

**Consumer Task Force  
November 28, 2006  
Michigan Association of Community Mental Health Boards**

**MINUTES**

**ATTENDEES:** Tandy Bidinger, Jack Vint, Mike Daeschlein, Jacqui Day, Laura Hall, Sara Harrison, Susan Steinke, Nora Barkey, Mike Head, RoAnne Chaney, Robin Palmer, Esther VanHammen, Ruth Smith, Marion Owen, Wendi Middleton, Kate White, Rob Curtner, Tari Muñiz, Cathy McRae, John Jokisch, Bob Orme, Yuself Seegars, Marty Alward

**HANDOUTS:** Agenda, Minutes from October, Project Updates, 2007 Schedule of Meetings, Michigan's 2006 Real Choice Systems Transformation Grant Power Point Presentation

**MINUTES** - Tandy Bidinger's name was misspelled. Otherwise, there were not corrections to the minutes.

**OFFICE OF LONG-TERM CARE SUPPORTS AND SERVICES UPDATE** - There is a State hiring freeze that may slow up the Office's ability to fill needed positions. Existing positions funded by various grants should continue.

The Long-Term Care Conference for 2007 has been postponed until fall or spring 2008 due to staff commitments.

**BRIEF PROJECT UPDATES/ISSUES/DISCUSSIONS -**

- There was some discussion regarding the Long-Term Care Commission. Given the diversity of background of the Commissioners, it is taking some time to get all Commissioners oriented to Medicaid long-term care. It was suggested that issues be brought to the Commission's attention via the public testimony process.
- SPE Evaluation - Status reports of the progress of the evaluation will be reviewed by the Consumer Task Force, as well as the final report. It was suggested that Carol Barrett provide the same update to the Consumer Task Force as done at the Michigan's LTC Connections Informational Forum.
- Self-Determination Grant - The pioneer sites are close to begin enrollment in self-determination. Each site still needs to sign a contract with a fiscal intermediary. Preliminary work has been completed (training, budgets, plans). It was noted that the existing MIChoice per diem rate will include the fiscal intermediary fee. The 4 pioneer sites are: UPCAP, Detroit Area Agency on Aging, TriCounty Area Agency on Aging, and Burnham Brooks. Per the grant, Michigan indicated it would have 600 persons enrolled in self-determination by the end of the grant (September 2007). No new slots will be allotted for self-determination. Self-determination, in summary, means the

- consumer can direct their own services, hire their own staff, and control their own budget.
- Independence Plus/Money Follows the Person - Rob Curtner wished to recognize everyone's efforts in promoting person-centered planning and self-determination. The flyer that was included in the project updates is for a workshop. Consumers wishing to attend this workshop and who require support, may contact MDRC. Comments on the implementation chart should be sent to Rob ([curtnerr@michigan.gov](mailto:curtnerr@michigan.gov)). The Person-Centered Planning Practice and Guidelines should be ready for review by the next meeting. This project is not focused on seniors, but on the entire MIChoice population.
  - The Aging and Disabled Resource Center grant is part of the Consumer Task Force review. This project is part of the Single Point of Entry update.

**MEDICAID INFRASTRUCTURE GRANT AWARD** - Michigan received a 5-year \$2M award to continue the Freedom to Work initiatives. There are currently 866 persons enrolled in Freedom to Work. The Medicaid Infrastructure Grant staff attended the Michigan Association of Reimbursement Officers conference and the national MIG conference in Chicago.

Tony Wong will be starting a new job at ARC of Michigan in December, as Director of Projects, but will still be involved in the Medicaid Infrastructure Grant project.

The issue of Freedom to Work individuals also participating in the MIChoice program was raised. This issue requires further clarification. It was suggested that the results of the Participant Experience Survey be shared with the MIChoice waiver agents as this document indicates that MIChoice enrollees do want, and are able to, work. RoAnne Chaney will pursue this with Pam McNab at the Medical Services Administration.

Per the Centers for Medicare and Medicaid Services, there are 2 types of Medicaid Infrastructure Grants - basic and comprehensive. The comprehensive grant is based on a percentage of the Medicaid money going to Freedom to Work. Michigan is getting close to making that cost effective (with the numbers of persons enrolled in Freedom To Work). This comprehensive grant is more involved, requires a strategic plan to be developed and approved.

**SYSTEMS TRANSFORMATION GRANT - STRATEGIC PLANNING** - The Systems Transformation Grant was awarded to Michigan to begin October 1, 2006. It is for \$2.4M over 5 years. A portion of that award is for a strategic planning process. The balance to be awarded once the strategic plan has been approved by the Centers for Medicare and Medicaid Services. The Office has begun internal work on the plan. Once the draft has been completed, it will be presented to CMS in June in Baltimore. There will be 4 workgroups based on the 3 goals and the project evaluation. The goals are: 1) Single Point of Entry, 2) Self-Determination in Long-Term Care, and 3) Finance Rebalancing. A planning retreat will be held in Lansing, in midMarch to develop the strategic plan, based on the four workgroups. Bob Mollica and Susan Reinhart (the technical assistance providers for this grant) will facilitate. Michigan Public Health

Institute will be the external evaluator. A logic model will be developed for each goal. Let Michael Daeschlein ([daeschlein@michigan.gov](mailto:daeschlein@michigan.gov)) know if you are interested in participating in a workgroup and which goal you wish to work on. You must be able to attend the retreat and additional meetings. The Office anticipates a draft by midApril so the workgroups should be done by the end of March.

It was noted that, at one time, the Long-Term Care Task Force suggested using a State expert to chart the fund flow. This may be something to consider for this project.

This grant is mainly focused on the aging and persons with disabilities populations. People with developmental disabilities are more likely to be served by the community mental health boards. It was noted that many people do not fall neatly into either category. And, the decision of which waiver to be enrolled in should be consumer choice. It was also suggested that, if a person chose the MIChoice waiver over the Habilitation/Supports waiver, the community mental health system should transfer that funding to the MIChoice waiver. The LTC Connections staff needs to be educated in the various programs/waivers that are available as part of the options. In addition, the SPE needs to document where and why a person chose their option. This could identify policy issues. The external advocate could also provide information for the consumer to make an unbiased choice of options.

## **OTHER BUSINESS**

- The Long-Term Care Commission has drafted two budget proposals, one for the 2007 budget and one for the 2008 budget, urging the Governor and Director of the Department of Community Health to 1) not cut overall LTC funding, and 2) to increase the long-term care funding for community-based services. In addition, there were 3 public testimonies regarding the community-based services funding issue.
- Michigan State Housing Development Authority (MSHDA) published a one-day opportunity to apply for Section 8 housing vouchers at four sites. MSHDA was not responsive to inquiries regarding this event. It was also noted that the aging and persons with disabilities populations were not included in their top four populations for their 10-year plan. There was also some discussion regarding MSHDA's definition of homeless. It was suggested that MSHDA provide a representative for the Consumer Task Force.
- The New York Times has an article on the Medicaid Commission Report. (See Jackie if you are interested in obtaining a copy of this article.)
- It was noted that the Habilitation/Supports 1915bc waiver (mental health) includes services for housing. Housing services (e.g., paying a delinquent heat bill) is included as a service under the 1915b waiver In lieu of a State Plan service. Such services are not allowed under the 1915c waiver. In addition, certain expenses are covered under Medicaid as a Nursing Facility Transition service, under special approval from the Centers for Medicare and Medicaid Services.

- Jack Vint noted that there was a family in Michigan that built a 10-unit complex, in honor of their daughter, specifically for individuals who use wheelchairs.

Next meetings: January 23, 2007, 10:00 – noon, Michigan Association of Community Mental Health Boards. **Please note that this will be a Holiday Potluck Dinner. Jackie Tichnell will follow up with this issue.**  
February 27, 2007, 10:00 – noon, Michigan Association of Community Mental Health Boards