

Medicaid Long Term Services and Supports Rebalancing Initiatives Steering Committee

Friday, September 8, 2023
10:30 AM – 12:30 PM
Virtual Meeting
Meeting Summary

Members Present: Mary Ann Langston, Mairead Painter, Susan Raimondo, Karyl Lee Hall, Bonnie Meyers, Bill Halsey, Elaine Kolb, Krista Ostaszewski, Laura Snow Robinson, Tom Fiorentino, Kevin Brophy, Anna Doroghazi, Melissa Morton, Maggie Ewald, Kelley Kendall

Members Excused: Kathy Flaherty (for Karyl Lee), Michele Jordan

Members Absent: Patricia Calderon, Melanie Lambert (SDA), Erin Leavitt-Smith Brenda Texidor (SDA), Jennifer Switalski

Members of the Public: Deb Migneault, Dan Beem, Cynthia Scott, Kiomara Cruz, Lauren Carabetta, Angie Pearson, Anna Karabin, Greg Bennett, Melissa Augeri, Julia Fishman, Theresa Brown, Jaylen Williams, Bailey Williams, Karri Filek, Vanessa, O'Neal-Campbell, Colleen Hudson, Hye-Yeon Ryu Kim, Guerda Sainval, Claire Volain, Diana DiBartolomeo, Ellis Dillon, Julie Robinson, Spring Raymond, Jannette Stewart, Jessica Hughes, Jessica Gudonis, Cathy Ludlum, JD Sparks, Tyler Anderson, Christine Bailey, Sheldon Toubman, Barbara Cass, Heather Ferguson-Hull, Shannon Jacovino, Lindsay Jesshop, Pooja Modi, Turquoise Percy, Martha Porter, Paul Ford, Tracy Wodatch, Win Evarts, Jenna Carlesso

1. The meeting was called to order by Mairead, Co-Chair at 10:35.
2. Mairead made a motion to accept June 2023 minutes, Elaine moved, Bill seconded. Melissa abstained. All were in favor. June minutes were approved.
3. MFP Report Out - Lauren
 - 1,206 MFP applications were received so far in 2023.
 - Working on partnering with O'Donnell to reach more people and share MFP information because not everybody knows what MFP is.
 - 308 people have transitioned to the community from January to August 2023
 - Continuing to work with field staff, focusing on training, processes and efficiencies.
 - Next MFP Retreat is scheduled for next Friday and will focus on Teamwork.
 - Lauren attended the HCBS Conference last week.
 - Many states talked about challenges related to the workforce.
 - Other states are experiencing the same thing and are doing some of the same things that CT is doing.
 - Rate increases
 - Learning collaboratives with providers
 - Karyl Lee asked why the July transitions were down last year and again this year.
 - Lauren will take that back and review the numbers.
 - Mairead suggested that many people are off during this time which may impact transitions.

American Rescue Plan Act (ARPA) Update – Karri

- ARPA money is used to strengthen, enhance and expand home and community-based services under Medicaid.
 - COPE - Care of Older Persons with Dementia in their environment.
 - CAPABLE - Community Aging in Place, Advancing Better Living for Elders.
 - Team is working on getting these programs up and running, maybe this Winter.
 - SHO – Supports at Home Option
 - Members receive MSP – Medicaid Savings Program
 - Includes remote supports through Innovative Supports and Services model.
 - Work through Community HUBS providers
 - Value based payment information for this quarter will be coming out today.
 - Question was asked if any of these ARPA funds will be expiring before people can get enrolled. Is there any risk to these programs moving forward?
 - Karri responded that the team is really focused on this to determine how to use the funds and not lose out on anything.
 - Mairead requested this topic to be put on the next agenda.
 - Mary Ann asked if workforce issues can have a conference call to share ideas.
 - Mairead asked Lauren to set something up with her.
 - Anyone that wants to join, let Lauren know.

4. Unfinished Business

Allied Updated

- Bill shared that some signatures are on the contract.
- Next meeting will be more formal update with potential introduction and transition.

DSS Presentation about CFC

- Bill stated that JoseMichael has transitioned to another state position. Bill thanks him for his work. He also thanks everyone who worked on the presentation.
- Bill shared the working draft presentation and talked about some of the highlights of the document.
- The document is called a working draft as some people may have edits.
- The CFC program is under a state plan service option.
- There are about 5,600 members accessing CFC with about 23,000 PCA's working to support those members.
- Comments, edits and suggestions are welcomed.
- Bill will send the presentation out to the group after the meeting.
- Kevin asked the question of how people are informed that this program is an option.
 - There are slides on how to apply, through our website, MyPlace CT and other mechanisms. Let Bill know if there are other ways to make this program known.
- Bonnie asked if on the DSS website, at the waiver application page, could people be referred to the CFC program because there is a long wait for the wavier programs.
 - Karri said that the waiver staff do refer people over to the CFC program. Right now, that is done on paper.
- Laura is confused about the combination of somebody being on a waiver and getting PCA services through CFC.
 - Bill suggested if it's still not clear at the end, he will come back to this.

- Bonnie would like to know why the difference with 2 ADLs for the waiver and 3 ADLs for CFC.
 - Cindy responded that both program requirements are different. Your needs are going to determine what program to apply for and what your financial criteria is as to what you'd be eligible for.
 - Lauren shared that with CFC the LOC is aligned with the LOC for CHCPE.
- Other services CFC offers are home delivered meals, emergency response systems, support and planning coach, health coach, AT, environmental adaptations, accessibility modifications and transitional services.
- Kevin asked if DSS does the assessment or if they are contracted out.
 - No, they are contracted out to the Access Agencies.
- Deb stated that CFC is a state plan service so if you are eligible for Medicaid and are functionally eligible, you can receive services. There is no CAP.
- Bonnie wanted to know if she could access the recorded meeting and chat later.
 - Sallie will go back and see how the link could be put on the DSS website and be made accessible. She will also investigate how it could be put on the Secretary of State's site as well.
- The CFC Program is only offered in 7 states in the country.
- Agency based PCAs will be offered under CFC soon.

5. New Business

- Karyl Lee stated that it's required in the by-laws that the co-chairs are renominated every September. She said Mairead's term is coming to an end and the nominating committee has put her name forward for a two-year extension. She put Mairead's nomination before the Steering Committee for a vote. MaryAnn seconded and all were in favor.
- MaryAnn put forth Cathy Ludlum name to join the committee as a community advocate. Cathy has an extensive background in the recruitment, hiring and management of support staff. She is the author of several books. She has lived independently with supports since 1992. All were in favor. Welcome Cathy!
- Tom shared that the CFC Council has been working on the CFC presentation.

6. Public Comment

- Sheldon Toubman stated that the requirement as stated in the slides that you must meet the level of care is not actually what the statute says. The statute says you only have to meet LOC if your over 150% of poverty, which almost nobody is unless they are on the waiver. The individual cost cap in our waivers is not required by federal law. CFC is based upon actual need with no arbitrary limits, whereas waivers do have limits based upon comparing to institutional cost of care.
- He also mentioned that the notices of action are important. He is getting referrals of people who are being denied the number of hours that they want.
- He also pointed out that anyone can have a hearing for lack of timely action. It's called reasonable promptness.
- Another point he clarified is that in the statute if the department uses guidelines, they are only guidelines and cannot be the basis for denying someone. The access agencies must always go by the statutory definition of medical necessity. That applies here to including level of care.

7. Meeting adjourned at 12.24.

Next meeting: **VIRTUAL October 6, 2023**