Louisiana Developmental Disabilities Council
Quarterly Meeting
May 1, 2025

JILL HANO: Hi everyone. It is 10:09 on Thursday May 1st, 2025. And the quarterly meeting of the Louisiana Developmental Disabilities Council will now come to order. Ebony, would you like to take roll?

EBONY HAVEN: Sure. Mr. Mike Billings. Dr. Barovechio.

PATTI BAROVECHIO: Here.

EBONY HAVEN: Mr. Bennett.

BRIAN BENNETT: Here.

EBONY HAVEN: Mr. Billings. Ms. Bayham.

MELISSA BAYHAM: Here.

EBONY HAVEN: Mr. Blunschi.

AYDEN BLUNSCHI: Here.

EBONY HAVEN: Mr. Boynton. Ms. Chachere. Ms. Crain.

CHERI CRAIN: Here.

EBONY HAVEN: Ms. Gonzales. Mr. Ennis.

LIAM DOYLE: Proxy.

EBONY HAVEN: Ms. Hagan.

JULIE FOSTER HAGAN: Here.

EBONY HAVEN: Ms. Hano.

JILL HANO: Here.

EBONY HAVEN: Ms. Harmon.

ANGELA HARMON: Here.

EBONY HAVEN: Ms. Jordan.

MERIDITH JORDAN: Here.

EBONY HAVEN: Ms. Kelly Aduli.

KELLY ADULI: Here.

EBONY HAVEN: Mr. Macaluso.

FRANK MACALUSO: Here.

EBONY HAVEN: Dr. Meda.

LAMARTINE MEDA: Here.

EBONY HAVEN: Ms. Nguyen.

PASQUEAL NGUYEN: I'm here.

EBONY HAVEN: Mr. Piontek. If you'll just say here for the roll call Tony.

TONY PIONTEK: That's okay. Thank you.

EBONY HAVEN: Mr. Rocca.

TORY ROCCA: Here.

EBONY HAVEN: Mr. Smith.
ROBBY SMITH JR.: Here.
EBONY HAVEN: Ms. Stewart. Mr. Taylor.
ERICK TAYLOR: Here.
EBONY HAVEN: Ms. Washington. Ms. Webb.
VIVIENNE WEBB: Here.
EBONY HAVEN: Dr. Wilson. Mr. Williams and Ms. Xu.
ZHENG XU: Here.
JILL HANO: Thank you Ebony. At this time we will have Ms. Angela Harmon read our virtual protocols.
ANGELA HARMON: 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 the chair 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 attending virtually remember you must be on camera and have your first and last name showing to be counted towards our quorum. Please keep 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 microphone will be turned on. After speaking your microphone will be returned to mute.
Also the Q and A is only to be used by those needing an ADA accommodation to participate in the meeting. Public comment will not be accepted via the Q and A except for those individuals who requested the accommodation. As per order committee members in person and then virtually will be allowed to speak first. Public members in person will then be called on followed by public participating virtually. Comments in the Q and A and chat will be addressed last. As with all hybrid meetings it can be difficult to keep track for all those wanting to speak in person and virtually. Please be patient. All comments and questions from committee members in public may be limited to three minutes or less should we run into time constraints so please keep that in mind. Also comments about a person's character will not be allowed. Finally, members of the public will have an opportunity to provide public comment before each vote

and during designated public comment periods. The chair may also use their discretion to determine if comments will be accepted outside of those times. Thank you.

JILL HANO: Okay. Thank you. So our next item is we have a guest today and we are going to have a presentation by our Lieutenant Governor Mr. Billy Nungesser. So you're recognized.

BILLY NUNGESSER: Thank you. Thank y'all for having me today. I wanted to just tell you some of the things I'm doing and why I'm so passionate about this. My job is tourism but I have a love and passion. Many years ago I volunteered for a therapy ride facility in Laplace over 30 years ago and lifted a little girl out of a wheelchair and it was life changing. I went back the next week and rain had to cancel class and that little girl did not want to get off that horse. That day I made a promise if I could ever afford it I would build a covered arena so we would never have to cancel class. Seven years later I was able to sell my company. I brought a thousand acres in Plaquemines Parish and built a covered arena. When Katrina (inaudible) we took care of over 200 special needs children and adults at no cost to their family. They could ride horses seven days a week. (Inaudible) realized it was too far south but I do support those around the state.

But since I've been lieutenant governor I look for ways to improve access at our state parks. Ms. Aduli, one of your members, helped me raise money and put the first special needs (inaudible). That's actually my riding center. I was a lot younger there and a lot thinner. But we put the first special needs playground in Fontainebleau State Park. We also purchased 11 of these track chairs that allow people to get in the track chair and go into the woods and see the deer, go out on the beach and enjoy a lot of things that if you're not bound to a wheelchair you get to enjoy. And we're going to continue to buy more of these chairs. You reserve it 24 hours out. There's no cost. You can work it remotely. You can do it yourself. Or someone can walk behind you and work it. But it's really making a difference. We get families every weekend booking these at all the state parks.

We're also doing private/public partnerships and we are looking for people-- that's our first special needs playground in Fontainebleau. It allows you to take a wheelchair onto the merry-go-round. All kind of new things. And we want feedback. We're adding things. These covered pavilions were requested. And different things that will make it more accessible. We're also looking at and we got a legal opinion to raise money to open a facility at the park where if you're a single mom, need someone to care for their child while they walk and do errands we can have nurses to add that capacity. Anything else, if we build ten new cabins two of them will have a special bed. Not only accessible, all of our cabins are accessible by wheelchair. But we want to add those special things that sometimes make it impossible for people to go on vacation. They need a special zipper bed and different things that will really help all the special needs community. We also are putting more programs together at our museums. Events, they're hosted. We're reaching out to the community where all of our museums are to see where we can put more facilities in those museums to allow for more activities in those museums.

We're also two years ago I had legislation to take three of the bottom lottery tickets. We have 20 scratch-offs. When we passed the lottery it was going to make education the best in the country. What we did (inaudible) allowed the legislature to take the money that we raised for the lottery (inaudible) education never had any more money. So now we spend about 14 million a year trying to get you to buy lottery tickets. Cause nobody walks in and says (inaudible) give me three of those scratch-offs. (Inaudible). Well, what I want to do is take the three bottom selling scratch-offs, dedicate one to our special needs, one to veterans and one to seniors. And I had a bill that Troy Carter put in that the chairman would not even let anyone speak at committee. Peterson said I'm not going to allow you to take money from education, which wasn't true. Those three scratch-offs, the bottom three, bring less than a million dollars. I'm telling you if we do this we will be able to raise-- I don't buy scratch-offs, but if we had one for special needs I would buy 10-dollars every

time I got gas.

In Virginia one year special needs scratch-offs brought in 86.1-million. Texas for the veterans, 101 million. And Pennsylvania 27 percent of lottery money goes to seniors. And those are just a few examples. It seems like those three groups get less representation in the legislature and always get their funding cut. But if we let the public decide if they want to help. And this group would be a great group to decide how that money gets spent. You know firsthand what is needed. I have a policy in my office where we never tell anyone no. Just as we help someone get a wheelchair covered that was denied by an insurance company and another lady whose child was being mistreated in the school I've had to reach out to the school board. I take each one of those requests personally and handle them through my staff in my office. We surely need some help in getting some things that we don't get through the legislature.

But I'm going to be back with that bill next year and I'm starting this early how important it is. Everybody knows a special needs person, a veteran, a senior. But I just don't want to pass it through the legislature. If I'm going to advocate for it I don't want the legislature ever to be able to take a penny of that money for anything else. And that's where we messed up when we passed the lottery. It allows them to take money from education and fill it with the lottery money. And so hopefully next year we can pass that bill and then that money will go into a pot that a board like this will decide how those funds will be spent.

And with that thank you for your time today. Thank you for what you do and I'll be glad to answer any questions you may have for me. And if you will, if I could give you my cell number, (504) 657-9890. Please, if you've got an idea of things I can do differently. And also I wanted to offer I have an apartment at the Pentagon barracks, a big room and I host breakfast for people that want to talk to legislators. They all live there. They'll come for free breakfast before they go to the capitol. I'll host breakfast if y'all want to have a meeting there and so we can talk firsthand to the legislators how

important our ask in the legislature is. (Inaudible) covered weight loss surgery for state employees by having them there and realizing the importance of some of the things we're asking for. So I would be glad to do that as well. And with that I'll shut up and answer any questions if we have time.

JILL HANO: Okay. Thank you. Does anybody in person have any questions?

LIAM DOYLE: It's not a question but I'm with the Governor's Office of Disability Affairs. We are doing a disability day on the 2nd so I'm going to get with you and your staff because we want to work with your office as well as part of that.

BILLY NUNGESSER: And if I can host everyone that's coming there and feed you at the apartment before, during or after I'm willing to do that.

LIAM DOYLE: The date is June 2nd. I'll get with you after this.

BILLY NUNGESSER: Thank you.

JILL HANO: Okay. So thank you. Any other questions?

BILLY NUNGESSER: Thank you for having me and call me anytime if I can be of help with anything. And I do appreciate everything y'all do.

JILL HANO: So at this time we will have Mr. Liam Doyle read our mission statement as well as our ground rules.

LIAM DOYLE: Louisiana Developmental Disabilities Council's mission statement. To increase independence, self-determination, productivity, integration and inclusion for Louisianians with developmental disabilities by engaging in advocacy, capacity building and systems change.

Louisiana Developmental Disabilities Council's ground rules. Members must be recognized by the chair before speaking. Be respectful of each other's opinions. Break for ten minutes every 1.5 hours. Discuss council business in a respectful manner. Except as necessary restrict the use of electronic communication, i.e. texting, during council and committee meetings. Silence or turn off all cell phones. Mission statement is posted at every meeting. Be on time for meetings. No alphabets. And lastly, side conversations are kept to a minimum, done quietly

and restricted to the subject at hand.

JILL HANO: Okay. Thank you Liam. The next item of business is the approval of the meeting summary. A draft of the January 30th meeting summary was in your packet. The summary will not be read unless requested by a member. Are there any questions or corrections? Hearing none, if there is no objection the meeting summary is approved as distributed. Hearing none, the meeting summary is approved.

All right. The next business is the chair's report. The only thing I have is the next agenda item is the executive committee report which I will read when I find it. Sorry y'all. So the executive committee met yesterday, April 30th, 2025, and we do not have any recommendations for the council to consider. So we discussed updates on several issues during the last quarter. There was a 504 law that 17 states filed a lawsuit. We discussed the restructuring of ACL, which is one of our funding sources. The Administration for Community Living. And then our proposed draft budget for FY 26 including changes to our funding. Also there were Medicaid changes at the federal level. And then Ebony will go into more detail on this later in her executive director's report. But all council members are encouraged to participate in all upcoming advocacy opportunities. And share your story with the council by taking a survey and include it in the LADDC news Monday April 20th.

Lastly, we did our final quarterly evaluation of our executive director's first year of employment. The council participated and provided feedback for the evaluation. As always the feedback was great and very positive on a great job the executive director and council staff are doing. The executive committee and Ebony came to a mutual agreement that due to the current uncertainty of federal funding a salary increase will not be considered at this time. The next evaluation will occur in correlation to our January 26th meeting according to the council bylaws. So that is the executive committee report. Questions? Any council members in person have any questions? Any hands raised? Erick.

ERICK TAYLOR: The committee didn't do any budget raise or nothing like that?

EBONY HAVEN: So Erick, due to the uncertainty of y'alls federal funding currently, and I'll get into more details whenever I present on the budget, the executive committee and I agreed that since we don't know what's going to happen with y'alls federal funding that we're not going to consider a salary increase at this time. And I am totally okay with that. I agree.

ERICK TAYLOR: Okay.

JILL HANO: All right. Thank you. The next order of business is the election of our nominating committee. Which according to our bylaws article five section four the nominating committee shall be elected at the April meeting during a council election year. Which I think would be on odd years because it's two-year terms. So this is just for the nominating committee. So now I will open up the floor for nominations for the committee or for?

EBONY HAVEN: For the nominating committee.

JILL HANO: Okay. Are there any nominations? I will open up the floor. Vivienne, can you repeat that.

VIVIENNE WEBB: I don't want to be on the committee because I want a position.

JILL HANO: Yes, and that is important to remember. If you want to be on the executive committee you should not be a part of the nominating committee. Can agency reps be on the nominating committee?

EBONY HAVEN: They are council members so yes. The answer is yes.

JILL HANO: Okay. So any volunteers?

EBONY HAVEN: And I'll just add you can nominate yourself. If you're not interested in becoming an officer of the council or one of the chairs of our standing committees or member at large you can nominate yourself to participate on the nominating committee.

JILL HANO: I would like to nominate Tony for the nominating committee.

BROOKE STEWART: Jill, it's Brooke.

JILL HANO: Yes, Brooke, you're recognized.

BROOKE STEWART: Can you explain what exactly that means.

JILL HANO: So sorry. In July we will have elected our new executive committee which consist of the chair, the vice chair, a chair of the two standing committees and member at large. So according to our bylaws in

between April and July our council elects maybe a nominating committee to offer the full council recommendations for the new executive board. And then of course as any committee the council can take the recommendations or come up with new recommendations. But the nominating committee will give their recommendations to the full council of who they want as the incoming executive committee. Does that answer your question Brooke?

BROOKE STEWART: Jill, I am so sorry. I think I'm still a little confused.

EBONY HAVEN: Let me try to answer Brooke if that will help. Like she said, in July the full council is going to (inaudible). That includes the two officers, the chair and the vice chair and then the two chairs of the standing committees and our member at large. So the nominating committee is formed to offer the full council a slate of officers, a slate for the new executive committee. So the council in July can either vote to accept those nominations from the nominating committee or you can place nominations on the floor during the July meeting if you all do not agree with the recommendations that the nominating committee has sent to the full council for consideration. Does that answer the question?

BROOKE STEWART: Yes. I would like to nominate Angela Harmon to be on that committee.

EBONY HAVEN: Are you interested in doing another seat on the executive committee? If you are, I would not accept the nomination.

ANGELA HARMON: I am not sure about that. Thank you, Brooke, but I would have to decline.

EBONY HAVEN: Jill, Vivienne has her hand raised.

JILL HANO: Okay. Vivienne.

VIVIENNE WEBB: I would like to nominate Meredith Jordan to sit on the nominating committee.

MERIDITH JORDAN: I accept.

JILL HANO: I would like to nominate Tony. Do you accept?

TONY PIONTEK: Thank you.

EBONY HAVEN: Tony, if you're interested in one of the officer positions or one of the positions on the executive committee you shouldn't accept the nomination.

TONY PIONTEK: Yes.

EBONY HAVEN: I know he's expressed interest, Jill, so I don't think he's going to accept the nomination.

ERICK TAYLOR: The member at large seat, what do you have to do?

JILL HANO: You're not going to be on the nominating. I can promise you that. I was a member at large a very long time and it's just a position on-- Ebony, can you explain what a member at large does.

EBONY HAVEN: I just want to make this-- all of these descriptions are in your council bylaws and in your policies and procedures. So the binders that we gave you all at your retreat will have all of that information in there. But the member at large is basically responsible for representing the council's opinion on the executive committee. So if you all, if the executive committee is discussing something where they're going to put a recommendation forward to the full council it is the member at large's responsibility to take into consideration the full council's opinion about that issue and to vote the way the council would vote. And so that would be bringing the voice of the full council to the executive committee if that makes sense. You got to do a lot of talking to your fellow council members and just kind of get their opinion about things that the executive committee may discuss. Like our advocacy agenda and just important things like that. A lot of things come up and the executive committee has to meet on the fly so you would have to represent the full council's opinion on the executive committee. So the member at large's position is sort of big. But I'm not discouraging you.

ERICK TAYLOR: I understand.

JILL HANO: Not to call you out but Ayden, you want a shot?

AYDEN BLUNSCHI: I'll pass. Thank you.

JILL HANO: Okay. Alaina, any new members?

ALAINA CHACHERE: I want to do it I just haven't gotten (inaudible).

EBONY HAVEN: Alaina, I can kind of address that. The nominating committee it's our job as staff to kind of give you background information on anybody that's interested in running for one of the positions. So we'll give you background information. But yeah, I

think the nominating committee does call.

BRENTON ANDRUS: Yeah. Like in interviews or a process. Not necessarily formal, but if these are the ones you're choosing from you then call and get their background and talk to them and figure out what their goals are, how they align or don't align with the council's mission statement.

ALAINA CHACHERE: Okay. I'll do it.

SPEAKER: How many do we need?

EBONY HAVEN: We need at least five.

ERICK TAYLOR: I nominate Dr. Meda.

EBONY HAVEN: Do you accept the nomination Dr. Meda?

LAMARTINE MEDA: We have to meet or?

EBONY HAVEN: It will be one meeting.

BRENTON ANDRUS: For the nominating committee? Yeah. You'll have a meeting. There will likely be some work outside of that meeting for you to figure out the individuals that are interested in a position. But likely one meeting that you would discuss and make your motion that's going to go to the council in July.

LAMARTINE MEDA: I'll do it.

JILL HANO: Brooke, I'm very interested in your thoughts. Can I nominate you or you going to sit this one out?

BROOKE STEWART: Jill, did you say my name?

JILL HANO: I had a whole conversation. Can I nominate you for this committee or would you like to sit this one out?

BROOKE STEWART: Yes, you can nominate me. I'll accept.

JILL HANO: Okay. I nominate Brooke Stewart for the nomination committee.

EBONY HAVEN: And we only need one more. That's four.

BROOKE STEWART: I would like to renominate Angela Harmon.

ANGELA HARMON: I accept. Thank you Brooke. Thank you so much.

JILL HANO: Vivienne.

VIVIENNE WEBB: I nominate Brian Bennett to sit on the nominating committee if he's interested.

BRIAN BENNETT: I'll sit on the committee.

JILL HANO: Okay. Thank you. All right. We made

history. We have the acceptable amount of people on an ad hoc committee. This is huge. Does everyone accept their nominations because I skipped that part? Okay. If there are no objections the nominations for the council's nominating committee is now closed. The nominees for the council's nominating committee are Ms. Stewart, Ms. Jordan, Dr. Meda, Mr. Bennett, Angela and Alaina. Am I missing anyone?

EBONY HAVEN: That's everyone.

JILL HANO: Thank you, members. The chair of the committee will be-- just pick someone?

EBONY HAVEN: I can reach out to the actual committee and see if anyone is interested. I don't think we should just pick it.

JILL HANO: Does anyone want to be the chair out of you six?

ALAINA CHACHERE: I can chair.

EBONY HAVEN: Alaina volunteers to be the chair. Thank you so much.

JILL HANO: Okay. Thank you. Hearing none, the chair of the committee will be Alaina Chachere. Congratulations. So thank y'all.

The next item of business is the executive director's report. The chair recognizes Ebony Haven for her report.

EBONY HAVEN: Good morning everybody. If you look in your folders my report is on the gray paper. And I kind of want to just highlight a couple of things on my report because I wanted to highlight some of the things that Jill brought out in the executive committee's report that we discussed yesterday. So just to highlight a couple of things on my report. And if anybody has any specific questions about any of the activities that we've done this past quarter just ask. But your program performance report or your PPR for fiscal year 2024, and that spanned from October 23 to September 24, was submitted to the Office of Intellectual and Developmental Disabilities by that March 28th deadline that they set for us. The council should receive feedback summer 2025 but with all the changes at ACL that may be pushed back. So we should receive feedback at some point. I'm thinking it should be around the summertime, but again, with things so in the air we just don't know when we're going to get

feedback.

Just to let you guys know about council membership. The council has filled all of their vacant seats for council membership and we now are full at our 28 members. So again, I want to welcome our newest members Jude Boynton, Dr. Meda, Frank Macaluso who is on virtually and Ms. Alaina Chachere. So thank you guys for volunteering to be members. We're so excited to have you guys here.

And the last thing on my report in response to the third and final audit from the legislative auditors specifically on seclusion and restraint and abuse and mistreatment of students with disabilities the council staff worked with the Arc of Louisiana, Disability Rights Louisiana and the Louisiana Department of Education on legislation to address that audit. And it resulted in House Bill 237 by Representative Shane Mack. This item was added to the council and LaCAN's advocacy agenda. We didn't discuss it at the roundtables because the final bill wasn't in the right posture so I think we might have talked about it at the last two roundtables. So if you attended your roundtables and you didn't hear about it that's the reason why. It is tentatively going to be heard next week in house education--

SPEAKER: It's confirmed.

EBONY HAVEN: Great. It's confirmed for Wednesday May 7th at 9:30 and we'll probably be sending out an updated action alert for that one.

BRENTON ANDRUS: We have the information. The alert is out. I'm not going to confuse anyone by sending it out again. But the confirmed date was in the alert. It was just tentative but our LaCAN leaders have been making everyone aware that it is a confirmed date. The agenda is out.

EBONY HAVEN: So if you are interested in attending that yellow shirt day I encourage everybody to attend just to show support for that particular bill. There may be some amendments and we'll be watching that bill very closely to watch for those amendments. But I just kind of wanted to highlight those couple of things. Does anybody have any other questions before I go into the things that the executive committee sort of talked about yesterday? Okay.

So I'm just going to give you guys some updates just like I did at the executive committee on yesterday.

JILL HANO: I saw on the ITAC website and I was curious about the leadership labs. What do they entail?

EBONY HAVEN: The leadership labs that they're doing right now is just to help council leadership. So I've been sending that information to the executive committee but when they have the next one I think I'm going to just send it out to every council member because I think it's just good information about how to become leaders in your community, how to become leaders for the disability community in general. And I think that's information that all the council members can benefit from. So that's basically what those labs are.

JILL HANO: Okay.

EBONY HAVEN: Do you have any other questions?

JILL HANO: No.

EBONY HAVEN: So I just want to highlight some of the things that the full council wasn't able to attend the executive committee on yesterday. Just to give you guys the highlights. I'm not going to go into as much detail as I did yesterday. But the Section 504 lawsuit. I kind of want to give you guys an update on that one. It's a court case that started in Texas. It was filed in September 2024. There are 17 states that have signed onto this lawsuit including Louisiana. And when the lawsuit was originally filed the 17 states were stating that Section 504 was unconstitutional. And they were asking the court to not only get rid of the updated rules that came out in 2024 but they wanted the courts to get rid of the entire thing. We know that there are things within Section 504 that we do not want to see go away including in the updated rule there are things about prohibiting discrimination in medical care. And I think we saw a lot of that in Louisiana when the pandemic happened where individuals in healthcare were deciding who would get ventilators, who wouldn't. And so we don't want to see that type of discrimination. Section 504 is also very important for our students in our school systems and we don't want to see any part of Section 504 go away. So we are continuing to advocate for Section 504.

The update is that now they have filed a joint, the 17 states have filed a joint status report stating that they're no longer challenging that the entire Section 504 is unconstitutional but they are still challenging those updated rules. And like I said, one of the updated rules was prohibiting discrimination in medical treatment. So I encourage you guys to continue to reach out to our attorney general's office, Liz Murrill, and make sure that your voices are heard that how important Section 504 is for our disability community. Does anybody have any questions about that?

The next thing I want to talk is the restructuring of the Administration on Community Living. So Bridget and Lauren gave you guys some updated handouts that showed like how ACL was structured. And if you look at those gray boxes on March 27th the US Department of Health and Human Services released a statement and they announced they were going to be restructuring that bill and reorganizing it. That's basically the reorganization. If you look at those gray boxes at the top and the bottom all of those offices are now gone. We only have the offices that are in the middle. If you look on the right-hand side the Administration on Disabilities, we're housed under the Administration on Disabilities. So we actually turned our program performance report into the Office of Intellectual and Developmental Disabilities.

So I know some of you guys are asking yourselves why is ACL so important. Well, ACL was formed in 2012 and it was basically formed to increase efficiency and collaboration of programs that support older Americans and people with disabilities. And those two populations in our country have very similar needs for services and supports. And given that community-based services and supports are the hallmark of the Administration for Community Living we're just wondering how that restructure is going to work. Especially if you are moving-- what they told us was that they were planning to move these programs either under the Administration for Children and Families, the Assistant Secretary for Planning and Evaluation and/or the Centers for Medicare and Medicaid. Those particular departments have very different resources. They have very different priorities. And so the

Administration for Community Living's priority was to make sure people don't have to live in institutions or nursing homes like what was brought up at the executive committee on yesterday. It's all about community living. Making sure people can live in their communities. So that's why ACL is so important and that's why this is very concerning and we should all be concerned about the restructuring of ACL.

Now directly related to the restructuring of ACL is the leaked budget. But I'll get to that when I talk about the budget report. But the last thing I want to talk about that we discussed in the executive committee yesterday was the possible changes to federal Medicaid and how that's going to affect us. Now on February 25th the House of Representatives passed a resolution that proposed trillions of dollars in cuts to federal spending. It tasked the committee that oversees Medicaid to cut up to 880 million-dollars in the next ten years. And so what I want to highlight is that this was a budget resolution that was passed. It wasn't a bill. And it's important to know that Medicaid isn't cut yet. However, I think a lot of people don't understand how Medicaid works in Louisiana. In Louisiana Medicaid pays for our home and community-based services, our waivers, the NOW waiver, the ROW waiver, the supports waiver, the children's choice waiver, the community choices waiver for our elderly. Medicaid pays for their waivers. Medicaid also pays for personal care services, transportation, doctors' visits, therapies and a lot more things that sometimes we don't realize that Medicaid pays for those things. So I just kind of want to make sure that everybody is aware of that. And unfortunately our home and community-based services are considered optional. They're considered optional services so they're usually the first to be cut. But if you live in the disability community we know that the services aren't optional for our families. We need them.

Just to kind of give you guys some examples of the changes that they are proposing to Medicaid or that will come out. They are considering cutting federal funding which will be in the form of block grants, per capita caps, cutting our federal match dollars, our F map and/or restructuring provider taxes. All of these

potential options will reduce the federal government's share of Medicaid's cost. But they don't actually reduce the actual Medicaid spending. So any proposals would shift the burden to the states to come up with those funds or they're going to have to cut services. And I can tell you right now that our state budget is very uncertain. I think the latest we've heard, even from Representative McFarland who is the house appropriations chair, is that we're looking at a deficit of about 194 million-dollars in Louisiana. And so I don't understand how this state will be able to cover those cuts. And so I just kind of want to highlight that because that's something that everyone should be aware of and we have to advocate for our services. We have to advocate for Section 504. We have to advocate for these changes at the federal level to Medicaid. So does anybody have any questions? Because I'm going to kind of go into my budget report but I kind of want to highlight those things and I'm looking to answer any questions that I can if you guys have any.

JILL HANO: Erick.

ERICK TAYLOR: My question is one, why is they always jacking our programs, the programs that give us freedom to live and to be accessible in the public. And why do they want to attack this. Number one question to me is why is we so broke? Why? That's all I ask is why.

EBONY HAVEN: So I can attempt to answer the first question but I'm not going to have an answer for that second question. Like I said, the services that support our elderly and disability populations they're considered optional services. So whenever they're looking at cuts that's the first place they go.

ERICK TAYLOR: We not optional people. This is our lives so why they saying it's optional. And we live every day. Why? I don't understand. It's not understanding in my head why is they cutting Medicaid. Why is they cutting the school system. Why is they picking on the things we need. I can't understand it. I don't understand that. You take these things from us we can't live.

EBONY HAVEN: So Erick, I think that's a great point. I think that your voice and making sure that

our legislators, our congressional delegation in Washington they need to hear those testimonies. And that's why we've been asking you all to share your stories. We sent out an LADDC news on Monday and we're asking people to share stories like that because these services aren't optional for our families. We know that. But a lot of times when you are higher up you don't see the people, you just see dollar signs.

ERICK TAYLOR: My question is if you take transportation how can we move around. If you take Medicaid how can we do what we need to do. Our help, we need it. If you take the transportation how can we go to yellow shirt. How can we do the things we need to do. It makes me feel like you're trying to make us be quiet when you take these things. Why? We live this every day. We depend on this. We got to get up in the morning and say okay, where is we going today.

JILL HANO: Ayden.

AYDEN BLUNSCHI: So I have a question. They say they're trying to cut community-based services. So does that mean the whole waiver as well?

EBONY HAVEN: I'll just say it like this. If they cut Medicaid that could trickle down to the waivers because the services are optional. So if they are leaving it up to the states to cover what they cut I don't see how Louisiana will be able to come up with the funding to cover the match. So then they put the burden on the states to figure out what services they're going to cut. And I'll just say that these services are optional. These are on the chopping block. I don't know Julie or Brian if you guys want to sort of help with that answer.

BRIAN BENNETT: In speaking to that they're optional services. I know we say this all the time but advocacy and voices I think are very important to that. And this is just my take on it. I think the Medicaid program as a whole on the national level it needs some updating. When we talk about mandatory and optional services I think those have kind of been in place for a very long time. If you look back 30 years ago home and community-based services weren't as common. There weren't as many programs as there is now. HCBS across the country those are hallmarks almost in every state's Medicaid programs. But I think there is some catching

up to do there for (inaudible). That's why I say advocacy, contacting elected officials to kind of drive home that point that these shouldn't be optional services. They should be a mandatory benefit in state's programs. If they were it would make them less susceptible to cuts (inaudible). But just the way the program is right now on a federal level the home and community-based services are considered optional.

AYDEN BLUNSCHI: Why is it up to federal to make decisions for us? We live this life. They don't have to wake up wondering if somebody's going to come get them out of bed or even if we're going to eat, get something to drink, go to the bathroom. That's just to me people that don't live what we live, don't even know our names, don't even know what we go through. They shouldn't be making decisions on something they don't even know anything about.

JILL HANO: Vivienne and then Erick.

VIVIENNE WEBB: Thank you. So they are thinking about it from an equality standpoint not an equity standpoint. It's not services that are necessary for them but they're incredibly necessary for us. So when you email them or stand in front of them in committee tell them. Tell them everything. Tell them is this optional for me, no, it's not. Because they're really looking at it through dollar signs then tell them it will boost the economy because I have access to work, to be a tax paying citizen, all of that. But don't stay silent. If you stay silent we have no chance.

ERICK TAYLOR: Medicaid been updating for the last 30, 40 years. We ain't caught up yet. Why? They cutting but they ain't caught up. We need it. I'll be anywhere where they need me to speak. We need it. We not an option. We can't be in this room. (Inaudible) but when they going to get caught up. This young man can only do so much. Why? That's all I got to say. I got to walk out.

LAMARTINE MEDA: How is the program optional?

BRIAN BENNETT: That's a good question. I don't know if that's outlined in federal law. I'm not positive on that but I think there would have to be laws passed on the federal level.

JULIE FOSTER HAGAN: They've actually proposed it before for home and community-based services at the

federal level. But part of the problem is the fiscal impact tied to it. So I think there is support from a lot of the legislators. (Inaudible) and I'm not saying I don't agree that that should happen I'm just saying that that then has a lot of dollars associated with being able to make that happen and that's why, from what I've seen in the last five or six years that I've paid attention to it, why it was failing to get the necessary votes to change it from optional.

Some states are actually concerned too that if they were to make it mandatory, which means anybody who needs it or has a plan for it gets it that then ultimately if there's not additional dollars associated with that then things like our ability to have people in the NOW waiver who get supports 24 hours a day on staff that those services would have to be reduced. In order to give everybody something that means that everybody who gets something has to get less than what they would get as opposed to maybe what they need to be able to be successful. So there's a lot of factors around it. But it would take congressional action to go from an optional Medicaid service to a mandatory.

BRENTON ANDRUS: I was just going to say this conversation is the perfect example of why advocacy is so important. One of the questions I think you asked is why are these people who aren't living with a disability making these decisions. And it's because we need people with disabilities that run for office. We need people with disabilities that go to work for OCDD, work for ACL, work for these groups and we have to encourage that. We're always encouraging, we send out information when we have it about whatever boards and commissions we hear of that are looking for people to have a seat at the table. There are tons of advocacy organizations out there. Lots of nonprofits that have boards that you can apply to sit on. It's very important to look for those. And also understand that it's your voice and you have the ability to advocate at any point in time. No one has to tell you when to advocate. No one has to tell you what the issue is you advocate for. You don't have to wait for an alert from any group to send you to say hey, you need to do this. It's all about-- part of it is self-awareness. You know what you need. You know what your friends need.

And whoever is going to listen, and they'll listen if you get loud enough, if you have enough to say and enough people are reaching out to them about these things.

And I think this discussion just highlights why it's so important to keep advocating because unfortunately we do sometimes we see people that get discouraged and they stop advocating. We have a lot of people in LaCAN that we still have their information but they don't really do much anymore. Either they got what they needed or they're seeing that they're not getting what they need and so they stop. And that's the worst thing if you have what you need because there's lots of people that still don't. Your story still matters to get them what they need. If you haven't got what you need you definitely don't want to stop, right. And I think unfortunately when it comes to disability services I don't know if you're ever going to have what you need in the distant future that I can think of. So that's why it's important to constantly talk about and constantly having these conversations and really getting out there and just talking to whoever's going to listen. There doesn't have to be a bill about it. There doesn't have to be a notice of intent or some kind of rule that's being published. At any point in time you can reach out to people. A lot of folks that work for the state their information is readily available. Their emails are available. It tells you who's in that position. You can call and try to speak to them and talk to them about what it is you need regardless of if it's a topic of discussion right now because I promise you it will be at some point in time. That's just what I would chime in.

LIAM DOYLE: I think everyone in this room is asking the right questions but you're asking the wrong people. Everyone in this room understands what you're going through. We at the governor's office we get calls and we're happy to facilitate and brief legislators if we can so just let us know. Hey, you want to talk to your legislator and we will get that information for you and find that for you. Reach out to us as a resource. But again, like he said, you don't have to wait for anything. These conversations

need to happen. What I would recommend would be to reach out to your local legislators because a lot of times in my experience with them they want to help, they just don't know how to, right. The biggest thing you can do is to help them to understand what it is you go through and then from there they can impact change. Certainly run for office, absolutely, but in the interim use your voice to talk to legislators directly. Because the conversations I have with legislators they're always happy to help where they can they just don't necessarily know what our needs are and how they can help us. Really they're relying on your experience as much as you're relying on them if that makes sense. Definitely something that you want to consider moving forward in session, out of session, it doesn't matter. They're there to help so just keep that in mind.

JILL HANO: Karen.

KAREN XU: (Inaudible).

EBONY HAVEN: Brian, can you help answer that question? If the Medicaid, because of the potential cuts to federal Medicaid, will that affect the intermediate care facilities as well.

BRIAN BENNETT: I'll give you an example. One of the cuts that they're proposing on the federal level would likely potentially not affect services at all because it would be a cut on the administrative side. So for example CMS gives states enhanced federal match funding for different things. So that's a potential cut which would mean we might lose our funding to develop a new system that would support Medicaid but it wouldn't directly impact what we call our provider services. So until we know what's going to happen at the federal level, what they're going to specifically do it's hard to know what services will be impacted.

JULIE FOSTER HAGAN: The only thing I would clarify about that is that the intermediate care facilities in the home and community-based waivers are considered not optional sort of. There's a little bit of difference that in the ICFs if you have them in your state you have to be able to try to find a location for them. But they are also in that optional category. And then the current way that you would match and the percentage of the federal match is the same for waivers even for ICFs and nursing homes and lots of others. The

administrative match Brian was talking about and then sort of a regular match. And that match rate is the same for all of those different services. So not different for each kind of service.

JILL HANO: Meredith.

MERIDITH JORDAN: I was just going to add to piggyback off of what Brenton was saying and Liam as well. And I really commend the council too for having Lieutenant Nungesser come here today, right. And keep thinking about the numbers that he shared. And talking about the breakfast. And I know you guys will stay connected with that and sort of communicate when that opportunity happens. I didn't know that happened and I think that would be a great opportunity too for some of these concerns. If they are willing to bring all of those legislators together, right, and create that perfect environment for members to share their wants and wishes and these are all the things that we would like to see improve. I keep thinking about all the work that he's doing as well. So just wanted to kind of piggyback on that.

JILL HANO: Ayden.

AYDEN BLUNSCHI: A question for you, Mr. Bennett, if you could possibly answer it. My question is why is it that they continue to add people and add people and add people if there's no funding to keep adding people to help even the ones that are waiting.

BRIAN BENNETT: Which program is it for?

AYDEN BLUNSCHI: The NOW or the ROW. Also the ROW as well.

JULIE FOSTER HAGAN: Sure. So we worked with the Developmental Disabilities Council and in 2018 we changed our system based on working with advocates so that it wasn't just waiting and waiting but that there was a prioritization so that people could have access to the waiver based on their priority of need. And we've been able to continue to make those waiver offers. And part of the reason we did that is because when people were waiting and they would get a waiver offer they didn't always need anything. We had a lot of people got the offer but then weren't getting any services. So that's why we switched it to that prioritization. Now when we get a waiver and then they work through to identify what waiver will meet their

needs so there's not really a waiting list on the ROW or the NOW but it's based on the need the person has.

JILL HANO: Can I make one announcement?

EBONY HAVEN: You're the chair.

JILL HANO: No one nominate me for chair. So according to the ground rules it says break every one and half hours. Which it is but it's 11:30 and lunch is at noon so is the will of the council y'all want to roll through lunch or y'all want a break? We'll do that. Thanks.

KELLY ADULI: Ebony, do you think June 2nd is too late for our lunch or breakfast at Lieutenant Governor Nungesser's apartment? Would you like to set up something before then? Is that too late in session to make a difference?

LIAM DOYLE: We do have disability day that's the same day. Arc of Louisiana is having a disability day on the 2nd as well. The Governor's Office of Disability Affairs and the Split-Second Foundation they're having a day and then Arc of Louisiana is having a separate day also on the 2nd so it might be a little crowded to do it on the nd. But I will let you answer that.

EBONY HAVEN: To me the earlier the better. I think the sooner we can talk to legislators about what's going on federally and how that could potentially affect these optional services the better. So if there's a date that they can get us in sooner I would say the sooner the better.

KELLY ADULI: Can everybody show up? That's the question. Can everybody make it there?

EBONY HAVEN: Yeah. We have a 28-member council.

KELLY ADULI: It's big enough. It can hold everybody. It's everybody's availability. Maybe if you send out like these are our three dates.

EBONY HAVEN: Yeah. We can do a poll and the majority like who would come we can pick that day. If he could give us three dates or are you looking for us to get those dates?

KELLY ADULI: Why don't you give me the dates and I'll ask him. We can do dinner too because they're out there not only at breakfast they're out there at dinner. So if afternoon works better for people verses the morning.

EBONY HAVEN: I can get some dates together and some different times and poll the full council and let you know which date works best.

KELLY ADULI: Okay. Great.

JILL HANO: I have been seeing Tony's hand. Tony, you're up.

TONY PIONTEK: Thank you. I know how this gentleman feels to all of you, even all the adults and our staff. I know what it's like. We're just a parish where we are where I live so I can understand all the lows and highs of everything. And it was a God given blessing for me. This house that I live in now was for my dad's parents, my grandparents. That was a blessing. But for me to hear that from him right now we're still in the slump of seeing all kinds of homes empty, not taking yet within the system of course. It may take a while but the reality and the hopefulness and the faithfulness hopefully that will come. But I can definitely see how frustrating it might be because when it's big cities like Lafayette oh, right away they can find something. Whatever person, him or her or that realtor. But it's quiet different in our parish where I am. And I know Mr. Nungesser here is very honorable. We need more work and need more compassion and more comfort to come together more to make our society better and not looking backwards but looking forwards. I hope this will be something that we all can put into play, put into action. And hopefully we can do something much more better than this because we want to improve. We don't want to look backward but we want to look forward to a newer new year no matter if it's the Arc system or living on your own completely with family help.

JILL HANO: Vivienne.

VIVIENNE WEBB: There is one thing I'm curious about. My brother cannot get his waiver turned on because Medicaid keeps turning it off and he’s been, like my brother has not been able to have Medicaid for years now and he desperately needs it. He has (inaudible) and lately for the past four years he's had a (inaudible) that just gets worse. How would I go about, like how do we try to get his Medicaid turned back on because he needs it. And he should have a waiver but he can't access his waiver because his

Medicaid keeps turning off.

BRIAN BENNETT: Vivienne, do you know if it's a problem with the application or that part of it?

VIVIENNE WEBB: What do you mean?

BRIAN BENNETT: So it's with the actual Medicaid eligibility?

VIVIENNE WEBB: He's eligible. He has a waiver or he should but it can't get activated because Medicaid keeps turning it off but he should have had Medicaid all along. Me and my other brother have Medicaid and we have access to it but he does not and he should. It's to the point where he has two years of no medical history at all.

BRIAN BENNETT: If you would reach out to me directly with his information and we'll look into it.

VIVIENNE WEBB: Cool. Thanks.

JILL HANO: Tony, is your hand up from before?

TONY PIONTEK: No.

JILL HANO: Okay. Then you're recognized.

TONY PIONTEK: You're welcome.

EBONY HAVEN: I think it might be up from before.

JILL HANO: Okay, y'all. Thank y'all. Do we have any more questions? Okay. Ebony, would you like the next item or were you done with your executive report?

EBONY HAVEN: I'm done with the executive report.

JILL HANO: The next item for business is the budget report. So the chair recognizes Ebony Haven for the budget report.

EBONY HAVEN: Okay. Again, if you guys have specific questions about the third quarter budget report it's in your folders. If y'all have specific questions about anything included on that report let me know but I'm going to kind of highlight some things that I talked about yesterday in the executive committee specifically about budget changes to the council's budget.

Yesterday I kind of spoke about the leaked draft budget proposal for FY 26. There was a leaked budget on April 16th. The draft budget proposal from the Office of Management and Budget for fiscal year 26 which begins October 1st, 2025, was leaked and that's basically the president's budget. The document that was leaked was about 68 pages I think and it proposed reorganizing many of our disability and aging programs

including the state councils on developmental disabilities, that's the Louisiana council and all the councils across the country, our sister agencies, the protection and advocacy agencies around the country. Here in Louisiana that's Disability Rights Louisiana. And then the university centers of excellence. And here in Louisiana that is LSU Human Development Center. That proposed budget basically zeroed out all of our funding which means that they were eliminating those programs. So I do want to just say this. The president's budget does not determine which programs are going to be funded. Similar to how we do things here in our state the governor puts forth a budget and the legislature is responsible for funding what they feel is necessary. So it's the same thing on the federal level. Congress will decide what federal programs they're going to fund in that final FY 26 budget which begins on October 1st. We've seen this in a lot of years lately. More than likely Congress will not have agreed. I'm saying that and I'm hoping that there is a lot of discussion before they make an agreement. If they do not make an agreement by October 1st what's going to happen hopefully is they will pass another continuing resolution. And so for FY 25 that's what they did. They basically passed a continuing resolution to fund us at our level funding. And for those who aren't aware our DD Council needs (inaudible) per year. So we got that funding for FY 25. What we don't know is what we're going to get for FY 26. If they do come up with a budget, finalize it. Our advocacy is going to be very important.

So what can we do. We can make sure that we're watching the president's budget as it's finalized as it goes through the process through Congress. We are in constant communication with our national organization, the National Association of Councils on Developmental Disabilities or NACDD. They host meetings twice a month. They were hosting daily updates but they kind of scaled back. Our priority is to make sure that we are up to date on all the information that NACDD is sharing. They've asked us for impact statements. They've asked us for our annual reports for FY 24. They've also asked us for our contingency plans. And our impact statements are what's most important. So

that's why we were asking for you guys to help share stories about anyone that has been impacted by any activities or initiative that the council has put on. If they have participated and become a graduate from Partners in Policymaking we need to know that information. Share your stories. If they participated in the disability voting training last year, or the Youth Leadership Forum, or the emergency preparedness training they had. Any initiative that anyone that you know that's participated in and it's affected their lives we want them to share their stories because it helps us to show the impact of the work of the Louisiana DD Council specifically.

So we're asking you guys to make sure that you're talking to anyone you can. And when opportunities like the lieutenant governor comes and speaks to the council we need to make sure that they are aware of the issues that we're facing right now. I really wish that the conversation that we just had would have been had with the lieutenant governor. So when you get these opportunities like when you're in front of legislators, like Vivienne just said, we need to tell our stories. Make sure that you're telling your stories to anyone that will listen because even if it's a state legislature it doesn't have to be our congressional delegation. Even if it's a state legislator we need to make sure that our voices are heard because if they don't know our stories, if they don't know what we live through every day, if they don't know then they don't know. But our job as advocates are to educate our legislators especially at the congressional delegation. Because once they're educated if they still vote the other way they can't say that they didn't know because we have educated them. We provided the information to them. And so we're asking you guys if you have not signed up for our social media please sign up because we're sharing a lot of things that our national organizations are sharing.

And just to let you guys know we are actively working as your council staff. We are in constant meetings. There have been a lot of collaborations with other disability organizations not just on education bills but collaboration on the 504 lawsuit, collaboration on the federal things that are going on

with Medicaid. So please be on the lookout for any action alerts that we share because what we can't afford to do is for people just to sit idly and not do anything, not have your voices be heard. We have to advocate. What we can't do, and I want to make sure that I say this publicly, we cannot lobby. So as council members you cannot go into a legislator's office and say I'm a DD Council member, I'm asking you to help us get this funding appropriated for Medicaid. Or I'm asking for you as a council member for you to give us the money for this. We can't do that. Now as private citizens, as Ayden Blunschi, as Jill Hano, as Angela Harmon as a private citizen you can ask for whatever you want. But I just kind of want to make sure, we've been given that guidance from our technical assistance, that we want to make sure that we're not lobbying but that we're advocating. We have to educate our legislators on how these changes will affect us. And so I'm just asking for all hands-on deck. Every council member needs to participate. When we send out alerts we are asking that you guys share it with your friends and family that they get on the phone and call because we cannot afford for anybody just to sit down and not do anything. Everybody has to advocate at this point because I think we're just at a vital time in our country's history where we just need all hands-on deck.

And I just wanted to let you guys know that as your council staff we are working diligently to make sure that the people in Washington know what the impact that the Louisiana DD Council has had. And I'll just share that Julie has reached out. She's going to be in DC in a couple of weeks and her national organization she'll be sharing talking points about our specific DD Council. So Brenton and I will be partnering with her. But it's a lot of people, a lot of activity going on. Just need the boots on the ground, our grassroots advocacy organization to activate and make sure your voices are heard. I'm off my soapbox now. Does anybody have any questions?

Oh, the budget. If there are changes to the budget there is a document included in y'alls packet that has the council's current initiatives for FY 25 and the proposed initiatives for FY 26. If there are changes federally to your budget, again, we are working

on contingency plans. And these are just projections. We don't know what's going to happen federally. But we as your council staff are going to make recommendations if there are reductions to your funding. One of the things that we're looking at right now is our lease is up in November so we're looking at office space so that that cost can come down for the council. Again, we don't know what's going to happen federally but all we can do is advocate, advocate, advocate. If there are changes those are things that you guys are going to have to consider looking at which initiatives we may want to reduce. And then as your council staff we are definitely looking at ways that we can save money and reduce costs that may not actually be necessary. Our own little DOGE. Does anybody have any questions about the budget?

JILL HANO: I don't have a budget question but Jules, do you need the self-advocate to go to DC?

JULIE FOSTER HAGAN: The state is not paying for (inaudible) to go but I can ask.

JILL HANO: All right. I see a yellow hand but I can't make out the name.

STEPHANIE CARMONA: The first one is Frank. He is a council member.

JILL HANO: Frank, Mr. Macaluso, you're recognized.

TONY PIONTEK: We can't hear him.

FRANK MACALUSO: Better?

STEPHANIE CARMONA: Yes.

FRANK MACALUSO: I have a question. It's about the budget. The fiscal year 2026, god forbid we get these cuts actually, how is that going to affect the Families Helping Families centers because I just gave a speech about autism at my school and I just gave the Families Helping Families centers a resource they could use.

EBONY HAVEN: So Frank, currently LaCAN and the council are actively advocating for Families Helping Families to get that additional 500,000-dollars that they've gotten for the last four years. Again, the state budget is very uncertain at this time. I think yesterday in the self-determination committee Julie reported that the revenue estimating conference is going to be meeting sometime in May. And until they meet to discuss what changes the legislature made during the special session, and the fact that the

amendment to that constitutional amendment did not pass, they're going to have to do a lot of work to see what's what with the state's budget. So until they meet and we figure out where the state is we don't know if the Families Helping Families centers are going to get that additional 500,000-dollars. Of course we're going to continue to advocate for it but at this time we just don't know.

FRANK MACALUSO: Thank you.

JILL HANO: Ms. Mylinda, you have the floor.

MYLINDA ELLIOT: Towards the beginning of Ebony's section this time she said something about contingency plans. Can you tell me what that means.

EBONY HAVEN: Yeah. So, Mylinda, what they're asking us to do is similar to what LDH does whenever there could be potential budget cuts. So a lot of the councils across the country have projected like a 25 percent budget cut or a 50 percent budget cut or a 75 percent budget cut. What that would mean for their councils and what actions their councils would need to take if those percentages were cut. So that's what we're working on currently. We're looking at our budget. I'm working with LDH budget to figure out like if there was a 25 percent reduction in our $1.38-million that we receive every year from the federal government what would our operation look like. So that's what the contingency plan entails. Did that help answer that question?

MYLINDA ELLIOT: Yes, ma'am. I just wanted to make sure I understood. Thank you.

JILL HANO: Thank you Ms. Mylinda. Thank you Ebony. Do you have more?

EBONY HAVEN: No. I'm done unless anyone else has any questions.

JILL HANO: Okay. No more hands Stef?

STEPHANIE CARMONA: I don't think so.

HANNAH JENKINS: No.

JILL HANO: So at this point in our agenda-- well, it is 12:00 so if there is no objection the council will break for lunch. It is 11:58 so we will meet for lunch for an hour?

EBONY HAVEN: Unless you change it as the chair.

JILL HANO: I didn't know I had that authority. If there's no objection it's basically noon so do y'all

want to break for lunch for an hour and meet back here at 1:00?

SPEAKER: Yes.

JILL HANO: Okay. We are now adjourned for lunch.

(Break)

JILL HANO: So good afternoon y'all. It is 1:04. I hope y'all had a good lunch. The meeting will now come back to order. And we are a little behind schedule so if there is no objection to limiting comments to two or three minutes and three minutes for questions. Does anybody object to that? Good. I thought you wouldn't.

So the next item is our reports. Our first report is the planning committee and I chaired that but it's rather lengthy so I'm going to ask Stephanie to please read the report for the planning committee. So Stephanie, you have the floor.

STEPHANIE CARMONA: So the FFY 2026 action plan ad hoc committee met on Tuesday April 1st, 2025. The draft plan that the committee approved has been included in your packet. During the meeting the committee allocated additional funds to activity 1.1.8 which is the abuse, neglect and exploitation training. The contractor has expressed that they would like to continue working on this project and include short videos for marketing the training as well as educational purposes during the training. They also allocated additional funds to activity 3.1.5 which is the transition to adulthood training. The contractor wants to expand this program to include more training topics. I believe it was three or four additional topics. So it would still include the topics that they are doing this year but just some additional ones that they felt were important. And I don't remember what they were off the top of my head.

Funding was allocated to two new initiatives. Activity 2.1.2 appropriate and accessible sex ed. Which is going to be an inclusive training for teens. And activity 2.3.1 accessible women's health. The committee wants to find an expert to create materials for the accessible women's health and then use those materials, put them in plain language so they're easy to read for everybody. In order to allocate the funds to the new initiatives the committee decided to reduce

funding from activity 1.1.1, which is Partners in Policymaking. They reduced it by 30,000-dollars because at the last committee meeting, so the 2025 plan there were 30,000-dollars added to host an alumni event and that alumni event is every five years. And so since that event is happening this year they will no longer need that for the next year.

And then they also reduced funding from activity 1.2.1 which is People First. Over the last three or four years they did not use all of their funding so they reduced it a little bit to meet closer to what they were spending. They then decided to remove funding from activity 1.1.5 which is updating the website and changing everything to plain language. The website and the documents will be completed so it no longer needs funding. Activity 2.2.3, I'm sorry, 2.2.2 and 2.2.3, and I'm going to kind of talk about them together because they are for the fetal alcohol spectrum disorder training and awareness. The first one was an awareness project so it does not need to be continued. And then the second one was a pilot program and we helped with funding for the pilot so they are no longer going to need that funding. So after reading and approving the draft plan the committee motioned to send the draft plan for the FFY 2026 action plan to the full council for consideration.

JILL HANO: Okay. Thank you so much. So that was my report for the planning committee. Any questions? Anything in person? Angela.

ANGELA HARMON: Activity 2.1.2, just a clarification for me. Who's actually doing this? Like the school, hiring somebody? What is that going to look like? We're providing support to who?

BRENTON ANDRUS: You would have to put out a proposal to see. Like all of your new contracts we put out proposals to see who is able to provide that service.

ANGELA HARMON: All right. That's all I wanted to know.

JILL HANO: Vivienne, you're recognized.

VIVIENNE WEBB: Didn't y'all find one with a decent price range that YLF used that was pretty good?

JILL HANO: The only thing I remember about this is I gave them the name.

BRENTON ANDRUS: We have the name. They could respond to the proposal that we put out. We have to make it equitable for folks that apply. But yeah, I don't remember the name off the top of my head but we do have that name. If you decide to move forward with that initiative when we put the proposal out they can certainly apply to be able to provide that statewide.

JILL HANO: Rebecca.

REBECCA FRUGE: I'm Rebecca Fruge. I'm the coordinator for Partners in Policymaking. Most of y'all already know me. I'm just available to answer any questions y'all might have about the program and the funding. What was stated is correct. We do have a reunion this year. It's August 29th through 30th. So those extra funds that we got last year were going to go to that. There is a little more that's on there. We could do with a little less. I just want y'all to keep in mind about every 10,000-dollars equals about 500 participants. The goal's always to have as many participants as we can. This year it's approximately 20 and we're going to do that with about 100,000. So 115 we would be able to do 25 participants. Kind of what I wanted to explain to y'all depending on where the participant is coming from, whether they're a self-advocate and require assistance, to have a private hotel room, those kind of things. It will average anywhere from 1500 to 3,000 for the program beginning to end. So I just wanted to introduce myself and happy to answer any questions about the program. Thank you.

JILL HANO: Thank you. Any more questions in the room? Lil, you have the floor.

LILLIAN DEJEAN: Hi everyone. Thank you for taking my question. I just had a question about activity 1.1.7 Louisiana Youth Leadership Forum. It looks like this format has a strike through and red text with the proposed adjustment. For LA YLF there is that strike through in the red but the funding level doesn't seem to change so I just wanted to clarify YLF will be maintaining the same amount of funding for fiscal year 25 to 26.

STEPHANIE CARMONA: I can answer that question. This is Stephanie. I'm going to answer that question only because I edited the document. So you're correct, the funding amount did not change. And if you look at

other ones the reason that it has that strike through is because I was just changing the year. The 2025 is last year and then this is going to be the new year, 2026, so I just wanted to show there was an edit there. But the amount did not change.

LILLIAN DEJEAN: Perfect. Thank you guys.

JILL HANO: Any more hands?

HANNAH JENKINS: No, ma'am.

JILL HANO: So I need a motion to approve the 2026 draft plan.

ERICK TAYLOR: I motion to approve the 2026 draft.

JILL HANO: Okay. Motioned by Erick. Second by?

SPEAKER: I will.

JILL HANO: Thank y'all so much. It is moved that the FY 26 action plan-- because the motion is coming from a committee it does not require a second. Is there any further discussion? Any public comment? Thank y'all. Are y'all ready for the question?

TONY PIONTEK: I can second the FFY 2026 action plan.

JILL HANO: Thank you. Are y'all ready for the question? Frank, you are recognized. Can I ask a question? Frank, did you have your hand raised?

FRANK MACALUSO: I did.

TONY PIONTEK: I did, Tony.

BRENTON ANDRUS: So if Tony and Frank have questions just take them in that order of what they wanted to say.

JILL HANO: Okay. Frank, you are recognized by the chair.

FRANK MACALUSO: I propose I would like to accept the motion.

JILL HANO: Thank you. Okay. So now we have a roll call vote. So if you accept the FY 26 action plan say yes when your name is called. If you are opposed say no. If you abstain say abstain. Ebony, will you please call the roll.

EBONY HAVEN: Ms. Hannah Jenkins is going to take the roll call for me.

JILL HANO: Okay. Ms. Hannah Jenkins will you take the roll call?

HANNAH JENKINS: Gladly.

JILL HANO: Thank you.

HANNAH JENKINS: Dr. Barovechio.

PATTI BAROVECHIO: Abstain.
HANNAH JENKINS: Dr. Barovechio abstains. Ms. Bayham.
MELISSA BAYHAM: Yes.
HANNAH JENKINS: Ms. Bayham, yes. Mr. Bennett.
BRIAN BENNETT: Yes.
HANNAH JENKINS: Mr. Bennett, yes. Mr. Billings. Mr. Blunschi.
AYDEN BLUNSCHI: Yes.
HANNAH JENKINS: Mr. Blunschi, yes. Mr. Boynton. Ms. Chachere.
ALAINA CHACHERE: Yes.
HANNAH JENKINS: Ms. Chachere, yes. Ms. Crain.
CHERI CRAIN: Yes.
HANNAH JENKINS: Ms. Crain, yes. Mr. Ennis.
JAMAR ENNIS: Yes.
HANNAH JENKINS: Mr. Ennis, yes. Ms. Hagan.
JULIE FOSTER HAGAN: Yes.
HANNAH JENKINS: Ms. Hagan, yes. Ms. Hano.
JILL HANO: Yes.
HANNAH JENKINS: Ms. Hano, yes. Ms. Harmon.
ANGELA HARMON: Yes.
HANNAH JENKINS: Ms. Harmon, yes. Ms. Jordan.
MERIDITH JORDAN: Abstain.
HANNAH JENKINS: Ms. Jordan, abstain. Ms. Kelly Aduli.
KELLY ADULI: Yes.
HANNAH JENKINS: Kelly Aduli, yes. Mr. Macaluso.
FRANK MACALUSO: Yes.
HANNAH JENKINS: Mr. Macaluso, yes. Dr. Meda.
LAMARTINE MEDA: Yes.
HANNAH JENKINS: Dr. Meda, yes. Ms. Nguyen. Mr. Piontek. Tony. Tony, you have to unmute.
TONY PIONTEK: Yes.
HANNAH JENKINS: Mr. Piontek, yes. Mr. Rocca.
TORY ROCCA: Yes.
HANNAH JENKINS: Mr. Rocca, yes. Mr. Smith.
ROBBY SMITH JR.: Yes.
HANNAH JENKINS: Mr. Smith, yes. Ms. Stewart. Mr. Taylor.
ERICK TAYLOR: Yes.
HANNAH JENKINS: Mr. Taylor, yes. Ms. Washington. Ms. Webb.
VIVIENNE WEBB: Yes.

HANNAH JENKINS: Ms. Webb, yes. Mr. Williams.

GEARRY WILLIAMS: Yes.

HANNAH JENKINS: Mr. Williams, yes. Dr. Wilson. Dr. Xu.

KAREN XU: Yes.

HANNAH JENKINS: Dr. Xu, yes.

BRENTON ANDRUS: Nineteen yeas, two abstentions.

JILL HANO: Thank you Hannah. Eighteen yeas, two abstentions. The motion passes. Do we vote on the budget?

BRENTON ANDRUS: I think this was just to give you information.

JILL HANO: Okay.

EBONY HAVEN: It's all one.

JILL HANO: The next item of business is the report from Act 378 subcommittee and I'm almost positive that Ms. Harmon will give that report.

ANGELA HARMON: Yes, thank you, Jill. The Act 378 subcommittee met yesterday and we do not have any recommendations for the council to consider at this time. We did spend time reviewing the fiscal year 25 third quarter data for the programs in the Office for Citizens with Developmental Disabilities and Behavioral Health, and Aging and Adult Services/the Arc of Louisiana. These reports can be found linked in our committee agenda on the council's meeting web page if you would like to review.

There were a few questions about the OBH report showing Imperial Calcasieu Human Service District having a negative balance of 10,582. It was explained that this is due to a reduction in funding due to a federal grant that was terminated. Based on the information provided it appears that all the local governing entities or LGEs are on target with their expenditures for the individual and family support consumer care resources, supported living and flexible family fund.

House Bill 559 by Representative Echols was also discussed. The bill was written and would bring the LGEs back under the control of LDH. The LGE directors would work at the will of the LDH secretary and the (inaudible) statewide issues. Currently the LGE board is responsible for hiring LGE directors, making plans based on needs of their local community. By bringing

hiring authority back under the department it would significantly reduce the authority of the LGE boards. On April 29th health and welfare discussed this bill and a need for more oversight and accountability for the LGEs were expressed. Public testimony was also provided by some of the directors of the LGEs and Representative Echols then committed to working with all parties to ensure the bill is in a posture that benefits everyone. The bill was deferred and will be heard next week. If you work closely with the LGE in your region or have an opinion we strongly recommend that you reach out to your legislators to have your voice heard. Thanks Jill.

JILL HANO: Thank you Ms. Harmon. Any questions? Thank you. This report requires no action and will be placed on file. The next item of business is education. The chair recognizes Vivienne.

VIVIENNE WEBB: Okay, cool. So yesterday on April 30th we received important updates from Louisiana Rehabilitation Services and the Louisiana Department of Education about programs and changes affecting students with disabilities. The LRS update from Melissa Bayham of preemployment transition services. LRS continues to work with school districts on third-party cooperative arrangements. They've reviewed applications from private vendors who want to provide preemployment services to make sure they are meeting certain criteria. Out of all who applied 27 were approved, two are still pending and five chose not to reapply. All vendors must use state approved curriculum or get theirs approved. LRS is waiting to see what the state budget will be for next year. Right now they are spending more than 15 percent of their federal funds for preemployment transition services so they may have to cut back.

LDOE update from Meredith Jordan. Teacher leader summit in June will include sessions on special education, best teaching practices, behavior supports, IEP guidance as well as many other sessions. Policy updates on special education policies. Bulletins are now updated but they may need to be changed again after the legislative session. These changes have been approved by SEAP, superintendents and BESE. Bulletin 1530 IEP updated the rule for alternate assessments

like LEAP Connect. Louisiana was testing more students than allowed under federal rules. Only students with significant cognitive disabilities will qualify starting in 2025-2026. Current high school students are grandfathered in. New students who do not qualify can still earn a diploma under the April Dunn Act. Bulletin 1508 (inaudible) pupil appraisal handbook better definition of response to intervention. Added a licensed psychologist and speech language pathologist assistants. (Inaudible) more screenings. Updated autism criteria to match current standards. Simplified how schools can use out of state diagnoses and medication information.

Legislative updates from Ebony Haven. House Bill 237 by Representative Mack. This bill was drafted under the legislative audit on restraint and seclusion practices. Drafted with the help from Disability Rights Louisiana, the Arc of Louisiana and the disabilities council. Key points in seclusion in schools. It's not best practice obviously. Defines what physical restraint is and who can use it. Requires monitoring during and after restraint. A nurse will help staff to check on a student ASAP. A report sent to parents within 24 hours. Video review if available to check for policy compliance. Behavior intervention plans must be reviewed after three incidents down from five. Schools must post their policies and LDOE must review these policies yearly.

House Bill 589 requires the legislature to vote every two years on whether they want certain reports. LDOE will still collect and publish their data regardless. Contractual activities. The committee also got updates on contracts for goal three of the school year 25 action plan. Members are encouraged to check the quarterly status update and linked documents in the agenda for details on each activity.

JILL HANO: All right. Thank you Vivienne. Are there any council members with questions on the report? Are there any public comment? Okay. This report requires no action and will be placed on file. The next item of business is the self-determination committee report. The chair recognizes Brooke Stewart. You have the floor.

BROOKE STEWART: Thank you. The self-determination

and community inclusion committee met yesterday and does not have any recommendations to present to the council at this time. We received a lot of great updates from the Office of Citizens with Developmental Disabilities or OCDD Medicaid Office of Aging and Adult Services or OAAS and staff. During the meeting Julie Foster Hagan, Brian Bennett and Gearry Williams shared multiple updates about their departments and issues on the state and federal level. Some of these updates can be found in their agency reports which are included in your council meeting packet.

A couple of things I wanted to mention. The council was informed that the state budget is currently going through the process of legislative session and all services are at a standstill with no increases or decreases. However, as a result of Governor Landry's request to look into the efficiencies for a reduction in cost community outreach specialist contracts with Early Steps, some held by Families Helping Families, will not be renewed effective July 1st. This job will now be completed by Early Steps staff. The contract with the Arc or People First funding totaled 110,000-dollars was eliminated. Medicaid allowance up to 50 percent administrative match will now be replaced with 50 percent CMS administrative match to cover some (inaudible) salaries which equals about 4.2-million. It was shared that while the state general fund may have shown a reduction for these positions there is an increase in interagency transfer. There is a question of how the state would cover the CMS portion of staff salaries should Medicaid see a cut at the federal level. The revenue estimating conference will likely meet in May to discuss the state revenue forecast meaning how much money the state will bring in next year. Hopefully after that meeting we will have a better idea of estimated state dollars and any need for cuts or increases.

Our new LDH Secretary Bruce Greenstein started last week and held a press conference to share his areas of focus which include implementing Project Mom which focuses on maternal overdose mortality, fraud, waste and abuse task force, reforming the Medicaid pharmacy benefits management, behavioral health and how it connects with intellectual and developmental

disabilities and chronic disease. And also House Bill 559 by Representative Echols was discussed. As written this bill will bring local governing entities or LGEs back under LDH's control rather than local. If you work closely with the LGE in your region and have an opinion positive or negative it is strongly recommended that you reach out to your legislator to get your voice heard.

Lastly, we discussed the contractual activities under goal one and two in our plan. I encourage you to review the status of planned activities document in your meeting packet for updates on those initiatives.

JILL HANO: Thank you Brooke. Are there any council member questions on the report? Any public comment or questions? This report requires no action and will be placed on file. The next item of business is our standing member reports. Please refer to your report in your packet. Our first report is the Governor's Office of Disability Affairs. The chair recognizes Liam Doyle.

LIAM DOYLE: Good afternoon. The 2025 legislative session convened on Monday April 14th and will adjourn on Thursday June 12th. The Governor's Office for Disability Affairs is monitoring all legislative activities, legislative instruments and disability related legislation from the 2025 regular session. The Governor's Office of Disability Affairs invites all organizations and representatives to meet with the executive director Mr. Jamar Ennis to discuss their legislative positions.

We have a disability day at the capitol. It's scheduled for June 2nd, 2025. The Split-Second Foundation and the Governor's Advisory Council on Disability Affairs or GACDA will cohost the 2025 disability rights day at the capitol. This event will enable disability-based organizations to meet and interact with legislators, the Governor's Advisory Council on Disability Affairs and state leaders during the 2025 regular session to emphasize the importance of their work in their communities. There will be between 15 and 20 participating organizations at disability awareness day at the capitol event. Participants will be allowed to set up a table at the capitol rotunda to share information about their organizations. An

itinerary and schedule will be made available on May 8th which will be next week. So give us another week. If your organization would like to sign up it's not too late. Go ahead and reach out to Jamar or myself and we'll be happy to get you on the list.

Lastly, we have our annual conference. The Governor's Office of Disability Affairs is in the midst of planning the 2025 GODA conference. We are accepting proposals and topics for breakout sessions. That conference will take place in July on the 22nd and 23rd of that month. We have space in the Claiborne building reserved. The deadline for applications is May 16th. That's all I have.

JILL HANO: Thank you. Are there any questions about this report? Any comments or questions? Thank you. The next item is the Bureau of Health Services Financing which is Medicaid. And the chair recognizes Mr. Brian Bennett for his report.

BRIAN BENNETT: Thank you Jill. So my report is blue in the packet. So the first part of the report I included a few news items or updates. The one I wanted to spend the most time talking about is the Beneficiary Advisory Council. Probably a lot of you have heard lately, I know Julie has talked in the past about the access rule. That's a new federal rule that was finalized and published last year in 2024. A whole host of different requirements for home and community-based services that all states will have to come into compliance with over the next couple of years. A fairly large redesign for all of our home and community-based services, programs.

One of the first requirements that's coming up in that rule is states have to form a Beneficiary Advisory Council. This council will kind of serve as a subcommittee to the larger Medicaid committee. And we put out a call for applications. They actually closed yesterday during the month of April. So in the next probably a week or two we'll start looking at those applications to select members with the goal of having that first meeting either in June or late July. But what's special about this committee is that this committee will be comprised of Medicaid members receiving home and community-based services, their parents or guardians or providers or direct support

workers. This committee will help to inform the larger (inaudible) of any issues directly from the perspective of those receiving home and community-based services. And also there will be a few members on this committee that will also serve a dual rule on the larger Medicaid committee. I just wanted to let everybody know about that.

As of last week we did receive around 65 applications as of last week so we had a pretty good response. And we're going to try to select members from across the different programs. So ideally we would like representation from people that are receiving services through OAAS programs and Office of Behavioral Health programs. With that we also want to get Medicaid members, parents, guardians and providers and direct support workers just so we can have a wide view of experiences on the committee so that they can provide that.

Something else that is fairly new is LDH is working with our MCO plans to form a workgroup to look at applied behavioral analysis services or ABA services. It's still very early on in the process. In fact, we're having a workgroup this morning. But the intent is we're trying to bring all the plans together to try to standardize what we can. That's some of the feedback that we've heard is that they all do things kind of differently as far as (inaudible) so we're working with them to see if it makes sense to standardize any of those things and if it does we will. And then another big goal is to try to get children into that service quicker so that there's not a long wait to start receiving those services.

VIVIENNE WEBB: Would you be standardizing as well for adults who need ABA across the board because there's nowhere that does that? The nearest place is Monroe.

BRIAN BENNETT: I would have to check into that. I know right now we're just looking at the services that's a Medicaid covered benefit. But what I hope to do as we get further into this workgroup either myself, or ideally I would like to bring the staff that works directly with ABA programs, the managers to come to maybe the self-determination committee to share some of the things that they're working on once they have a

concrete plan. Plan to do that maybe next quarter or quarter after that. I will say this work will probably be going on for about a year. It's not a short-term project. More of a long-term project. We'll identify things to work on throughout the (inaudible).

I've also mentioned in some of my past reports the justice involved initiative that we have going on. Just provide a quick update on that. What both of these do we have an 1115 waiver and it will provide pre-released Medicaid coverage to adults that are incarcerated but that are scheduled for release. And also we have kind of a corresponding component that will target children or children or youth that are incarcerated but also scheduled to release to get them pre-released Medicaid coverage to make sure that they're signed up for Medicaid before they're released to go back home or back into the community to try to facilitate that integration process. Those are two different pieces of work we're working on.

For the 1115 demonstration, that's the one for the adults. We submitted our application to CMS back in the fall or late summer/fall 2024. We're still waiting for additional feedback from CMS on that. I think with the change in the federal administration that transition has kind of slowed the process of that one down. But as far as the youth piece we are looking to start that on July the 1st. That's our tentative start date for that. And we are working very closely with the Office of Juvenile Justice and some of the other state correctional facilities on that.

For the remainder of the report I have some updates, numbers and data for some of our services and programs. But I wanted to spend the rest of my time providing some more information on dental. I know that's come up over the last one or two meetings. And I talked to our dental staff just to get some additional information on that. I know in the past there was a question about out-of-pocket costs for Medicaid members. Should there ever be out-of-pocket costs. And the answer to that is no but you need to, just like any insurance, you would need to look into your member handbook to make sure that they look at all the services that are covered in your benefit. And you would also have to look at your plan provider directory

and get services through one of those providers who are enrolled in Medicaid. The provider does have to be enrolled in Medicaid in order to be reimbursed.

One thing that the plans have done recently though is they've been looking at their provider directories to make sure the providers that are listed are actually willing and able to provide services. So if a Medicaid member goes onto their plan's website, either MCNA or DentaQuest, those are the two plans, and they search for a provider they can now select the department type. So if it's the children's program, if it's the adult waiver program, the ICF program they can make that selection and then I think you can also choose your (inaudible) or whenever you live and it will return the providers that are in your area for those specific programs. So that's one thing that the plans have been trying to do lately is to make sure they have an accurate listing of providers in the programs. Also with MCNA they've begun reaching out to some of our ICF facilities to let them know and to work more closely with them to let them know which providers are in their area so they are familiar with those providers. Anybody have any questions?

MERIDITH JORDAN: I'm going to step in and cover for Jill while she takes a break for a minute. And my report is next and I'm going to talk a little bit about ABA too. Are y'all seeing an increase, I suspect you are, with the ABA Medicaid requests?

BRIAN BENNETT: Yes. Over the past few years we've seen a fairly large increase. And I'm just looking at it from the claims' perspective and the amount of payments. We've seen a fairly large increase.

MERIDITH JORDAN: Okay. I think I'll compliment a little bit what you've talked about. Any further discussion on this report from the council? None. Any public comments on this report? None. All right. No further comments. This report will be placed on file. No further action is needed so we'll place this one on file. I'll turn it back over to Jill for you to just call on me.

JILL HANO: Okay. So the next report is Meredith Jordan from the Department of Education. Ms. Liz Gary, you have the floor.

LIZ GARY: Thank you Jill. Can y'all hear me?

JILL HANO: Yes, ma'am.

LIZ GARY: Great. Thank you. I just had a question back on the ABA that I think it was Meredith that just mentioned, asked something to Brian about. My question is do we know if it's ever been cleared up as to who can get the ABA if they're on Medicaid. And I'm asking this because I've heard, this happened to me probably ten years ago, and I've heard that it's still a problem where my son with down syndrome was rejected from ABA Medicaid because they didn't have in quotes a code in the system. And once I got to the secretary of Department of Health it was cleared up that it is not related to a specific disability as long as there was a prescription as well as a doctor recommendation that a child with a disability who would benefit from it would be allowed to receive it. I'm just trying to find out if that has ever been fixed because as recently as a year ago I was hearing complaints again from families who had children with down syndrome that could benefit from the ABA being rejected because they were not supposably covered under the law.

BRIAN BENNETT: Liz, this is Brian. I will have to take that question back and ask the ABA manager on that. Is the question specifically how they determine eligibility for the program?

LIZ GARY: Well, not so much. The problem I was having as recently as a year ago it wasn't so much-- well, yes. I guess it was eligibility because the law stated any behavioral disorder that had a prescription including autism and every time somebody would call to try to get the service, even the ABA clinics were having problems, they were told down syndrome was not covered which was not factual.

BRIAN BENNETT: I will look into that, Liz, and I will reach out to you directly and then I'll also have an update for the council at the next meeting.

LIZ GARY: I greatly appreciate that. Thank you Brian. Thank you Jill.

JILL HANO: Thank you. I miss you.

LIZ GARY: I miss you too.

JILL HANO: Any more questions for Brian? Hearing none this report requires no action and will be placed on file. The next item of business is the report from the Department of Ed. The chair recognizes Meredith

Jordan for her report.

MERIDITH JORDAN: Thank you madam chair. So mine is on the pink paper. I want to just start, I won't harp on this for long because I know we've talked about it some last meeting, about our results as they were being released while we were meeting. But wanted to share with you, I know you all can appreciate a good visual and some nice data. And so I wanted to include a couple of visuals about our latest data that we talked about a little bit. And really the remarkable results that our students with disabilities are showing both in performance and growth outgrowing other students with disabilities across the country. And just wanted to provide those visuals, again, celebrating our students and our parents, all of our community members. It takes every single one of us to keep growing and keep getting the results that we want to see. All the policy work that people around this table, my SEAP panel, just a lot of people really coming together to help us do better for our kids and I know we're just going to continue in that.

So moving forward we do have open right now for public comment our draft IDEA funding application. We talked about this a little bit in depth yesterday at committee. Again, this draft is still based on funding from last year. Our current funding amount we don't have final funding. I inquired again this morning about it. And we should, hoping to receive our next funding amount within the next couple of weeks because this application is due on May 20th I believe to the US Department of Education. So hoping to see those dollar amounts soon. Again, just to let the full council know we have no indication that it's going to drop. We have every indication that it should at least remain as last year. So that's out for public comment for anyone who's interested in going there and showing support for our funding and/or providing additional feedback on the application.

Just to provide a quick update on SEAP. Our last meeting was March the 26th. They did some great policy work at the last SEAP meeting as well that we also detailed yesterday in committee. I wanted to talk additionally about the seclusion and restraint audit report at SEAP that we've also talked about here and

kind of what were some next steps. We are going to meet with SEAP again on June 18th. Really want to start thinking about moving into next year what are their desires, wishes, priorities, continued supports that they want to see. And so we'll meet with SEAP again June 18th. I do have applications open for just a handful of SEAP. I don't have a lot of vacancies. I know I tell y'all this all the time. I want to take everybody but we have limited seats. But we are looking for an individual with a disability, a teacher and one parent of a student with a disability. And I have some of those vacancies who are also potentially going to reapply for a second term. So limited seats but please apply. I want to take everybody if I could. But those applications are open. And if you click on the link here you can just email the application to us at specialeducation@la.gov.

The next update is we currently have our special education parent involvement survey open. Every year we are required to survey the parents of our children with disabilities. The purpose is to really get feedback on how well our schools are doing to both involve parents and make them feel a welcomed part of the process. And that is how we use that information, this particular survey, to also guide our efforts at the state. We provide those results for the individual school systems who are chosen to participate. We also give those results to them. It also factors into, and I brought my data person with me sitting in the back from our team just to kind of hear our conversations. And we also use those results in our local LEA's determination. So we kind of give them a score on how well they're doing based on how their parents are answering on this particular survey. It's a part of how well they are doing. Because that particular feedback should drive us. It matters. So we have the LEAs listed here who are selected. So we have to provide a representative sample of our survey results up to the federal government as part of our reporting. These are the selected LEAs. Letters have gone out. My team creates these letters. We try to make it as easy as possible on LEAs to get these letters to the parents as well as a secure ID so that each parent can anonymously access the survey with a pass code and

anonymously give their feedback and input.

So you see the ones here who are chosen as part of that survey result. However, I have another link at the bottom that any parent can take. That we can kind of use broader results to also help guide us as a state. But there is a certain subsection, that's the ones you see listed in the chart, that we report to the feds as part of our reporting. We leave it open through the summer. We have parents who call Ms. (inaudible) who's sitting in the back right here and they will call her. They can give her their results. She will answer them. So we try to make the survey as accessible as possible. We have parents who will mail the survey in to us and we will accept it and enter it that way. And certainly they can accept it and do it online then that's a way that they can access the survey as well. So we have that going on through the summer.

My next update we also have our kindergarten dyslexia screener open right now. We had Act 266 in 2023. So this is our second year of kindergarten dyslexia screener. It is at no cost. Every single kindergartener in our state is provided this dyslexia screening and we have this particular screening open right now.

I also want to give a quick numeracy update. We've done a lot in our state around literacy and we're seeing the results of that, even for our students with disabilities, making sure they have access to high-quality literacy instruction. We have added a focus on foundational numeracy skills. You see that also reflected in the council's plan too around financial literacy. BESE has added that financial literacy as a required component of high school course work for all students now as well so I like how those things kind of nicely align with the council's plan here as well.

We have developed a full suite. One of the things we realized when you go out and look for high-quality training on foundational numeracy skills there's not a lot out there that is free developed. So in Louisiana we got our experts together who know and understand our math standards and those early foundational skills. All students, all grades four through eight mathematics

teachers are required to complete this training. This also includes our special educators and educators who are touching our students with disabilities. Their foundational literacy and foundational math are critical to their educational success. And making sure we are closing those gaps and helping them move forward in these skills. So we have that training happening.

And honestly, guys, what you also find a lot of times in mathematics, I was an ELA teacher, right, and I have said I'm not a math teacher, right. You don't want me teaching math. But what we see too is just in general finding educators who know deeply math and math concepts is getting harder and harder. What this particular training does is it's not just strategy. It is also helping to ensure that our teachers understand deeply math concept. It is supporting them through the same math that we're requiring, that foundational math that we're requiring our students. So it's really an incredible training that I would put next to nothing across the country. Because there really isn't a whole lot of training that will do this. I'm really excited about this and excited about the support this is going to provide for our kids with disabilities and the importance of that foundational math for them. And building the capacity of our teachers to be able to do that and help support those challenges.

I have an update here on the ABA guidance document that we just released that speaks to a little bit to what Mr. Bennett has definitely connected to it. In the 2024 legislative session Act 745 was updated around applied behavior analysis services in schools and it changed that statute a bit. And so what we are trying to do through this guidance document is to communicate with school system leaders, communicate with educators about that update. What the requirements are to help them with implementation of that and help them with the implementation of applied behavior analysis in schools. We already have our state's policy updated to be in alignment with those updates from that legislative session. And so really just wanting to assist our schools and our school system leaders in effective implementation. I think we will stay really close to this as we continue to offer what are the options to support behaviors in school and some of these needed

services. So we have that guidance document out there and ongoing support happening.

We are in our SEAC report collection period right now. So public data of Special Education Advisory Council report. I know that's something that this group has been really in tuned to and knowing and understanding what local special education advisory councils in your areas are doing. So we're collecting these through May because quite honestly some of these groups could still be meeting. It's May so they could still be meeting and we'll collect those and then those will go to possibly June SEAP meeting. I will have a report on all of those links for every school system. Or it could go into our SEAP, our September SEAP, but either way I will also bring that public report back to you all as well.

And then last but not least we also have our SPED fellow application that's opened. This is our program to support new special education directors across our state. So those who are leading special education either in their first year, second year or third year. And I also have one last, save the best for last, one announcement for a save the date. We are partnering with the Arc for a day of support and learning for parents of children with disabilities. We're really excited. And it's a first for me since I've been here and certainly something that we hope that we can also continue to do annually. It's going to be on July 21st from 9 to 3 at the Lod Cook center. Definitely watch the Arc. They are kind of communicating, taking the lead. We partnered with them to get this event done and organized and a really great agenda for parents. Also other agencies around this table be on the lookout we'll probably reach out to you. We want to have some really great community resources. It doesn't have to be all education but one of the resources if we get all parents in a room we do want to share with them and make sure that they have access to. And that completes my report.

JILL HANO: Thank you Meredith. I do have a question. The numeracy, did you say Act 260? Because I heard 261 but I wrote 260.

MERIDITH JORDAN: I probably said it wrong. It's act 260.

JILL HANO: All right. Thank you. Any questions for Meredith? Anything online? All right. Thank you. This report requires no action and will be placed on file. The next item of business is the report from Disability Rights of Louisiana. The chair recognizes Mr. Tory Rocca for the report.

TORY ROCCA: Thank you Jill. It's Tory. Highlights of our program. Updates on those activities. So our client assistance program is our program that helps people with disabilities who are receiving or applying for services from Louisiana Rehabilitative Services and American Indian Rehabilitative Services. We are currently with that program assisting 32 people regarding problems receiving and maintaining vocational and rehabilitation services. They are currently focusing on training people with disabilities and their family members about employment prior to the traditional transition age. And they are working with statewide partners to organize a statewide conference focusing on disability employment. Hope I will have more details about that soon but currently I do not have more details about that.

Or community living ombudsman program. In that program trained advocates as ombudsman advocate for people with developmental disabilities who live in ICFDDs across the state in order to maintain their rights. Currently there are 481 publicly funded privately run ICFDD facilities housing just over 3900 individuals with developmental disabilities in Louisiana. In January of this year, and I apologize for updating a few months ago, but this is the most current information I have from our program directors. There's always a lag with these reports. Our ombudsman in that program in January alone visited 139 of the 481 facilities and received 72 requests for assistance from residents and took action on all of those requests. For the fourth quarter of last year the ombudsman visited 413 facilities and saw over 2500 residents during that quarter. And as a result of those actions we were able to help residents transfer to the community on a waiver, stop an involuntary discharge, get more opportunities to visit with the family, have a staff person who was physically abusive removed from a

home and give people information on their rights.

In our supported independent living advocacy program that serves individuals with developmental disabilities who are receiving OCDD waiver service and supports in their homes and communities. We are currently with that program assisting 40 people with obtaining and maintaining appropriate and necessary supports.

And our representative payee program we strengthen protections for social security beneficiaries. That program provides oversight to representative payees regarding their services to beneficiaries. Since the beginning of this year for the program, which was August 1st of 2024, we have finished 59 percent of the target number of cases for the year. We currently have about 15 cases in progress and we should meet our goal of handling all the cases.

In our financial access and inclusion and resource program we provide financial coaching and case management services to assist formally incarcerated people with disabilities in overcoming employment and resource barriers. We recently reported to the City of New Orleans because this program operates in New Orleans and unfortunately not beyond that because we just don't have the funding for that. This program is entirely privately funded with funds we raised from private donors. Halfway through our two-year grant we're 80 percent away to reaching our goal of providing financial coaching and case management services to 25 formerly incarcerated Orleans Parish residents with disabilities. In 2024 we provided financial coaching and case management services to a total of 36 Orleans Parish residents, 22 or 61 percent of 36 active clients were employed during this period. Fifteen or 42 percent of them maintained their jobs for over 90 days. And almost 2/3rds of our clients have achieved employment during this period. We anticipate that with time a larger percent of clients will be able to reach their goal of maintaining their jobs for over 90 days. Seventeen or 47 percent of the 36 active clients have increased their income while in the FAIR program with a collective total of over 17,000-dollars a month. Five of the 36 active clients entered the program with debts. Of those clients who reported existing debits--

I think those numbers are a little off. Eighty percent have reduced their debit by a collective total of 21,000-dollars. And that's all I got.

JILL HANO: Any questions? Thank you Tory. Any questions from the council? This report will be placed on file. All right. The next item of business is the Office of Aging and Adult Services, Mr. Williams.

GEARRY WILLIAMS: Thank you. Good afternoon. The report is pretty straight forward. Going to highlight a couple of things as it relates to our community choices waiver, CCW waiver. Again, pretty straight forward. The CCW certifications right now we are ahead on fiscal year comparison. Right now we have this fiscal year we've certified 781 participants so far this fiscal year so we are excited about that. We are way ahead of where we were last fiscal year at the same time. We continue to provide support to the support coordinating agencies. They remain challenged with staffing and being able to move from (inaudible) certifications. I definitely applaud our staff in our regional offices. We are providing a lot of support to those supported coordination agencies because we want to ensure as best we can that participants get the services they need in the most timely fashion. As I've pointed out before the CCW wait time is 13 and half years but that is for participants who are receiving other services. For those, the wait time for those without any HCBS services is nine months with the community choices waiver.

Moving down to adult protective services. We have seen a bit of an uptick. I believe I covered at a previous meeting that we did a public awareness campaign around adult protective services. On social media there was some billboards in certain parts of the state helping the public at large recognize what exploitation looks like. Whether that's abuse, neglect or financial exploitation. So since we did that campaign we have seen a slight uptick in the number of abuse, neglect and exploitation cases that have been reported since running that public awareness campaign. Glad to see that at least those are all from referrals that we are receiving now.

Going to the third page. We link this in our report because we continue to (inaudible) as far as

day-to-day operations are concerned and that's the nationwide labor and workforce shortages that we're dealing with. And that's one reason why we have issues or challenges I should say with direct service workers as well as support coordination agencies trying to maintain staff. As outlined beginning in 24 we've continued, into this fiscal year 2025 we continue to offer training opportunities to those direct service workers, providers in homes of helping with retention of those workers. Hopefully that training is making a difference and having them better prepared to provide services to our participants as well as provide continuing education units.

As we move down to 2024 also want to highlight our progress with our rate analysis, the rate setting activities. We're still having ongoing meetings related to that. Any questions for me?

JILL HANO: Any questions? Hearing none. Are there any public comment? Okay. How are we on time? If there are no objections we will take a ten-minute recess. It is 2:28. We will convene at 2:38. Thank you.

(Break)

JILL HANO: It is 2:40. Welcome back. Our next item of business is the report from Governor’s Office of Elderly Affairs. The chair recognizes Ms. Cheri Crain for her report.

CHERI CRAIN: Good afternoon everybody. This is Cheri with the Governor's Office of Elderly Affairs. And I think the wrong report is up but I'm not there to tell you what color paper it is on. I'm just going to give highlights of my report. If you go down to the first page elderly protective services we just kind of give that data on how many cases we have received in our office since July 1 of 2024. It's 4,665 cases with the highest being financial exploitations of 1,548 cases followed by self-neglect at 1,421 cases. Which those two normally are the highest case numbers. I kind of talked about in recent reports for this year and last year where we did hire additional and got additional positions from legislation on the elderly protective investigators. So we have been tracking data and the timeframes have shortened substantially since we got those extra positions so that's good. But

it also has brought additional cases on too. We're just trying to find that happy medium where the timeframe is shortened and the caseload is not as high. So it is showing, we're just working on trying to tweak that to make it fair across every region, which is a little bit difficult.

MIPPA, that is our Medicare Improvement for Patient and Providers Act program. Open enrollment is coming in October. And I'm just going to highlight the recent news. We hosted, we do an annual, biannual, sorry, conference with our Councils on Aging, our directors there and then some of their key staff personnel. So we had that conference this year April 1st through 3rd at the Crowne Plaza in Baton Rouge. We had over 100 attendees and it was a huge success. I kind of talked about the next point where we had to update our policies and procedure manual for those Councils on Aging due to the Older Americans Act being changed. And that hadn't been changed in a number of years so we had updated that. We completed that. It is now on our website. You're more than welcome to go look at it.

Our next board meeting for our executive board on aging, they meet quarterly, will be held June 24th of 2025. Next month in May is our Older Americans month. This year the theme is set by the ACL which is the Administration for Community Living. It is flip the script on aging. I have provided a link if you would like some more information on that. And of course we need to remind everybody that hurricane season is right around the corner. Starts June 1st and ends November 30th. We have been blessed the last couple of years and we want to continue to be blessed and not be hit hard but we also want to make sure that everybody is ready. So there are two links there. One is to get a game plan and the other is ready.gov. And then of course with the emergency disasters GOEA continues to work with our EMDAC which is the Emergency Management for Disabled and Aging Coalition. Our feeding task force and along with other response recovery support groups like DCFS, transportation and so forth.

And that is all my report. We don't really have anything new and exciting going on except we are following a couple bills in session. One of the bills

it's to change the amount of money that is allocated to each one of our Councils on Aging and there's a lot of criteria that go into that so they are asking for an increase on how much allocation they get per person. So we're following that. Of course House Bill 1 which is our budget. And then a couple other bills. So other than that that is my report. If anybody has any questions.

JILL HANO: Do our members have any questions? Does any public have any questions? Hearing none this requires no action and will be placed on file. The next item is LSU Human Development Center. The chair recognizes Constance Alphonse.

CONSTANCE ALPHONSE: Thank you. So I am with the Human Development Center and we are the actual university for excellence and so that's like our work is very important to the disability (inaudible). Just as you're thinking about that I'm going to highlight we have a lot of programs such as early childhood education to post-secondary transition. And I'll just highlight some of the things (inaudible). In our early childhood initiatives we have our early head start. (Inaudible) looking at wellness strategies, teacher instruction as well as child nutrition. And then the early head start department is also a cohort of head start directors across regions and they'll be wrapping that up in May.

And then we also have an initiative called education transition in community. And so that initiative (inaudible). And so on the LASARD project some of the things that we did last quarter we had presentations at two national conferences. We had the keynote session. And then we had a presentation, a roadmap to engage (inaudible) accessible and inclusive education. And then at the CEC conference we had three presentations. We had one presentation called collaborative conversation. It's student centered and student led IEPs (inaudible). And then the strategy, high yield and easy to implement instructional strategies to make learning accessible for all. And then we had one for including students with significant disabilities in all educational settings.

Another project that we have is our Louisiana Deaf-Blind project. In that project they provided a

series of training for LRS counselors on working with people who are Deaf-Blind. And then they launched Families Together which is a (inaudible). And then another initiative (inaudible) we have a partnership with Delgado and they provide preemployment transition services for 18 students currently that they're supported through college classes (inaudible) and then they have an opportunity (inaudible).

And then we have our community health initiatives. And so in partnership with the Split-Second Foundation (inaudible). And then our last one is our long-term training initiative. And so that is our leadership education (inaudible) program. And so this year we had a total of 12 scholars representing various (inaudible). (Inaudible), speech language pathologists, audiology students, public health and dentistry students and (inaudible). Alaina was our parent that (inaudible). And it's a nine-month program. We're currently accepting applications of any self-advocates. If you know anyone that is interested it is really a powerful option to learn about advocacy and to learn about disability and how to advocate for your rights and to advocate (inaudible). You can email if you're interested. Especially if you're a self-advocate. But parents, students, professionals, anyone really has that opportunity. Any questions?

JILL HANO: Okay. No questions? No public? Okay. This report requires no action. The next item of business is the LRS report. The chair recognizes Melissa Bayham.

MELISSA BAYHAM: Good afternoon everyone. My report is on this bright pink paper. There's a lot of statistical information in this report that the council has requested. So I'm just going to go over a couple of things. And preemployment transition services you'll see we currently are providing services to over 4,000 students. If you'll note probably in the next quarter that number will drop. What happens at the end of the school year individuals who have exited the school system are no longer (inaudible) so their preETS cases will be closed. And then obviously that number will pick up at the beginning of the school year when we start adding new students to that program.

We currently still have 19 active third-party

cooperative arrangements with local school districts and we are continuing to meet with school districts to try to increase that number to increase the number of contracts that we have directly with schools to provide these services. I'll also note at the bottom of the first page you'll see our percentage of eligibility determine with 60 days at 80 percent and our percentage (inaudible) 90 days at 89 percent. That is below the federal criteria of 90 percent. We're currently on a federal corrective action plan for this. We actually met with our federal (inaudible) the other day and they understand our staff shortages and our funding challenges. So although I called it a fail he said it's not a fail just because we do have some challenges in Louisiana and he understands that we are doing the best that we can to improve those numbers.

The other thing, so you'll see Louisiana Rehab Council. I would love to change how we do this. The council used to meet the week after this. Now it meets the week before. So we did meet on April the 24th last Thursday for our quarterly meeting. And so we will meet again the week before this meeting next quarter. So I'll be sure to get that information to you all. Also will mention we do have an in-house benefits planner. We have talked about this topic before. And our in-house community partner counselor served 37 individuals.

The last thing that I will kind of talk about is budget and kind of talk about (inaudible) at the federal. So at the federal level I reported yesterday that there is discussion or there was an executive order about dismantling the Department of Education. I know some members were not aware of this but vocational rehabilitation is actually federally under the Department of Education. It is a federal Department of Education grant. So there has been-- just we haven't heard anything official but if that were to take place there's two places vocational rehabilitation probably will land. And that will be either Health and Human Services or with the Department of Labor. As I think you all know at the state level we are under the Workforce Commission (inaudible).

And I also want to mention this year we just got in our final grant for federal fiscal year 25 and

vocational rehabilitation did get a cost-of-living adjustment. So last year Louisiana was allocated for our vocational rehabilitation program approximately 64 million-dollars and this year our federal allocation was 72 million-dollars. So as I reported before we don't have the matching funds to draw down all those federal dollars. But just to kind of let you know what's available for vocational rehab in Louisiana. It is 72 million-dollars which will require a $19.5-million state match to draw down the full federal. It hasn't yet been determined how much we will relinquish this federal fiscal year. That will depend on where we land with state appropriations. But that's all.

JILL HANO: Okay. Ayden.

AYDEN BLUNSCHI: I have a question. So where do the adults that obviously don't fit under the criteria of students anymore, where do they fall under these numbers?

MELISSA BAYHAM: So the first thing I will kind of explain so preemployment transition services is kind of like a program (inaudible). But in terms of the number, so then you have that chart under this paragraph and you will see the total open VR cases as of March 26, 8,806. That's how many vocational rehab cases we have open. So if you want to know how many total people we're serving you just add the 8806 to the 4,015. So that will be the total that LRS is servicing. So 4,015 in the preETS program and then 8,806 in the VR program.

AYDEN BLUNSCHI: So that includes adults. So what percent of that are adults and not students?

MELISSA BAYHAM: Of the 8,800?

AYDEN BLUNSCHI: Yes.

MELISSA BAYHAM: I can't tell you off the top. So the 8,806 might include students but it doesn't include (inaudible) students. I'm sorry. Did that make it even more confusing? You can provide preETS in a VR case. So you could have some students in that 8800 but that 4,000 are only students with disabilities and they are in addition to the 8800 that we serve. So essentially that 8800 is primarily the adult population.

AYDEN BLUNSCHI: Thank you.

MELISSA BAYHAM: The reason why it looks like this and the reason why we have it called preETS cases is we have to serve students with disabilities in preemployment transition services even if we have a waiting list. We currently don't have a waiting list but we have to have separate caseloads in the event that we do have a waiting list because that's actually called potentially eligible. That 4,015 are not in the full vocational rehabilitation.

AYDEN BLUNSCHI: Thank you.

JILL HANO: Any more questions? Thank you Melissa. With no more questions this requires no action. Do we have a quorum?

HANNAH JENKINS: Yes. We're maxed out. If anybody else leaves or turns their camera off.

JILL HANO: Thank you. So the next item of business is the Office of Public Health and the chair recognizes Dr. Patti Barovechio. You have the floor.

PATTI BAROVECHIO: Thank you. So this is a report from the Office of Public Health. The Bureau of Family Health actually administers the federal title five children and youth with special healthcare needs program. And so I apologize it's more like a little mini book than a short report. But because there are so many programs under the Bureau of Family Health that support children and youth with special healthcare needs and disabilities and their families and also the providers who care for them we don't want to leave something out.

We offer subspecialty pediatric clinics in areas of provider shortages. Those are located around the state in public health units. In addition to that we offer a transportation program. So if a family is covered through Medicaid and Medicaid transportation is not sufficient to meet their needs they can apply for a stipend for that travel. They must apply through Medicaid first though. And if you need any assistance with that our family resource center, which I am going to mention next, it can help you with that. So we also offer to families in the state children with special healthcare needs and their families the Bureau of Family Health family resource center. And we literally will support a family for any resource need. It can be health related, mental health related. It can be

dental. It can be social barriers to health. Anything, food security. Our team at the resource center will work with the family to link them with the resources they need. And they do partner with Families Helping Families so that we can get them to peer support and community level resources.

Our program administers the early hearing detection and intervention program in the state. So all of the hearing screenings that are conducted on newborn babies that is administered through what we call our EHDI program. In conjunction with the EHDI program there is Louisiana Hands and Voices which is a peer support organization for all children who are Deaf or Hard of Hearing or Deaf-Blind. And their goal is so those children will reach their full potential. And it's a parent-led organization and it really provides a lot of support for these families and can network them and ensure that they know how to navigate the system to get the resources and supports that they need.

We also do newborn genetic screening. So every child that's born in a birthing center or most every child receives a genetic screening at birth. A lot of people refer to that as heel stick testing. And they test for I think it's over 28 different genetic conditions. The Louisiana birth defects monitoring network is our state surveillance system for birth defects. They partner with our family resource center and we outreach to families identified through surveillance to offer them needs assessment and resource and referral support to ensure that those young children are linked to the important resources and supports for early intervention. We also support maternal infant and early childhood home visiting. It is a no-cost voluntary program that provides family support and coaching to improve the health and wellbeing of pregnant women and parenting families with young children. There is two different models that we administer in the state. One is nurse family partnership and the other is parents as teachers. They both have a little bit different eligibility criteria. Nurse family partnership are for first time moms whereas PAT it does not have to be a first-time mom. And it does include children up to age five.

And then we also offer for our healthcare

providers we call it the Louisiana provider to provider consultation line. And this is a no-cost consultation education program for perinatal as well as pediatric providers to support them with managing behavioral health needs and primary care. Any Louisiana pediatric or perinatal provider can access those services free of charge. As part of title five we are in our needs assessment year. So as a program we are doing a statewide needs assessment to determine the priority needs of the health of women and children and families in the state. You can find out a little bit of information about that in the report.

And last but not least project SOAR is Screen Often and Accurately Refer. It is part of a federal early childhood comprehensive systems grant. And they're working to improve the developmental health system for the prenatal to age three population. They have just come out of developing a strategic plan with our provider and family partners across the state. And we're really excited. They're moving to implementing some really neat projects over the next six to 12 months.

And then last but not least is our young child wellness collaborative. This is a cross agency advisory council that provides leadership and informs priorities across the continuum of supports and services within the Louisiana early childhood system. And currently the YCWC is the advisory body for SOAR but it has been in existence for many years and has served as a really viable cross sector group to promote alignment and collaboration across all sectors that care for our children and families in this state.

JILL HANO: Okay. Thank you Ms. Patti. Any questions? Meredith.

MERIDITH JORDAN: Thank you. I really just want to connect with you, if possible, offline. I'm really interested in some of these special health services that you all offer. So we're getting more and more questions about community behavior resources and so I just want to connect with you offline to see if there's more in terms of community for behavior that I can offer support to our school systems and help them make connections for families for kids who might need some of these behavioral health services outside of school.

PATTI BAROVECHIO: Absolutely. I'll put my email in the chat.

MERIDITH JORDAN: Thank you.

JILL HANO: This report requires no action. The next report is OCDD.

JULIE FOSTER HAGAN: Thanks Jill. So our report this quarter you will see is a bit revamped for those of you who have been around for a while. Those folks that are new won't notice any difference. We tried to make it a little bit simpler but I mentioned this in the self-determination meeting. If there's anything you see that seems like it's missing or you want us to add back feel free to do that. We tried to take out some of the things that were duplicative but then it may be that there are more that you need in terms of describing what programs you're talking about. If you have any suggestions for how we can make this better please do let me know. We are going to turn it into just our overall quarterly report that we are going to be making available on our OCDD website. So just want to make sure it has all relevant information but try to do it in a way that makes it a little more easy to read than what our previous report was.

So kind of what we started with are what are the hot topics or the things that we've heard about in the last quarter that we can share followed by our activities. Then so just go through sort of a breakout of data for the different programs under our office. Some for that quarter and then some demographic information. What I'll do is hit some of the hot topics. We are still working on spending the Section 9817 American Rescue Plan Act dollars. We currently have until December of 2025 to spend that money. But the last time we did an update we as well as OAAS and Medicaid asked for an extension because we do think that we're not going to have all the funds spent by December. So we've asked to extend that to June of 2026 just to give us a little more time to either the activities we've already started to keep them going or some of the things we've been trying to get piloted that because we're a state entity sometimes contracts and buying things just takes too much time so it's taking us longer to do what we want to do. So we'll see if we can get that extension and I'll keep you guys

posted on that.

We have hired I think I talked last time that we are piloting an electronic assessment. And so we've hired assessors and we're doing random folks-- so if you have a comprehensive plan of care you may be randomly selected to participate in the assessment process. The electronic comprehensive plan of care. We'll be doing that at least through December. Hopefully we'll be able to continue beyond that.

Our office is partnering with the Office of Behavioral Health and LSU so we can conduct some trainings for professionals in supporting people with IDD and serious mental illness. We know that's a gap area so we're trying to get-- this will help community clinicians better understand how to serve those with intellectual and developmental disabilities.

We haven't done, there's a survey called a national core indicator survey and it helps us to understand, it's like a satisfaction survey, it helps us to understand where are the things that we're doing well and where are the things that we can improve in the lives of people with disabilities. We haven't done an in-person survey in a while. We were able to use some of our rescue plan act dollars to get a contractor who can come in and do those in-person surveys. So those will be starting in June. And a lot of times people will call me and say hey, is this legit. Somebody called me and said hey, will you participate in a survey. Qlarant is the name of the contractor we'll be working with. If you do have outreach from someone we will be spending time doing in-person national core indicator surveys this year.

And then lastly, I've been asked to give updates often on the rate study. We are still in the process of working with Milliman to do a home and community-based waiver rate study on waiver and on the ICF side Myers and Stauffer. We anticipate the Myers and Stauffer study to be done in June or July and the Milliman study to be done in August. We will share that information once we have it.

We did have our value-based payment program approved by CMS. We will be rolling those out. And what that is is it means that if our home and community-based waiver providers and/or support

coordinators meet certain metrics or apply for certain things then they can get a value-based payment for that activity. We have some activities around technology. We have a lot around the direct support workforce training and recruitment and retention. So we are in the process of rolling those out. And then something that came up through the council as well as during our last roadshow was around incontinent supplies. We were hoping to start this April 1st but we ran into some delays. And so effective July 1st adults in home and community-based waivers can have access to incontinent supplies up to 2,500-dollars a year. And what we heard is that what the durable medical equipment providers they bill for was only getting the cheapest, lowest quality of briefs. And so we looked at what they are able to bill for that. We were able to make an adjustment so that if a person needs something more than the low-cost cheaper diaper or incontinent supplies they can get a higher cost brief. We are just trying to make sure everybody understands that if instead of paying 30 cents a brief you're paying 60 cents a brief you're going to get to that 2,500-dollar cap sooner. So just making people think about that as they are budgeting that.

The reason it took us a little longer is we were trying to put a few extra things in place. We want to make sure that if what you need is the higher cost brief that the provider isn't able to bill us that highest cost even if they're still giving the cheaper brief. So we had to add some checks and balances. Starting July 1st folks should find it easier to be able to get with a provider to get those different quality briefs. Again, the rest is more data for our programs but I'm happy to take any questions. And again, (inaudible) suggestions for things that don't seem to be working.

JILL HANO: Angela.

ANGELA HARMON: With the incontinent supplies you get the diapers or the pants or whatever they're called. Why can't you get wipes?

JULIE FOSTER HAGAN: I think it's because that's not included-- like what we did was we tried to copy what they do in DPSDT for children to be able to have those supplies. I think it's because that wasn't like

a covered service with children but I can verify that. I'll find that out.

JILL HANO: Thank you. Tony, you're recognized. I see your hand raised. Is your hand raised on accident?

EBONY HAVEN: Tony, did you want to say anything?

TONY PIONTEK: Yes. How does that pertain to from this year to last year? Like was there some kind of a change in this particular discussion? Like how was it a year from now?

JULIE FOSTER HAGAN: So if you look, Tony, in the report that is the Office for Citizens with Developmental Disabilities report on page two it does provide some information about a quarterly kind of what did the January, February, March timeline look like for the last three fiscal years so that you could see that over time. On page four they show you the total amounts spent by the state fiscal year, the total annual amounts for home and community-based waiver and then the total average cost. When you look at state fiscal year 2023 we spent 653 million. In state fiscal year 2024 we spent 660 million. When you look at state fiscal year 25 we still have one quarter to go. So we would anticipate there to be another bump up in terms of the amount of dollars spent for waiver services from last year to this year.

TONY PIONTEK: Thanks so much.

JILL HANO: Thank you. Ms. Xu, you're recognized.

KAREN XU: I just have a question about the services. Since I know most people their children are in home and community based but sometimes (inaudible). So I know most just talk about the waiver, home and community based. I just wonder how much (inaudible) we only have a few options for institutional care. Just wonder how we can improve the services. Even like the family, a single family you may not have enough support for home and community based to take care of a child. So just consider what kind of services you can get from the facility care. Compare the waiver program and the facility. (Inaudible) or they just focus on the temporary (inaudible).

JULIE FOSTER HAGAN: So if you look back in the state facilities most of them, we used to have nine state operated ICF facilities, and most of them were started like in the early 1960s. And there was no home

and community-based services at that time. There was only institutional services. So if you weren't able to take care (inaudible) then a suggestion was made for institutional living. For years, because that was the only option, there were thousands of people in Louisiana who lived in those institutional settings. And then in the 80s, around the 80s is when they really started bringing home and community-based waiver services in place. A lot of families who had already made the decision to put their child in a state facility it was hard for them-- I had to make this really hard decision for my child to go here. Now you're telling me I can get services at home. So that was hard for folks to see how that might could work.

And we talked about this earlier. There's also some comfort in a large facility where you know there's a lot of staff as opposed to a waiver where you might only have one or two depending on what your situation is. So for people who in the, I would say 60s, 70s, 80s, 90s, even 2000s when they go into a facility you would see them stay there for their whole life. Stay there through the time they pass away. What we see now are more people going to facilities because they have some major medical issues where they might need a nurse more often. And some people do have a nurse in their home 24 hours a day. Not a lot, but some do have that. Or they have behaviors that are so significant that it's hard for the family to be able to keep them at home.

For those people that get admitted, and now we only have Pine Crest in Central Louisiana, so the other state facilities have closed. And we've seen a lot of private facilities close because as you said more people are selecting waiver services over ICF services. But what we're seeing now is more that those group homes or intermediate care facilities people go there and they only stay for like two to five years because they are really trying to focus on what happened for me to have to come here. And then what they should be doing is trying to help them gain independence again or figure out how to maybe have some behavior supports to help them. And we do see now that a lot more people are leaving the facilities and transitioning back either from a large state facility to a smaller group

home or community home or to waiver back home with family or a waiver.

We've had a lot of success with people who leave a facility and maybe they make two or three friends while they're at that facility so those two or three people can move out into kind of a shared waiver home together. So there's a lot of different options that are available but we are seeing now that the folks once they enter those state facilities the vast majority of them do transition out in about three to five years. But there are still some people who have been living at Pine Crest I think they had like a person who is 100 years old there. So they have some people they got there when they were young and that's been their home all their life. So you kind of have a little of both. But now more recently people who are admitted are admitted and find another place to go.

KAREN XU: So the funding for the private owned facility does the same funding cover?

JULIE FOSTER HAGAN: The funding, so the way that the funding works in home and community-based services is a little different than it works for intermediate care facilities. In an intermediate care facility or a group home or a community home they get a daily rate, a per diem rate and that rate is supposed to cover everything a person needs. And then the person turns over their social security income to that provider and that covers their room and board. So the provider owns the home or facility or building and then something like that social security goes to the provider to pay the persons, for their bedroom and their food and those kind of things.

In a waiver home the person doesn't turnover their social security or anything. They keep that check. So they have their own apartment or lease or live with families so they don't have one. But they then take care of those kinds of expenses. What they call room and board expenses are covered. And then the rate that's paid in waiver if you have a direct support worker who comes in that's paid like on an hourly rate instead of that provider getting just one amount per day to take care of everything. So you might be able-- you can individually pick. You might have a worker come to your home for eight hours and then for five or

six hours you go to a day program. There's just different. You can move around a little bit more and that's why more people are choosing waivers because you can kind of choose the different services you want that makes sense for you whereas in that community or group home it's more the provider that is sort of managing those things. You have a little more of your own decision-making ability or the family does verses the ICFs.

JILL HANO: Vivienne.

VIVIENNE WEBB: So the council's mission is to promote independent living out in the community but fund like the ICFs and stuff. So I think what you would be looking for are more community-based services that could help your son live out in the community with you rather than working towards more ICF.

KAREN XU: (Inaudible).

JILL HANO: Okay. Any more questions?

ERICK TAYLOR: I have one question. Can you explain the waiver that you have a company in your home where you take care of your own?

JULIE FOSTER HAGAN: I'm sorry. Self-direction?

ERICK TAYLOR: Yes, ma'am.

JULIE FOSTER HAGAN: So there is another option, and thank you for that reminder, Erick. There is another option in waiver that if you want to have even more control over sort of the folks that are taking care of you then you can choose a self-directed option. In the self-directed option instead of having a provider who hires the staff that come into your home you the person receiving services, or if you need an authorized representative, can then be responsible for hiring and training and supervising, overseeing that staff. And so the services are still delivered through home and community based and you get the number of hours to get through your plan of care. But then you as the directed employer you're able to select the fiscal intermediary who helps you, Acumen or Morning Sun. And then you are hiring your own staff. And generally you're able to pay a little more in the self-directed option than a provider is able to pay because the whole rate can go towards the person's salary. And with a provider not only are they having to pay a salary of the employee but they have other things they

have to do for licensing and certification as part of that. That's what you wanted me to touch, Erick?

ERICK TAYLOR: If they go over that time do you have to pay anything out of your pocket? If they stay over their hours do you have to pay any money?

JULIE FOSTER HAGAN: Yeah. You should have people helping to make sure that doesn't happen. That the number of hours are in the waiver budget. Yes, it can only pay for what's approved.

ERICK TAYLOR: Thank you, ma'am.

JILL HANO: Ayden, you have a question?

AYDEN BLUNSCHI: I do. I can't think of the name of the program.

JULIE FOSTER HAGAN: The program that has direct support workers?

AYDEN BLUNSCHI: Yes.

JULIE FOSTER HAGAN: Long term personal care services?

AYDEN BLUNSCHI: Yes. Is that just in place until the waiver kicks in?

JULIE FOSTER HAGAN: Maybe. Maybe not. So like we have a waiver called a supports waiver. In the supports waiver we don't have direct support workers who go to your home. The main focus of that waiver is for people who maybe are looking for employment or help with employment or go into a day program or have something to do during the day. In the supports waiver you might have somebody come from long term personal care services who comes to your house just for a few hours a week and then the majority of your waiver is helping you go do your job or go to your day program or something like that. So it can be a combination of long-term personal care services and waiver services but sometimes it can just be waiver services. So it really just depends. It can be one or the other or both.

AYDEN BLUNSCHI: Okay. I have more questions but I'll touch base with you some other time. Thank you.

JILL HANO: Thank you. Any more questions for Julie? Are there any more comments? Okay. Now we have announcements. Ebony, the chair recognizes Ms. Ebony Haven.

EBONY HAVEN: Thank you. I have a couple of announcements. The first one I always forget to

announce at the end of the council meetings but there is a survey in your folders. I'm asking that you please fill out your survey. The staff and I want to make sure that the meetings all are well planned and carried out. And if you guys have feedback we take that seriously. If you can please fill out your survey and leave it at your spaces and we'll grab it on our way out.

Also I want to just remind everybody about financial disclosure forms. I know we sent out an email I think probably early April to remind you guys to please fill out your financial disclosure forms. Anyone that sits on the council is required to fill one out and those forms are due on the 15th of this month. So Bridget and I will be making sure that we go on the website to make sure everyone has completed their financial disclosure. If you haven't you'll be getting another email from us because you are required to do that as a member of a board or commission.

Also I want to make sure everyone knows that we're continuing to do our work even though we don't know what our funding situation is. So our five-year planning we will be hosting public quorums to gather information for our comprehensive review analysis. And that's just to capture where the barriers and gaps are in our services here in Louisiana. So it's really important that we get people to come out to those. We're having two of them and we might consider a virtual one after those two if we don't get enough feedback. The first one is next week May 7th in Monroe, Louisiana. So we're traveling up north. If anybody knows anybody that's up there please share the information. And then we're having the second one on May 14th here at this library in this exact room. I encourage y'all to please send out the information, get others to come and join us at those public forums so that we can gather information for your next five-year plan.

And in relation to that I am asking for volunteers for the five-year planning committee. According to our schedule for the five-year plan the next five-year plan which starts 2027 to 2031 we have to have a planning committee that's going to have a couple of meetings to discuss the council's next five-year plan. So I

encourage everyone to volunteer for that. But I'm asking for volunteers for now so that Stephanie will have those names so she can start planning those meetings. Does anyone want to? I know we're at the end of the meeting and everybody's ready to go. So the quicker I get volunteers the quicker we can be done.

JILL HANO: I nominate Meredith.

EBONY HAVEN: You don't have to nominate. I do encourage her to be on that planning committee though because you guys are aware of where the gaps are in our service system, for education, for our home and community-based services. If you guys are interested I encourage you to volunteer for that planning committee. Tony, are you volunteering for that committee? I'm going to write your name down because I think you are. Thank you Tony. I got your name. Ayden, I got you.

JULIE FOSTER HAGAN: (Inaudible).

BRENTON ANDRUS: Not necessarily members of the committee as much as times for you to come to share information.

EBONY HAVEN: It's going to at least be two meetings. It might be more. It just all depends on how quickly we can get through all of the survey feedback and all the public forum feedback for you guys to narrow down what you want to put in your five-year plan.

STEPHANIE CARMONA: I just wanted to add something really quick for everybody to know. The purpose of this ad hoc is to write the next goals and objectives for our five-year plan. So it is very, very important and we would like as many volunteers as we can get. The more brains we have on here the better.

JILL HANO: I'll do it but I do not want to chair it.

EBONY HAVEN: Got you. I got you Erick. Thank you guys so much for volunteering. Jill, Brooke still has her hand raised.

BROOKE STEWART: I wanted to volunteer for the planning committee.

EBONY HAVEN: I got you Brooke.

BROOKE STEWART: Thank you.

EBONY HAVEN: And that's all the announcements I have Jill. Thank you. Our next quarterly meeting is July 30th and 31st. Put that on your calendar. That's

all I have.

JILL HANO: By unanimous consent if there are no objections the meeting will adjourn.