



# Governor's Commission on Disabilities Executive Committee Agenda May 20, 2013 3 - 4:30 PM

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**Attendees:** Timothy Flynn (Chair.); Judi Drew; Casey Gartland; Ronald McMin; Angelina Stabile; & Linda Ward  
**Absent:** Andrew Argenbright; Rosemary Carmody (Vice Chair); Jon Dupre; & Sarah Everhart Skeels;

**Staff:** Bob Cooper, Executive Secretary



Clock graphic

**3:00 Call to Order and Acceptance of the Minutes, Tim Flynn Chair**

Chair calls the meeting to order at 3:07 PM  
Introductions of Commissioners and guests



voting check off graphic

**MOTION:** To accept the minutes of the 2 previous meeting as presented  
LW/AS passed unanimously

## Action Items:



medical graphic

**3:05 H 5127 Article 20 AN ARTICLE RELATING TO MEDICAID REFORM ACT OF 2008, Linda Ward, Chair Legislation Committee**

**Purpose/Goal:** To review, approve and/or modify the draft Legislative Impact Statement regarding the Medicaid Reform Budget Article

**Discussion:** On May 6<sup>th</sup>, the Executive Committee voted to oppose H 5127 Article 20 AN ARTICLE RELATING TO MEDICAID REFORM ACT OF 2008, as the Legislation Committee recommended. The Executive Committee also voted to direct the Legislation Committee to draft the legislative impact statement and submit the draft to the Executive Committee for its approval.

On May 13<sup>th</sup> the Legislation Committee recommended the following:

Projected state savings

\$3.9 mil.

To support (a) Nursing Facility Payment Rates - Eliminate Rate Increase, other Medicaid providers have had their rates frozen or reduced. All Medicaid providers should receive equal treatment, in the context of acuity based reimbursement rates.

\$5.2 mil.

Take no position on (b) Medicaid Hospital Payment Rates - Eliminate Adjustments;  
Take no position on (c) Integrated Care Initiative - Implementation Phase-in;

\$0.5 mil.

To oppose unless amended to increase funding during the transition period (d) BHDDH System Reforms - Implementation of Employment First and

\$0.4 mil.

Housing First Initiative - for the following reasons some may still need in-patient psychiatric safety net

\$4.2 mil.

To oppose unless amended to cover funding until ACA takes effect and individuals over 138% are automatically transferred to the Sherlock Plan (e) Costs Not Otherwise Matchable (CNOM) Federal Funding,

Take no position on (f) Medicaid Requirements and Opportunities under the U.S. Patient Protection and Affordable Care Act of 2010.

1-4 <sup>{add}</sup> [SECTION 1. Rhode Island Medicaid Reform Act of 2008.](#)

1-5 WHEREAS, the General Assembly enacted Chapter 12.4 of Title 42 entitled “The Rhode  
1-6 Island Medicaid Reform Act of 2008”; and

1-7 WHEREAS, a Joint Resolution is required pursuant to Rhode Island General Laws § 42-  
1-8 12.4-1, et seq.; and

1-9 WHEREAS, Rhode Island General Law § 42-12.4-7 provides that any change that  
1-10 requires the implementation of a rule or regulation or modification of a rule or regulation in  
1-11 existence prior to the implementation of the global consumer choice section 1115 demonstration  
1-12 (“the demonstration”) shall require prior approval of the general assembly; and further provides  
1-13 that any category II change or category III change as defined in the demonstration shall also  
1-14 require prior approval by the general assembly; and

1-15 WHEREAS, Rhode Island General Law § 42-7.2-5 provides that the Secretary of the  
1-16 Office of Health and Human Services is responsible for the “review and coordination of any  
1-17 Global Consumer Choice Compact Waiver requests and renewals as well as any initiatives and  
1-18 proposals requiring amendments to the Medicaid state plan or category II or III changes” as  
1-19 described in the demonstration, with “the potential to affect the scope, amount, or duration of  
1-20 publicly-funded health care services, provider payments or reimbursements, or access to or the  
1-21 availability of benefits and services as provided by Rhode Island general and public laws”; and

1-22 WHEREAS, in pursuit of a more cost-effective consumer choice system of care that is  
1-23 fiscally sound and sustainable, the secretary requests general assembly approval of the following  
1-24 proposals to amend the demonstration:

1-25 (a) Nursing Facility Payment Rates – Eliminate Rate Increase. The Medicaid agency  
1-26 proposes to eliminate the projected nursing facility rate increase and associated hospice rate  
1-27 increase that would otherwise become effective during state fiscal year 2014. A Category II  
1-28 change is required to implement this proposal under the terms and conditions of the Global  
1-29 Consumer Choice Compact Waiver. Further, this change may also require the adoption of new or  
1-30 amended rules, regulations and procedures.

2-1 (b) Medicaid Hospital Payment Rates – Eliminate Adjustments. The Medicaid single state  
2-2 agency proposes to reduce hospital payments by eliminating the projected inpatient and outpatient  
2-3 hospital rate increase for state fiscal year 2014. A Category II change is required to implement  
2-4 this proposal under the terms and conditions of the Global Consumer Choice Compact Waiver.  
2-5 Further, this change may also require the adoption of new or amended rules, regulations and  
2-6 procedures.

2-7 (c) Integrated Care Initiative – Implementation Phase-in. The Medicaid single state  
2-8 agency proposes to continue implementation of the Medicaid Integrated Care Initiative for Adults  
2-9 authorized under the Rhode Island Medicaid Reform Act of 2008, as amended in 2011. Moving  
2-10 the initiative forward may require Category II changes under the terms and conditions of the  
2-11 Global Consumer Choice Compact Waiver and the adoption of new or amended rules, regulations  
2-12 and procedures.

2-13 (d) BHDDH System Reforms – Implementation of Employment First and Housing First  
2-14 Initiative. As part of ongoing reforms promoting rehabilitation services that enhance a person’s  
2-15 dignity, self-worth and connection to the community, the Department of Behavioral Healthcare,  
2-16 Developmental Disabilities, and Hospitals proposes to change Medicaid financing to support the  
2-17 Employment First and Housing First initiatives. Both initiatives use reductions in Medicaid  
2-18 payments to provide incentives for service alternatives that optimize health and independence.  
2-19 The resulting changes in payment rates may require Category II changes under the terms and  
2-20 conditions of the Global Consumer Choice Compact Waiver and the adoption of new or amended  
2-21 rules, regulations and procedures.

2-22 (e) Costs Not Otherwise Matchable (CNOM) Federal Funding. Implementation of the  
2-23 U.S. Patient Protection and Affordable Care Act of 2010 will render it unnecessary for the  
2-24 Medicaid agency to continue to pursue federal CNOM funding for services to certain newly

2-25 [Medicaid eligible populations served by the Executive Office of Health and Human Services, the](#)  
 2-26 [Department of Human Services and the Department of Behavioral Healthcare, Developmental](#)  
 2-27 [Disabilities and Hospitals. Category II changes may be necessary under the terms and conditions](#)  
 2-28 [of the Global Consumer Choice Compact Waiver to facilitate the transition of the affected people](#)  
 2-29 [and services to full Medicaid coverage.](#)  
 2-30 [\(f\) Medicaid Requirements and Opportunities under the U.S. Patient Protection and](#)  
 2-31 [Affordable Care Act of 2010. The Medicaid agency proposes to pursue any requirements and/or](#)  
 2-32 [opportunities established under the U.S. Patient Protection and Affordable Care Act of 2010 that](#)  
 2-33 [may warrant a Category II or III change under the terms and conditions of the Global Consumer](#)  
 2-34 [Choice Compact Waiver. Any such actions the Medicaid agency takes shall not have an adverse](#)  
 3-1 [impact on beneficiaries or cause there to be an increase in expenditures beyond the amount](#)  
 3-2 [appropriated for state fiscal year 2014.](#)  
 3-3 [Now, therefore, be it](#)  
 3-4 [RESOLVED, that the general assembly hereby approves proposals \(a\) through \(f\) listed](#)  
 3-5 [above to amend the demonstration; and be it further](#)  
 3-6 [RESOLVED, that the secretary of the office of health and human services is authorized](#)  
 3-7 [to pursue and implement any waiver amendments, category II or category III changes, state plan](#)  
 3-8 [amendments and/or changes to the applicable department's rules, regulations and procedures](#)  
 3-9 [approved herein and as authorized by § 42-12.4-7.](#)  
 3-10 [SECTION 2. This article shall take effect upon passage.](#)<sup>{add}</sup>



MOTION: The Commission's positions on H 5127 Article 20 AN ARTICLE RELATING TO MEDICAID REFORM ACT OF 2008, are

- ✓ To oppose unless amended (d) BHDDH System Reforms - Implementation of Employment First and Housing First Initiative; and to increase funding during the transition period and to retain an in-patient psychiatric care safety net;
- ✓ To oppose unless amended (e) Costs Not Otherwise Matchable (CNOM) Federal Funding to cover funding until January 1, 2014 ACA takes effect and that individuals over 138% Federal Poverty Level are automatically transferred to the Sherlock Plan & aggressive outreach identify by October 1, 2013 & enrolled by Dec. 1, 2013 JD/LW passed unanimously

**4:00 Respond to Executive Order 13-05 Promotion of Diversity, Equal Opportunity and Minority Business Enterprises in Rhode Island, Tim Flynn, Chair**

Purpose/Goal: To decide how the Commission will respond to the Executive Order

Discussion: The Executive Order is focused on increasing employment and purchasing for racial minorities only. No mention of Habilitation Procurement Program, Disability Business Enterprises, Blind Vendors, or hiring of people with disabilities. Ironically this was issued while Craig Stenning (BHDDH), Ron Racine (Services for the Blind/Office of Rehabilitation Services) Christina Batastini (Governor's Health & Human Services Policy Analyst) and Bob Cooper were at the National Governor's Association's *A Better Bottom Line: Employing People with Disabilities* institute talking about inclusion of people with disabilities into MAINSTREAM workforce development and using government procurement to encourage government contractors to also hire people with disabilities.



 <small>voting check off graphic</small>	<p>MOTION: To send a letter to the Governor regarding Executive Order 13-05 and a request a meeting tied to the NGA Initiative CG/AS passed unanimously</p>
 <small>voting check off graphic</small>	<p>MOTION: To work with DHS/ORS &amp; BHDDH on a Governor's Executive Order Adopting An Independence and Employment Disability Policy AS/CG passed unanimously</p>
 <small>calendar graphic</small>	<p><b>4:55 Agenda and Scheduling the Next Meeting, Tim Flynn, Chair</b></p> <hr/> <p>Items to be placed on the next meeting's agenda:  Interview and select additional fellows for the fall 2013 semester. Meeting date will be selected in June.</p>
 <small>alarm clock graphic</small>	<p><b>5:00 Adjournment, Tim Flynn, Chair</b></p>
 <small>voting check off graphic</small>	<p>MOTION: To adjourn at 4:29 PM LW/RMcM passed unanimously</p>