

Respite LTSS Central Work Group
October 13th, 2016
11:30-12:30
Kearney, Nebraska

Attendees: Tanya Williams, Peg Jensen, Sheri Mostek, Jeanette Denson, Jinx Hackler, Sherry Stansberry, Mary Carson, Vicki Anson, Mary Howell, Hayley Jelinek, Alexandra Dillon.

Peg Jensen began the discussion and asked if everyone had a chance to view the Long Term Care Services and Supports Power Point.

1. What issues do you see when it comes to using respite?

We need to simplify the process in becoming a provider. It would be better if all agencies could use the same background check. We need to be able to use the same provider for all programs. If we could possibly give providers the same accreditations across the state, this would be much more affordable. Members stated we could use a code approval, but we cannot make it too easy for everyone. When caregivers get approval for respite care it is hard to find providers. We need to have more providers available for children's behaviors. Caregivers have a hard time contacting a provider and finding help.

The system now is confusing, if agencies do not understand it, how can the average person? When clients receive approval for services, no one tells them to apply for other services they could possibly be eligible for. The Access Nebraska system is very confusing. It should be the programs responsibility to let people know what they could possibly qualify for. The Foster Grandparent program pays \$150-\$250 to read to children.

2. What needs do you see in improving the navigation of the respite system?

Members stated the CNCAP website is difficult to find forms. One member suggested using something like the 211-putting in a zip code to find information. Nebraska was the last state to pilot the ARDC resources, now we have to keep it up to date. Members stated that the Spousal Impoverishment information is rarely given out.

3. What ways do you see in connecting to programs that best fit the clients respite needs?

People have stated it is difficult to enroll. Suggestions made were the elderly do not know what services are available for them. There are too many abbreviations. Most people do not know how to apply for services and they wait until their money is gone as it takes 45 days for approval. A brochure should be developed that could be given to people for basic questions, as when should I apply, what documents will I need, where do I go to apply, and who can help me if I do not have a computer?

One caregiver replied by letter stating, "I hope if any programs ever get cut, respite is not one of them for all of the people that need a break". "Respite is greatly appreciated for three days a month and is wonderful". "I am lucky to have a woman who will come to my house and stay overnight".

4. How do we need to streamline LTSS so they are easily accessible?

Our main focus should be on Medicaid. The assisted living program needs to streamline the billing, instead of sending documents for correction which may take 2-3 months. Suggestions were, could it just be deleted and then we could send another one online? This would speed up the process.

The Home Care program concerns were the PAS are unable to monitor caregivers except by phone. The billing is difficult to get signatures when going to homes 60 miles away one time per week.

Services for Mothers with children are they are unable to get jobs because they can get more money by staying home. Why isn't there money available for people to want to work instead of losing their services when starting to work full time? The State of Nebraska gives most of the money to the Developmental Disabilities program.

5. What would you like to see offered regarding respite?

One member stated she had to choose a Medicaid Plan for her mother. The facility did not know which one to pick. Her mother's doctor called the caseworker for information. She was instructed to call the Broker and now has the information. She still has 90 days to change the plan. Members suggested do not sign up for managed care. This process is frightening for families.

We also did a survey and a few of their results are:

What do *you think of Long Term care Redesign?*

- *It needs to be done*
- *I think the program could use some improvements, but there are concerns of going to managed care for the waiver programs.*
- *I would need more information*
- *Despite DHHS' extensive efforts to educate the public about the goals and opportunities, many people who are directly and indirectly impacted by the decisions do not understand its purpose.*
- *I already have fears the needs of the consumers will not be considered as highly as the profits to the providers.*
- *As a parent of a now adult child on the AD Waiver, it worries me greatly*
- *I do not know what it is.*

Everyone is interested in attending a meeting and majority would do a conference call
During this survey we found out that some individuals feel they need more information and a few felt that the Redesign is needed.