

MFP Stakeholders Committee Meeting Minutes

January 14, 2010

Time: 1pm-4pm CST

Location: Pioneer Room, State Capitol
Bismarck, North Dakota

- Presentation of in-home monitoring system being used by the Good Samaritan Society. Jim Droppers, Regional Director, North Dakota, Good Samaritan Society, 4800 W. 57th St., Sioux Falls SD
 - Review of the new policy guidance form CMS on meeting transition benchmarks
 - Discussion and Decision Making on transition benchmarks for 2010,2011, and 2012
 - Review of consumer stakeholder meetings scheduled around the State
 - Discussion of new strategies for identification of MFP eligible participants
 - Housing/Administrative Positions being discussed by CMS
 - Transition Review process
 - MDS 3.0 section Q changes
1. The meeting was called to order with a welcome and committee member introductions.
 2. A review of the agenda was completed
- A presentation outlining the in-home monitoring system being used by the Good Samaritan Society was provided by Jim Droppers, Kerry Conlin, Janet Tiemeyer, and Stu Clark of the Good Samaritan Society. The presentation included a review of the WEIIAWARE services developed in a partnership between Volunteers of America and the Good Samaritan Society to support individuals living in their own home. This goal is to assist in addressing both wellness and safety issues that will increase overall quality of life. It is intended to reduce hospitalization costs, proactively identify health changes/needs, and other ongoing support needs. The presentation discussed that meeting the challenges of daily living does not have to mean leaving your own home.

Larimore ND will be the first location in ND where this service will be offered by the GSS. This Home and Community Based Services focus will be implemented in conjunction with their Home Health Agency.

The technology offered through this system includes sensors that can pick-up disabling falls, monitors sleeping patterns, motion, heat and humidity changes, and entry/exits from the home. The sensors are wireless and communicate data to a central monitoring location. Information is monitored by professionals on a daily basis. Individual phone and/or home visits are initiated as information from sensors indicate. In addition a Life Alert system is also available as is telehealth medical monitoring systems.

3. CMS policy guidance on meeting transition benchmarks was provided to members of the committee for review and discussion.
4. The committee discussed the current transition benchmarks for 2010, 2011, and 2012 as they relate to the new policy guidance. The committee recommended that the 2010, 2011, and 2012 transitions should changes as indicated below:

Grant Year	Aged	PD	MR/DD	Other	Totals
2008	10 (1)	4 (1)	5 (3)	1 (0)	20 (5)
2009	11 (4)	13 (6)	8 (4)	1 (0)	33 (14)
2010	11 (6)	13 (6)	8 (8)	1 (0)	33 (20)
2011	10 (6)	4 (6)	8 (8)	1 (1)	24 (21)
2012	0 (6)	0 (6)	0 (8)	1 (1)	0 (21)
Totals	42 (23)	34 (25)	30 (31)	4 (2)	110 (81)
New Totals					

5. The committee was made aware that consumer stakeholder meetings scheduled around the State as per the committee's recommendation. The first meeting is set for 1/21/10 from 11am to 1pm at the Dakota CIL in Bismarck. The second meeting is on 2/3/10 at Independence Inc in Minot from 11am to 1pm. 2/18/10 from 2pm to 4pm at the Freedom CIL in Fargo, and on April 6 from 1-3pm at NDAD, 2660 S. Col. Rd in Grand Forks
6. The committee was made aware that CMS has suggested that ND consider new strategies for identification of MFP eligible participates. The MDS letters now being used at this time have tended to ID individuals that have discharged or have died as the result of the information being 4-6 old when it is sent out to the Transition Coordinators and Nursing Facilities. The committee discussed more frequent contact with NF Social Services staff, possible visits with residents councils,

and review of options with the NF Transition Planning Committee that will meet on 2/2/10.

7. The new CMS policy on payment for administrative funding was provided to the committee for review. Some of the positions that are being considered include Housing/Administrative positions and quality monitoring. Money for marketing, training, and travel is also available and will be pursued.
8. The MDS 3.0 section Q changes and upcoming training was discussed with the committee. It is noted that the MFP Project Directors are expected to attend the training CMS is sponsoring in April 2010. It is noted that there has been a delay in the implementation of the ADRC grant so staff from the ADRC office will not be attending. The MDS changes will affect MFP Operational Protocol as it is written and will need to be amended.
9. The Committee indicated that due to the amount of working needing to be completed that a meeting should be scheduled for March 2010. A new meeting date will be set and sent out to committee members.