BAMBI POLOTZOLA: Good morning, everyone. Welcome to the Act 378 subcommittee of the Louisiana Developmental Disabilities Council. I should say the meeting of the Act 378 subcommittee. I think right now we will do our roll call, correct?


JILL EGLE: Here.

BRENTON ANDRUS: Ms. Hagan. Dr. McKee. Ms. Polotzola

BAMBI POLOTZOLA: Here.

BRENTON ANDRUS: Ms. Stewart.

BROOKE STEWART: Here.

BRENTON ANDRUS: Ms. Tarver. Mr. Taylor.

ERICK TAYLOR: Here.

BRENTON ANDRUS: And that is six. You have exactly a quorum.

BAMBI POLOTZOLA: Okay. Thank you. And now we have to go over the meeting protocols.

BRENTON ANDRUS: Read them out?

BAMBI POLOTZOLA: If you would, Brenton. Please.

BRENTON ANDRUS: Okay. So, council, committee members that are participating via Zoom you'll be considered present when you display a live feed video with your face and your first and last name. Have microphones muted unless called upon by the chairperson. Electronically raise your hand to request the chair to recognize you to speak. Once recognized the chair will ask you to unmute your microphone and then you will mute after you are done making your comments.

Guests can also participate via Zoom as well. You will electronically raise your hand to request to comment. Once you're recognized by the chair you will be unmuted for you to make your comments and muted afterwards. Any comments in the chat need to be relevant to the issues that are being discussed. We also are live streaming this on YouTube. Public comments of a person's character will not be heard. If the comment continues the chairperson may be instructed to end the meeting. Also, just as a formality of the way that comments will be taken. So committee
members that are in the room will be allowed to make comments first. Those that on are Zoom that are committee members will be allowed to make comments second. Then we will move to public that is here in-person in the room with us and public on Zoom. That's it.

BAMBI POLOTZOLA: Thank you, Brenton. Our next order of business is the approval of our October meeting summary. Those of you who are present have a hard copy. Those online it is located on the DD Council web page on the meeting page for 2023. So at the appropriate time if a member can make a motion to approve or if there's any changes.

BRENTON ANDRUS: You can do it by unanimous consent as long as no one objects.

BAMBI POLOTZOLA: I guess we'll open it up. Is there any corrections that need to be made?

BRENTON ANDRUS: Tanya has her hand raised.

BAMBI POLOTZOLA: Tanya.

TANYA MURPHY: I don't have an objection. I just wanted to make a comment that Julie's on her way and to find out if maybe we could switch OASS's presentation on the agenda with mine. So it doesn't have to do with the minutes that we're talking about right now.

BAMBI POLOTZOLA: Is there any objection to making that switch? Okay. Hearing no objections, we'll make that switch. Okay. So back to the approval of the minutes. Or I guess I haven't heard anyone say there needed to be any changes. So I guess is there any objections for approving the minutes? Hearing no objections, the minutes are approved.

Okay. So the next item of business will be our reports from the Office of Behavioral Health. Again, we have, they're in the packet or online. Accessible online. And Gena Lewis with the Office of Behavioral Health will be presenting that information.

GENA LEWIS: Good morning. Can you guys hear me?

BAMBI POLOTZOLA: Yes, ma'am.

GENA LEWIS: Great. Great. We're going to start with the CCR funds. And that's for children. We're in quarter two. And so what we're hoping to see, of course, or at least close to 50 percent expended. And, you know, the reports are due prior to the quarter being fully over. So some LGEs can't report December and sometimes they can't report November. But as you can see our LGEs are far along in spending. There are a couple that may be under 50
percent. We have asked for them to give us a plan on how they're going to spend those funds.

We reached out to them and we got more information about how they're going to do it. We feel comfortable they're going to be able to expend those funds. As you know Capital Area always uses their mental health block grant funds first. And most years they spend by the timeline so there's no differences there historically. And then Acadiana Human Services District have plans to use the remaining money to pay for their camps which they do quite often. So we see that as a solid plan. And for Florida Parishes they have not yet gotten their last two months of invoices. But once we get those we feel like we'll be on track.

Brenda, can you change to the FFF funds, please? Okay. I see those. Thank you. Thank you. And so for Flexible Family Funds, you know, this is the cash subsidy that we give families. And the task that we give administratively to LGEs is that they are putting all the families in the slots that are available. So for right now we're on track with that. There are two LGEs that don't have all their slots currently filled. But they both report to us that they are working through their waiting list to update the packets to move the families in accordingly. So and I want to note that as of January the 1st (inaudible) reports August slots are filled. Which is a great report. And the NE is doing fine as well. Now if there are any empty slots it's mainly because they're waiting on families to respond. It takes some time to transition some families into the filled slots. So again, we're on track with that as well.

BAMBI POLOTZOLA: Gena, if you can, tell us what is the eligibility for children to receive either the CCR and the Flexible Family Funds.

GENA LEWIS: I'm sorry. Can you repeat your question.

BAMBI POLOTZOLA: What is the eligibility for these two programs through the Office of Behavioral Health for children. So the Consumer Care Resources and the Flexible Family Funds, what's the requirement for children to be eligible. I just want to point out, cause it can be confusing, this is for behavioral health, through the Office of Behavioral Health.

GENA LEWIS: Right. So CCR funds can be requested by any family in need. And the request can be honored except
for requests such as things for removable objects. But they can help with short-term funding. You know, for uniforms or maybe even to pay a light bill. For FFF it requires just an application to the LGE and you have to turn in certain paperwork to determine if you're qualified. And if there's slots available then you're placed either in a slot or on a waiting list.

BAMBI POLOTZOLA: But what are the qualifications?
GENA LEWIS: But I can have Dana or Kristen give you guys more information at the next meeting.

BAMBI POLOTZOLA: What are the qualifications?
GENA LEWIS: For CCR or for FFF?

BAMBI POLOTZOLA: Well, I guess I thought they were the same. Are they different?

GENA LEWIS: Yes. They're different programs.

BAMBI POLOTZOLA: But I'm saying like what makes a child, like how do you determine that a child-- I assume they have to have a behavioral health need, right, in order to qualify? There's some behavioral health determination.

GENA LEWIS: Yes. They need to be involved in either, need to be involved with a mental agency, with the agency or have a mental health concern. I'm sorry. Who's asking the questions? Maybe I can direct it to the right person to get you the answer.

BAMBI POLOTZOLA: This is Bambi. I'm sorry. This is Bambi Polotzola.

GENA LEWIS: Okay, Bambi. I can have Kristen or Dana email you with that information and you can get the information back to the council. But I can tell you that they're not the same pots of money, if that's the question.

BAMBI POLOTZOLA: No. It's not about the pots of money. It's so people know what's the eligibility. So if we have families who reach out to us and say they have a need and they have a child with a behavioral health need then we can know that potentially these two programs might be a resource for these families.

GENA LEWIS: And you're right. They are. Both programs are resources for families with mental health needs for children.

BAMBI POLOTZOLA: Okay. So I guess we just need to know what are those qualifications. And you can get that back to Brenton and Brenton can get it back to our committee.

GENA LEWIS: So Bambi, there's no qualification for CCR
except the child has a mental health need and is being served. For FFF, as I said, there's an application that needs to be completed with some paperwork that needs to be turned in to see if the child qualifies. I can have Kristen and Dana send you the exact qualifications for FFF.

BAMBI POLOTZOLA: Okay. Thank you. Any other questions about this report? We have one question. Jill.

JILL EGLE: In terms of behavioral health, is that coming from the government? Where does that funding come from, the federal government?

GENA LEWIS: No. These are state general funds.

JILL EGLE: Oh, for the legislative, state?

GENA LEWIS: Yes.

JILL EGLE: Louisiana.

GENA LEWIS: Yes.

JILL EGLE: Okay.

BAMBI POLOTZOLA: Any other questions?

SPEAKER: Ms. (inaudible) has a comment in the chat. She says for FFF a child needs to have an exceptionality of emotional disturbance and meet the severity criteria.

BAMBI POLOTZOLA: Okay. Thank you. I don't see any other questions on this.

GENA LEWIS: Okay. Do we want to go to the adult section now?

BAMBI POLOTZOLA: Yes, ma'am.

GENA LEWIS: Okay. So for the adults we look for the LGEs to be close to 50 percent expended. And currently we're all on track for those LGEs to expend all their funds. Capital Area has a plan that we've talked to them about to expend by the end of the year as they use different funding, sources for the beginning of the year and then they use these funds. And then for Central we have an estimation of what the invoice might be for December. We've been waiting for follow-up from persons with DOA to get the exact numbers. But we can say we reached out to them about any barriers, and they tell us that they expect to expend the funds. Any questions about that?

BAMBI POLOTZOLA: Ms. Nicole Banks.

NICOLE BANKS: What is VOA?

GENA LEWIS: The Volunteers of America.

NICOLE BANKS: Okay. The only reason why I ask because they have a lot of new people that's on the council and that's here in-person that don't know all the accolades and, you know, abbreviations that everything that we use
that we're used to. So I just ask that everybody can, you know, just say the whole agency out so everybody know exactly who you're talking about. That's all.

GENA LEWIS: Sure.
NICOLE BANKS: Thank you.
GENA LEWIS: Thank you.
NICOLE BANKS: Oh, and another question. Okay. Up on the CLHDS, that one. I know they're significantly under. They're the ones that only have 16 percent. You say you guys were waiting up on--

GENA LEWIS: Right. That's the Central Louisiana Human Services District and they tell us that actually expenditures are really higher than what it appears to be. And once they get the invoices they can confirm that for us.

NICOLE BANKS: So it's going to go from 16 all the way up to 50 percent?
GENA LEWIS: Yes, ma'am. That's what we've been told. And we have not had a concern that they haven't met their deliverables previously so.

NICOLE BANKS: I know they have, but it has never been this dramatic difference in the amount of, you know, by this part of the quarter. They had more spent, you know, in the past. So this particular year it wasn't something that happened, or did they lose staff, or was it something in that area that happened why they're so far behind this year in compared to last year? Cause last year I think they were like (inaudible).5 percent or something like that or closer to where they are now.

GENA LEWIS: Yes. I don't have any specifics on that, but I can take that back to Kristen and Dana and let them know about your concern.

NICOLE BANKS: Okay. Just maybe we can help them out or, you know, they reached kind of a stumbling block or something we can, you know, help them get back on track.

GENA LEWIS: Yes.
BAMBI POLOTZOLA: Any other questions?
ERICK TAYLOR: I have a question. This is for the council. This is like people on the council.

BAMBI POLOTZOLA: It's behavioral health so people who need behavioral health services.

ERICK TAYLOR: This is a question she might can’t answer. Is it true Medicaid is trying to fix it where the counselors have to have a license to be counseling to be
in the homes of counseling? Kind of being that counselors can't, if they not licensed or have they degrees they can't, they cannot, they have to swap out one day a licensed counselor have to come in behind them?

GENA LEWIS: You know, I can't speak for any Medicaid issues. I'm not with the Office of Medicaid. I'm sorry.

ERICK TAYLOR: Okay. I'm just asking, is there anybody on the board with Medicaid?

BAMBI POLOTZOLA: Not on this one. This is particularly the behavioral health services that are at our human services districts that are in each region. So these are services that they provide. This is some funding for them to provide services for people who have behavioral health need. So what you're talking about it is for the similar population, but it's paid for through Medicaid. So it's different in that way.

ERICK TAYLOR: Well, but is somebody going to speak about it?

BAMBI POLOTZOLA: We'll have somebody from Medicaid tomorrow, right?

AMY DEAVILLE: Yes. We will have somebody from Medicaid tomorrow.

ERICK TAYLOR: Okay. Thank you.


MYLINDA ELLIOT: This isn't about the report. This is about what the man said just before a few seconds ago. I've heard the same thing. So he's not the only one. Thank you.

BAMBI POLOTZOLA: Yeah. We'll have to ask. Who's our representative from Medicaid?

AMY DEAVILLE: It's switching again.

BAMBI POLOTZOLA: Okay. We'll have a representative from Medicaid. I know I've heard in session there's discussions about the qualifications for those people who provide the in-home counseling and that type of thing. But I'm drawing a blank on if any laws have changed.

ERICK TAYLOR: My concern about it is once you're comfortable talking to somebody about your issues or whatever, then you feel like that you have a licensed counselor and then you find out that the counselor is not licensed then you got to start all over. Should be put on the table front before they say okay, we're sending a counselor, but then you're not telling the back story that
counselor is over somebody and they're just putting them in the front and you're believing that you have one, but actually you don't have the qualification of doing what you're really supposed to be doing.

BAMBI POLOTZOLA: That's an important point. So just tomorrow let's remember to ask that question. Thank you. Any other questions for OBH? Office of Behavioral Health. Okay. Thank you, Ms. Lewis.

GENA LEWIS: Thank you.

BAMBI POLOTZOLA: So next we agreed to change the agenda to go with the Office of Aging and Adult Services which is presented by the Arc of Louisiana and Kelly Monroe will be making that presentation. That information is in the packet and online on the DD Council's website.

KELLY MONROE: Okay. So we had a couple changes this quarter. We had another individual join the State Personal Assistance program. So you'll notice there's going to be a few changes below. So this quarter there were 42 individuals who were served. Of those individuals 14 of them were African American and 27 were Caucasian and one was Hispanic. And of those 28 of those were male which is where the extra person came from. And 14 of those were females. So they had some people move around so the next page is going to look a little different. We're in region one. There was four. Region two there's now ten people instead of nine. And region three there's three. And region four there's now zero where there was one last time. Region five there was four. Region six there were two people served. And region seven there are ten. And region eight they're one. And then region nine there was an additional person added so there's eight.

If we turn the page, we can see where the services were provided. All 42 people received support coordination. Thirty-seven of those individuals received personal care assistance. And three were rental assistance. And one received medical supplies and equipment. So total of expenditures was $192,126.41 in personal care which was the largest amount. 15,012.45 in rental assistance. And then 4,848.77 in medical supplies and equipment. So the total for the month was-- I mean, for the quarter was $198,487.63. So that's like a little over $46,000 increase from the last quarter. Which is really just a timing issue. It's really normal for that to happen.

So and the waiting list we also had lots of changes.
The biggest changes were in region two, three, and four. It doesn't look cause we had 65 before, now we have 66 people. It looks like there wasn't many changes, but there were. There were five changes on there. Quite a few people had passed away and then one person started receiving CCW so no longer needed the services. And then there were five others added to it so that's where they came from. But the majority of the people still are in region nine and four and one. So does anybody have any questions so far? I'm just like running my mouth.

And then the demographics are following on the next page. There were 31 males and 35 females on the waiting list and of those 28 are African American, 23 are Caucasian, one Hispanic, one is Cajun--Caucasian and Asian. And then 13 people were unknown because some people don't fill it out until we actually like serve them. Some people choose not to fill out some of the information. So that would be why it's kind of not adding up. But if we wanted to serve all 66 of these people on the waiting list it would cost roughly $1.4 million.

BAMBI POLOTZOLA: So Kelly, can you briefly, since we have so many new people, tell people what SPAs is, like your elevator speech about it.

KELLY MONROE: Okay. Yeah. So State Personal Assistance Program is something that passed I think it was probably about (inaudible) years ago. It's been a really long time. It was originally created for individuals who were going to work to receive these services. They had two. There was one called Community and Family Supports Program and one called the State Personal Assistance Program. About six years ago we decided to take the best of both worlds and make it just one. And so they created, they took the Community and Family Supports, the good things about that one and the good things about State Personal Assistance and they made it the State Personal Assistance Program. It still is and encourages people to go to work and really supports those individuals in going to work. One of the main things that you'll notice is that the income is much, much higher. It's 650 over poverty level is what you can make and still receive the State Personal Assistance Program.

BAMBI POLOTZOLA: 650 percent over poverty level?

KELLY MONROE: Yeah. In my opinion, it is the best of all the programs, even the waivers, because you can receive
all the same things that you can receive in the waiver and it really encourages people to go to work. So not to say that waivers don't encourage people to go to work, but you can work full time and you can make a real living and raise a family and receive these services. Where you have to be very careful if you're receiving a waiver and not be able to earn over a certain amount of money. And for a family of one you can earn 62,000, I think, a year which is pretty significant. You can't do that in the waivers. Anyways, it's my favorite. But unfortunately it only has enough money to serve these 42 people and not many so the majority of the people who are on this contract are either working or have retired from work and can't get CCW or something like that because of their retirement.

BAMBI POLOTZOLA: So the question that leads to if people who are getting SPAS, the State Personal Assistant Program, they would, if they can get and qualify for other Medicaid waivers like Community Choice Waiver or NOW waiver or something like that they'll get that and this is to open up for people who qualify?

KELLY MONROE: Yeah. Well, we really try to encourage everybody who can qualify for a waiver to apply for it mainly because these are state general funds and they're not as safe as the waiver programs. The waiver programs are always safer. And so we do encourage people to apply for those. And they can receive more hours. The money's a lot more. You know, but if you're working and you're working full time, this might be your better option.

BAMBI POLOTZOLA: So there are some people who have the same disability, but because they make more money they wouldn't qualify for the waivers. But this, they can qualify.

KELLY MONROE: Right. And some of the people who are working on these jobs like one guy runs the IT department at Blue Cross. And then like one guy does like all the mapping for Louisiana. So these are jobs that are pretty significant and would never be able to qualify for a waiver. But yet if they don't have somebody there to help get them dressed and help get them ready for work. And majority of the people who are served on here are quadriplegics as well who receive total care.

BAMBI POLOTZOLA: Julie.

JULIE FOLSE: Hi. Can y'all hear me?

BAMBI POLOTZOLA: Yes, ma'am.
JULIE FOLSE: I just wanted to speak, I'm one of the families in region three that's receiving SPAS. It's my stepdad. And the quality of life for our family has dramatically improved. He now has somebody come in-- he had a stroke 11 years ago, is bed bound, can't take care of himself. This man that worked for 30 years, longer than 30 years, but hunting, fishing, all these things and because of his retirement and things like that he didn't qualify for any other service. And now because of SPAS we have somebody that comes into the home. My mom is his primary caretaker, so she has somebody that comes in and gives her a break. And for the first time in 15 years I was able to take her out for her birthday on Monday. So just want to say what a valuable program SPAS is. I wish we could fully fund it and get more money for it. And I wish it was up and running because it is truly a God send for our family. So that's all I wanted to say. I just wanted to speak on how wonderful SPAS was.

BAMBI POLOTZOLA: Thanks, Julie. Mr. Taylor.

ERICK TAYLOR: The SPAS program, is it more flexible as the waiver is?

KELLY MONROE: It's more flexible than the waiver because it doesn't have those same requirements. So a lot of-- and it's fully self-directed. So you have to be able to self-direct in the program, but it doesn't require probably about 80 percent of what the waivers require families to do.

ERICK TAYLOR: Is it, do they get-- this is the problem with the waiver program. Do they get paid better than the waiver?

KELLY MONROE: No. They don't.

ERICK TAYLOR: Workers does because the better workers get paid, the better their performance out the worker.

KELLY MONROE: Yeah. Unfortunately it's still a state run program. The funding is just not, you know, it's a very small program and the funding is not great. So no, it's actually a lot less than what the waivers offer. But the requirements are different and that's how we kind of justify with the providers is that I want to say with OCDD you get 18-dollars an hour for the NOW waiver and for SPAS you're getting like 14.50 or 15. It's a lot less, but the requirements are a lot less too.

ERICK TAYLOR: The government's eating majority of the money and the workers get the crumbs, right.
KELLY MONROE: I have no idea. I don't know what they-- I have no idea what they're doing.

BAMBI POLOTZOLA: So do the workers get the 14-dollars? Like there's not a middle-- like right here it says.

KELLY MONROE: Some people choose a provider even though there's self-direct. When you self-direct you can choose the self-direct fully or you can choose to work with an agency. So some people are going through agencies and some people are not fully self-directing.

ERICK TAYLOR: Because scared to self-direct (inaudible).

KELLY MONROE: Well, you really don't. We do all of the taxes, we do all of the quarterly. Like when they become the employer we act as their accountant. We have an accountant that we hire to do all those things. So we do all their quarterly taxes, all their payroll taxes, everything else. So no, they really don't have to, but sometimes it's hard for them to find people themselves and then they can't find backups. That's where the biggest problem comes when you self-direct is if Joe doesn't show up, you know, who's coming and is somebody coming, you know. Where if you're with a provider, that's the provider's business has to figure that out, you know.

BROOKE STEWART: I had one question.

BAMBI POLOTZOLA: Say your name.

BROOKE STEWART: My name is Brooke Stewart, and my question was what is the typical waiting time like for them to be on the waiting list. I know you have 65 people so I just wonder how long are they on the waiting list before they receive services.

KELLY MONROE: Yeah. So unfortunately the people who are on this contract usually never want to get off so unless they pass away you usually don't have a spot. Or if by some chance they get a CCW some of them will move on if they don't need both. But so I would say about a year and a half to two years.

BAMBI POLOTZOLA: And what is the disability requirement to get SPAS?

KELLY MONROE: It just has to be a significant disability and they have like a little thing, like a little scoring sheet. I don't have it with me though. I'm sorry. I can bring it though, next time.

BAMBI POLOTZOLA: And is that any age?

KELLY MONROE: Oh, you have to be 18 or older. Your
disability could have acquired when you were younger, but you have to be 18 or older to receive it.

BAMBI POLOTZOLA: Okay. And so if somebody who is let's just say-- those are the people.

KELLY MONROE: Those are the people.

SPEAKER: Okay. Not what the requirements are.

BAMBI POLOTZOLA: So if somebody retires when they're 65 they don't, you know, then they have a disability that would make them like disability eligible for say the Community Choice Waiver, but because of their income they can't get the Community Choice Waiver. Could they get on the waiting list for this?

KELLY MONROE: Yep.

BAMBI POLOTZOLA: Okay.

KELLY MONROE: Yep.

BAMBI POLOTZOLA: Any other questions?

EBONY HAVEN: I'm Ebony Haven. The waiting list, is it prioritized or is it first come, first serve?

KELLY MONROE: It is not prioritized at this time, but we have been kind of like talking about prioritizing it. But maybe not in the sense that you might be thinking. You know, there's been talk about prioritizing the people who are working to be in front of the ones who are not currently working since that was the original intent was to really support people to be able to go to work. But we have not made any changes yet. So right now it's just like first come, first serve.

BAMBI POLOTZOLA: Any other questions regarding the State Personal Assistance Program?

SPEAKER: No questions in the chat.

BAMBI POLOTZOLA: Okay. Thank you, Kelly.

KELLY MONROE: Welcome.

BAMBI POLOTZOLA: Okay. So the next item on our agenda is the Office for Citizens with Developmental Disabilities report. They're in the packet as well as online. And Tanya Murphy and Julie Hagan will present that information.

JULIE FOSTER HAGAN: Take it away, Tanya.

TANYA MURPHY: Okay. Good morning, everybody. I thought that I would just go ahead and describe the programs first since you guys were asking everybody to describe it so maybe that way the context of the report can have a little bit more meaning for people who maybe don't know what these are. For the Individual and Family Support Program is funded by state general funds. Each of the ten local
governing entities or LGEs across the state get a certain amount of money for state general funds every fiscal year. And then they appropriate or budget at a minimum 9 percent of their state general funds towards these two programs that I'm about to talk about, Individual and Family Support and Flexible Family Fund. So in order to be eligible to get IFS or Individual and Family Support a person needs to have a statement of approval from OCDD which means they've gone through the system entry process and been made determined to be eligible to get our services. So they have a developmental disability. Which means that they have a diagnosed condition of something recognized as a developmental disability or an intellectual disability. And then they have substantial functional limitations in three areas of life. If they have a statement of approval, then they would be eligible to ask for some help from the IFS program. Every request is prioritized and funded based on the priority level of the request itself.

So you can see that each of these columns is broken out by each of the 10 LGEs. And each column talks about like their initial budget, how much money they've put towards the program. They have the two columns budgeted at the LGE and budgeted through LFS LCS. These are just different funding sources. You can see that one, two, three, four, five of the 10 LGEs have a certain amount of money that they pay out to families directly from the LGE. And then there's several of the LGEs that use, it's called Louisiana Family Services and they are just like a funding source that they funnel the money through and the checks are cut through them. But the program stays the same regardless of where the money is paid out through.

Then the next column is budget changes. So if they add money to it or take money away from it that's the column where we put it in throughout the fiscal year, the total current budget that they're working with. And then each meeting here we talk about how much money they've expended up to this point. And I know that we've mentioned it before and will continue to mention these reports for the DD Council are compiled prior to the second quarter actually ending. So while you would expect the second quarter to have a percentage at 50 percent, there's like Capital Area is at 51 percent, but generally they don't actually reach that 50 percent until they have all the invoices from in this case December.
And then the next column, you know, the percentage spent, and then total obligated, and then the balance of money left and the cumulative number of people that they've served so far. It's a lot of information to look at. But does anybody have any questions about the individual and family support program or this report specifically?

BAMBI POLOTZOLA: Jill.

JILL EGLE: Yes, where do y'all get this funding from? Is this the state? The budget that's coming at the end of this month.

TANYA MURPHY: Yes.

JILL EGLE: Is it Louisiana state budget that the programs the OCDD gets from?

TANYA MURPHY: Yes. The state general fund budget.

JILL EGLE: So once it's allocated and passed then you guys have, everything is good for all the programs?

TANYA MURPHY: Well, I've seen in past years that if the state has some issues sometimes they will have to adjust the amount of money that's been sent out. But in general yeah, that's the amount of money they have is what they have for each fiscal year.

JILL EGLE: Okay.

BAMBI POLOTZOLA: Nicole.

NICOLE BANKS: Okay. I'm Nicole Banks. I had a question because I see on all of the things that we're waiting on invoices. So let me ask the question. Are they invoicing on like a 30 type of thing, or a monthly type thing or a quarterly type thing?

TANYA MURPHY: The invoices are sent in on a monthly basis. So this report is for the months of October, November, December. And so all of the December invoices wouldn't actually be due to the LGEs until the middle of January.

NICOLE BANKS: So like it just passed where they should have like got the invoices paid up and it's probably like a couple days ago.

TANYA MURPHY: Right. Right.

NICOLE BANKS: But, of course, it wouldn't be up on our report--

TANYA MURPHY: We gathered this information and sent it into the DD Council a couple weeks ago.

NICOLE BANKS: Okay. Well, that's what I wanted to know cause I was trying to clear up like okay, every single person they're waiting on an invoice or they're waiting on
an invoice. Okay, what's going on with the invoices. That's just why I asked. So basically they have until the middle of the next month to pay the invoice or last month.

TANYA MURPHY: Right. It's just a timing issue as far as when the DD Council meets and when the reports are due and when our actual invoices come in.

NICOLE BANKS: Okay. All right. Thank you.

TANYA MURPHY: Uh-huh.

BAMBI POLOTZOLA: Any other questions about the individual and family support funds? Not seeing any. Tanya.

TANYA MURPHY: Okay. We can move onto the flexible family funds part of the report then. So this is similar to what Gena Lewis was talking about on the Office of Behavioral Health side. For the Office of Behavioral Health they serve children with emotional disturbance exceptionality with their school. And with Office for Citizens with Developmental Disabilities we serve children with several other exceptionality listed as far as developmental disabilities. So in order to qualify for Flexible Family Fund you would have to have a qualified exceptionality from the school or a report from a licensed health professional that says that the child's condition conforms to what that exceptionality is. And if they have that then we also do a severity screening to make sure that they not only have that condition, but it's also severe. We only serve children with severe disabilities in the Flexible Family Fund Program.

If a family receives flexible family fund or if their child meets the criteria then the family gets 258-dollars per month. It comes out to like 3,096-dollars per year as long as their child continues to be eligible and until they turn 18. So this program's only for children. And this one's a lot easier to predict as far as expended. We don't necessarily have to wait for invoices because the 258 a month just goes out there. And so that's why you see in the expended year to date column almost all the LGEs are right at fifty percent as you will anticipate they would be on the second quarter.

It looks like Northwest Louisiana Human Services District is at 49 percent, but that's because they have some slots that have not been filled. They're working towards filling those. Everybody else is right on track. Any questions about Flexible Family Fund?
ERICK TAYLOR: Yes, ma'am. This is Erick Taylor. My question is the flexible fund does not mess with the disability of the child, correct?

BAMBI POLOTZOLA: Are you referring to their social security?

ERICK TAYLOR: Yes.

TANYA MURPHY: My understanding is it's not considered income. It's considered a cost reimbursement. In other words, we understand the extraordinary cost of having a child in the home with severe disability and so we are not just handing people 258-dollars. We are reimbursing them 258 that we know they're going to spend every month anyway. And so I don't think they have to report it as income.

BAMBI POLOTZOLA: Any other questions? Oh, Ashley.

ASHLEY MCREYNOLDS: Is there still an income determination date if the individual receives a waiver?

TANYA MURPHY: No. We got rid of that. We had it in there for a few years. There was only a few families that were affected by that and it was just creating way more paperwork and asking for tax documents from families than it was really worth so we got rid of that.

ASHLEY MCREYNOLDS: Okay. Thanks.

BAMBI POLOTZOLA: Any other questions about the OCDD Flexible Family Funds?

NICOLE BANKS: I have one more question.

BAMBI POLOTZOLA: Nicole.

NICOLE BANKS: How would you, like a person has this or they can meet this with their child, how would they go about applying for these funds?

TANYA MURPHY: Okay. So you would call the local governing entity or whichever of these Metropolitan Human Services District or Capital Area, whichever one is where you live and ask for a Flexible Family Fund application. And then the application is going to say right on there what they need. And you would turn the application in along with a copy of your IEP. Then the LGE will let you know if you're on the waiting list. And then once they reach the child's name on the waiting list then they'll contact the family and complete the rest of it which is the severity screening.

NICOLE BANKS: So do people with 504 plans qualify? Because I heard you just say IEP.

TANYA MURPHY: Yeah. Children with the 504 don't generally meet the severity criteria. But if a child has
504 and they also can find a licensed health professional that says that even though the school hasn't given them that exceptionality, the licensed professional says the condition should be in that then we might consider. But generally a child with a 504 is not going to meet the criteria to even get on the waiting list.

BAMBI POLOTZOLA: Ashley McReynolds.

ASHLEY MCREYNOLDS: And this may not be for you Tanya, but I know we worked on going through the qualifications. We made some changes for individuals that were maybe homeschooled. On the OBH side for CCR and the Flexible Family Fund I noticed it was very specific on the IEP it had to be an emotional disturbance. Is the same like option given to that side? So if the family like doesn't have their child in school but has a diagnosis, you know, of like bipolar or something like that, would they be, you know, eligible or do you have to have an IEP with that specific classification?

TANYA MURPHY: I'm pretty sure that when we changed the manual, we had OBH, OCDD and the DD Council all of us together. And so I think that with OBH that they do allow licensed health professionals a say, but I'm not 100 percent sure about that and I don't want to speak for OBH.

ASHLEY MCREYNOLDS: Okay. Thanks.

BAMBI POLOTZOLA: Any other questions about the Flexible Family Funds? Tanya, just to go back to what Nicole said I think typically when a family contacts the human service district or authority in their region and they say they have a child with, you know, they believe their child has a developmental disability, isn't it typical for them to be screened for the waiver as well as the Flexible Family Funds? Wouldn't the staff there make them aware of both programs?

TANYA MURPHY: Oh, yeah. When somebody comes through system entry initially just to get their original statement of approval, yeah. The staff generally says yeah, you probably meet criteria for Flexible Family Funds so let's get you signed up right now.

BAMBI POLOTZOLA: So I'm just wondering how often-- I mean, if someone's calling as Nicole said, calling about the Flexible Family Funds, they would be calling about doing the screening for waiver.

TANYA MURPHY: Well, you would think so, but we have a lot of families that literally say no, I don't want to
do all that other. I just want the Flexible Family Fund. It's not an absolute requirement that a child has a statement of approval to get the Flexible Family Fund. So we do have families that say no, I don't want anything else. I just want the Flexible Family Funds. And so they just do an application for FFF.

BAMBI POLOTZOLA: And if they do that then let's just say then they have a need that comes up and, you know, I know sometimes if someone has an emergent need let's say mom goes in and has surgery, so they need some help for a few months. Like then like the human service district could then review that case for the individual on the IFS funds, the Individual and Family Support Funds.

TANYA MURPHY: Well, they would have to complete the system entry and get the statement of approval first.

BAMBI POLOTZOLA: Okay.

TANYA MURPHY: So we always encourage people who are getting Flexible Family Fund please go ahead and do system entry. At least get the SOA so that if something like that happens we're ready to help immediately. But there are families that don't. And in that case we wouldn't be able to help them immediately with IFS funds. They would have to go through system entry and complete that process first.

BAMBI POLOTZOLA: And I find that to be important whenever we've done like working with disasters when we find families who have a person with a developmental disability they're not in the system. If they're in the system, OCDD or the local, the human service district and authority usually very quick to get that family what they need if they have that statement of approval. So, you know, families sometimes think oh, we have it all together. We have it covered. We don't want to deal with it. But like that's really helpful if you have some type of disaster or some type of emergency in the family to have that statement of approval, they can get the supports like really quickly. That makes a big difference.

NICOLE BANKS: So let's say like a person don't know about that and they're just finding out about that, would they go like be able to apply like retro or they just have to apply for where they're at and then move forward like that?

BAMBI POLOTZOLA: Yeah. There's no retro services.

NICOLE BANKS: Okay.

BAMBI POLOTZOLA: But it just takes longer. You got
to go through that whole process of being approved.

JULIE FOSTER HATAN: This is Julie. So just for folks information, we're kind of watching right now for trends. But typically before this year we had about 100 to 125 people per month throughout the state that were becoming eligible for OCDD. In the last three months of the quarter that jumped up to like 200 or 250 people who became eligible. We're not even quite sure why or how. What happened to see that substantial of an increase of newly eligible folks. Because we haven't had any specific outreach. So we're watching that to see, but it does seem as if somehow the word is getting out to more people because we have a lot more folks who are becoming eligible in the system.

BAMBI POLOTZOLA: Is it regionally based or is it just across the board?

JULIE FOSTER HAGAN: That's statewide. So those numbers are statewide.

BAMBI POLOTZOLA: But I'm saying like could you pinpoint it and say.

JULIE FOSTER HAGAN: We were trying to see if it continued. Cause it was just October, November, December.

BAMBI POLOTZOLA: Libby.

LIBBY: What services are covered under the IFS?

TANYA MURPHY: That's a great question. We don't tell families here's a menu of things you can have, pick something. We meet with the family and say what is it that you need. The whole focus of individual family support is to help the child or family member or individual remain living in the community and not have to be institutionalized. So with that broad of a mission or a goal it leaves it really wide open. And not only are the IFS funds there to prevent somebody from going into an institutional setting, but also to improve their daily life. So it's so wide open I can't even tell you. But I will say that in general people use it for personal care attendant services, respite, home modifications, equipment and different things that improve a person's life or help them live more independently. We have, it's a program where we do a contract with the family or an agreement with the family for a specific amount of money and then the family can have the work done by somebody that they choose. So we give-- the family sends an invoice to us, we send them the money and they're able to pay whoever
provided the service.

JULIE FOSTER HAGAN: And similar to what Kelly mentioned about SPAS, because this is state general fund and not waiver, then we're allowed to do things with the funding that wouldn't typically be covered in waivers. Or wouldn't be considered Medicaid. CMS has requirements about what Medicaid can cover and what Medicaid can't cover so that's what allows it to be opened up more.

BAMBI POLOTZOLA: And so each human service district or authority they go through a review of the applications they receive for individual and family support. So if all of us were in a certain region and we all applied they would look at it and prioritize it and see how much money they have and what they can fund. That's how that works. So another would be that you didn't mention Tanya, would be like safety. Like I know a family who had like a small child with autism with a bayou not far from their home, so they needed a fence. So like that's a real issue when it's a leading cause of death in kids. So like those type of things, they'll look at those type of things. Not just quality of life, but safety. So they'll prioritize it in that type of way.

KELLY MONROE: Those are a little bit harder to get to because they then add to the value of the home. So those are harder to get. You have to get real good documentation for that.

BAMBI POLOTZOLA: And it depends on how much money that human service district-- it's not always the same every year depending on the needs of people and their budget. It's good to let families know that's available.

SPEAKER: I have another question. Like so for me and my situation we live in a rental house and I'm having difficulty getting her up five or six stairs inside the house. How does that work?

JULIE FOSTER HAGAN: In terms of making the modifications, yeah.

SPEAKER: And then like I would hate to use the service, but we kind of need it now. You know what I mean. Like what if we needed it if I decided to buy a house or something like that.

JULIE FOSTER HAGAN: And Tanya can give probably a better definition than I can, but we actually do have also within OCDD we have a resource center that has (inaudible) professionals. So I know we have sent that team in because
while it's a rental there may be things that you have to make sure can detach and go with you and it's not changing the structure. And they can make some recommendations about types of equipment that will allow that to happen verses things-- because we do, even in a home, like Kelly said, you have to be careful about, it can't-- sometimes you have to be careful about the modifications that you make even if it's your own home and it's going to increase the value that's--

KELLY MONROE: Like you can put removable rails, but to put one of those chairs that electronically go up that would be probably a no go because that would, you're making a permanent accommodation to that place that you don't own.

SPEAKER: But I just hate--

TANYA MURPHY: We would typically not do that to a rental. But I have seen where somebody has been living in a rental home for years and years and years and the landlord has said I'm okay with you guys making that change. It's pretty rare. But there's possibilities. But like Julie was saying, there's other ideas and things you can do to help now that you can actually take with you where you go.

BAMBI POLOTZOLA: And so they should talk to their support coordinator or the human service district and like anything else make the case and see what can be done. Because that's a real issue if you can't bring the person into the home. Like they need help so they need to come up with a solution.

KELLY MONROE: They have those ramps now that kind of like fold up. They're like metal ramps that you can fold them up now and so you don't need those big wooden ramps. So if they rent you don't want to put a wooden ramp because they won't be able to take it with them, but they can take the other one. It's just all how you justify it and write it up.

BAMBI POLOTZOLA: Any other questions for Individual and Family Support?

ERICK TAYLOR: I don't have a question. This is Erick Taylor. But I know when my child, bless her heart, when we had issues with rental homes the doctor stepped in and gave her a report what needed to be done in a script. And if it couldn't be done basically we had to find a place that was safe for her that she had to stay in. That's when our worker stepped in and said okay, we need to find a place that's safe and qualified for her to live in.
Again, a lot of people that got rental homes they take advantage of the state fixing stuff and then they go up on their rent because they know the state have fixed it to where it's better for a person in a chair to move around because it happened personally. If they go in and make structure they'll say yeah, it's fine. But then they'll come back and boost your rent an extra 50-dollars or something that you can't afford. Then they go to somebody else that rent it. Oh, yeah. We can do this, and they qualified. If I'm making any sense to y'all. It's fine. So yeah, we can do this, but then they can mess with the rent because they take advantage of that.

TANYA MURPHY: Yeah. I hear what you're saying.

ERICK TAYLOR: We actually had to find something that was already equipped for disabled. The people that you're renting from, they already know you don't have to do changes because they haven't qualified and then they responsible to do whatever needs to be done.

BAMBI POLOTZOLA: Okay. Thank you. Any other questions?

SPEAKER: There is a question in the Q and A. I was (inaudible) to ask what other options are available once (inaudible)?

TANYA MURPHY: So once they age out of the Flexible Family Fund, you know, you can still get some assistance with Individual and Family Support and there are options when a child reaches 18 and then they can apply for SSI without their parent's income being counted and then they might be able to get income through social security.

BAMBI POLOTZOLA: Any other questions about the Individual and Family Support for OCDD? Okay. Tanya, you can move on.

TANYA MURPHY: All right. So Act 73 compliance report. This was an act that required all of the human services districts and authorities or the LGEs to put 9 percent of their state general funds for intellectual developmental disabilities services. And this is the report that we send into the DD Council so that they can see that they're in compliance with that. And the first column says the total state general funds that they received. The second column shows what 9 percent of that would be. The third column is the total amount that the LGEs have budgeted towards these programs. And then the total amount expended. And then the last column shows the percent of the 9 percent that
they have spent. So we were looking for 50 percent generally in the second quarter. But like we have said before, they don't have all their invoices yet. So some of them are already above that fifty percent, some not quite there. But they all generally meet this goal of 9 percent.

JULIE FOSTER HAGAN: So at the last meeting there was a few regions who had not met the 9 percent. You guys asked us to follow up on that. So something that happened in the state fiscal year there was one extra payroll cycle. Which means that their state general fund went up for the state programs. And so when they looked at their budget, they weren't sure and we confirmed that no, that's extra SGF. The law doesn't say that it's only the 9 percent. So they've all but one adjusted to be able to be in compliance with that. But that's where they came from was a question about the extra payroll.

We are still working with Brad Farmer and the folks at Acadiana. The issue they have is that there was a grant that was still, that's showing up as state general fund. That was 3 million-dollars. That will be one time. And so they're trying to figure out how that is considered in this report. I believe that it will still come back that it still has to be budgeted. But that's why you still see they're the only ones now who are still a little bit less. But we are in conversations with them working through that and that's why that one is a little bit still off as we try to work through that with them. But I think the question-- you know, I asked our LDH budget, and they were aware of that and had already been in conversations with folks. And so we're definitely still monitoring that expectation of 9 percent.

BAMBI POLOTZOLA: That grant is a state grant?

JULIE FOSTER HAGAN: I'm not totally sure. I just know that it increased his state general fund budget. I think because LDH might have got the grant, but then given it to him through state general. It's like a complicated question and that's why we have-- they're just trying to make sure. Now when I talked with Brad he assured me they feel these programs are very important. They weren't trying to not dedicate what they needed to. They've always, you know, he came back and said we always exceed what we needed to. We don't expect that to happen. We just are trying to navigate this one-time kind of situation for this year. But I'll definitely at the next meeting
BAMBI POLOTZOLA: And how much? Three million you said?

TANYA MURPHY: Yeah. Mr. Farmer said it was a onetime direct appropriation for a specific behavioral health program that they have not utilized for 3 million dollars.

BAMBI POLOTZOLA: Okay. They just say they haven't utilized the 3 million-dollars?

TANYA MURPHY: They said it was for a specific program and they have not decided if they're going to be moving forward with that program or not. And if they don't then the 3 million-dollars will no longer be in their budget. But if they do, then it will be and then they will accommodate the 9 percent. But they haven't decided if they're going to do that program or not.

BAMBI POLOTZOLA: Okay.

ERICK TAYLOR: This is Erick Taylor. I have a question. They can't use the 3 million somewhere else and if they only use the money for what they plan to use it for?

JULIE FOSTER HAGAN: So my understanding is that it's some type-- and I don't have all the details, but it's some type of a grant. And so with a grant it's usually very specific about what you can and can't use it for. And, you know, what the expectations are that are tied to that grant money. So it wouldn't be available, no, to use for something else. It would only be available for that purpose. But again, I can't even speak to what the grant is. I don't have that information. I just knew it was kind of like that one-time funding. Cause I asked the same thing and they said grants so that's not usually state general fund, but it's something to do with how it gets transferred.

BAMBI POLOTZOLA: And I guess just for often times like we would say grants are great, they're money that you get, you know, that you didn't have otherwise. But, and I don't know if this is the case for this or not because the 3-million dollars there's definitely behavioral health needs, but sometimes grants have such requirements that an entity can't fulfill it. So while 3-million dollars would be great, there's a lot of things to be done with it, sometimes they require the entity to do this, but that's not part of the 3 million-dollars. So you have to have that resource or funding to cover the other requirements. So sometimes you can't even accept the free money that you
would normally think of.

ERICK TAYLOR: Things you can do with free money.
BAMBI POLOTZOLA: I know.
ERICK TAYLOR: Different spots that we need.
BAMBI POLOTZOLA: Yeah. But sometimes it comes with
those restrictions. I don't know if that's the case for
this. I'm just saying that for a point for people to
understand that. We love grants, but sometimes you can't
even accept them. Any other questions about the Act 73
compliance report? Okay. Any questions for OCDD?

BRENTON ANDRUS: I do.

BAMBI POLOTZOLA: Brenton.

BRENTON ANDRUS: It was just a couple of follow-ups from
the last meeting that I know you followed up on, Tanya, so
I'm putting it out there so everyone else on the committee
would know. But last meeting we looked at the 2022 IFS
priority requests and expenditure report. And so I know
you followed up about Central about the 75 open requests
that it appeared they didn't use. I didn't know if you
wanted to share kind of what their update was on how they
corrected that. And then also there was some follow-ups
you were going to do about the other coding. I think you
found that there was something being done there where it
kind of inflated that other category and so that should be
corrected as well.

TANYA MURPHY: Right. For South Central when I asked
them about the IFS applications that their number was so
much higher of ones that they didn't review that all. And
when they looked into it, they discovered that their entry
unit who was working with families when they initially came
in the door were entering the requests into the database
and then when the case was transferred to their IFS unit,
they were again entering the requests. So they were just
some duplications in the entering of the same requests and
they fixed that problem so they won't have the same issue.
Which I was happy to hear that they were actually requests
that weren't being reviewed, they were just being entered
into the database more than once.

And then the other thing that we looked into, and I
don't have the specifics at the top of my head. I know the
circumstances, but that there was one LGE, I think it was
Metropolitan Human Services District that was putting a
whole bunch of stuff in the other category. And when they
looked into it, it was discovered that if you fund something
with the Individual and Family and Family Support money and it's what's called a crisis where they just cut a check to the family as opposed to doing like an agreement with the family. I'm trying not to get too specific and confusing. But they have to use a third party to cut those checks and those third parties sometimes charge a fee for actually cutting the check. And so Metropolitan was entering the information as the service in what it actually was. Like if it was something specific like some diapers or something like that. And then they were entering the administrative fee in other. So it was just one service, but it was going into two categories. So they said they were going to now put the entire amount including the administrative fee to cut the check all in this same thing so they're not going to have as many things in the other category. I hope that makes sense.

BAMBI POLOTZOLA: So remind me, was it the number of items in the other category or was it the dollar amount that they had in the other category that we questioned?

BRENTON ANDRUS: As I recall it was just the use of that other category. Because we did some work back in the day for them to stop utilizing that category so much so we could get an accurate description of what services are actually funding. And so just with that particular report we saw that the other, the number-- I don't think we really looked at the dollar amount per say, just the number of services, if you will, that were being categorized as other were inflated that year from previous years. So we were hoping they weren't reverting back just to not categorizing things correctly.

BAMBI POLOTZOLA: I was just questioning because if it was the dollar amount I would question what was the service fee for the company doing it. But if it was the number of activities, then that would make sense.

TANYA MURPHY: Yeah. I think Brenton is right. It was just the fact that it was used at all to the extent that it was.

BRENTON ANDRUS: I mean, it does create a conversation of are you using the most fiscally responsible third party if they're charging an administrative fee. But that's another rabbit hole to go down, I guess.

TANYA MURPHY: Right. And I think all the LGEs have that administrative fee.

BRENTON ANDRUS: Yeah.
BAMBI POLOTZOLA: Okay. Any other questions for OCDD about their Act 378 funds? Save all the other questions for OCDD for tomorrow or for the next committee. Julie's ready. Okay. Seeing none, do we have any announcements?

BRENTON ANDRUS: The only thing would be at 1 p.m. we have our Self-determination and Community Inclusion Committee. And then at 3 p.m. is Education and Employment. And then tomorrow starting at 8:30 will be the full council meeting.

BAMBI POLOTZOLA: Thank you, all, for attending the meeting and we'll see you at the other meetings we have today and tomorrow.

BRENTON ANDRUS: Anyone object to...

BAMBI POLOTZOLA: Anyone object to adjourning? You can stay here if you object.