

**GLOBAL WAIVER TASK FORCE MEETING**  
October 24, 2011  
**MEETING MINUTES**

**Task Force Members Attending:** Paul Block, Sharon Brinkworth, Jacqueline Downy, Maureen Maignet, Ann Mulready, James Nyberg, Br. Michael Reis, James Ryczek, Judy Sullivan, Sharon Terzian, Dawn Wardyga, Vivian Weisman, Rebecca Kislak (representing Jane Hayward), Thomas Izzo

**Staff and Members of the Public Attending:** Deborah Garneau, Mary Slinko, Alan Post, Thomas Marcello, Holly Garvey, Kathy Heren, Lisa Conlon, Rele Abiade Ritter, Robert Kalaskowski, Roberta Merkle, Alison Croke, Anthony Salvo, Holly Garvey, Rebecca Martish, Alan R. Post, John Dooley, Michael Ryan, Joan Wood, Kathy Dennard, Ann Marino, Elena Nicolello, John Young

**Directors:** Stephen Costantino, Secretary of the Executive Office of Health and Human Services

**Ann Martino, EOHHS Policy Director,** opened the meeting by welcoming Task Force members and other attendees. She announced that there would be a change in the agenda and the Secretary of the Executive Office of Health and Human Services, Stephen Costantino was introduced.

**Secretary Costantino** thanked the Global Waiver Task Force members for their dedication and efforts. He commented that applications for the Community Chair positions all brought great interest and value in the work of the Task Force going forward. The applicants included Dawn Wardyga, Mark Heffner, and former Senator Thomas Izzo.

The Secretary announced the selection of Senator Izzo as the new Community Chair. He commented that he selected Senator Izzo based on his capacity in Health and Human Services throughout his career. He also mentioned that Senator Izzo had shared as Committee Chairs where he was able to bring people together to form a consensus on numerous issues. The Secretary stated that the Global Waiver is at the halfway point and there is a need to review the good and bad learned through this process particularly with new federal Medicaid decisions, the deficit, the Block Grants, and the Affordable Care Act. He continued to comment that states must be creative in the future because of the federal stress and state stress in order to continue to strengthen the Medicaid Program moving forward.

The new **Global Waiver Community Chair, Thomas Izzo,** was recognized and he stated that it would be a pleasure to serve in this capacity and looked forward to renewing relationships and working together to develop good policy. He stated that he has followed the Global Waiver and did have some reservations relative to a possible wait for services and sufficient capacity since he strongly believed the common focus should be on outcomes.

He commented that decisions should be made by putting some interest aside to develop policies that will focus on the best interest of families and children. He hopes that

focusing on outcomes will make the Task Force a strong voice particularly in the budget process.

**Holly Garvey, ACS working with EOHHS**, spoke on the Money Follows the Person Rebalancing Demonstration on behalf of Ellen Mauro. Under the MFP, Medicaid continues to work with CMS in the planning and implementation of the Money Follows the Person (MFP). There will be 3 positions hired for the Demonstration, which are required by CMS. Michelle Szylin, DHS Chief of Family Health Systems, will be the Acting Project Director since nursing home transitions aligns nicely with this initiative. Ellen Mauro and Michelle have been working together on the Rebalancing effort and will coordinate the demonstration project with Long Term Care since there is a database established. To participate, individuals must be in a qualified institution for 90 days and transitioned to a qualified community setting.

Q: (Dawn Wardyga, RIPIN) Is Taveras considered an established institution?

A: No – Taveras would be considered as a qualified institution in Phase II of the demonstration.

Ms. Garvey presented the September nursing home transitions report, which included 27 new referrals and 12 transition home placement. 11 individuals were transitioned home with DHS core services and 1 individual was transitioned home with DEA core services. There were no assisted living transition placements during the month of September.

Q: (Dawn Wardyga) Will the positions for MFP be contracted?

A: Initially there will be some state staff, three positions will be contracted and additional state grant-funded positions are slated for July.

Ms. Martino commented that the Five Year Transformation grant has had an impact on the Global Waiver because it allowed the opportunity to provide statistical data. She gave a brief review and summary of the findings through surveys and interviews. They included the following:

1. Information is getting to people but some of them have stated that it isn't what they need.
2. Ms. Susan Allen's presentation of the Brown Study found that since the Global Waiver there has been a change in Nursing Homes acuity. MFP will continue to be an aggressive approach in that effort.
3. In reviewing all the data, there is an effort to develop health indicators designed for community settings and the quality of life at home or in the community.

Q: (Maureen Maignet, LTC) Is it just dual eligible?

A: I will be back in touch with an answer.

Q: (Vivian Weisman, PSN) Could you comment on Page 34 of the data book.

A: This data contains just indicators but there will need for more analysis.

Q:(Dawn Wardyga) Relative to Health Care Reform discussions, is the state still looking at Home and Community Services for all ages and could there be a companion for

young children? Perhaps there are more likeness than difference.

A: This grant focused on a certain population and there is a need to have a global perspective but there are limited and competing dollars.

Q: (Br. Reis, Tidewater) Kids Count will look at the at risk population and if placing a child in a residential facility is more detrimental to that child's future.

A: The department is hoping to find overlaps and the health reform act promises to present new avenues.

Ms. Martino commented on the "Ask Rhody" screener that should be operational this November. She states that the Lewin Report will be available on November 7<sup>th</sup>. The purpose of this report was to review how the Real Choices grant intersects with the Global Waiver. The preliminary draft contains some remarkable data, which will require further analysis. There will be a briefing and presentation by the Lewin group on their research.

Q: (Sharon Brinkworth) Were they looking for savings?

A: What was explored included changes in the level of care through evaluation and use. The Waiver allowed for the participation of all community base services and their outcomes.

Ms. Martino commented that she would be unable to discuss budget initiatives at this time due to pending litigation issues relative to SSI budget cuts and RIte Care premiums. She did state that EOHHS would continue to work together with CMS on state plan issues.

**Elena Nicolella, Medicaid Director**, further commented that individuals above 150% of poverty level were mandated, by recently passed legislation, to increases of 3% to 5% of family income. The department requested approval from CMS for this change but was denied stating that the state was not allowed to implement this mandate. Due to this decision, the state has made no changes and the level has remained the same. Ms. Nicolella also stated that a change in RIte Share is also before the CMS relative to co-shares paid.

Senator Izzo announced that he would appreciate further conversations with Global Waiver members and will be scheduling a mutual date and location to meet and discuss their insights into this initiative. He further commented that he would also be meeting with the Directors to gain their perspective relative to this initiative.

The meeting adjourned at 2:30 p.m. The next meeting of the Global Waiver Implementation Task will be held on November 28, 2011 at 1 p.m. at the Arnold Conference Center, Eleanor Slater Hospital, Cranston, RI.