

Olmstead Plan Stakeholder Advisory

OPSA Quarterly Meeting: Minutes

June 22, 2022; 9:00 – 11:00 (online)

9:00 – 9:05 Welcome - Deputy Secretary Dave Richard, NC Medicaid

- Deputy Secretary Richard noted that today was the anniversary of the *Olmstead* decision and thanked the members of the OPSA, including legislative members, for their support of the plan.
- He encouraged the OPSA and members of the public in attendance to advocate for Medicaid expansion through their representatives in the General Assembly, noting that expansion would assist in funding services for persons with intellectual and other developmental disabilities (IDD), mental health diagnoses and elders who are covered under the Olmstead Plan. He noted that with Medicaid expansion, more funding could go to housing and services in the community and that more direct support professionals (DSPs) and other staff could get Medicaid coverage as well.

9:05 – 9:10 Opening Remarks - Sr. Advisor for the ADA Sam Hedrick

- Ms. Hedrick was unavailable at the opening to provide these remarks but offered closing comments.

9:10 – 9:15 Continuing Role of the Advisory - Betsy MacMichael, Community Co-Chair

- Assistant Director for Olmstead Plan Implementation Holly Riddle recognized and thanked Betsy MacMichael and Bryan Dooley for serving as Co-Chairs for the OPSA.
- Co-Chair MacMichael stated that the role of the OPSA going forward will be to participate actively in meetings; review progress on measures and benchmarks to ensure that what is being reported reflects what consumers/persons with disabilities are experiencing; and to flag any new opportunities or trends impacting the plan.
- Ms. MacMichael encouraged OPSA members to talk about the plan widely to increase its exposure and visibility among the public.

9:15 – 9:20 Approach to Implementation Holly Riddle, Office of the Sr. Advisor for the ADA

- Ms. Riddle stated that each division/office involved in Olmstead implementation has been asked to begin reporting progress on strategies in the plan. The divisions/offices have also been asked to provide additional benchmarks and measures and, if strategies need revisions, to note those as well.
- TAC's Sherry Lerch will summarize data on progress and roll it up into quarterly reports. The reports will show what progress is being made and where there are barriers to progress.
- The first reports from divisions were due on 6/15/22; the next round of reporting from divisions/offices will be due on 9/15/22.

9:20 – 10:20 Plan Implementation Update Sherry Lerch, Technical Assistance Collaborative

- Ms. Lerch presented the following information to the group.

Assessing Progress with Implementation

- NC's Olmstead Plan is based on the premise that building a more robust, community-based service system is essential.
- Reporting processes:
 - Show the comprehensiveness of the plan
 - Track work that is occurring
 - Identify challenges and barriers that may need to be addressed
 - Inform future iterations of the plan
- Reporting also aligns implementation of the plan with other key DHHS initiatives, such as the DHHS Strategic Housing Plan and Tailored Plans.

Tracking the Work

- Some strategies will be implemented more quickly than others, with some work occurring before the release of the plan. Other strategies are not due to start until Year 2 of the plan (calendar year 2023).
- New strategies may emerge; the plan is fluid and responsive to the current environment.
- Some of the work is foundational for progress; progress may be incremental.

Identifying Challenges and Barriers

- High level and day-to-day issues need to be captured for understanding any barriers to successful implementation.
- There is a need to identify which entities will be responsible for helping to address barriers.
- The plan provides a platform for addressing complex issues that bring multiple systems and partners together.

Quarterly Reporting

- On behalf of the state, TAC will receive summaries of progress from divisions and offices. Summaries will indicate if strategies are completed, are in process, require revision or are targeted for year 2.
- Divisions/offices have created high-level work plans for the strategies in the plan; these have timelines and action steps to meet the strategies.
- DHHS and TAC are assessing the alignment of strategies, baselines and measures. DHHS has been asked to identify data sources that support the measures.

TAC's Proposed Tracking Process

- DHHS and TAC met with the Olmstead Plan Staff Workgroup to review ways to track progress.

- Based on submitted work plans, TAC will help prepare summary reports for DHHS leadership and the OPSA.
- Thus far, submissions for the 6/15/22 first quarterly report look good. TAC expects, however, that DHHS's work plans will be refined over time.
- A summary report for the first quarter will be presented at the next OPSA meeting.
- Ms. Lerch reviewed examples of four strategies for which reports have been received to illustrate the approach to tracking progress.

10:20 – 10:40 Discussion and Questions Co-Chairs and OPSA Members

Questions/Comments

- Question – Annette Smith (DSP Workgroup) - Regarding Olmstead Plan priority area #2, to address the direct support professional crisis by expanding access to assistive technology, data were reported that showed the percent of persons receiving technology via the Aging and Disability Resource Centers (ADRCs). Can someone speak to how the data breaks down for those under age 60?
 - Ms. Lerch noted that the baseline of 2,147 persons with a disability that were reported are those under age 60. This is one of many strategies that will address the direct support professional (DSP) shortages, she added.
- Comment/Question– Corye Dunn (Disability Rights NC) – Ms. Dunn expressed concern that there may be undercounting of persons with disabilities. How did the 2,147 people with a disability get counted or defined?
 - Hank Bowers (Division of Aging and Adult Services) noted that the ADRC database was used and that he can look into what definitions were used for disability in this count.
- Comment/Question – Jessica Aguilar (State Consumer and Family Advisory Committee) – While technology helps with the DSP crisis, not all have access to it. Will there be efforts to count the people who are experiencing DSP shortages who do not have access to technology? She added that there needed to be more support of Spanish speaking communities to educate families and others about Medicaid and Medicare programs and benefits. Many do not know for which programs they or their children with disabilities may qualify, she said.
 - Ms. Riddle suggested that DHHS could consider efforts to learn about what services and shortages there are in Spanish-speaking communities.
- Question - Victoria Chibuogo Nneji (sibling) – Regarding pre-employment transition services (pre-ETS) data, are we also tracking the total, overall need for these services among those with disabilities?
 - Jeff Stevens noted that the Division of Vocational Rehabilitation (DVR) knows that there are about 65,000 students through Department of Public Instruction (DPI). Of that total number, there are a smaller number receiving pre-ETS. He noted that DPI has some additional data on how many applied for pre-ETS.
- Comment – Michael Maybee noted that he was part of the OPSA Employment Committee that thought about the targets in the plan. He stated that the 5% increase for pre-ETS in the current

measure was too low. At his agency, Watauga Opportunities, they have seen an increase in the use of pre-ETS of 18%.

- Jeff Stevens and Kenny Gibbs (DVR) noted that strategies and measures were developed during the pandemic. DVR stated that the 5% could be revisited as quarterly data and reports are submitted.
- Question – Dotty Foley (Supported Living Work Group) – Does DHHS have data on the total number of adults 18 and over with an intellectual and developmental disability? There is an assumption by many that this population is under counted.
 - Jeff Stevens noted that he gets these data from census data reported through the American Community Survey; the information is public and online.

10:40 – 10:50 Public Comment

- Comment – Tally Wells (NC Council on Developmental Disabilities; NCCDD) – Mr. Wells shared information on a number of policy changes.
 - He noted that that the Medicaid 1915(i) public comment period and the Home and Community Based Services (HCBS) Final Transition Plan public comment period were both just announced. He encouraged OPSA members and others to comment on these plans. The HCBS transition plan public comment ends July 17. Annette Smith has made request to DHHS to extend the deadline to give more time to the disability community to review the new plan. Mr. Wells shared the link to the Draft HCBS Final Transition Plan Document: <https://www.ncdhhs.gov/media/15821/download?attachment>
 - He also noted that the pending Medicaid expansion will mean big changes for the Local Management Entity/Managed Care Organizations (LME/MCOs). Medicaid expansion is on the legislative docket now, Mr. Wells said, urging the group to reach out to legislators to advocate that the expansion go forward.
 - The General Assembly did raise salaries for DSPs but they are focused on institutions instead of in the community. The NCCDD wants people to be aware of this. He wants all to recognize that, while the Olmstead plan is being implemented, there is a lot happening that impacts the plan.
 - Mr. Wells urged the OPSA to “keep its finger on the pulse of change” and to make sure we are reaching the disability community across the state.
- Question – Betsy MacMichael – Will the 1915(i) Medicaid option be entitlement-based?
 - Kenneth Bausell (NC Medicaid) TCL confirmed that it is an entitlement for those who qualify. If you have Medicaid and if you have a Traumatic Brain Injury (TBI) or IDD, you would be entitled to get up to 28 hours of services for community living supports. This includes supported employment, respite and community transition services.
- Question - Victoria Chibuogo Nneji - Will the state contact those people who automatically qualify for the 1915(i)?
 - Mr. Bausell noted that the services will go live with the Tailored Plan launch in December of 2022. Care coordination/care management will be triggered to reach out

to those who are on the Tailored Plan, those with TBI and those on the Innovations Waiver. They will be able to contact additional people, outside the waivers, as well. Mr. Bausell shared a link to a fact sheet:

<https://medicaid.ncdhhs.gov/media/10434/download?attachment>

- Question - Pam Shipman (ex officio) - Will the 1915(i) option be available for those on Medicaid Direct?
 - Mr. Bausell said that beginning in December 2022, benefits authorized through 1915(i) will be available through Tailored Plans and NC Medicaid Direct, [Staff Note: 1915(i) benefits will also be available through the Children and Families Specialty Plan (upon its launch in July 2023) and the Tribal Option for beneficiaries who meet medical necessity criteria. If a Standard Plan member needs a 1915(i) benefit, they will need to move to a Tailored Plan to obtain the benefit. See [open \(ncdhhs.gov\)](https://open.ncdhhs.gov)].

10:50 – 10:55 Next Steps Holly Riddle, Office of the Sr. Advisor for the ADA

- Kent Davis with Mathematica, a technical assistance provider for Transition to Community Living (TCL), was present and asked to comment on the role his organization would be playing in the Olmstead Plan implementation. Mr. Davis gave an overview of the TCL Quality Assurance and Performance (QA/QI) data measurement process, stating that the process will be extended to track progress and data related to the Olmstead Plan.
- The goals for the TCL QA/QI project are to:
 - Monitor whether TLC services are effective in allowing eligible adults with serious mental illness the opportunity to choose where they live, work and play in North Carolina;
 - Implement strategies to maintain program successes and improve performance where needed; and
 - Engage and coordinate with state partners and other stakeholders.
- Mathematica developed a performance measurement planning process, data and analysis infrastructures and a data dashboard, via joint application design sessions with the state.
- They built a TCL Data Dashboard that has raw data that can be tracked at quarterly, six month and yearly intervals; the system can also drill down to the consumer level. This approach may also work for tracking progress for the Olmstead Plan.

10:55 – 11:00 Closing Remarks Bryan Dooley, Community Co-Chair

- Co-Chair Dooley closed the meeting by thanking everyone for attending and encouraged everyone to stay engaged in the Olmstead Plan process.
- Sr. Advisor Sam Hedrick added that she's pleased to see all who are involved in the Olmstead Plan process and thanked the group for its clear commitment to the implementation of the plan.