

COUNTY OF SACRAMENTO  
IN-HOME SUPPORTIVE SERVICES  
ADVISORY COMMITTEE

January 18, 2012

**Attendees:** Denise Blockmon, Bob Blymyer, Francisco Godoy, Chandra Livingston-Blanks, Melissa Kinley, Antoinette Lopez-Coles, Stormaliza Powmacwizalord , Carolyn Rose and Cordia Wade

**Absent:**

**Staff & Guests:** Matthew Call (Sign Language Interpreter), Elise Ceccarelli (Caregiver), Teresita Godoy (Caregiver), Deanna Jekayinfa (PA), Caleb Lopez (Sign Language Interpreter), Samantha Love (Caregiver), Sharon Rehm (IHSS), and Rick Simonson (PA), Laura West (IHSS Fraud Task Force),

I. Call to Order 1:08 by Chair Melissa Kinley

II. Introductions

III. Consent Calendar

A. Agenda: reviewed/approved (Blockmon/Wade)

B. Minutes: reviewed/approved (Blockmon/Wade)

IV. Reports

A. **Chair Report, Melissa Kinley IHSS Chair** – Reminder to participate in Ed Roberts Day – January 23<sup>rd</sup> at the California Museum, admission will be \$6.00 (tell them you are there to celebrate Ed Roberts Day).

California Healthline.org ([www.californiahealthline.org](http://www.californiahealthline.org)) has information about developments in health care and health policy.

**IHSS Program Manager, Sharon Rehm** –There is a court hearing tomorrow that will decide if the budgeted 20% reduction in IHSS services goes forward or if the court-ordered stay becomes permanent (halting the reduction).

Hiring of social workers continues and has proven to be a long process.

**Public Authority, Acting Executive Director, Rick Simonson** – The process continues to develop four pilots to move dual eligible beneficiaries (those who have both Medicare and Medi-Cal) into a single payer environment. The pilots call that for the first year, IHSS services will not change. Changes will begin during second and third years with the Health Plans (Managed Care) defining how IHSS will be integrated. Most Health Plans don't currently deal with personal care, domestic and related services, so this will be a new arena for their involvement. The next few years may bring about great change for IHSS. The

unions have proposed having a single, statewide employer of record for negotiations of wages/benefits, registry services and education for providers and recipients (in place of individual county-based IHSS Public Authorities).

CBAS (Community Based Adult Services) is the successor delivery system to Adult Day Health Care. Many CBAS services will be similar to services that were provided by Adult Day Care Services, though fewer services are likely to be authorized.

In Home Operations – IHO is a state-run program that provides services beyond the 283 hour IHSS maximum.

CFCO – Community First Choice Option: A State Plan Amendment (SPA) was submitted on December 1, 2011. The Centers for Medicare and Medicaid Services (CMS) has 90 days to respond to the SPA (the clock stops when CMS requests additional information). It is expected that federal reimbursement for Personal Care Service Provider (PCSP) hours will increase from 50% to 56%, effectively lowering the state and county share of IHSS costs.

Effective January 1, 2012, health benefits for IHSS providers in Sacramento County have a new Plan Sponsor: Health Care Employees/Employer Dental and Medical Trust, with Dublin Insurance Services acting as the Trust administrator. This union-affiliated Trust currently administers benefits for six county IHSS programs: Fresno, Marin, Sacramento, San Joaquin, Sonoma, and Yuba. The Trust administrator has staff that speak multiple languages, and may have better benefits buying power in future years. The Trust, as the Plan Sponsor, can change plan design or eligibility. For example, under county administration, a provider would lose benefits after four consecutive months of hours less than 85 hours, under the new Plan Sponsor; providers will lose benefits after three consecutive months.

Still in negotiations with SEIU-UHW over wages and benefits.

Governors proposed budget came out 2 weeks ago. The two items that impact IHSS are the 20% reduction in IHSS services (currently under a temporary restraining order) and the elimination of domestic and related services when another adult not receiving IHSS services is living in the same home as an IHSS recipient. If these two changes do not happen, then additional cuts are likely next fiscal year.

**IHSS Fraud Task Force, Deputy District Attorney, Laura West-** The IHSS Task Force has been funded by the state for the last 2 years. Due to the trigger cuts, state funding for the Task Force has been eliminated. By June 30, 2012, the IHSS Task force may be disbanded. If the Task Force is disbanded, then we will pass on the data collection; hoping it will be useful in preventing IHSS Fraud. When the Task Force was first formed the funding came exclusively from the county. Currently, the county pays 15-17% of the funding and the state provides

two state employee positions (investigators). If the county continues to fund the IHSS Task Force, they will have to increase their funding to 50% of the total costs if the IHSS Task Force can get matching federal funding.

Supplement Study: Overpayments Generated by Hospital Error Rate - 11-16-2011 report – Of the original 463 (468 on handout) cases, 306 had over payments. Of the original remaining 157 with no over payments, 37 of those had over payments within an expanded time period. In looking at the expanded period of July 1, 2008 – mid 2010, (June) additional overpayments of \$300,160 were identified (over and above the previously identified \$166,569). This brings the total overpayments to \$466,729. It is noteworthy that when providers receive overpayments and those are discovered and recovered, it is highly unlikely that the provider will re-offend.

It would be more beneficial if we could find out about the hospital overpayments in a timely manner.

Our intentions are to assemble all our data into a nice package and submit the information to the CDSS.

- V. Committee Matters
  - A. CICA Conference Call – Discussed dual eligibility, domestic and related services being cut. Marti Yamamoto from CDCAN said if you can't attend rallies, call your legislator, or share your story with CICA about how the cuts will impact you.
- VI. New Business
  - A. Discussed the desire to have meetings more frequent. – table to next meeting...
- VII Old Business
- VIII Public Comment – none