

**IHSS Public Authority Advisory Board Meeting
October 15, 2019
MINUTES**

Members Present: Janie Whiteford; Beverly Lozoff; Dennis Schneider; Terri Possley (Ex-Officio); Lori Andersen; Cheryl Hewitt; Senon Hernandez (via teleconference)

Members Absent: Bob Stroughter

PA Staff Present: Mary Tinker, Leticia Sabadin

Guests Present: Mathew Lubinsky, Guest & Potential AB member; David Forderer, Guest & Potential AB member; Wayne Glusker, Assistant to Cheryl Hewitt & David Forderer; Sheri Burns, Executive Director, Silicon Valley Independent Living Center (SVILC)

Announcements & Public Comment:

1. Dennis Schneider announced the Abilities Expo in San Mateo is scheduled on October 25-27, 2019, 11am-5pm at the County Event Center.
2. Mary Tinker announced the PA Annual Report will be presented to the CSFC October 16, 2019 at 2pm.

Approval of Minutes: Motion by Janie Whiteford to approve September 17, 2019 meeting minutes as written, seconded by Cheryl Hewitt, vote was unanimous.

SVILC (Silicon Valley Independent Living Center) Presentation: Sheri Burns, SVILC Executive Director provided a brief presentation on Silicon Valley Independent Living Center (SVILC).

SVILC is a non-profit, non-residential organization which serves all people with all types of disabilities, including seniors with disabling conditions, who live in Santa Clara County. SVILC provides residents with support tools and resources needed to live interdependently, and advocates for policies that ensure equal access and opportunity for all. SVILC is a peer-driven agency run by and for people with disabilities. As one of 28 independent living centers across the State of California, they are committed to the principles of self-advocacy, personal empowerment and independent living.

SVILC was founded in 1976 by a small group of people with disabilities as an Independent Living Center (ILC) to serve the needs of Santa Clara County residents with disabilities. Independent Living is both a philosophy and a goal that *people with disabilities should have the same civil rights, options, and control over their lives as people without disabilities*. In 1997, SVILC expanded its services to southern Santa Clara County by opening a branch office in Gilroy. SVILC is one of 28 peer-driven, non-residential Independent Living Centers in California, and over 400 across the nation. SVILC is a private non-profit organization where over 70% of their highly-skilled staff and board members are persons with disabilities who have an intimate understanding of disability issues.

Centers for Independent Living

The birth of the independent living movement has been attributed to a group of students at U.C. Berkeley with disabilities. In 1962, the first severely disabled student, Ed Roberts, was admitted to U.C. Berkeley. By 1969, there were twelve severely disabled students. The medical surroundings were familiar to the new tenants, who had spent countless days and nights in custodial institutions. In 1972, the first **Center for Independent Living** was founded by disability activists, led by Ed Roberts, in Berkeley, California. These Centers were created to offer peer support and role modeling, and are run and controlled by persons with disabilities. According to the Independent Living (IL) approach, the example of a peer, somebody who has been in a similar situation, can be more powerful than a non-disabled professional's interventions in analyzing one's situation, in assuming responsibility for one's life and in developing coping strategies.

According to the IL Movement, with peer support, everyone - including persons with extensive developmental disabilities - can learn to take more initiative and control over their lives. For example, peer support is used in Independent Living Skills training where people living with their families or in institutions learn how to run their everyday lives in preparation for living by themselves.

The results of some of the efforts of these disability advocates, and those who followed, include:

- The Rehabilitation Act of 1973, which first authorized independent living centers and programs, was signed into law.
- Many advocates consider Section 504 of the Rehabilitation Act of 1973 the nucleus of all ensuing progress in obtaining disability rights.
- The Americans with Disabilities Act was signed into law.

Information + Referral

SVILC understands that their services do not address the needs of everyone, and therefore we will do their best to provide accurate and complete information and a referral to another organization that may be able to better serve you. This service is available to persons with a disability, their family, caregiver, or any other individual, organization, or the general public, with a request for information and referral.

Examples include information and referral on the following:

- Products
- Services
- Equipment
- Training
- Legislation
- civil rights
- referrals to other agencies
- and more

SVILC's I/R Specialist and/or experienced staff will respond to your request, provide you with additional resources, or help you research your question to provide you the answers you seek!

Programs & Services

- Community Transition Program
- Stepping Stones Program
- Peer Support
- Assistive Technology & Device Lending Library
- Personal Care Attendant Services

- Youth Leadership
- Housing Search Assistance
- Independent Living Skills Training

In addition they play a key part with the Second Harvest Food Bank and they assist and have services for Emergency Food & Rental assistance (generators).

Sheri mentioned that they also do benefits counselling, legal assistance and they are participating in the new CAL Fresh Program.

Quick Match Registry (something like Private Pay)

Program called MATCH Registry to help and assist SVILC clients in obtaining a care provider. This service is for SVILC clients only.

SVILC will assist the client with the interview process, especially when it is the first time for clients.

SVILC will also assist with:

- screening
- reference checks
- DOJ background (not mandatory)
- IHSS enrolment
- Recruitment of care providers with Nursing programs and through INDEED and Craigslist.

The client is the employer, they negotiate the hourly rate and pay the care provider.

Currently there are 22 full time, fully operational providers, and about 4-5 part-time providers on the Quick Match Registry.

Community Transition Program

SVILC's Community Transition Program services provide comprehensive care coordination, and intensive case management and monitoring to facilitate tailored transition services for persons with disabilities into a community living setting.

Community Transition Program staff are highly skilled professionals with expertise in delivering holistic, peer based, and wrap around services:

- *Independent Living Health Plan Training* for health plan professionals;
- *Needs Assessment* to determine service plan, if applicable;
- *Care Transition Services and Community Living Services* for those Long Term Care (LTC) facility residents choosing to transition;
- *Options Counseling and Community Living Services* for those at risk of institutionalization and/or frequent users of high cost urgent care and short term hospitalization benefits for lack of adequate Long Term Services and Supports (LTSS);
- And, crucial ancillary Core Independent Living Services, including; Peer Support (peer led Stepping Stones Program), Personal Care Attendant (PCA) Management, Assistive Technology, Independent Living Skills Training, Housing, and Self-Advocacy.

They offer workshops in 4 San Jose area Senior Centers:

- Berryessa Community Center
- Camden Community Center
- Alviso Community Center
- Vista/Santa Clara Blind Center

Sheri also shared that she is an advocate and quite involved with systems change/advocacy. She is the Region 9 representative who addressed Federal bills as well as local bills. A need not being met is the fact that we need more care providers!

CAPA Report: CAPA met in Sacramento September 19th.

EVV/ETS: CDSS is encouraging providers to access the Electronic Services Portal and Electronic Timesheets as a method of finding information and training on ETS. Santa Clara is scheduled to be part of waive 3 which is scheduled for May/June 2020 implementation.

However, due to a huge rush by providers to submit their electronic timesheets statewide and consumers approving timesheets the system went down. It was not able to handle the influx of users and CDSS sent emails and posted flyers requesting patience and waiting a couple days to submit timesheets.

CAPA asked CDSS: How does the recent EVV guidance from the feds affect the state's implementation plans? This guidance indicates that (1) in-home caregivers are not subject to EVV requirements under the federal law, but that states may impose additional restrictions and (2) web-based timesheet systems which collect time and location of service from providers and authenticated by the beneficiary does not, alone, provide the information necessary for EVV, meaning that California's process for EVV may not be federally compliant. Is the state issuing any type of notice or information to IHSS consumers or providers in response to the federal guidance?

CDSS Responded: DHCS and CDSS are in process of getting clarification from CMS. Once clarification is obtained the state will communicate to stakeholders on any EVV changes. The EVV pilot is moving forward in Los Angeles, and CDSS is meeting with Wave 1 counties for a kickoff in September. CDSS is working on translations of webcasts now. Lancaster is now 82% enrolled in the portal. EVV is required for all Medicaid-funded personal care services by January 1, 2020 and for home health services by January 1, 2023, unless the state receives a CMS authorized "good faith effort (GFE)" exemption. California will submit a GFE request prior to November

CAPA Staff Training Day: Was held September 18th in Yolo County with a

Public Authority Admin Funding: The CAPA Board unanimously approved a proposal for the FY 19/20 allocation of state funds for PA admin. The proposal was submitted to CDSS and resulted in negotiating with them over four weeks. With the issues resolved, we have reached an agreement with CDSS on the FY 19/20 PA admin allocations. The CFL should be released soon.

CAPA Legislative Report: Below, please find information on all of the bills we're currently tracking, in addition to synopses and recommended positions on same.

AB 50 (Kalra): Medi-Cal: Assisted Living Waiver Program.

Would require the State Department of Health Care Services to submit to the federal Centers for Medicare and Medicaid Services a request for amendment of the Assisted Living Waiver program with specified amendments. The bill would require, as part of the amendments, the department to

increase the number of participants in the program from the currently authorized 5,744 participants to 18,500, to be phased in, as specified. The bill would require the department to increase its provider reimbursement tiers to compensate for mandatory minimum wage increases, as specified. ***This bill failed to meet deadline pursuant to Rule 61(a)(12) and accordingly is a 2 year bill. Recommended Position: Support.***

AB 196 (Gonzalez): Paid Family Leave.

Would revise the formula for determining benefits available pursuant to the family temporary disability insurance program, for periods of disability commencing after January 1, 2020, by redefining the weekly benefit amount to be equal to 100% of the wages paid to an individual for employment by employers during the quarter of the individual's disability base period in which these wages were highest, divided by 13, but not exceeding the maximum workers' compensation temporary disability indemnity weekly benefit amount established by the Department of Industrial Relations. ***This bill failed deadline pursuant to Rule 61(a)(10), and accordingly is a two-year bill. Recommended Position: Watch.***

AB 314 (Bonta): Public employment: labor relations: release time.

Current law, including the Meyers-Milias-Brown Act, the Ralph C. Dills Act, the Trial Court Employment Protection and Governance Act, the Trial Court Interpreter Employment and Labor Relations Act, Judicial Council Employer-Employee Relations Act, and the Los Angeles County Metropolitan Transportation Authority Transit Employer-Employee Relations Act, as well as provisions commonly referred to as the Educational Employment Relations Act and the Higher Education Employer-Employee Relations Act, regulates the labor relations of the state, the courts, and specified local public agencies and their employees. These acts generally require the public entities in this context to grant employee representatives of recognized employee organizations reasonable time off without loss of compensation or benefits for certain purposes in connection with labor relations, commonly referred to as release time. This bill would prescribe requirements relating to release time that would apply to all of the public employers and employees subject to the acts described above and would generally repeal the provisions relating to release time in those acts. ***This bill is currently on the Senate Floor Third Reading File. Recommended Position: Watch.***

AB 315 (Garcia): Local Government: lobbying associations: expenditure of public funds.

Current law authorizes the legislative body of a local agency to attend the legislature and any committees and to present information regarding legislation that the legislative body deems to be beneficial or detrimental to the local agency. Current law also allows the legislative body of a local agency to enter into an association for these purposes and specifies that the cost and expense incident to the legislative body's membership in the association and the activities of the association are proper charges against the local agencies comprising the association. This bill, with respect to moneys paid to or otherwise received by an association, would prohibit an association of local agencies from expending these moneys for any purpose other than the above described activities and educational activities. ***This bill failed deadline pursuant to Rule 61 (a)(11), and accordingly is a two-year bill. Recommended Position: Oppose.***

AB 414 (Bonta): Healthcare coverage: minimum essential coverage.

Current federal law, the Patient Protection and Affordable Care Act (PPACA), enacts various healthcare coverage market reforms as of January 1, 2014. PPACA generally requires individuals, and

any dependents of the individual, to maintain minimum essential coverage, as defined, and, if an individual fails to maintain minimum essential coverage, PPACA imposes on the individual taxpayer a penalty. This provision is referred to as the individual mandate. This bill would require a California resident to ensure that the resident and the resident's dependents are covered under minimum essential coverage for each month beginning after 2019. The bill would impose a penalty for the failure to maintain minimum essential coverage. ***This bill is currently on the Assembly Floor awaiting a vote on Concurrence in Senate Amendments. Recommended Position: Watch.***

AB 426 (Maienschein): In-Home Supportive Services program.

Existing law provides for the county-administered In-Home Supportive Services (IHSS) program, under which qualified aged, blind, and disabled persons are provided with services to permit them to remain in their own homes. Under existing law, the Medi-Cal program provides services similar to those offered through the IHSS program, to eligible individuals, with these services known as personal care option services. Existing law requires an applicant for, or recipient of, either of these in-home supportive services, as a condition of receiving these services, to obtain a certification from a licensed health care professional, as specified, declaring that the applicant or recipient is unable to perform some activities of daily living independently, and that without services to assist the applicant or recipient with activities of daily living, the applicant or recipient is at risk of placement in out-of-home care. ***This bill passed out of both houses and was enrolled to the Governor on 9/9. Recommended Position: Watch.***

AB 477 (Cervantes): Emergency preparedness: vulnerable populations.

Current law authorizes cities, cities and counties, and counties to create disaster councils, by ordinance, to develop plans for meeting any condition constituting a local emergency or state of emergency, including, but not limited to, earthquakes, natural or manmade disasters specific to that jurisdiction, or state of war emergency. This bill would require cities, cities and counties, and counties to include representatives from the access and functional needs population, as defined, in the next regular update to their emergency plan, as specified. ***This bill was signed into law by the Governor on 9/4/2019 as Chapter 218, Statutes of 2019. Recommended Position: Support.***

AB 567 (Calderon): Long-term care insurance.

Would establish the Long Term Care Insurance Task Force in the Department of Insurance, chaired by the Insurance Commissioner or the commissioner's designee, and composed of specified stakeholders and representatives of government agencies to examine the components necessary to design and implement a statewide long-term care insurance program. The bill would require the task force to recommend options for establishing this program and to comment on their respective degrees of feasibility in a report submitted to the commissioner, the Governor, and the Legislature by July 1, 2021. ***This bill passed out of both houses and was enrolled to the Governor on 9/9/2019. Recommended Position: Watch.***

AB 911 (Rodriguez) 911 services: elder adults and persons with disabilities.

Would require the Office of Emergency Services, in consultation with relevant experts and stakeholders, to develop a plan and timeline of target dates for the testing, implementation, and operation of a statewide system, consistent with the requirements of this bill, that would enable all Californians, including older adults, individuals with disabilities, and other at-risk persons, to voluntarily provide vital health and safety information to be made available to all first responders in

an emergency if a “911” call is placed. The bill would make information submitted through the statewide system confidential and not a public record. ***This bill passed out of both houses and was enrolled to the Governor on 9/9/2019. Recommended Position: Support.***

AB 1042 (Wood): Medi-Cal: beneficiary maintenance needs: home upkeep allowances: transitional needs funds.

Would establish eligibility and other requirements for providing the home upkeep allowance or a transitional needs fund to Medi-Cal patients residing in a long-term care facility, as specified. The bill would prescribe both general and specific requirements for both facility residents who intend to leave the facility and return to an existing home, who would receive the home upkeep allowance, and for residents who do not have a home but intend to leave the facility and establish a new home, who could establish a transitional needs fund for the purpose of meeting the transitional costs of establishing a home. ***This bill failed to meet deadline pursuant to Rule 61 (a)(12) and accordingly is a 2 year bill. Recommended Position: Support.***

AB 1088 (Wood): Medi-Cal: eligibility.

Would provide that an individual who would otherwise be eligible for Medi-Cal benefits, but for the state’s contribution to their Medicare premium, would be eligible for Medi-Cal without a share of cost if they otherwise meet eligibility requirements. The bill would authorize the State Department of Health Care Services to implement this provision by provider bulletins or similar instructions until regulations are adopted. The bill would require the department to adopt regulations by July 1, 2021, and to provide a status report to the Legislature on a semiannual basis until regulations have been adopted.

This bill passed out of both houses and was enrolled to the Governor on 9/9/2019. Recommended Position: Support.

AB 1107 (Chu): Workers Compensation.

Current law requires, when payment of compensation has been unreasonably delayed or refused, either prior to or subsequent to the issuance of an award, the amount of the payment unreasonably delayed or refused to be increased up to 25% or up to \$10,000, whichever is less, except for unreasonable delay in the provision of medical treatment for periods of time necessary to complete the utilization review process. Current law provides that a determination by the appeals board or a final determination of the administrative director pursuant to independent medical review that medical treatment is appropriate is not conclusive evidence that medical treatment was unreasonably delayed or denied for purposes of imposing those penalties. This bill would exclude a final determination of the administrative director pursuant to independent medical review from the latter provision regarding conclusive evidence that medical treatment was unreasonably delayed or denied. ***This bill failed to meet deadline pursuant to Rule 61 (a)(11), and accordingly is a two-year bill. Recommended Position: Watch.***

AB 1287 (Nazarian): Universal assessments: No Wrong Door system.

Current law, including, among others, the Mello-Granlund Older Californians Act, provides various programs to assist older adults and people with disabilities. These programs include the Aging and Disability Resource Connection program established to provide information to consumers and their

families on available long-term services and supports (LTSS) programs and to assist older adults, caregivers, and persons with disabilities in accessing LTSS programs at the local level. This bill would require the California Department of Aging, in partnership with other specified departments and in consultation with stakeholders, to develop a plan and strategy for a phased statewide implementation of the No Wrong Door system, as described, on or before July 1, 2020. ***This bill passed out of both houses and was enrolled to the Governor on 9/9/2019. Recommended Position: Watch.***

AB 1382 (Aguiar-Curry): Master Plan for an Aging California.

Would require the state to adopt a Master Plan for Aging, emphasizing workforce priorities. The bill would require the Master Plan for Aging to prioritize specified issues related to preparing and supporting the state's paid paraprofessionals and professionals, as well as unpaid family caregivers. These issues would include, but not be limited to, (1) addressing the need for a well-trained and culturally competent paid paraprofessional and professional health care and long-term care workforce, and (2) developing recommendations regarding the need for high-quality, affordable, and accessible respite services throughout the state for unpaid family caregivers.. ***This bill passed out of both houses and was enrolled to the Governor on 9/9/2019. Recommended Position: Watch.***

AB 1434 (Kalra): Public Social Services: SSI/SSP.

Current law provides for the State Supplementary Program for the Aged, Blind, and Disabled (SSP), which required the State Department of Social Services to contract with the United States Secretary of Health and Human Services to make payments to SSP recipients to supplement Supplemental Security Income (SSI) payments made available pursuant to the federal Social Security Act. This bill would reinstate the cost-of-living adjustment beginning January 1 of the 2020 calendar year. The bill would also require a maximum aid payment provided to an individual or a married couple that does not equal or exceed 100% of the federal poverty level. ***This bill was held under submission on the Assembly Appropriations Committee Suspense File. Recommended Position: Support.***

AB 1574 (Mullin): Political Reform Act of 1974: lobbying expenditures.

The Political Reform Act of 1974 requires lobbyists employed by a lobbyist employer or a lobbying firm to provide a periodic report of the lobbyist's activity expenses and contributions to the employer or firm within two weeks following the end of each quarter. The Act requires lobbying firms, lobbyist employers, and persons who make payments to influence legislative or administrative action of \$5,000 or more in value in any calendar quarter to file with the Secretary of State, during the month after the end of each calendar quarter of a biennial legislative session, reports regarding lobbying expenditures made during the calendar quarter. This bill would, beginning on January 1, 2021, instead require those reports to be filed on a monthly basis. ***This bill is currently in the possession of the Assembly Appropriations Committee and is a 2 year bill (although it has not yet been recorded under which rule this occurred.) Recommended Position: Watch.***

SB 167 (Dodd): Electrical Corporations: wildfire mitigation plans.

Under existing law, the Public Utilities Commission has regulatory authority over public utilities, including electrical corporations and gas corporations. Existing law authorizes the commission to establish rules for all public utilities, subject to control by the Legislature. Existing law requires each electrical corporation to construct, maintain, and operate its electrical lines and equipment in a manner that will minimize the risk of catastrophic wildfire posed by those electrical lines and equipment. Existing law requires the commission, by January 1, 2020, to establish within itself the

Wildfire Safety Division. Existing law requires each electrical corporation to annually prepare and submit a wildfire mitigation plan to the division for review and approval. Existing law requires those wildfire mitigation plans to include specified information, including protocols for disabling reclosers and deenergizing portions of the electrical distribution system that consider the associated impacts on public safety, as well as protocols related to mitigating the public safety impacts of those protocols, including impacts on critical first responders and on health and communication infrastructure. Existing law requires the commission to designate a baseline quantity of electricity and gas necessary for a significant portion of the reasonable energy needs of the average residential customer and requires the commission to establish a standard limited allowance in addition to the baseline quantity of gas and electricity for residential customers dependent on life-support equipment, as specified, which is referred to as a medical baseline allowance.

This bill would require each electrical corporation, as part of those protocols, to additionally include protocols related to mitigating the public safety impacts of disabling reclosers and deenergizing portions of the electrical distribution system that consider the impacts on customers who are receiving medical baseline allowances. The bill would authorize electrical corporations to deploy backup electrical resources or provide financial assistance for backup electrical resources to those customers receiving medical baseline allowances and who meet specified requirements. ***This bill passed out of both houses and was enrolled to the Governor on 9/6/2019. Recommended Position: Support.***

SB 214 (Dodd): Medi-Cal: California Community Transitions program.

Would require the State Department of Health Care Services to implement and administer the California Community Transitions (CCT) program, as authorized under federal law and pursuant to the terms of the Money Follows the Person Rebalancing Demonstration, to help an eligible Medi-Cal beneficiary move to a qualified residence, as defined, after residing in an institutional health facility for a period of 90 days or longer. The bill would require CCT program services to be provided by a lead organization, as defined, which would coordinate and ensure the delivery of all services necessary to implement the program. ***This bill is currently in the possession of the Assembly Appropriations Committee, where hearing was cancelled by the author. Recommended Position: Support.***

SB 228 (Jackson): Master Plan on Aging.

Would require the Governor to appoint a Master Plan Director and establish an Aging Task Force, consisting of 13 members, with the President pro Tempore of the Senate and the Speaker of the Assembly each appointing 2 members and the Governor appointing 9 members to the task force. The bill would require the director, with the assistance of the task force, to work with representatives from impacted state departments, stakeholders, and other agencies to identify the policies and priorities that need to be implemented in California to prepare for the aging of its population. ***This bill is currently on the Senate Floor, awaiting a vote of concurrence in Assembly Amendments. Recommended Position: Support.***

SB 280 (Jackson) Older Adults and Persons with Disabilities: fall prevention.

The Mello-Granlund Older Californians Act establishes the California Department of Aging, and sets forth its duties and powers, including, among other things, entering into a contract for the development of information and materials to educate Californians on the concept of “aging in place” and the benefits of home modification. Current law also establishes the Senior Housing Information and Support Center within the department for the purpose of providing information and training

relating to available innovative resources and senior services, and housing options and home modification alternatives designed to support independent living or living with family. This bill would repeal those provisions relating to the department's provision of information on housing and home modifications for seniors. ***This bill is currently on the Senate Floor, awaiting a vote of concurrence in Assembly Amendments. Recommended Position: Support.***

SB 512 (Pan) Long Term Supports and Services

Would establish the California Long-Term Services and Supports Benefits Board (LTSS Board), to be composed of 9 specified members, including, among others, the Treasurer as chair, the Secretary of California Health and Human Services as vice chair, and 3 members to be appointed by the Governor. The bill would require the LTSS Board to manage and invest revenue deposited in the California Long-Term Services and Supports Benefits Trust Fund (LTSS Trust), which the bill would create in the State Treasury, to, upon appropriation, finance long-term services and supports for eligible individuals. The bill would also create, until January 1, 2025, the Long-Term Services and Supports Advisory Committee for the purpose of providing ongoing advice and recommendations to the LTSS Board. ***This bill failed to meet deadline pursuant to Rule 61 (a)(12), and accordingly is a 2-year bill. Recommended Position: Watch.***

SB 611 (Caballero): Housing: Elderly Individuals with Disabilities

Would establish the Master Plan for Aging Housing Task Force, chaired by the director or their designee, and composed of specified stakeholders and representatives of government agencies to, among other things, identify policy strategies that will help increase the supply of affordable housing for older adults and reduce barriers to providing health care and social services to older adults in affordable housing, and make recommendations to the Legislature. ***This bill passed out of both houses and was enrolled to the Governor on 9/6/2019.. Recommended Position: Watch.***

SB 661 (Hurtado): Long Term Care

Current law provides various regulatory structures under which long-term care may be provided to older individuals and individuals with disabilities, including within licensed nursing facilities, residential care facilities for the elderly, and home- and community-based services. This bill would state the intent of the Legislature to enact legislation to address the growing need for long-term care for seniors and individuals with disabilities in California, and would make related findings and declarations. ***This bill is currently in the possession of Senate Rules Committee, awaiting referral. Recommended Position: Watch.***

PROGRAMS REPORT

Benefits Administration: There were **11,969** IPs enrolled in the Valley Health Plan with **4,554** of those in the Classic Plan and **7,415** in the Preferred Plan in September. There were **12,659** IPs enrolled in the Dental/Vision plans and **584** Smart Pass VTA Cards issued.

Enrollment:

Number of IPs enrolled: **497**

Number of IPs partially done: **481**

Fingerprints: Failed: **8**

Estimated number of individuals attending group enrollment sessions was **50 to 85** per session. Group sessions are generally held on Fridays with approximately **555** attending in September.

Registry Services: There are **411** active IPs on the registry and **1,281** active consumers.

The registry:

- Completed **60** new consumer intakes and reactivated **72** consumers
- Attained **59** matches
- Provided **596** new interventions

Care Coaching: The Registry received **24** referrals for Care Coaching in the month of September.

- There were **39** in-home visits made.
- Total active consumers **74**
- Total inactive consumers **254**

Urgent Care Registry There were **33** hours of urgent care services authorized in September.

Registry Introductory Training (RIT): There was **1** RIT sessions held in September.

- Conducted **12** interviews
- Called **56** references
- Completed **40** reference checks
- Added **7** new IPs to the registry

RIT sessions are recruitment training workshops held for individuals who wish to join the registry. This is one of the screening requirements for being added to the registry. Next steps required include checking references, in-person interview with staff, and completion of mandatory enrollment process which includes DOJ criminal background check. Because of the amount of work required to get someone added to the registry there are generally people being added on a continuous basis.

Public Authority Phone Calls: The Public Authority handled a total of **4,537** phone calls during September. Breakdown of the calls:

- **Registry** **2,448**
- **Enrollment** **553**
- **General** **126**
- **Benefits** **1,215**

IP Trainings Provided: There were **17** training classes held in September. A total of 303 class registrations were completed. The Fall Training Semester began September 4th and the training schedule is posted on the Public Authority website.

Classes provided were:

Month	Class	Lang	# of IPs trained
SEPTEMBER	CPR	English	14
	Personal Care	English	23
	Mental Health	English	24
	1st Aid	English	15
	Personal Care	Vietnamese	19

	CPR	English	21
	Understanding Diabetes	Vietnamese	10
	CPR	English	20
	Safety & Infection	Vietnamese	15
	Mental Health	Vietnamese	12
	Mental Health	English	21
	Understanding Diabetes	English	6
	Last Phase	English	22
	Safe Lifting	English	14
	Skilled Care Provider	English	28
	CPR	Spanish	9
	Personal Care	Mandarin	16
Totals			289

Over Time Training: There was **8** IP who was provided training/counseling on overtime issues and how to properly complete their timesheet.

Timesheet Training Video on PA Website: The Public Authority developed a great new video that instructs providers on how to complete their timesheets and prevent OT issues. It is quite thorough and easy to understand. The video was viewed **5,792** times during September. The video can be viewed at: <http://www.pascc.org/services/TimeSheetVid.html>. This will be removed from the website when the transition to electronic timesheets begins in Santa Clara County next May.

Staffing: The Public Authority is recruiting to hire a Care Coordinator to replace Tu Ha whose last day was October 4th. We have a new hire scheduled to start on November 1st.

Electronic Time Sheets: Santa Clara County has **37.6%** of IPs opted for electronic timesheets. These help to simplify and ensure timesheets don't have errors and are processed quicker. And direct deposit has increased participation rate to **45.4 %** ensuring IPs get paid much quicker. PA staff is encouraging new IPs and others they talk with to enroll in ETS and DD in order to prevent delays in getting paid. It is included as part of the enrollment orientation as well. CDSS now publishes a monthly Excel report of statistics that includes county data and statewide comparisons: <http://www.cdss.ca.gov/inforesources/IHSS/Program-Data>

Sick Leave Update: A total of **24,658** active IPs have accrued 8 hours of sick leave, **798 (3.2%)** of them have claimed some hours, **662** have claimed all 8 hours so far this fiscal year.

California IHSS Consumer Alliance Report (CICA): Janie Whiteford reminded everyone about the monthly CICA call that is scheduled the 3rd Wednesday of the month. Please try to attend via teleconference.

Janie also thanked Mary for forwarding all the CICA emails and emails pertaining to upcoming events and calls. Janie asked if we could put on next month's agenda the topic of hosting a Centralized Regional Meeting. Janie would like feedback and support from the AB members. Janie would take the lead on this and would like to see this happen next year in the summer or fall of 2020. We will discuss in further detail next month.

Report from Social Services Agency: Terri Possley announced that IHSS recently went on strike, described as “rolling strikes”. Its been a bit hectic and in some cases times with no phones and no home visits being conducted. The county has been in negotiations since April. There were 6 managers that did not cross the picket line. There are more strikes scheduled for November 7th & 8th.

They are getting acquainted with their new office space. Getting used to new cubicles and where things are. A lot of unpacking and getting organized. They have noticed that they need closer parking spaces for handicap/ADA parking. They also experienced their CMIPS printers not working. IHSS also had to deal with 300+ consumers who had no power due to the recent PG&E mandatory power outages.

Terri also announced the CSFSC Meeting on Wednesday, October 16th at 2pm at 70 West Hedding. The PA Annual Report and Recommendations will be presented as well as the IHSS Report. All are encouraged to attend this meeting.

Terri also reminded everyone that Jim Ramoni is officially retiring and his last day is November 22nd.

Next Meeting: The next meeting of the Advisory Board is **Tuesday, November 19, 2019 from 12:00 – 1:30pm** at the Santa Clara Family Health Plan (SCFHP) Office on 6201 San Ignacio Avenue, San Jose, CA. 95119