

OLMSTEAD CONSUMER TASKFORCE MEETING
March 14, 2014
Pleasant Hill Public Library, 5151 Maple Drive, Pleasant Hill

MINUTES

Handouts

Agenda

Minutes of Previous Meeting – January 10, 2014

Executive Committee Minutes – February 26, 2014

Revised Draft 2014 Legislative and Strategic Priorities and Revised Work Plan

Taskforce Letter to Joint Health and Human Services Appropriations Committee

Advocating for Restoration of Funding to Address HCBS Waiver Waiting Lists –
January 21, 2014

Taskforce Letter to Joint Economic Development Appropriations Subcommittee

Regarding HCBS Waiver Rent Subsidy Program – January 28, 2014

Taskforce Letter to Joint Education Appropriations Subcommittee Advocating Increased

Funding for Title I State Match for Iowa Vocational Rehabilitation Services –
February 2, 2014

Taskforce Letter to Senate Human Resources Committee Regarding CDAC/CCO

Services – March 5, 2014

Taskforce Letter to Representative Dave Heaton Regarding Community-Based Housing

Revolving Loan Fund – March 5, 2014

Taskforce Comments to DHS Regarding Iowa Health and Wellness Plan

Announcement of DOT Public Transportation Summit (May 15, 2014)

Taskforce Members Present: Joan Bruhn; Roxanne Cogil; Paula Connolly; Randy Davis; Lynsie Hanssen; Carrie England; Dawn Francis; Alice Holdiman; Linda Moore; Michele Meadors; Kathleen O’Leary; Len Sandler; Bruce Teague (by phone); Casey Westhoff; Jennifer Wolff

Taskforce Members Absent: Geoff Lauer; Darryl Lipscomb; Rik Shannon

State Agency Representatives Present: Theresa Armstrong and Karen Hyatt Smith (DHS – MHDS); Deb Johnson (DHS - IME); Karin Ford (IDPH); Kristin Haar (IDOT); Terri Rosonke (IFA); Ruth Thompson (IDA); Ljerka Vasiljevic (DPS)

Staff: Bob Bacon; Liz O’Hara

Guests: Teresa Bomhoff; Mazie Johnson

I. Welcome and Introductions

In the absence of Chair Geoff Lauer, Dawn opened the meeting at 10:10. A quorum was declared. Members introduced themselves.

II. Approval of the Agenda

Item IV.E pertaining to legislation regulating CDAC services has been dropped. Moved by Len Sandler and supported by Roxanne Cogil to approve the agenda as amended. Motion carried.

III. Approval of the Minutes of the Previous Meeting – January 10, 2013

Moved by Randy Davis and supported by Carrie England to approve the minutes of the previous meeting on January 10, 2013. Motion carried.

IV. Executive Committee Report

A. Action Item: Review and Action on Revised Draft 2014 Legislative and Strategic Priorities

Members had received with their meeting materials the revised draft containing edits they made at the January Taskforce meeting. Liz O'Hara had noticed that some edits had been overlooked, pertaining to expanding access to assistive technology in the HCBS Waivers. One example given was "lifeline" emergency response systems; these are offered under at least some waivers, and Liz was directed to check whether they were available in all of them, and revise the language as appropriate. Moved by Jenn Wolff and supported by Kathleen O'Leary to approve the draft 2014 Legislative and Strategic Priorities with any appropriate edit pertaining to lifelines. Motion carried.

B. Action Item: Request for Endorsement of Taskforce Letter to Joint Health and Human Services Appropriations Committee Advocating for Restoration of Funding to Address HCBS Waiver Waiting Lists – January 21, 2014

The letter is similar to the letter to the Governor endorsed by the Taskforce in January, but it adds the request for a Legislative Study Committee to review Iowa's waiver system. Dawn noted that at this point a supplemental Medicaid appropriation for the current fiscal year is unlikely. She also reported that advocates accept the fact that DHS would have trouble disbursing much of the \$8 million being requested before the end of the fiscal year, because of the limited human resources at DHS Field Offices. Teresa Bomhoff stated that 96% of waiver spending is on the Intellectual Disabilities and the Elderly Waivers, and only 4% on all the rest. She expressed the hope that waiver funding might be included in the Standings bill. Moved by Randy Davis and supported by Michele Meadors to endorse the Taskforce letter to the Joint Health and Human Services Appropriations Committee advocating for restoration of funding to address HCBS Waiver waiting lists. Motion carried.

C. Action Item: Request for Endorsement of Taskforce Letter to Joint Economic Development Appropriations Subcommittee Regarding HCBS Waiver Rent Subsidy Program – January 28, 2014

Terri Rosonke stated that the latest information she had was that the outlook for an increase in funding for the program was not good. Moved by Carrie England and supported by Kathleen O'Leary to endorse the Taskforce letter to the Joint Economic Development Appropriations Subcommittee regarding the HCBS Waiver Rent Subsidy Program. Motion carried.

D. Action Item: Request for Endorsement of Taskforce Letter to Joint Education Appropriations Subcommittee Advocating Increased Funding for Title I State Match for Iowa Vocational Rehabilitation Services – February 2, 2014

Bob Bacon indicated that he had heard there was a good chance that Title I state match funding would be increased by the Legislature. Dawn said that Senator Bob Dvorsky is very familiar with Title I and would be a good person to contact. Moved by Carrie England and supported by Michele Meadors to endorse the Taskforce letter to the Joint Education Appropriations Subcommittee advocating increased funding for Title I state match for Iowa Vocational Rehabilitation Services. Motion carried.

E. Action Item: Request for Endorsement of Taskforce Letter to Senate Human Resources Committee Regarding CDAC/CCO Services – March 5, 2014

This item has been dropped from the agenda. Liz stated that the legislation was moving so quickly, with confusing changes, and passage expected at any time, that Taskforce advocacy was likely to be ineffective.

F. Action Item: Request for Endorsement of Taskforce Letter to Representative Dave Heaton Regarding Community-Based Housing Revolving Loan Fund – March 5, 2014

The purpose of the Community-Based Housing Revolving Loan Fund (RLF) is to support development of housing specifically for hard-to-serve individuals at risk of being placed out of state for services, mainly due to the risks posed by their behavior. However, the financing mechanism has proved extremely difficult for developers to use; allowing the Iowa Finance Authority to use the Fund to provide forgivable loans would create more workable projects. The letter asks Representative Dave Heaton, who sponsored the original legislation, to clarify that IFA has this authority. Terri Rosonke stated that she understands Representative Heaton to be open to this, although there is a concern that due to the low level of utilization the RLF appropriations might be shifted to other purposes. Moved by Len Sandler and supported by Kathleen O'Leary to endorse the letter to Representative Heaton regarding the Community-Based Housing Revolving Loan Fund. Motion carried.

G. Action Item: Request for Endorsement of Taskforce Comments to DHS Regarding Iowa Health and Wellness Plan – March 6, 2014

Dawn stated that it is important to keep in mind that the Iowa Health and Wellness Plan (I-HAWP) benefits Iowans with disabilities and mental illness in many ways. It is still important to identify where the plan falls short, and to raise important issues when necessary. Last summer as the I-HAWP was under review by the U.S. Department of Health and Human Services (DHHS) and when public comment was solicited by DHS, the Taskforce raised objections to the lack of access to Non Emergency Medical Transportation (NEMT), to the proposed premiums to be charged for coverage, retroactivity provisions, etc. I-HAWP is made operational in the form of two Section 1115 Waiver applications, which were submitted by DHS to CMS. The applications did not have the changes requested by disability advocates, and DHHS required few changes be made.

I-HAWP took effect in January, and DHS is again asking for public comment on the rules governing the program, because they differ from what was sent in to DHHS last year. The Taskforce has again commented on the lack of access to NEMT services, and on the importance of open access to medications, an important issue for mental health advocates. Section 1115 Waivers are supposed to give states the flexibility to demonstrate how coverage can be expanded or service delivery improved when standard Medicaid requirements are waived. The Taskforce comments ask how DHS will determine that dropping NEMT has improved delivery of services.

Teresa explained why open access to psychotropic medications is so important for people with MI. Everyone responds differently to medications, and what works well for a while can stop working. People need to be able to switch medications if that will help keep them stable.

Deb Johnson commented that the enabling legislation for I-HAWP did not provide for NEMT. She also said that the Medicaid member call center can help people with questions about Iowa Medicaid's drug formulary. Susan Parker is the state pharmacist. Moved by Roxanne Cogil and supported by Randy Davis to endorse the Taskforce comments submitted to DHS regarding the Iowa Health and Wellness Plan. Motion carried.

H. Other Legislative Updates; Review of OCTF Work Plan

Liz stated that she had reviewed the Taskforce Work Plan laying out action steps to achieve its Legislative and Policy Priorities, and work on individual issues is proceeding as intended. Gary McDermott reported that the Refueling Assistance bill has passed the Iowa Senate, but is not expected to move in the House. Unless it is placed in the Standings bill or an appropriations bill, it will die. Dawn stated that Senator Hart is optimistic that one of these routes can be taken. Gary has made progress through the alternative route of suing the Kum and Go chain

because he was unable to fill up his car due to lack of compliance with the ADA. The lawsuit has not been resolved but he sees their three Iowa city gas stations now have large call buttons. Len Sandler suggested that another alternative is to file a complaint with a local civil rights agency. Regarding legislative action, Len said that it is important to know whether the state agency that would be responsible for enforcement supports the bill, or only sees it as more work to no purpose. He noted that vendors did not support this bill. Dawn recognized the hard work of both Gary and Terry Cunningham on this issue.

On other matters, Paula Connolly reported that she is hearing many concerns about people getting notified of approval for coverage under I-HAWP, but they are denied services because they do not yet have a Medicaid card. She was aware of an individual denied service even though he had an approval letter from IME. She reported the incident on a national call on healthcare reform implementation; the Administration on Community Living is also asking for “stories” on people’s experiences under healthcare reform. Bob Bacon can send these stories through the Association of University Centers on Disabilities. Michele Meadors reported that although she did not yet have a card, her hospital simply looks up her Medicaid ID number on the Internet. She stressed it is important for people to keep their eligibility letter, which generally contains their identification number.

Moved by Michele Meadors and supported by Jenn Wolff that the Taskforce send a letter to all hospital Chief Executive Officers in Iowa asking that they ensure that individuals determined eligible for the I-HAWP program receive services if this verification can be found on the Internet. Motion carried. It was suggested that Liz ask the Iowa Hospital Association and the Iowa Primary Care Association for assistance in getting this message to their members.

V. Nominations Committee Report

A. Report on Member Recruitment/Selection Process

Carrie reported that the Taskforce had received 32 applications for membership. Using a scoring system that assigned points for key characteristics such as disability or age over 60, as well as a track record in advocacy, the 32 applications were narrowed to 15. References were contacted and asked a set of questions. This resulted in 8 finalists. The Nominations Committee was satisfied with the process, though it will meet again to discuss ways to strengthen the recruitment process. Taskforce members suggested consideration of additional characteristics such as being from a rural area and a veteran.

B. Action Item: Recommendation for Appointment of Eight Candidates to Membership on the Olmstead Consumer Taskforce

Carrie reported that the Committee is also extremely pleased with the eight finalists. Carrie read a brief biographical description of each individual. Moved by Len Sandler and supported by Kathleen O'Leary (1) to approve appointment of the following individuals to the Olmstead Consumer Taskforce: Jackie Dieckmann, Tracy Keninger, June Klein, Ashlea Lantz, Gary McDermott, and Mary Roberts; and (2) to approve the reappointment of Michele Meadors and Bruce Teague. Motion carried.

VI. Election of Officers

Carrie reported that Geoff Lauer and Paula Connolly are willing to stand for re-election as Chair and Secretary, respectively, and that she was willing to submit her name for Vice Chair. Dawn called for nominations from the Floor. There were none. Moved by Michele Meadors and supported by Len Sandler to elect the slate of officers as presented. Motion carried.

VII. CMS Final Rules on Integrated Setting for HCBS Services – Deb Johnson, DHS – IME, Long Term Care Division

CMS has issued final rules defining what constitutes an integrated setting for purposes of Medicaid-reimbursable Home and Community Based Services (HCBS). The rule-making process has been lengthy and full of controversy, and Deb stated that states have been told that further clarification of some aspects of the rules will be provided. Some parts of the rules are straightforward, such as the exclusion of hospitals, intermediate care facilities and nursing homes from the definition of integrated settings. Other aspects of the rule are fairly clear but controversial because of their impact on many providers, prohibiting reimbursement for HCBS to individuals in residences that are on the campus of, or immediately adjacent to institutional settings. CMS has stated that the principles in the rule apply to employment services as well, but this is an area where further clarification will be provided. CMS, in its final rule, seems to have pulled back from its earlier proposal to exclude HCBS from disability-specific housing projects, though states are apparently able to impose restrictions of their own.

The rule applies to Section 1915(c) Waivers, the Section 1915(i) Waiver (which is used in Iowa to provide Habilitation services, and the Section 1915(k) Waiver (Community First Choice Option) not yet adopted in Iowa. Deb stated that CMS's main objective is to make sure people have meaningful choices. The rule defines person-centered planning (PCP) as well as integrated settings. She had just spoke to the Iowa Association of Community Providers, and had gotten a favorable response from many providers who felt that Iowa was further along in implementing these principles than many other states. Providers did acknowledge that there is room for improvement in the way PCP is done in Iowa. Other components of the rule with lesser significance is the authorization for

states to combine target populations in their waivers, which Iowa already does to some extent, the extension of the waiver renewal cycle to five years, and the clarification of some billing procedures.

CMS has moved away from trying to establish what HCBS “is not” to a focus instead on the outcomes of services, e.g., the extent to which people exercise meaningful choice—having more than one option, and being fully informed about those options, the extent to which they secure competitive employment, etc. Deb stated that providers acknowledge they need to move forward in these directions. She mentioned that IME’s Program Integrity unit is concerned about the implications of Medicaid members engaged in community-based employment. The CMS rules also address rights to privacy, dignity and freedom from coercion. The use of any restraints will have to be justified.

Other restrictions for residentially based services include landlord/tenant protections, privacy in sleeping or living units, lockable entrances, choice of roommates within individual units, freedom to furnish and decorate, control of one’s personal schedule, and access to food at all times. This conflicts with some Residential Care Facility licensing requirements. The prohibition against locating the residential units on or adjacent to institutional campuses can be problematic in Iowa. For example, some day programs are operated next to nursing homes. In terms of securing further clarification of the rules, Deb asked that the Taskforce send her any questions they have for CMS. Paula Connolly asked if there is a website or resource for consumer-friendly information, and Deb did not know of any.

Deb stated that states are going to be allowed time to transition towards compliance with the rule—perhaps as much as five years. IME would like to put uniform standards in place for the Elderly and disability waivers with a single Plan. The Plan is required by CMS within one year of submission of a waiver application for renewal, and stakeholder input is required. The first of Iowa’s waivers to be up for renewal will be the ID Waiver this summer. However, IME is also required to submit what it calls a “plan to do a plan,” which must be completed by April 1st. It is a preliminary statement of what IME intends to do, and there is not likely to be time to secure stakeholder input.

Teresa Bomhoff noted that one of the Taskforce priorities is the establishment of a Legislative Study Committee to look at the Waiver system. She suggested that the components of the transition plan might be part of the Committee’s work, which might include other major issues such as expansion of waiver services to other populations. Deb said that this would be a possibility, but the Legislature has in the past rejected attempts by DHS to propose revamping of the Waiver system. Randy Davis commented that Iowa has made progress, moving on from the task of barrier removal to creation of real choice and opportunity for people with disabilities. Deb agreed that creating real opportunities for jobs and community inclusion is the next step, and that PCP is a powerful tool.

VIII. Update on MHDS/Redesign – Theresa Armstrong

Redesign. Theresa explained the Legislature's per capita funding formula to establish equalization in property tax funding among all the counties. Counties' property tax levies are added to the total amount of state payments, and divided by state population, to arrive at a \$47.28 per capita funding amount for county services. Counties with less than this per capita funding receive state funding to bring them up to this level; counties exceeding this amount must reduce their levies. The "clawback" provision in legislation which many advocates oppose is a requirement that counties pay back to the state 80% of the amount of savings accrued due to the transfer of individuals, who previously had received county-funded services, into the Iowa Health and Wellness Plan supported with Medicaid. The formula and the timing or even deletion of the clawback requirement is still being vigorously debated. DHS is working on a method to estimate savings. Theresa noted that it is intended that the first six months of savings under I-HAWP remain with the counties. She cited one county which saw its caseload go from 138 to six, due to I-HAWP.

Teresa Bomhoff commented that Iowa continues to rank low in relation to other states in its mental health services. Coventry, one of the two Qualified Health Plans consumers can use in the Iowa Marketplace Choice Plan, is reimbursing so little and so slowly for mental health services that providers such as community mental health centers are not accepting Coventry enrollees. Counties would have to serve these people. Counties cannot afford to put people in expensive inpatient placement. In addition, the clawback has made county budgets uncertain. Teresa said that the system is now worse, not better, in great part because we still have the levy cap in place. Other remaining issues are the income limits for eligibility, set at the low level of 150% of poverty, and the lack of services for whole populations such as people with Brain Injury and Developmental Disabilities. At a time when core and core plus services should be developed, the focus instead seems to be on reducing costs.

Dawn said that advocates need to be mobilized. Paula noted how complicated the issues are. People have trouble understanding—even legislators. Theresa said a continuing problem is the decline in the federal matching rate (FMAP) for Medicaid, which is squeezing the state's budget. Another \$80 million in federal assistance is about to be lost. Bob Bacon commented that the impact of these changes won't begin to be known until October, when we can start to assess savings. He said there is a pressing need for infrastructure development, such as workforce recruitment and training, and it is unknown how that could be supported. Paula also raised the issue of consumer/ family participation in decision-making, in sufficient numbers that their voice really has an impact.

IX. State Agency Reports

IFA – Terri Rosonke reported that it appears that the HCBS Waiver Rent Subsidy Program will be level-funded at \$658,000. The Taskforce has advocated for \$1 million for the program. Since the program reopened to applicants, IFA has established a waiting list to help assess demand. Two hundred applications were received on the first day. Of those, 86 have been approved, and more will be added in March. The program will shortly be at its budget capacity.

IFA and DHS are still looking at a possible Section 811 Project Based Rental Assistance (PBRA) application, although it does not appear that technical issues with the program have been resolved. A second Notice of Funding Availability (NOFA) was issued by HUD.

Terri provided an update on the new web-based service to assist landlords and renters to post/find available rental units in Iowa. IAHousingSearch.org, has to date seen 21,000 searches, and experienced a 22% growth per month in the number of participating landlords. Michele Meadors serves on the advisory committee. She commented that IFA should try to collect success stories, especially ones which can counter developer complaints that they cannot find renters for their accessible units.

Terri also reported that the IFA Board approved 15 Low Income Housing Tax Credit (LIHTC) and HOME projects across the state, for 737 units total. All winning projects are required to set aside 10% of their units, making them fully accessible and targeting disability populations so that 10% of their renters are people with disabilities (who may or may not need physical accessibility features). They will be required to post the units on the IAHousingSearch website.

Six awards for HOME Tenant Based Rental Assistance (TBRA) have also been announced; three are targeted to people with disabilities.

Departure from Agenda: Recognition of Out-Going Taskforce Members

Carrie announced that the Taskforce would like to recognize outgoing members Randy Davis, Dawn Francis, Alice Holdiman, and Casey Westhoff. Randy, Dawn and Alice were presented with framed certificates and thanked for their years of service. Randy and Alice have been working with the Taskforce since its earliest days. Casey, who participated by phone, will receive his certificate separately.

Veterans Home – Diane Blackburn reported that thus far 750 residents of the facility in Marshalltown have been transferred to community settings. At the facility 180 new private rooms have been established, with 90 more to be available in May and 90 more under construction.

Iowa Department on Aging – Ruth Thompson reported that the Aging and Disability Resource Center network is in operation and began taking calls in

January. Center staff are receiving training in order to provide information and assistance to people with disabilities. The Department provides technical assistance as well. Dawn noted that a year ago a kickoff event on ADRCs was held in Des Moines touting the partnership between area agencies on aging and centers for independent living (CILs), but that the concept seems now to have been lost. Ruth stated that the process for designation of ADRCs was written into legislation; it allows only area agencies to be ADRCs. She wants to encourage CILs to contact area agencies about partnerships. Carrie England said that her CIL had tried but had not received a response.

Ruth also reported that IDA has a partnership to work with the Veterans Administration and the Heritage Area Agency on a pilot project to support veterans in home and community based settings. They can cash out their VA service budget to secure the supports they need under an HCBS option.

Iowa Department of Transportation – Kristen Haar announced a Passenger Transportation Summit will be held in Marshalltown on May 15th, on the community college campus. There will be half hour presentation on various transit topics. The main themes will be pulled out at the end of the day, along with ideas for solutions to major issues. This will be forwarded to the Iowa Transportation Coordination Council. IDOT cannot, unfortunately, cover the expenses of people with disabilities to attend; they are encouraged to contact their local transit agencies to see if rides can be provided.

Kristen also reported that IDOT continues to work with DHS and IDA on the grant-funded “One Call/One Click” project, focusing on the call center aspect.

X. Member Reports

Randy Davis expressed appreciation for the opportunity to serve on the Taskforce. He is using his Individual Development Account to continue operating his business.

XI. Public Comment

None.

XII. Adjournment

The meeting adjourned at 2:50 pm.