



Notes from Aug. 16, 2023 Senate Bill 91 workgroup session 2

08/16/2023 1pm-3:30pm	Senate Bill 91 Workgroup Session 2 via Zoom	
Agenda Item	Power Point Q & A	Discussion Notes
Facilitator Introductions & Roll Call		
Recap from Anna Lansky		<p>Understands that people are disappointed about the bill that passed and size of the program. Funding was put in place by legislature for SB 91 which is limited. Any expansion would be a legislative discussion with corresponding resources to do so. Knows some kids are served in residential settings and there are a lot of factors in deciding on placement choices based on what is best for the child.</p> <p>We want to use this time to focus on the bill so we can get the lengthy waiver process started.</p>
Question & Answers from Workgroup	<p>Eligibility Questions</p> <p><u>Q: If income is an eligibility requirement, will income earned</u></p>	<ul style="list-style-type: none"> • ODDS comment: We are waiting to hear back from CMS. • Comment: this seems inequitable. • Question: What sort of data collection will be occurring?

	<p><u>from this program “count against” parents, making them ineligible later?</u></p> <p>A: Yes, this income will count as income just like any other wage or job. That could make income as an eligibility criteria unworkable. We have asked CMS for guidance. <i>(slide 8)</i></p> <p>Enrollment Questions <u>Q: Will children be unenrolled for failure to utilize the program?</u></p> <p>A: Eventually, yes because the purpose of this waiver is access to a paid parent provider. These conditions need to be described in waiver applications.</p>	<ul style="list-style-type: none"> • Answer: The bill requires data collection, including how many children are accessing a paid parent provider and how many are not, the cost per case if accessing a paid parent provider and not accessing a paid parent provider, and an overall assessment on the adequacy of the workforce. • Question: when will this waiver program begin • Answer: we are aiming for starting the middle of next year. <p>ODDS Comment: If unenrolled, there will be advance notice and the right to appeal or have a hearing.</p>
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	<p><u>Q: Can the random lottery be comprised of the highest need? Or age groups?</u> A: No. Members of a waitlist cannot be prioritized over other members. (slide 9)</p> <p>Enrollment Questions</p> <p><u>Q: Can there be a random drawing to put an order to the original list and then add new people as they come in?</u> A: Yes. States can assign a random number to the first group of children who sign up during the initial period. The first group gets in up to the waiver capacity, and the rest are on the waitlist according to the number assigned. As others sign up later, they would be given a number</p>	<p>ODDS Comment: This is just an option, not a decision.</p> <p>Many different opinions on this option. Discussion about potentially waiting years vs. the benefit of knowing your child’s place on the list.</p> <p>Question: Can ODDS prioritize coming off the waitlist based on severity? What about children’s date or age of diagnosis? Answer: No, ODDS cannot prioritize from within the eligible group.</p> <p>Comment: We can adjust the criteria, which could make the waitlist shorter.</p>
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	<p>behind the initial group.</p> <p><u>Q: What accountability measures will be in place to notify parents before the window has closed to sign up?</u></p> <p>A: ODDS will be a close partner to case management entities (CMEs) in this process. Whatever is decided in terms of method, CMEs are held accountable via quality assurance processes and subject to corrective action. <i>(slide 10)</i></p> <p>Hospitalization/Reserved Space Questions</p> <p><u>Q: Can there be additional settings besides hospitals considered for reserved spots, mental health, 24-hour residential, nursing facility,</u></p>	<p>ODDS Comment: The only way to sort of prioritize is through reserved space, such as if a child is being released from the hospital.</p>
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	<p><u>SACU?</u> A: Yes. States can include a list of settings or circumstances for reserved space.</p> <p><u>Q: What happens if the reserved spaces aren't utilized?</u> A: We have asked CMS for guidance on this. They haven't responded yet. <i>(slide 11)</i></p> <p>Provider Qualifications</p> <p><u>Q: Can ODDS waive the Office of Inspector General "exclusion list" requirement for paid parent providers?</u> A: No. ODDS does not have the authority to waive this requirement for any Medicaid provider.</p> <p><u>Q: What are current direct support professional qualifications?</u></p>	
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	<p>A: At minimum, all DSPs must be legally able to work in US, 18+, pass a background check, not be excluded or disbarred from OIG, complete 12-24 hours job-related training/year, have skills to perform tasks of the job, be CPR and first aid certified, and have clear job responsibilities. All DSPs are mandatory reporters 24/7. (slide 12)</p>	
<p>Discussion: Training, Monitoring & Accountability</p>	<p>SB 91 directs 3 types of training, that ODDS has to require, and we have to adopt administrative rules about this training. Parent providers, children, and CMEs</p>	<p>Who should deliver the training, how often, length, when?</p> <ul style="list-style-type: none"> • Comments: it should be age appropriate, and immediate. Goal is to develop the training that is right for the children. • Question: Is there current training for kids to be self-advocates and chose their provider? • Answer: Not before this bill. • Comment: Self-advocates should provide the training. • Comment: Self-advocate training has been life changing in some cases. • Question: Will the training take away from the budget?

	<p>Monitoring</p>	<ul style="list-style-type: none"> • Answer: No. • ODDS Comment: DSP's are required to take 12-24 hours of training, there is a lot of flexibility. The bill doesn't require a specific number of hours, but it does require certain topics. • Comment: There are different types of agencies. Would work in metro agencies but might not be available in a rural area. • Concern: some children aren't aware they have a disability and could be traumatizing if the right language/ delivery is used. • Response: Children can decline their parent to be a provider. They will receive age-appropriate, developmentally appropriate training about making informed decisions about this topic. • Concern: Member expressed concern about their children knowing that their parents are being paid to be their provider. • Comment from member: Parent as a provider-in a Medicaid program-creates a conflict of interest-...you aren't going to fire yourself... There are some parents that aren't a good fit. This is rare, and may never happen, but could. • Comment from member: There needs to be a way to safeguard against when a child feels unsafe. There are ways to approach this in a way that is empowering. Also need to know what you can and can't bill for.
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	<p>Questions came up about the different types of agencies</p> <p>Discussion: SB91 there are complexities involved with the freedom of a parent to make choices about their children’s day and life versus the role of a Medicaid provider. Examples given around discipline, decision-making.</p> <p>What ideas do you have to help parents know about the SB91 requirement for monitoring?</p>	<ul style="list-style-type: none">• Comment from member: The process will be as unintrusive as possible. We must be able to train and supervise to be safe and in compliance.• Standard model and community living supports agencies have different rates. It was mentioned that those materials can be provided.• ODDS comment: Parents do need to know what is and isn’t allowable while on the clock. It is understood that this topic is uncomfortable.• Comment: Create a handbook.• Comment: Routine monitoring could occur at least quarterly and could be by phone or email.• Chat comment: How do we do this to meet the requirements and come up with the most rational way?• Comment: Single parents concern during pandemic. Was hard to access services due to not having an overseer of the plan. Assigning a designated representative is a barrier.
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Timeline & Next Steps Review		Grateful for serious and engaged conversation and great ideas.
Other Questions & Comments	<p data-bbox="446 688 740 852">What about applying for the emergency legislative board?</p> <p data-bbox="446 1793 695 1833">Survey coming</p>	<p data-bbox="792 348 1419 642">Comment-Parents know their children best and are the experts in providing what they need. Yes, parents do need to be in the room when discussing their support. Somehow, we need to meet the requirements of the bill.</p> <p data-bbox="792 688 1403 852">Anna stated-the E-Board is designed for unseen events. The decision was made by the legislature to cap this budget.</p> <p data-bbox="792 1755 1398 1915">The questions asked will go into that survey. People are encouraged to respond. *It will go out in the next 2 weeks.</p>

		Continue to email your ideas. They are being tracked and categorized.
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