

Louisiana Developmental Disabilities Council  
Quarterly Meeting  
April 30<sup>th</sup>, 2026

RENODA WASHINGTON: It is now 10:06. Good morning everyone. The quarterly meeting of the Louisiana Developmental Disabilities Council will come to order. Thank you all so much for your attendance. Looking forward to a great meeting. We're going to go ahead and get started with the roll call. Stephanie, can you do that please?

STEPHANIE CARMONA: Yes. Ashley Allen. Patty Barovechio.

PATTI BAROVECHIO: Here.

STEPHANIE CARMONA: Melissa Bayham.

MELISSA BAYHAM: Here.

STEPHANIE CARMONA: Brian Bennett.

BRIAN BENNETT: Here.

STEPHANIE CARMONA: Mike Billings.

MIKE BILLINGS: Here.

STEPHANIE CARMONA: Ayden Blunschi.

AYDEN BLUNSCHI: Here.

STEPHANIE CARMONA: Jude Boynton. Alaina Chachere.

ALAINA CHACHERE: Here.

STEPHANIE CARMONA: Cheri Crain.

CHERI CRAIN: I'm here. I'm working on my video just to let y'all know.

STEPHANIE CARMONA: Liam Doyle.

LIAM DOYLE: Here.

STEPHANIE CARMONA: Jill Hano.

JILL HANO: Here.

STEPHANIE CARMONA: Landon Hanks.

LANDON HANKS: Here.

STEPHANIE CARMONA: Angela Harmon. Cherie Kelly-Aduli. Frank Macaluso.

FRANK MACALUSO: Here.

STEPHANIE CARMONA: Lamar Meda. Pascal Nguyen. Robby Smith.

ROBBY SMITH: Here.

STEPHANIE CARMONA: Brooke Stewart. Julia Tanner.

BROOKE STEWART: This is Brooke Stewart. I'm here. I'm sorry.

STEPHANIE CARMONA: Julia Tanner.

JULIA TANNER: Here.

STEPHANIE CARMONA: Thank you. Erick Taylor.  
Renoda Washington.

RENODA WASHINGTON: Here.

STEPHANIE CARMONA: Gearry Williams.

GEARRY WILLIAMS: Here.

STEPHANIE CARMONA: Karen Xu.

KAREN XU: Here.

STEPHANIE CARMONA: Seventeen and you have a  
quorum.

RENODA WASHINGTON: Thank you, Stephanie.

LAUREN WELLS: Renoda, Lauren Wells, also here.  
I'M sorry. I haven't been appointed yet.

ASHLEY VOLION: And I'm Ashley Volion. I haven't  
been appointed yet but I'm here representing Disability  
Rights Louisiana.

RENODA WASHINGTON: Thank you, Stephanie. At this  
time we will have Alaina read the mission statement and  
Ayden to read the ground rules.

ALAINA CHACHERE: Our mission statement is to  
increase independence, self-determination,  
productivity, integration and inclusion for  
Louisianians with developmental disabilities by  
engaging in advocacy, capacity building and systems  
change.

AYDEN BLUNSCHI: Members must be recognized by the  
chair before speaking. Be respectful of others'  
opinions. Break for ten minutes every 1.5 hours.  
Discuss council business in a responsible 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. Side  
conversations are kept to a minimum, done quietly and  
restricted to the subject at hand.

RENODA WASHINGTON: Thank you all so much. To  
ensure the meeting runs smoothly and that we can all  
participate in an orderly manner please adhere to the  
following rules. Council members and members of the  
public attending in person please raise your hands to  
speak and wait to be recognized by the chair before  
speaking. Please keep side conversations to a minimum  
and comments related to the topic we are discussing.

For those council 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 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 for order council members in person and virtually will be allowed to speak first. Public members in person will be called on followed by public attending virtually who have their hands raised. Comments in the Q and A and chat will be addressed last. As with all hybrid meetings it can be difficult to keep track of all those wanting to speak in person and virtually so please be patient. All comments and questions from council members and the public may be limited to three minutes or less should we run into time constraints so please keep that in mind as well. 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 periods. The chair may also use their discretion to determine if comments will be accepted outside of those times. All participants in person please be mindful of side conversations. As we are live your side conversations can be picked up and be distracting to those who are conducting business.

So the first item of business is the approval of the January meeting summary. A draft of the January 29th meeting summary was distributed. The summary will not be read unless requested by a member. Are there any corrections? If there is no objection the meeting summary is approved as distributed? Hearing none, the meeting summary is approved.

The next item of business is the chair's report. My report is on this page. Greetings to all council

members. Welcome to our April quarterly meeting and thank you for your continued commitment to the council. I also want to extend a warm welcome to our new members Landon Hanks, Julia Tanner and Ashley Allen. We're glad to have you and look forward to working with you.

Executive committee update. The executive committee met on January 28th, 2026. The committee reviewed several items related to the council's operation and planning including updates to the 2026 legislative advocacy agenda, discussions of options for the council member retreat and review of current council meeting schedule. The committee also reviewed and recommended a proposed code of conduct to the full council with revisions and completed an annual executive director evaluation and recommended a 3 percent salary increase. Some meetings I attended. Education and employment committee and the legislative roundtables for 2026. I want to recognize the LaCAN leaders, the Families Helping Families executive directors and their staff across all regions as well as our council staff for their continued work and coordination in these efforts. As we move further into the legislation in Louisiana it is important that we remain engaged in advocacy efforts. This includes not only participation in meetings but also staying informed, reviewing materials shared by staff and coming prepared for committee discussions.

Since we do have new members I did want to reiterate council member expectations. I want to take a moment to reaffirm those expectations related to council participation and communication. While we all balance multiple responsibilities and deadlines service on the council includes specific expectations that support effective operations and informed decision-making. The following expectations are essential to fulfilling our responsibilities as council members. Timely responses to emails and requests from council staff and the chair to ensure thoughtful consideration of materials, adherence to deadlines and adequate preparation for meetings. Consistent attendance and active participation in council and committee meetings including engagement and discussions and contribution to the work of assigned committees. Preparation for meetings through the review of

materials provided in advance to support informed and productive decision-making. Ongoing engagement between meetings by staying informed, following up on assigned tasks and remaining responsive to council business. Council staff work diligently to support this body and respecting their time and effort through clear and timely communication is an important part of our shared responsibility. Consistent participation and communication are expected as part of our council service. When expectations are not met those instances will be addressed and documented as accountability supports the integrity and effectiveness of our work. My goal is to promote clarity, collaboration and mutual respect as we continue working together. Together we can ensure that the council operates effectively and continues to serve the community with purpose and impact.

Our reflection. Before I close I want to take a moment for reflection. As chair I like to take the time to reflect on how I am showing up in this role and I encourage each of us to do the same. Whether new to the council or serving for some time. Reflection helps us remain grounded in our purpose and accountable to the work. So right now let's quietly repeat each question and take a moment to reflect. This is something that I do personally. Every question is what I ask myself as the chair. Why am I a part of the council. Am I showing up in the way that reflects that purpose. Am I fully meeting the responsibilities of this role. And last but not least I ask myself and if not, what needs to change. Each of us was selected to serve in this role out of the many who applied for membership and the many others who are committed to this work every day. We were chosen to sit at this table. That carries responsibility and reflects the trust placed in us. So council members let's keep that in mind as we do the work to support individuals and families with disabilities.

Next, we have the executive committee report. And I will read that as well. The executive committee met this morning and discussed three items. Update on the 2026 legislative advocacy agenda. The staff gave us an update on the council's 2026 advocacy agenda. The Families Helping Families funding has been added to

HB1, the state budget bill, by the house appropriations committee. The council will be sending out alerts once the budget will occur in the senate finance committee so please be on the lookout. An additional 2-million was added to HB1 for LRS by the house appropriations committee. That is not the full 6.8-million needed in order to receive all the federal matching funds for our state but we will continue to advocate for the other 4.8-million needed when the budget will be heard in the senate finance. Unfortunately there has been no additional funding added to HB1 to increase home and community-based waiver rates and direct support pay. However, we will continue to advocate when the budget is heard in senate finance. But there were 750 community choices waiver slots added which is a win for the elderly population. There is interest on the senate side for additional funding for LRS and the waiver rates and direct support worker pay. LDH feels like they need a little extra information before asking for additional funding.

Lastly, Senator McMath's bill, which is SB34, and Representative Echols' bill HB74 have both passed through committee and are waiting for the judiciary committee that will create an emergency alert for people with disabilities. This alert will be tied to the level two alert called Bryan's call. Under that alert for children and for those that there will be a Bryan's call alert for adults. Senator Harris will now work with Senator McMath on SB34. Representative Echols' is also moving through the legislature but it only focuses on children with autism instead of all individuals with disabilities. And that is the update on the 2026 legislative advocacy agenda.

The other item of discussion, plain language council documents. The committee also reviewed plain language versions of the council's bylaws and policies and procedures. During the last action plan the council funded an activity to convert the council's bylaws, policies and procedures and other documents into plain language as well as language on the new website. The contractor converted the bylaws into plain language and an easy-read version. He also converted the policies and procedures into a plain language version. These documents are included in

everyone's packet and will take the place of the current approved documents.

Lastly, the council meeting schedule. The council tried a new schedule this quarter by having the committee meetings each Wednesday this month starting April 1st instead of the Wednesday before the council meeting. Although the schedule was agreed upon last quarter there have been a lot of concerns expressed. Therefore the executive director presented the council with the average expenses along with three options for the council to consider in order to reduce administrative costs. The council can only utilize 30 percent of the federal funding on administrative costs. The committee had a great discussion about expenses and the options presented and had a recommendation for the council to consider. This concludes the executive committee report.

From the executive committee agenda items and discussion there are two recommendations coming out of the executive committee for the council to consider. I will make those motions after any questions you may have. Are there any questions regarding the update to the 2026 advocacy agenda? Are there any questions regarding the consideration of the plain language council documents? Are there any questions regarding the consideration of the new council meeting schedule? Okay. Since there are no questions, Ebony, can you put the first recommendation from the executive committee on the screen. Because the motion is coming from a committee it does not require a second.

The motion is the executive committee recommends approval of the plain language and easy-read versions of the council bylaws and policies and procedures. Is there any discussion from council members? Any public comment? Are you ready for the question? The executive committee recommends approval of the plain language and easy-read versions of the council bylaws and policies and procedures. We will have a roll call vote. If you are in favor of the motion for the approval of the plain language and the easy-read versions of the council bylaws and policies and procedures when your name is called say yes. If you are opposed say no. If you abstain say abstain. Stephanie, please call the roll.

STEPHANIE CARMONA: Ms. Allen.

ASHLEY ALLEN: I'm here. Yes.

STEPHANIE CARMONA: Ms. Allen, yes.

ASHLEY ALLEN: Yes.

STEPHANIE CARMONA: I'm sorry. I need you to turn your camera on. I need to also have your name changed.

ASHLEY ALLEN: I'm sorry. I had to ask Julia to send the link over because I couldn't find mine. Mine is listed under Julia Tanner because she sent me her link.

PATTI BAROVECHIO: Usually you can click the link and rename it.

ASHLEY ALLEN: I didn't want to mess up Julia's part. Okay. Thank you so much for that.

STEPHANIE CARMONA: Ms. Allen.

ASHLEY ALLEN: Yes.

STEPHANIE CARMONA: Ms. Allen, yes. Dr. Barovechio.

PATTI BAROVECHIO: Yes.

STEPHANIE CARMONA: Dr. Barovechio, yes. Ms. Bayham.

MELISSA BAYHAM: Yes.

STEPHANIE CARMONA: Ms. Bayham, yes. Mr. Bennett.

BRIAN BENNETT: Yes.

STEPHANIE CARMONA: Mr. Bennett, yes. Mr. Billings.

MIKE BILLINGS: Yes.

STEPHANIE CARMONA: Mr. Billings, yes. Mr. Blunschi.

AYDEN BLUNSCHI: Yes.

STEPHANIE CARMONA: Mr. Blunschi, yes. Mr. Boynton. Ms. Chachere.

ALAINA CHACHERE: Yes.

STEPHANIE CARMONA: Ms. Chachere, yes. Ms. Crain.

CHERI CRAIN: Yes.

STEPHANIE CARMONA: Ms. Crain, yes. Mr. Doyle.

LIAM DOYLE: Yes.

STEPHANIE CARMONA: Mr. Doyle, yes. Ms. Hano.

JILL HANO: Yes.

STEPHANIE CARMONA: Ms. Hano, yes. Mr. Hanks.

LANDON HANKS: Yes.

STEPHANIE CARMONA: Mr. Hanks, yes. Ms. Harmon. Ms. Kelly-Aduli. Mr. Macaluso.

FRANK MACALUSO: Yes.

STEPHANIE CARMONA: Mr. Macaluso, yes. Dr. Meda.  
Ms. Nguyen. Mr. Smith.

ROBBY SMITH: Yes.

STEPHANIE CARMONA: Mr. Smith, yes. Ms. Stewart.

BROOKE STEWART: Yes.

STEPHANIE CARMONA: Ms. Stewart, yes. Ms. Tanner.

JULIA TANNER: Yes.

STEPHANIE CARMONA: Ms. Tanner, yes. Mr. Taylor.

ERICK TAYLOR: Yes.

STEPHANIE CARMONA: Mr. Taylor, yes. Mr. Williams.

GEARRY WILLIAMS: Yes.

STEPHANIE CARMONA: Mr. Williams, yes. And Ms. Xu.

KAREN XU: Yes.

RENODA WASHINGTON: The yeses have it and the motion is adopted. Ebony, would you put the final recommendation on the screen please. Because the motion is coming from a committee it does not require a second. The motion is the executive committee recommends option two, which is two in person and two virtual meetings as the new meeting schedule starting in July 2026. Is there any discussion from council members? The chair recognizes Brian.

BRIAN BENNETT: Along with the handout that was in our folder is that what the blue dates indicate?

RENODA WASHINGTON: That's going to have to be updated on here.

EBONY HAVEN: The answer is yes, but as far as which meeting will be in person and which will be virtual for the remainder of the year I will have to look at that. My recommendation would be for the October meeting to be in person because at that meeting you all are approving your new agenda for the 2027 legislative session and there's just a lot of votes at the October meeting. So my recommendation to the council would be if you all approve this recommendation and go with option two, two virtual, two in person, that the July meeting is virtual and the October meeting be in person.

RENODA WASHINGTON: All right. The chair recognizes Mr. Landon.

ALAINA CHACHERE: I have a question. Last night I was reading over the different, the options that Ebony had sent us and is it possible for us to, like if we vote as a whole council, can we choose a different

option from those three or is it already set? I'm just trying to understand.

EBONY HAVEN: So we tried recommendation one and there was a lot of concerns, like Renoda said in the executive committee report, and so we're trying a new option. Well, they recommended a new option to the full council which was recommendation number two. So that would be a new recommendation that y'all would try. And again, if you didn't like that option yeah, we can try the third option. Or you guys are more than welcome to bring in other recommendations that you all have. These are recommendations that I got from other councils that they are utilizing in order to reduce administrative costs so these are the options that I presented. If you all have any other options that you would like to present to the council for their consideration you're more than welcome.

RENODA WASHINGTON: I want to reiterate with the council meeting schedule one thing that I proposed to the executive committee is we're looking at the bigger picture. Ebony provided us with a lot of information as far as the why. The reason behind. She also allowed us to look at what happens if we go over the expenses, what that would look like. Possible corrective action, things like that. That also came along with our recommendation for option two. Also the flexibility. One thing that Ms. Stewart brought up in that meeting too was the flexibility for working parents and things like that. But also because everybody wants to be a part. We want to be here. We want to do what we need to do. And sometimes, I know I teach, I'm a parent so having that option, especially if the overall bigger picture is so that we will not have to know what it looks like to get a corrective action or some of the other things that Ebony shared with us on what it would look like if we do not follow those recommendations that was presented so that we can reduce costs. So we're trying to have a happy medium for this so that everybody can participate but also knowing the bigger picture, looking at the bigger picture and the why.

Because the thing that we want to keep in mind is what is best for the council in our decision-making. I know that since I have been on the council this has

never come up with the expenses so I do appreciate Ebony and the staff bringing this to us even before it became a reality. Initially it was just a thought of being proactive but now it's reality and these things are actually occurring. We are there. We're over. Let's just be real with it. So that was one of the main things that we discussed. And this is one of the major reasons that we feel that option two will be the best because we want to consider that. Any other questions that we may have? I just wanted to just throw that out there to kind of reiterate if you weren't a part of the executive committee meeting this morning. Landen, the chair recognizes you.

LANDON HANKS: Thank you, Ms. Chair. I did want to bring a proposal that I thought of. As Ms. Ebony stated the October meeting with this council (inaudible). However, I am thinking about we should perhaps flip every other month depending on what the council says to have the meeting Wednesday on Zoom and then perhaps have all the other meetings on Zoom. Reason being and have the last meeting on Zoom because we have all three meetings on Zoom perhaps as presented we have multiple calls from committee members. Perhaps if we do all the meetings built up to the final meeting or if we're going to go with option two presented by council it is best for this council to think of what is best for us at the end of the day. But I'm also saying perhaps we should do Zoom for almost all the follow-up meetings until the last one depending on where the council is at with the agenda and how the council is moving. If we need to have an in-person meeting for the follow-up meetings before the big quarterly meeting we should perhaps have them on Zoom. Or if the council wants to keep it at two that would be plausible as well but I thought perhaps having all the follow-up meetings on Zoom to prevent multiple commuting for all meetings to perhaps save the council money on commuting. That is my proposal to the council. As I present this to the council I am open to opinions but I ultimately think the proposal could help with cutting costs for everybody.

RENODA WASHINGTON: Thank you so much, Landon, for that. Do we have any other questions anyone wants to address?

EBONY HAVEN: I think what he's-- and Landon, correct me if I am wrong. I think what Landon is proposing is to have three meetings virtually and then have the October meeting in person. Is that what you're proposing Landon?

LANDON HANKS: Yes, ma'am.

EBONY HAVEN: Okay. So that is an additional option that he wants to put on the table for the council to consider having three virtual meetings and one in-person meeting will be in October.

LIAM DOYLE: And just to clarify this will begin next year?

EBONY HAVEN: This will begin July 2026.

LIAM DOYLE: Got you. So in lieu of meeting in person in July, fully online beginning in July.

EBONY HAVEN: I think that's his recommendation.

LIAM DOYLE: Okay. Just trying to clarify.

BRENTON ANDRUS: Yeah, based on his recommendation it would be July virtual, October would be in person based on what Ebony said, and January and April would also be virtual.

RENODA WASHINGTON: We have a pending motion already. We have to take care of this one first and then we can consider what Landon, the other option. Any questions on the pending motion? The chair recognizes you Mr. Billings.

MIKE BILLINGS: I don't have a question. I just have a comment. Our executive committee meeting earlier it was brought up that the virtual meetings those who wanted to attend in person could still attend in person they just would not be eligible for any type of expense reimbursement and no meals provided. Is that all correct?

EBONY HAVEN: Yes.

MIKE BILLINGS: So for those that still wanted to come here you could come here.

RENODA WASHINGTON: Thank you for saying that Mr. Billings. That's important because I think the committee was confused with that the last time as well. You're still able to meet in person. That's not being taken away. Thank you. The chair recognizes Landon.

LANDON HANKS: Thank you, Ms. Chair. As I have just perhaps the council I want to bring to executive council perhaps if we're wanting to do virtual as well

for those who would still like to meet in person perhaps we could get a group to look into hotels perhaps wanting to provide a lower rate for council members who want to attend in person. It would fall to the person to pay for expenses but perhaps give them a lower rate for the night they would stay in hotels. As I attended policy and partners meeting, which is one of the funding the council provides, perhaps the council can look into having perhaps a lower rate for council members if they do want to attend in person to perhaps lower cost for council members. Not fully saying-- let me clarify. The cost will still be on the member but perhaps finding a way to help perhaps lowering the cost for council members.

RENODA WASHINGTON: Okay. Thank you, Landon, for those suggestions. Is there any public comment? All right. The question is the executive committee recommends option number two, which is two in person and two virtual meetings, as the new meeting schedule starting July 2026. We will have a roll call vote. If you are in favor of the motion when your name is called say yes. If you are opposed say no. If you abstain say abstain. Stephanie, can you call the roll please.

STEPHANIE CARMONA: Ms. Allen.

ASHLEY ALLEN: I'll abstain.

STEPHANIE CARMONA: Ms. Allen, abstain. Dr. Barovechio.

PATTI BAROVECHIO: Abstain.

STEPHANIE CARMONA: Dr. Barovechio, abstain. Ms. Bayham.

MELISSA BAYHAM: Yes.

STEPHANIE CARMONA: Ms. Bayham, yes. Mr. Bennett.

BRIAN BENNETT: Yes.

STEPHANIE CARMONA: Mr. Bennett, yes. Mr.

Billings.

MIKE BILLINGS: Yes.

STEPHANIE CARMONA: Mr. Billings, yes. Mr.

Blunski.

AYDEN BLUNSKI: Yes.

STEPHANIE CARMONA: Mr. Blunski, yes. Mr.

Boynton. Ms. Chachere.

ALAINA CHACHERE: No.

STEPHANIE CARMONA: Ms. Chachere, no. Ms. Crain.

CHERI CRAIN: Yes.

STEPHANIE CARMONA: Ms. Crain, yes. Mr. Doyle.

LIAM DOYLE: Abstain.

STEPHANIE CARMONA: Mr. Doyle, abstain. Ms. Hano.

JILL HANO: Yes.

STEPHANIE CARMONA: Ms. Hano, yes. Mr. Hanks.

LANDON HANKS: Abstain.

STEPHANIE CARMONA: Mr. Hanks, abstain. Ms.

Harmon. Ms. Kelly-Aduli. Mr. Macaluso.

FRANK MACALUSO: Yes.

STEPHANIE CARMONA: Mr. Macaluso, yes. Dr. Meda.

Ms. Nguyen. Mr. Smith.

ROBBY SMITH: Yes.

STEPHANIE CARMONA: Mr. Smith, yes. Ms. Stewart.

Ms. Tanner.

JULIA TANNER: Abstain.

STEPHANIE CARMONA: Ms. Tanner, abstain. Mr.

Taylor.

ERICK TAYLOR: Yes.

STEPHANIE CARMONA: Mr. Taylor, yes. Mr. Williams.

GEARRY WILLIAMS: Yes.

STEPHANIE CARMONA: Mr. Williams, yes. Ms. Xu.

KAREN XU: Abstain.

RENODA WASHINGTON: The yeses have it and the motion is adopted. Thank you, council members. The next item of business is the executive director's report. The chair recognizes Ebony Haven for her report.

EBONY HAVEN: Good morning everybody. My report is the gray report in your handout. I'm not going to read the full report. I'll just make some highlights. The first thing I do want to highlight is your appropriations, and this is something that I shared in the executive committee, that for FY26 or the federal fiscal year 26 we are funded at level funding. So when this report was written the council hadn't received the second installment of funding yet for FY26 but since that time we have received your second installment. It's really important for me to note that that second installment was not quite the \$1.38-million that we normally receive. So I didn't mention this last year because the reduction that they gave us was pretty minimal but I do want to mention it now because we have another reduction and if this is something that's going to be consistent I just want to make sure you all are

aware.

So last year for FY25 our funding was reduced by 3,290-dollars. So we received like 1.37-million. Again, I didn't mention it because that was minimal. However, for the second installment that we received, which was our full allotment, we got \$1.36-million and so our funding was reduced by another 9,150-dollars for a net reduction of 12,440-dollars. So just keep in mind as costs continue to rise our funding for our councils are decreasing. And so I just want to point out it wasn't just the Louisiana council. All the councils across the board received a reduction in funding. And some councils as much as like 76,000-dollars for those larger allotment states like California. So our reduction was 12,440.

So when we're looking at administrative costs I just would mention that one of the things that we pay for are our National Association on Councils for Developmental Disabilities. We pay those dues every year. The dues that we pay them are about 11,000-dollars. So when we're getting a reduction in our federal funding that 12,000-dollars could have been used to cover that. So I just kind of want to put things into perspective whenever we're thinking about administrative costs because even though they are reducing our funding for their administrative costs they're not increasing the percentage of your funding that we're allowed to use towards administrative costs. So I just want to kind of highlight that we didn't receive that \$1.38-million that we normally receive for appropriations.

The other thing I want to highlight is staff changes. There are currently two program monitor positions open. I just mentioned administrative costs. So one of the things that we did internally was to look at our staff and to determine whether or not we needed two program monitors because administrative costs, salaries and benefits are a part of your administrative costs. Internally we looked and we felt like we could operate effectively and efficiently with seven staff members. So we decided not to fill that second program monitor position and that will also reduce some of your administrative costs as well.

The next thing I wanted to highlight was LaCAN. I

know our chair already mentioned the LaCAN leaders and the FHF directors in her report but I also wanted to extend a great big thank you to our LaCAN leaders. They work so hard in making sure that our roundtables run smoothly. And I want to thank our Families Helping Families centers and their staff and executive directors for doing a job well done in this season for our roundtables. We hosted nine regional roundtables across the state. They were both in person and virtual. Some of them had hybrid. And we had a total of 364 participants. And of those we had 11 legislators who attended, or legislative assistants who attended those roundtables. And out of those 364 nine were-- I calculated wrong when I did my report. We actually had nine council members that were in attendance as well as two members that provided testimony at those roundtables. So I just want to give a shoutout to those members individually. And although Ms. Constance Alphonse has not officially been appointed yet I do want to recognize that she was one of those members. Ms. Constance Alphonse, Dr. Patty Barovechio, Ayden Blunsch, Jude Boynton, Liam Doyle, Jill Hano, Brooke Stewart, Renoda Washington, and Karen xu. And I do want to send a special shoutout to both Ayden and Brooke for providing testimonies at our roundtables. And our chair for not only attending her regional roundtable for region five but she was on four of our regional roundtables. So I do want to just give a shoutout because it's important that our council members are at our roundtables because it's your legislative agenda and we just get excited when we see our council members at our yellow shirt days, and at legislative visits and at our roundtables. So again, thank you guys so much for showing up for us.

I also wanted to mention that the LaCAN leader vacancy in region four has been filled. Our new LaCAN leader is Ms. Erica Joseph and we sent out an LADDC news just introducing her. So she'll be reaching out to those members in region four. I know some of our new members who have just been appointed recently, Mr. Landon Hanks, Ms. Ashley Allen and Ms. Julia Tanner they are all in region four. So just be on the lookout for Erica Joseph. She will be contacting you all soon if she hasn't already done so.

And lastly for the LaCAN highlight. I just want to make sure that I mention that it's important for our council members to keep in contact with our LaCAN leaders. Again, they're working so hard just to make sure that the council members are informed about our yellow shirt days, our LaCAN alerts that are going out and just checking in so that you guys are aware of what's going on in the disability community. So it's important that we keep in contact with them. And if they call you and they have to leave a message please contact them back. We've just gotten some reports that they've been having some issues getting in contact with some of our council members. So again, they're a great resource for information and just trying to keep you informed about your advocacy agenda and important issues that affect our disability community.

The last thing, it's not on my report, but I do want to mention now that our new members are officially appointed, some of our new members, I'll be sending out information for orientation. Again, orientation will be in the lunch and learn format. And since we're in session currently it will be really difficult for me to do it now. Session ends June 1st so I will have those orientation sessions throughout the month of June. And it will be a total of five sessions instead of one all-day meeting that we used to have. And then the first four sessions will be one hour long for their lunch and learn and then the last session will be conducted by our parliamentarian Ms. Nicole Learson. And that one will be two hours. So again, I will send out information about that. And if you guys have any questions I can answer.

RENODA WASHINGTON: Thank you, Ebony. Are there any questions from council members on the report? Just to add, council members, please ask questions. Ebony is so helpful. The staff is helpful. If you have any questions or need any guidance on LaCAN or anything please don't hesitate to reach out to the staff. Ebony, all that you see here or myself, working together. Thank you, Ebony, once again. The report requires no action and will be placed on file.

The next item of business is the budget report. The chair recognizes Ebony again for the report.

EBONY HAVEN: Okay. The budget report is in your

packets. I think it's on a white paper. Yes. So I'm not going to go over it line by line. If you have questions definitely ask. But there are a couple of things that I want to highlight. The expenditures for the full first and second quarters are there and (inaudible) for the third quarter. So for the third quarter there are a couple of things. Under operating services in February you'll notice that there's a really large increase in our expenses and that is because we were having a lot of issues getting our rent payments paid. So number one in January we got new office management. So we went from one office management that was (inaudible) and then we went to a new one. They were not entered in the system as a state vendor so that took a while for them to get their state vendor number and everything for them to get set up in the system. So that is why you see that large increase right there because we were behind about four months in our rent payments and so we had to pay that. Additionally, the moving company had the same issues. The moving company obviously was in December but they were not a state vendor so it took them a while to become a state vendor so that payment was delayed as well.

And then the last thing I kind of want to mention I always like to mention the things in red. You will see in supplies we had a credit for 63-dollars. That's due to we ordered something that didn't get delivered. I think it was a computer charger and then they offered us a credit. And that is all the highlights that I have. If you guys have any questions I'm more than happy to answer.

RENODA WASHINGTON: Thank you so much, Ms. Ebony. Any questions? Ms. Hano, the chair recognizes you.

JILL HANO: Okay. So we're looking at the third, like we're reviewing third quarter data, correct?

EBONY HAVEN: Yes.

JILL HANO: Okay.

EBONY HAVEN: So that's January, February and March.

JILL HANO: All right. Okay. I see it in black and white. My bad. Thank you.

RENODA WASHINGTON: Thank you, Ms. Hano. Any other questions from council members? Hearing none, the

report requires no action and it will be placed on file.

Next we're going to take a recess. If there's no objection the meeting will recess for ten minutes. Hearing none, the meeting is at recess and we will come back in ten.

{Break}

RENODA WASHINGTON: All right. It is now 11:11. The meeting will come to order. The next item of business is the report from the Act 378 subcommittee. The chair recognizes Ms. Bambi for the report.

BAMBI POLOTZOLA: Hi everyone. Can you hear me?

RENODA WASHINGTON: Yes, ma'am.

BAMBI POLOTZOLA: I apologize for the delay. I wasn't expecting to speak until after lunch. You caught me off guard. But I'm glad to be here. Good morning. The Act 378 subcommittee met on April 15th. We do not have any recommendations for the council to consider at this time. During the meeting we reviewed fiscal year 26 third quarter data for programs within the Office for Citizens with Developmental Disabilities and Behavioral Health. Kelly Monroe from the Arc for the Office of Aging and Adult Services program was unable to attend the meeting but she did provide a report to review. All reports can be found linked in our committee agenda on the council's meeting web page if you would like to review.

It was also reported that all local governing entities are currently on target with their expenditures for individual and family support consumer care resources, supported living and flexible family funds. South Central Human Service District, which is in region three, was allowed the opportunity to share a few success stories with the committee to provide a connection and clear outlook on how the services benefit families in their area. So OCDD provided a follow-up on the concerns we expressed with the excessive use of the other category in the ISF, which is the individual family support expenditure report, and the potential for inaccuracies. To address this concern OCDD had added seven new categories to provide for a better description of the participants' requests. And the seven categories are summer/fall holiday activity, day program, supervised independent living,

therapy, medication related supplies, lodging and travel, and extermination services.

Lastly, OCDD was made aware of an ongoing concern with several families unhappiness with the wait time for the individual family support requests results when the request has been submitted by support coordination. The committee asked that OCDD address this concern by creating a structured timeline for request submissions for all support coordination agencies. Mr. Herman Bigner with OCDD stated that he will ensure this concern is addressed at the next LGE support coordination quarterly meeting and provide us with an update for next quarter.

And if I may, I was on-- this is Bambi doing like not my scripted speech. But I was on a meeting with some people from Texas, Disability Rights or Texas SIL, and they asked me if I was on the DD Council and I told them I was on it for over a decade but no longer on it. But I chaired this ad hoc committee for Act 378. Which for those of you who don't know this act was enacted in 1989. And I told them about the funding that was overseen by this act and those types of things and they were so impressed that Louisiana had this type of state general funds that was so flexible. They don't have that in Texas. That does not mean that Texas doesn't have other things. But the fact that advocates of, I think my math is right, 37 years ago advocated for this funding and we still have it today I think it demonstrates the importance of this council and the importance of the work that you're doing to continue. So if anyone is interested in more about the Act 378 and being involved in the committee just let your staff or your chairperson know. We would love to get more people involved.

RENODA WASHINGTON: Thank you so much for that, Ms. Bambi. Are there any questions from council members on the report? The chair recognizes Ms. Hano.

JILL HANO: Okay. Thank you. Bambi, refresh my memory. Or I don't even know if this came up. But how-- I'm guessing OCDD staff, maybe, maybe not, came up with these seven categories. That other comes up. Other is these specific seven things. Like in my mind when you were talking, and I could be way off base, but is that like a trial-and-error thing?

BAMBI POLOTZOLA: So my understanding, Jill, is that when they looked at why there was so much in the category of other and they actually looked at the individual items that they realized that they should have been in categories such as these. So by looking at like examining what was being put in other then they were able to say oh, if we had a category labeled and these seven categories came up. Like much of the things that were put in the other category could have gone into these seven that they came up with.

JILL HANO: Okay. I don't even know what my ask is but okay. Like if it's still an issue will they create more categories or is that too technical?

BAMBI POLOTZOLA: So you're asking if they can create more categories?

JILL HANO: Yes.

BAMBI POLOTZOLA: I think they would. OCCD has been very open. They listened to our concern of the large amount that's in other and why weren't they in categories and they made this change. So I think they would be open once we review the data for the coming year and see if there's still concerns they would be open to that. I can't speak for them but they have always been open to listening to what the committee request.

JILL HANO: Okay. Great. Thank you so much.

BAMBI POLOTZOLA: Thank you, Jill.

RENODA WASHINGTON: Thank you, Jill. Any other questions from council members? The chair recognizes Mr. Frank.

FRANK MACALUSO: I was just wondering how do I go about applying for it? Any of those categories. Do I just apply through my support coordinator or do I call y'all?

BAMBI POLOTZOLA: So this program specifically that we're talking about goes through the human service districts. So whatever human service district, the region you're in, there's a human service district or authority in every region so you can make a request either through your support coordinator or you can make a request directly through the human service district. And there is a committee that looks at all requests and determines if they meet a certain level of urgency or need and then they'll fund it as they have funds

available based on the request and the need.

FRANK MACALUSO: Also how do I go about joining one of those committees too?

BAMBI POLOTZOLA: The committee you can go through your chairperson. Ask the staff or the chairperson, Ms. Washington, and she can make the appointment.

FRANK MACALUSO: Yes, please. Thank you.

RENODA WASHINGTON: Thank you, Frank. The chair recognizes Mr. Landon.

LANDON HANKS: Thank you, Ms. Washington. Ms. Bambi, correct me if I'm wrong. I want to be sure I'm clarifying this correctly. You said there was concern about the timing of OCDD request helping, is that what I'm understanding from the request?

BAMBI POLOTZOLA: There was a concern on like if somebody, a family would ask for if they had some type of need and that they needed this individual family support funding in that it wasn't being processed very timely. Like they weren't getting feedback on their request very timely. It's taking longer than what they thought it should take.

LANDON HANKS: More of a response time kind of deal?

BAMBI POLOTZOLA: Right.

LANDON HANKS: Okay. I just wanted to make sure what the issue is. Thank you.

RENODA WASHINGTON: Thank you, Landon. Any other questions from council members? Any public comment? The report requires no action and will be placed on file.

The next item of business is from the planning committee. The chair recognizes Ayden.

AYDEN BLUNSCHI: Thank you. The FFY 2027 action plan ad hoc committee met Friday March 20th, 2026, and Tuesday April 21st, 2026. The draft plan that the committee approved has been included in your packet. This planning committee has one recommendation to present to the full council. The planning committee would like to recommend the full council to consider the draft FFY 2027 plan. During the meeting the committee kept the funding at its current level for these activities. 1.1 Partners in Policymaking. 1.1.2 LaCAN. 1.1.3 advocacy events. 1.1.7 Youth Leadership Forum. 1.2.1 People First. The committee also added

funding to new activities in this five-year plan. 2.1.2 early identification at 10,000. 2.2.2 transportation study at 45,000. 2.2.3 emergency plans at 50,000. 3.1.3 transition planning at 59,000. 3.1.4 childcare training at 50,000. 3.2.1 job fair at 45,000. After reviewing and approving the draft the committee motioned to send the draft FY 2027 plan to the full council for consideration and then adjourned. On behalf of the planning committee I move that the council approve our recommendation. Thank you.

RENODA WASHINGTON: Thank you, Ayden. Because the motion is coming from a committee it does not require a second. It is moved that the planning committee recommends approving the 2027 draft action plan. Is there any discussion from council members? The chair recognizes Brian.

BRIAN BENNETT: I have one question for activity 1.2.2. Would the funding for that activity be contained within their current budget or would there be funding directly allocated (inaudible)? It's for the Families Helping Families.

STEPHANIE CARMONA: The funding that is listed in this plan is all federal funding and because the Families Helping Families utilize the state general funds there's no amount that's listed there because we won't know how much they will get until the state general funds are approved. So it just says they will utilize their state general funds. Did that answer your question?

BRIAN BENNETT: Yes.

RENODA WASHINGTON: Any other questions from council? Any public comment? The question is on the planning committee recommends approving the 2027 draft action plan. We will have a roll call vote. If you are in favor of the motion when your name is called say yes. If you are opposed say no. If you abstain say abstain. Stephanie could you please call the roll?

STEPHANIE CARMONA: Sure. Ms. Allen.

ASHLEY ALLEN: I'm going to abstain.

STEPHANIE CARMONA: Ms. Allen, abstain. Dr. Barovechio.

PATTI BAROVECHIO: Yes.

STEPHANIE CARMONA: Dr. Barovechio, yes. Ms. Bayham.

MELISSA BAYHAM: Abstain.  
STEPHANIE CARMONA: Ms. Bayham, abstain. Mr. Bennett.  
BRIAN BENNETT: Yes.  
STEPHANIE CARMONA: Mr. Bennett, yes. Mr. Billings.  
MIKE BILLINGS: Yes.  
STEPHANIE CARMONA: Mr. Billings, yes. Mr. Blunschi.  
AYDEN BLUNSCHI: Yes.  
STEPHANIE CARMONA: Mr. Blunschi, yes. Ms. Chachere.  
ALAINA CHACHERE: Yes.  
STEPHANIE CARMONA: Ms. Chachere, yes. Ms. Crain.  
CHERI CRAIN: Yes.  
STEPHANIE CARMONA: Ms. Crain, yes. Mr. Doyle.  
LIAM DOYLE: Abstain.  
STEPHANIE CARMONA: Mr. Doyle, abstain. Ms. Hano.  
JILL HANO: Yes.  
STEPHANIE CARMONA: Ms. Hano, yes. Mr. Hanks.  
LANDON HANKS: Yes.  
STEPHANIE CARMONA: Mr. Hanks, yes. Ms. Harmon.  
Ms. Kelly-Aduli. Mr. Macaluso.  
FRANK MACALUSO: Yes.  
STEPHANIE CARMONA: Mr. Macaluso, yes. Dr. Meda.  
Ms. Nguyen. Mr. Smith.  
ROBBY SMITH: Yes.  
STEPHANIE CARMONA: Mr. Smith, yes. Ms. Stewart.  
Ms. Tanner.  
JULIA TANNER: Abstain.  
STEPHANIE CARMONA: Ms. Tanner, abstain. Mr. Taylor. Mr. Williams. Oh, I'm sorry, Mr. Taylor.  
BRENTON ANDRUS: Erick, can you hear us?  
ERICK TAYLOR: Yes.  
BRENTON ANDRUS: Is that a vote yes?  
ERICK TAYLOR: Yes.  
BRENTON ANDRUS: Okay. Thank you.  
STEPHANIE CARMONA: Mr. Taylor, yes. Mr. Williams.  
GEARRY WILLIAMS: Abstain.  
STEPHANIE CARMONA: Mr. Williams, abstain. Ms. Xu.  
KAREN XU: Abstain.  
STEPHANIE CARMONA: Ms. Xu, abstain.  
BRENTON ANDRUS: Eleven yeas, six abstentions and zero nays.

RENODA WASHINGTON: The yeses have it and the motion is adopted. Thank you, members.

The next item of business is the report from the self-determination community inclusion committee. The chair recognizes Jill Hano for the report.

JILL HANO: Hi y'all. Give me one minute. Good morning. I'm sorry guys. The self-determination committee met on maybe Friday April 1st and the report is rather lengthy so I would like to request that Stephanie provide the committee report for me this morning.

STEPHANIE CARMONA: No problem Jill. The self-determination and community inclusion committee met on April 1st and does not have any recommendations to present to the council. We did receive an update from Gearry Williams with the Office of Aging and Adult Services or OAAS. Mr. Williams reported OAAS is continuing to contract and meet biweekly with HCBS Strategies to do a full review and revamp for the community choices waiver to create a more means-based wait list and a continuum care program for the participants. OAAS are hoping by June they will be in a position where they can make recommendations to CMS and Medicaid on how they plan to move forward. Mr. Bernard Brown from the Office of Citizens with Developmental Disabilities and Mr. Brian Bennett from Medicaid were unable to attend the meeting and provide their report but they are both here today and will provide their updates at the full council.

We also 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. You can also find reports attached to our agenda. During the meeting the committee also discussed concerns for the council's women's health and sex education initiative contracted by LSU. As of April 1st LSU had just signed both contracts but had not begun any work towards the goals set for those initiatives. Staff reported that they would provide an update to the full council for us to have an open conversation about our concerns.

RENODA WASHINGTON: Thank you, Stephanie. Are there any questions from council members about the

report? Any public comment?

REKEESHA BRANCH: Just as an update, we still have not heard anything from LSU as it relates to the women's health and sex education. We're still waiting to get a report from them.

RENODA WASHINGTON: Thank you. The report requires no action and will be placed on file.

ALAINA CHACHERE: How long have we been waiting for this? When did y'all last reach out?

REKEESHA BRANCH: Yesterday is the last time I reached out to them. I sent them an email for follow up. He responded this morning to let me know he's working on it. Don't know what he's working on but we have been trying to get information from them since day one which was in October. So yeah, they just signed the contract on April the 1st. We just got the contract signed but they have not done anything or reported that they have done anything that we have requested. But according to them they will have everything done by the end of the contract which would be September.

RENODA WASHINGTON: The next item of business is the report from the education and employment committee. The chair recognizes Stephanie for the report.

STEPHANIE CARMONA: Good morning. I am just going to read the report that Brooke gave me. She had to jump off really quick so I'm going to just read that. The education and employment committee met on April 8th and had one recommendation to recommend to the full council. The education and employment committee would like to recommend the full council consider writing a letter to Cade Brumley and the boards and commissions to explain that having a representative from the Louisiana Department of Education is part of the DD Act. Based on recent information Brooke says I do not believe the motion should move forward. The earlier concerns stemmed from a miscommunication and confusion about the council schedule. The division of diverse learners has affirmed that it values this partnership and is committed to aligning with the responsibilities outlined in the DD Act and the council's priorities and will ensure representation at meetings either directly or through (inaudible).

The committee also received updates from Louisiana

Rehabilitation Services. The council is currently tracking house bill one which currently includes level funding for LRS. PreETS participation continues to increase. LRS has staffing contracts with Easterseals in Shreveport and Families Helping Families of Greater New Orleans. An additional contract is being negotiated in Baton Rouge and there are also 16 third-party corporative agreements with school districts in place. The WIOA, the state planning period is underway. Public comment was opened on April 10th through Louisiana Works for 15 days and covers vocational rehabilitation, workforce programs and adult education. A rate adjustment increased the counselor rate from \$17.18 to \$21.04 per hour along with a 5 percent increase for all staff to support recruitment and retainment. Although no representative from LDOE attended the meeting a written report was provided. Highlights included updates from the special education advisory panel, information about stakeholder input for the IDEA grant application and public comment opportunities as well as summaries of legislative proposals related to special education practices. The committee also received updates on contracts related to goal three of the FFY 26 action plan. Members are encouraged to review the quarterly status report update and linked documents in the agenda.

RENODA WASHINGTON: Is there any objection from the council to withdraw the recommendation based on Brooke's updated information? Hearing none, the recommendation will be withdrawn for consideration. All right. Any questions from council members on the report? Any public comment? The report requires no action and will be placed on file.

The next item of business is standing council member reports. Please refer to the reports in your packet. Our first report is from Disability Rights Louisiana. The chair recognizes Mr. Rocca for the report. Sorry about that.

ASHLEY VOLION: Tory is no longer with the agency so I'll be giving the report today.

EBONY HAVEN: Constance Alphonse asked to go first Ashley, so do you mind if she goes first?

ASHLEY VOLION: That's fine.

RENODA WASHINGTON: Sorry about that, Ms. Ashley.

Thank you. The chair recognizes Ms. Constance for the report from LSU Human Development Center.

CONSTANCE ALPHONSE: Good morning. Thank you all for allowing me to go first. So for the first quarter for the Human Development Center just some highlights from within our report. Our early learning center has trained 70 teachers on staying healthy, managing feelings and helping children learn better. And then they have trainings planned during the summer to be able to train early childhood teachers on inclusion, behavior and emotion. And our early learning center received an excellent rating from the Department of Education.

In our paycheck program under education transition and community programs I just wanted to highlight a new program that they are starting called the leadership transition lab. And it's going to be available to school districts from across the state who are interested in improving their transition services that they offer for students with disabilities. So they have a link out right now where district leaders can complete it to show that they have an interest in joining and then they're going to offer sessions throughout the 26-27 school year to help build districts' capacities to be able to do the transition work effectively. So that is very exciting.

For our WIPA, which works with benefits planning, during the first quarter they worked with 85 people who receive social security benefits and then they gave very detailed benefits planning to 15 people.

And then really just the last highlight I want to make is about our long-term training program. We have the Louisiana leadership education and neuro developmental disabilities program and it's a program that promotes interdisciplinary training really to support individuals with disabilities across the lifespan and build that workforce capacity. So we have graduate students that are from different areas of OT or occupational therapy, physical therapy, speech. But then we also include in this cohort we include family members of individuals with disabilities as well as individuals with disabilities. And they come together in this interdisciplinary manner and spend 300 hours over nine months learning about different disability

topics. And so on last Friday April 24th our 25-26 cohort completed the program and so we're very proud of the work that they did. We actually get a lot of recommendations from Partners in Policymaking. So several this year had participated in Partners in Policymaking. And we do have applications open now so if any council members are interested in applying to participate you can. Thank you.

RENODA WASHINGTON: Thank you so much, Ms. Constance. Are there any questions from council members on the report? Any public comment? Hearing none, the report requires no action and will be placed on file.

The next item of business is a report from Disability Rights Louisiana. The chair recognizes Ms. Ashley.

ASHLEY VOLION: So I will be giving some of the program updates for Disability Rights Louisiana today. Our client assistance program, which assist people that may have some issues with utilizing LRS is currently serving 37 clients. Jeannie is currently touring the state visiting all the regional offices to put a face to the CAP program as well as meeting with counselors and LRS support staff. In addition CAP as a representative to Disability Rights Louisiana, Bayouland Family Helping Families, the statewide ILC and the employment first initiative are all coordinating the second Empowerment through Employment conference. It is scheduled for Tuesday July 28th from 9 to 4. Be on the lookout for the date announcement soon.

When it comes to our community living ombudsman program currently there are 473 publicly funded federally run ICF/DD facilities housing 3,871 individuals with developmental disabilities across the state. In January and February of the 2026 grant year CLOP ombudsman made 282 visits to the facilities receiving 160 requests for assistance. And they took action on all of the 160 requests. As a result of these actions ICF/DD residents had involuntary discharges prevented, got opportunities to visit with family, received appropriate medical care, received updates on their waiver status, received information on their rights, received improved personal care and

received improvement to their physical environment. Further actions by ombudsman Shirley Brown resulted in the provisional loss of an ICF license and the result of a staff member fired for assaulting a resident.

When it comes to our supported independent living program, which the supported independent living program helps 24 people with obtaining and maintaining appropriate and necessary supports so they can remain in the community on their waivers. SILAP advocates assisted clients in switching support coordination agencies, obtaining a new service provider, securing housing, relocating to a better living environment and connecting with their families. In one instance SILAP assisted a client to relocate to a new apartment after having a bed bug issue. The new apartment was not fully accessible for him, specifically the bathroom. SILAP assisted that client to obtain landlord approval, funding and a contractor to modify his bathroom. The contractor has been hired and the full modification to be complete in the next few weeks.

Going right along to our FAIR program, which is the Financial Access Inclusion and Resources program. Which provides financial coaching and case management services to assist formerly incarcerated people with disabilities in overcoming employment and resource barriers in order to achieve long-term financial security. Over the past year from March 1st, 2025, to February 28th, 2026, the FAIR program helped 99 individuals by providing information and referral services. We also provided intensive financial coaching and case management to 53 active clients. We saw positive results in three key areas that impact our clients long-term economic stability, income growth, debit reduction and employment. And we achieved these results by strengthening partnerships, targeted outreach, resource coordination and increasing program visibility. We continue building relationships with key partners in housing, workforce, legal and reentry organizations and establish new connections. We participated in community and outreach events by setting up resource tables to expand our visibility and reach a broader audience.

Additionally, we worked closely with frontline service providers to ensure our clients could access

the resources they need. Finally, we increased awareness of FAIR services through presentations to courts and clinical settings to connect more clients with our services in their reentry process. Lastly, in recognition of Second Chance month Debbie Weinberg was a speaker and a panelist at an event hosted by the New Orleans reentry task force legal subcommittee where she educated employers and HR professionals with information and legal considerations regarding hiring justice impacted individuals with a disability.

And just a few highlights on some of our current litigations. When it comes to Chisholm the current focus of this case is the receipt of ABA services for children who are on a wait list for a waiver and the evaluation required to qualify for ABA. We have been meeting with LDH on a monthly basis regarding the issues in this case. It is still possible that this case will become active in court again in the next few months as we identify points of noncompliance.

When it comes to AJ verses Gee this case addresses children who have been approved to receive specialized nursing services in home who are not receiving what they are approved for. The settlement agreement was extended to March 2026 and will naturally terminate at that time. We are currently putting together a letter with information for families to inform them of the end of this case.

And lastly, Cooper. This case addresses the wait list for people who are sitting in jail to transfer to Eastern Louisiana Mental Health System after a finding of NGBRI or incompetence. We have been monitoring the monthly reporting regarding the wait list as well as requesting additional documents. We are currently working under provisions from the most recent settlement agreement as well which provided for the creation of a stakeholder group to meet and discuss ways the state can reduce the waiting list by identifying more inpatient beds and creating more community-based placements.

In addition to case work our legal team also conducts regular monthly monitoring of facilities and conducts investigations as necessary. We conduct monthly monitoring visits to the state operated mental health hospital in Jackson Louisiana, Eastern Louisiana

Mental Health System. We also conduct monthly monitoring visits to mental health facilities in North Louisiana arising from our monitoring. We discovered that juveniles were being taken to Louisiana Behavioral Health in Shreveport for acute care and in some cases were remaining at the hospital well beyond the course of treatment concluded. The children left for extended periods of time were all in DCFS custody and DCFS was unable to identify a placement. While that is a separate issue we are looking at the failure to provide these children with an education while they sat waiting for months in the hospital. We advocated with the director of LBH and the facility has now hired a teacher to be on staff to provide educational services to any juvenile in the hospital. While it doesn't address the larger issue of children being left in a hospital setting for longer than medically necessary it does provide these kids with access to educational services in the interim.

RENODA WASHINGTON: Thank you so much, Ms. Ashley, for that report. Are there any questions from council members?

KAREN XU: (Inaudible). I just want to learn how the ombudsman work with ICFs (inaudible).

ASHLEY VOLION: So mostly it's from referrals. So people call in but where we have mandated access to go in these group homes and other ICFs if needed. But they mostly come from people calling in and we go out.

KAREN XU: Based on the request?

ASHLEY VOLION: Yes, based on the referral.

KAREN XU: (Inaudible) so you go there just try to investigate what happened?

ASHLEY VOLION: Yes.

KAREN XU: So the ombudsman they (inaudible).

ASHLEY VOLION: I'm sorry. I can't really hear you that well.

KAREN XU: The ombudsman they are a volunteer or they are attorneys under the organization?

ASHLEY VOLION: No, they're not attorneys.

LIAM DOYLE: Are they employed under DRLA?

ASHLEY VOLION: Yes, they are employees of DRLA.

KAREN XU: So you'll consider the request and you'll take it or not?

ASHLEY VOLION: That I will have to get back to you

on. I don't know the exact criteria. I just know we usually get referrals and people call in. But I can go back and ask them and get back to you on it.

RENODA WASHINGTON: Any other questions from council members? Landon, the chair recognizes you.

LANDON HANKS: Thank you, Ms. Chair. So Ashley, y'all said we had a separate issue outside the main issue. You said kids were being held past the, I guess, required time that they were able to be held in the hospital, right?

ASHLEY VOLION: Yes.

LANDON HANKS: So we have that issue resolved, correct?

ASHLEY VOLION: It's still ongoing but for right now they got a teacher in place to at least give them some type of education while they're there.

LANDON HANKS: It's still ongoing?

ASHLEY VOLION: Yes.

LANDON HANKS: Well, what I was going to ask was is there anything further that y'all are looking to do into that issue if I may ask?

ASHLEY VOLION: Like I said, it's still an ongoing process so they're looking to get that resolved.

LANDON HANKS: Okay. So you're looking to further get that issue fixed. Sorry. It's kind of hard to hear. My internet connection is kind of slow. Thank you. Nothing further.

RENODA WASHINGTON: Any other questions from council members? Any public comment? Hearing none, the report requires no action and will be placed on file. If there's no objection the meeting will now recess for lunch. Hearing none the meeting is now at lunch, 12:07.

{Lunch}

RENODA WASHINGTON: It is now 1:08. Hope everybody enjoyed their lunch. The meeting will now come to order. The next item of business is the report of the Governor's Office of Disability Affairs. The chair recognizes Liam Doyle for the report.

LIAM DOYLE: Apologies because I actually sent the January report. So I sent a copy of the updated version in the chat. The only major change I have is twofold. One is the next GACDA meeting is going to be on Wednesday May 20th. We moved it back to the press

room on the fourth floor. That's going to be from 12:30 to 3:30. And more notably the big thing I want to talk about today is the Disability Awareness Day which is going to take place on Monday. I see you all have the handout for that event. It's the agenda and a list of our vendors. The main event is going to start in the morning at the state museum. The secretary of LDH is going to come and speak with Mark Goodman Jr. from the Split Second Foundation on various topics that impact the statewide disability community and do a really great fireside chat. We have some other procedural things that are going to happen. And then from 12 to 4 we will be in the rotunda at the capitol. And we have 13 vendors this year that are going to be tabling and speaking to each other, legislators and members of the community to really talk about what their organizations do and kind of learn from each other and work towards their shared goals I guess. That's the best way to put it.

The big thing is what we're kind of deciding is it sounds like it's going to be a lot bigger than it was last year. So after the event if y'all have any feedback if you do come and as a council, as a vendor and also just in general please let us know. We're going to put something in our newsletter I'm sure for feedback for the event because we would like to keep this going as an annual tradition. This is our second year. And I think we really made a lot of strides this year in kind of streamlining in the activities, especially in the morning, and the intention of keeping it at the museum all inside. Last year it was very hot. So we're trying to keep everything as cool as possible. Then we go straight from there to the rotunda after lunch. Any feedback for that event would be great. I'm happy to answer any questions.

RENODA WASHINGTON: Thank you so much for that report. Are there any questions from council members on the report?

BRENTON ANDRUS: I know there was an email yesterday about if you are a vendor, which we are one, to bring your stuff ahead of time and if you have I guess anything that's larger. So is the, I guess, security prepared to accept that on Friday when we show up? Is there a certain time or we just show up

whenever?

LIAM DOYLE: That should all be in the email. I believe if you can get it by tomorrow, because it is going to be Monday, they will accommodate that. It's just if you're available to do it earlier that's great for them just to have time to go through everything. But they will do that Monday. We have been in contact with them since before that email went out just to make sure things run as smoothly as possible. Obviously with the construction it will be a little more condensed into whatever it's going to be when they first come in. That was a bit of a concern but we're working through that. As much as you can for vendors and members of the public we ask for patience during the actual intake of that and we will work through that. But that should all be outlined in the email. If you have questions just reach out to me beforehand. We will keep in contract between now and then so if something drastic were to change. We have talked to security about just being as flexible as they can with that. That's more of a them thing. They would like it on Friday if possible.

BRENTON ANDRUS: That's fine. I just wanted to know if there was a time. There was no time in particular.

LIAM DOYLE: They left it open on purpose because they wanted to give the vendors, those who could come on Friday, whenever they're available. They didn't give us an exact time other than the morning. They said I think before or just after 8 a.m. and the event at the museum starts at 9.

RENODA WASHINGTON: Any other questions? Any public comment? Hearing none, the report requires no action and will be placed on file.

The next item of business is the report of the Governor's Office of Elderly Affairs. The chair recognizes Cheri Crain for the report.

CHERI CRAIN: Good afternoon everybody. I don't know what color my paper is because I'm not there with you in person. However, I will go over my report. I'll just do the highlights. The first portion of my report just briefly states how we are the state unit on aging for Louisiana and that we provide services to the aging network. And then it list some of the services

that are provided by our councils on aging and our area agencies on aging. If you go down to the bottom of the first page it gives a brief overview of our long-term care ombudsman program and what they do. The top of the second page basically gives you how many nursing homes we have in the state along with the assisted living facilities accommodating over 44,000 residents. It also gives where we have 26 staff and voluntary ombudsman in the program. If you need any more information there's a phone number that you can contact.

Then in the middle of the page we start with our elderly protective services and gives some statistics since the beginning of the fiscal year July 1 until the end of March. And we broke it down into the number of reports that we get per category. Caregiver neglect is 1,170. Emotional abuse 505. Extortion 16. Financial exploitation 2,342. Physical abuse 436. Self-neglect 1,712. And sexual abuse 41. That is the types of reports that we have received from July 1 until the end of March. And we had over 6,224 cases since that timeframe.

If you have any reports that you need to report yourself there's numbers right there in middle of the page, the 1800 number. And then at the bottom of the page we talk briefly about our other program, the aging and disability resource centers. We have eight of those throughout the state and you can find the contact number at the bottom of page two if you need any information about that.

And the top of the next page talks about our Louisiana Medicare Improvement for Patients and Providers Act program which is known as MIPPA. It is a federal grant to help provide education, outreach and enrollment assistance to those individuals for Medicare services as well as low-income subsidy. And then also the Medicare savings plan. If you need any counseling on those that 1800 number is there.

And then if you go to the middle of the page towards the end just talks about some recent news. Older Americans month is in May. The theme this year is Champion Youth Health. This initiative places emphasis on prevention and self-management of health of seniors. The next part of our recent news is where we

are tracking several bills through the legislative process. And I'll just touch on a couple of them. Of course PCOA funding. Last year during the session house bill 126 was proposed to increase the amount given to our councils on aging by statute to allocate 4-dollars per senior per parish instead of 2.50. It was approved last year. However, the increased funds were not put in the budget. So this year we are hopeful that the legislature will include the increase in the budget and this will allow our councils on aging to help ease some of that strain that was during the pandemic where they were given additional funds, additional seniors signed up for those funds, then when the pandemic went away the seniors still needed the services but they didn't have the funds. This is to help fill that gap to still be able to provide those services.

House bill 102 just creates a crime of second-degree cruelty to elderly and persons with infirmities. And then house bill 204 provides for monthly financial reports to the legislative auditor from certain East Baton Rouge Parish agencies. House bill 555 provides relative to elderly financial exploitation. 913 provides relative to protection of eligible adults from financial exploitation. That kind of strengthens the consequences for those that do exploit the seniors financially. House bill 950 provides for consumer protection for the elderly.

And then we have a couple of senate bills. Senate bill 38 provides relative to nursing facilities license to operate. This is more of an LDH one but since our long-term care ombudsman goes into those nursing facilities we're just tracking that one as well to see if there's anything that's needed from us. Senate bill 247 requires each parish volunteer Council on Aging to submit certain financial information monthly to the legislative auditor. They submit financial information to us quarterly, some monthly depending on their budget. So this just kind of puts another layer in there to ensure that they're basically operating the way that they should be operating. And then senate bill 259 authorized the creation of a civil protective order online application portal. This one we are involved in. We do kind of have like a similar way

that you can report, I guess, abuse, financial exploitation, any of those things against the elderly just basically through our website. However, this is going to make it more, I guess, specific on things that they can put in their order online and report to us. So this one we're watching really closely to see what we need to do to update our system and/or get a different system.

So these are the ones that we're tracking as of now. And of course every day we search any new bills that have been introduced or filed and then we follow them accordingly as to what is going to affect our office directly. And that is it for my report. And if anybody has any questions I am free to answer.

RENODA WASHINGTON: Thank you, Ms. Crain. Are there any questions from council members? The chair recognizes Frank.

FRANK MACALUSO: I have a question. How long is the statute of limitations on elder abuse and financial exploitation?

CHERI CRAIN: Unfortunately I can't answer that specifically. That is with our elder protective services unit. However, I can get the answer for you and send that to you as well as all the other members.

FRANK MACALUSO: Thank you.

CHERI CRAIN: You're welcome.

RENODA WASHINGTON: Thank you, Frank. Any other questions? Any public comment? Hearing none, the report requires no action and will be placed on file.

The next item of business is the report from LRS. The chair recognizes Melissa Bayham for the report.

MELISSA BAYHAM: Thank you. Good afternoon everyone. My first two updates have already been mentioned but they're too exciting not to go over. First, what I've been working on since 2022, which is that we were finally able to get a special entrance rate approved by state civil service which increased our counselor pay, our entry level counselor pay from 17.18. It says 17.52 in your report because that particular week civil service changed the pay scale for all civil service jobs so technically it changed from 17.18 to 17.52 that Monday and then that Wednesday with the special entrance rate it changed to 21.04 for entry level counselors. And it also included a 5 percent

corresponding adjustment for all, most LRS staff. All staff in a social service rehabilitation position which is the majority of my staff. So that was very exciting. We've been working on that for a really long time because we had a lot of challenges with recruitment and retention. We're already seeing some success with that. We provide the initial opportunity for employment and then the applicants receive those and although the salary is discussed at the applicant interview they end up declining at that point and we've been seeing that less already. So we are really excited about that.

We're also really excited about all the gains we have been receiving in terms of state general funds. Last year because of advocates like all of you we received an additional 4 million in state general fund and this year so far we've gotten 2 million additional from the house. And so we are definitely very appreciative of all your efforts for that because it's obviously very needed. Very thankful for that.

Other updates. I just kind of wanted to highlight in terms of preemployment transition services, and this was not in your report because this is new so I wanted to let you all know. I talked a lot about third-party cooperative arrangements, which are those contracts that we have with school districts to provide preemployment transition services in their particular school districts. And so we have Lincoln Parish who we are in the contracting process for so we'll have that new third-party cooperative arrangement in that parish soon. So we're very excited about that. These contracts allow these school districts to have their own staff to provide the services within their districts so it makes it very seamless. And so we are very excited about that contract that is upcoming.

Our Workforce Innovation and Opportunity Act combined state plan, which is basically our request for funding to the federal government, is being submitted as we speak today. So we had a public comment period that ended on April the 4th. And so today was the deadline so our plan is being submitted today along with all the other workforce programs at Louisiana Works and adult education.

At the federal level I just wanted to mention we

had heard that they were working on some possible interagency transfers to transfer different sections of the US Department of Education to different departments. And it was our understanding that they were working on an interagency transfer to transfer the Rehabilitation Service Administration, which is where vocational rehabilitation sits, to the US Department of Labor. That seems to have stalled and we have not heard anything. At one point we heard it was eminent and then all talks kind of stopped. So we're really not sure what's going on there. There have been talks about dismantling Department of Education. So we're just waiting to see what happens there.

And the last update I wanted to give, which is not in your report, but it's about how we—so we're part of the Office of Workforce Development at Louisiana Works. And so we are in the process, or we are preparing ourselves for the new Medicaid work requirements. And just this week on Tuesday and then again on May the 4th the Department of Health and Louisiana Works have been holding some webinars for our staff, our Office of Workforce Development staff. It's being hosted by Camille Conaway who is the director of the Office of Economic Independence. She has a joint position between the Department of Health and Louisiana Works. And then Jessica Vallelungo who is the assistant secretary of the Office of Workforce Development. And they're providing information to our staff so they can be prepared for some influx of participants who need to comply with the new Medicaid work requirements which will start in January of 2027. But I believe they're going to start receiving letters, the first batch of letters will go out next week, I believe, at the beginning of May.

So we're getting some basic information just so that our staff knows what's going on. Our role won't be any different. We're obviously going to provide job placement assistance and work training assistance as we normally would but we want our staff to understand because people will probably call with questions. And we're obviously being advised that if they have specific questions about the requirements to direct them back to Medicaid. But that training is being provided to our staff so that they are prepared for

them. So those are all of my comments on the report.

RENODA WASHINGTON: Thank you so much, Melissa, for the report. Are there any questions? The chair recognizes Ms. Cheri.

CHERI CRAIN: I really don't have a question. I just wanted to add to Mr. Frank's question that he had for me on my report to the governor's office. It is a one-year timeframe for reporting.

FRANK MACALUSO: Thank you.

CHERI CRAIN: Thank you.

RENODA WASHINGTON: Thank you, Ms. Cheri. Any other questions? The chair recognizes Ms. Karen.

KAREN XU: (Inaudible).

MELISSA BAYHAM: So independent living, this is a part of LRS that we actually sub-grant to the independent living centers throughout Louisiana. But they provide a lot of resources and information to help people basically stay out of institutions. They provide a lot of resources and referral services.

KAREN XU: (Inaudible).

MELISSA BAYHAM: So they provide services to individuals so that they do not go into institutions.

KAREN XU: (Inaudible).

MELISSA BAYHAM: I don't know if there's a part A but interestingly enough there is a part C. And the independent living centers they actually receive the majority of their funds, and this is through the US Department of Health and Human Services, through the part C funds. And then the part B funds for whatever reason are flown through a designated state entity. The designated state entity for independent living is Louisiana Works for Louisiana Rehabilitation Services. Now the independent living older blind program is actually administered by Rehabilitation Services Administration and those services we actually provide equipment to individuals who are older blind so they can (inaudible).

RENODA WASHINGTON: Any public comment? Hearing none, the report requires no action and will be placed on file. The next item of business is the report of the Office of Public Health. The chair recognizes Dr. Patty Barovechio for the report.

PATTI BAROVECHIO: Good afternoon. I'm not sure what color you have today because I am not in person.

But the Office of Public Health is where the Bureau of Family Health sits and we administer the state Title Five program which is a federal state partnership and it includes the children and youth with special healthcare needs program. And this program supports many, many programs and activities and services to support children and youth with special healthcare needs in the state. Those with and without developmental disabilities. Some of the programs that we sponsor or support through this funding, we have some subspecialty services for pediatrics in certain areas of the state. Very small footprint but these are provided in areas where limited provider access exist. We also have a medical transportation program and this is for families that need help getting to maybe some out-of-parish hospital or treatment. They must apply for Medicaid transportation and once it's declined or they supply justification why the Medicaid transportation is not adequate then they can be eligible for the stipend. And we've been having a bit of an uptick of families needing this service as you can see. There was several stipends distributed over the quarter.

We also support our pediatric medical providers through our medical home initiative. We actually provide technical assistance, training, toolkits all to support pediatric providers in our state with implementing universal developmental screening, holistic care coordination and youth health transition services and supports within adolescent well-care services. We are working to build this and expand this so that all providers in the state know where to go for these resources. You can keep going down.

The Bureau of Family Health also supports our family resource center. This is available to basically any family that contacts the center. It is open Monday through Friday. It is not open on state holidays. Families can request services in a preferred language by texting the center and requesting language support. But through this they provide universal care coordination which really focuses on that service linkage component and resource linkage. So it's a program that, as you can see, it's part of a partnership that we do with the birth defects

monitoring network program. So all children identified with a birth defect their families are contacted and provided an opportunity to receive resource and referral supports to ensure that these children receive the services and supports needed to thrive.

We also, that is our outreach component that also includes children experiencing extreme prematurity. And then we also have our incoming from the community whether it's provider or self-referral. So families can receive universal care coordination services through the family resource center. As well as like the Developmental Disabilities Council the Bureau of Family Health works very closely with Families Helping Families through our Families Helping Families BHF project. And that is to support each other. We co-learn together. And just to build a coordinated and family centric statewide children and youth with special healthcare needs resource. So Families Helping Families and the family resource center they often refer to each other. But through this community level and statewide support we ensure that all families have access to the resource and referral services they need. Families Helping Families also offers the peer support which the family resource center does not.

Also under the Bureau of Family Health is the early hearing detection and intervention program, which strives to identify children as early as possible who are Deaf or Hard of Hearing. So they do the newborn hearing screens. And they try to meet the national standards for hearing screening by one month, evaluation by three months of age for children at risk and then referral and enrollment in early intervention by six months. We collaborate with hospitals and providers across the state. They actively notify physicians with patients who need out-patient follow-up testing and they obtain those follow-up results from the audiologist.

And they also host or facilitate an advisory council. If you're interested in more information on that you can either register to attend or you can also contact LouisianaEDI@lagov. As part of the EDI program there is a peer support called Louisiana Hands and Voices. It is a parent driven organization to support children who are Deaf and Hard of Hearing and their

families. They advocate for families, share information and create space and time for people to come together and help one another. It's another great peer-support organization for families of children who are Deaf or Hard of Hearing.

Our genetic disease program. If you're familiar with the heel-stick program that happens when a newborn is born. The genetic disease program screens newborns meeting national standards and ensures access to genetic evaluation and counseling to residents of Louisiana. And the program also operates a sickle cell disease program that provides specific resources and care coordination support to families, either individuals with sickle cell disease or families that have children with sickle cell disease or trait.

And we mentioned our Louisiana birth defects monitoring network that the family resource center partners with. They do surveillance for over 70 structural, functional and genetic birth defects in Louisiana. And this is an active surveillance program that follows the CDC criteria. And this is a very active and successful program. And you can see the current stats. Their program with our FRC we are now identifying children to contact under the age of two. Actually, we're closer to contacting and reaching most families between 6 and 12 months. So ensuring that these children are receiving the supports that they need as timely as possible.

And then Louisiana Commission for the Deaf functions as the principal state agency that provides information and services to and for individuals who are Deaf, Deaf-Blind or Hard of Hearing on behalf of the state. So if you know of anybody who may be interested in that program or support services from that program please reach out to what we call LCD. They provide a very large list of resources for that population.

We also do what we call the maternal, infant and early childhood home visiting program. And this is a no-cost voluntary program that supports coaching to improve the health and wellbeing of pregnant women and parenting families with young children. Our parents as teachers program and we also have the nurse family partnership. For nurse family partnership a mom must enter the program I believe it's prior to the 26th

weeks gestation. Whereas the parents as teachers program a family can enter that until the child is, I believe, is up to 12 or 24 months. But it's a really great program. It provides health education and coaching for families. They support them in building positive parenting skills and gaining confidence in caregiving. And there's highlights for that program.

Our provider-to-provider consultation line. This is an excellent resource for healthcare providers in the state. We know we are a provider shortage area for mental health providers in many of the parishes across Louisiana. And this provider-to-provider consultation line is open to providers and they provide real-time support by a licensed mental health provider on managing mental health and behavioral health conditions in pediatric and perinatal practices. If you are serving those two either pediatric or perinatal populations and you have a patient visiting your clinic and you need support with identifying an appropriate plan of care you can call them in real-time Monday through Friday 8 to 4:30 and they can assist you. If it's for diagnosis or medication they will connect you to an appropriate psychiatrist.

And I think last but not least we have our partners for family health data center. If you are looking for data around our population maternal, infant and child data you can go to [partnersforfamilyhealth.org](http://partnersforfamilyhealth.org) data center that houses a lot of really informative resources on the state of the health of that population. The title five maternal and child health block grant, which is our Title Five work that supports the children and youth with special healthcare needs. They support key policy and program advances for all mothers and children in Louisiana. And they are there if you have questions around maternal child health policy. Please don't hesitate to reach out.

Project SOAR. This is a HRSA grant that was focused on early childhood developmental screening and perinatal depression screening in pediatric. It stands for screen often and accurately refer. It is a five-year initiative that will conclude in July of this year. And we have done a lot of great work engaging parents and caregivers as well as pediatric providers.

And we will carry on this work through our pediatric medical home, our program, as we conclude that grant. And I think that's what I have. The young child wellness collaborative, which is the advisory body for the Project SOAR grant will transition and this cross agency advisory council will provide support as we shift the sustainability plan for the Project SOAR to the medical home initiative. If anybody has any questions I'll try to answer.

RENODA WASHINGTON: Thank you so much, Dr. Barovechio. Any questions from council members on the report? Any public comment? Hearing none, the report requires no action and will be placed on file.

The next item of business is the report from the Office of Citizens with Developmental Disabilities. The chair recognizes Bernard Brown for the report.

BERNARD BROWN: All right. So we'll start with some hot topics. First on the list is the OCDD name change. As some of you may know we actually did get a bill put up to change OCDD's name to the Office of Intellectual and Developmental Disabilities Supports. This bill passed out of the house unanimously and actually had 24 cosponsors on the bill. Next steps for it is the senate side but hopefully we won't get too much pushback. As you know we reached out to everyone and had a survey. The name that we ended up selecting kind of encompassed everything in terms of the feedback, some of the suggestions were there. And overall just kind of brings us to a space where we're acknowledging intellectual and developmental disability and not just DD.

One part is figuring out how we're going to refer to us moving forward. Will it be OIDD or will it be Office of IDD Supports. I kind of like that one. It just rolls a little better. That will be just everybody getting used to the shifting away from OCDD to being the Office of IDD Supports or however we want to do it. So more to come on that. We'll keep tracking that. I don't see there being any roadblocks unless somebody just wakes up one day and absolutely hates it. But more to come on that.

Another thing, over the last couple months some of our OCDD clinical staff collaborated with national partners to launch two different initiatives. The

first one was an action collaborative series where our clinical director Dr. Kelly hosted a four-part series with her counterpart with the National Association of Developmental Disabilities State Directors. That series covered continual supports for IDD and co-occurring behavioral needs obviously. It actually provided a state tool that we're getting a lot of praise for. A lot of states are already incorporating that too. It was developed and then discussed the NCI data points from our NCI survey. So unfortunately I don't think that one is available on demand. I'll check to confirm. I thought we had that in there. But if it is you can go to the National Association of State DD Director's website and there's this toolkit section that you can look at all the past resources and learning tools. You should be able to access that series.

The other part is a training series that's geared towards clinicians with the trusted provider network. Again, it's focused on supporting individuals with co-occurring. You know this is a big deal. The cool thing about this one is it is on demand. And yes, it's targeted to clinicians but there are tips and tools to help families that have individuals they support or live with co-occurring diagnoses. You can use these trainings and this framework in everyday practice. So I would encourage folks on the phone or folks in the room to go check it out. The live sessions happened but they are on demand. A link is in the document. Doesn't hurt to learn more. And then also from an advocacy standpoint if you know what's available out there as far as resources to support you you know you can steer people to those things. So if you know someone struggling with some behavioral things and needs supports and don't know where to point them to I would encourage you to take a look and maybe you can direct somebody to these resources as well.

Training. Again, something that's not really directed towards individuals receiving services or people receiving services but just good to know. We had a big shift in how we do support coordination as far as the initial plan of care development. Just to give you some background previously when you were linked to a waiver, when you got a waiver offer you

were linked to a support coordination agency they met with you, they started developing a plan of care. Where available they assisted you with the Medicaid application and some of that stuff. Those support coordinators were not allowed to bill for those services because the person wasn't Medicaid eligible at the time. We've actually updated our policy to where when someone's certified that work that was done within that time that support coordination will be able to bill for that now. Each trainings are available to help support coordination agencies understand the appropriate billing code to use and make sure that they can get the adequate payment for that initial one. So the link here is the webinar that's on demand as well for us. And I'm sure every single one of these agencies is aware of this but just in case you may hear your support coordinator say something about not being able to bill from the time when you get your certification (inaudible).

All right. So quarterly activities real quick. We had 15 people in the quarter transition out into the community from an institution. Whether that's the NOW, the ROW or the Children's Choice waiver. Our Pine Crest census is sitting about the same at 435. They admitted 13 people but only discharged 9. So you can see we're still nearing the capacity that can be supported at Pine Crest. But we know there's a waitlist with Pine Crest with some individuals. A lot of that waitlist I can't really speak to. I don't know why but my best guess would probably be matching people with the appropriate homes where there are vacancies because there are very specific homes at Pine Crest. So I'm thinking that's probably why you see some folks on the waitlist and some folks gain access to Pine Crest. Again, it's all about making sure-- assuring the health and safety not just for the person who's trying to be admitted to Pine Crest but also assuring health and safety for the residents that are currently there. It's a really delicate balance that they have to work through.

Central Louisiana Supports and Services. As you can see their census (inaudible) they hadn't discharged anyone and they've admitted two units. Two units, two kiddos. And they're holding steady as well. Another

piece of our resource center. This is where our resource center, our clinicians and some of our allied health professionals that assist in the community. As you can see we had about 717 individuals receive consultations from our resource center. We were able to keep 95 percent of those folks in the community and a 98 percent satisfaction rate. So they're doing a bang-up job making sure people can remain in the community. These folks that are in crisis or folks that just need additional supports. We had about 1900 nurse outreaches. 177 training events where we trained, as part of the resource center, they actually trained providers and other clinicians to support our population. We've worked with all four of the universities that have clinical capacity or psychology (inaudible).

This is just a snapshot of the waiver itself. We're at about 14,676 individuals that are receiving services. We have more than this that's actually enrolled in the waiver. But this top chart actually focuses on of those people enrolled in the waiver how many are receiving a paid waiver service in that quarter. And as you can see we have about 14,000 people who are receiving services at this time.

The next section you can see the breakout by waiver type. It's interesting to point out the NOW is holding steady. We see a huge increase in the number of individuals in the ROW and children's choice. Average cost is going up. So before this year for various reasons, some tied to rate increase, others tied to the appropriate waiver actually working because the higher utilized waiver (inaudible). So you will see that reflected there.

Next part, that's our pretty chart that talks about the breakout of participants by region. Region four is still our largest region. That's the Acadiana area. There's over 200 people receiving waiver services in that area. Screening urgency of need. We're looking at-- all right. So let's go straight down to the threes and fours. So we're at about 25 percent of individuals requesting screenings or receiving a score of a three or four. As you all know a three or four is what's needed to receive a waiver offer. That's urgent and emergent categories. We're

at about 25 percent. That's down from last year where we were at about 33 percent. There's no real explanation for why it's down other than individuals are scoring threes and fours. I don't know another way to kind of explain that. It's just where it is.

The good thing is I haven't been receiving a ton of complaints about the SUN process as we did like last year. The year before that was a really big issue. So I think we've done a pretty good job on working with our screeners to better articulate the process. The reason why you may not get the three or four, some things like that. Because I know we had a lot of discussion the last two years about that process so hopefully it's a smoother process. Also, good to note that initial screenings we're actually getting to those folks to schedule those screenings within two weeks. How far out it is is really dependent on the family's availability. Good stuff going on in the screening section.

And I think that's all. Early Steps. Early Steps is here. We're still serving about 6,000 people throughout a year. Amazingly we're actually touching about 9,000. But as you know kids are aging out and coming in. So the ins and outs are about 9,000. But actually the child count on average is about 6,000 that we're serving. Referrals are still holding steady. We're averaging about 13,000 referrals a year. That's not going anywhere. The word is getting out about Early Steps. We're actually getting in and processing the referrals. So Early Steps is very important in the DD process. If you know someone with a kid that may have a delay of some sort that's under the age of three refer them to Early Steps. Any questions?

RENODA WASHINGTON: Thank you, Bernard. Are there any questions from council members?

KAREN XU: (Inaudible).

BERNARD BROWN: The resource center is statewide. It's a group of clinicians, allied health professionals, RNs. We have dental hygienists, social workers. The objective is to support individuals to help them remain in the community. They're individuals that are in crisis. They offer supports (inaudible) on the allied health side. Someone might be living alone or maybe living with a relative that's aging and can't

provide the same level of supports. We can send out our therapists, our TPTs come out. And the difference between keeping them in the community and having them go into an institution may be modifying their bathroom to where they can kind of have a roll-in shower or ramp.

This group they work with the LGEs to receive their referrals and they go out and assess where needed. There may be a family that may be at their wits end supporting their child because of some behavioral issues. Our folks will come out, assess the situation and see if there's any treatment, or any advice or anything they can coordinate to help continue to provide care in the home. If there isn't, those clinicians also make recommendations about what next steps should be or what supports may be needed. Sometimes if it's episodic they may follow along with that person for a period of time checking in and out to see where they are. The resource center is very instrumental in keeping folks who are in the community, in the community. And again, to inquire about that you would go through the LGE. There's a referral process. There's a whole process to get access. Of course if the LGEs are aware. So if there's people that come up in crisis they may reach out to the center.

KAREN XU: (Inaudible).

BERNARD BROWN: It's under OCDD, yes.

KAREN XU: (Inaudible).

BERNARD BROWN: State run DD facility, yeah.

KAREN XU: (Inaudible).

BERNARD BROWN: They can support you there. Those are available resources. The Central Louisiana Supports and Services Center that one is geared to adolescence. It was kind of like a special school as well. So it's a small more focused population to support. So it's probably a little, I don't want to say difficult, I think there's a specific profile that goes to the Central Louisiana Supports and Services Center and it's different in Pine Crest in that respect.

KAREN XU: (Inaudible).

BERNARD BROWN: Yeah. Both of them are in the Pineville, Alexandria area. Yes.

KAREN XU: (Inaudible).

BERNARD BROWN: That's a good question. I'll give you the answer in two seconds. We had ten facilities statewide in 2008 I think and then we began downsizing the project or initiative. And we're left with two and those were the two identified. So we had facilities all over the state.

KAREN XU: (Inaudible).

BERNARD BROWN: I don't know. I think I was still in college when that happened. I'm not aware. It was a greater focus on community, not so much institutionalization. The services that can be received in the community in a less restrictive environment. That's where the services are most readily (inaudible).

KAREN XU: (Inaudible).

BERNARD BROWN: We still got over 3600 ICF beds in the state. They're still there in those state facilities. They provide the same service. Any other questions?

RENODA WASHINGTON: The chair recognizes Ms. Melinda Elliot.

MYLINDA ELLIOT: Good afternoon. I'm having a little bit of trouble with the audio. Did I hear you say, Bernard, that you weren't getting as many complaints about the SUN scores? Because I'm still getting them every week or every other week.

BERNARD BROWN: I'm not getting them Mylinda.

MYLINDA ELLIOT: Okay. So maybe this would help when I'm working with them to do. So if I tell a parent to appeal the SUN score how long should they be waiting to hear from someone? Is there a timeline in there?

BERNARD BROWN: First question is when you say appeal what do you mean? Like through the Division of Administration or are you talking about a reconsideration?

MYLINDA ELLIOT: Okay. So how bet yes, either one.

BERNARD BROWN: Reconsiderations happen fairly quickly. You can request a reconsideration. Only one of course. So like after the initial score if you want a reconsideration those happen within a matter of days after your initial screening. DAL, our formal appeal process, that's handled by the Division of Administrative law. So those time delays that's up to

them. We don't provide those. So that could vary and that could be lengthy if they're going the appeals route. But as far as, again, reconsiderations, like once that's requested our screening supervisor reaches out and does that reconsideration in a matter of days. Or they're supposed to.

MYLINDA ELLIOT: So after a reconsideration, you know, because you want to try the least, I think the Louisiana Department of Education says the least adversarial option, right. So if I tell them to try a reconsideration then the next step is the appeal with the Division of Administration or Division of Administrative Law, right?

BERNARD BROWN: Yes.

MYLINDA ELLIOT: To find out the timeline there I need to go to them?

BERNARD BROWN: Yes, ma'am.

MYLINDA ELLIOT: Okay. So like there's a phone number and I can just call them?

BERNARD BROWN: Well, yeah. I think they have a website too. But on those decision letters that you get around the screening there's information about ways to appeal that also has the mailing address and where you send the notice and all that stuff is on the determination letter you get from the screening. But again, Mylinda, if you're hearing complaints about the screenings please shoot that to Janae Burr and Brooks Malbrough. Brooks Malbrough is over the screeners. We're using that information to do calibration. That's one of the things that we took away a couple years ago when we had an uptick in complaints was that it may just be as simple as making sure we're staying in contact by staying and continuously training, calibrating our screeners. So please send them to us if we do have complaints out there so we can address them.

MYLINDA ELLIOT: I'm telling them to go back to not necessarily your office but go back to the case manager and to EMCAL. It's like everything else, you may tell people and they may not have the bandwidth to be able to get it done. But yeah, I appreciate it.

ALAINA CHACHERE: I just wanted to share my experience with Mylinda. We were screened and then I requested a reconsideration and that took like two

weeks. And then the reconsideration I wanted to appeal it so I got a letter in the mail after the reconsideration saying that we had had the meeting and our score did not change and on there was the information for the administrative law, DAL, for them and where I could go to either submit my appeal online or to mail one in. And my experience I mailed it in and then I didn't hear anything and so I called and they had never received it. So I would suggest to not mail it but to do it on their website or talk to somebody on the phone if you possibly can. I just wanted to share my experience with you.

MYLINDA ELLIOT: Yeah, that's great. That's a great description. Thank you.

BERNARD BROWN: Good to know. It's noted for me too. Use the website. Hopefully you get a confirmation number or something?

ALAINA CHACHERE: Yeah.

RENODA WASHINGTON: Any other questions? Hearing none, the report requires no action and will be placed on file. The next item of business is the report from the Office of Aging and Adult Services. The chair recognizes Gearry Williams for the report.

GEARRY WILLIAMS: Good afternoon everyone. Again, presenting for the Office of Aging and Adult Services. We continue to face challenges with our wait list. I'll touch on it a little bit more on that a little further along what we are doing to address that. But as outlined in the waiver registry section of the report we still have a waitlist of about 11,300. Of those 11,300 6200 are not receiving any home and community services. The wait time of 14 and half years that is for individuals on the wait list but receiving other home and community-based services. There are also a wait time of those without any services of 49 weeks. That time of linkage to certification is about 42 days.

TBSCI we have a wait list there of about 214 individuala. And most of that is due to funding for the TBSCI program. I will say that this program has been very successful. We have made home modifications. That has been the largest request of those with traumatic brain and spinal cord injuries were home modifications. We are working with a couple new

providers so we are successful as it relates to those home modifications.

We'll move down to adult protective services. It outlines the number of cases per region by fiscal year. So for this fiscal year as outlined 1388 new cases that have been accepted this fiscal year. We'll go to allegations that have been investigated and that have actually turned into quote unquote cases. Those numbers are outlined there. One thing that Karen requested at our last meeting at the very bottom of the grid of these 759-- I'm sorry. That should be updated to this total, 915. Of the 915 total substantiated cases in FY26 49 of those are current OAAS recipients of services. So that percentage is about 5.3, 5.4 percent versus the 6.4 by virtue of that being 915 verses 759.

The next page outlines the population of those that are receiving services whether they're state plan services or waiver services. We usually highlight some things that we're doing as it relates to workforce considerations there. And I'm going to move to what was outlined in our report. During our committee meeting I touched on HCBS Strategies. We continue to work with HCBS Strategies to address our waitlist. As mentioned during the committee meeting we want to look at a (inaudible) first come first serve. As it stands right now with the communities choices waiver we're going to base it on acuity of those highest in need. And along with that (inaudible) continuum of care we're finding that some of those individuals that are on the community choices waiver wait list could likely receive other services that would be sufficient for their needs. That tells me that participants need to be made aware or those on the wait list need to be made aware of other services that are available to them other than those that they are waiting for on that community choices waiver wait list.

We're also happy to announce that our program for all-inclusive care of the elderly, also known as PACE. Of course we have four of those PACE centers across the state right now. New Orleans, Baton Rouge, Lafayette and Alexandria. We put out a request for information back in October or November and we received five responses to that request for information. And we are

now working with a vendor called BoldAge. BoldAge will be opening our first PACE center in North Louisiana. So we are building a PACE center in the Shreveport area. So we are already hitting the ground running making some applications, having some communications with us and some communications with CMS. We'll be having some communication with Medicaid related to their moving forward and opening the PACE center in Shreveport.

One more to touch on in are regards to legislation. We've worked with the Live at Home Coalition, an advocacy group. And the Live at Home Coalition has worked with the legislature and once again this year we made the recommendation for another 750 community choices waiver slots. As of right now that is in HB1. So the funding associated with that is also there in HB1. We're working with them and they've been very amenable to discussions with regards to funding for staff because we want to make sure not only do we address the waivers but we need to be able to address the work that comes along with that. So we requested four additional staff members to absorb that work that would be associated with the increased number of waiver spots.

In the coming weeks we're going to be looking to do a public awareness campaign related to our adult day healthcare centers as well as our PACE centers across the state. We are going to address those, as I mentioned before, those that are on the community choices waiver wait list that could be served by a PACE center if there's one in their area. Or could also be served by an adult day healthcare center if there's one in the area. And we feel like a lot of those on the wait list may not have awareness of those particular services nor where they're located. So we want to do a public awareness campaign to hopefully drive some results with increased utilization of those services. That's all I have.

RENODA WASHINGTON: Thank you, Mr. Gearry. Are there any questions from council members? Any public comment?

KAREN XU: (Inaudible).

GEARRY WILLIAMS: It's not the same program but we do have some of the same direct service workers and

support coordination agencies that work with both agencies.

KAREN XU: (Inaudible).

GEARRY WILLIAMS: (Inaudible) with regard to what goes into the cost for each of those providers (inaudible).

RENODA WASHINGTON: All right. Any other comments? Hearing none, the report requires no action and will be placed on file.

The next item of business is the report from Bureau Services Financing which is Medicaid. The chair recognizes Brian Bennett for the report.

BRIAN BENNETT: Hi everybody. My report is on the blue copy if you're here in the room. I'm going to first go over some updates. So the first I just wanted to let everybody know for the Medicare savings program we developed a video. It is posted on LDH's YouTube site. I have a link to it on the electronic version but if you go to YouTube and you just search Louisiana Department of Health. That's also a good resource for a lot of other different educational contents about our programs. Any time we do public meetings we try to post those on there as well. If you want to take a look at that that has a lot of different videos on there. But in particular I wanted to highlight the one that we just did on the Medicare savings program which provides assistance for certain low-income individuals to pay for their out-of-pocket Medicare costs.

Medicaid ID card redesign. Recently we sent out new Medicaid cards. So if you got something in the mail or if someone in your family got a new card in the mail that's what that's for. The new card that was sent out was specific for this is just your Louisiana Medicaid card. Separate and apart from if they have an MCO they might have an MCO card. This was just it was redesigned and we sent those out to members I believe a month or so ago.

In a previous meeting I also talked about changes to our enrollment process for our managed care plans and our dental plans. So what we previously had was every year we had an open enrollment period but we've changed recently to you can switch your plan at any time at this point throughout the calendar year up to two times without pause. So previously we had the open

enrollment period from October to December. That was your opportunity to switch plans if you wanted to. But now I think starting March the 1st individuals they can switch their plans, their MCO plans or their dental plans anytime of the year up to two times in the calendar year.

Highlighted two state plan amendments. So the Medicaid state plan that's our big agreement with CMS that outlines all services, programs, eligibility categories that we have. Basically how we operate and finance the Medicaid program. So any time we want to make a change to services, programs we have to do what's called a state plan amendment. And that's submitted to CMS for their review and approval before we can take action on anything. So I've highlighted two in that section. One is expanding the types of providers that deliver therapeutic services and peer support services. Those are behavioral health services. And then also a new program it's called Thrive Kids which will allow us to deliver kind of specialized healthcare services within schools in certain economically disadvantaged areas of the state. Both of those are still pending with CMS. We haven't gotten approval yet.

We're still continuing to meet with our beneficiary advisory council that we set up last summer. We have meetings every quarter. And then for programs and services we highlighted some of the programs and services that serve individuals with disabilities. On the very last page for the early and periodic screening diagnostic and treatment support coordination I did want to highlight that. I did not include it in this report but I will try to get it in there next time. We've recently added two groups to this service. So one is our ventilator assisted care program. That program's been around since the late 80s. But it provides specialized support coordination case management to children and young adults that are on ventilators. That previously was provided under a contract but we recently moved that into our state plan as a formal Medicaid service. So it's technically under our EPSDT support coordination umbrella. So I'll begin providing numbers on that in our next report. But I think right now we currently serve about 100 kids

in that program. And Children's Hospital they provide the services for that program.

And then we also have our youth reentry support coordination that's also under EPSDT. So youth that are coming out of correctional facilities most of them are (inaudible) juvenile justice facilities. We provide prerelease case management and screening and diagnostic services to make sure those kids are enrolled with Medicaid before they get out. And then they have a case manager working with them to try to ease them back into the community so that any healthcare services, behavioral health services that they have those set up. That was a program that we started last July. All 50 states were required to implement that as part of consolidated appropriations.

A few updates that I don't have in my report that I wanted to speak on. Also related to reentry. This was just very recently. I believe it was last week we met with CMS. I had provided an update on this throughout the past year, year and a half. But we had also been working a reentry program for adults. So adults in our state prison facilities and some of our parish jails will also be offering reentry services for them. We will get them signed up for Medicaid and they'll be eligible to receive a subset of services while they're still incarcerated up to 60 days prior to release. And all people, all individuals releasing will be eligible for those services but who we're really trying to target are those that are releasing that may have substance use disorder services or treatment needs and/or mental health needs because just antidotally that's really what once they're released that might put them back at reentering incarceration. With recidivism in mind we really want to try to focus on addressing those substance use disorder needs and mental health needs so that we get those services started and then they continue after release so that continuity of care is not interrupted. We haven't gotten formal approval from CMS yet but we're expecting that. We're working with them right now on that.

Community engagement or work requirements. Melissa had mentioned that a little earlier. And she's right. She mentioned that our initial outreach will start going out in May. We're going to have a targeted

outreach where we're only looking to send notices to individuals that may be impacted by this. So all Medicaid beneficiaries will not get a notice. We're only sending those notices out to individuals who could be subject to those community engagement or work requirements.

And then in August that's when we're actually going to start looking, starting the compliance reviews for members whose coverage renews in January. So while the community engagement requirements technically don't start until January of 2027 the renewals for January are going to start going out in November. So members will start receiving requests for information in November. Although we're not going to take any action until January you will if you need to verify anything (inaudible) likely start receiving those notices.

It's kind of a small portion of the Medicaid population. This is just for our adult group. I have the numbers right here. And this data is a little old so I'm sure the numbers have changed. But of about the 1.5-million members that we have on Medicaid we're estimating about 297,000 will not be exempt from the community engagement requirements. And then of that number we're going to try to use payroll records for any databases or data sources that we can to verify the people meet those requirements. All in all I think we'll probably have to send notices out to maybe about 13 or 14 percent of the Medicaid population, the community engagement requirements. So it is a smaller portion of the population but none the less we still want to make sure that those individuals know what will be required and that we give them enough time and enough opportunity to respond and give us what we need so they can keep their coverage.

Legislative session. We are monitoring 85 to 90 bills right now. A lot of them have smaller impacts on Medicaid but it's quite a few. We are still at the point now where as far as we are with HB1 we're still not anticipating any cuts to programs or services.

I have one quick update also from the access rule. We've mentioned that over the past year or two, Garry and Bernard might have talked about it also, but the access rule is a new rule from CMS that it's a multiyear rule that stretches I think all the way into

2030 and maybe beyond. But every year states have to meet certain parts of that. So we're working with OAAS and (inaudible) staff right now and Office of Behavioral Health staff to implement those that are coming due this summer. Mainly the ones that we're working on right now there are some transparency requirements related to the money that we're spending on home and community-based services that we have to make updates to fee schedules and post those online and then just the general expenditures that we make in the programs throughout the year. So we're going to be setting up a website for that so we can post those reports online for everybody to view if they would like to. And then there are some new quality metrics that we'll have to start reporting on so we're working on pulling those together as well. That's my update. If anybody has any questions.

RENODA WASHINGTON: Thank you, Brian. Any questions from council members on the report? The chair recognizes Ms. Elliot.

MYLINDA ELLIOT: Good afternoon again. So maybe you can talk to this and maybe you can't. My understanding is that there is a report that had the home and community-based providers are supposed to do every year about the expenses related to waivers. And the track record for those reports being turned in is really low. Last year we had discussions here and maybe in the SAC meeting, the State Advisory Committee meeting, about whether fines were being applied, imposed. I don't know the right words or not. Do you know about this? Can you talk about this?

BRIAN BENNETT: Yes, I can, Ms. Elliot. So those are our cost reporting requirements.

MYLINDA ELLIOT: Yes, sir.

BRIAN BENNETT: And yes, we've been imposing penalties for providers that have not submitted this timely. We did that last year and we're doing it again this year. I don't know if the penalties have gone out yet this year but if not they will be very soon. But yes, we have been penalizing those providers that have not submitted cost reports by the deadline.

MYLINDA ELLIOT: I don't know anything about anything especially as I get older. My understanding is the penalty is 5 percent of something which is

almost nothing.

BRIAN BENNETT: So what we do is the penalty per month is 5 percent of their claims payments.

MYLINDA ELLIOT: 5 percent of their what? I'm sorry.

BRIAN BENNETT: It's 5 percent of their claims payments.

MYLINDA ELLIOT: Okay. Which is a low figure.

BRIAN BENNETT: Depends on their claims payments.

MYLINDA ELLIOT: Who's looking at it, right. So do y'all have any control over that 5 percent figure or is it somebody else?

BRIAN BENNETT: It was the department's decision to set it at 5 percent.

MYLINDA ELLIOT: So it is Medicaid's decision.

BRIAN BENNETT: I would say it's LDH's because it affects Medicaid's providers, OAAS' providers and OCDD's.

MYLINDA ELLIOT: Okay. So it would be LDH's decision. Okay. That was what I was trying to track down. Thank you very much.

BRIAN BENNETT: But I do want to say-- and you're right. The response rate for those has been a little low. So one thing that we've done, and we actually just wrapped this up, we worked with a consultant to come in and look at the cost reports to see how they might be able to be simplified, made more user-friendly. So hopefully that will kind of climb up the rate at which providers are completing and submitting those. We had workgroups for our smaller providers, our medium-sized providers, our larger providers. We had workgroups with support coordination agencies and I think our adult day healthcare centers. Where basically we went through the cost reports with them, identified what their pain points were, what would they like changed. It was just kind of a working session where we can have feedback to those providers about what their experience was with completing those cost reports and what we could possibly improve. So we just wrapped up those workgroups. The people that the providers that participated in those workgroups they're going to be piloting those new cost reports this year so we can get some feedback on it. And then we hope to deploy those I think next year with the new cost

reports that have incorporated that feedback. So I'm sure we'll still have some providers that don't submit but that was kind of our effort to work with providers to try and improve them because they are very detailed and cumbersome but they are that way for a reason so we can make sure we collect all the information. But that was one thing we did in working with providers to try to improve their response rate.

MYLINDA ELLIOT: Do we have time for a follow-up comment?

BRIAN BENNETT: Yes.

MYLINDA ELLIOT: Thank you. My understanding was the response rate was around 50 percent and in my world 50 percent might get my head chopped off. But maybe my world is different.

BRIAN BENNETT: All I can say at this point is we did penalize those providers that did not submit a report.

MYLINDA ELLIOT: Oh, yeah, and I appreciate all your information. Thank you.

BRIAN BENNETT: And we are trying to make it a little bit easier for them to complete it, submit those reports. So hopefully that will help with the response rates for next year.

RENODA WASHINGTON: Thank you, Ms. Elliot. And thank you, Brian. Any other public comments? Hearing none, the report requires no action and will be placed on file. Final item of business is the report from the Department of Education. The chair recognizes Dr. Lauren Wells for the report.

LAUREN WELLS: Hi everyone. Good afternoon. So I think the final report for you is on this white paper. Just an update from the Division of Diverse Learners for the Louisiana Department of Education. So the first item for you is an update from our SEAP, our Special Education Advisory Panel. This meeting was held March 18th and we just discussed some different informational items around dyslexia and specifically our dyslexia core assessment program. We also shared some information around the dyslexia family handbook. And then some additional reports from LDOE. We do have some revisions to bulletins that are currently on notice of intent. This was based on our Office of Special Education Programming. We received a DMS

report from them. So just further aligning some language. These bulletins went to BESE earlier this month. Some are as simple as technical edits OSEP wanted us to include, like further define an LEA and SEA, additional items around the dispute process. So just a quick SEAP update for you. But the materials are linked on the electronic version and then you can also watch the live stream if you have extra time for that.

Also wanted to share an exciting event we had last month with our division. We had our leadership collaborative. We invited two special education leaders from each school district to attend in Baton Rouge. The morning session really focused on what we heard a lot from the field around behavior supports for diverse learners. So really focus with our leaders on behavior. And then we had afternoon breakout sessions digging into data, discussing compliance and monitoring and even English learner support. So that was just an exciting event. And some of those just kind of I think warm my heart personally because I enjoy getting to see the different directors throughout our state.

Also just for your awareness. We currently have our IPA grant application on our website. Public comment is actually still available until 5 p.m. today. So I still wanted to list the public comment just for your awareness purposes because it is still available for the next three or four hours. But what this is so our department receives our funding from our OSE, our federal organization just around IDEA. So that Individuals with Disabilities Education Act. So you can see the application is on the website. There's also what's called an interactive spread sheet and it just breaks down the proposed activities that align with our IDEA mandates. And then the proposed budget as well. So it's just something that you're able to go in, go see what's proposed for fiscal year 26. But again, if interested public comment is still available for the next few hours.

Also just for awareness we do have some legislative items, some that we're kind of monitoring more than others. And I've listed just three here for you. Brian, I hear you're around 90 items. Thankfully we don't have that many. But for special education,

just for your awareness right now, so we have house bill 342. This is around dispute resolution and that complaint process in our school systems. So right now our legislation indicates that the individual that files a complaint, so typically a parent or caregiver of a student with a disability, they are in charge of what's called the burden of proof. Basically getting court documentation that might support their complaints. This bill changes that and the LEA, our school systems, would now carry the burden of proof. So during this dispute process if a claim is submitted the school system would now carry that burden of proof. That's one currently that we are just kind of watching.

We also have 352. This was as recent as yesterday a discussion and I believe it's going back next Wednesday as well. This discusses behavioral health services in the classroom. So they're currently discussing some language. It was proposed, you can see I crossed out the word may, they have now updated that wording to shall provide services in the classroom. Again, it was discussed as recent as yesterday. It's deferred until next week so we're just continuing to monitor 352 at this time.

And then lastly, just for your awareness this is senate bill 64. This is around special education classrooms, the cameras in those self-contained classrooms. The amendment 264 is around the viewing procedures for when allegations of abuse arise who views that footage. Right now I believe the language discusses the superintendent or his or her designee. It just really clarifies the joint viewing process with senate bill 64.

Just a few other updates for you. So thinking about seclusion and restraint. Right now we are reminding our school systems as the end of the year is upon us that reporting process, which occurs via ESER, so our statewide process for ID documents. So seclusion and restraint is submitted to our agency via ESER. We are also currently collecting behavior plan updates from our school systems. So just bringing that update to you around seclusion and restraints.

And then a few other items just for your awareness. Our SPED Fellow Academy. So we have cohort, we're on cohort six now. I have to count my

years but I'm pretty sure we're on cohort six. That application process is currently available. So until May 1st any novice special education leader, director in our school systems they are encouraged to submit an application. And what this is, SPED Fellows is a yearlong really comprehensive process to further grow those leadership skills, expand their knowledge and expertise around special education, special education policy. Even intervention and implementation. So it's just a yearlong comprehensive program. We also partner our fellows with we call that individual a coach. So they have someone to reach out directly to during this year long process really to walk them through their leadership. Just bringing for your awareness if you know anyone that might be interested we certainly encourage them to apply.

And then I think I have two more items for you. The first item is our parent involvement survey. You can see we have our traditional school systems as well as our charter school systems that were selected for their participation in this survey. This is around what's called Indicator 18. We have to report to OSEP on a variety of indicators and this is one of those items. So just, again, bringing for your awareness if you are aware of anyone in these school systems making sure that they are aware of the survey. It does close July 1st. And our agency has communicated with the school leaders letting them know that this survey is currently available and to please reach out to their parents before July 1st.

And then the last item I have for you we as a division support our students with disabilities as well as English learners. And Dr. Scheniver on our team does a fantastic job of all things English learner support. And so she host what's called English learner institutes and the final institute for this school year it will occur on May 14th. So just again for awareness if you know an interested director or coordinator who might be interested to attend we certainly encourage them to be there. It's a hybrid opportunity. It's occurring in person at our Claiborne Building in Baton Rouge and she also live streams it. Just for those interested (inaudible). All right. That is all I have for you today.

RENODA WASHINGTON: Thank you, Lauren. Are there any questions from council members on the report? The chair recognizes Karen.

KAREN XU: (Inaudible).

LAUREN WELLS: I would have to look more into the student specifics. If it's a student with a disability, so an IEP team decision thinking about (inaudible) appropriate education, what services that student needs for his or her individual needs. But we can certainly chat, if you would like to, about this specific student, what might best support his or her specific needs.

KAREN XU: (Inaudible).

LAUREN WELLS: Yeah. A one-to-one paraprofessional or even we call it a two-to-one. Maybe a two-student ratio can be determined based on that IEP team's decision. And it is based on that individual student's needs. Academic needs, behavioral, medically fragile are all things that are considered for that individual child.

RENODA WASHINGTON: Any other questions? Public comment? Hearing none, the report requires no action and will be placed on file. At this time we will have public comments. Public comments can be on any area of concern or question. Each person will be recognized by the chair and will have three minutes to speak. Are there any comments? Hearing none, we will move forward. At this time we will have announcements. The chair recognizes Ebony for the announcements.

EBONY HAVEN: So we have a couple of announcements on the agenda. The next quarterly business meeting is July 29th and 30th. So we will have those two days again. And also please, please do not forget about your financial disclosure. Bridgette and I will send out another reminder tomorrow. Tomorrow is May 1st so you will have 15 days to get those disclosures into the ethics board if you haven't done so already.

Disability awareness day, I know Liam has already mentioned it but it is May 4th. The council staff will be there. Don't forget to fill out your survey that's included in your packets please before you leave. And I just wanted to recognize one of the DD directors personally, Dr. Maryland. She was here with us earlier but she had to leave. She's retiring and I just wanted

to thank her for her service publicly in the meeting. Thank you, Dr. Maryland. She was one of the FHF directors that attended the capitol. She's in the Greater Baton Rouge area. She was at the capitol for yellow shirt days with us continuously. So I just want to thank her for her service with Families Helping Families and just let her know that she will be missed.

And then one last thing. I did want to mention with the new schedule I know that we said that expenses for the virtual meetings would not be covered but I did want to extend this. As your executive director if there is anyone that needs assistance with hotel costs, or lunch or anything like that please reach out to me directly and we can work those things out. I don't want that to be a deterrent for individuals not to come in person. So I did want to just let everybody know that if there's any issues or anybody needs assistance or support we're definitely here to offer that support. I think that's all I have.

RENODA WASHINGTON: Thank you, Ebony.

ALAINA CHACHERE: I just have a question. That's for the two virtual? Like if we're virtual and we decide we want to come in person or is that for the in-person meetings as well?

EBONY HAVEN: Well, no. The in-person meetings those expenses will be covered.

ALAINA CHACHERE: That's what I thought. Okay.

EBONY HAVEN: Yeah. That is for the two virtual meetings.

ALAINA CHACHERE: Okay.

RENODA WASHINGTON: Anyone have any questions or comments on anything? As we close I do want to take a moment to thank everyone for their participation and sacrifices. The work that we do is very important but I want you to also know that so are you. So take time to recharge, relax, take a breather. We wear many hats. Some of us are caregivers or parents, teachers. We have careers. We have a life. I just want, I just felt led to just encourage all of you guys to take the time for yourselves. Take the time for you. What we do is very important but let's just try to have a healthy balance in everything that we do. Is there any further business that we need to discuss? Okay. Hearing none, if there is no objection we will adjourn

at 2:57. Safe travels to everyone and thank you guys.