

Louisiana Developmental Disabilities Council  
Self-Determination and Community Inclusion  
January 28, 2026

JILL HANO: Hello everyone. It is 1:23. I would like to call the meeting to order. Rekeesha, would you mind taking the roll?

REKEESHA BRANCH: Absolutely. I can do that for you. Dr. Barovechio.

PATTI BAROVECHIO: Here.

REKEESHA BRANCH: Mr. Bennett.

BRIAN BENNETT: Here.

REKEESHA BRANCH: Mr. Billings.

MIKE BILLINGS: Here.

REKEESHA BRANCH: Mr. Blunschi.

AYDEN BLUNSCHI: Here.

REKEESHA BRANCH: Ms. Chachere.

ALAINA CHACHERE: Here.

REKEESHA BRANCH: Ms. Crain. Ms. Harmon. Ms. Aduli.

CHERIE KELLY-ADULI: Here.

REKEESHA BRANCH: Mr. Macaluso. Ms. Nguyen. Mr. Rocca.

TORY ROCCA: Here.

REKEESHA BRANCH: Ms. Stewart. Mr. Williams.

GEARRY WILLIAMS: Here.

REKEESHA BRANCH: Ms. Xu.

KAREN XU: Here.

REKEESHA BRANCH: Mr. Smith.

ROBBY SMITH: Here.

REKEESHA BRANCH: All right. You have ten. You have a quorum.

JILL HANO: Okay. Thank you, Rekeesha. Before we get started also can you review the rules please?

REKEESHA BRANCH: Absolutely. Before I review the rules I just kind of want to let everybody know we are running a little behind schedule because of our first meeting we had this morning. So we will be skipping going over the contractual agreements. But it is in our status report so you guys can review that. It's on the website so you can look over it. All the information that we would have reviewed today is on the status report.

So now to get started with the rules. For committee members and members of the public 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 who are attending virtually 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 the microphone will be returned to mute.

Also the Q and A is to only 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 virtually will be allowed to speak first. Public members in person will be called on followed by public participating virtually who have their hands raised. Comments in the Q and A will be addressed last. As with all hybrid meetings it can be difficult to keep track of those waiting to speak in person and virtually so please be patient. All comments and questions from the public may be subject to two minutes at the discretion of the chair. So please keep that in mind. Depending on time constraints we may also limit comments to one per issue. Also comments about a person's character will not be allowed. Finally, members of the public will have the opportunity to provide public comment before each vote and during designated public comment period. The chair may also use their discretion to determine if comments will be accepted outside of those times.

JILL HANO: Okay. Thank you, Rekeesha. So now we are going to have an approval of the October meeting summary. Everyone should have reviewed the October meeting summary which was attached in your agenda you received via email. There's also a copy in your committee packet. I need a motion to approve and adopt the October meeting summary. Any takers? Thank you, Tory. Tory Rocca motions to recommend we adopt the October meeting summary. Is there a second?

ALAINA CHACHERE: Second.

JILL HANO: All right. Ms. Chachere seconds. Is

there any discussion? Okay. Any public comment? Okay. Now we will do a roll call vote. Rekeesha, can you please call the roll.

REKEESHA BRANCH: So a yes is saying that you would like to adopt the minutes. No or nay is saying that you would not like to adopt. Dr. Barovechio.

PATTI BAROVECHIO: Yea.

REKEESHA BRANCH: Dr. Barovechio, yeah. Mr. Bennett.

BRIAN BENNETT: Yes.

REKEESHA BRANCH: Mr. Bennett, yes. Mr. Billings.

MIKE BILLINGS: Yes.

REKEESHA BRANCH: Mr. Billings, yes. Mr. Blunschi.

AYDEN BLUNSCHI: Yes.

REKEESHA BRANCH: Mr. Blunschi, yes. Ms. Chachere.

ALAINA CHACHERE: Yes.

REKEESHA BRANCH: Ms. Chachere, yes. Ms. Crain. Ms. Harmon.

ANGELA HARMON: Yes.

REKEESHA BRANCH: Ms. Harmon, yes. Ms. Aduli.

CHERIE KELLY-ADULI: Yes.

REKEESHA BRANCH: Ms. Aduli, yes. Mr. Macaluso. Ms. Nguyen. Mr. Rocca.

TORY ROCCA: Yes.

REKEESHA BRANCH: Mr. Rocca, yes. Ms. Stewart. Mr. Williams.

GEARRY WILLIAMS: Yes.

REKEESHA BRANCH: Mr. Williams, yes. Ms. Xu.

KAREN XU: Yes.

REKEESHA BRANCH: Mr. Xu, yes. Mr. Smith.

ROBBY SMITH: Yes.

REKEESHA BRANCH: Mr. Smith, yes. That's eleven yeas.

JILL HANO: Okay. Thank you. Bernard, will you please start us off with our noncontractual updates. Okay, Mr. Williams or Brian, whatever.

GEARRY WILLIAMS: Good afternoon. Gearry Williams, Assistant secretary at the Office of Aging and Adult Services. During the last meeting (inaudible) an outside contract to assist in addressing (inaudible). We have now done so. We have finalized a contract. We fully executed a contract with a company called HCBS, Home and Community-Based Strategies. They have assisted in other states. They are addressing issues related to wait lists and waiver services. So we are working with them to analyze our current wait list as well as coming up with ways

to prioritize the community choices waiver wait list. We are looking at prioritizing based upon need or acuity rather than the way the waiting list is now set up as just first come first serve. So we want to look at a continuum of care. As it relates to the waiver we want to make sure we prioritize, again, based on need, based on acuity. Others on the waist list, which I touched on before, may be on a wait list for the community choices waiver but are receiving other HCBS services. It's two-fold. We want to prioritize CCW, community choices waiver waiting list based on need and acuity. And then those that are not prioritized continue to review their needs and make referrals to either long-term personal care services, LTPCS, or ADHC, which is our other waiver service, adult day healthcare, as well as our PACE, the program for all-inclusive care of the elderly to work toward (inaudible).

The other thing that I wanted to make mention of was related to, I know I want to touch on this a little bit more tomorrow of course, the community options waiver fund. A waiver kind of like OCDD has the NOW waiver. We want to look at also incorporating some discussion related to that waiver. I'm sorry. To that fund to help in advancing discussions related to a continuum of care. How we can look at some other services. How we can look at some other maybe costs measures that are a part of HCBS, home and community-based services to address some of I guess underlying needs when we're looking at moving from a nursing facility into the community. Can any of that funding be utilized to address some of the initial costs that are associated with moving into the community. We are having some conversation with our LDH leadership about the COW fund and the language (inaudible) the fund now or in statute now. Home and community-based services we just want to make sure that everybody's on the same page with the language and examining if there needs to be some legislation surrounding that. Does it need to be a part of this upcoming legislative session to suggest language surrounding it based upon what our plans are to utilize the fund. That's pretty much all I have for now. I didn't know if you wanted to get into a little bit of anything related to the budget. I have that for tomorrow.

BRENTON ANDRUS: You can share here.

GEARRY WILLIAMS: As far as the budget request I think

we are in a pretty good posture right now. We are still kind of going through the executive budget that was being discussed last Friday. But mainly as far as programmatic needs I think we are in a pretty good posture. Some of the requested positions that we had in the budget request we did not get at this point. Of course it's a long process so we will see as the process, or once the session starts and as it progresses along be able to possibly get some positions, the TO that we requested. If we get that added in as a part of the budget process. Right now no projected cuts at this point. So again, we'll keep you informed once the session begins. And as it progresses we will provide additional information. That's all I have.

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

MYLINDA ELLIOT: Can you hear me?

JILL HANO: Yes, ma'am.

MYLINDA ELLIOT: Great. Two questions. Who was that speaking?

GEARRY WILLIAMS: Yes. Gearry Williams with the Office of Aging and Adult Services.

MYLINDA ELLIOT: And can you tell me a little bit more what you want to do with the community options waiver fund. Use it like individual and family supports?

GEARRY WILLIAMS: Just to advance home and community-based services. No specifics at this point. The current legislation outlines exactly what the fund can be used for but we have had discussions previously with our LDH legal about the community options waiver fund and whether the language was clear about how we could use it in concert with the community choices waiver. And it previously said that we really could not use that fund to address things like I just mentioned about moving folks from nursing facilities to the community or advancing some of the home and community-based services.

Recently our legal section looked at it and had some conversation with stakeholders and felt like the legislation is pretty clear as it relates to utilization for home and community-based services. But we still want to make sure that it's very clear, that the language in the legislation is clear and we don't have issues like we've had previously with how the language is interpreted. So we are meeting with our legal section and we're going to make a decision okay, it's clear and we can proceed as is outlined or if any adjustments need to be made to the

language to make it clear that it's specifically for home and community-based services. And what those other I guess peripheral needs surrounding home and community-based services, what it could be utilized for.

MYLINDA ELLIOT: Okay. We're good. I just needed a little bit of clarification. Thank you.

GEARRY WILLIAMS: No problem. Thank you.

JILL HANO: Okay. Thank you. Mr. Brown, will you share, Mr. Bernard Brown will share with us Department of Health regarding the current session and other initiatives. Bernard, the floor is yours.

BERNARD BROWN: Thank you. Thank you, Jill. Not much by way of updates. That kind of area to touch on. I know there's some hot topics that we kind of briefly discussed but just to kind of give a super eye level. Legislatively the biggest thing we're probably pushing this session if you were at the summit you may have heard us touch on it. We're looking to change OCDD's name. There will be communication going out soon. We're actually going to ask DD Council or the actual board members if you have a recommendation for potential names if you can get those to us in the next two weeks. I sent an email earlier while y'all were in executive session. But we want to engage stakeholders. Once we get all the names compiled we'll probably send it out by a voting tool either through Survey Monkey or Doodle Poll or something where you guys can vote on the names that we identify for the potential name change.

A couple of caveats. It has to start with the office. Like the office of. Just for consistency across LDH. Every office in LDH starts with the office of except for Medicaid. The official name of Medicaid it's the only bureau, right. So that's the only one. Everybody else starts with office. That's the only caveat. There's one other thing to consider, what the acronym looks like. You don't want to call it the office for developmental disabilities because when you look at the acronym that's ODD, odd. ODD is also another acronym for a physical impairment or some type of medical condition. So things like that just to be mindful of.

We're excited. It's definitely happening. I know people are going to ask why. Why is it happening. Some people felt like the name was a little outdated. Some people had issues with the use of citizen in the name since you can't be a citizen of the state. You can be a citizen

of a country. There were a lot of little things. The motivation behind it in part really is to align with the trends nationally. You guys know that there have been a lot of name changes in other organizations on the national front shifting away from some of the traditional names. This is us doing the same. I don't know how far we can deviate. But I'm optimistic to see what y'all come up with. Ebony, we'll get you the hard deadlines tomorrow so you can get it to the rest of the group. And then I will re-announce that tomorrow in the general session.

So that's that. As far as any other legislation we're keeping an eye on right now. There are bills being prefilled now. There's a couple dropping I hadn't seen yet. I hadn't seen because I think this session is an unlimited amount that you can introduce. It's not a fiscal session. So we have to keep a close eye on what's coming through. As of right now we hadn't seen anything that poses a potential risk to our service delivery system.

No cuts budget wise. No cuts in our budget. Something we would count in the executive budget some money was allocated to the regional advisory committees to bolster and help build out outreach for the state advisory committee in some of the regional levels. Essentially now the SACS and RACS have a budget for communication and for some other things with the intent to use that money to improve enrollment in these advisory committees. Just so folks on the phone, like one of my biggest things that I really want to do is really build out engagement. Not just with the DD Council but with all the other entities. And state advisory committees and regional advisory committees are some of the only committees that are statutorily required and we're not utilizing that the way we need to. So our plan is to really render those groups and use those groups as our core stakeholders. Some of y'all have been here long enough to know we use those core stakeholder groups to develop the processes for the waiver, how (inaudible) wait list, the screening for urgency of need. We're going to use that SAC committee like that moving forward. That's something that I'm excited about. I'm excited to see how the regional advisory committees and state advisory committees (inaudible) to kind of increase participation.

Then lastly I guess this was announced but this is the thing before the last. Julie is officially gone, gone,

gone. I was named interim assistant secretary. Hopefully at some point in the future I will be able to drop the interim and become assistant secretary. But more to come on that. Let's just keep our fingers crossed. But for all intents and purposes with this Julie is always going to be tethered to OCDD but operationally she's no longer involved in OCDD. If you see her or have access to her email she would love an appreciation note or something. She would greatly appreciate it.

And then the very last thing I guess I'll pull the Band-Aid off, the rate study, right. The rate study is done y'all. We got the fact sheet together. We have the memo that's going out. We have everything ready to go. Trying to get it out. Really y'all there's nothing nefarious going on. Nothing shady going on. There's nothing in the report that's being altered or doctored. There's nothing in there that's unfavorable to the department in our eyes. It's just taking longer than we thought. Remember we adopted three new agencies with SNAP and DDS and some of those things so we had that happening that kind of jumped priority. Then the governmental shutdown. Then the MCO stuff. So it's just been getting it in front of the right people (inaudible) has been a little bit of a journey. But we're not hiding anything. The fiscal ask for the whole study to fund the recommendation is like 53 million-dollars in SGF. We gave that number out, provided that. The details is in the report. That's the piece that y'all need. I get it. We're trying really hard to get that out. It will be out before session. That's all I can say on that. Not because I'm not allowed to say anything else, it's literally because that's all I got. That's it for my update. Any questions I will be happy to answer.

JILL HANO: Ms. Elliot you have the floor.

MYLINDA ELLIOT: Okay. So a couple of things. I'm really glad to hear that you're going to use the SAC and the RAC for what they were meant or they appear to be meant to be in the law. We were really disappointed when you had to leave during the last SAC meeting. It's difficult to have conversations with people that don't have all the information. You know, people that are at the top. So I'm really glad to hear that. That's one thing.

The second thing is session starts in what, six weeks. We're going to be waiting another six weeks before we get

the rate study or did I misunderstand?

BERNARD BROWN: No. I'm trying to get it out ASAP. I'm hoping we won't wait six weeks. I don't think that's the plan. I don't even think that's the intent of anyone. It's literally just nailing down the people we need to nail down to get this done and get it out.

MYLINDA ELLIOT: So who should we concentrate on nailing down?

BERNARD BROWN: Me.

MYLINDA ELLIOT: Can I ask that?

BERNARD BROWN: In all honesty, me. I promise you I'm advocating to get an answer on this every day. I really am. I don't want y'all to feel like you have to undertake mass emails and messaging. When it's time for that I'll tell y'all. Right now it's not time for that. We're there. I drafted the letter a week ago. We developed the fact sheet. Brian, you saw it. Gearry saw it. (Inaudible) all of our communication people focused on the ice storm and stuff. It's literally just trying to get it prioritized so we can get it out.

MYLINDA ELLIOT: This has been going on since September.

BERNARD BROWN: I know. I know.

MYLINDA ELLIOT: The time should have been what three, six months ago.

BERNARD BROWN: Yeah. You're right.

MYLINDA ELLIOT: Okay. I appreciate you showing up and giving us good information.

BERNARD BROWN: Yes, ma'am.

JILL HANO: Ebony.

EBONY HAVEN: So Bernard my only question is is the department planning to take a stand on the rate study? Are y'all supporting any legislation or are y'all supporting any change I guess is what I'm trying to ask?

BERNARD BROWN: I got the okay to share that it's not in the executive budget, the money for the rate increase is not in the executive budget. The governor and the administration went with a stand-still budget. I don't know if y'all saw (inaudible) Friday. He said straight forward put out a relatively stand-still budget. That 53 million or so is not in the budget so you guys will have to advocate to get that added.

BRENTON ANDRUS: There is better revenue than anticipated which should free up some funds.

EBONY HAVEN: Okay. So I have a follow-up question to that. So if we are planning to advocate for that when asked questions about it are y'all in support of the advocacy?

BERNARD BROWN: Yeah. I'm telling you to go advocate, yeah. Again, and I'm not hiding the ball. I'm not being coy. We all agreed in this room and with providers that we needed an official objective rate adequacy study. The study is done. We're comfortable with how the study was conducted. We appreciate the feedback in the room. And the recommendation is the recommendation and it is what it is. Is that good enough for you?

EBONY HAVEN: Yeah.

JILL HANO: Okay. Brenton, the floor is yours.

BRENTON ANDRUS: One question I had was you had mentioned the 53 million and you said people know about that number. Who knows? Has it been indicated to legislators?

BERNARD BROWN: Yes. Everybody that asked me the number I have given the number. The Provider Association asked. I gave them the number. We talked. I gave y'all the number. I think the pain point for everybody is like well, what does that include. Y'all can't answer that because that's all in the rate study. I understand the frustration.

BRENTON ANDRUS: And that was part of the question if someone ask you you give it. Or I guess I was more so asking has it been sent out to legislators, the governor, whoever as part of creating that budget. This is how much we would need. This is why we need. Because yeah, part of the barrier is I might want to give you that money and I would think LDH would be falling over if we're going out there trying to ask for almost 55 million-dollars. They should be excited about that. But we don't have the information to back it up.

Now the problem that we're running into is we meet with legislators now. A lot of them don't give you a whole lot of time when session starts because they're busy which means I can't get them the information of why I need \$53.6-million. We were here in October where it's two to three weeks. Now we're ice storms, we're this, we're that. But we want it done before session. And I guess I'm maybe a little more cynical than some. I stood out here in October when the council was deciding if that should even go on the agenda and some of them were trying to back out of it and I'm like no because that rate study is going to

be out. Y'all told me it was going out and it's just kind of in a parking lot.

I know who it needs to go to. We all do. And I can monitor the LDH Facebook page and YouTube and they're everywhere but inside that building. So when do we wrap it around this person or these individuals and tell them to push it out. Because that's where the barrier is. Obviously someone at the top, and I'll be cautious because y'all work for LDH, someone in leadership obviously has not made this a priority. So that's why people are starting to ask those questions. Who are we putting records requests into. Whose door are we beating down. And I think the problem is the more this gets delayed the angrier people are getting. I like y'all but I think y'all are about to really step into some mess with some people if stuff doesn't start coming out. And I'm hoping nothing is bad or anything like that like you said but we can all understand why people would think that. I wouldn't be doing my job if I didn't get out here and say it that it needs to be pushed out. I think people have been strung along for quite some time and it's just ridiculous that it's not out. And it's done. It's in an email ready to hit send. Why hasn't it been looked at or stamped or approved by whoever is supposed to have done that. Because there will always be something. There will be more ice storms. There will be something else. Session will start. They'll be this happening. Just saying. It's got to come out.

JILL HANO: I do know that when whoever said August 1st I think I emailed Julie August 2nd. But to Ms. Mylinda's point it's been all these months. I mean, I don't want to attack you but like there was an ice storm. Weren't people working from home or was that a holiday? I don't know.

BERNARD BROWN: Jill, Brenton, I understand the frustration. I'm articulating it. I have blown whistles. Y'all have every right to be frustrated. That's all I got for you. I take pride in being a man of my word and to this point I haven't help up my part of the bargain. I understand the frustration.

JILL HANO: Brenton.

BRENTON ANDRUS: I would just recommend as far as the council goes if we let's say don't have it by next council meeting I think put an invitation for the secretary to attend and ask him the questions of where is the study.

JILL HANO: If it doesn't happen by?

BRENTON ANDRUS: You have another meeting at the end of April.

JILL HANO: Are you saying like personal or not personal? Are you saying that it would be a deal to have it before session?

BERNARD BROWN: Brenton's saying don't take my word for it.

BRENTON ANDRUS: I was saying if it's not released by session or if it's not released by the time we have our April meeting there should be a request for the secretary to maybe answer to this council and many other advocates that are on the call as well as provider organizations as to what's the delay. Because at this point we're hearing there's delay. It's not the only one we hadn't talked to yet. Maybe if we're still delayed by April maybe he can tell us why. I can't make him come. Just saying. Y'all can request if it hasn't been released by then.

JILL HANO: Because I really like the recommendation to have that on record for tomorrow. Do we need a motion?

BRENTON ANDRUS: As not a council member I can't tell you to make a motion or not. Y'all as a committee can discuss it.

JILL HANO: Let's discuss this.

ALAINA CHACHERE: I like the idea of having it brought up tomorrow.

AYDEN BLUNSCHI: Yeah.

JILL HANO: Okay. But does this officially need a motion?

ALAINA CHACHERE: Can it just be put in the notes to discuss this further in the full council meeting.

JILL HANO: Okay. Ms. Elliot.

MYLINDA ELLIOT: Yeah, nobody cares what I think but a motion or sending it to the full council sounds like a wonderful idea. Thank you.

JILL HANO: Thank you, Ms. Elliot. Okay. Bernard, anything else?

BERNARD BROWN: I think that's more than enough.

JILL HANO: Okay. Now Mr. Bennett, what is going on in your corner of the world? And I have a question when you're done.

BRIAN BENNETT: Okay. Hey everybody. I'm Brian Bennett with Medicaid. I think I just have one update that I want to provide with regards to legislation. Medicaid,

we're working on new bills. They don't really directly impact home and community-based services. One allows us to work with other states to partner with them to kind of share technology and systems. So if another state has built something really well that works it allows us to kind of work with them and leverage it to help us save money. And then another bill that we're working with is with the Office of Technology Services to kind of develop a framework to more easily develop data sharing agreements between state agencies. That's kind of an administrative tool. Doesn't really impact services.

I reviewed the bills that have been filed as of this morning and I didn't see anything that directly impacted Medicaid or in particular home and community-based services. So I didn't see anything that had been filed yet. Like Bernard said, we'll continue to monitor that to see if anything pops up. For the upcoming budget for the fiscal year 27 request I want to highlight two things. One is a couple months ago you all might have heard there was a press release put out that LDH is working to align certain Medicaid rates to Medicare rates. Those mostly involve physician rates or doctor rates. Act 306 from the 2024 session required LDH to put together a plan so that the Medicaid rates for those doctor services would align with Medicare rates. So in doing that kind of broke it up into two years. Earlier this year, I think this past summer, I think it was July. That was phase one of the plan where the Medicaid rate was bumped up to 85 percent of the Medicare rate. So in the FY27 budget we requested additional funding to fully move it up to 100 percent of the Medicare rate as required by legislation. So that was one of the big budget ask that's going to be in there for the 27-budget request just to allow us to align the rates that we pay physicians and doctors more with the rate that Medicare pays. So hopefully doctors and physicians will be more inclined to participate in the Medicaid program.

And then one small funding request that's going to be put in. We've seen some growth with the Act 421 program or the TEFRA program. So just on the administrative side we put in some additional funding that allows us to, we have to pay for level of care assessments for individuals and for children who apply for that program. They have to meet institutional level of care. A good bit of those have to be completed-- well, they either have to be completed by

a registered nurse or if you're meeting ICF level of care it's a 90L. So we have to pay for all of that just with the administration of the program. So since we've continued to see enrollment grow within TEFRA we included about 75,000-dollars just to those assessments so we can fund the need there. I think that's all that I have that I wanted to point out for the budget and legislation.

JILL HANO: Thank you, Brian. Any questions for Brian? Okay. I actually do have a comment and a question. My case worker asked me if I renewed my Medicaid and I said yes because I thought Medicaid renewals were in October not January. But whatever.

BRIAN BENNETT: Are you talking about just renewing your Medicaid every year?

JILL HANO: Yeah.

BRIAN BENNETT: It's different for everybody. Everybody's renewal date is different. It depends on when you signed up for Medicaid. It's not one date every year. It's whenever you get the letter in the mail.

JILL HANO: Okay. And then she asked me for my number and I don't have to give that to these people do I? I'm very grateful for all my services I get. That being said, a support coordinator has never ever asked me that and I don't want to give out my Medicaid number. You might be able to answer this. Is that protocol?

BRIAN BENNETT: So they should have access to that information already if they're your support coordinator or case manager. They should be able to access that if they're linked to you as your support coordinator so that's not something you have to provide.

JILL HANO: I said no because I didn't know what it was.

BRIAN BENNETT: It's a long number.

JILL HANO: On my Medicaid card, right?

BRIAN BENNETT: Yes. But they should have access to that information Jill. So they shouldn't need to ask you.

EBONY HAVEN: Yes. As a support coordinator, like Brian was saying, we always had that information. So I never had to ask anyone for your Medicaid number.

BRIAN BENNETT: Jill, they have the ability to log into a system and look it up if they need it.

JILL HANO: I don't think she has that ability friend.

BRIAN BENNETT: They should have it.

JILL HANO: Okay. Mr. Brown, you're recognized by the chair.

BERNARD BROWN: Thank you, ma'am. Brian, two questions. One, is there a difference between renewal and eligibility determination? Like financial eligibility determination.

BRIAN BENNETT: It's the same thing. Now you can have with some programs some wonky things happen like for TEFRA, for example, sometimes your disability determination may expire at a different time than your renewal but I think they still process it with your renewal.

BERNARD BROWN: Another thing is, and I think the reason why they were asking you that Jill was because they've been seeing a lot of people disenrolled because they didn't reply to the mail that they received asking them to provide information. Not to take up for them but maybe your support coordinator was trying to be proactive to make sure you don't get kicked off. But that's just so everybody on the phone, just anybody. If you get mail from Medicaid please be responsive to it because.

BRIAN BENNETT: Well, not only responsive to mail but please, please make sure if your phone number changes or you move you have to update that with Medicaid because that's the only way we have to contact you. And we have the information that we have. If a letter needs to go out it's going to go out to the address on file. It's very, very important that's updated and kept up to date so you can get the mail.

JILL HANO: Okay. Thank you. Ayden.

AYDEN BLUNSCHI: I have a question. What if we can't get our mail? What if we moved and we don't have a mailbox key?

BRIAN BENNETT: Do you have a mailing address?

AYDEN BLUNSCHI: I do.

BRIAN BENNETT: Did somebody collect it at that address?

AYDEN BLUNSCHI: No. I just haven't been issued a mailbox key to get my mail.

BRIAN BENNETT: Is it an apartment?

AYDEN BLUNSCHI: Uh-huh.

BRIAN BENNETT: They should give you a mailbox key so you can receive mail there.

AYDEN BLUNSCHI: Yeah. But I'm one of five so it's a few of us that are waiting. I don't want to lose anything while I'm waiting to get my mail and then they send me another letter saying you didn't get your first letter so

goodbye.

BRIAN BENNETT: Have they said why they won't give you the key?

AYDEN BLUNSCHI: I really don't know. There's something going on as to why they don't have the keys. It has something to do with the post office. I don't have a clue. I just live there.

BRIAN BENNETT: I would recommend if they don't give it to you soon I would call into Medicaid and just alert them and they can put a note in the system just so they are aware you're having a problem getting that key so they can notate that.

AYDEN BLUNSCHI: Okay. Thank you.

JILL HANO: Okay. Ms. Karen.

KAREN XU: (Inaudible).

BRIAN BENNETT: Yes. It's an annual renewal and it just varies person by person for what time of year they send it out. It's based on your application date when you applied. If you applied on June the second and you became eligible your annual renewal date would be somewhere around that area in June.

KAREN XU: So they made an annual decision (inaudible)?

BRIAN BENNETT: I think it can vary but it will say in the letter when the response is.

KAREN XU: (Inaudible).

BRIAN BENNETT: And I do believe they also send out a second notice if they haven't received what they need that it will close on this date if you don't respond. And you can respond by mail or you can even call them and let them know hey, I'm working on it. But they just need some type of response by that date.

KAREN XU: (Inaudible).

BRIAN BENNETT: There are some people that they can renew automatically. It's called ex parte. So sometimes if we have data available to us that says okay, this person needs it. We can verify that because we have data that shows this is their income. So in some cases you can renew and nothing is required. They won't send it out. So that is possible for some people.

KAREN XU: Just trying to understand and what kind of situation they're asking (inaudible)?

BRIAN BENNETT: I'm not sure. I know just the Medicaid eligibility groups they qualify just solely based on income. There's no medical component to it. Those are

more likely to be eligible for that. They can use data sources that are able to confirm eligibility without sending what we call a request for information out. But usually if there's a medical component to it to qualify for Medicaid we can't do those ex parte. I can talk to you more after.

JILL HANO: Okay. Thank you, Ms. Karen. Thank you, Brian. Okay. So that has to be our last-- can I call the question? So in the sense of time we have to move on to the meat of the meeting which is this committee to discuss any recommendations for our 2027 planning committee. Stephanie will you review the FY27 action plan.

STEPHANIE CARMONA: Right now I am sharing on the screen but also in your packet the five-year plan, the draft. This committee is in charge of recommendations for goal one and two. Right now I have goal one on the screen. Just that I can't get all of it on the screen or it will be really small. So goal one is on the screen and then I will go down to goal two with the objectives. We are recommending activities that are going to fit under these objectives and then they will go to the full council. Or no they won't. I'm sorry. Then they'll go to the planning committee to take into consideration for the annual plan. If you have any recommendations for goal three please hold them until the education and employment committee this afternoon. But these were the goals and objectives that were voted on at the council meeting whenever we voted. I don't remember. October maybe. For the new five-year plan.

JILL HANO: Thank you, Stephanie. I'm not going to read but as stated y'all have all the goals and objectives for goals one and two for our next five-year plan. So does this committee have any recommendations for specific activities for the FY27 state plan, correct?

STEPHANIE CARMONA: Correct.

JILL HANO: So I open the floor. Lil, you have the floor.

LILLIAN DEJEAN: Thank you, Jill. So hi everyone. My name is Lillian DeJean. I am currently your Louisiana Youth Leadership Forum. This is a program the DD Council has generously funded for the past three years coming on four now. And over the past couple of years we have seen significant program growth and expansion. We have been able to reach over 30 youth in our state. We consistently hire people with disabilities for our program. And we've

really seen an amazing impact on our youth. But with costs rising just in the world in general, right, and also with our program growth we're looking to expand our program. And so one thing that I would ask the committee to consider recommending is an increase in funding for YLF of approximately an additional 15,000-dollars. I would be happy to answer any questions about future plans for YLF or any questions about the program because I am always happy to talk about camp. I appreciate the committee's consideration.

JILL HANO: Can you repeat that Lillian. Can you repeat the funding. You're asking 1500?

LILLIAN DEJEAN: 15K.

JILL HANO: I think it's a great cause and I love watching the program. Our newest council member is going to be a junior counselor. Is that correct at all?

LILLIAN DEJEAN: Yes. Your newest council member (inaudible) was an alumni of our program in 2024. He's come back as staff in 2025 and he's actually our intern for 2026. He is an amazing rock star advocate and the council, he's is going to be an amazing asset to the council. And I also want to say that Jude also was an alumni and former staff member of LAYLF.

The program is doing exactly as it was created for. We're seeing our alumni go to post-secondary programs. Go on to meaningful careers to go into these advocacy spaces where our youth voices are really, really needed. Our hope with additional funding is we're going to be able to expand our reach and to continue things like our internship program where we can help our alumni grow those soft job skills so they can go on to chase what their good life is for them. I use the verbiage good life because that's an activity at camp. We talk to our delegates about what they want their good life to look like and how to get there.

JILL HANO: Thank you. Once we get ideas we'll make a motion and second it to present it all to the full council tomorrow. Do y'all have any more ideas under goals one and two to recommend for the FY27 action plan? Any activities to recommend to the full council tomorrow? Brenton.

BRENTON ANDRUS: So y'all voted for these items in the five-year plan so I think it would be very beneficial since we did ask in October to come with ideas to maybe have some input what you would like to see happen next year. You can also request or recommend to continue if there's an

activity we're currently doing that you're still very interested in you can recommend to continue that. You are the driving force, this committee, of goal one and two. We don't have an action plan unless y'all have some ideas.

JILL HANO: I do have a suggestion because goal two is-- well, healthcare. Obviously LaCAN is partnered. An activity would be some kind of training or focus on talking to kids or to people with DD about exercise because that concept is beyond me. So I think something about whether like a training or just dietary, like good foods verses bad foods and exercises for people with disabilities. Because my exercise isn't going to be like your exercise.

BRENTON ANDRUS: Keep in mind your ideas you may not have all the answers. It might be more conceptual but as long as it's enough information that we can explain it well enough where we can get folks to write in. Because what will happen is if the planning committee moves this forward and you agree that you would like this in your plan we'll get folks to submit proposals. They'll kind of tell you, right, for Jill's example how can we focus on the importance of exercise, diet, wellness and general health outcomes for people. And they can write pretty much a plan for you. This is what this activity would look like and then you will be responsible for choosing that. So you don't have to have all your ducks in a row for what you're trying to recommend. Even if it's general ideas like what Jill has that can be worked out on the back end before the plan actually gets started before we go through the whole process. And if you have none, you have none. Really trying to make sure to capture anything you might have.

JILL HANO: Okay. Anymore takers? Michael? Okay. So now I guess we would form a motion.

REKEESHA BRANCH: I will show you what I have so far.

JILL HANO: Brian, did you have your hand raised?

BRIAN BENNETT: No.

JILL HANO: Okay. So this is what we have, the two ideas we came up with. If there's no more ideas or no more discussion does anyone want to motion that we have these two items on our FY27 action plan? Ebony.

EBONY HAVEN: Okay. So I want to encourage everybody to look at the objectives and to maybe make some suggestions because if these are the only two items that we send to the planning committee they're going to have a very difficult time trying to fill each objective with activities. So I

encourage you guys to take the time now to try and maybe come up with some more ideas because we're going to have LaCAN and PIP. Those are two standing ones that the council always supports and funds. YLF. But the only new thing that we're taking to the committee is the idea that Jill just gave.

And so I encourage you guys to look at objective two under goal one and that objective is specifically talking about learning about the history of disabilities. Do we have any suggestions about how we can do that? Like an activity. Again, it doesn't have to be something specific now because the planning committee will take that over. It could be a concept that you guys have. And we can take that to the planning committee, the staff can do research on it and we can take that to the planning committee. But I think we need to do the work in the committee today in order for us to take those recommendations to the planning committee. It will be the same thing for the education and employment committee. We're looking for that committee to give us recommendations about activities for goal three that we can send to the planning committee. So this is y'all's plan. This is what y'all want to achieve in the next five years so we want to make sure that we're putting the time and effort into making sure we put activities that are going to help you guys meet your goals for the next five years in the plan.

JILL HANO: Tory had his hand up then Alaina. And then I will take public comments.

TORY ROCCA: This is not about goal one or goal three. This is about goal two. I'm not sure how big of a priority people think this is. But under objective three people with developmental disabilities and their families will have access to (inaudible) supports when needs or issues happen. My organization, Disability Rights of Louisiana, one of our staffers have been trying to get parish emergency response plans so we can actually put them together and figure out what they actually are. I suspect some parishes may not have detailed plans. Others it's hard to get the plans from. (Inaudible) is also working on something that's similar. Nicole DeJean is working on that as well. Perhaps trying to do something where we catalog emergency plans of the parishes so people with disabilities know what they can expect from their parish. What types of sheltering or evacuation or what help is available in the

event of a disaster might be useful things. And something we're working on. One staffer working on that. Following up with all parishes is challenging. Perhaps if the council would want to work (inaudible). When my organization calls people are worried that we're going to sue them or something like that. (Inaudible) less stacked with lawyers could get a better response. We actually had a meeting with one of the regional emergency (inaudible) I guess some of the parishes called them up and said why are people calling us and why are they bothering us (inaudible) do something bad to us is their response. We assured them we weren't but perhaps some kind of coordinated effort not in the least beginning to find out what the plans are with the parishes with respect to disabilities. At least know and go from there and see if they need to be improved.

JILL HANO: That is a good thought. Ebony, Rekeesha or whoever is typing is this kind of what you were saying?

TORY ROCCA: Emergency plans what they currently are if they even exist. (Inaudible) if the parish has a flushed-out plan and if so what needs to be improved. And also creating an easy access point for people with disabilities (inaudible).

JILL HANO: I see you Ms. Patti. But hold on one minute. Brenton.

BRENTON ANDRUS: I was going to get clarity from Tory but I think I got it from what he just said. It's not necessarily the FY27 necessarily advocating for this but it's more of an effort compiling the plans that already exist, sort of having a database, a record of what is out there. So I see it as kind of similar to something the council funded some years ago. Supposed to be like a disability resource website. It wasn't necessarily to create those new resources. It was to have a central location where you could find those resources instead of having to go to all these different areas. Pulling it together and maybe future years figuring out (inaudible).

TORY ROCCA: Exactly. Definitely I think a matter of months. A longish project. Just getting the information in the first place would take months and cataloging that. And then looking them over (inaudible).

JILL HANO: Okay. Alaina. Since Ms. Patti is a committee member can we do Alaina, Ms. Patti, then Ms. Kelly.

ALAINA CHACHERE: I was going to ask if Ms. Patti could go. I don't know if she is responding and I'm asking a different question.

JILL HANO: I was thinking the same thing. Ms. Patti, you have the floor.

PATTI BAROVECHIO: Thank you so much. Patti Barovechio with the Bureau of Family Health. Just as I'm sitting here, and to Ebony's point on goal two, part of the work of the bureau is we work on youth health transition and have partnered with Families Helping Families on transition initiatives. So especially since this goal is focused on health I think somewhere maybe a partnership, maybe some trainings, I don't know. But we certainly have a lot of content expertise within the bureau on youth health transition and how to support families through that developmental period.

Additionally as y'all were talking about like the emergency plans and stuff and resource databases might point you to Exceptional Lives and some type of partnership with them. I haven't kept up with them recently but I do know when they launched their resource in Louisiana it was well done, an easy-to-use resource. And I would say funding an existing resource rather than reinventing the wheel might be helpful. But they did have someone who answered a call line if they needed that type of assistance. But there was a lot of easy access kind of available 24/7. You could build customized plans for your own family member. So I'm just throwing out those suggestions.

JILL HANO: Thank you.

REKEESHA BRANCH: Dr. Barovechio, quick question. So you're saying funding the parish emergency response plan or are you saying funding something else?

PATTI BAROVECHIO: I'm saying tools for them to create plans or partnering with the parishes to put them in kind of like a central place. Families go to Exceptional Lives for resources for persons with disabilities so I would say it would be a good partnership. I know LDOE has partnered with them in the past building certain modules and stuff. So another place to link to the resources that the state is promoting or developing or has. So just coordinating things to where families can find them in the places that they're already going kind of thing.

REKEESHA BRANCH: Is that what you're looking for Dr. Patti?

PATTI BAROVECHIO: Yeah. More or less partnering with other organizations to where that information is readily available. So I'm assuming the parish emergency response plans it's like getting that parish emergency response plan in the way I'm tracking it in my brain to the families and working with the families so that like everyone knows what needs to happen in the case of an emergency. That it gets down to the family level. And that's where something like Exceptional Lives comes. It helps them build a family plan based on what the parish emergency plan is. If that makes sense.

BRENTON ANDRUS: I think it's two-fold. Basically what Tory said and then the information compiled, how we distribute it to families so they can use that information to create their own plans. I think that's where the partnerships come in with organizations to get that information.

PATTI BAROVECHIO: Yes.

JILL HANO: Alaina.

ALAINA CHACHERE: I have two questions. This is my first time doing this so do we need an idea for each objective or like the ideas can they serve two objectives? Just trying to understand.

BRENTON ANDRUS: They can serve two objectives. You can come up with ideas for all or if you just have one for one objective.

ALAINA CHACHERE: More than one idea for one objective.

BRENTON ANDRUS: There can be more than one idea, yeah. Pretty much if it falls within those two goals under any of those objectives. And then the planning committee can determine which kind of area they think it might fall under.

ALAINA CHACHERE: Okay. I wasn't sure. I know PIP is one you always fund and so is YLF. I didn't know if those were specific to a specific objective.

BRENTON ANDRUS: Yeah. That would probably fall under one looking at it.

EBONY HAVEN: If it talks about how to connect with policymakers that's all about LaCAN.

BRENTON ANDRUS: It's definitely under goal one and probably objective one. Usually LaCAN, Partners, YLF, People First those things we fund pretty much every year.

JILL HANO: Anything else?

ALAINA CHACHERE: Yeah. I like the idea, and I don't know if this was a part of something different. I know it's

come up in the past but having some sort of not curriculum but kind of a curriculum of sorts that could be distributed for disability history that we could share with anyone who wanted to participate. I don't know if they're doing it again where we had a disability awareness day at the capitol. I don't know. I just was thinking if we could center it around that time where we would share that kind of curriculum with anyone who wants to participate. Whether it be certain schools or anything or anyone. Even if I just wanted to do it at home with my kids. Hopefully it would be more impactful that it could be shared in a school setting with classes. That would be amazing. But I also would like to just be able to share it with my own children.

JILL HANO: Thank you. Kelly.

KELLY MONROE: I know y'all are on two but to go back to one I was hoping that we could still consider funding the training and stuff that People First does and just to continue the funding that you guys normally do every year. But that would fall under goal one and I know we're not on that but I walked in late so I'm sorry.

JILL HANO: Anything goal one and two. It doesn't matter. Okay. Anything else? And again, this could be goal one or two. Order isn't a necessity. Okay. So these are our recommendations. So now a motion to recommend this for the full council tomorrow.

REKEESHA BRANCH: You want me to read out the recommendations?

JILL HANO: Yes. Please.

REKEESHA BRANCH: No problem. All right. The first recommendation is increase in funding for Youth Leadership Forum in the amount of 15,000. The second recommendation is training to focus on talking to kids and adults with IDD on health and exercise. Example, exercise, dietary recommendations, etc. The third recommendation is funding tools to create parish emergency response plans or partner with other agencies to ensure that information is available to families. Number four is compile parish emergency response plans and find ways to get the information out to the community. Example, what is needed and how could we improve. Number five, curriculum on disability history created and shared with the schools and in the community. And the last one is continue funding People First trainings.

JILL HANO: So who wants to make a motion to recommend this to the full council?

TORY ROCCA: I motion.

JILL HANO: Okay. Any seconds?

AYDEN BLUNSCHI: Second.

JILL HANO: Okay. So the motion is to take this to the planning committee for the FY27 action plan and we'll offer this to the full council for consideration. It was motioned by Tory and seconded by Ayden. Is there any discussion? Is there any public comment? Are there any objections? Rekeesha can you call a roll call vote?

REKEESHA BRANCH: Not a problem. All right. Dr. Barovechio.

PATTI BAROVECHIO: Yes.

REKEESHA BRANCH: Dr. Barovechio, yes. Mr. Bennett.

BRIAN BENNETT: Yes.

REKEESHA BRANCH: Mr. Bennett, yes. Mr. Billings.

MIKE BILLINGS: Yes.

REKEESHA BRANCH: Mr. Billings, yes. Mr. Blunschi.

AYDEN BLUNSCHI: Yes.

REKEESHA BRANCH: Mr. Blunschi, yes. Ms. Chachere.

ALAINA CHACHERE: Yes.

REKEESHA BRANCH: Ms. Chachere, yes. Ms. Crain. Ms. Harmon. Ms. Aduli.

CHERIE KELLY-ADULI: Yes.

REKEESHA BRANCH: Ms. Aduli, yes. Mr. Macaluso. Ms. Nguyen. Mr. Rocca.

TORY ROCCA: Yes.

REKEESHA BRANCH: Mr. Rocca, yes. Ms. Stewart. Mr. Williams.

GEARRY WILLIAMS: Yes.

REKEESHA BRANCH: Mr. Williams, yes. Ms. Xu.

KAREN XU: Yes.

REKEESHA BRANCH: Ms. Xu, yes. And Mr. Smith.

ROBBY SMITH: Yes.

REKEESHA BRANCH: That's ten yeses.

JILL HANO: Thank y'all. The next item on the agenda is announcements. Alaina, take it away. Page two announcements in purple.

ALAINA CHACHERE: Got it. Please note after this meeting our Act 378 committee meeting will be held in this room starting at 2:45 followed by the education and employment committee meeting. Also tomorrow is the full council meeting which will start at 10:00 a.m. It will

also be in this same room. Those that are registered to participate virtually should have the links to the meetings in their email. Does anyone on the committee have any other announcements to make?

STEPHANIE CARMONA: I have something. I'm so sorry. I just thought about it. Just think about, I know we talked about it today, the recommendations. But with recommendations comes an ad hoc committee so think about if you want to volunteer to work on that ad hoc committee. It is open to any council member. Anybody can volunteer and I think we're taking volunteers tomorrow. I don't remember. We usually have that meeting before the April meeting just so it can be voted on in April.

JILL HANO: Thank you, Alaina. So do we have any public comment? Okay. I hereby adjourn the meeting at 2:56. See y'all tomorrow. Thank y'all.