OLMSTEAD CONSUMER TASKFORCE MEETING November 13, 2015 Pleasant Hill Public Library, 5151 Maple Drive, Pleasant Hill

MINUTES

Handouts

Minutes of Previous Meeting – September 11, 2015 Olmstead Plan Committee Minutes – September 22, 2015 Executive Committee Minutes – October 21, 2015 Olmstead Plan Committee Minutes – October 19, 2015 Comments on Iowa's WIOA Unified Plan – November 11, 2015 2016 Strategic Priorities Discussion Draft Olmstead Draft Framework Olmstead Vision Outcome Domains

Taskforce Members Present: Joan Bruhn (phone); Roxanne Cogil; Randy Davis; Jackie Dieckmann; Dawn Francis; Ann Gallagher; Kris Graves; June Klein-Bacon; Tracy Keninger; Ashlea Lantz (phone); Geoff Lauer (phone); Michele Meadors (phone); Kathleen O'Leary; Harry Olmstead; Len Sandler; Bruce Teague (phone); Ingrid Wensel (phone)

Taskforce Members Absent: Gary McDermott; Mary Roberts; Rick Samson; Rosana Zamora

State Agency Representatives Present: Page Eastin (DHR); Terri Rosonke (IFA, phone); Ruth Thompson (IDA)

Staff: Bob Bacon; Caitlin Owens

Guests: Theresa Armstrong; Connie Fanselow; Deb Johnson; Rick Shults; Jane Hudson; Frank Rice; Peter Schumacher; Mikki Stier

I. Welcome and Introductions - June Klein-Bacon

The meeting was called to order at 10:10am. A quorum was established.

II. Review, Amendments and Approval of the Agenda – June Klein-Bacon

June Klein-Bacon gave an overview of the agenda. Kris Graves motioned to approve, and Harry Olmstead supported the motion. Motion carried.

III. Review, Amendments and Approval of the Minutes of the Previous Meeting

June opened the floor for corrections or amendments to the September meeting minutes. Tracy Keninger motioned to approve the minutes, and Roxanne Cogil supported the motion. Motion carried.

IV. Executive Committee Report – June Klein-Bacon

A. Health Consumer Ombudsman Alliance

June has been participating in the Health Consumer Ombudsman Alliance as a representative from the Taskforce. The purpose of the alliance is to provide a permanent, coordinated system of independent consumer supports to ensure that consumers, including those covered under Medicaid managed care, are able to obtain and maintain essential health care services; are provided unbiased information regarding coverage models; and are assisted in resolving problems regarding health care services, coverage, access and rights.

June said she learned recently that two new positions were created and filled to serve as a resource as before, during, and after the transition to managed care. The positions are Managed Long Term Services and Supports Program Manager, and Managed Long Term Services and Supports Ombudsman. She said as directed by the Health and Human Services appropriation bill, a proposal for the Health Consumer Ombudsman Alliance is due to the legislature in December, and will be shared with Taskforce members prior to submission for comment or question.

Roxanne asked if they have enough staff to manage the calls they are receiving, and said there has been a lot of confusion about their level of oversight and what exactly they can do. June said that has been discussed, and a workgroup was formed to develop a proposal that included a budget for a call center, though it has not been determined if that would be office staff at the Office of the State Long-Term Care Ombudsman or elsewhere. Jane Hudson added that Cindy Miller from Disability Rights Iowa has been going to the Alliance meetings and DRI has been collaborating with the Office of the State Long-Term Ombudsman to include in the report advocacy for people who are having benefits denied by the managed care organizations.

B. Olmstead Comments to Older Iowans Legislature

The Older lowans Legislature reached out to the Taskforce and invited someone to speak at their opening session at the Statehouse on September 28th. Dawn Francis volunteered and gave a brief overview of the Taskforce, and the implications of the *Olmstead* decision in Iowa regarding policies affecting seniors.

C. Nominations Update & 2016 Meeting Dates

June reported that the terms of members Joan Bruhn, Kris Graves, Kathleen O'Leary, Geoff Lauer, Len Sandler, Harry Olmstead, and Randy Davis will all end after the March 2016 meeting, and all aside from Geoff are eligible to reapply. She reminded the group of the by-laws requirement that after a member has served two consecutive three-year terms they are ineligible to reapply for one year. June said the 2016 application would be shared with the Taskforce for feedback soon, and a paper copy would be available as well. Following that, the final application materials and timeline will be shared and it would be appreciated if Taskforce members would share with groups or individuals who may be interested in applying.

June called attention to the handout with the proposed 2016 meeting dates on them, and noted that while meetings usually fall on the 2nd Friday of the month, the 2nd Friday in November is Veteran's Day. She proposed meeting on either November 4th or November 18th instead. Len Sandler suggested the easiest way to choose a date would be through a follow-up survey via email. Caitlin Owens made a note to follow- up.

D. Representing Olmstead in Personal Communication

June reviewed the policy on representing the Taskforce, noting it had been awhile since it had been discussed. She said if members identify themselves as being part of the Taskforce in writing or in person, to make sure it is clear that they are not speaking on behalf of the Taskforce unless that has been approved by the Taskforce or Executive Committee. She encouraged members to bring issues the Taskforce should be aware of, or weigh in on, to the attention of June or Caitlin between meetings and they can forward to the correct committee.

V. Managed Care Update

A. Discussion

June reported that the CMS listening sessions had been rescheduled due to the large number of people who called into the first one for consumers and family members that had no queuing system for receiving comments. The reschedule calls will have a mechanism in place so multiple people are not trying to talk at once, and there will be another call for consumers and family members. Several Taskforce members connected to the call and agreed that it was chaotic, and the comments that were registered were largely negative. Several people said there seems to be a lot of confusion and a lot of people who aren't aware of the upcoming transition at all, especially those who don't have access to a computer or live in rural communities. Another issue is that many people cannot choose their MCO based on who their providers have signed up with because so many providers have not yet signed contracts.

Roxanne shared that CMS has the waivers, but will not approve it until they have completed a readiness review. She attended the Health Advisory Oversight Committee meeting last week and said a big issue discussed was that providers don't have enough information to assess how managed care will impact the services they provide. Ann Gallagher said a big issue to consider is that if there is a delay, the already present infrastructure issues due to providers taking jobs with the MCOs, will likely be more pronounced and could have a serious impact on individuals being able to access the services and supports they need. Jane Hudson shared that DRI has put together a survey to collect feedback and concerns about managed care, and will share the results on their website and Facebook page.

B. Action Item: Revise and Resubmit Letter Submitted During Waiver Public Comment Period

Randy proposed the Taskforce draft, and widely share, a position statement on managed care. June suggested the letter submitted during the public comment period for the waivers could be revised and shared with other key stakeholders and policy makers. It was suggested the letter be sent to to CMS, state and federal legislators, the Governor's Office, June said the letter should acknowledge the point Ann brought up about infrastructure concerns if there is a delay, and that it will be important to monitor what happens should a delay occur. Roxanne motioned to revise and send the letter to CMS, state and federal legislators, and the Governor's Office, and Harry supported the motion. Motion carried.

VI. Community Access Committee Report

A. Action Item: Annual Action Plan for Housing and Community Development Comments

Len Sandler gave an overview of the comments to Iowa Economic Development Authority on the 2016 Action Plan for Housing and Community Development. The state submits a Consolidated Plan to Housing and Urban Development every five years that outlines how they are going to prioritize and spend funds for communities with populations less than 50,000. Currently Iowa is in the second year of a five year plan that was submitted last year, and are required to submit an Annual Plan each year. The Community Access Committee met and discussed commenting on the Annual Plan, specifically on incentivizing universal design in two housing pilot projects by significantly increasing the points available and/or requiring builders to consult with the Taskforce or UI Law Clinic.

Roxanne motioned to approve the comments, Harry supported the motion. Motion carried.

B. Action Item: WIOA State Unified Plan Comments

Ashlea Lantz started with a brief update about the comments the Taskforce submitted on the proposed employment services administrative rules. In October IME confirmed that because CMS hasn't approved Medicaid Modernization yet, and CMS approval was also required for the proposed rules, they would not be sending the rules to CMS until Medicaid Modernization moves forward. She said this means the rules are temporarily stalled, likely until May 2016.

Ashlea reported that the Workforce Innovation and Opportunity Act, or WIOA, was signed into law in 2014. Iowa has been working on a State Unified Plan, which brings agencies named under WIOA together to outline how they'll come together to comply. She reported that Iowa's Plan was put out for public comment in October. She said the Taskforce comments were focused on the absence of language discussing services and supports for individuals with disabilities, and recommending that the Plan be revised more thoughtfully incorporate people with disabilities. Based on the comments received a second draft will be put out for public comment in the next few months.

Roxanne motioned to approve the letter, and Kris supported the motion. Motion carried.

VII. 2016 Strategic Priorities

A. Overview of the Process

June shared that the Executive Committee met in October and proposed using the 2015 and 2014 priorities as a starting point for the 2016 strategic priorities because a lot of work went into drafting them and there is still plenty of work to be done, particularly because a lot of time and effort was focused on managed care. Taskforce members were given an opportunity to weigh in on the proposed priorities via an online survey to help narrow the list down prior to the meeting, including space to write in suggestions. She said to keep in mind that the Taskforce is not bound by the strategic priorities, and still able to take up emerging issues, but the priorities will help focus efforts and committee work, and can be used to publicly show the issues the Taskforce thinks are of high importance.

B. Discussion

Tracy suggested narrowing down the priorities, and having the Executive Committee focus on what specifically needs to be addressed. The discussion focused on the need to identify allies to help work towards the identified priorities, and the importance of aligning priorities with the work of other disability groups so advocates have a unified message. Dawn shared the draft priorities of NAMI and noted that several align with the list being discussed.

The group discussed whether or not to include reaching out to state agencies to educate about Olmstead and reengage with agencies who have not been as active on the Taskforce. Len suggested because the mission of the Taskforce is to educate and work with those agencies, it doesn't necessarily need to be a distinct priority.

VIII. Olmstead Plan Presentation - Connie Fanselow and Theresa Armstrong

A. Overview

Connie Fanselow gave an overview of Iowa's Olmstead planning efforts, most of which she has been involved in to some degree. She noted that a lot has changed in the state and nationally since the 2011-2015 Plan was drafted, including MHDS Redesign which began almost immediately after the plan was finished. Other changes include the Iowa Health and Wellness Plan that expanded Medicaid coverage, the closure of two state mental health institutions, the HCBS settings rule, and the move towards Medicaid managed care. She said the plan that was drafted in 2010 was in place for five years, but was not as actionable as it could have been. The 2011-2015 plan had the overall vision of a life in the community for everyone, and nine principles to help achieve that vision, which are still relevant and being used as a base for the new plan, but will be built upon to make sure it is actionable.

Connie said the Taskforce committee formed to work on the new plan has been meeting and providing input, and feedback on what is being developed. The plan is structured using language that reflects what life should look like for individuals with disabilities, and organized using the domains codified by MHDS Redesign legislation, which were directly informed by the principles of the 2011-2015 Plan. Attention has been carefully paid to drafting outcome measures that align with the goals of what life should look like for individuals with disabilities.

Connie shared a handout with an overview of the plan. She said the action steps and areas of focus are meant to be flexible and may change over time, but the goals and outcomes will remain constant to act as a guide for everything else.

Connie said there has been a lot of discussion about whether the plan is a DHS Plan or a State Plan. She said the goal is to get the structure of the plan in place and fill in the areas of focus and activities that DHS can commit to, and then bring other agencies to the table who can use the document as a guide to look at their own activities and how they may fit in, and what else needs to be done. She said the formation of the plan will be an ongoing process as they reach out to more agencies and fill in additional areas of focus and activities. She said the draft plan will be shared with other state agencies, advocacy groups, and through public meetings around the state to get feedback and input from multiple sources and perspectives.

B. Discussion

Harry suggested including affordable transportation under the transportation domain because many individuals with disabilities live on a fixed income and affordable transportation is a big issue.

Len asked how draft plan compares to other state plans and settlement agreements. Connie said state plans vary widely, and plans that come out of settlement agreements tend to be more ridged. Len asked if the measures would use real numbers rather than proportions, for example specifying the exact number of individuals in specific institutions. He said it also seems important to know what specifically is being done to transition people out of institutions. Connie said the plan is a long way from being done and the intent is to make sure it is specific and measureable.

Jackie Dieckmann asked how people who are experiencing homeless or transient will be tracked. Theresa Armstrong said tracking individuals is going to be difficult, and they will need to come up with good, unique ways to track certain populations using managed care organizations, case managers, regions, etc. Jackie suggested tracking where people who are utilizing acute care beds end up.

Len said with regard to all of the initiatives that have been introduced over the past five years, and those that will continue to be introduced going forward, that it would be helpful to have a visual of some sort to show what all is happening in the state. He said understanding the complexities of who all is served by various entities, where to go for help, etc is important for consumers who are trying to navigate the complex systems, and to staff at various agencies or organizations around the state. He said a flow-chart of some sort that helps people see where to go and what everyone else is doing would also help the Taskforce see where their advocacy efforts might be most effective.

Tracy asked if there will be mechanisms in place to help individuals who are identified during the data collection who are not satisfied with the services they are receiving, particularly those in restrictive environments. Theresa Armstrong said in those cases DHS would certainly want to ensure a connection is made with someone who can assist the individual, their family, or the service provider has all the information they need.

Bob Bacon shared that SAMHSA has been holding regular Olmstead Regional Communities of Practice calls. On a recent call Connie gave an update on Iowa's planning process and received positive feedback and was invited to present in more detail on the next call. Connie said one of the things they were interested in hearing more about the background and history of the Olmstead Consumer Taskforce, and the involvement in the current planning efforts.

IX. IME Update and Introduction to Medicaid Director - Mikki Stier and Deb Johnson

Deb Johnson introduced Mikki Stier, who was appointed Director of Iowa Medicaid earlier this year. Mikki thanked the Taskforce for the invitation and said she was looking forward to working collaboratively as the state moves towards managed care.

Deb reported that managed care enrollment packets should be mailed to members in the next week. She reviewed that members have until December 17th to select an MCO, otherwise they will be auto-assigned. After December 17th members have until March 17th to switch MCOs for any reason, and after that date changes can only be made for good cause. She said IME has been holding meetings all over the state, and is aware of the frustration people have about not having enough information, but is making an effort to update information on the website and engage consumers, providers, and other stakeholders around the state. The member services call center has been expanded to help members once the packets come out. Enrollment brokers are separate from the MCOs, without advising them on who to choose. IME continues to meet regularly with the MCOs to help them learn lowa's system.

Theresa Bomhoff said she is worried about the workforce of clinicians and direct support staff, and the unintended consequence of quality service providers being hired by the MCOs. Deb said that is something IME is paying attention to. Theresa asked when a comparison chart will be available, and if there will be information in the member packets about where to find provider networks. Mikki said the packets contain an overview of each MCO and how to contact them. She said the comparison chart of value added services would not be in the packet because they are continuing to be developed daily, but that information will be online soon. Provider networks will be available on the MCO websites as well. Deb added that people who cannot access the information online should call member services.

Randy asked how transparent the process will be regarding profit and other issues. Mikki said there is a lot of oversight that DHS is responsible for, as well as strict reporting and quality measurements. She said there will be a dashboard of performance outcomes that

will address some of those concerns, and there is a presentation on IME's website with more information on oversight and accountability.

Roxanne said there is still confusion about who is and is not included in managed care, for example those who use HIPP and waiver services. Deb said someone who is on HIPP is not included in managed care, regardless of any other services they receive.

Jane Hudson asked much the MCOs will be responsible for employment services. Deb said one of the outcome measures is to increase the number of individuals with disabilities who are employed because of how important of an issue that is. Jane asked whether CMS has to approve the enrollment packets before they go out. Mikki said the delay in sending was due to printing issues.

X. State Agency Reports

A. Mental Health and Disability Services

Theresa Armstrong reported that DHS was recently awarded a Certified Community Behavioral Health Clinics planning grant by SAMHSA. Grants were awarded to 24 states to assist in improving access to comprehensive behavioral health services that are built on evidence based practices and integrate physical health care services. At the conclusion of the planning grant, up to eight states will receive funding for two-year pilot projects to implement their programs. The grant is a collaboration between MHDS, IME, and IDPH. Theresa said it is not certain how many clinics will be funded, but technical assistance is required for specific evidence based practices, and that will be open be open to all providers.

Theresa reported that psychiatric bed tracking is well underway. She said as predicted this system has allowed DHS to look at existing issues, like why an individual may be unable to find a bed when the system shows open beds, and identify what is happening and how to target it. DHS has been working with inpatient psychiatric providers and others who are high users of the system, the hospital associations, court system, regions, and others to help analyze CareMatch. She said part of the quality assurance DHS is providing is to look at the data and reach out to hospitals that may show several open beds and find out why; whether it is an issue with updating the system or if something else is going on. They will also be reaching out to people who are using the system to find beds to see how it is working for them and collect feedback. She said they are asking hospitals to update at a minimum of once per day, and more frequently if possible, perhaps at shift change.

B. lowa Department on Aging

Ruth Thompson, Program Manager for Life Long Links (LLL), reported that on September 30th IDA finished a year of work under contract with DHS for the Balancing Incentives Payment Program. Through that contract they developed standard operating procedures and a sustainability plan; and conducted trainings with Area Agencies on Aging around person centered planning, motivational interviewing, assistive technology, mental health

first aid, cultural competency, and a number of other topics. Over the last year they did data collection and marketing to enhance the experience for people who contact LLL as well.

She reported IDA collaborated with the Department of Transportation to build an integrated communication platform that will connect all LLL partners so individuals can be connected to resources, not just for transportation but an array of long-term services and supports. The DOT grant specifies veterans as the target population, but is part of LLL and will support their target population as well. This project was supposed to end on September 30th, but they are still working on it. The service will make it possible for an individual to make one call, or one online contact and be connected with individuals with various areas of expertise rather than being handed off and having to tell their story multiple times. IDA recently had a kick-off for a new database system that will replace their existing ESP database within the next six months. Data from ESP, DOT County Veterans Offices, and COMPASS will be migrated to the new system.

She reported IDA is currently wrapping up their veterans directed home and community based services project, and should be ready to begin enrollment soon. Through this program, veterans from across the state can be referred by the Veteran's Administration Medical Centers to an options counselor at LLL and receive their services in a consumer directed way in the community, rather than in a nursing home.

Dawn asked what will be happening with other information and referral entities around the state, like COMPASS or 211. Ruth said local coordination agencies are charged with developing those relationships at the local level. Dawn expressed concern at the level of collaboration between aging and disability services on this project.

Roxanne asked what state disability groups could do to partner with IDA to strengthen the disability piece of LLL, and shared that currently people with disabilities who call LLL often encounter dead ends and are unable to have their questions answered. Ruth said they are in the process of rebuilding the database and will relaunch it by the end of the year, and she welcomes people to submit resources directly to her at any time and she will make sure they are added to the database. She said specific information about barriers people are encountering is helpful, and it would be wonderful to partner with disability organizations on opportunities for cross-training and other activities to enhance their ability to serve individuals with disabilities.

XIII. Taskforce Member Reports

Dawn said she attended an event held by the national disability organization Respect Ability earlier in the day and invited Lauren Appelbaum to stop by the Taskforce meeting. Lauren gave a brief overview of the organization, which focuses on improving employment opportunities for individuals with disabilities. She said staff from their Washington D.C. offices will be spending time in states that are prominent in the presidential election, including Iowa, with the goal of getting candidates to talk about disability issues. She said they are non-partisan and encourage citizens to go to town halls and other events and ask questions in order to bring the issues to the attention of the candidates. Randy asked the Taskforce to revisit the issue of how much personal assistants are reimbursed and introduced his PA, Dee Wilson. Dee thanked the Taskforce for giving her the opportunity to say a few words and said that the current rate for reimbursement is below minimum wage, and though she is happy to support Randy it would not be feasible for her to do so at future meetings unless the rate is reconsidered. Bob Bacon thanked them for bringing the issue to his attention and said the issue will be addressed as soon as possible. Theresa Armstrong said she will follow up with Bob on addressing the wage issue and thanked Randy and Dee for bringing it up.

IX. Public Comment

None

X. Adjournment

The meeting adjourned at 2:53pm.