



**THE IN-HOME SUPPORTIVE SERVICES
ADVISORY COMMITTEE**

Jeffrey M. Lambaren
Executive Director
251 E. Hackett Rd.
Modesto, CA 95358
Phone: 209.558.1650
Fax: 209.558.2681

**STANISLAUS COUNTY
IN-HOME SUPPORTIVE SERVICES ADVISORY COMMITTEE (IHSSAC)
MEETING MINUTES
09/19/2014**

Committee Members Present: Linda White Valerie Mitchell
Joan Blackwell Joan Blackwell
Connie Muller Rose Martin

Committee Members Absent: Carmen Morad

IHSS & Link2Care Staff Present: Jeff Lambaren

OPENING REMARKS by Linda White

- Meeting called to order at 1:00 p.m.

PUBLIC COMMENT

- No public in attendance

ACCEPTANCE OF MINUTES

- Meeting minutes from the August 15, 2014 meeting were accepted.

PUBLIC AUTHORITY UPDATE

- The Public Authority (PA) has not had a Registry Training since June, 2014; therefore, the current selection of Providers is lower than usual. The average number of Registry Providers is about 200; we are down to 140-150 range currently. We need to ramp up Registry recruitment, specifically with an eye towards the new requirements. We have reached out to a nurse who has done CPR/First Aid Training for us for a number of years. We are trying to contract with her to do some training regarding personal care; specifically issues such as bed baths, nutrition, and infection control. Our first Registry Training, for the new fiscal year, is scheduled for October. People who have previously called in to become Registry Providers were put on hold and now we will start the process of calling them back up and registering them for training. We should have a greater selection of Providers in the future and also have a more regular schedule of Registry Trainings.
- Handout, "Draft - All County Letter No. 14-XX." The Department of Social Services issues All County Letters, All County Informing Notices, or All County Fiscal Letters. The All County Letter is the State's policy interpretation to implement regulations from Legislation that has passed. This letter is addressing the change in the program that

resulted from the Federal legislation that now authorizes overtime for Providers. The first part is the background of why overtime is now occurring which is a result of Federal rule changes as the program was deemed a companion care program up until the rule change. Due to the rule change, minimum wage and overtime now apply to the program. The next part is the Limit on Overtime Compensation. The current limit is 66 hours per workweek with the 7% reduction; making the limit 61 hours all that any Provider can work, regardless of the number of recipients. The next part is Compensation for Travel Time. Providers will be paid when going from recipient to recipient during the same workday. They can be authorized up to 7 hours of travel time per week and the time does not come out of the Recipients' authorization. Compensation for Wait Time. "Engaged to wait" as opposed to "waiting to be engaged." Workweek Agreements will be need to be completed. Three Month Transition Period to "hold harmless" while the new policies are implemented. Adjustments to Weekly Authorized Hours. Prior authorization would be needed for approval if deviating from normal weekly hours which could cause the Provider to be eligible for overtime. There are specific criteria. Provider Policy Violations. Violations are assessed in a four-tier process: First time; written warning. Second time; second written warning and mandatory training. Third time; suspension for three months. Fourth time; termination for one year and recomplete all requirements again. Providers can appeal the strikes and the State will determine the ruling. State Responsibilities. CDSS will mail notices to all Recipients and Providers to inform them of program changes. Time sheets will be modified; there will be a supplemental time sheet for travel time as well as updated orientation materials and forms. County Responsibilities. Counties will be responsible for implementing and enforcing the new workweek limitation rules, make sure all forms are received back and signed, and reviewing any violations.

- Handout, "Draft - Revised and New Forms and Notices for Use in Implementing Senate Bills 855 and 873." Reviews the various form numbers, titles, and intended purpose of each form.
- Handout, "AARP; Family Caregivers Providing Complex Chronic Care to People with Cognitive and Behavioral Health Conditions." This analysis provides some information and statistics regarding family caregivers who provide care and support for people with cognitive and behavioral health conditions which is doubly challenging.

BUDGET UPDATE

- Nothing else to report at this time.

LEGISLATIVE UPDATE

- Handout "Paid Sick Leave." The Governor signed AB1522 on September 10th. This requires that Employers provide at least 3 days of paid sick leave per year. The IHSS program was exempted from this due to the cost to the State.
- Handout, "Lawsuit Filed to Block Duals Plan." There was a previous lawsuit which the judge ruled against. This is a new lawsuit seeking an injunction to halt the Coordinated Care Initiative. Because California health officials are authorized to use a passive enrollment system, the people getting notices from the State will be shifted into managed care plans if they don't respond. The other concern is if someone is in Plan "A" and has a medical appointment or procedure scheduled and then they are moved to Plan "B." Then that appointment doesn't carryover. So they have waited all this time for their procedure but the authorization is no longer in effect and they have to start all over

to schedule the appointment. This certainly affects the care for Recipients as well as Alzheimer's and dementia patients.

- Handout, newspaper article "The Forced Union Sales Pitch." This Bill is currently sitting on the Governor's desk and seems likely to be signed. SB878 would allow the Union to present up to 30 minutes at the Provider orientation. The United Domestic Workers Union currently present at our orientations for approximately 10-15 minutes. They provide their materials; explain the advantages of being a Union member, and the various benefits offered to Union members. The reason for the legislation is due to the Supreme Court decision that unless an individual has agreed and signed up to be a Union member, the Union cannot take dues out of the Provider's paycheck.
- AB485 would disconnect the Coordinated Care Initiative with the statewide Public Authority. Currently the rules say that when they complete the dual integration enrollment, then that County transitions to a statewide authority that takes over collective bargaining for wages and benefits for the County. There are 8 pilot counties, 2 on hold, the others are proceeding but the enrollment process has not been completed yet. This bill is seeking to move everyone effective January 1, 2015. The Governor had stated he would veto it.
- SB1124 seeks to limit the State recovery from the estate of a deceased Medi-Cal beneficiary to only those costs for health care services that the State is required to recover under Federal Law. Those services being nursing facility services, home and community-based services, and related hospital and prescription drug services.

FURTHER ACTION PLANNING FOR 2014

- Jeff hasn't received any additional information for the Newsletter except for the recipe. The information that we talked about today in the meeting is still in "draft" format and not finalized yet. We will put it on hold for now. Please submit any articles, etc., to Jeff. Remember, it does not have to specifically be applicable to IHSS.
- Handout, "2014 IHSSAC Meeting Schedule." The last meeting of the year will be held on November 14th. We will also work on the 2015 IHSSAC Meeting Schedule at the November meeting.

COMMITTEE MEMBERS REPORT

- None.

AGENDA ITEMS FOR NEXT MEETING

- Public Comment
- Acceptance of Meeting Minutes from September 19, 2014 meeting
- Public Authority Update
- Budget Update
- Legislative Update
- Further Action Planning for FY 2014
- Committee Members Report
- Agenda Items for Next Meeting

Stephy Tracey, Recorder