Present
Parents: Susan Hartung (Co-Chair); Larry Bram (Co-Chair); Claire Funkhouser; Susan Goodman; Annette Jolles; Reda Sheinberg
Organizations: Kim Mayo, CSN; David Cross – retired MCPS; Rosemary DiPietro – CSN; Seth Morgan, Commission on People with Disabilities; Sara O’Neill, MMARS; Ricki Sabia, National Down Syndrome Congress; Lu Merrick – IvyMount; Shawn Lattanzio, Local Behavioral Health Authority; Linda McMillan, County Council; Christina Thomas, TCS; Penny Veerhoff – Down Syndrome Network; Chris Shao, Montgomery County Community First Choice Waiver
Staff: Betsy Luecking

Welcome
Minutes from past meetings can be found online at: www.montgomerycountymd.gov/HHS-Program/ADS/CPWD/CPWDIndex.html, under the tab Developmental Disability Advisory Committee.

Introduction - Chris Shao, RN, Nurse Monitor / Manager, Montgomery County Community First Choice (CFC) Waiver


The Community First Choice (CFC) is a personal care Medicaid program that was created by the Affordable Care Act (ACA) to make it easier for states to offer home-and community-based services to Medicaid beneficiaries. Supports Planners and Nurse Monitors provide a continuum of services designed to allow people of all ages and in need of long term care to live in the community, rather than in institutions. Individuals who receive services under CFC have been determined eligible by the State of Maryland. The Maryland Developmental Disabilities Administration (DDA) has been encouraging individuals on the DDA waiting list to apply for CFC if they are in need of attendant care. Individuals can be on a waiver and still receive other services. Chris noted that in the last year or two there has been an increase in the number of DDA clients or clients with developmental disabilities. There are currently 2,400 clients within the CFC/Nurse Monitoring program in Montgomery County, but it is unknown how many current clients are also receiving DDA services.

Participants eligible for CFC need support with activities of daily living and must be in a community setting. The County has approximately 20 nurses that conduct an evaluation of the client through Adult Evaluation Review Service (AERS). The client assessment is sent to the State for a final decision. Once the client is approved the County takes over the nurse monitoring service to provide nurse monitoring services. The County contracts with 5 agencies to provide this service which include Advanced Home Support Inc., Potomac Home Support, Inc., Candid Home Health Care Services, Visiting Angels, and Specialty Care Services, LLC. Nurse monitors do not provide direct care services. Family members pick a home health agency, also known as a Residential Service Agency (RSA), to provide direct care to the client. There are over 1,000 RSA’s in Maryland and approximately 100 serve Montgomery County. Support Planners work with the family to develop a plan of service with client and their family. Services does not include skilled nursing services.
The CFC Nurse Monitor contracted by the County visits the client in the home to monitor service quality as well as the client’s health and condition. All CFC Nurse Monitors through contracting agencies are registered nurses. There are no general skills requirements for RSA staff. If they must perform nursing tasks, those tasks must be delegatable and require certification such as a Certified Nursing Assistant or Certified Medication Technician.

Chris noted that the State is working on merging DDA Client Service Information into CFC program system. (LTSS – an electronic Record System for CFC program, but details have not been defined as of yet.

**Discussion RE: Community Supports Waiver and Family Supports Waivers – Susan Hartung**

These two new waivers will support 800 families. The Community Supports Waiver (CSW) will serve 400 people of all ages and have a $25,000 cap. The Family Supports Waiver (FSW) will serve 400 children ages birth to 21 and have a $12,000 cap. People can receive CFC, REM, and other Medicaid State Plan services. They can not be in two Medicaid Waiver programs at the same time such as the Autism Waiver and FSW or in the CSW and FSW, etc. Of the 800 spots, 152 went to the Southern Maryland Regional Office (SMRO). Of those 152 slots, 71 went to Montgomery County. Individuals selected were based on time on waiting list, level of need and severity. There is also concern about increased case loads for Coordination of Community Services.

Sara O’Neill, MMARS, reported that DDA is supplying providers with a list of names. Staff then assist clients with filling out a budget form. Depending on how much is requested, DDA will make the decision on which waiver they fit into.

Rosemary DiPietro, Community Support Network, noted that there are 71 people identified as being in the crisis prevention category. Coordinators are talking with these families to assess their needs and identify services that all three waivers may offer. Individuals are applying for medical assistance and depending on the application determination DDA will review their needs based on the budget form and be offered a slot accordingly. It is unknown how many slots are available for the Community Pathways Waiver. Clients have been voicing their concerns that if their needs are estimated to be more than the CSW and FSW waivers allow for, then they will not be chosen. Clients may be underestimating the cost of their needs in order to be more likely to receive funding. DDA has said that if an individual is being served by one of these two waivers and their needs change, DDA will move them into the appropriate waiver.

DDA has not said that if an individual’s needs are greater than the two funding caps that they will not be served. DDA has established these two new waivers to help clear up their waiting list. Individuals should be accurate in their budget forms and assessment of needs.

It was asked how many agencies have been certified and approved to provide for these two new waivers. DDA had said they would be posting provider names as they go through the certification process.

Rosemary reported that DHHS received 12 individuals, one of whom had been in the Autism Waiver two months prior and was subsequently downgraded in the process after they were selected for the waiver. After the issue with the individual on the Autism Waiver, DDA formalized their process to include a Freedom of Choice form so individuals or their representative can sign off if they are declining services. There is a weekly roll call meeting held across the state and out of the first round of people selected for the waiver, only 2 or 3 individuals were hard to track down.

The following questions were asked at the meeting and sent to Judy Pattik afterward. Judy’s answers are in red.

1. **How many providers have been approved for the new waivers, and how many do you expect to have?**  
   *The application process is ongoing, so I cannot say how many we expect to have. We have received 12 applications in SMRO with 2 of them already moving forward for approval.*

2. **If a family goes through the "budget" process as explained to us. It seems their needs exceed the 25K cap under the new waiver. Then they go to Pathways waiver, correct? But does that mean they go to a waiting list for those services? No, they will not be placed on a waiting list if the are moved on to the Pathways Waiver (soon to be
called Comprehensive Waiver). It is important for all to know that those identified for funding are not automatically approved for the waiver. The Eligibility Determinations Division is working quickly to process waiver these applications.

3. Since they came off the waiting list (and so it would seem were a priority case) does that mean they would automatically be approved for Pathways? In this case, yes.

4. Is there a "cap" on how many people can be in the Pathways waiver? DDA is opening up 300 additional slots in the Community Pathways Waiver.

Susan Goodman reported that CMS has announced they will allow states to not provide employment services and that states can also implement lifetime caps. She is tracking any recommendations made by Maryland and will be contacting state delegates and senators if they choose to move forward with these allowances.

Susan also reported that the new Montgomery County Public Schools budget eliminates Special Education Cluster Supervisor (SECS) positions. These positions may have been eliminated in order to create more Special Education Instructional Specialists positions that will be placed under the Community Superintendent where SECS’ reported to principals and general educators. There is a petition that has been created that is asking MCPS to keep the SECS positions. The MCPS general central office is also being downsized.

Adult Protective Services: For parents who have a child with aggressive behavior it poses a real challenge to protect themselves and their child. Susan Hartung commented that Jenn Lynn has done such a good job educating the public and the Police on what Autism behaviors look like. Susan commented that she has been been reported to CPS and APS more than once. She stated that her experience with APS was wonderful. Susan posed the issue of training of APS workers as to understand the pressures of the family.

Susan stated that Whitney Ellenby has written a book titled “Autism Uncensored: Pulling Back the Curtain”. It is available to purchase on Amazon and will be released on April 15th. You can read the first two chapters online at http://whitneyellenby.com/book/autism-uncensored/ Susan said that Whitney’s book is frank and honest and worth the read. She indicated she had a hard time putting it down.

Seth Morgan reported that he met with Delegate Waldstreicher last week in Annapolis on an issue and he asked for individuals if they agree with this bill to contact their elected officials. The bill is HB 0782 – Maryland Achieving A Better Life Experience (ABLE) Program – Death of a Designated Beneficiary. It would authorize money and assets in an ABLE account to be transferred, on the death of a designated beneficiary, to a certain estate or a certain ABLE account for an eligible individual, unless prohibited by federal law; and prohibiting the State, unless required by federal law, from seeking payment from an ABLE account or its proceeds for certain medical benefits paid for the designated beneficiary. Currently, upon the death of the beneficiary the state in which the beneficiary lived may file a claim to all or a portion of the funds in the account equal to the amount in which the state spent on the beneficiary through their state Medicaid program. This is commonly known as the “Medicaid Pay-Back” provision and the claim could recoup Medicaid related expenses from the time the account was open. There will be a hearing on HB 0782 on February 21st at 1:00 pm. Larry Bram said he will be going to testify on behalf of Easterseals. Interested individuals can call 301-858-3130 to sign up to testify. It was noted that the ABLE National Resource Center website has information that can assist individuals with understanding the ABLE Act: http://www.ablenrc.org A Federal bill was recently passed that allows the annual contribution limit to increase.
Update on Honorable George Leventhal Sponsored Work Group on Meeting the Needs of Residents with Developmental Differences – Linda McMillan, Senior Legislative Analyst, Montgomery County Council Resolution: Work Group on Meeting the Needs of Residents with Developmental Differences

Linda McMillan, Senior Legislative Analyst, Montgomery County Council


Linda reported that the resolution passed in December 2017. There will not be a set number of work group members. The resolution states that the Commission on People with Disabilities can make work group member recommendations that may include consumers of DDA services and family members or caregivers of differently abled persons. There will also be public members at large. The Council can appoint members so it is not a formal process. Interested individuals can write to Linda McMillan at Linda.McMillan@montgomerycountymd.gov by February 23, 2018. Betsy will send out instructions via e-mail.

Linda noted that developing a list of priorities, recommendations and goals will be useful for educating the new County Executive and new Councilmembers and helping them to understand the various components of the DDA system. It will also be an excellent opportunity to develop an informational and educational document that explains the changes to the waivers and waiting lists as well as priorities that have been worked on in the past including Resource Coordination and the DD supplement. With Councilmembers Leventhal and Berliner leaving the Council, the HHS Committee will have two new members. It was suggested that the final document be made available to the public.

Members will be appointed soon and the work group will begin meeting. It was suggested that the work group meet with the Developmental Disability Advisory Committee on a regular basis to provide updates and receive feedback.

Claire Funkhouser expressed her concern regarding the timeline as the group that met in 2008 met for two to three years work. Susan indicated that the goal should be too understand the process, how the State impacts the county residents and government, and the educational system.

It was suggested to start by taking the last workgroup we did and update The Call to Action: Strategic Steps for Real change 2009 Study Results from the Workgroup on the Future for People with Severe Developmental Disabilities, Including Autism and updating it. It outlines the priorities and emergencies and at the end are definitions. Linda indicated that as someone that is not as steeped in this as you all are, she needs even more than the definitions. Even in a savings plan, councilmembers need to understand. What do we have in HHS for people served by the waiver and not served by the waiver. What does it mean when someone is served by the autism waiver, what does it mean when someone isn’t? It is important that as new policy and decision makers come into the system, we have a document to help them as best we can. Since the meeting Betsy has found the pdf and word document of the 2009 study.

By the time the new members take office in December of 2018, they will be working on the budget for FY20. The budget for FY 19 will already been put together. They will be working until March 15th to put out their budget. Was DDA involved with the last group? She will try to include DDA as well.

Betsy indicated that we have our minutes that go back since this group started and she and Linda indicated they would get some of the highlights from the minutes of this group. Both Sue and Linda agreed that the services must be clearly defined in a digestable matter. There will be big changes coming, including at the State and Federal level.

Updates on Coordination of Community Services / Challenges – Representatives from Total Care, MMARS, Montgomery County HHS Community Support Network: Tabled due to time constraints.

Judy Pattik was unable to attend but since the meeting she has provided to us the following information:
Regarding ineligible students for Medicaid due to lack of citizenship, there were only have 2 students in Montgomery County that exited in June, 2017.
Numbers with CCS providers are as follows:

- MMARS – 1,413
- Optimal Health - 58
- Service Coordination Inc - 52
- Resource Connections Inc. - 85
- MCDHHS – Community Support Network - 485
- Total Care – 1,127

3,220 Montgomery County residents in Coordination of Community Services

**Update – Autism Waiver (TY) – Montgomery County Public Schools (MCPS):** Tabled due to time constraints.

**Co-Chair Update:** Tabled due to time constraints.

**New Business:** Tabled due to time constraints.

**Next Meeting:** Monday, March 12th, 2018 from 4:00 p.m. to 5:30 p.m. The Committee will be meeting at the Health & Human Services Building, 401 Hungerford Drive, 1st Floor 1A Conference Room, Rockville, MD 20850

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