**Adult Services Committee 11/13/2019**

Committee members: Angela Ellis, Clint Lewis, Felissa Ferrell; John Carroll-on the phone

Terry Weddle-Surry, Kristy Preston-Surry, Toni Welch-Randolph, Tracie Murphy-Randolph, Yvette Smith-Iredell, Edwin Bass-Harnett, Saha Smith-DAAS, Tom Hughes- Watauga, Angie Phillips-DAAS, Karey Perez-DAAS, Preston Carddock-Green, Dora Ann Carter-Halifax, Jenise Horton-Guilford, Rich Ohmer-Brunswick, Kari Sanders-Onslow, Nina Williams-Wayne, Kim McGuire-Wayne, Christine Dowell-Chowan, Tony Carpenter-Lincoln, Adrian Daye-Alamance, Shelia Evans-North Hampton, Peggy Egan-Mecklenburg, Kathy Ford-Pasquotank, Donza Mcleon-Stanly, Trish Baker-Alexander

On the phone:

LV McKillian – Johnston, Julie Sebastian – Alexander, Michelle Bates – Moore, Crista Ramroop – Davie, Melinda Hudson – Person, Dean Bethea – Lincoln. Anthony Hodges – Cabarrus, Cynthia Ross – Pitt, Shea Neal – Nash, Sarah Hill – Nash, Latawnya Hall – Alamance, Joann Widley – APR, April Black – APR, Pamela Nelms – Franklin

Marlana Riley – Yadkin, Nina Stout – Davidson, Ann Roberts – Forsyth, Diane Hayden – Guilford, Brand Mann – Tyrell, Katherine McCarron – Dare, Dena Patrick – Bladen

Jill Sampson – Bladen, Artelia Trice – Vance, Angie Brinkley – Johnston, Cathy Murray – Rockingham, Beverly Heine – Brunswick, Daina Frederick – Rowan, Rodney Franklin – Catawba, Kathi Graham – APR, Renae Minor – Chatham, Karla Joyner – New Hanover, Belinda Belfield – Halifax, Traci Corn – Henderson, Susie Branch – Surry

Melinda Lane – Columbus, Lori Leggett – Beaufort, John Carroll – Rutherford

Lori Hall – Rutherford, Glenn Osborne-Wilson

**Approval of the minutes**-Peggy Egan, Shelia Evans

**Transition to Community Living Initiative Presentation**-Holly Riddle, Jessa Johnson and Drew Kristel

Back Ground of the TCLI Settlement Agreements:

* In July 2010, DRNC filed a complaint with the US DOJ.
* US Supreme Court Decision: interpretation of the ADA case-Olmstead vs L.C., States must administer programs and activities in the most integrated setting appropriate to the need of qualified individuals with disabilities.
* In November 2010, USDOJ look at NC compliance with ADA and the Olmstead; they were investing in congregate settings over investment in community settings. The result was NC signed an agreement to be given choice.
* NC individuals Services that people needed were not provided in the most integrated setting appropriate to their needs.
* August 23, 2012-State signed a settlement agreement with USDOJ.

What is Transitions to Community Living:

* There are 5 staff who assist with the integration of services for those individuals with mental health services to be given real, informed choice where they live, under the Office of the Secretary. There are 282 in the field. Also work with many of the Divisions to help with this service.
* TCLI oversight is to ensure SPMI and SMI adult shave a choice where they work, live and play in NC communities.
* TCLI works with DHHS divisions, regional TCLI coordinators, LME/MCOs, providers, professional associations.

TCLI’s Six Pillars

* In-reach and transition- Discharge planning with State psych hospitals, adult care homes.
* Diversion
* Housing
* Supported employment
* Assertive Community Treatment-Evidence based treatment
* Quality management-use data to evaluate progress and outcomes

Each of these components have settlement milestones; court ordered deadline by June 30, 2021.

TCLI Partnership:

* Barriers committee works to resolve issues with its members: Divisions include DSS, MSDHH, DMH, etc.

Examples of Barriers:

* Recipients who are incarcerated-Social Security or SSI benefits are suspended when people are confined to jail or prison.
* Social Security Benefits; benefits remain suspended until the inmate is released
* SSI benefits are terminated when the person is incarcerated for a year or more.

Potential solutions:

* Emergency Advance Payments
* Pre-release agreement with Social Security
  + Begin processing an inmate’s application up to several months before the inmate’s schedules release date;
  + Make a prospective determination of potential eligibility and payment amount based on the inmate’s expected circumstances after the release
  + Start paying benefits shortly after inmate is released from institution.

Interim Assistance Payments-advance on SSI-Memorandum of Agreement; There are 4 counties doing this pilot

Other Barriers:

* Guardianship-may make it difficult for people to make choices that are truly theirs choices. TCLI is promoting alternative to guardianship, such as supported decision making

A conversation for Change:

* People are part of TCLI because they have SMI/SPMI and are in an ACH or State Psych hospital or at risk of becoming part of TCLI due to their DX. Or they may have unstable housing or live in a group home.

RSVP-Referral Screening Verification Process

* As of November 1, 2018, all Medicaid beneficiaries who are referred to or seeking admission to license ACH must be screened to determine whether the individual has SMI or SPMI. Licensed ACH providers will not receive prior approval to bill for State plan personal care services without the referral.
* LME/MCOs screen the verification process.

Promising practices:

* TCLI-improved it linkages with DSS
* Together we’ve worked thorugh barriers committee to improve connections among TCLI, DSS, DSDHH, DMH, DSOHF and DHB

Questions and Answer session:

* If you have questions about Supportive Housing Efforts- contact Jessa Johnson
* We have specific resources to help individuals access housing; set aside funding, tax credits, etc.
* Services is so important; we’ve created initiatives or expanded initiatives. For example CST-this was expanded. This was just approved by CMS and we hope to roll this out shortly. Not sick enough to get ACT, but Tenancy support-wasn’t enough to support it.
* May be expanded during Medicaid transformation.
* Samantha R vs NC a pending case…
* June 30, 2022-court deadline-we are supposed to have 3000 individuals in housing, 2500 to receive supportive employment, etc. What does it look like that
* Go to the website to see the innovative approaches with different LME/MCO.
* Medicaid county of origin-getting that transferred…that is difficult.
* Statistics: 3249-housed; 2244 were still in housing.
* Time frames for responsiveness.
* Send a list of barriers there are specifically to the TCLI; We would like to see a DSS Director place on this committee.

*PLEASE SEND YOUR COMMENTS ON BARRIERS TO Felissa Ferrell at*[**fferrell@co.rockingham.nc.us**](mailto:fferrell@co.rockingham.nc.us)

**NC BAM North Carolina Baptist Aging Ministries:** Yzetta Smith

To provide help to individuals 65 or older in way that help them maintain their independence and enjoy quality of life.

We are part of the Baptist Children’s home. We have a call center in Thomasville.

We are 10 years old and we are statewide

Resources and Education are our primary

We help aging adult 65 and older, stay in their homes as long as they can. We are not based on income; based on need.

* They partner with SHIPP, Fire Marshall (smoke alarms), AAA, etc.
* They do enrichment presentations. Topics include caregiving, 5 love languages, reducing stress, intergenerational ministries.
* Do a good turn; change batteries, light bulbs, clocks.
* Two Peas in a Pod-talks about similarities about older and younger adults.
* Planning ahead-are families prepared for their aging adults.
* Living with less-downsizing.
* Priority one-PREVENTION. Fall prevention is a big topic. Building better balance
* Helping the older adult
* Everything they have is on line: <https://www.ncbam.org/>
* Senior Adult Retreat-talks about when to give up driving, etc.
* Comfort covers-they come in handy when there is an emergency.
* Assist with hunger
* Red Bag Ministries-helps EMS know what the individual is taking.
* Disaster Preparedness-to assist older adult during disaster preparedness and after math
* Ramping Up-twice a year. We build them-over 300 built at the last event
* Fancy Finds-left over items from Estate sales goes to this store; proceeds go to ministry to help build ramps.
* Newest ministry: Foster Grandparents Program to assist with helping foster parents have some down time while the grandparents get socialization.
* Isolation and loneliness-We have a number where people can all in; use it instead of calling 911 or first responders. They set up this number to talk and share.
* Support Group: caregiver support group.
* Aging Well Conference-March 2020; Every Wednesday, there is a presentation in the state.

Update from DHSR/ACL-Tameka Rigsby:

* ACH/FCH should be in the process of renewing their licenses. Please have your AHS to remind the administrators to please turn in their renewals.
* FCH/ACH certifications expire at the end of the year; they need to renew as well. If they expire, they are non-compliant and can be cited.
* Cost Reports are due-there is list of facilities that were issued a suspension of admissions. They will need to contact the Controllers office.
* Coming soon-New training software: trainings will be on a go to webcast- it will have resources available to look at for your convenience.
* Sharepoint site-going live on November 15, 2019-it is a location where there are documents and procedures. New staff-please let DHSR know and then they will send that link to them.

Update from DAAS-Karey Perez:

* Adult Services survey compiling all programs into one survey, and going out Monday November 18 and due January 20, 2020.
* Also will be sending out an APS questionnaire-bring your data to life; to be shared with policy makers and one case per county. Can also submit throughout the year; give to your APR.
* The training link has gone out to 97 counties. All three trainings are under 45 minutes.
* Sec. of State-will be co-training on exploitation with them; will be developing a webinar for future use.
* COLA-no action for SA in home cases-won’t be counted until April 2020.

Update from NC DMH/DD/SAS-Lisa Jackson-information provided via email:

* Currently, the Division is posting for the Division Director position; this posting is running continuously until filled.
* The DMH/DD/SAS contract amendment is being reviewed by LME-MCO CEOs and that the targeted go live date is 12/1 (current contract period is July 1, 2019 thru June 30, 2020).
  + Some changes in the amendment: it will combine the LME-MCO Local Business Plans and Reinvestment Plans
  + Any LME-MCO operating as a Tailored Plan will need to have Health Plan Accreditation with Long Term Services and Supports Distinction from NCQA by the end of TP contract year 3.
* Debra Farrington, Chief of Staff, NC Medicaid, graciously shared the following Medicaid Transformation updates:
  + Managed Care is still slated to go live Feb. 1st 2020
  + Currently in statewide Open Enrollment
  + Engaged in Prepaid Health Plan Onsite Readiness Activities
  + Testing Auto Enrollment
  + Managed Care cannot go-live under a Continuing Resolution Budget.
    - A new budget must include
      * Authority :
        + To pay capitation payments and claims run-out
        + To utilize Transformation dollars
        + For the appropriate Hospital assessments
        + PHP tax authorization which is already included in the CMS approved capitation rates
  + Need the RIGHT budget
    - $42M cut to recurring administrative funding = PEOPLE (To give you a sense of the size of the cut, if we eliminated nearly half of all staff of the Division of Aging and Adult Services AND a third of all staff of the Department of Social Services AND nearly half of the staff of the Division of Health Services Regulation, that would add up to only $25 million)
    - Unprecedented cut which has major impact on service delivery
  + GA adjourned last week
    - Return for special session 11/13/19
    - Opportunity for GA to work with Governor on approved budget that allows managed care to go forward
    - Short Session begins in January 2020

If there are any questions, please let me know: lisa.jackson@dhhs.nc.gov