

**Unified Long Term Care System (ULTCS) Workgroup
Minutes
October 21, 2010**

MEMBERS PRESENT

Barbara E. Riley, Ohio Department of Aging, Chair
Sara Abbott (for Tracy Plouck), ODJFS/Ohio Health Plans
Susan Ackerman, Center for Community Solutions
Jim Adams, Ohio Assn. of County Behavioral Health Authorities
Kathleen Anderson, Ohio Council for Home Care & Hospice
Angie Bergefurd, Ohio Department of Mental Health
Sally Bollin, Alzheimer's Association
Richard Browdie, Benjamin Rose Institute on Aging
Mary Butler, Ohio Statewide Independent Living Council
Andrew Capehart, Adult Protective Services
Missy Craddock, Ohio Provider Resource Association
Doug Day, Ohio Department of Alcohol & Drug Addiction Services
Katie Dodson (for Judith Chavis) American Association of Service Coordinators
Bridget Gargan, Ohio Hospital Association
Jodi Govern (for Rebecca Maust), Ohio Department of Health
Janet Grant, Ohio Association of Health Plans
Robin Harris, Office of the Governor
Roland Hornbostel, Ohio Department of Aging
Betsy Johnson, National Alliance on Mental Illness of Ohio
Christine Kozobarich (for Becky Williams), SEIU 1199
Beverley Laubert, State of Ohio Ombudsman
Peggy Lehner, Ohio House of Representatives
Jeff Lycan, Ohio Home Hospice and Palliative Organization
Amy McGee, Executive Medicaid Management Administration
Steve Peishel, Office of Budget and Management
Joe Ruby, Ohio Association of Area Agencies on Aging
Patrick Stephen, Department of Developmental Disabilities
Bill Sundermeyer, AARP Ohio
Jean Thompson, Ohio Assisted Living Association
Pete VanRunkle, Ohio Health Care Association
Hugh Wirtz, Ohio Council of Behavioral Health and Family Service Providers

HANDOUTS

10/21/10 Agenda
September 7, 2010 ULTCS Workgroup Minutes
Short-Term Recommendations Not Held
Held Recommendations from September 7, 2010
Subcommittee Documentation on Recommendations Held
ODA Slides on Investment Statistics and Balance Goal

WELCOME AND OVERVIEW OF THE PROCESS

Barbara Riley opened the plenary meeting at 12:10 pm and called for introduction of ULTCS Workgroup members present. She explained that the meeting would operate similar to Ohio Controlling Board – those recommendations not being held by previous request would be automatically passed. Those held would be discussed to see if the group can reach consensus on them. Those that failed to achieve consensus would be returned to the subcommittees. She introduced Maggie Lewis from the Ohio Commission on Dispute Resolution and Conflict Management to serve as facilitator for the voting process on recommendations.

STAKEHOLDER/PUBLIC COMMENT

N/A

DISCUSSION ON HELD RECOMMENDATIONS

Recommendation #7 (passed with revision in bold)

Pete Van Runkle suggested that the language did not go far enough. Bill Sundermeyer added that whatever language was added should not slow the process. Language was suggested and passed without opposition as follows:

Ensure financial eligibility timeliness: Establish a workgroup of participating state agencies and stakeholder organizations to provide input to ODJFS regarding monitoring and evaluation of county eligibility processing and efficiency to expedite the eligibility process; identify areas that could benefit from process improvement; allow suggestions for consideration in the development of process improvement, **and recommend changes to laws or rules that might expedite the process.**

Recommendation #9 (sent back to Eligibility Subcommittee)

Pete Van Runkle commented that A, B and E sections of personal needs allowance should be deleted as an area already regulated and where additional regulation is not within the purview of the Workgroup. Eric Miller explained that these strategies were designed to stretch PNA dollars further to help LTC facilities clients. Jeff Corzine cited an example of a \$10 NF charge to consumer for a \$1.99 bottle of Electra Shave, and stated it was not their intent to cause pain or suffering to the NF, but to minimize overcharge fees to the resident. Amy McGee suggested that further research or refinement may be needed since it was unclear about whether additional regulatory authority is required and whether it is the state's discretion to set PNA. Barbara Riley suggested returning the recommendation to the subcommittee for further work since action would not necessarily be required for the November 1st biennial budget submission, and the group voted to follow this path. Therefore, increase the personal needs allowance recommendation was held and sent back to the Eligibility Subcommittee for further work.

Recommendation #11 (passed with revision in bold)

Roland Hornbostel sought clarification on what was being requested, and Jean Thompson explained. Revised language was suggested to be added and the recommendation passed by consensus without objection:

Seek repeal of existing ORC limitations on participation by consumers in Assisted Living waiver.

Recommendation #12 (passed with revision in bold)

Roland Hornbostel again asked for greater clarity on what was being stated in Recommendation #12. His concern is that federal law would not allow for backdated enrollment date. After explanation from Jean Thompson, revised language was recommended and passed by consensus without objection:

Expand Assisted Living waiver eligibility: Apply the eligibility criteria and logic that is used in PASSPORT waiver to the Assisted Living waiver applications ***as long as the PASSPORT Administrative Agency (PAA) has developed a service plan for the consumer.***

Recommendation #14 (passed with revision in bold)

Kathleen Anderson has contacted other states to seek a clearer understanding of how this program was working. She said that other states haven't been able to pinpoint savings, and reimbursement rates can be based on episode or visit (fee for service). Janet Grant alleviated one concern regarding dual eligibles in stating that Medicare SNP participants would be able to continue in their Medicare plan and not required to participate in a Medicaid managed care plan. Revised language was suggested to clarify, and the revised recommendation passed by consensus without objection:

Dual Eligible Integration

- A. ***Seek legislation that would allow, but not require, Medicare Special Needs Plan (SNP) participants to enroll in a Medicaid managed care plan or continue enrollment in their Medicare plan. Continue to explore other options that would*** integrate the Medicaid acute benefit with dual Special Needs Plans (SNPs).
- B. Educate providers/case managers/consumers as to the requirements for Medicare, Medicaid and other programs to ensure that program benefits are used to the fullest extent.
- C. Work together to coordinate mailings and promotion aimed at informing dual eligibles of the Medicare SNP option.

Recommendation #15A (passed with revision in bold)

Barbara Riley reminded the group that care coordination doesn't necessarily mean managed care, but the premise is that all would benefit from coordinated care. Jeff Lycan suggested tempering language by inclusion of the word, "explore." The revised recommendation passed by consensus without objection

Medical/Long-term Care Integration

- A. ***Explore*** providing care coordination of the Medicaid acute benefit for Medicaid HCBS waiver participants.

Recommendation #20 (passed with revision in bold)

Pete VanRunkle asked if resources should be added to the list. Betsy spoke about budget cuts having led to housing money being redirected to meet Medicaid match. She asked that specific language be added for operating support for RSS. Susan Ackerman supported the need for housing money in any effort toward balancing institutional and community care, but noted the lack of housing advocates at the table for this discussion. Jim Adams mentioned that such a small percentage of the mental health system taps into RSS as a housing supplement that it makes little sense to specify it in the language. Roland Hornbostel stated that RSS may be a barrier to creating permanent supportive housing since it is limited to specific types of living arrangements. He mentioned that the Service Array subcommittee is still working on RSS recommendations. Beverley Laubert urged that no expansion be supported without addressing quality issues. Mary cited the report from the Interagency Council on Homelessness and Affordable Housing and saw no discrepancy with recommendation #20. Rep. Lehner urged the group to be clear in what was expected from the legislature in this and other recommendations. In contrast to several suggestions that the recommendation needed to go back to subcommittee for more work, there were several suggestions that this initiative should not be delayed any further.

During a short recess a handful of ULTCS members worked to revise wording to language that would be acceptable by all.

In response to a suggestion that ICFs be included Missy Craddock asked that these not be included because money is not actually freed up when a person is discharged from an ICF but goes to support the next person on a long waiting list, and Patrick Stephan asked that DODD be allowed the chance for a broader discussion. It was decided that the list was not meant to be exhaustive, only suggestive of the types of institutions under consideration.

Newly crafted language was discussed, revised, and eventually approved by consensus as follows:

Housing: Any toolkits or resources developed to assist consumers with disabilities in living in community settings should include materials to assist in accessing housing. Develop resources to provide accessibility modifications in rental housing.

A. Redirect funding spent on inappropriate institutionalization (e.g., prisons, jails, hospitals and nursing homes) to capital and operating support for accessible housing to meet the long-term services and support needs of consumers, including those with behavioral health needs.

In answer to a question about housing resources, Roland Hornbostel mentioned the web-based housing locator service (www.ohiohousinglocator.org), modeled after the LTC consumer guide.

WRAP-UP

Barbara Riley wrapped up the meeting by reminding members that although these consensus recommendations represent a giant step forward, the work is not done. We need to carry the recommendations forward and work to integrate a number of them into the biennial budget over the next eight months of deliberations. ODA is planning to assign responsibility for various initiatives in order to keep the Workgroup moving forward toward our initial 50/50 balance goal (on HCBS and institutional care) for the 60 and over age range, and 40/60 balance goal for the under 60 population. In 2011 we will be starting to look at longer-term, more visionary recommendations for a Unified Long-term Care System for Ohio.

2011 MEETING SCHEDULE

Mary Inbody was charged with setting a schedule for 2011 meetings.

NEXT STEPS/NEXT MEETING – December 3, 2010

Note: Venue has changed for this meeting. It will be held at the Rehabilitation Services Commission, 150 E. Campus View Blvd, in Worthington, beginning with the plenary session at noon.

ADJOURNMENT

Meeting adjourned at 3:03 pm.