

Direct Support Professionals (DSP) Advisory Committee Meeting

November 18, 2024

2:00 – 3:00 pm

Tina Lanier Barrett, MA, LPA, HSP-PA

Division of Mental Health, Developmental Disabilities, and
Substance Use Services

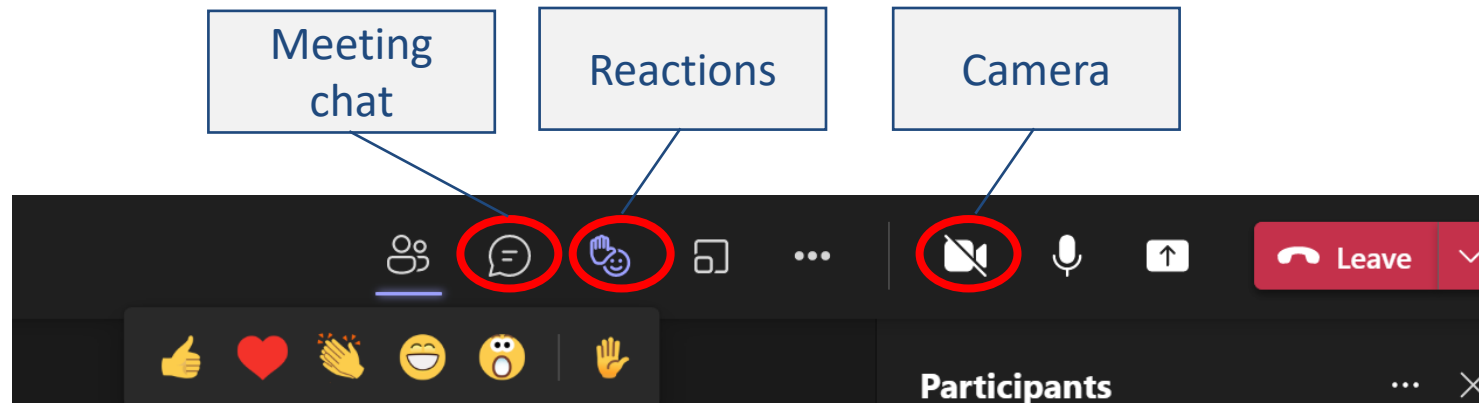
Agenda

- Housekeeping and Community Updates
- Initiative Updates:
 - DSP Recruitment and Retention Grants
 - DSP Engagement

As a reminder, this meeting includes a diverse group of stakeholders: DSPs, providers, plans (Tailored Plans, Standard Plans), community partners, consumer and family members, officials from related state agencies/DHHS divisions and DMH/DD/SUS officials.

Housekeeping

We encourage those who are able to turn on cameras, use reactions in Teams to share opinions on topics discussed, and share questions in the chat.



Guidelines for Engagement

DMH/DD/SUS (“the Division”) is committed to transparency in our work and creating shared spaces to engage in constructive dialogue.

We acknowledge that these topics may be difficult, based on personal experiences and identities, and we honor your willingness to share valuable insight.

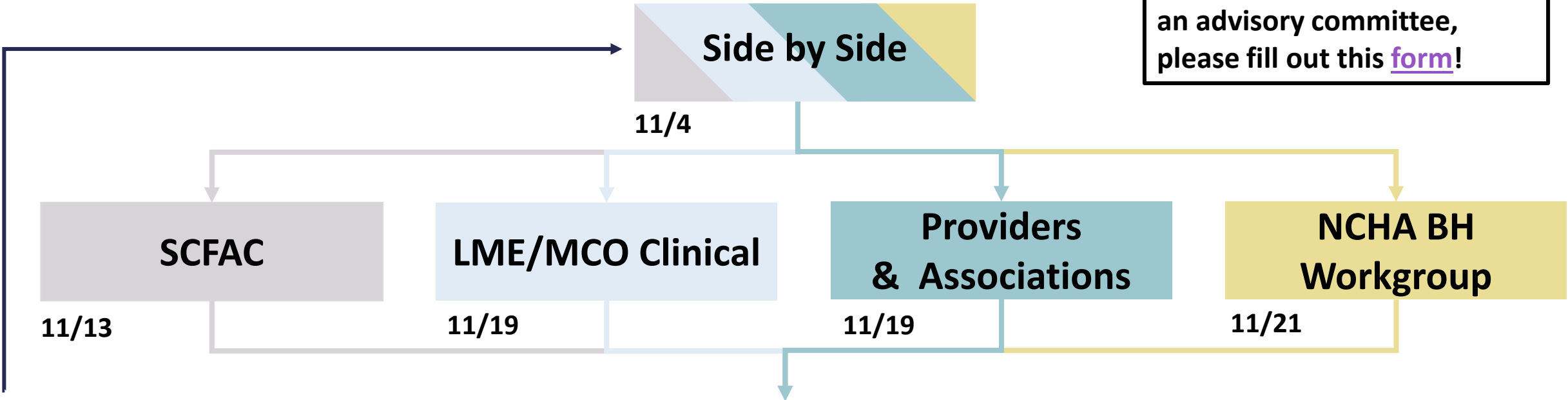
- If you have a question, wish to express an idea, or share a concern, please use the raise hand feature or the chat function.
- We ask that you are mindful of time to ensure as many members as possible have a chance to provide input and share their thoughts.
- We may interrupt dialogue to keep the space constructive. One of our staff members will connect you with our DMH/DD/SUS team for additional conversation offline.

DMH/DD/SUS' Community Updates

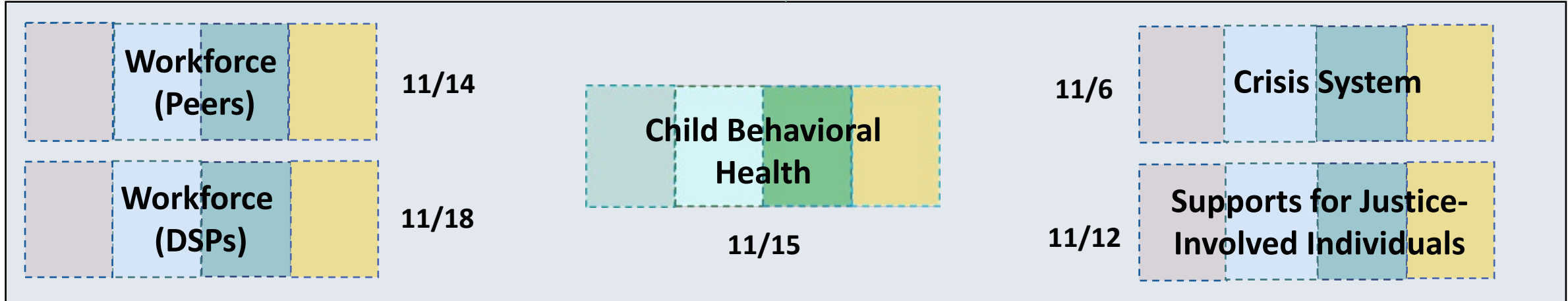


November Community Collaboration

If you're interested in joining an advisory committee, please fill out this [form](#)!



Advisory Committees



Find the most up-to-date information on disaster recovery safety, flexibilities for Medicaid recipients, mental health and disability-related resources on the [DMHDDSUS Weathering the Storm](#) webpage.

Weathering the Storm

Get Help



Crisis Services

Resources include 988 Lifeline, Peer Warmline, Mobile Crisis Teams, and Behavioral Health Urgent Care.



Disaster Distress Helpline

National helpline for disaster crisis support 24/7. Call or text 800-985-5990.



Disability Disaster Helpline

Helpline for disability-related disaster response 24/7. Call or text 800-626-4959.



Hope4NC Helpline

Help for Helpers. Call the Hope4NC Helpline, 855-587-3463. Support is available 24/7.

Available in English and Spanish

New! Hurricane Helene I/DD Resource

Toolkit includes:

Story: "A Hurricane in North Carolina"

Activity: "How I Feel About the Hurricane"

Use this activity to talk about how the person with I/DD feels about the hurricane. This can be used as a choice board.

Activity: "Ways I Can Care for Myself"

Use this activity to talk about what helps the person with I/DD feel better. This can be used as a choice board.

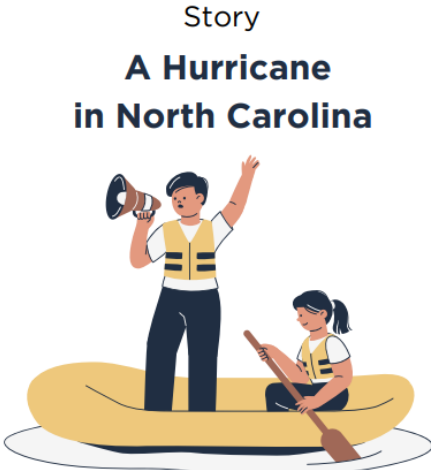
Activity: "My Hurricane Story"

Complete this activity together to help the person with I/DD process the hurricane.

Information for Care Partners:

Learn to identify the signs of stress and trauma for people with I/DD and how you can support them.

<https://www.ncdhhs.gov/assistance/hurricane-helene-recovery-resources/hurricane-helene-recovery-communications-toolkit#WeatheringtheStorm-7456>



- How to use this story**
1. Read this story with the person with I/DD.
 2. Pause if they become overly stressed.
 3. Let them look at this story on their own.
 4. Re-read the story together as often as you need.

How I Feel About the Hurricane

The hurricane is a big event. People can have big feelings about it. How do you feel?

 Angry	 Confused	 Scared
 Worried	 Embarrassed	 Lonely
 Nervous	 Sad	 Stressed
What other emotions are you feeling?		
<input type="text"/>		<input type="text"/>

Information for Care Partners

- Common Signs of Trauma or Stress for People with I/DD**
- Increase in physical complaints, such as stomachaches or headaches
 - Increase in stimming behaviors, including vocalizing
 - Decreased ability or interest to engage in typical activities
 - Changes in interest in being with other people
 - Increases in crying or yelling
 - New or increase in behavioral needs
 - Experiencing flashbacks or nightmares
 - Repetitive statements about the hurricane or its effects
 - Changes in energy and activity, including changes in sleep patterns

PSYCHOLOGICAL FIRST AID		Simple Ways to Support Individuals with I/DD	
	LISTEN Listen to stories and needs with empathy.	"I'm here for you."	"What do you need right now?"
	PROTECT Ensure physical and emotional safety.	"Let's adjust the sensory environment."	"I think it's best not to watch the news right now."
	CONNECT Build social connections and refer when needed.	"Let's sit with your family and read a story."	"I think this resource will help you."
	MODEL Model coping skills and hopefulness.	"I'm going to take some deep breaths to calm myself."	"Things will get better soon."
	TEACH Teach coping skills and provide information.	"Everyone is working together to rebuild."	"Let's listen to some calming music."

Adapted from Psychological First Aid for Schools (PFA-2)
Source: Maya Mathels, PhD, MSW

DSP Grants Update

Initiative Update: DSP Recruitment and Retention Grants

DMH/DD/SUS is now collecting grant applications from provider agencies and self-directing employers of record (EORs). These one-time grants will be used to develop and implement recruitment and retention incentives for the DSPs they employ.



- Initiatives funded by the grants must aim to reduce DSP turnover, support DSP recruitment, and/or enhance DSP job quality and satisfaction.
- Examples of allowable uses for grants include hiring and retention bonuses, child/dependent/senior care stipends, and transportation stipends.
- Funds will be distributed in early 2025 and must be expended within one year of receipt.
- Provider agencies and EORs in counties included in the natural disaster declaration area will be able to apply for funding through a separate funding process, to be established by DMH/DD/SUS. Or provider agencies and EORs in those counties can choose instead to apply through this current funding opportunity if they prefer.

Provider Agency Grant
Application Deadline:
November 29, 2024

- Application Link: [Click Here](#)

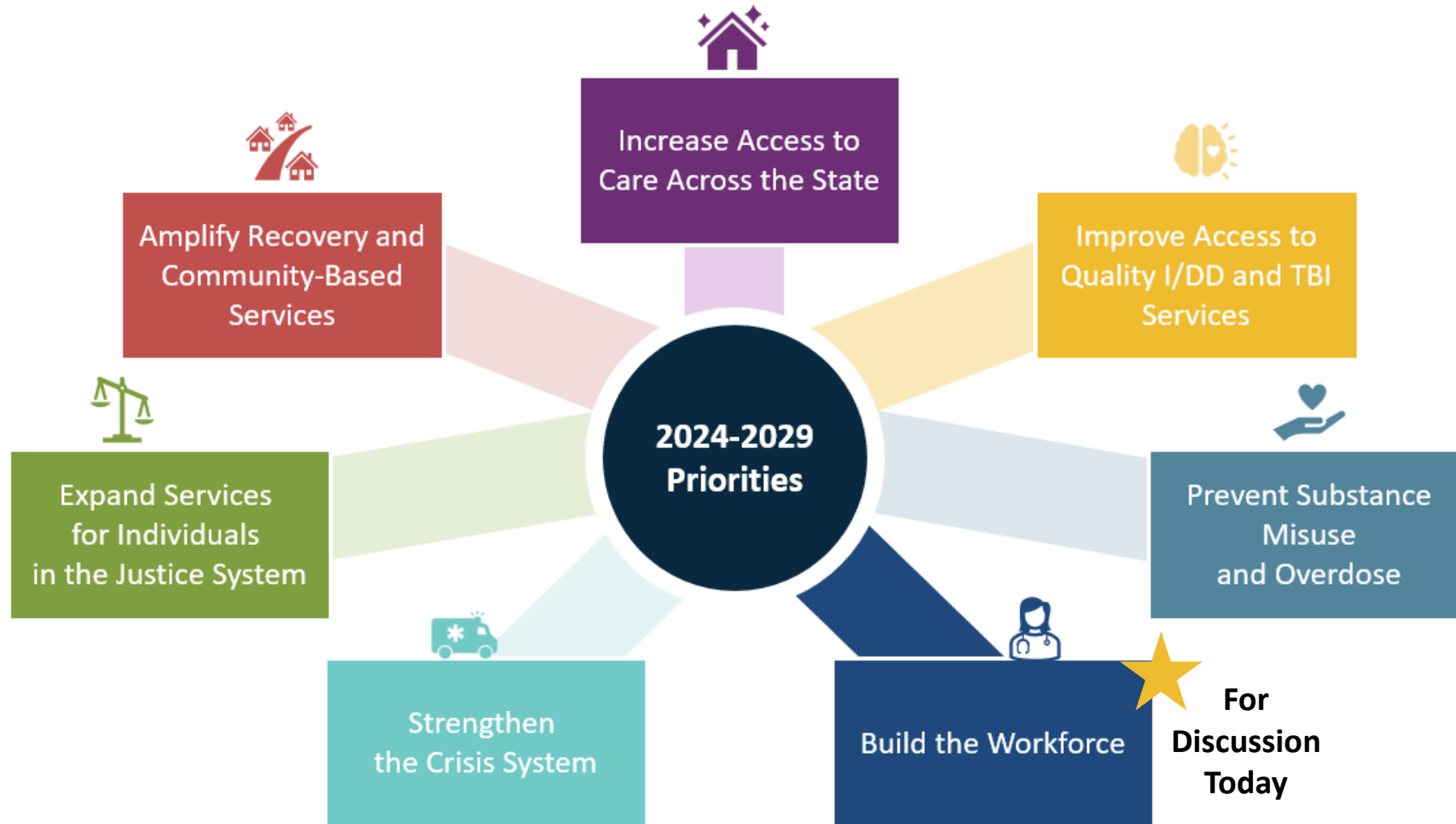
EOR Grant Application
Deadline: **December 16, 2024**

- Application Link: [Click Here](#)

Email dmhiddcontact@dhhs.nc.gov with questions about the requirements of the grant program, completing this form, or technical issues.

DSP Engagement Update

DMH/DD/SUS's 2024-2029 Strategic Plan Priority Areas



I/DD=Intellectual and Developmental Disabilities
TBI= Traumatic Brain Injury

Strategic Plan Priority Area: Build the Workforce

DMH/DD/SUS's strategic plan includes a priority area focused on building the workforce. In line with this goal DMH/DD/SUS has engaged directly with DSPs to inform investments to support the DSP workforce.

Goal 4.2: Strengthen the DSP Workforce



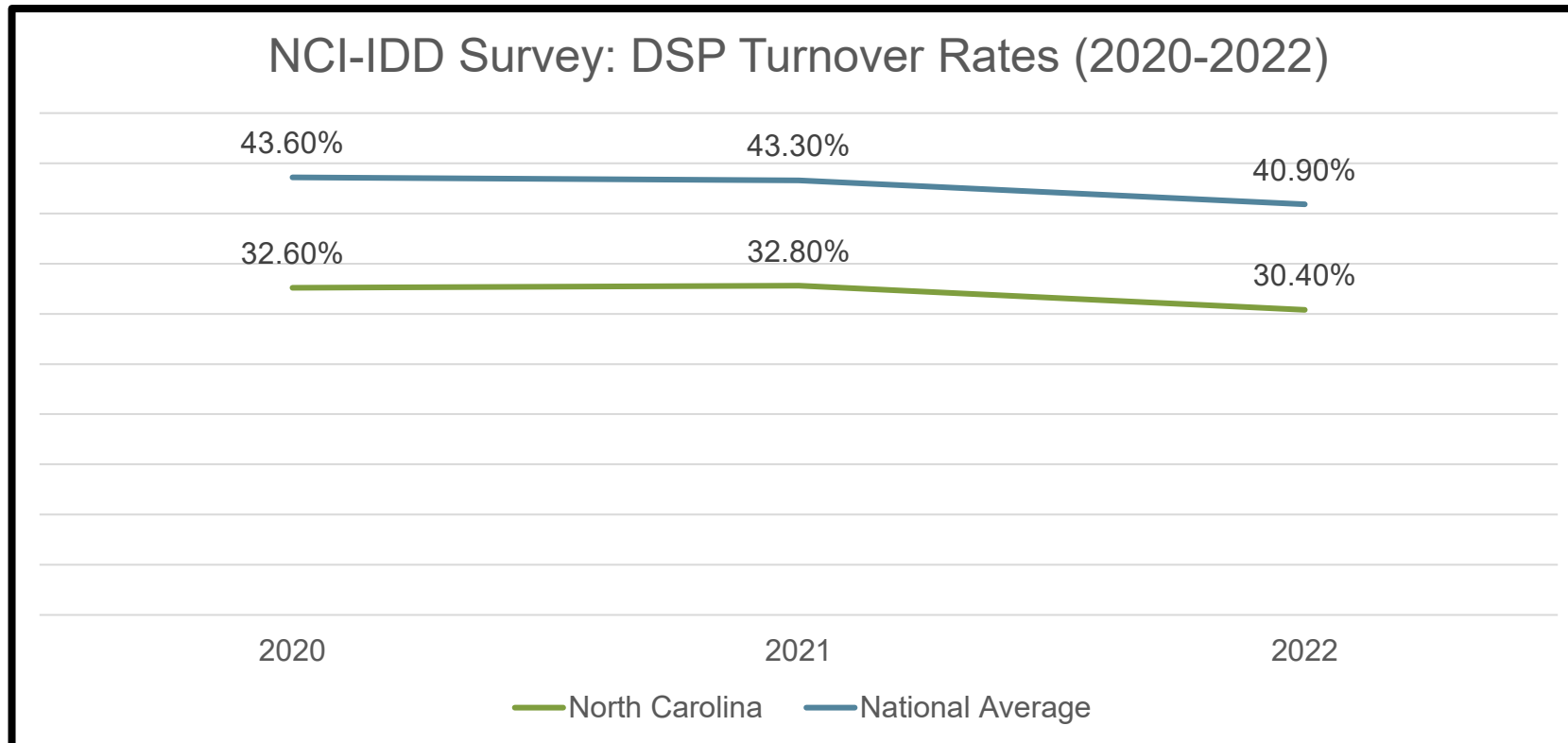
Build a well-trained direct support professional (DSP) workforce.

Metrics for Tracking Progress

1. Number of scholarships given by DMH/DD/SUS for DSP training programs.
2. DSP turnover compared to the historic baseline for providers receiving retention and recruitment incentives.

Reminder: DSP Turnover Rates in North Carolina

While North Carolina's DSP turnover rate was among the lowest in the nation in 2022, the rate was nearly one in three workers. DMH/DD/SUS wanted to engage with DSPs directly to learn more about the factors that impact the choice to stay in or leave the profession.



Reminder: DMH/DD/SUS's DSP Engagement Initiative

DMH/DD/SUS conducted an online survey of DSPs to better understand broad trends in DSP demographics and experience on the job. DMH/DD/SUS then convened five focus groups of DSPs to build on survey findings, collect more in-depth feedback from DSPs, and continue to inform workforce investments.

DSP Survey (April 2024)	Follow-Up Agenda for Focus Groups
<ul style="list-style-type: none">• Distributed via LME/MCOs, provider agencies, the DSP advisory committee, DMH/DD/SUS listservs, and DHHS social media.• 1200+ responses; respondents' demographics and education were similar to national trends, though some respondents may have been in caregiving roles other than the DSP role.• More than 70% of respondents had been in the role for 3+ years (exceeding the national average of 49%).• 52% of respondents were interested in receiving additional training, and more than half expressed the need for improved wages and benefits.	<ul style="list-style-type: none">• DMH/DD/SUS sought to hear about DSPs' personal experiences in the following areas:<ul style="list-style-type: none">• Recruitment: How DSPs learned about the DSP role.• Retention: Why DSPs leave the job and how to keep them working in the I/DD field.• Training: Opportunities to improve basic training and areas for advanced training.• Professional Networking and Peer-to-Peer Support: Opportunities for DSPs to network with one another and share resources.

Background on Survey Respondents and Focus Group Participants

DSPs who responded to the survey and participated in the focus groups were on average older, had longer tenures (over half had been working as DSPs for 3+ years), and had more education compared to national DSP trends.

Focus Group Participants

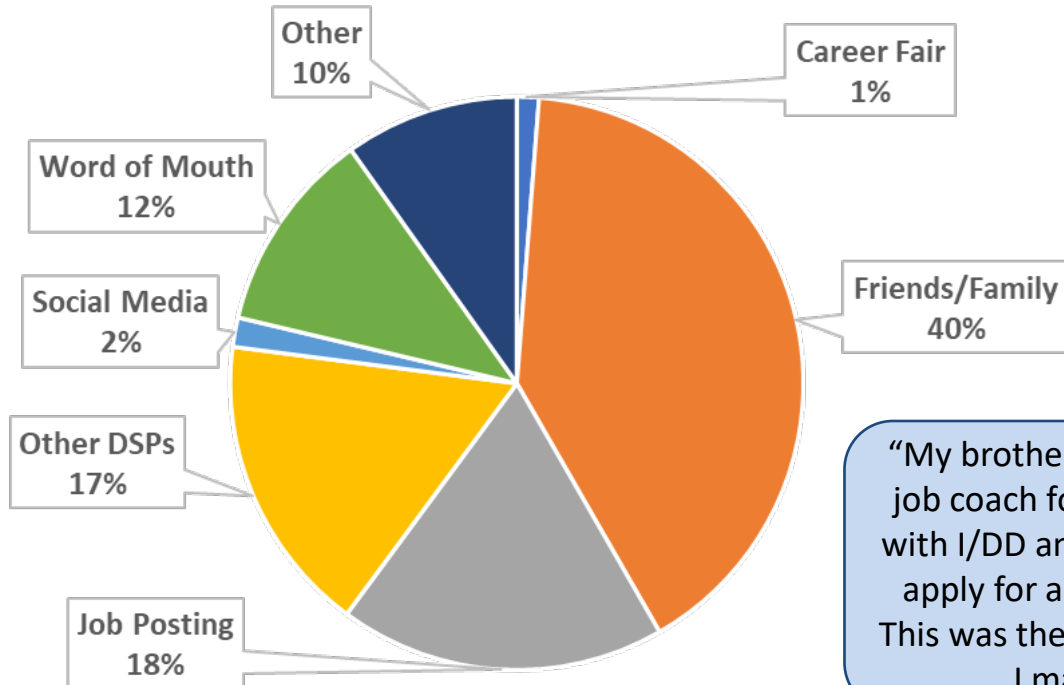
- 500+ survey respondents expressed interest in participating in focus groups; 32 DSPs participated in focus groups.
 - Note that these DSPs self-selected to participate and may not be representative of the DSP workforce at-large.
- Focus groups were organized by region. Each focus group included representation from different racial and ethnic groups with different levels of education, and different professional tenures and experience in work settings.
- **The findings from the focus groups do not reflect the voices of former DSPs who have left the field.** (North Carolina had a DSP turnover ratio of 30.9% in 2022; the national turnover ratio was 40.9%.)

How DSPs Learned About the Job

The DSP survey found people primarily learned about the job through friends and family. Focus group findings provided additional context for DSPs' motivation becoming a DSP.

Survey Findings

How Did You Learn About the DSP Job?



“My brother worked as a job coach for individuals with I/DD and suggested I apply for a similar role. This was the best decision I made.”

Focus Group Findings:

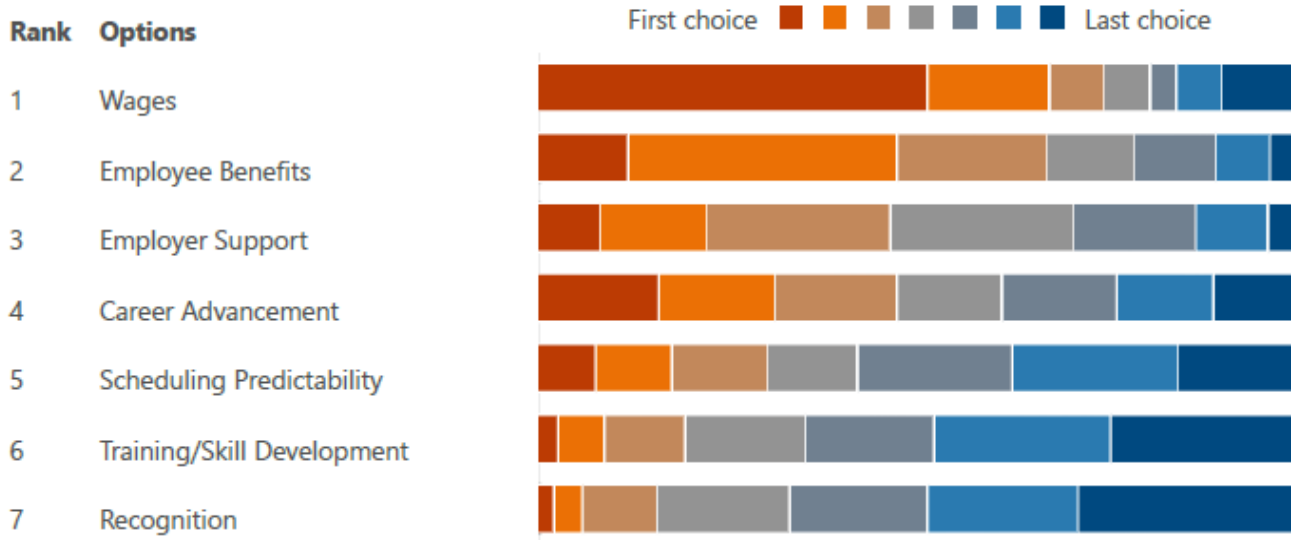
- Several participants became DSPs because their family member with I/DD required support, and **they could not find workers to help.**
- One individual became a **DSP for their family member after seeing poor quality of care** provided by the family member's previous DSP.
- Other participants **learned about the role through jobs interacting with people with I/DD** (e.g., teacher, hairdresser) or because they know someone with I/DD.
- **Some DSPs work in other caregiving roles (e.g., CNA) and became a DSP because they wanted additional work part-time.**

What DSPs Are Asking For

DSP survey respondents overwhelmingly reported wages as most likely to impact their choice to keep working in the job. The focus groups provided additional nuance on how pay, benefits, advancement, and the rewarding nature of the work intersect for DSPs.

Survey Findings

What is most likely to impact your choice to keep working as a DSP?



“I feel like I’m in the negative [speaking about their finances due to low wages], but I love this family so much I can’t give them up”.

Focus Group Findings:

- **DSPs seek higher pay.** Several described having to work multiple jobs due to low wages.
 - One DSP noted that despite working with the same agency for eight years, their wages had not increased
- **DSPs often had limited employment-related benefits packages,** including mental health benefits and paid time off.
- Many **DSPs would like to pursue advanced administrative or supervisory roles** but feel constrained by the lack of education opportunities.
- DSPs feel that regular **acknowledgment from supervisors could significantly boost morale** and job performance.

Opportunities to Improve Training

In the survey, nearly 90% of respondents said they feel they have sufficient training to do their job well, but focus group participants noted that the quality and value of training varies across employers today.

- **Basic DSP Training:** New hires often feel unprepared due to the inadequacy of online training modules, leading to high turnover rates early in tenures.
 - DSPs suggested training topics including crisis response and de-escalation, communication skills, restraints and incident reporting, and motivational interviewing.
- **Training Modality:** There was a preference for in-person, interactive training over online courses.
 - DSPs suggested using job shadowing in combination with traditional training to support early-career DSPs.
- **Training Frequency:** Participants suggested mandatory annual refresher courses to keep skills up-to-date, along with certificates to acknowledge completion.
- **Advanced Training:** Many DSPs shared their interest in receiving more advanced training, especially if that leads to certifications or other credentialing.

DSPs saw training as crucial in providing a **rationale for how they work.** It “gives a reason for why you did something the way you did” and emphasized continuing education throughout their careers.

Suggested Topics: American Sign Language, working with individuals who are non-verbal, mental health first aid, care coordination, system navigation, health literacy, self-advocacy, introduction to supported employment, Applied Behavioral Analysis (ABA), stress management.

Professional Networking Among DSPs & Matching DSPs with Employers

DSPs seek opportunities to network with one another to access resources to inform their work, build relationships with other DSPs, and seek support when they experience challenges.

Professional Networking

- **In-Person Networking:** While online tools were seen as useful, in-person meet-ups and events (e.g., conferences) are preferred for building connections and community among DSPs.
- **Online Networking Platform:** Participants are supportive of an online platform that could host webinars, message boards, job postings, and community event calendars.
 - Some DSPs would prefer an app over a website.
 - One DSP raised concerns about whether an online platform would be well moderated.

Matching DSPs with Employers

- **Matchmaking:** Most DSPs thought an online matchmaking platform would be helpful, given that providers are using a multitude of job search sites to find qualified candidates.
- **Back-Up Care Finder:** DSPs supported adding a back-up care finder to the platform, highlighting the need for reliable, flexible care options.

“...it is great to hear what other DSPs are doing and going through. It makes you think about what you can do [to make your job better] and appreciate what you do have in your job.”

*DMH/DD/SUS has been exploring including a recruitment function in the proposed online platform.

Discussion: Implications for Ongoing and Future DSP Programming

DMH/DD/SUS is interested in hearing from you about how the findings we've reviewed today should be incorporated into the design and implementation of DSP workforce initiatives that are underway and future initiatives to support DSPs.



- What lessons learned should be incorporated into DSP workforce initiatives across the following areas?
 - Compensation and Benefits
 - Basic and Advanced Training
 - Matching DSPs and Employers
 - Peer-to-Peer Networking
 - Elevating DSP Voices
- Are there other insights or findings in the survey results that we haven't already discussed?

Advisory Committee Membership

Direct Support Professionals (DSP) Advisory Committee Membership

Name	Organization
Providers	
Alicia Barfield	North Carolina Healthcare Association
Amy Miller	OE Enterprises, Inc.
Anita Daniels	actualities limited & Union Baptist Church
April Taylor	Alberta Professional Services
Baines Jamil	Archmade LLC
Barry Dixon	Dixon Social Interactive Services Inc.
Betsy MacMichael	First in Families of NC
Brandi Baker	Residential Services Inc.
Brittney Peters-Barnes	NC START
Bryan Dooley	Solutions for Independence
Cameron Ford	NOVA Behavioral Health
Carson Ojamaa	Children's Hope Alliance
Chris Faulkner	Family Solutions
Christina, Bell	ECVC Inc.
Corie Passmore	Tammy Lynn Center
Corye Dunn	Disability Rights NC
Darlene Norton	Gaston Residential Services, Inc.
Debra Rouse	Rouses Group Home Inc
Devin Lyall	Wilkes Recovery Revolution, Inc.
Devon Cornett	Abound Health
Eileen Slade	NC START Central
English Albertson	Primary Health Choice, Inc
Erika Taylor	Brody School of Medicine at East Carolina University, Dept. of Family Medicine
Gerald Bernard	Charles Lea Center Inc.
Herb Whitesell	Davidson, Holland, Whitesell & Co., PLLC
Holly Richard	The Arc of North Carolina

Name	Organization
Providers	
Holly Watkins	The Arc of North Carolina
Jamie Tutor	All Ways Caring HomeCare
Janet Price-Ferrell	FIRST
Jeffrey Demagistris	Lutheran Services Carolinas
Jemma Grindstaff	UNC TEACCH Autism Program
Jen Greveling	BAYADA Habilitation
Jennifer Street	Animo Sano Psychiatry
Jessica Hicks	Cape Fear Vocational Services
Jill Baron	Piedmont Health Services
Joel Maynard	The North Carolina Provider Council & The Developmental Disabilities Facilities Association
John Nash	The Arc of North Carolina
Joseph Horrigan	Duke University
Joyce Harper	Freedom House Recovery Center, Inc.
Julia Adams-Scheurich	Oak City Government Relations, LLC
Julie Walker	The Cognitve Connection
Karen McLeod	Benchmarks
Karin McDaniel	Adult Life Programs, Inc.
Katherine Hyde Hensley	Hensley Counseling & Consulting
Katherine Wilson	Wilson's Constant Care LLC
Kathy Keith	Community Partnerships, Inc
Kathy Merritt	Wayne Opportunity Center/ part time Cherry Hospital (retiree)
Kelly Husn	BAYADA Habilitation
Kelsey Parker	Carolina Outreach, LLC
Kelvin Barnhill SR	Flovi Services
Kerri Erb	Autism Society of NC
Kevin Anders	Children's Hope Alliance

Direct Support Professionals (DSP) Advisory Committee Membership

Name	Organization
Providers	
Kimberly Mitchell	Boundless Miracles, LLC
Krista Zappia	Children's Hope Alliance
LaTonya Harris	Avidity Integrated Care LLC
Laura Combs	Baptist Children's Homes
Laura McRae	Pinnacle Family Services
Leiloni Mulligan	A World of Opportunity LLC
Leonard Shinhoster	Alexander Youth Network
Lisa Morrison	Successful Visions LLC
Lisa Poteat	The Arc of NC
Luke McDonald	Novant Health
Luwanda Smith Daniels	Alternative Behavioral Solutions Inc.
Margaret Mason	CBCare
Margery Sved	self
Maria McLaughlin	Rainbow 66 Storehouse
Mary Butts	Carobell Inc
Mary Jones	El Futuro
Mary Scholz	Brighter Strides
Max Baenen	Thrive Behavioral Solutions
Mebane Boyd	NC Partnership for Children
Melinda Rhodes	Jacobs Hope NC LLC
Michael Maybee	Watauga Opportunities Inc.
Michelle, Kluttz	NC START East/West
Mike Chapman	UNC TEACCH Autism Program
Monica Long	Alpha Management Community Services, Inc.
Niki Hodges	Abound Health
Norman Turner	Kittrell Job Corps Center

Name	Organization
Providers	
Pablo Puente	ServiceSource
Pam Clark	FIRSTwnc
Rebecca Simmons	Falling Starr Home Care LLC
Richard Anderson	Horizons Residential Care Center
Richard Edwards	CBCare
Richard Walker	Carobell, Inc.
Robyn Codrington	Affiliated Sante Group-CriSyS
Ronald Metcalf	RAP/ Abound Health LLC
Sandra Johnson	Primary Health Choice
Sarah Rosenquest	UNC- SOM Psychiatry
Sarah, Garrett	SouthLight
Shawn Poe	Chatham Trades, Inc.
Sherrell Gales	Abound Health
Sierra Jones	Triumphant Homes LLC
Stephanie Almeida	Smoky Mountain Harm Reduction
Stephanie Tyson	Resourceful Clinical Laboratory
Sudhakar Kaushik	jeeva AI Health systems
Suzanne, Byers	Transylvania Vocational Services
Talley Wells	NCCDD
Teresa McKeon	The Arc of Davidson County, Inc.
Terri Bernhardt	Monarch NC
Therese Garrett	WellCare NC
Tiffany Randazza	Catawba Valley Healthcare
Tim, Barnard	Person Co. Group Homes
Tina Woody	BlueWest Opportunities
Tom O'Brien	Industrial, Opportunities, Inc.

Direct Support Professionals (DSP) Advisory Committee Membership

Name	Organization
Providers	
Tracy Smith	CBCare
Vanessa Alvarado	Duke Health
Venkata Ravi Chivukula	Novant Health
Wendy Briggs	Ralph Scott Lifeservices, Inc.
Yasmin Gay	Atrium Health Wake Forest Baptist/ Wake Forest University School of Medicine

Name	Organization
Consumers and Family Members	
Amie T Brendle	CFAC and Advocacy / Advisory Groups and Committees
Angela-Christine, Rainear	Employer of Record
Annette Smith	SCFAC
Annika Jeffries	MHA
benita purcell	VAYA CFAC also work for a provider in a rural community
Benjamin Throckmorton	N/A
Beth Field	LAND (Leadership Alliance for Neurodevelopmental Disabilities)
Carol Conway	PACID
Connie Wooten	Cherry Hospital (work) and RHA Bear Creek
Crystal Foster	SCFAC
Crystal White	Easterseals UCP
Debbie Chapman	Trillium
Gwen Collman	Parent
Janet Breeding	SCFAC
Jeff Phillips	Secure Direction NC, LLC
Jennie Lee	Parent
Jennifer Petersen	Self
Johnnie Thomas	SCFAC
Katherine Fields	Employee of Record
Laura Radulescu	Wake Enterprises
Leann Henkel	Trillium MidState CFAC
Lilly Parker	SCFAC
Linda Campbell	CFAC
Lisa Carroll	Partners-CFAC Member
Lisa Roberson	EOR
Lorraine LaPointe	Orange County - CFAC Member

Direct Support Professionals (DSP) Advisory Committee Membership

Name	Organization
Consumers and Family Members	
Marisa Kathard	N/A
Pam Hunter Dempsey	NCCDD
Pamela Clark	Employee of Record
Poonam Pande	N/A
Rachel Menna	Self
Ray Hemachandra	Vaya CFAC
Sandra Buckman	North Central CFAC
Sarah Potter	PCFAC, MTN, NC WAT
Sarah, Britton	SimplyHome
Sherri McGimsey	NAMI
Stacie Tonucci	Family Member
Velma Gaye	N/A
Zondra Moss	Abound Health

Name	Organization
Community Partners	
Alicia Brunelli	NC Harm Reduction Coalition
Angel Callicutt	Montgomery County
Angel Jones	Green Rural Redevelopment Organization (GRRO)
Anna Ward	Carolina Institute for Developmental Disabilities
Antania hubbard	Adcnc
Avi Aggarwal	NAMI Wake County
Betsey Zook	Forsyth Tech Community College
Dawn Gentry	Alliant Health Solutions - NC Quality Improvement Organization (QIO)
Debra Barnette	Community Care of the Lower Cape Fear
Diamond StatonWilliams	North Carolina General Assemmbly
Donna McMillan	HBCU Collaborative Network
Dunaway, Kerry	New Hanover County Government
Ellen Carroll	NCHA
Jennifer Wright	Goodwill Northwest North Carolina
Jessica Aguilar	SCFAC
Keiba Young	First In Families of Mecklenburg County, a project of InReach
Kezia Scales	PHI
Lisa Jackman	NC START West
Lisa Pluff	UNC Greensboro
Marilee Johnson	Alliant Health Solutions
Martha Turner-Quest	NC Psychological Association
Nathan Boucher	MFP funded project
Patricia Keul	Disability:IN North Carolina
Robin Zeigler	Division of Public Health, Oral Health Section
Smalls, Eunika	City of Greensboro
Stephanie Walker	AHEC

Direct Support Professionals (DSP) Advisory Committee Membership

Name	Organization
Community Partners	
Suresh Nagarajan	PCG
Suzy Mayberry	NC START East
Tara Fields	Benchmarks
Tim Gallagher	Individual
Tracie Potee	Soar Parenting and Life Wellness Coaching Services Inc.
Trish Farnham	NC Coalition on Aging---WECARE Project
Troy Manns	CHPD/CHT Crisis Unit
Wanda Douglas	Hope Community Clinic
William Edwards	Transitional Services Center, inc
Zavera Basrai	MFP funded project

Name	Organization
State Employees	
Debra Mack	Guilford County
Dr Latonya Lee Niang	Cape Fear Community College
Kara Finch	Stanly Community College
Porscha Orndorf	Asheville-Buncombe Technical CC
Ronni Zuckerman	UNC Chapel Hill School of Social Work
Sandi Lane	Appalachian State University

Name	Organization
LME-MCOs/Tailored Plans, Standard Plans	
Aimee Izawa	Alliance Health
Dr. Uzama Price	Alliance Health
Brian Perkins	Alliance Health
Claudette Johnson	Alliance Health
Emily Kerley	Alliance Health
Jocelyn Stephens	Alliance Health
Sandhya Gopal	Alliance Health
Sara Wilson	Alliance Health
Melissa Payne	Alliance Health
Allison Crotty	Partners Health Management
Amilcar Blake	Partners Health Management
Doug Gallion	Partners Health Management
Elizabeth Jordan	Partners Health Management
Michelle Stroebel	Partners Health Management
Cindy Ehlers	Trillium Health Resources
David Owen	Vaya

Direct Support Professionals (DSP) Advisory Committee Membership

Name	Organization
Internal	
Tina Barrett (Workstream Lead)	DMHDDSUS
Kelly Crosbie	DMHDDSUS
Ginger Yarbrough	DMHDDSUS
Saarah Waleed	DMHDDSUS
Charles Rousseau	DMHDDSUS
Jeffery Kearney	DMHDDSUS
Kara Goel	DMHDDSUS
Scott Pokorny	DMHDDSUS
Jennifer Bowman	DMHDDSUS
Keith McCoy	DMHDDSUS
Betty Vines	DMHDDSUS

Name	Organization
Other State Officials	
Karen Wade	Office of the Secretary - Policy Director
Michael Ganley	DSOHF
Nicholas Galvez	NC Office of Rural Health
Holly Riddle	Office of the Secretary - Olmstead/TCL
Melissa Swartz	NC Council on Developmental Disabilities
Michelle Merritt	Division of Health Benefits (NC Medicaid)
Leigh Fleming	DHHS
Tara Heasley	Division of Health Benefits (NC Medicaid)
Deborah Goda	Office of the Secretary - Olmstead/TCL