

DDS West Region  
Advisory Council  
September 22, 2016  
**Minutes**

Ella Grasso Center,  
300 Armory Road, Stratford, CT  
4:00pm

Present: Sue Bastien, Charles Bergamo, Lori Chiappiniello, Marina Derman, Mickey Herbst,  
Sharon O'Neill (Public ARD), Arlene Steinfeld, Cindy Stramandinoli

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**Call to Order:**

Meeting called to order at 4:15 pm

**Approval of Minutes**

Chairman Bergamo made a motion to accept the Minutes; Several members seconded the motion. Minutes passed unanimously.

**Facebook Page**

Mr. Bergamo shared that the Facebook page is still a work in progress and he encouraged the membership to share information with him that they would like to see posted.

**Introductions**

The Council members each introduced themselves sharing brief information of their family members (i.e. age, residential, etc.).

**Review of Application for Membership**

Members of the Council reviewed the request from Ms. Susan Bastien who petitioned to become a member of the West Region Advisory Council. Ms. Derman expressed that Ms. Bastien would be a terrific addition to the Council. A motion to accept Ms. Bastien into the Council was made and several members of the Council voted yes. Ms. Bastien joined the group.

**Director's Report**

Sharon O'Neill attended the meeting in Fritz's absence. She shared that the Ella Grasso Center (EGC) is in the end stages of closing and should be finished by the end of September 2016. Individuals that reside at the EGC were offered alternative residential placements within the Hartford Regional Center (HRC)/Newington, Lower Fairfield Center (LFC)/Norwalk, Northwest Center (NWC)/Torrington, private sector ICF facilities, or Money Follows the Person. 30 individuals were impacted in the West Region. All of the individuals have new homes identified and will be moving soon.

There was a question about whether day programs would still be offered to these individuals and the answer was yes. The logistics of keeping some individuals in their same programs is being figured out. Some individuals may need to go to a different day program based on where they move.

Questions concerning the staff from EGC were answered. Staff that work at EGC will be briefly transferred to the individual's new home to allow for training and a smooth transition. The Human Resources office will discuss union rights with those affected by the closure.

Sharon explained the difference between the Public Division and the Private Division.

An inquiry concerning whether there are any lawsuits or injunctions is in place or being pursued because of the closure was asked. The answer is no.

There was a comment made that the national trend is moving toward privatization as it is most cost effective. This is the direction that Connecticut is moving in. There was also a concern mentioned that if the budget situation doesn't get better that the future of our regional centers could be in jeopardy. At this point, we have no further information on future closures. A comment was made that it would be sad to see any of the individuals have to move again if another closure occurs. Individuals that have been impacted by the EGC/Meriden closure have been offered the opportunity to go into a private ICF group home, but most have chosen to go to another regional center.

### **Other Topics**

Mr. Herbst brought up the discussion of a recent court ruling on Education. For purposes of explaining what Mr. Herbst was referring to, this excerpt is taken from the *The Connecticut Law Tribune*, "High Court Will Review Controversial Education Funding Ruling" by [Christian Nolan](#), September 20, 2016

Hartford Superior Court Judge Thomas Moukawsher issued his ruling Sept. 7 in the 11-year-old lawsuit. He opined that the state must fix its education system and develop a new funding formula within the next six months to ensure that the state's poorest school districts have enough resources to provide an adequate education.

As a result of this ruling, Mr. Herbst shared that a comment from a legal person close to the case feels that educating severely disabled individuals would be "fruitless". Members of the Council felt that those comments are unwarranted and insensitive to the disability community. The comment was not well-received by the Advisory Council.

### **Waiver Services**

Siobhan Morgan, Director of Waiver Services, attended the meeting to share information on the Medicaid Waiver. She explained that many of our individuals receive Medicare and Medicaid; these individuals are considered dually eligible. She shared that many of our individuals/families do not keep their Medicaid active. Medicaid covers many of the things that Medicare does not cover and serves as a secondary insurance. There are many of our individuals that are Medicaid eligible, but they don't apply. Staff in her division are consistently encouraging families to keep their Medicaid active as it serves as a dual coverage. Those that don't have Medicaid are highly advised to apply for it as items that are not covered by Medicare become the responsibility of the individual.

Siobhan reviewed income limits and what it takes to become eligible and remain eligible for the Waiver. Individuals that earn \$2,199 or less can apply. She explained that individuals can earn \$75,000 and have \$10,000 in assets and be on the waiver.

CT Medicaid income limits are \$523-\$633.00 depending where you live in CT and most of individuals served by DDS income from SSDI exceed these limits. <http://www.huskyhealth.com/hh/cwp/view.asp?a=3573&q=421548&hhNav=|#HUSKYC> She explained that the waiver technically waives the normal income rules.

The 1915(c) Medicaid waivers are one of many options available to states to allow the provision of long term care services in home and community based settings under the Medicaid Program. States can offer a variety of services under an HCBS Waiver program. Programs can provide a combination of standard medical services and non-medical services. Standard services included in CT Waivers but are not limited to: personal support, adult day health services, habilitation (CLA, CCH) and CRS and respite care. States can also propose "other" types of services that may assist in diverting and/or transitioning individuals from institutional settings into their homes and community.

The main benefit to the waiver participants in CT is the ability to waiver the income rules. Under the waiver the limit is 3x the SSI rate. This is important as many DDS participants are receiving SSDI benefits based on their parents' earnings; therefore, if we did not have the waiver they would not be eligible for Medicaid.

The ABLE Act was also briefly discussed. Connecticut does not have an ABLE Act; however, individuals in Connecticut can put up to \$14,000 of their funds into an ABLE account outside of the state of Connecticut.

Siobhan encouraged the group to read information located on the DSS website on: **Medicaid for Employees with Disabilities (MED-Connect): Accessing Medicaid Health Coverage While You Work**. She also referred to it as "SO5". This is the link: <http://www.ct.gov/dss/cwp/view.asp?A=2353&Q=305220>

Handouts were distributed to the group:

- Waiver Overview
- HCBS: Waivers Fact Sheet
- Community First Choice

### **Public Comments**

No public comment.

### **Next Meeting**

November 17, 2016 at 4:00pm, Ella Grasso Center