.2 million supplement.
 - DDA is responsible and has management over DD providers, not county government.
- Committee continued to meet as the DDA was undergoing its transformation and meetings were used for updates and to share information and best practices.
- This Committee continues to provide feedback to DDA and CPWD cannot advise the state unless it receives prior approval/permission from the Office of Intergovernmental Relations (OIR).
 - Statements must be consistent with County Executive and County Council.
 - Example: County group that advocates for the county to fund a program that the county is unable to fund puts the county in a difficult position at the state level.
 - State/DDA staff currently attend DDAC meetings.
- Boards, Committees and Commissions (BCC) are to advise the County Executive and County Council.
 - Over 90 BCCs currently established.
 - Only a few have the authority to advise state without permission from county – but they still inform county on issues/matters (Commission on Aging, Board of Social Services).
- Odile Brunetto, Chief, Aging and Disability Services, reported Commission on Aging hosts an annual legislative event with delegation and has ongoing communication with elected officials – established DDAC could do this as well if it is written into their enabling legislation.
- I/DD population continues to grow, issues and the DDA system are very complex, continue to change, involve federal agencies and deserve time and attention from a full-time staff person.

- An established DDAC through legislation would ensure this Committee continues to meet monthly with appointed members and would have the authority to advise the County Executive, the County Council and the state if the state is included in the enabling legislation.
- Dale reported he received CPWD's proposal for establishment of DDAC – needs to discuss with County Executive.
 - Understands CPWD issues are broad and I/DD issues are very specific.
 - HHS would have to designate staff to support DDAC.
- Mental Health Advisory Committee (MHAC) was established to advise the Montgomery County Executive and the County Council on matters concerning mental health - <https://www.montgomerycountymd.gov/HHS-Program/BHCS/MHAC/Index.html>.
 - MHAC is comprised of citizen members who serve three-year terms without compensation that includes practicing physicians in the County, mental health professionals in the County who are not physicians and individuals who are currently receiving or have in the past received mental health services as well as agency members that includes the Department of Health and Human Services, Montgomery County Public schools, and the Department of Juvenile Services.
 - Susan Smith, member of MHAC and representative of Housing Opportunities Commission, said having a separate council that focus on mental health issues has been very beneficial in order to address those specific needs and issues.
 - Does not think MHAC should be combined with CPWD.
 - Operates the same as CPWD; submits priorities every year and meet with the County Council; goes through OIR if they want to advise at the state level.
 - Chief of Behavioral Health Services attends all meetings.
- Susan Ingram, Provider, stated InterACC/DD is not in support of a separately established DDAC until more information regarding authority is provided.
 - Provider perspective that CPWD has covered these topics and issues for decades.
 - Do not need to be separated for advocacy.
- Tom Liniak, Jewish Social Services, Agency, stated it is important not to miss form for substance – as long as the issues are being addressed and brought to the attention of the County Executive and County Council.
 - Concern that the I/DD community becomes separated from CPWD and become competing entities.
 - How would a separate DDAC interact with CPWD?
- Jeneva Stone, Parent, stated there's work that needs to be done at the county level for people with I/DD.
 - Appears there is resistance to people with I/DD to be a part of their community.

InterACC/DD - Update – Susan Ingram

- InterACC/DD is a coalition of 30 providers of adult services supporting over 3,500 Montgomery County residents who have developmental disabilities.
- Concerns regarding TY numbers and participants not being able to identify a provider – currently 200.
- Providers met to discuss issue and are suggesting CCS agencies hold a virtual forum and present two minute brief profiles with no identifying information of TYs to County providers.
 - Important to de-personalize the information.
 - Create standard template for all submissions – include geography, transportation needs.
 - Only one CCS per agency to attend.
 - Need a volunteer to keep track of profiles and interested providers.
- Providers can then decide if they want to meet with the TY to become their potential service provider.
- This would only be for those TYs who have already graduated or aged out and have been waiting for services – not for the TYs exiting the school system June 2023.
 - Also proposing to meet with MCPS in the spring to avoid a future backlog of those TYs.
- Susan Hartung, MMARS, offered to coordinate on behalf of her agency.
- Laurie Lyons, Service Coordination, Inc., reported she has participated in something similar in a smaller county that worked with the school district, providers and CCSs.
 - Offered to discuss further with Susan offline.
- Rosemary DiPietro, Community Support Network (CSN), said CSN would not participate due to low number of individuals served by the county.

- She will mention this to the CCS Community of Practice via email and put those agencies in touch with Susan.
- InterACC/DD will be reaching out to SMRO about this initiative.
- Would like to have this in place by December and hold another in February/March.

There was a discussion on meeting frequency and role of Committee.

6:20 Adjourned

Respectfully Submitted, Clem, Administrative Specialist
Betsy Luecking, Community Outreach Manager