

Nebraska Money Follows the Person Advisory Panel Meeting October 27, 2008

Members Present:

Paul Maginn	Marla Fischer-Lempke	Brendan Bishop
Mike Hon	Mark Schultz	Connie Cooper
Richard Brandow	Pat Compton	

Members Represented

Barry Long (Denise Parker – Omaha Housing Authority)
Pat Snyder (Brendon Polt – Nebraska Health Care Association)
Mark Intermill (Bob Courtney – AARP)

Members Not Present:

Barry Long	Mark Intermill
Mike Schafer	Pat Snyder
Mary Angus	Jerry Campbell
Sue Spitzer	Cindy Fisher

State Staff Present:

Cindy Kadavy – DHHS	Hope Whitaker – DHHS	Pat Moeller – DHHS
Mary Jordan – DHHS	Deanna Jesse – NCBVI	Jerry Eisenhauer – DHHS
Teresa Jackson – DHHS	Bob Deaton - NCBVI	Bil Roby – DHHS
Chad Frank – DHHS	Leslie Novacek – ATP	Debbie Lewis – DHHS

Call to Order

Bil Roby, Grant Manager of NMFP, called the meeting to order at 9:03 am, October 27, 2008 in the conference room of the Staybridge Suites Hotel, 2701 Fletcher Avenue, Lincoln, Nebraska.

Introduction / Welcome

The meeting opened with an invitation to members of the public to sign the Public Comment Sheet if they wished to speak and a reference to observance of the Nebraska Open Meetings Act. Panel members and State Staff were asked to note their attendance on the meeting sign-in sheet. Publication of the meeting time, date, agenda, and location was duly noted on the Public Calendar of the State of Nebraska official government website and the NMFP website.

Introduction / Welcome (cont.)

Introductions of individuals representing absent members and state staff followed. Bil provided a brief description of the role state staff plays at Advisory Panel meetings and related they are not voting members of the panel and are present to provide support and answer questions.

Bil requested a motion for approval of the agenda; Connie Cooper moved and Mark Schultz seconded. Discussion turned to the minutes for the meeting. The minutes of the August 25th meeting were accepted without changes. Bil requested a motion for approval of the minutes; Pat Compton moved and Mark Schultz seconded approval.

Agenda Updates:

NMFP Advisory Panel Meeting Times – Connie Cooper initiated a discussion about changing meeting times due to the early travel time for the several panel members who live outside of Lincoln. Panel members also noted that winter conditions and darkness make early travel difficult. Rich Brandow motioned to change the meeting time from 9:00am to 12:30pm to 10:00am to 1:30pm. Mike Hon seconded the motion. The ayes carried the motion.

Behavioral Health – Bil stated that he has met with DHHS staff to discuss options on inviting Margaret Van Dyke, a Nurse Consultant with Medicaid and Long Term Care, to speak to the panel about behavioral health services available to Medicaid recipients. Schedules permitting, Margaret will be invited to present at the next Advisory Panel meeting.

Marla Fischer-Lempke – Bil announced Marla's new position as the Executive Director of the Arc of Nebraska. Congratulations and good luck were extended to Marla by the panel and staff.

Assisted Living – NMFP is still working with CMS to allow the use of Assisted Living (AL) facilities as a qualified residence under the project. CMS maintains that AL's do not allow for aging-in-place and that AL's can discharge residents who exceed a certain level of care and services. Bil stated he has met with the legal department to discuss and review regulations and options. Discussion of the topic turned to waiver, waiver services, complex/skilled nursing care, and regulations governing AL facilities. In response to Pat Compton's question, Bil replied that Service Coordinators, as outlined in the NMFP Protocol, had the final say in determining whether an individual would be eligible for waiver.

A nation-wide peer-to-peer Technical Assistance (TA) call for all grantee states is to be scheduled by CMS in the near future to discuss the viability of using AL's as qualified residences under the MFP program. Connie inquired whether other states have the option of using AL facilities; Bil replied, per our CMS Project Officer, states have included it in their protocols, as Nebraska has done, but it is not an approved residence. NMFP continues to track and monitor transitions to AL facilities in the event the facilities are approved as qualified residences.

Agenda Updates (cont.)

Witherbee Village – NCB Capital Impact has partnered with Witherbee Village to promote a village-style approach, at the grass roots level, to help elders to age in place and live independently in their neighborhoods. A Village is a self-governing organization which helps to coordinate and deliver programs and services. Currently, there are thirteen Villages operating in seven states.

Nebraska Dietetic Association (NDA) – Bil introduced Teresa Jackson and Paula Ritter-Gooder as members and representatives of the NDA. Both Teresa and Paula are strong advocates for connecting individuals transitioning through NMFP or currently on waiver with proper nutrition counseling and dietetic services. Bil referred both to Mary Angus, the Services Availability chair, to ensure that their opinions and advice about nutritional health and standards would be included as the NMFP project is implemented.

CIL Conference – A mini-conference for Centers for Independent Living Centers (CIL) and Independent Living Councils (LIC) covering the following topic, Facilitating Nursing Home Transitions in Housing, was held in Milwaukee on October 21-24. Mark Schultz stated that the NMFP Housing Subcommittee recommended that State Staff attend as a way to see what services CIL's could provide during transitions. State staff did not attend; Bil inquired whether any panel members had attended. Panel members had not attended; Bil stated that he would find out if anyone may have attended the conference. Mark Schultz suggested contacting Ann Denton, an NMFP Housing TA representative, as she presented at the conference. It was further suggested by Bob Deaton to contact Kathy Hoell, Nebraska State LIC Executive Director, to see if she attended.

Database Update – Currently, a database is being designed to track the data requirements of the NMFP project. It will include demographic information about the participants, the status of participants (new, in progress, referred to waiver, etc.), barriers noted (housing, transportation, safety, etc.), current residence and new residence, as well as fields which provide quantifiable data or information based upon date. The database will provide interactive, real-time logic to the current NMFP tracking system.

Transition Coordinator Presentations / Transitions –

Total presentations:	107
Total transitions:	13
Total transitions in process:	43

Figures represent outreach efforts (presentations) from June through September 2008 and transitions to-date. Denise Parker inquired whether families were being reached through the presentations. Bil explained that efforts to reach family members are on-going through advance notification of NF resident presentations (posters and notices), newsletters, newspapers, and contact with community organizations. Comments regarding AL transitions and CMS approval (NMFP participants transitioned to AL's are informed), and a question regarding in-progress transitions (the

Agenda Updates (*Presentations / Transitions cont.*)

aged, physically disabled, and TBI populations will generally return to family homes or AL's; the developmentally disabled population will move to group homes). Brendan Bishop inquired whether we are tracking numbers per our protocol in regards to benchmarks and monies expended for each population group. Bil replied that we are monitoring our progress per our benchmarks and that our system has the capability to track monies expended by population group.

Health Portfolio – Bil described the NMFP portfolio as a functional and practical item to file medical records, services provided, contacts, etc. It is to be provided to individuals who have transitioned or their families / guardians.

Services Map – Bil explained that a working group will be formed to work on a state-wide services-provided map which would help visually depict areas that are underserved and help Nursing Facilities and service providers expand services if they so choose.

Presentation:

Bob Courtney – AARP Statewide Coordinator for Advocacy / Statewide Public Transportation Coalition (PTC)

Bob discussed one of AARP's major priorities – "Livable Communities" – and emphasized mobility options for today's seniors is essential for them to remain active, independent, and engaged within their communities. He stressed that personal transportation is the preferred method of transportation and provided details on educational and training efforts to enhance existing driving skills. Bob further discussed community action is needed to meet the special needs of the elderly: streets and sidewalks need to be safer for driving, walking, biking, and for the use of wheelchairs. Bob noted that both urban and rural areas lack consistent, reliable transportation options, but stated rural areas are especially disadvantaged. The newly formed Nebraska Public Transportation Coalition will address many of these issues by helping to change the current, ineffective and jumbled system to one that works cooperatively amongst stakeholders, providers, and citizens. Training and planning forums for coalition members will be conducted in November; six regions within the state will be established to help ensure coordination, to pool funding, to redistribute vehicles, to set-up inter-local agreements, and to provide centralized dispatch with an 800 area number for each region. An eventual goal is to have transportation available at all times.

Subcommittee Updates:

Housing – Mark Schultz related that the subcommittee has met once and identified the following issues as barriers: lack of systematic approach (AAA'S / CIL's / other providers), no one to help look for housing, lack of start-up money for housing, lack of accessible and affordable housing, and lack of on-going supports and costs. The subcommittee will focus on options and strategies to address these issues.

Subcommittee Updates (cont.)

Transportation – Rich Brandow related that subcommittee members have communicated and have discussed transportation resources such as a block grant regulation that allows for discharge transportation from NF's and ICF/MR's (information passed along to DHHS staff), identifying resources for purchasing automobiles, locating transportation providers (formal and informal), and the interpretation or definition of discharge transportation by NF's and DHHS program specialists.

Services Availability – Mary Angus was not present; Marla Fischer- Lempke would direct the subcommittee meeting on her behalf. Several panel members as well as outside members were present to participate and assist in the subcommittee breakout discussion.

Open Discussion:

Regions – Briefly discussed in terms of transitions: 1) populated areas may produce more transitions than rural areas and; 2) cross-region transitions.

Response to Presentations – Pat Compton inquired what type of response Transition Coordinators were receiving when presenting to NF administration and staff. The Transition Coordinators replied the administration and staff of some NF's were receptive and cooperative, others, however, were critical and asked whether additional funding and resources accompanied the program and stated a waiver program exists to serve their clients' needs. Discussion turned to waiting lists, empty beds, compensation to NF's for different care levels, and the variety of situations and opinions that exist in regards to NMFP, waiver, and HCBS. Bil stated that, overall; this is a promotional effort to inform individuals and families about HCBS (while in the NF or prior to entry). In addition, the program is about choice – an individual is free to choose community-based living or facility-based living. Bil concluded that the Transition Coordinators have been a positive force in getting the NMFP message to individuals across the state.

Nursing Homes – Generalized discussion about surveys and evenhandedness, choices of living arrangements, HCBS, Medicaid, resources, increased funding for HCBS through legislation, waiver payments, compensation for services provided in facilities, and Department of Economic Development initiatives and "village" style community arrangements.

Public Comment:

Teresa Jackson, representing the Nebraska Dietetic Association, and a registered dietician with ENOA, introduced Paula Ritter-Gooder, a co-worker and member of the NDA and explained that nutritional counseling and nutritional services are an important component of transitions and in-home services. Teresa stated that she and Paula were both available to work with the Services Availability subcommittee to highlight the need for dietetic services, nutritional counseling, and to ensure that these services were in-place and on-going for smooth transitions.

There was no further comment. Bil thanked everyone for attending and adjourned the meeting at 11:30 am. Subcommittee breakout discussion commenced.

Respectfully Submitted,
Debbie Lewis
NMFP Staff Assistant