Update/progress on agency initiatives

1. Preparing for the October 24th Election
   a. General Information
      Election Date: Saturday, October 24th
      Early Voting: October 10th – 17th
      Election Date: Saturday, November 21st
      Early Voting: November 7th – November 14th

      To find the locations for early voting in your parish and your polling place on Election Day, view your ballot, determine if you are registered to vote, and view election results, visit www.geauxvote.com.

   b. Voting Hotline
      AC staff is available to assist with voting issues for people with disabilities. Contact AC at 1-800-960-7705 or advocacycenter@advocacyla.org for help with: locating your polling place, viewing your ballot in advance, addressing accessibility issues, and troubleshooting other disability-related voting problems.

      Trained Advocacy Center staff will be available to answer these questions and assist with disability voting-related complaints until the polls close on Election Day at 8:00 p.m. The hotline will also be open during AC business hours for the remainder of the week so that people with disabilities can report any problems encountered during the voting process.

   c. Know the Candidates’ Views on Disability Issues
      The Advocacy Center will be surveying candidates in a number of races including Governor, Lieutenant Governor, Secretary of State, Attorney General, State Senator, State Representative, and Board of Elementary and Secondary Education to find out more about their thoughts on issues impacting people with disabilities.

      The gubernatorial candidate videos will be released on Tuesday, October 6th and the candidate surveys will be released on Thursday, October 8th. Visit 2015election.advocacyla.org to view the results.

      Please help us share the results to people with disabilities, advocates and providers across the state. The more views the videos and surveys receive, the more likely candidates are to complete the surveys in the future.
2. Upcoming Important Changes for All Medicaid Recipients

On December 1, 2015, Medicaid-funded behavioral health services (mental health and substance abuse) will be provided through Bayou Health plans. Each Bayou Health plan will continue to cover the same physical health services as they do now; but, after December 1, “special” behavioral health services are also going to be provided through the Bayou Health plans. (Up to December 1, these services will continue to be provided through Magellan, which has managed behavioral health since 2012.)

In addition, the Bayou Health companies will begin covering non-emergency Medicaid transportation for all Medicaid recipients.

Finally, some groups that have, up to now, been able to “opt out” of Bayou Health will be required to enroll in Bayou Health plans for both physical and behavioral health services.

Letters from DHH:
The Department of Health and Hospitals has mailed, or is in the process of mailing, letters to all Medicaid participants to explain these changes. Even if you do not use behavioral health services through Magellan now, you will receive a letter explaining these changes because, if you need such services in the future, they will be covered by one of the Bayou Health plans.

How these changes will affect you, and what you will need to do, depends on which of the following describes you:

a. People already enrolled with a Bayou Health plan.

b. Children and young adults ages 3 - 21 on the NOW waiver waiting list (Chisholm class members) who do not also have Medicare coverage.

c. People receiving waiver services (NOW, Children’s Choice Waiver, ROW, Supports Waiver, Community Choices Waiver, Adult Day Health Care Waiver) who do not also have Medicare coverage.

d. Children on SSI, children with Special Health Care needs, and Family Opportunity Act participants who are not in any of the above groups.

e. People residing in nursing facilities who receive specialized mental health or addition services funded by Medicaid including OBH PASRR services and children under age 21 residing in Intermediate Care Facilities for individuals with Developmental Disabilities

The letters that DHH is sending, and the choices offered, are different for each of these groups.

If you are confused, don’t panic. You don’t have to make a choice right away. The letters we have seen so far indicate that choices don’t have to be made until November 6, 2015. After that date, you may automatically be assigned to a plan, but if so, you will be able to change plans up until February 6, 2016.
Useful links:
If you are receiving mental health services, or think you will need to in the future, you can start looking at the providers that are participating in each Bayou Health plan, to make sure you select a plan that has the best mix of providers for you.

All the Bayou Health plans are in the process of enrolling mental health and substance abuse providers as quickly as possible. Their lists of providers will be growing over the next few weeks. They will also be providing further information on additional mental health services they will offer. The Advocacy Center will share updated information in future newsletter articles.

Searchable databases of providers for each plan:

- Aetna Better Health: http://www.aetnabetterhealth.com/Louisiana/find-provider
- Amerihealth Caritas: http://amerihealthcaritasla.prismisp.com/?brandcode=ACLA
- Amerigroup: https://www.myamerigroup.com/LA/Pages/find-a-doctor.aspx

Prescription coverage:
If you enroll in Bayou Health for physical health services, whether you choose to do so or are required to, your medications will be covered by your Bayou Health company.

If you stay in “legacy Medicaid” (not Bayou Health) for your physical health services (even though you choose a Bayou Health plan for behavioral health), your medications, including mental health medications, will continue to be covered by legacy Medicaid or Medicare, depending on your particular coverage.

Information on prescription drug coverage for each Bayou Health plan:

- Aetna Better Health: http://www.aetnabetterhealth.com/louisiana/providers/pharmacy
- Amerigroup: https://www.myamerigroup.com/LA/Pages/medicaid.aspx
Applied Behavioral Analysis (ABA) Services
Legacy Medicaid (not Bayou Health) will continue to cover all ABA services, regardless of your category.
If you have questions about these changes, call 1-855-BAYOU-4U (1-855-229-6848). If they cannot help, call the Advocacy Center at 1-800-960-7705.

3. AC Launches Access LA Mobile App for People with Mobility Impairments
In late July, the Advocacy Center of Louisiana launched Access LA, its new mobile application for people with mobility impairments. This mobile app, the first of its kind in Louisiana, will help people with mobility impairments find out the accessibility of restaurants, retail establishments, and public venues across the state.

People with mobility impairments can't always patronize places of public use due to accessibility issues. AC created the Access Louisiana crowdsourcing accessibility website and accompanying mobile application to aid Louisianans with disabilities, as well as tourists with disabilities, in finding accessible public spaces, and posting reviews of venues not already included in the app.

Please help us by posting reviews of places that you visit. It’s very easy and will help others with disabilities in your area. Post reviews via the app, available now for free download from the Apple App Store and Google Play, the Android store or via the website, www.access-louisiana.org.

4. AC Lawsuit Increases Accessibility at Lafayette Eatery
On September 3, 2015, the Advocacy Center filed a lawsuit on behalf of plaintiff Liam Doyle in federal district court in Lafayette, Louisiana, alleging that Bisbano’s Pizza Parlor in Lafayette violated the Americans with Disabilities Act by failing to accommodate people with disabilities.

Liam Doyle is a resident of Lafayette, Louisiana who uses a wheelchair. Mr. Doyle is not able to patronize Bisbano’s Pizza Parlor due to its lack of an accessible entrance. The restaurant also lacks any designated accessible parking and facilities that can be accessed by persons with disabilities.

Since the lawsuit was filed, Bisbano’s Pizza has installed a ramp and designated accessible parking spaces for people with disabilities increasing accessibility for everyone.

5. LRS Policy Change Will Increase Access
Recently, Louisiana Rehabilitation Services (LRS) proposed new regulations to increase the cost contributions for people with disabilities by cutting the Basic Living Requirement significantly. Advocacy Center Client Assistance Program staff met with the LRS Director
and filed written comments outlining the negative impact of the change on people with disabilities.

Crediting the comments and meeting with the Advocacy Center, LRS withdrew its proposed regulation on cost contributions and submitted a new proposal which not only substantially raises the Basic Living Requirement, but also pegs it to the annual updates to the federal poverty guideline so that it will increase.

6. Success stories

**Charte r School Held Accountable**
The mother of a 7-year-old child with psychiatric disabilities who attends a charter school contacted the Advocacy Center for help because the school refused to evaluate the child for special education services despite his diagnoses, proposed expulsion, frequent suspensions, and frequent calls to the mother to pick him up from school. The Advocacy Center attorney was unable to resolve the issue with the school and filed a complaint with the LA Department of Education (LDOE). The LDOE found that the school unreasonably delayed the child’s evaluation and ordered corrective actions. The LDOE also ordered the school to complete all necessary parts of the evaluation process, provide compensatory services for over two months of lost services, train school staff on the identification and evaluation of students with disabilities, and to provide detailed documentation of this training to the LDOE. Based on the Advocacy Center’s efforts, the school completed the evaluation this summer and the child was found eligible for special education services.

**Move to a New Group Home Is a Success**

One morning, an Advocacy Center community living ombudsman was contacted by a group home administrator about a resident that was involuntarily hospitalized on psychiatric unit after hitting a staff person. The ombudsman investigated and found the resident, who had lived in the same group home for almost 30 years, began having problems months ago, but the group home staff did nothing and now refused to take him back. The ombudsman met with the resident and determined that he didn’t want to go back to the group home so the ombudsman helped to arrange a provider interview. A few days later, the resident was discharged from the hospital and moved into his new group home, where he’s much happier, playing in the local bowling league and working with LRS to obtain work in the community. The ombudsman also followed up with the original provider to discuss the need to have Interdisciplinary Team meetings at the first sign of problems to address issues before they escalate to hospitalization.
Status of agency’s activities/participation on DDC plan initiatives and impact

Objective 3.1  4,000 people on the waiting list will begin receiving home- and community-based services by educating stakeholders, policy makers and the public about the waiting list and needed systems reforms.

   Activity 3.1.2  Collaborate with other advocacy groups to plan and support Disability Rights Rallies.

   Activity 3.1.3  Advocate for systems change initiatives, revenue generating strategies, policies and practices needed to expand supports and services.

   Activity 3.1.4  Monitor the possible restructuring of long-term supports and services to a managed care system and advocate for an increased quality and quantity of services to be included in the reorganized system.

   Activity 3.1.5  Research impact of managed care on individuals determined to be dual eligible and make recommendations to DHH.

   Activity 3.1.6  Monitor the effect of Medicare/Medicaid dual eligibility on services for people with developmental disabilities.

The Advocacy Center remains concerned about the long waiting list for the NOW waiver and recent plans to change the prioritization process. We are also concerned that Community Choices waiver slots remain frozen.

The Advocacy Center is closely monitoring the integration of behavioral health services into Bayou Health to insure the transition goes as smoothly as possible. Individuals with developmental disabilities must choose a Bayou Health company for behavioral health services and non-emergency medical transportation, even if they do not currently use these services.

Objective 3.2  Admissions to residential facilities will decrease by increasing access to behavioral and medical intervention in the community and the discontinuation of people adjudicated into state-operated facilities.

   Activity 3.2.1  Advocate in collaboration with the Advocacy Center for
   • additional providers with specialized expertise in behavioral services;
   • the development of plan upon admission that includes specific activities, persons responsible and timelines for discharge or transition; and
   • improving the home and community based system by soliciting feedback from individual families using or trying to access behavioral health services and sharing that information with the DHH leadership.
Activity 3.2.2  Advocate for self-direction to be exempted from medication administration requirements.

Activity 3.2.3  Advocate for adequate rates that support services for people with complex medical and behavioral needs.

The Advocacy Center remains concerned that admissions to the Pinecrest and the private ICF/DD facilities continue at a higher rate than discharges from these facilities. We welcome efforts to collaborate to address these issues.

Objective 3.3  The number of people in private ICFs/DD per capita in Louisiana will decrease to reach the national average through the transition of people to home- and community-based services.

Activity 3.3.1  Advocate for
• changes to the rate structure of the Residential Options Waiver to encourage private ICF/DD providers to convert their beds so individuals can transition to waiver services,

Activity 3.3.2  Advocate for initiatives that allow residents of private ICFs/DD to obtain waiver services.

In addition to the concerns noted above, Advocacy Center staff are concerned that possible changes to the prioritization process will make it more difficult for individuals living in private ICF/DD facilities to access waiver services.

Objective 7.3  There will be an increase in the number of charter schools, early education programs, and other publically funded education facilities that approximate the percentage of students statewide served with developmental disabilities across all LEAs.

Activity 7.3.1  Advocate for improved oversight and monitoring of admissions and service delivery to students with disabilities in Charter Schools, early education programs, and other publicly funded education facilities in collaboration with the Advocacy Center.

The Advocacy Center is continuing to represent individual students with disabilities in charter schools to access evaluations and prevent unlawful removals from school. We are very interested in systemic advocacy in this area and welcome information from parents and advocates.

Objective 7.4  Students will be protected from discipline practices that cause harm and/or violate their rights.

Activity 7.4.1  Monitor and advocate as necessary against the use of harmful practices (e.g., restraint and seclusion, corporal punishment, unnecessary use of law enforcement, etc.) and alternative positive
evidence based options (e.g., positive behavior practices, etc.) and advocate for policies and practices that promote the safe and effective practices in collaboration with the Advocacy Center.

The Advocacy Center is beginning an investigation into arrests of students with disabilities in schools, to identify schools and parishes where students with disabilities are disproportionately arrested.

Objective 9.1 Louisiana will develop and implement an Employment First plan.

Activity 9.1.1 Advocate for
- policies that incentivize services for individualized integrated, competitive employment and dis-incentivize segregated, sheltered day habilitation services,
- sheltered workshops to transition people into individualized, competitive, paid employment and discontinue admissions into segregated day programs,
- collaborative policy making and practices across state agencies that promote students being supported in and transitioning into competitive paid employment,
- LRS and OCDD will collaborate to mandate that all supported employment vendors/providers complete a university-based 40-hour training,
- Support family members and other advocates to serve on the Louisiana work team in developing an Employment First agenda and implementation plan including participation in state level meetings.

The Advocacy Center continues to be concerned about the lack of real progress to implement Employment First. Staff continue to monitor sheltered workshops to ensure they are complying with federal wage and hour laws and advocate for systemic changes to promote integrated employment.

Objective 9.3 The Louisiana Vocational Rehabilitation (VR) program’s federal draw down will increase.

Activity 9.3.1 Advocate for Louisiana to draw down the entire VR grant award and serve individuals with the most severe disabilities.

The Advocacy Center will support efforts to increase LRS funding as resources allow.

Objective 9.4 Family members and others will be knowledgeable about options for integrated, competitive employment in collaboration with the Advocacy Center and the LSU-HSC Human Development Center.
The Advocacy Center’s benefits planning program was recently renewed and we will continue to provide benefits planning services to individuals in some parts of the state. The LSU Human Development Center serves the remainder of the state. A flyer with additional information and a map of the service areas was distributed to the Council recently.