

**People with Disabilities Advisory Committee  
Meeting Minutes  
February 9, 2006**

**Participants:** (X = attended, A = absent) – February 9<sup>th</sup>

**[Attachment B-2]**

<b>Members</b>				<b>Attendants</b>	
X	Peggie Beck	X	Kathryn Jenness	X	Avi Cooper
X	Jack Benson	X	Scott Lay	E	Jon Croghan
X	Jan Campbell	X	Ruth McEwen	X	Donalda Hill
X	Donna Crawford	E	James Naegele	X	Glenna Niemie
E	Tonita Croghan	X	Dayle Niemie	X	Amy Parker
X	Reta Griffith	X	Karen Showers		
X	Susan Grimes	X	Mike Volpe		
<b>Staff</b>					
Morgen Brodie, Becky Murphy, Marc Overbeck, and Wendy Russell					
<b>Public/Guests</b>					
Valerie Kebver		Martha Fiala		Morgan Allen and Terry Manning	
<b>Speakers</b>					
William Hoar and David Ray Walker			Christina Jaramillo		
Clyde Saiki			Suzy Quinlan		
James Toews and Cathy Cooper			Chris Barber		

## Meeting called to order at 8:32

### Chair's Discussion Items

**MOTION: Send letter regarding accessibility/accommodation statement on hearing notices for rulemaking. *Passed.*** (Jan Campbell/Karen Showers)

The committee discussed the new complaint process and the Governor's Advocacy Office's role in it. Marc recommended that Naomi Steenson come to give an overview of the complaint process.

**MOTION: PDAC to receive all complaints from Governors' Advocacy Office and request an overview of the complaint process. *Passed.*** (Scott Lay/Jan Campbell)

## **SubCommittee Reports**

### **Language/Training (William Hoar & David Ray Walker, DHS Trainers)**

William and David Ray spoke about how their trainings work and answered questions. Their training is not about specific disabilities or policies and procedures, it is about cultural impact.

The Employment Department had 27 of their disability service specialists trained in conjunction with the Deaf and Hard of Hearing Services Program training on the deaf culture.

Ruth would like to have William and David Ray to come back at a later time.

### **Employed Persons with Disabilities (EPD)**

Scott reported there hadn't been a meeting of this group since the last PDAC meeting. Susan is now chairing the subcommittee.

### **Liaison Reports and Workgroups Update**

Becky announced that reports were in the binders (those sent in the meeting packets and others recently sent in).

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Peggie is now a member on the Governor's Commission on Senior Services and will start giving reports at the next meeting. Marc spoke briefly about the mission and focus of GCSS.

Scott is now chair of the Home Care Commission. The Home Care Commission has a trainer, Leslie, and she brings a background from the field of hospice care. Scott expressed some concern that the training will be based more on the medical model. Scott would like to see the training provide information about the Independent Living model.

**MOTION: Send letter to the Home Care Commission emphasizing the Independent Living model in training for both providers and consumers.** *Passed; with Scott Lay abstaining.* (Jan Campbell/ Kathryn Jenness)

Peggie initiated discussion about appropriate comments during meetings.

Mike reported on Agency With Choice and the idea of limiting choices so that these can stay within financial constraints. The workgroup includes further utilization of the OPI model, which depends solely on state money. They are not sure if that is financially advantageous compared to the Medicaid model.

**DHS and SPD Update (Clyde Saiki, DHS Deputy Director; James Toews & Cathy Cooper, SPD)**

James and Cathy would like PDAC participation in the upcoming community forums.

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**Budget and E-Board**

Dr. Goldberg has a multi-prong strategy for monitoring the budget and caseload. The biggest problem is the Oregon Health Plan (OHP)--\$90 million of \$172 million shortfall is due to OHP.

The department is getting ready for the April E-Board meeting. Ultimately the choices are: Budget with deep cuts or special session or 2007 legislature can balance. SPD is the biggest user of General Fund monies in the department.

**Oregon Disabilities Commission (ODC)**

There is nothing to report.

**Other Issues**

New federal changes require that you provide a birth certificate or passport in order to receive services starting July 1, 2006.

Clyde spoke about how he is happy to be in his new position and invited all to come see him whenever in the building. He feels there has to be a lot of transparency in the work being done. There is a push to share as much information as the decision-making process will allow. In the absence of information, people make up their own information. Let people know what, why, and how things are being done the way they are.

There is political overlay and many people we answer to. The Department is striving to open up and give people understanding; getting people involved in decision making (implementation and policy decisions). Reorganization and fiscal issues have impacted perception of the Department. The Department is trying to make sure budget or

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staffing numbers are accurate, and is looking at fiscal integrity responsibility and accountability. The Department is working with the Congressional delegation. The legislators are objecting to proposals being considered at the federal level. It appears at the federal level we're taking a step backwards in social services and the impact on Oregon's citizens is of concern.

The Governor's office has asked that we review caseload forecasts, to better analyze and offer a sense of where we will end the biennium. There are numerous options, and everyone would like to see if we can get through the biennium without budget cuts.

James and Cathy answered various questions.

### **MMA Update (Christina Jaramillo, MMA Coordinator)**

There is now a process in place to help clients get their medications with Medicaid dollars. Help was received from all over department (50 people working on the project). There are only about 300 priority cases (10% of all cases) at this point. There were lots of pharmacy calls but it is getting better. Things are not getting better through CMS; some of the information is being overwritten by CMS. They are seeing lots of duplicate cases. There have been no deaths in Oregon. The biggest issue has been that pharmacies don't know how to override systems.

The MMA team has not received any data from SSA that had been expected.

The temporary staff are scheduled to be done by March 31, 2006; the MMA Team is requesting an extension from the director.

## **In-Home Providers (Suzy Quinlan, In-Home Service Program Analyst)**

Handouts were provided. Trainings are being provided for both providers and consumers. Training on specific care needs will still be necessary.

**MOTION: Send a letter recommending that advocate representatives be included in statement of intent and not just add on the training committee of the Home Care Commission. *Passed, with Scott Lay abstaining.*** (Donna Crawford/Karen Showers)

**AMENDMENT: Add “three” consumers/advocates on the statement of intent for the training committee of the Home Care Commission. *Passed, with Scott Lay abstaining.*** (Susan Grimes/Donna Crawford)

There's not specific funding for recruiting home care workers, but statewide registry should be set up by July 1st, which should help.

**MOTION: Letter to DAS/DHS regarding our concern whether the registry will be functional by the proposed deadline, and asking it to move forward. *Passed with Scott Lay abstaining.*** (Jan Campbell/Karen Showers)

Suzy answered questions from members.

## **Oregon Health Plan (OHP) Overview (Chris Barber, Medical Evaluation Team Manager, OMAP)**

Handouts were provided. OHP started out in 1989 as a demonstration project. Later it was recommended that mental health and chemical dependency be included. In 1994 OHP became operational.

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OMAP is currently in process of reviewing what should be included in the new waiver. Office of Oregon Health Policy and Research has several commissions to help with setting service priorities.

Anytime there are changes, CMS is informed and it is explained how it meets federal standards. Biennial changes can take as long as six months for CMS to approve. Policy analysts review what policies need to be put in place to meet federal law requirements. The Evaluation Unit makes sure contracts assigned have performance measures. There are compliance issues in contract with hearing rights. There is a provider panel that helps with auditing plans. DHS Quality Improvement Committee makes recommendations to the administrator; if there is a fee-for-service, the Medical Director's Unit is responsible.

The DHS pays claims for fee-for-services and must send audit reports about what is happening on federal dollars. They are responsible for counter data. They also look for fraud and abuse issues and what is allowed by Medicaid. There is a prioritized list of treatment pairs: condition and treatment. Both are combined to make a line on the prioritized list, which helps with claims and what procedures should and shouldn't be covered. Only 546 of the 710 lines are covered. In 1993 guidelines were added to the prioritized services. With the enacting of HB 3624, the Oregon Health Policy Commission must consider clinical effect compared to cost effectiveness. They will focus on where to place the line and the cost effectiveness of treatment.

The total number of clients has gone from 125,000 to 25,000. For OHP Standard, OMAP must look at the list and decide on priorities. Their focus is on prevention of chronic, fatal conditions that improve outcomes. Chris answered many questions.

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## **Public Input**

Martha Fiala spoke about the OMAP guidelines and how they affect physical and occupation therapists.

Morgan Allen and Terry Manning passed out information about resolution 105, which would change staffing ratios for nursing homes. This measure would require the ratio of 1 to 15 patients, instead 1 to 25.

## **New Issues**

The full committee would like to have executive committee minutes.

Jan would like to have the break closer to 11:00 a.m. so that people may use the restrooms in their rooms and check out.

Dr. Goldberg will be coming in April.

It was suggested that presenters send out materials in advance, so that they can be part of the packet. It was also requested that materials be presented in a larger font and/or in electronic format for those with low vision.

## **Next Meeting Items**

Sue Stoner was ill and was very apologetic about not attending yesterday and would like to come back at the next meeting.

Next month will be the first videoconference meeting.

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It was suggested that members start looking at leaders from their advocacy groups and not just leave it up to others to put together the new ODC.

**Adjourn 12:28 p.m.**