Pennsylvania State Board of Vocational Rehabilitation

The Radisson Hotel – Harrisburg 1150 Camp Hill Bypass Camp Hill PA 17011

Minutes of Quarterly Meeting

March 7, 2019 9:00 am - 12:13 pm

State Board Members Present

Jerry Oleksiak	MJ Bartelmay	Mike Kiel	Tom Caulfield
Liza Conyers	Joe Drenth	John Tague	Ray Hoover
OVR Staff			
Lee Ann Stewart	Shelbi Smith	Bridget Sandrowicz	Mike Kirby
Cindy Mundis	Stan Swaintek	Sara Gales	Connie Moonen
Cheryl Novak	Tracie Maille	Hattie McCarter	David Ritter
Ryan Hyde	Rick Walters	Jill Moriconi	Greg Riedlinger
Denise Verchimak	Melissa Hawkins	Tammy Burke	Nicole Wade
Michele Bornman	Kevin Kayda	Ralph Roach	Howard Albrecht
Others Present			
Marsha Drenth	Dawn Daignault	Susan Schonfeld	Daniel Kleinmann
Kym Mackilligan	Kate Blank	Jennifer Schley	Ginny Rogers
Sharon Behun	Joe Michener	Angela Morris	Sara Reitenauer
Hillary Walsh	Cathy Lantzy	Janetta Green	Lionel Waritay
Nicole Clakeley	Linda Drummond	Eric Kratz	Ashley Mancine
Cortney Lakis	Ashley Shenk	Haley Salera	Kristina Christy
Matt Seeley	Seth Hoderewski	Carol Ferenz	Joann Manganello
Amy Beck	Janet Fiore	Brandy Burnham	Clement Gyan
Steve Pennington	Lori Tyndall	Mary Hartley	
Kristin Grim	Julia Barol	Penny Ickes	
	Comptomy Olaksiak		

Opening Remarks – Secretary Oleksiak

- OVR Executive Director position had over 1700 hits on the posting, which was narrowed down to 77, with the top 16 being interviewed currently.
- After those interviews are completed, will narrow down again to 3-5 candidates to interview at L&I headquarters, beginning on 3/19.
- Mr. Tague asked if there will be a new Director by the June Board meeting. Secretary Oleksiak said he can't promise that but is hopeful.
- By next Board meeting, should have a report on what the Ad Hoc Committee has been working on.

Action Items

Approval of Agenda

• MOTION to approve the agenda.

- Mr. Caulfield moved, Mr. Drenth seconded.
- All in favor, none opposed motion carried.

Approval of Meeting Minutes – December 6, 2018

- MOTION to approve minutes.
- Mr. Drenth moved, Mr. Tague seconded.
- All in favor, none opposed motion carried.

Approval of 2019 Meeting Dates and Locations

- MOTION to discuss 2019 dates and locations.
- Mr. Hoover moved, Ms. Conyers seconded.
- Mr. Bartelmay and Ms. Convers requested to move the 12/4 meeting to 12/5. Secretary Oleksiak said it will be moved to 12/5.
- MOTION to approve 2019 dates and locations.
- Mr. Tague moved, Mr. Caulfield seconded.
- All in favor, none opposed motion carried.

Public Agenda

OVR Executive Director's Remarks – Ryan Hyde

- Summary of an information session regarding funding issues OVR is facing
 - Reallocation funds are trending down, and with WIOA's PETS requirements, that leaves even less money for everything else, with customer service being the main area of concern. OVR is anticipating receiving less reallocation funds than usual and, as a result, the service provision model needs to be reevaluated.
 - Mr. Tague asked for clarification that OVR is down a significant number of staff and it sounds like there isn't money to fill those positions. Mr. Hyde said there are several offices with staffing numbers down significantly so they are the priority.
 - Mr. Drenth asked if any HGAC services count towards the 15% PETS requirement. Mr. Hyde said the training services do not count.
- Summary of HGAC
 - HGAC is one of eight comprehensive rehab facilities in the country and employs roughly 160 staff. There are a variety of specialty disability support programs available at the center. In the 2017-18 schoolyear, HGAC graduated approximately 180 students, had 581 total students throughout the year, and about 1400 students participating in support programs. Fiscal breakdown was about \$23M to operate the center, with about \$18M for administration and operation costs, \$2.6M for education programs and \$2.5M for support programs.
 - Mr. Tague asked if there is a cost to the students. Mr. Hyde said there is generally no cost they may have to contribute but it is rare.
 - Ms. Convers asked if HGAC serves individuals without disabilities as well. Mr. Hyde said it is mostly people with disabilities, but they have tried to expand that.
- Outside influencers causing strain on staff and financial resources
 - ODP must refer to OVR prior to being able to access VR services under the ODP waiver.
 OVR received an increase in referrals about two years ago.
 - OLTL has similar rules.

- OVR entered into a partnership with BJJS regarding services to their students who are in juvenile detention centers because there is a large number of students with disabilities in those centers. It has been a great collaboration, but is stretching resources thin.
- OVR also has a small intergovernmental agreement with OMHSAS.
- The Employment First Act has added additional expectations for OVR, which puts pressure on OVR from many different entities legislatively and programmatically.
- $_{\odot}$ $\,$ ACT 26 in 2016 requires OVR to track and report on additional data.
- OVR has learned recently that eight states in the country have closed their order of selection (OOS).
- Mr. Hyde said that OVR has tried admirably to continue maintain services at existing levels, but doesn't believe it is possible to continue in that manner with such limited resources. Some options to combat this issue are ask for more money the Governor has offered to add \$2.3M for OVR in his budget proposal and ask anyone willing to advocate on behalf of OVR. Mr. Hyde said that he does not expect OVR to receive any additional Federal funding.
 - Mr. Bartelmay asked if all states receive Federal money at the same rate. Mr. Hyde said that, based on the formula – looking at poverty level, number of people, etc. yes.
 - Mr. Tague asked if the additional \$2.3M came up at the appropriations meetings.
 Secretary Oleksiak said it did come up and the Governor's office was spoken to about it.
- Mr. Hyde mentioned some options to consider in the event OVR does not receive any additional funding
 - Close OOS. Regulations allow for the closure of the top tier and only existing customers would be served. New customers would be evaluated and placed on a waiting list until the OOS can be reopened entirely or on a rolling basis.
 - Review and change eligibility criteria. This could cause disruption to staff, customers, service providers, school, etc. Less closures could impact Social Security reimbursements, which OVR relies on to cover personnel costs. This could also impact referrals to HGAC.
- Some things that have been/are being done already to free up some money:
 - Reduced overtime in PETS and VR
 - Monitored hiring to fill only critical positions
 - Reworking PETS provision model
 - Innovation expansion contracts are ending naturally and will not be renewed yet
 - Looking at summer programs and all other programs to see if they can continue to be supported
 - Regularly purging open commitments interpreters, drivers, rent, etc.
 - Purging unneeded purchase orders within the case management system
 - Travel restrictions
 - Reduced training opportunities
 - Mr. Hoover asked if OVR has considered asking private sector for help. Secretary Oleksiak says there will be further outreach to Feds, but outreach to private sources can be considered, as well, keeping in line with Federal law and the Collective Bargaining Agreements.
 - Ms. Convers voiced concern about timing as it relates to closing the order of selection.
 Less referrals to HGAC could result in increased costs to others. How long can the OOS

be closed before programs become dysfunctional? Secretary Oleksiak said that he doesn't really have an answer for that just yet because it is unclear how much OVR could receive from the Feds. He does agree, though, that if some things are eliminated, that will impact other sources of income. Secretary Oleksiak says we should know more in August/September.

- Mr. Drenth asked for clarification about the Federal maximum and asked if there are any factors involved in the algorithm that would be affected. Mr. Hyde said the formula has been set for years and it can be found on RSA's website, but right now, OVR would not be impacted by that.
- Mr. Kiel asked if any of the eight states that have closed their OOS has comprehensive rehab centers like HGAC. Mr. Hyde said Virginia for sure, but that might be the only state. Mr. Kiel asked if we know how Virginia's center was affected by it. Ms. Moriconi said no, but she will reach out.
- Mr. Tague asked if OVR has looked at other states that have found success in ways other than closing the OOS. Mr. Hyde said OVR has requested technical assistance from RSA and the WINTAC, and Ms. Verchimak has been working with Mr. Pennington on some OOS research.

Order of Selection Update – Denise Verchimak

- PA has been on OOS since 1994 and since 2012, OVR has only been serving individuals who are MSD (most significantly disabled). PA currently defines "multiple services" as 2+ services required (one can be counseling and guidance), and a customer must require services for a period of six months or more in order to be eligible. In order for a customer to be placed in the MSD category, they must have 3+ functional limitations.
- OVR currently has roughly 38,000 individuals in the MSD category and only 80 individuals in the SD category.
 - Mr. Tague asked if this means there are customers in the MSD category that shouldn't be there. Ms. Verchimak said yes.
 - Mr. Kiel wondered if too much emphasis is being placed on counseling and guidance as one of the allowable services. Ms. Verchimak said she doesn't think that's the case, but excluding counseling and guidance is an option, with the assumption that counseling and guidance is provided to everyone.
- Looking at what other states have done:
 - Washington uses 4+ functional limitations for MSD.
 - West Virginia excludes counseling and guidance as an allowable service. They also require customers to need services for 12+ months.
 - Eight states have closed their OOS, with most using rolling closures.
 - Virginia evaluates on a quarterly basis to see how much money the agency has in order to determine how many people they can bring into the program.
 - Mr. Drenth asked if there is prioritization for people who are going to lose their jobs.
 Ms. Verchimak said that Virginia has chosen to prioritize job retention, but PA has elected not to. If job retention is prioritized, OOS does not apply, so anyone on any level of the OOS can receive job retention services.
 - Options for PA OVR, none have to be exclusive:
 - Do nothing
 - Retrain staff to use OOS more appropriately
 - Require 4+ functional limitations for MSD

- Adjust time requirements
- Close all OOS categories
- Mr. Drenth asked how many people could be moved to SD if MSD requires 4+ functional limitations. Ms. Verchimak said she would love to be able to predict that, but she can't and wonders if counselors would just find a way to come up with additional functional limitations in order to get customers help.
- Mr. Kiel asked if any states have closed OOS and have opened OOS back up fully. Ms. Verchimak said she doesn't know, but she doesn't think anyone has been able to come off OOS.
- Mr. Pennington stated that a fiscal analysis of OVR should be done before the decision is made to close the OOS. Secretary Oleksiak said that contact has been made with RSA regarding this and there is a process that would be followed if the decision is made to close the OOS. If the Board moves to proceed with OOS closure, it does not close today. There would be a 30-day public comment period and then RSA would need to give approval to officially close the OOS. Ms. Lantzy said if the Board votes to close the OOS today, it would just give OVR the authority to move forward with the regulatory statutory process. Mr. Hyde addressed Mr. Pennington's financial analysis comments by saying that RSA has asked for the analysis and OVR's fiscal division has put that together. OVR is currently looking at a deficit of at least \$10M.
- Mr. Drenth asked if the recommendation is to close the OOS indefinitely or do a rolling closure. Mr. Hyde said he thought that would be part of the guidance from RSA, but he's hopeful that it would be rolling and as resources become available, more customers can be brought into the program.
- Ms. Convers asked if there would be a referral plan in place if the OOS is closed. Ms. Verchimak said that one of the requirements when customers are on a waiting list is that they are provided information and referral services. One of the required entities to make referrals to would be the PA CareerLink. Ms. Convers asked if the referral would be made to whomever happens to be working at the CareerLink that day or if it would go to a specific person who has had training related to disability and employment. Ms. Verchimak said that is a good point and OVR can look into that.
- MOTION to approve starting the process of closing the OOS
- Mr. Bartelmay moved, Mr. Tague seconded.
- All in favor, none opposed motion carried.

Topics for Discussion

OLTL/PA Managed Care Organizations Presentation and Discussion

- Ginny Rogers OLTL
 - OLTL provides services and supports to people with physical disabilities and seniors with disabilities through a number of programs, most of them being Medicaid Waiver programs.
 - \circ $\,$ Many of these individuals have a clinical nursing facility level of clinical need.
 - OLTL didn't have a focus on employment until very recently.
 - Requires service coordinators who work with each person that receives waiver services to specifically ask the person if they have a goal of employment or if they would be interested in receiving services to become job-ready.

- Provides certain services within the programs so that people who need employment-focused support can receive it if they are eligible.
- Started a program called Employment Champion where, within the service coordination field, they have identified individuals in certain service coordination agencies who focus on employment to work with intensively with individuals to help them move toward employment.
- Implementation of Community Health Choices (CHC) has been great and OLTL is in the process of rolling out a three-year implementation of a program of managed long-term services and supports. Three statewide managed care organizations are going to be coordinating services for people that are in need of long-term services, Medicare benefits, etc.
- Clement Gyan UPMC
 - 3-prong approach to CHC, and today's focus is on community partnership and network building.
 - This includes benefits counseling, career assessment, employment skills development, job coaching, and job finding.
 - UPMC used to identify participants that were interested in employment, then made a referral. That process has been tweaked a bit because they wanted to get an accurate number of participants interested in employment to present to OVR.
 - $_{\odot}$ UPMC currently has 85 participants between southwest and southeast receiving employment waiver services.
 - 4-prong strategy education, assessment and referral to benefits counseling, tracking referrals to OVR, and with UPMC as the second largest employer in the state, working for UPMC itself.
 - \circ $\;$ Employment assessment changed from five questions to seven questions.
 - Mr. Kiel asked if all participants are receiving attendant care for all activities of daily living. Mr. Gyan said yes.
 - Mr. Hoover asked if OVR can't take a customer, does UPMC go to outside sources. Mr. Gyan said the first referral must be to OVR, then they can go to the Medicaid waiver services, but the network isn't as strong as they'd like it to be.
- Lionel Waritay LTSS Behavioral Health & Collaborative Services, AmeriHealth Caritas
 - First step is edification for individuals receiving long-term services and supports who are interested in employment. Identification is done through service coordinators meeting with LTSS participants upon enrollment.
 - Second step is collaboration with OVR and other outside entities.
 - Third step is talking about different services that are provided, which are the same services Mr. Gyan spoke about.
 - AmeriHealth Caritas is also a large employer and they are looking at ways to attract top-quality candidates with disabilities for employment.
- Daniel Kleinmann PA Health & Wellness
 - Bureau of Labor & Statistics has recently published a report on persons with disabilities' labor force characteristics and the numbers have dropped to about 8.7% of people of employment age being unemployed. Two-thirds of people with disabilities aren't even seeking employment. These factors have led to more referrals to OVR.
 - $_{\odot}~$ PA Health & Wellness is looking at ways to make more employers serve the physical health community.

- Pilot program implemented in the southwest where pay rates have been raised with key providers.
- Target more partners in the state to talk about employment problems and solutions.
- Reducing unnecessary referrals to OVR by filtering people through WIPA services.
- Working on better tracking of customer success.
- Trying to partner with more provides across the state.
- PA Health & Wellness is consistently at 10% rate of employment for people with disabilities.
- Mr. Kiel asked if it is a priority to make sure these individuals are receiving full attendant care services along with case management. Mr. Kleinmann said this is taken very seriously and a person-centered planning system was developed to make sure everyone's needs are met. Mr. Kiel also asked if anything is being done to address lack of attendants. Mr. Gyan said one mandate of CHC is to train direct care workers. Mr. Kleinmann said they have also developed a partnership with SEIU to provide a pilot program to raise employment rates, which creates more money to attract more attendants.
- Mr. Drenth asked if there is a disincentive for people due to more income resulting in ineligibility for services. Mr. Kleinmann said it is a bit of an issue, but there are other waivers, not covered by these MCOs, that people can take advantage of.

Stakeholder Reports

PaRC

• Mr. Seeley said that David Mann, PaRC Chair, couldn't attend today's meeting, but there is no update aside from the written report.

SILC – Matt Seeley

 Mr. Seeley had no update aside from written report, but mentioned an issue with reimbursement policies. Individuals traveling within 50 miles get no lunch or travel reimbursement. He acknowledged that this is not an OVR policy, but wanted to bring it to the Secretary's attention. Secretary Oleksiak said he will report back to the people who oversee that policy to express Mr. Seeley's concerns.

ODHH – Melissa Hawkins

- Total of 2592 calls last year. January alone had 273+ calls.
- ODHH is working with PennDOT to produce driver identification cards to indicate that the individual is deaf or hard-of-hearing. If a driver gets pulled over and is unable to communicate effectively with the officer, they can get an interpreter or some other form of communication. These cards will be free of charge.
- Hearing Loss Expo will be held November 13-14.
- Continuing to work with OA to ensure accessibility is a priority throughout the Commonwealth. ODHH worked to make Governor Wolf's inauguration accessible by providing open captioning and an ASL interpreter.

CAP – Steve Pennington

- OVR has acknowledged that access to PETS cannot be restricted due to lack of resources and Mr. Hyde has agreed to include stakeholders and providers in the overhaul of the PETS program. Mr. Pennington wanted to confirm that it is OVR's commitment to include stakeholders and providers in the revision/reforming of the program. Mr. Hyde said that the process has started and an internal workgroup has been looking at the PETS model. All information collected so far will be shared with stakeholders and providers once it is available.
- Main area of concern with OOS is that everyone is labeled as MSD. Mr. Pennington's position on the subject is that closing OOS is not a solution and the definition of MSD needs to be changed.
- Recommended that the new ODP bulletin be reviewed, as it mentions a number of different ways individuals seeking waiver services can obtain supportive employment through ODP without having to go through OVR if OVR is unable to help.
- More pressure needs to be put on legislators to give OVR more money, as it doesn't stack up to the budget of DHS. Secretary Oleksiak said the Budget Office looks at what is available and stressed that they are receiving the same kinds of requests from other state agencies as well, and recommended that people get out there and advocate as much as possible.
- Mr. Drenth asked if a Board motion is required to have OVR look into redefining MSD. Secretary Oleksiak said it does not require a motion and that is already being looked at.

Standing Reports

BCO – Ryan Hyde

- BCO is losing both senior fiscal staff next week and is in the process of finding replacements.
- The Eastern Section 511 specialist has left so that position has also been posted.

HGAC – Jill Moriconi

- Ms. Moriconi was asked to provide the number of unique students that are served:
 - 739 in traditional center programs
 - o 776 in PETS
- There were some safety concerns at HGAC in February, but all the protocols in place proved effective and no one was in any eminent danger.
- A student from the New Castle DO, graduate of HGAC's Networking and Telecommunications program, scored so high that he was the state winner of Microsoft Office's certification exam. He was invited to Florida to compete at a national level in June. If he wins there, he will be invited to the world competition in New York in July.

BBVS – Stan Swaintek

• Clarification of evolution ILOB program and State/Federal match funding – ILOB has been funded through Social Security reimbursements for the past ten or so years, but that money may need to be used elsewhere now.

BVRS – Denise Verchimak

• No update aside from written report.

• Showed a brief video on the Early Reach program instead.

Public Comment

• None

Adjournment

- Secretary Oleksiak mentioned that the Board has lost two members and replacements are being requested.
- MOTION to adjourn
- Mr. Kiel moved, Mr. Drenth seconded.
- All in favor, none opposed motion carried.