

Nebraska Money Follows the Person Advisory Panel Meeting April 26, 2010

Members Present:

Pat Compton	Paul Maginn
Connie Cooper	Kerry Michael
Rich Brandow	Cindy Fisher

Members Represented

Mary Angus (Kathy Hoell – Nebraska Statewide Independent Living Council)

Members Not Present:

Jamie Summerfelt	Marla Fischer-Lempke	Jerry Campbell
Lori Harder	Mike Hon	Mark Intermill
Mark Schultz	Heath Boddy	
Mike Schaefer		

State Staff Present:

Chad Frank – DHHS	Cindy Kadavy – DHHS
Stacey Brunner – DHHS	Susan Buettner – DHHS
Bil Roby – DHHS	Stacey Dangler – DHHS
Debbie Lewis – DHHS	Hope Whitaker-Blackmore – DHHS
Kay Wenzl – DHHS	

Call to Order

Bil Roby, Grant Manager of NMFP, called the meeting to order at 10:10am, April 26, 2010 in the conference room of Staybridge Suites, 2701 Fletcher Avenue, Lincoln, Nebraska.

Introduction / Welcome

Bil welcomed Advisory Panel members and state staff to the meeting, stated the meeting operates under the Open Meetings Act, and requested members of the public to sign the Public Comment Sheet if they wished to speak. Bil also reminded panel members and State Staff to sign the Advisory Panel meeting sheet. He noted the meeting agenda is distributed to Stakeholders, Advisory Panel members, and State Staff and that meeting time, place, and agenda information is posted on the Public Calendar of the State of Nebraska official government website.

Introduction / Welcome (cont.)

As a quorum was not present, a discussion regarding adoption of the agenda and approval of the minutes ensued. It was agreed that the meeting would be convened and approval of the February 22, 2010 minutes would be deferred until the next meeting.

Bil introduced Susan Buettner, the new Administrator for the Division of Medicaid and Long-Term Care. Susan briefly touched upon her legal background, her experience with Medicaid issues, and new knowledge gained thus far about the Division and the Money Follows the Person project. She welcomed any insight, advice, or suggestions from panel members and thanked them for their work on behalf of the program.

Agenda Updates:

Transition Activity / Outreach Report – Figures detailing transition and outreach activity were presented. The newly designed report is now compiled directly from the NMFP database. Transition figures below represent a current, unduplicated count of all individuals transitioned under NMFP. Transitions to Assisted Living facilities are not included. Total presentations represent a combined total of facilities, hospitals, groups, associations, etc. in which outreach was conducted. Total one-to-one outreach visits represent individual contact with residents to discuss home-and-community based services.

<u>Total Transitions:</u>	70
<u>Total Outreach Presentations:</u>	502
<u>Total One-to-One Outreach Visits:</u>	631

Figures represent transitions and outreach efforts from the start of the program through April 23, 2010.

Kathy Hoell inquired about re-evaluation of the Traumatic Brain Injury (TBI) waiver to make it more available to consumers. Kay Wenzl replied the Aged and Disabled (A&D) waiver was chosen to serve individuals in the MFP program as use of the TBI waiver would have required revision and would have incurred an administrative burden. Kay stated the A&D waiver met the needs of the TBI population; staff use cognitive and cuing techniques during assessments to further assist in determining waiver applicability. She further stated both waivers require individuals meet nursing facility level of care.

Kathy also questioned the value of numerous waivers targeting different populations versus one waiver to cover services of all population categories. Kay responded that the diversity of populations and the variety of service needs have a bearing on how many waivers a state uses to serve consumers. She also explained one waiver may not necessarily cover all of the unique, specialized service needs of individuals whereas multiple waivers targeting specific populations would be, in effect, more tailored to the individual. It was noted by both Kay and Kathy that some states have moved to one waiver to cover all population categories. Kay stated a one-waiver approach would require less administration but have the potential for waiting lists and unmet specialized services needs. Kathy

Agenda Updates (cont.)

Transition Activity / Outreach Report

pointed out a one-waiver approach would be more efficient and less burdensome to the consumer.

Paul Maginn inquired about the number of individuals transitioning to unqualified residences confirming the number represented a transition to the community but not through the MFP project. The number is currently 60 individuals, a current and correct total but a revision of nine less from the last report due to a tabulation error.

Discussion of February's Brainstorming Session – Bil explained a review of the findings from the last meeting's session, to identify best practices to connect with individuals in nursing facilities who wish to transition, has been underway:

- **Specific targeting through the Minimum Data Set Report (MDS)** – the report identifies nursing facilities residents and/or support persons who have indicated a desire to return to the community. Currently, over a 1,000 individuals residing in nursing facilities would prefer to live in the community. The NMFP program plans to reach these individuals through one-to-one contact and outreach to facilities.
- **Media Buy** – currently in development, the NMFP program is working with the Department's Office of Communication and Information to produce an in-house 30-second television spot. The option of radio advertising was considered; however, television was considered the better avenue to reach individuals and support persons. Bil presented information about a recent USA Today article that detailed a transition story and discussed, nation-wide, MFP successes and challenges. The article also listed the number of individuals transitioned by state through 2009. Bil briefly noted that a majority of the states, due to a number of issues, are striving to meet their transition goals; comparatively, Nebraska has achieved a great deal through its transition and outreach efforts.
- **AARP** – plans to publicize NMFP articles in the next up-coming Nebraska state AARP bulletin and to send emails to AARP members in selected areas of the state are underway. Bil stated this type of outreach meets MFP protocol goals by informing individuals of the availability of home-and-community-based services before they enter a facility. Kathy Hoell inquired whether the Aging and Disability Resource Center (ADRC), when it is established, would be another avenue in which to provide information about transition programs. A brief discussion on the timeline of the grant and function of the center ensued.

Agenda Updates (cont.)

Centers for Medicaid and Medicare Updates (CMS) – Bil discussed the following CMS issues and directives that were a direct result of grantee discussions during the national MFP conference in October 2009:

- Six-month facility residency requirement reduced to three months – finalization of the directive is expected soon, but the decrease is official.
- Relaxation of the group home residency requirement of four or less unrelated individuals residing in one residence to permit residences of five or six individuals was not approved.
- Grantee project expenses such as travel, media campaigns, salaries, and meeting costs will be covered by the grant at a 100% federal match rate, after CMS review and approval of the justification of expenditures. NMFP's request for a 100% match is being finalized and will be submitted per CMS guidance directions.
- Latest Notice of Funding Availability (NOFA) announcement by the Department of Housing and Urban Development (HUD) is the result of a partnership between HUD and CMS to provide housing vouchers to 5,300 non-elderly households with disabilities. The NOFA will fund two categories: 1) Category 1 targets non-elderly disabled households on a Public Housing Agency waiting list, 2) Category 2 funds approximately 1,000 vouchers for non-elderly individuals with disabilities moving from nursing homes and other health care institutions into the community. Kerry Michael stated the Omaha Public Housing Authority plans to apply for a combined total of 200 housing vouchers in Category 1 and 2, with the expectation that 100 will be granted to the authority. A discussion ensued concerning the participation of other Nebraska PHA's, a "flash" notification email to Nebraska PHA's through the local HUD office, preferences, and waiting lists. Further discussion as it relates to NOFA provisions in Category 2 requiring PHA's to partner with support service agencies to provide care/case management services as well as health and social services is planned. The deadline for application is July 7th, 2010.
- A submission to CMS to amend the NMFP Operation Protocol is nearing completion. The proposal requests that the savings from the federal enhanced match rate on services for MFP transitions be used to provide assistive technology adaptations and modifications to residences of individuals with developmental disabilities. Currently, the protocol specifies the state savings is to be used for telehealth purposes. If approved, the use of the state savings from the enhanced match would be used for both purposes.
- The MFP program has been extended through FY 2016. Kathy Hoell and Paul Maginn inquired whether Nebraska's MFP program would operate through 2016 rather than September 2011.

Agenda Updates (cont.)

Centers for Medicaid and Medicare Updates (CMS)

Bil responded a decision must be made prior to September 2011, observed CMS is focused on rebalancing the long-term care system nation-wide, and the state would weigh a number of factors before reaching a decision.

CMS MFP Site Visit – Bil discussed and outlined the upcoming May 10 – 12, 2010 site visit by Nebraska’s MFP Project Officer, Kate King, along with Gail Brown-Stevenson, CMS Regional Office, and Matt Hodges, Mathematica Policy Research, Inc. The three day visit will tentatively cover the following:

- First Day – Enhancement and expansion of community-based services in Nebraska, changes in Nebraska’s Developmental Disability services, overview of Nebraska’s MFP project, quality monitoring systems, Transition Coordinator discussions, discussion of housing options, and overview of the NMFP database
- Second Day – Consumer visits
- Third Day – Review of consumer/family visits, comments from the CMS site team, and closing comments

Connie Cooper inquired how consumers were selected for interviews; Bil and Chad Frank explained that the process ultimately depended upon the willingness of the consumers to participate. Chad said although the three consumers were all under the age of 65 they still made for a diverse group and would provide a representative picture of Nebraska’s MFP transitions and waiver services. The interviews will include only the CMS site team and the consumer.

Partnership with Independent Living Centers – The League of Human Dignity and the Central Nebraska Independent Living Center, with possible participation by the Panhandle Independent Living Center, will partner with NMFP Transition Coordinators to jointly visit nursing facilities to combine home-and-community-based services (HCBS) outreach efforts. Bil noted this will be a different approach but will provide further opportunities to reach nursing facilities residents.

Additional Topics

Further discussion centered on the new housing vouchers, rural PHA’s, how landlords will view the requirements of the vouchers, and Assistive Technology Project adaptations for rental properties.

Cindy Fisher inquired about the amount of services available and the number of providers in rural areas. The NMFP Transition Coordinators and panel members noted that family / informal supports are critical for a successful transition in a rural area as provider services are limited in such areas.

Susan Buettner offered her appreciation of the panel’s time and commitment to Nebraska’s MFP program and encouraged panel members

Agenda Updates (cont.)

Additional Topics

to contact her, Bil, or the Division's Unit Managers with ideas, suggestions, or comments.

Public Comment

Members of the public were not present for the meeting.

The public session of the meeting was closed. Bil explained that the remainder of the meeting would be a discussion of current caseloads and barriers to transition.

Closed Session

Discussion of unspecified cases and barriers to transition comprised the remainder of the meeting.

The meeting concluded at 12:33pm.

Respectfully Submitted,
Debbie Lewis
NMFP Staff Assistant