



## North Carolina Department of Health and Human Services

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## Future of Innovations Waiver and IDD System Design

**October 31, 2014, 1:00 PM – 4:00 PM**

Location: **Brown Building – Dorothea Dix Campus: Conference Room**  
**Meeting Minutes - DRAFT**

### Introductions

### Community Guide

Question: Do we want to continue calling this service Community Guide?

Stakeholder Responses:

- Will determine later

Question: For Community Guide what is working and what is not working?

Stakeholder Responses:

- Staff need training
- Varies between providers and LME-MCOs
- Many people don't use service / don't see value in the service
- Authorization process is too long; reauthorization process too frequent
- Many would like to see Community Guides provide more advocacy
- Community Guides could develop community and vocational opportunities
- Person may be referred for service, but then it's denied. Should not be difficult to access
- This service does not duplicate Care Coordination.

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Question: Do Care Coordination and Community Guide meet needs, or are there gaps? If there are gaps, what functions are missing?

Stakeholder Responses:

- It should be easier to get the service – there are too many service denials
- People don't know what Community Guides do
- Staff need more training on resources
- People with life experience may be the best Community Guides
- Would be helpful for the group to know if this service is effective and under what circumstances has it been effective
- Staff with better credentials (education / experience) would require a higher reimbursement rate

### **Crisis Services**

Question: Do we want to continue to call this Crisis Services?

Stakeholder Responses:

- Will determine later

Question: What is working now and what is not working?

Stakeholder Responses:

- NC Start is a good way from thinking through prevention
- There has to be some movement so we need to keep this going
- Crisis comes from many different places
- Need to incorporate START
- There is a big problem where we can't get preventative care
- It could change a lot of things if people really just get some talk time with someone
- Are you paying for the bed or are you paying for the head?
- There needs to be a standing order; you should not have to wait for approval before you get the services
- NC START works with adults and not with children; is there a way to mimic START for children?
- Do people know who to contact on the weekend if there is a crisis? Maybe a sticker should be given to the people on who to call when they are in a crisis.

Question: Is there anything that NC START is missing?

Stakeholder Responses:

- Group will consider this question and respond later

## **Residential Support**

Question: What service name will be easiest for individuals on the waiver?

- Will be addressed at a later time

Question: What do you see that is working and not working with Residential support?

Stakeholder Responses:

- Turn over rate for providers
- People with TBI on the waiver.
- Who determined that 3 beds is best? (CMS – State will try to add 4 bed homes into the waiver)
- There is no opening for new group homes. If someone wants to open a group home shouldn't they are able to and shouldn't whoever want to stay there stay there?

**Next Meeting: Friday November 7<sup>th</sup>, 1pm – 4pm – Brown Building**

Meeting Schedule:

November 21<sup>st</sup> – Clark Building (immediately next door to the Brown Building)

December 5<sup>th</sup> – Brown Building

December 19<sup>th</sup> – Brown Building

All meetings are held on Fridays from 1pm – 4pm