# DAIL Advisory Board Meeting Minutes June 10, 2021 Microsoft Teams Phone/Video Conference

#### **ATTENDEES**

**Board Members:** Nancy Breiden, Jane Catton, Lynne Cardozo, Jim Coutts, Kim Fitzgerald, Michael Gruteke, Jeanne Hutchins, Nick McCardle, Michael Monroe, Delaina Norton, Steven Pouliot, Marie Zura

Guests: Meg Burmeister, Chris Davey, Melissa Morrison, Howard Goodrow, Kim Fitzgerald

**State Employees:** Monica White, Megan Tierney-Ward, Liz Perreault, Kirsten Murphy, Angela McMann, Bard Hill, Bill Kelly, Ross MacDonald, Susan Aranoff

**Motion to Approve Minutes:** May 13, 2021, minutes: Move to Approve: Kim Fitzgerald

Seconded: Steve Pouliot

Abstained: Delaina Norton, Nancy Breiden

Liz Perreault will update the May 13 meeting minutes to reflect that neither Nancy Breiden nor Delaina Norton were in attendance.

Minutes are approved as written with above changes.

#### **DAIL Updates:**

Interim Commissioner, Monica White and Deputy Commissioner, Megan Tierney-Ward DAIL Updates:

- DAIL Employee Support Cath Burns provided COVID Support VT interactive workshops designed to support staff through reentry into the office.
- APS Investigator Field Supervisor Shane Harris had a health incident last night and died. The department is coordinating with EAP and HR to give staff support.
- DAIL met with CMS to discuss Vermont's choice model for CFC case management and conflict of interest mitigation strategies. We will bring this to August meeting.
- HCBS provider memo has been drafted and coordination with DMH to be sure it aligns.
- New Deaf, Hard of Hearing, DeafBlind services web page has been created.
   (https://dail.vermont.gov/services/programs/deaf-hard-hearing-deafblind)
- Open meeting law will require a physical location for meetings once the state of emergency executive order is lifted.
- Work happening across Departments to address people unnecessarily "stuck" in hospitals.

#### Vaccination work:

- LTC facilities getting into a "normal" routine for vaccines.
- VDH working on setting up primary physicians with vaccination.
- VT is currently at 79.6%. Goal is 80% for full reopening.
- VT #1 with regards to vaccination rate, doses per 100 people. (125 doses in VT, 71 for TN)
- VT #1 with regards to SNF infection rates and duration of outbreaks.
- Fall 2021 anticipating vaccines for younger kids.

#### Work with providers:

- Finalized revised Adult Day guidance.
- Finalizing memo to our HCBS providers for in-person services.
- Low to no contact follow VT Forward Plan and Universal Guidance. High contact/Health Care follow health care guidance to mask. Unvaccinated required mask and distance now. After step 4, recommended.

VDH updates: Stable numbers right now. Aver 9-12 cases per night. No apparent spike from Memorial Day. Increasing genome sequencing to track variants.

- Leadership changes!
  - o Selina Hickman leaving DDSD
  - o Recruiting for DDSD Director
  - Recruiting for Director of Operations
  - DMH changes Newly appointed Emily Hawes, Commissioner and Alison Krompf as Deputy Commissioner.
- The Agency of Administration released a memo about expectations for staff to return to the office, which was very well thought out and took into consideration the considerable feedback supporting an ongoing hybrid environment. We are planning what this new dynamic will look like for DAIL starting in the fall.
- We are almost at the 80% threshold to reopen services and are grateful for everyone's efforts in promoting vaccines.
- There has been some of the news coverage in the Rutland Herald and Seven Days pertaining to a stipulated receivership for four licensed residential care homes in Rutland, the Our House homes. This was a very difficult situation, and I am confident in the resolution being the best outcomes for the Vermonters DAIL works to protect. Happy to answer any questions on this.
- DAIL facilitated a two-hour roundtable on Friday 5/28 with DMH with a great turnout of attendees, to listen to the experiences and ideas of our DA/SSA community partners providing services to older Vermonters to inform our collective policy and planning efforts going forward. May is both Older Americans Month and Mental Health Awareness Month, a time to reflect on the important work we do to serve Vermonters and an opportunity to explore new ideas to do even better. With Vermont's changing demographics, we are seeing

- more older Vermonters with complex medical and mental health needs both in acute and community settings and our programs and systems are not always prepared to serve them well. These challenges have been building for years and will only increase without more intentional focus. Now is an opportune time to come together and work to solve some of these challenges collectively.
- The Government Accountability Office issued a report last month, detailing nursing home COVID-19 outbreak data nationwide from May 2020 through January 2021: GAO-21-367, COVID-19 IN NURSING HOMES: Most Homes Had Multiple Outbreaks and Weeks of Sustained Transmission from May 2020 through January 2021. Vermont's results were best in the nation in terms of Percentage of Nursing Homes with No COVID-19 Outbreaks, COVID-19 Outbreaks Lasting 1 through 4 Weeks, and COVID-19 Outbreaks Lasting for 5 or More Weeks see Page 16 of the above link for the graphic. This is a testament to Vermont's leadership in our pandemic response and speaks volumes to the effectiveness of our VDH/DAIL Healthcare Outbreak Prevention and Response (HOPR) partnership I am sure the first of many retrospective analyses that will laud the work we led over the course of the pandemic as being best in class nationally for saving lives. I am incredibly proud of the work our team has led.
- We had 249 youth sign up for the VR Summer Career Exploration program for high school students ages 14 to 21. Tara Howe will be here to speak to this program and others, later in the agenda I am very proud of her work on this.
- VR awarded four Developmental Services Supported Employment programs four-year contracts to provide employment services to in-school youth to improve the employment outcomes for those exiting high school. The DS SE programs will provide targeted in-school curriculum, work-based learning experiences and opportunities to explore the world of work. The overall goal is to have students exit high school with a clear plan to employment either through training, education and/or a competitive job. The four DS SE programs will participate in a State Learning Collaborative as a part of a training grant VR received from ICI/UMass Boston. The SLC will bring the four programs and their supporting teams including VR, VABIR, and school staff to share learning across programs. We believe assisting students to exit school with a job or a plan for post-secondary education or training will enhance the students' trajectory for the rest of their lives.

#### **DAIL Budget and ARPA Status**

### Bill Kelly, DAIL Financial Officer and Bard Hill, Principal Assistant

Bill Kelly reported that the proposed DAIL budget was increased with a 3% rate increase for home and community-based services, \$100,000 for the VT Association for the Blind and Visually Impaired and \$5M ARPA funds for Adult Day providers. Bill also shared the document that summarizes DAIL's budget. You can find that document here: <a href="https://dail.vermont.gov/resources/advisory-board/dail-advisory-brd-2021-items">https://dail.vermont.gov/resources/advisory-board/dail-advisory-brd-2021-items</a>

Bard Hill reported on the American Rescue Plan Act (ARPA) and shared the following points:

CMS recently released guidance about the HCBS FMAP increase opportunity available through the American Rescue Plan Act. This opportunity provides the state with a 10% increase in FMAP for a broadly defined set of home and community-based services over the period of 4/1/21 through 3/31/22 and allows the state to use those funds as state share for services to enhance, expand or strengthen the HCBS system through 3/31/24. We are in the process of developing an application to meet the tight timeline for proposals which requires us to submit a proposal by Monday to ensure timely approval of the state's plan. CMS has indicated that states can revise their proposals on a quarterly basis throughout the funding period which ends in 2024. Although we will be submitting an initial proposal on Monday, we also intend to embark on a more robust stakeholder engagement process to update the proposal for the initial quarterly submission in Mid-July. Our initial analysis indicates that the funding opportunity will be for ~\$160M over the funding period. We will still need to work with CMS to understand how this funding will impact budget neutrality, which is a requirement within the 1115 waiver that limits state Medicaid spending to only the amount of spending that would occur in the absence of a waiver.

- 1. Section 9817 of the American Rescue Plan Act (ARPA) provides states with a temporary 10 percentage point increase to the federal medical assistance percentage (FMAP) for certain Medicaid HCBS from April 1, 2021, through March 31, 2022, to improve HCBS under the Medicaid program.
- 2. States will be permitted to use the state funds equivalent to the amount of federal funds attributable to the increased FMAP through March 31, 2024.
- 3. Federal funds attributable to the increased FMAP must be used to supplement existing state funds expended for Medicaid HCBS in effect as of April 1, 2021; and (2) states must use the state funds equivalent to the amount of federal funds attributable to the increased FMAP to implement or supplement the implementation of one or more activities to enhance, expand, or strengthen HCBS under the Medicaid program.
- 4. HCBS is uniquely broadly defined by CMS:
  - Home health care
  - Personal care services
  - Case management
  - Rehabilitative services
  - Private duty nursing delivered in a beneficiary's home
  - Section 1915(c) waiver program services
- 5. Some guidance from CMS; some guidance from national groups e.g., NASDDDS, ADvancing States.
- 6. 30-day deadline for plans to CMS- due Monday June 14 (can be extended to 60 but we hope to get approval to start elements sooner).
- 7. \$ can be spent on allowable expenses after plan is approved by CMS.
- 8. Quarterly plan updates/revisions to be submitted by states to CMS.
- 9. AHS survey for stakeholder input; other stakeholder input, to be determined.
- 10. FMAP plan is across is AHS; use of enhanced FMAP is not anticipated to be proportionate to current program expenditures. AHS will need to clearly define the programs/expenditures in scope for calculating the FMAP.

- 11. Incentive to 'front load' use of FMAP due to (a) method of calculating FMAP benefit through March 2022: increasing total FMAP revenue; and (b) avoid of 'base building' without ongoing increase in FMAP.
- 12. AHS is still working on the total enhanced FMAP- current estimate is app. \$160 million. App. \$47 million of this was committed by the legislature for provider rate increases in the budget just signed by the Governor.

DAIL is still working on both the amount of funding we anticipate receiving and the activities that we can include in the proposal. Current analysis indicates the funding amount is around \$160M. We intend to meet the CMS deadline of submission by Monday, June 14th but expect to make modifications and provide more granular detail during the first quarterly report submission in mid-July and during future quarterly report submissions. An immediate next step after Monday will be developing a more robust stakeholder engagement process and would welcome ideas on this. We are indicating in our proposal that the state will need to discuss with CMS how the funding will impact budget neutrality under the 1115 waiver. This is an important consideration as we plan for and implement this opportunity.

#### **DVR Youth Programs**

#### Tara Howe, DVR Transition Program Manager

Tara Howe shared that the VR Transition Program is currently in transition. The program will now serve students from ages 14 through 24, instead of stopping the program at age 18. This allows for a student's seamless transition from high school to work or furthering their education with the same counselor. Depending on a student's need, they may work with a transition counselor and job coach and/or a benefits counselor.

The VR summer career exploration program had 249 students apply for the summer of 2021 program. Students will earn minimum wage for both the work and classroom components.

You may click on the following link to view the full presentation. https://dail.vermont.gov/resources/advisory-board/dail-advisory-brd-2021-items

## **Diversity and Equity**

## **Xusana Davis, Director of Racial Equity**

The following is the biography pulled from the State of Vermont Racial Equity website: <a href="https://racialequity.vermont.gov/about-us/executive-director-racial-equity">https://racialequity.vermont.gov/about-us/executive-director-racial-equity</a>.

Xusana Davis serves as the State of Vermont's Executive Director of Racial Equity. She was appointed to the position in June 2019 by Governor Phil Scott.

In her role, Xusana works with state agencies to identify and address systemic racial disparities and support the state's efforts to expand & diversify Vermont's population. She relies on data to inform this work, and on the State Strategic Plan to guide it. Learn more about the duties of the Executive Director of Racial Equity <a href="here">here</a>.

Prior to joining the State of Vermont, she served as Director of Health & Housing Strategic Initiatives at the New York City Department of Health and Mental Hygiene, and as the Director of the Black, Latino, and Asian Caucus of the New York City Council.

She holds a Juris Doctor with a concentration in International Human Rights Law from New York Law School, where she also directed a civil liberties education program for low-income and minority youth. She studied Anthropology and Philosophy at Fordham University, earning the *Rev. J. Franklin Ewing, S.J.* Award for writing on the relationship between global human rights violations and the proliferation of HIV/AIDS.

Xusana is a first-generation U.S.-born Latina and has always been passionate about promoting open access to government for all people, regardless of their background or place of origin. She is fluent in Spanish, and her name is pronounced like the phrase "Seuss on a".

Each department across state government has a person who participates on the newly organized Racial Equity Task Force led by Xusana. DAIL is currently in transition and does not have someone appointed at this time.

If anyone on the board would like to learn more, please feel free to contact Xusana. She would be happy to work at a local level with groups and encourages businesses and agencies to hire someone to do the work in their organization. Xusana's email is: <a href="mailto:Xusana.davis@vermont.gov">Xusana.davis@vermont.gov</a>.

## **DAIL Advisory Board Meetings, Moving Forward**

Once the State of Emergency order is lifted, meetings will need to have an in-person option available. Liz and Megan will communicate how we will fulfill that requirement for the July meeting.

# DAIL Advisory Board Updates Advisory Board Members

Jeanne Hutchins- A reminder that the UVM Gerontology Symposium is happening on June 22, 2021.

Lynne Cardozo- Lynne wanted to let the board know that the Self-neglect work group has started meeting.

Howard Goodrow- Howard wanted the board to be aware that a drug that helps people with Alzheimer's has been FDA approved. It is the first of its kind. This drug addresses the cause of Alzheimer's and not the symptoms.

#### **Agenda Recommendations**

#### **Megan Tierney-Ward**

The following are ideas for upcoming meetings. Board members are encouraged to reach out to either Liz or Megan with any suggestions.

DDSD Services- system changes update.

- Assisted Living regulations.
- Our Hour conversation-lessons learned about staffing, and the issues that Our House faced.
- DD all payer model renewal is soon- HCBS under that model and what does that mean?
- Training for employers and employees (independent support trainings). There is a need in Vermont to have these trainings available.
- Psychiatric hospital patients being held in hospitals due to a lack of support or housing.

Meeting was adjourned 12:30