

Louisiana Developmental Disabilities Council
Act 378
October 16th, 2024

BAMBI POLOTZOLA: Hi, everyone. I'm going to call the meeting to order. This is the Act 378 subcommittee. But before we start I just want to take a moment of personal privilege and recognize that we have two guests with us today from FEMA, Logan Perks and Lacy James. They are our FEMA disability integration coordinators for our region. Do y'all want to just kind of wave so people can see who you are. And so I just wanted to make sure people knew who they were. Whenever we have disasters they are the ones who really help out with disability integration from the perspective of FEMA with our state partners and local partners. So glad y'all were able to join today.

So I'll call the meeting to order with a quorum. So Brenton, you want to do the roll call?

BRENTON ANDRUS: Sure. Let's see. Ms. Gonzales.

CHRISTI GONZALES: Here.

BRENTON ANDRUS: Ms. Hagan.

JULIE FOSTER HAGAN: Here.

BRENTON ANDRUS: Ms. Nguyen. Mr. Piontek. Ms. Polotzola.

BAMBI POLOTZOLA: Here.

BRENTON ANDRUS: Ms. Stewart. Mr. Taylor.

ERICK TAYLOR: Here.

BRENTON ANDRUS: Ms. Womack.

LAUREN WOMACK: Present.

BRENTON ANDRUS: And you do have exactly a quorum. So nobody can leave.

BAMBI POLOTZOLA: Thank you, Brenton. And before we get started I just want to remind you all of a few rules for committee members and members of the public attending in person. Please raise your hand to speak and wait to be recognized by me before speaking to help the meeting run smoothly. Please keep side conversations to a minimum and comments related to the topic we are discussing. For those committee members who are attending virtually remember you must have your camera on and have your first and last name showing to be counted towards a quorum. Please keep your

microphones muted unless called upon by the chair. Electronically raise your hand to request to speak and wait to be called on by the chair. For attendees electronically raise your hand to request to speak. Once recognized by the chair your mikes will be turned on. After speaking the microphone will be returned to mute.

Also, the Q and A is only to be used for those needing ADA accommodations to participate in the meeting. Public comment will not be accepted via Q and A except for those individuals who requested the accommodation. As for order committee members in person and virtually will be allowed to speak first. Public members in person will then be called on followed by public participating virtually who have their hands raised. Comments in the Q and A will be addressed last. As with all hybrid meetings it can be difficult to keep track of those wanting to speak in person and virtually. Please be patient. All comments and questions from the public will be limited to two minutes so please keep that in mind. Depending on time constraints we may also limit comments to once per issue. Also, comments about a person's character will not be allowed. And finally, members of the public will have the opportunity to provide public comment before each vote during designated comment periods. The chair may also use their discretion to determine if the comments will be accepted outside of those times.

And I see that Tony has joined us so welcome Tony. Okay, so everyone should have reviewed the July meeting summary that was attached to the agenda you received via email. There's also a copy in your committee packet. I need a motion to adopt the July meeting summary.

CHRISTI GONZALES: I make the motion to adopt the July meeting summary.

BAMBI POLOTZOLA: So Ms. Gonzales made a motion to adopt. Do we have a second?

BAMBI POLOTZOLA: Okay. So Erick Taylor made a second to that motion. Is there any discussion? Is there any public comment? Tony.

TONY PIONTEK: I would have wanted to second that.

BAMBI POLOTZOLA: Okay. Thank you, Tony. So since there's no discussion or public comment based on the

updated public meeting law we will now do a roll call vote. Brenton, please call the roll.

BRENTON ANDRUS: A vote of yea would be to accept the July meeting summary. A nay would be to not accept it. Ms. Gonzales.

CHRISTI GONZALES: Yes.

BRENTON ANDRUS: Ms. Hagan.

JULIE FOSTER HAGAN: Yes.

BRENTON ANDRUS: Ms. Nguyen. Mr. Piontek.

TONY PIONTEK: Yes.

BRENTON ANDRUS: Ms. Stewart. Mr. Taylor.

ERICK TAYLOR: Yes.

BRENTON ANDRUS: Ms. Womack.

LAUREN WOMACK: Yes.

BRENTON ANDRUS: All right. We have five yeas, zero nays.

BAMBI POLOTZOLA: Thank you, Brenton. The motion to accept the July meeting summary has passed unanimously.

Okay. Next, we're moving onto the Office for Citizens with Developmental Disabilities' report. Tanya Murphy, there she is. You can go ahead and present.

TANYA MURPHY: Okay. So we'll start with the fiscal year 24 final expenditures report. This report includes all of the expenditures from fiscal year 24 as opposed to any of the other reports that we do throughout the year where we say it's missing some of the expenditures. This has the full report from 24..

BRENTON ANDRUS: I think we have you back. It was cutting out for a minute.

TANYA MURPHY: I'm sorry. I missed what you said there.

BRENTON ANDRUS: It was cutting out. We didn't hear what you were discussing.

TANYA MURPHY: Yeah, luckily I wasn't discussing anything. I think what I'll do is stop my video because sometimes that slows..

BAMBI POLOTZOLA: I'm sure she'll log back on. Just kind of look at the reports if you have any questions because she has three reports that she's going to be reporting on. And one of them is the big report, that's our annual report that kind of breaks down the cost by expenditure by each district.

JULIE FOSTER HAGAN: The first one that you see that says at the top Office for Citizens with Developmental Disabilities state fiscal year 24 fiscal year 24 final expenditures in the left-hand corner. When we present in July we don't have all of the final and so we present this with all of the final information that we have received. And then on the back is the final from state fiscal year 24 which is July 1, 2023, to June 30th, 2024. And on the back you see the compliance report and you can see that all of the LGEs did meet their nine percent requirement for last state fiscal year. And then as Bambi was saying the next report, which is a lot of boxes, that is the breakdown from that same fiscal-- I guess we can say any questions about the final expenditure report before I go to the next report.

BRENTON ANDRUS: I'm not mistaken if they haven't met the nine5 percent threshold it requires a corrective action but they have all met at least the nine5 percent expenditure rate.

JULIE FOSTER HAGAN: Correct.

LAUREN WOMACK: And if it's more usually they've been allocated more from a different source.

JULIE FOSTER HAGAN: Well, or they take some of the money from their budget and they can add to that. So sometimes they take the money, so like the 101 percent, they went a little over their budget in the IFS program.

LAUREN WOMACK: Okay.

BAMBI POLOTZOLA: And just to be clear, the Act 73 that requires them to spend nine percent of their state general funds for DD services. That's our local governing entities, the human service districts and authorities. They're required by law to spend nine percent.

JULIE FOSTER HAGAN: Yeah, so on that back page where you see more than 100 that's how much over the nine percent that they spent.

BRENTON ANDRUS: And just to clarify, it's nine percent of what their state general funding is. They can use funding from other sources outside of state funds to cover that nine percent if they need to.

JULIE FOSTER HAGAN: Yep. Any other questions or comments on that first report? So this next report is

the one with all of the boxes and numbers. And that is a breakdown that the councils asked for to be able to take a look by each region of the requests that came in for the IFS program and then the numbers that were either fully funded or partially funded or not funded. On the first page shows that information by region and by priority because in the IFS program when it comes in, the request comes in it's given a priority and we try to fund the higher priority ones first.

Followed by a breakdown. I know Brenton and Tanya did a lot of work on this. Kind of some of the specific categories or areas that we wanted to take a look at specifically by region and how those specific items, you know, where they were being funded. So you'll see that kind of in summary and more of a breakout for all of the districts and authorities. So it is a lot of information so I'll pause.

BRENTON ANDRUS: One thing that I did add that you didn't have last year on that second page where you have the summary of all the districts and authorities, all of their IFS requests broken down by each district and how much they've spent, encumbered, whatever contracts. On the very back is the overall total, the back of that second page, for all the LGEs it's their entire total. And then I put a percent increase and decrease from the previous year there just so you can see areas that we may have seen an increase or decrease in that particular area.

One of the things I know y'all had expressed interest about was incontinent supplies given that there were opportunities now in the waiver to get some support there. And so based on this information the amount of contracts for those services were reduced by 35 percent. And the expenditures in that particular area was a reduction of 38 percent from the previous year 2023. But I wanted to put that there for all of them so you could see if you were interested in any of the voc rehab or anything else that they are helping support families with.

LAUREN WOMACK: Thank you. This took a lot of work.

BAMBI POLOTZOLA: So in regards to that, the incontinent supplies, remind us what's covered. Is it waiver that covers the incontinent supplies?

JULIE FOSTER HAGAN: So there's now in the-- so the three adult waivers because incontinent supplies for children are covered through EPSDT. So in the adult waivers it was added, well it was added to a service definition for I believe it's specialized medical equipment. And so there is a cap of 2,500-dollars so it is in waiver with a cap up to that 2,500-dollars. Now we have at OCDD heard concerns about that, the quality of the incontinent supplies and we are doing some work around that. Where the issue came is that when you have, and I may really mess this up so this is my understanding, Charles is the one who really understands it. But when you have a service-- so when we added that with a service code in Medicaid you have to have like caps for that so they use, because we only had incontinent supplies on the children's side, they used the same cap for the children's incontinent supplies when we came to the adult incontinent supplies. So there's the 2,500-dollar cap for a person, but then there's also a cap on the amount you can bill Medicaid for that supply. And so the cap that they put is apparently not allowing the DME providers to buy some of the disposable products that folks are needing that are higher cost because it's costing more than what that Medicaid rate cap is set at.

CHRISTI GONZALES: So they're meeting the cap way early before?

JULIE FOSTER HAGAN: No. This is an example because I don't know the exact amounts. So let's say that a disposable undergarment costs, you have the cheap ones that cost 50 cents and maybe the Medicaid cap is at 50 cents. So it covers the cost of that one. But there are some that are more absorbent or maybe thicker. And again, that maybe cost 56 cents per disposable brief. And so the providers are saying I can't get those higher cost ones because it cost me 56 cents and I'm only able to bill 50 cents for it. Does that make sense?

CHRISTI GONZALES: Yes.

JULIE FOSTER HAGAN: And so we are looking at that, but that's why sort of the confusion came from. And then what folks are telling us when they did work with the LGEs for incontinent supplies there's not that cap because it's not a Medicaid service. So you have to

put a cap on the same way we do on the Medicaid side. So we are exploring it. We are looking to see what if anything can we do, is it possible. Because you'll still have the 2500. So again, instead of getting the 50 cent if you get the 56-cent product you're going to hit your 2500 cap sooner. It doesn't affect kind of the fiscal note because you're still not able to get more than that so you might get 100 instead of 150. But we are trying to see what we can or can't do about adjusting the max amount that the DME provider can bill for that brief.

LAUREN WOMACK: Because they can't even get them is what you're saying.

JULIE FOSTER HAGAN: It would cost them more than what they can pay for it is my understanding.

ERICK TAYLOR: (Inaudible).

JULIE FOSTER HAGAN: So Medicaid, what you have to do for everything in Medicaid is have like a maximum bill. Whether that's going to a doctor of some kind. Like there's a pay scale for every service. And so what we have to do again, what we did was use the same scale was used on the children's side in EPSDT because that was already there. Since incontinent supplies for adults was brand new to be able do it more quickly we just used that. Now we're seeing that there's issues so we're trying to see can we raise the fee scale just on the adult side or do we need to raise it on both, I don't know. But we're looking at can there be adjustments made. So it's not the rate, but it's like a fee scale but it's kind of like the rate--

LAUREN WOMACK: You'll still get the same amount but like you won't get as many if you want the nicer kind.

JULIE FOSTER HAGAN: Correct.

LAUREN WOMACK: Which is your choice.

JULIE FOSTER HAGAN: Correct.

BAMBI POLOTZOLA: And I would just say something because I did not have personal experience until you guys all know my husband passed away and so he had incontinent supplies and when people talk about it I didn't have experience. It is not just a choice. That will consume your life if you're a caregiver and you have the incontinent supplies are not sufficient and you're having to do the cleanup that because of those

incontinent supplies not being sufficient it creates so much extra work when you're already dealing with so much. So I think this is a really important thing for people to be able to get quality incontinent supplies that helps the caregivers immensely. We purchased them and we purchased quality because it helped, you know. A few times like I tried the cheaper incontinent supplies and was like oh, no, I will spend the money because it's a lot. There's a big difference. So I think that that's something that really needs to be addressed.

LAUREN WOMACK: And a lot of times too like on the calls and stuff a lot of people are just like-- personally when I couldn't get the ones that I wanted I was like well, I'll just do it on my own but for some families that's not an option.

BAMBI POLOTZOLA: Right.

LAUREN WOMACK: And sometimes it makes more of an issue having some that aren't what you need than having nothing at all.

ERICK TAYLOR: I'm kind of glad that they're looking at it because families to get the cheaper size even with the equipment that they laying in the beds it does a lot of damage to what they laying in. It breaks the body down. So it is a good thing that y'all looking at that to make it better that is better for the person to get the quality and not just what we can get. It's a choice that we need to keep bedsores from coming. Different other things happening that don't need to be happening.

JULIE FOSTER HAGAN: But just very quickly. So some of the folks that are receiving IFS don't all have waiver so you may still see some incontinent supplies because it's not a waiver service on the adult side so you may still see expenses in that area, I guess, even for those folks who maybe aren't in waiver services.

LAUREN WOMACK: But that's interesting that y'all found that so maybe people understand it's not the companies trying to give you products, inferior products on purpose. It's just they can't get even reimbursed. So I think that's encouraging too.

BAMBI POLOTZOLA: And if I recall in previous years we had discussions about personal care attendants and vocational employment supports, like the amount that

was spent in those areas and like the holding of those expenses. And so I'm just wondering if, Brenton, did you see anything that stood out to you? Tanya, can you hear us?

TANYA MURPHY: I can hear you guys.

JULIE FOSTER HAGAN: PCA and vocational and the coding and previous conversations. I'm not sure--

TANYA MURPHY: Nothing jumped out at me as different or of note.

BRENTON ANDRUS: Yeah, I mean, there's been a reduction in both areas. It's a very small reduction from 23 to 24 but it seems, for the most part, to remain on par with what it's been.

BAMBI POLOTZOLA: And I remember the discussion started out because we were concerned about why were people using individual and family support funds for employment supports and it seemed like that was for like day programs and they weren't maybe like in integrated employment settings. And then some they were using PCA that seems like disproportional in some regions. And so I guess my question is there an effort within the LGEs to get more of people with developmental disabilities into more integrative employment, has there been any movement in that area?

TANYA MURPHY: I would say that information would need to come from the LGEs specifically, each one, and that is not a question that I asked in advance of this meeting.

BAMBI POLOTZOLA: Okay. And has there been any movement like, and I probably should know this, but Julie, you might be able to answer like in regards to the employment services within the waiver there's some efforts to make changes, right? Has there been changes or they're still like in the process of making changes in that area?

JULIE FOSTER HAGAN: Yeah, no, we've made some substantial changes in our vocational redesign on the waiver side. Heads up, if you look at our roadshow we actually have a whole section on talking about the changes to help make sure folks are educated. We've modified our rates as well as our services so that you can have, providers would have more of the ability to have community-based. So what was happening in the day program if you're at a facility most of the time there

was one staff person to eight individuals. Well, you can't have that same ratio if you're in the community and trying to do things in the community. And most folks don't want to go with eight other people if they're trying to really be a part of the community. So we now have different services, a service called community life engagement that can be done with a one-to-two or a one-to-four ratio. And so then the rate is available to pay, have the providers be able to pay then to have, you know, they'll need more staff to cover it. But it's a higher rate when you have those lower ratios.

We also have community career planning which helps a person if they want to go out and maybe just explore different employment options before getting the job. And then we have rates are different for lower ratios there as well to be able to, you know, be able to pay providers for having the staff to be able to accomplish those things. So yes, that all has been in place now for a brief period of time but we are trying to make sure that everybody's educated on that who needs to be educated on that. So our support coordinators to help explain it to the family members and making sure all of our day program and vocational providers we've had a training and education for them so they know how to bill for those kinds of things because it gets a little bit complicated. And we're continuing to talk about it. But yeah, that's been fully rolled out at this point.

BAMBI POLOTZOLA: And those are new services, day program provider?

JULIE FOSTER HAGAN: Correct. ADC is what it's officially called. Adult daycare. I just really don't like that title but that's what it is in licensing. And so but yes, it's the ADC providers.

HANNAH JENKINS: Tony has his hand raised.

BAMBI POLOTZOLA: Hey, Tony. Go ahead.

TONY PIONTEK: I'm like the same level as you two, but not just education but transportation. Where is that leading for us. We're just a parish and we've been fighting that for I don't know how many years. And I met Ms. Christy Curtis over here, region four, and it's really going nowhere.

JULIE FOSTER HAGAN: So we did add a service as

well for some of the day program and employment services. There was an assumption that transportation was in the rate and what folks told us is no, it really isn't. And so those folks who do have people come into the day program or go into the community really the focus is that part of the day has to always be in the community or part of the week always has to be in the community. Or to help people get to their job. There is now the ability to bill a 20-dollar per day for transportation to help providers with the cost of that transportation. That's part of our package as well.

TONY PIONTEK: Yeah, I mean, with the talks with Ms. Christy in our area it's just an Uber and that's not helping. I'm not sure how it was put in place or who the person might have been or others concerning that. And it's like you have to find the Uber, catch it. How is that really going to help all of us publicly where I live in our parish.

JULIE FOSTER HAGAN: Yeah, so the transportation isn't specifically for Uber. It is for the provider to be able to if they have a vehicle or have staff who pick people up to help get them to where they're going. It's for that. We have to be very careful about using Medicaid dollars to pay for Uber or Lyft. And I don't even want to try to open that can of worms because I just don't even know enough to talk about it. I can take it back and research it. I do know that there are some limitations to be able to use Medicaid funding on Uber and Lyft. But if folks are interested in knowing what that is I can have somebody research it. Other than there's some difficulties I don't know much about that.

TONY PIONTEK: I am more than willing to get with you after all this and we can talk more on this to make it a whole lot better and make it successful and more having that option open because we can't live with just an Uber system. We're not like a Lafayette Parish. That's how I personally feel.

BAMBI POLOTZOLA: Thanks, Tony.

TONY PIONTEK: Sure.

HANNAH JENKINS: You had a hand raised from a member of the public, Ms. Mylinda Elliot.

BAMBI POLOTZOLA: Mylinda Elliot.

MYLINDA ELLIOT: Thank you. Can we go down on this

chart a little bit.

BAMBI POLOTZOLA: Sure.

MYLINDA ELLIOT: Little bit farther. Right there on that one. There is a line that I don't understand. It says startup funding and it has encumbered, spent but then it looks like a 218 percent increase. Can somebody tell me what that is and explain the increase maybe?

JULIE FOSTER HAGAN: Tanya, can you explain that? I'm not able to answer.

TANYA MURPHY: So I wasn't able to hear the question. I'm so sorry.

JULIE FOSTER HAGAN: What is the startup funding, what does the startup funding include? And it looks like a 218 percent increase in the money spent.

TANYA MURPHY: Yeah, I actually looked at that when I saw the 218 percent and so I looked at the--

BAMBI POLOTZOLA: Seems like we lost Tanya. It doesn't look like it makes sense. Your spent column, like it doesn't align. I noticed that on my paper too. Because the start was 31,000 last year and it's 30,000 this year. That's not 218 percent. If you look at the first column assistive-- oh, I was thinking encumbered and spent was last year. I'm sorry. Excuse my previous comment.

BRENTON ANDRUS: If the amount is incorrect I blame Excel.

LAUREN WOMACK: (Inaudible) startup funding.

BRENTON ANDRUS: She actually explained last year what startup funding was and I cannot remember.

TANYA MURPHY: My internet is terribly unstable so I joined with my phone so I'm hoping this is a little bit better.

JULIE FOSTER HAGAN: So you were explaining startup funding.

TANYA MURPHY: Yeah. Startup funding is when an individual is moving out on their own and they need all kinds of different things. Furniture, dishes, sheets, that type of, those type of items. And when I looked up each individual LGE it looked like Northeast Delta had the most that they funded and so I would say that Northeast Delta would need to provide maybe an explanation as to if there was an increase in the number of individuals that moved out and what they

provided. They did ten contracts. It's like a 218 percent increase but that's maybe just because Northeast Delta had several people, an increase, so the information would have to come from them. Do we have anybody from Northeast Delta that joined the meeting?

BAMBI POLOTZOLA: Amy, I see you there. Amy Miller with Northeast.

AMY MILLER: Hey, can y'all hear me?

BAMBI POLOTZOLA: Yes, ma'am.

AMY MILLER: I don't have an explanation right away but I am writing down the question and I'm going to check in because I guess I didn't realize we had so many more last year. You know, I know that we've had a lot of linkages and we've had a lot of people starting out with waiver and we do help a lot with those particular situations. So I'm guessing that is the main reason we had such an influx but I will check and make sure.

TANYA MURPHY: And just to help, a linkage is when somebody is receiving a new waiver. They're receiving new waiver services and so perhaps they're living in an ICF group home facility and they received a linkage to receive waiver services and then they move out on their own. So when Amy says they received a lot of new linkages that's what she's referring to.

BAMBI POLOTZOLA: So I see that as a good thing if people are making the choice to live independently and they are helping them to do that. Erick.

ERICK TAYLOR: I have two questions. I got one for you and then-- well, both for you. With the adult centers, don't y'all provide them with a van to pick up?

JULIE FOSTER HAGAN: No. And Kelly may be able to answer this question because I know some of the Arcs have it. I know they apply for vehicles but it's not through OCDD. So I know some of them do have public transportation vehicles but I'm not sure where they get it from. Kelly, the question was if they have employment providers who have vehicles and he was asking about us giving funding for that. I know they don't get it through LDH, but that they do have other avenues and I don't really know where that comes from. I don't know if others may know. Kelly, we called your name and you might have just like stepped away for a

second. The question was about transportation. He was saying that some of the day programs or employment providers have vehicles and was asking about LDH funding. And I said that doesn't come through LDH but I know some of the Arcs do have buses and other forms of vehicles that I think they get help or funding from somewhere but I'm not sure where that comes from.

KELLY MONROE: Yeah, so in some situations they are purchasing these vehicles through Department of Transportation and they get like a discount. But in order to do that there's several things that they have to do. So a lot of them, honestly, will run fundraisers and buy the vehicles themselves. They're expensive but sometimes the hoops you have to jump through to get from Department of Transportation it's just easier to run a fundraiser and buy a vehicle. So they do both.

ERICK TAYLOR: Question number two. When y'all move the patients out of the nursing home to independent living do they go through a stage where they see that they ready to be moved on their own or do they have to go through steps to see? Because what I have been seeing is when they move on their own some of them have to fall back into the nursing home. Do y'all go through a step to see if they're ready to be on their own, handle themself to move out?

JULIE FOSTER HAGAN: So for nursing homes specifically there is a different process I guess a little bit for nursing homes and for group homes that Tanya was talking about. So for people who are in nursing homes, there's also two different steps in the nursing home. But for people in the nursing homes some of them fall, Department of Health is under a Department of Justice investigation because they found that there were too many people who were living in nursing homes who had a serious mental illness. So not an intellectual and developmental disability. Although some people have an intellectual and developmental disability and a serious mental illness. But if you have a serious mental illness and you are in a nursing home and you want to live in the community we're under an agreement to try to help people get out of nursing homes. So if you fall in the DOJ population there are very specific resources that are tied to that. You

have what's called a transition coordinator. So you are supposed to be working while you're in the nursing home with that transition coordinator. If you want, not everybody wants a waiver. So if you are a person who meets the criteria for one of our waivers either through the Office of Adult, Office of Aging and Adult-Onset Disabilities or through the Office for Citizens with Developmental Disabilities then you get linked and you get your support coordinator who becomes a part of your transition team and tries to help.

We also have a program called Money Follows the Person and we have that on the Office of Aging side and Office for Citizens with Developmental Disabilities. And what Money Follows the Person does you have a person leaving an institution whether it's a nursing home or an ICF or group home. There's some things that that program can offer you around training and assistance, finding a house and things like that. And then if you are in the DOJ, so that's kind of transitioning. So there should be planning around things that are needed to be able to support you in the community so that when you go you have access to those things.

ERICK TAYLOR: But my concern is I'm seeing that the people that they moving out of the nursing home in the medical places they not ready. They not getting the support where they is fully ready. That they is capable of kind of what I'm seeing them going back. That's why I'm asking about the step what do they have to do. Because it looks like they going backwards.

JULIE FOSTER HAGAN: Yeah, and I can find out. So we do have some data that shows-- and I'm kind of a part of that but I don't oversee that. But I can find out from folks. They do have to track once you go into the community if you do end up back in the nursing home within a year they have to track that information. We also track that information for people who leave Pine Crest, our state facility, and go in the community. If they have to go back we do track that so I can ask for some data on that if that's something you would like to see?

ERICK TAYLOR: Yes.

JULIE FOSTER HAGAN: Okay.

BAMBI POLOTZOLA: Any other questions on this

report? Okay. Thank you, Tanya. I think we have one more report.

TANYA MURPHY: Yeah, we've got the quarter one expenditure report for fiscal year 25. Just let me know when you guys are ready for me to move onto that report.

BAMBI POLOTZOLA: You can.

BRENTON ANDRUS: Yep, take it away.

TANYA MURPHY: Okay. As we say in every report, you know, this report is compiled from information that we gather from the LGEs and they all let us know the report is due prior to them actually receiving all of the invoices they're going to get for quarter one. So while you would assume in general that quarter one would be 25 percent expended, it's usually less than that. But they haven't actually received all of the invoices yet. Quarter one reporting in October for me is unique in that we just got done looking at the final fiscal year information that shows that they do spend all of the money. And so although the quarter one percentages look a little low all of the LGEs report that they anticipate they will be spending all the money. I don't know if you guys have the report in front of you. So are there any questions on the Act 378 information for quarter one?

So I'll move onto Act 73, the nine percent compliance report. This is when the total state general fund amount is (inaudible) or how much money the LGEs actually received. And then how much is actually equal to the nine percent requirement is the second column there. And then it shows how much money was actually budgeted by the LGEs to spend for their Act 378 programs. And this is when we have to make sure that they have at least budgeted equal to the nine percent. I am currently in talks with Central Louisiana Human Services District. Their budget amount appears to be less than the nine percent so we're having ongoing discussions about--

CHRISTI GONZALES: While we're waiting for her to come back on I have a question. All of the ones who assist with driving school and drivers education I know it's very costly but are they actually getting a driver's license?

BAMBI POLOTZOLA: Where are you seeing that?

CHRISTI GONZALES: I'm looking at the program report, quarter one expenditures.

BRENTON ANDRUS: The IFS report.

BAMBI POLOTZOLA: Under which?

CHRISTI GONZALES: Somebody had some from 2024. Because depending on where you live it's very expensive.

BRENTON ANDRUS: Is it in the comments?

CHRISTI GONZALES: Yeah, in the comments.

BAMBI POLOTZOLA: So that was the first report that we looked at.

JULIE FOSTER HAGAN: That's behavioral health.

CHRISTI GONZALES: Oh, okay. Sorry.

BRENTON ANDRUS: You're so excited you're getting ahead.

CHRISTI GONZALES: Didn't mean to.

BAMBI POLOTZOLA: Okay. So it seems like Tanya was saying she's talking to Central Louisiana because they should have budgeted at least like nine83,000 and they only budgeted about nine47.

TANYA MURPHY: That's exactly what I was calling attention to. I'm sorry, you guys. I dropped the Zoom and when I came back and you were talking about driver's licenses I was like wow, how much of the meeting did I miss. Yeah, so I'm currently in negotiation with Central Louisiana Human Services District because I think they have a couple contracts that they do expend on services for people who have developmental disabilities that they have not included in their report. And so I'm currently discussing with them as to what reports they can add in there or contracts so their nine percent is equal to what they're supposed to be budgeting for those programs.

BAMBI POLOTZOLA: Okay. Any other questions about the Office for Citizens with Developmental Disabilities Act 378 report for the first quarter? Okay. Any other overall questions that concludes the reports from OCDD? Are there any other questions for OCDD?

ERICK TAYLOR: Is your OCDD waiver thing over?

JULIE FOSTER HAGAN: I'm not sure I understand the question.

ERICK TAYLOR: Is the waiver, y'all got any more of the waiver? Is it closed?

JULIE FOSTER HAGAN: In OCDD anybody who goes

through the SUN screen process and is identified as having urgent or emergent waiver needs receives a waiver offer. So we have continued to provide waiver offers. There's no one waiting who has urgent or emergent needs for a waiver offer.

BAMBI POLOTZOLA: Okay. Well, thank you, Tanya, for the reports. Now we'll move onto our SPAs reports. That's our State Personal Assistance program. And Kelly Monroe with the Arc of Louisiana will present that report.

KELLY MONROE: Hey, guys. How is everybody doing on this beautiful morning. Okay. So we already reported the end of last year so we're just doing the first quarter of this year. So you can move that if you want. I'm looking at my other one though. So this quarter we served 41 people. Of those people 18 of them were African American, 22 were Caucasian and one person was Hispanic. Twenty-seven of those were males and 14 were female. And the ages range between 31 and nine². So these are the regions where the people are being served. The highest region is region nine as usual but in region one there are five people being served. Region two there are six. Region three there are four. Region four there are two. Region five there are four. Region six there are two. Region seven there are nine. There's no one in region eight at this time. And then there are nine in region nine with a total of 41 people. All 41 are receiving support coordination. Thirty-six people are receiving personal care assistance. Four are receiving either rental assistance or utility assistance. Two this quarter are receiving medical supplies. And no one received any home modifications or vehicle modifications. It's important to note too that some may be receiving more than one service.

So we plan to spend 8⁹3,000 and so for this quarter we spent 161,16⁹.47. And there's the breakdown. If we look at the waiting list at this time we have 104 people on the waiting list so it went up since last time that we've talked. But there are 25 people waiting in region one. Twenty-four people in region two. Ten people in region three. Fifteen people in region four. Five in region five. I'm sorry. Two in region five. Two in region six. Six in

region seven. Four in region eight and 16 in region nine.

And then for the demographics of those people 43 of those people are African American, 49 of those people are Caucasian. One Hispanic. One is Asian, Caucasian. And ten are unknown. So that just basically means that ten people did not complete the application completely and some of that information was missing. So 48 of them are males and 56 are females. So there's 104, total of 104. We've estimated the PCA hours at 35 hours a week because that's the average of what people are receiving at 14-dollars an hour to come up with some of these costs. So right now there are 88 applicants who are interested in personal care assistance and that would require-- I'm sorry. And there are 14 people with home modifications or vehicle modifications. Two are interested in dental. Thirty-seven in medical supplies or equipment. Two are either interested in rental assistance or utility assistance. One person interested in therapy. So if we were to serve all of these people we would need 2.6-million.

TONY PIONTEK: And Ms. Kelly, it's Tony.

KELLY MONROE: Hi, Tony.

TONY PIONTEK: How can you answer to the best of your knowledge for the therapy, physical speech counseling, is there anything of that nature hopefully to improve?

KELLY MONROE: I don't know because it was just on the application and we don't actually serve that person yet so I don't know.

TONY PIONTEK: I was just wondering.

KELLY MONROE: Yeah, normally when people are applying it's physical therapy that they're looking for.

TONY PIONTEK: Because when I was much younger I went through the, it's a very special place for people like myself and it was a Lions Camp a long time ago. You may have heard of that place. I was there. And I'm very sure it's still there with many other counselors and just the whole nature of what I went through when I was much younger. But I just kind of wondered if that might have been a work in process or something like that.

KELLY MONROE: Yeah, I'm not sure. And I'm really not sure what part of the state that person's in either.

TONY PIONTEK: I was very curious because I went through that process much younger before I was even being as a teenager. That's all right.

KELLY MONROE: Okay. I do know this that all of the people who are on the waiting list are adults. So none of them are children.

TONY PIONTEK: Okay.

KELLY MONROE: So and then this was something that we added I think last year. You guys wanted to know like did people apply for other, you know, were they receiving other services and did they apply for some other services. And so that's what this chart shows to the best that we could. We didn't have the information for everybody but this is what we were able to get. So there are some people who are currently receiving other services. No one's receiving the ROW. There are some that are receiving other services that they feel could use some additional help. The assessments have not been done so we're not sure if all of these people need the additional help but this is what we have so far. We do know that there are two applicants who are not eligible for other services and are not receiving any services. And there were 55 applicants that we were unable to get this information on. So that's a lot but we did the best we could. So I don't know if anybody has any questions or comments about the report but I would be happy to answer.

BAMBI POLOTZOLA: Kelly, this is Bambi. I have a question. You said of the number of applicants currently receiving. So five are receiving a NOW. What services would they need that the NOW wouldn't provide, with the SPAs that NOW wouldn't provide?

KELLY MONROE: It could be whether they are looking for either more hours, which we'd have to do the assessment, or it could be they're looking for utility assistance or rental assistance because we do provide those things too.

BAMBI POLOTZOLA: Could be those people that are currently receiving SPAs services, right?

KELLY MONROE: Yeah, but they could be looking for rental assistance or utility.

BRENTON ANDRUS: I think that's the folks on the waiting list.

KELLY MONROE: Yeah, this is the waiting list.

BAMBI POLOTZOLA: Oh, applicants. Okay, I'm sorry. I was thinking these were people who were receiving SPAs.

KELLY MONROE: No, no, no. We moved onto the waiting list people. These people could be receiving other services but also applied for SPAs.

LAUREN WOMACK: So they could double up?

KELLY MONROE: Yep. If one of them's not providing what they need, yeah.

BAMBI POLOTZOLA: Any other questions from committee members? I see Mylinda Elliot has her hand raised.

MYLINDA ELLIOT: Go up a little bit, Bambi. A little bit more. I must have lost the question. Go down a little bit more. It was somewhere in here and I just don't remember what it is now. I'm so sorry. Thank you.

BAMBI POLOTZOLA: No problem. Any other questions for Kelly? Okay, well, thank you, Kelly. Now we'll move onto our behavioral health reports and Dr. Kristen Savicki is here. No, Dana Foster is here.

DANA FOSTER: Good morning. So we're looking at the yearend expenditure report and for consumer care resources. Everybody ended the year pretty well. Majority met their mark. There were a few that did not expend 100 percent but overall no corrective action plans were needed for any LGEs at the yearend.

For flexible family funds as well everybody ended the year pretty much on target. No corrective action plans were needed for those funds either. Are there any questions about the yearend report?

BAMBI POLOTZOLA: Christi has a question.

CHRISTI GONZALES: Central it has summer school credit recovery for a couple of clients. During the school year credit recovery is free and I was just wondering why they were having to pay for credit recovery during the summer.

DANA FOSTER: I am not certain of that. I can reach out to Central and ask them that. I'll pass that question along to them and give them that information you shared.

CHRISTI GONZALES: Okay. Also, for the driving schools that they're sending the children to drivers education. Are they following through and getting a license or just attending? Because I know some people with disabilities need extra driving practice and I know it can become expensive. So are they actually gaining a license?

DANA FOSTER: I am not certain of that either. That too is a question I can pass along to the LGEs and I can share the response with Brenton who can then share it with you all.

LAUREN WOMACK: If possible, and I don't know if you collect this data, but like for rental assistance and utilities do y'all have like a cap for how many months in a row y'all do that to the same families or it's just independent need based?

DANA FOSTER: This is not something that we collect from the LGEs but I do know there is a cap. I'm not 100 percent certain on that because again, we don't track that from the LGEs, but I don't think there's a cap.

KRISTIN SAVICKI: I'll jump in and say-- I'm sorry. This is Kristin Savicki with OBH. Just to jump in. We would have to go back and look at the policy which provides guidance to the LGEs and their administration of the program. As Dr. Foster notes, I don't believe there's a cap but there is some language around it being temporary assistance. We would have to go back and look at the specific language. But then the LGEs are really in charge of implementing this and they may have internal policies around how long or how temporary they want that assistance to be.

LAUREN WOMACK: Okay. So it's up to the different communities. Is that safe to say pretty much?

KRISTIN SAVICKI: I think that's safe to say within as long as they're aligning with the kind of overall statewide policy. Which again, I need to go look. In fact, I can maybe do that while we're on this call I can go look at what that policy is and I might be able to just put that in the chat.

LAUREN WOMACK: And then just something like maybe to think about if we ever have another emergency or anything do y'all have like a special category for like emergency expenses, or like the behavioral, or like if

the family has to relocate or things like that? Is that something that this program would provide families assistance with or would that be something else?

KRISTIN SAVICKI: That's a great question. I believe that-- so again, there's the kind of overall statewide policy that guides the LGEs in implementing this. And again, this is another thing I need to check. But I'm fairly sure that emergency support to families would fall under the acceptable use of this funding and then it would be really on the LGEs to make clients aware of that. You know, make sure that that's a way that they're using that funding if that's requested by families.

LAUREN WOMACK: Right. I just know that's in the forefront of a lot of our minds with the planning. Yes, we know policies and things like that. Make sure families are aware. It might help their judgement to get to safety if they know they have the support they need to be able to. Thank you.

BAMBI POLOTZOLA: Christi.

CHRISTI GONZALES: Yes, in the Florida Parishes they used funds for laptops. Was that to replace one that might have been misused? Because the schools in that parish, do the schools give them out to the students or was that a personal laptop use for a communicative device?

DANA FOSTER: I did not follow up with them about what specific purpose the laptops were for but I can. And then again, I can get the information to clarify that and share that with Brenton who can share it with y'all.

CHRISTI GONZALES: I'm just asking because if it's something the child is destroying then something needs to be done about limiting time, you know, or something like that if they keep doing it over and over. So it was just a thought.

BRENTON ANDRUS: Just another thing. The title of this report is misleading because it says child adolescence but with consumer care resources adults can utilize that as well. So I have sent over an updated version of this report that will change that title under OBH for them to start using. Because while flexible family funds are for children and adolescence, the consumer care resources are not so those laptops

could have been for someone that may need something. Not necessarily school.

BAMBI POLOTZOLA: So what should be the title?

BRENTON ANDRUS: It's going to be the consumer care resources and flexible family fund programs. Just what they are. We're just not going to say child adolescent. And we're also not going to say adult under the supported living. We're just going to call it by the name of their program so we can eliminate that confusion.

BAMBI POLOTZOLA: So I've been believing for years--

BRENTON ANDRUS: That's why I'm changing it.

BAMBI POLOTZOLA: All these years, Brenton, I thought this was just for kids.

BRENTON ANDRUS: Positive changes over here.

BAMBI POLOTZOLA: So it's going to mirror our OCDD, the flexible family funds for both programs are for children and then the consumer care resources and behavioral health mirrors the individual and family support in OCDD.

BRENTON ANDRUS: Pretty much the same thing, just different departments, different eligibility.

DANA FOSTER: Any more questions about that?

BAMBI POLOTZOLA: I do have a question because regarding the consumer care resources I feel like people don't understand that process as much about how do people go about getting those resources, making those requests as familiar as many of us are with the individual and family support funds on the DD side. So I'm wondering if maybe in a future meeting if we can have either like you guys from OBH or even if there would be an LGE that would be willing to explain their process that might help us to understand how do the consumers go about accessing these funds.

KRISTIN SAVICKI: We could certainly make that ask. I think that just to be clear each LGE is going to have their own specific process and their own specific way that they are connecting these resources to the families in their area. So it would be most useful to hear directly from someone who's directly implementing the program and it will kind of be an example, right. If one LGE presents on their process it may not be the same in a different region. But if it would be useful

to have an example we certainly could ask one of the LGEs to come and speak to their process.

BAMBI POLOTZOLA: Yeah, I think that would be good. But just to be clear, like you said earlier, there are some requirements that they have to follow?

KRISTIN SAVICKI: Yep, absolutely.

BAMBI POLOTZOLA: So there will be that similarity of certain things that they have to do, right?

KRISTIN SAVICKI: Correct.

BAMBI POLOTZOLA: Any other questions about this end of the year report from OBH?

TONY PIONTEK: Yes. I see like high school graduation fees and all that. Is there some comparison from now until-- I know there's some kind of, how do I put it, not a falling part, but has it changed much from graduations and things like that where have y'all had those whatever your needs were are hopefully being met at some point? Was that percentage lower or maybe raised at some point?

KRISTIN SAVICKI: So I think the question is have the LGEs changed over time and how much they're paying to support high school graduation fees. Is that the question?

TONY PIONTEK: Yes.

KRISTIN SAVICKI: We don't have that specific data. Again, these are funds that LGEs implement based on requests from folks in their area. So it certainly may change based on this year they're getting certain requests. Maybe a high school has changed their fees and that has resulted in more families needing support but we don't collect the real specific details of every request and how that's changed over time.

TONY PIONTEK: I was wondering about that because that was in the discussion of course and I was just really curious to find out if someone else could help me out with that. But I know there's high and low with that and percentage of some of the years of being out of high school or learning through high school. Things of that nature. But thank you.

KRISTIN SAVICKI: And just as an encouragement, and I know this has been discussed at these meetings before, but a lot of these specific questions about how a particular region is using these funds are great questions to ask at regional meetings where you can

really talk to the regional leadership and talk to them about what they're doing. You know how they're assessing the needs in their particular region. How they're meeting the needs in their particular region. I think everyone at the council, you know, very much encourages folks to go to those regional meetings and ask those specific questions because you'll get a lot richer detail from the regional folks.

TONY PIONTEK: Right. Since I just had our 30th year reunion, which is just recent, and also the way I look at it too the ones that could not graduate, and I feel sorry for the ones that could not because I was a combination student and I still graduated but not with a real diploma. So this is why I'm sharing this because I made up my four years of high school. I was more than glad to have graduated but I'm still doing it online right now on my own. And that's very rare to have myself be the importance of education. I do give talks to my high school and other high schools here where I live.

BAMBI POLOTZOLA: Okay. If there's no other questions about the year-end report we'll move onto is it the first quarter?

DANA FOSTER: For the quarter one, similarly to how Tanya mentioned, when we asked for this information from the LGEs not all invoices had been submitted so you'll see some expenditure percents are kind of low. And I did reach out to those LGEs and they have shared with me that requests have since picked up for CCR and they expect to be on track or further on track by quarter two. You will note that North Louisiana Human Services District there's no data. They had a really bad virus wipe out their whole system and so they were unable to submit any information and we're hoping that they've gotten that resolved and they'll be able to send some stuff in and we'll catch up with them for quarter two. They'll send their information for quarter one and quarter two during quarter two.

For flexible family fund it seems like everybody is basically on track for this particular part of the fiscal year so there are no issues there.

And then supported living if we could just quickly go to that. So yearend supported living numbers looked really well, really good. Everybody was on track. You

see Metro had ninenine percent expended so no corrective action plan there. Everybody did really well in getting their percentages out, their funds expended. Any questions? No questions.

Can we do quarter one for fiscal year 25, supported living. You'll see Metro is a little low. I reached out to them and they shared that they've had some shifting in their funding and they're using a lot of the ARPA funds currently which is making their budgeted amount of money for supported living a little but they expect this to change moving forward in the other quarters. Capital Area, there's sort of a pattern with them. They don't expend money during the first quarter. They usually wait until the third and fourth quarter so we don't expect there to be any problems with that. That's typically their plan every fiscal year. Any questions?

BAMBI POLOTZOLA: So for South Central they basically have expended most of their funds. Is that normal?

DANA FOSTER: It's a little different this time. This is the most, I think since I've been complying this information, this is the most I've seen that they've expended at this point in the first quarter. So I think that's a little bit rare. And I will probably need to reach out to them and get a further explanation about what was different this time. I didn't, so I apologize for that.

BAMBI POLOTZOLA: The same question for Central Louisiana. They expended 100 percent. I think they gave the wrong-- it's saying it's through July.

DANA FOSTER: I'll reach out to them for clarity.

BRENTON ANDRUS: Unless they copied their FY24 data over to the FY25.

DANA FOSTER: I'll get some clarity from them on that. It may have just been an oversight.

BAMBI POLOTZOLA: Okay.

DANA FOSTER: And I'll share that with you, Brenton.

BRENTON ANDRUS: Thank you.

LAUREN WOMACK: CLHSD is the same data as the first quarter. Same exact budgeted, expended, balance so I guess they just...

BRENTON ANDRUS: Or they spent it. I don't know.

We'll find out.

BAMBI POLOTZOLA: Any other questions for Office of Behavioral Health?

LAUREN WOMACK: I have a quick question while we have everybody together. We were speaking at the bylaws committee about possibly changing some of the dates of the meetings to reflect easier reporting and I think it was a week later, did we say?

BRENTON ANDRUS: Push it a week or more later. You would have your meetings at the end of the months instead of mid-month.

LAUREN WOMACK: I guess what I was asking would this really make a difference in y'all's reporting one way or another, having the meetings a week later? If that would give us more accurate data for these meetings than it would for your department. I guess I just wanted to ask the other departments how they felt about it so we know objectively if it would or would not because if it wouldn't than we will just keep them the same.

KRISTIN SAVICKI: So I think the answer for OBH is going to be the same as for OCDD-- well, at least based on the LGE reporting because the LGEs can only report to us on a full month of data if we ask them for the report at least 15 days after the month ends. So that means we would need to ask them for their reporting at least 15 days after the end of the quarter and that would be a little tight for them. And then we need a little time internally to assemble the report. All that is to say I don't think changing the meeting by a week would probably give enough time for us to have the full, that full month of data. But I think Tanya often times has her finger on the pulse on this so I wanted to see if she was able to jump in and help think about timing.

HANNAH JENKINS: It would be around the 28th, 29th would be the meetings instead of the 16th, 17th.

KRISTIN SAVICKI: We may need to take that back and see if and talk to the LGEs around shifting that deadline and what deadline would allow them to submit a report to us that would have complete quarterly data. I'm not 100 percent sure what deadline would allow them to do that but we could take that back if we have time

to get that information.

LAUREN WOMACK: I don't think we do but thank you.

TANYA MURPHY: I wanted to share that for this quarter one information one of the LGEs said that although quarter one ends September 30th the invoices are not due to them until October 10th. So then they would need some time to make sure all that information is entered and then we could request it. So it would have to be, you know, this is the 16th so now would be about the time we would want to ask them to submit their information and then we would need additional time to compile the information and get it prepared for the meeting. So I guess you can use that information to maybe figure out when you think you might want to.

BRENTON ANDRUS: To add onto that you might get more accurate information than you're getting currently if you move your meetings but I still don't think you're going to capture that entire quarter. Because if they have until the 15th to process it if we're looking at the end of a month report, because it's not just what they have to do on their end, I have things that I have to do before if goes to you and you need it. Usually we try to get it to you a week before. So these reports aren't coming in yesterday and you're getting them today. There's a process.

LAUREN WOMACK: It probably doesn't make that much.

BRENTON ANDRUS: So if they have an additional, let's say, two weeks because you've moved your meeting two weeks to provide information it's possible you might get more accurate information than what you have been getting but I doubt you still capture the entire.

LAUREN WOMACK: And then if it's going to inconvenience the council members.

BRENTON ANDRUS: Yeah, I wouldn't worry about if you're wanting to move your meetings to the end of the month I wouldn't factor in this particular committee's reports into that decision. I think you would have to weigh what are some of the other reports of things that you might be getting in council meeting that might be helpful. Does it give more time for things that can occur leading up to each meeting that y'all need to be able to conduct business. But I don't know that it's going to, unless you move it to entirely the next month, I don't know that it's going to impact this

particular.

JULIE FOSTER HAGAN: Yeah, I think it would need to be a whole month.

LAUREN WOMACK: Thank you for everybody to answer that. I appreciate it.

BAMBI POLOTZOLA: Okay. Thank you, Dr. Foster and Dr. Savicki for your report. Flip the page to get the script Brenton wrote for me.

BRENTON ANDRUS: It's a guidance.

BAMBI POLOTZOLA: So now we're at announcements and public comments. Please note that after this meeting we will break for a lunch for an hour. Actually, until one, right?

BRENTON ANDRUS: Until one.

BAMBI POLOTZOLA: Then the self-determination and community inclusion committee will meet at one followed by education and employment committee at three. Those that have registered to participate virtually you should have the links to the meeting in your email. Does anyone on the committee have any other announcements to make? Do we have anyone on the public wishing to share a comment? So I hereby adjourn the meeting at 11:47. Thank you all for attending.