<table>
<thead>
<tr>
<th>NAME</th>
<th>MEMBERSHIP CATEGORY</th>
<th>TERM EXPIRATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elizabeth Archuleta</td>
<td>(1) Parent/Guardian of a Child under 18 with a Developmental Disability</td>
<td>01.01.2017</td>
</tr>
<tr>
<td>Linda S. Mecham</td>
<td>(2) Parent/Guardian of a Child 18 years or older with a Developmental Disability</td>
<td>01.01.2017</td>
</tr>
<tr>
<td>(VACANT)</td>
<td>(3) Parent of a Child Served through the Arizona Early Intervention Program (AzEIP)</td>
<td>TBD</td>
</tr>
<tr>
<td>(VACANT)</td>
<td>(4) Private Sector Agency Provider of In-Home Services</td>
<td>TBD</td>
</tr>
<tr>
<td>Richard P. Hargrove</td>
<td>(5a) One of two members of the Private Sector: Provider of Residential Services Representative</td>
<td>01.01.2016</td>
</tr>
<tr>
<td>Gina K. Judy</td>
<td>(5b) One of two members of the Private Sector: Provider of Adult Day Services Representative</td>
<td>01.01.2017</td>
</tr>
<tr>
<td>Carrie L. Raabe</td>
<td>(6a) One of two Members with a Developmental Disability who Receive Services from the Division</td>
<td>01.01.2017</td>
</tr>
<tr>
<td>Michael V. Williams</td>
<td>(6b) One of two Members with a Developmental Disability who Receive Services from the Division</td>
<td>01.01.2018</td>
</tr>
<tr>
<td>(VACANT)</td>
<td>(7a) One of two Members each Representing a Different Developmental Disability Advocacy Organization</td>
<td>TBD</td>
</tr>
<tr>
<td>(VACANT)</td>
<td>(7b) One of two Members each Representing a Different Developmental Disability Advocacy Organization</td>
<td>TBD</td>
</tr>
<tr>
<td>Renaldo Fowler</td>
<td>(8) Designated Protection and Advocacy Organization Representative</td>
<td>01.01.2017</td>
</tr>
<tr>
<td>Jill R. Ryan</td>
<td>(9) Nonprofit Providing Direct Advocacy Representative</td>
<td>01.01.2018</td>
</tr>
<tr>
<td>Virginia Rountree</td>
<td>(10) Director (or designee) of the AZ Health Care Cost Containment System (AHCCCS)</td>
<td>Non-Voting</td>
</tr>
<tr>
<td>Dr. Laura Love</td>
<td>(11) Assistant Director of the Division of Developmental Disabilities</td>
<td>Non-Voting</td>
</tr>
<tr>
<td>(VACANT)</td>
<td>(12) Developmental Disabilities Planning Council Member</td>
<td>TBD</td>
</tr>
<tr>
<td>(VACANT)</td>
<td>(13) Foster Parent Representative</td>
<td>TBD</td>
</tr>
<tr>
<td>Karen L. Van Epps</td>
<td>(14) Human Rights Committee Member</td>
<td>01.01.2018</td>
</tr>
</tbody>
</table>
36-553. Developmental disabilities advisory council; membership; duties

A. The developmental disabilities advisory council is established consisting of the following members:

1. One parent or guardian of a child who is under the age of eighteen years and who is developmentally disabled.

2. One parent or guardian of a child who is eighteen years of age or older and who is developmentally disabled.

3. One parent of a child who is served through the Arizona early intervention program.

4. One member of the private sector who represents an agency that is certified to provide in-home services to persons with developmental disabilities.

5. Two members of the private sector who are contracted with the division to deliver services to persons with developmental disabilities, one who represents a provider of residential services and one who represents a provider of adult day services including employment services.

6. Two members with a developmental disability who receive services from the division.

7. Two members each representing a different developmental disability advocacy organization.

8. One member from the designated protection and advocacy organization.

9. A member representing a nonprofit organization providing direct advocacy to families with developmentally disabled children.

10. The director of the Arizona health care cost containment system administration or the director's designee. This person is a nonvoting member.

11. The assistant director of the division of developmental disabilities. This person is a nonvoting member.

12. One member from the developmental disabilities planning council.

13. One member representing foster parents of children with developmental disabilities.

14. One member from the human rights committee on the developmentally disabled established by section 41-3801.

B. The governor shall appoint all voting members. Voting members and their families shall not be employees of the department of economic security. In making these appointments the governor shall select at least five members who are clients or guardians, parents or other family members of persons with developmental disabilities. One of these five voting members shall represent a person who is eligible for long-term care services pursuant to chapter 29, article 2 of this title. The governor shall also consider geographic representation in making these appointments.

C. Council members appointed pursuant to subsection A, paragraphs 1 through 9 and 13 and 14 of this section shall serve staggered three year terms. No members may serve more than two full terms. A vacancy occurring on the council shall be filled by the governor appointing another qualified person to serve the remainder of the term.
D. The council chairman shall be chosen annually by a majority vote of the council. A majority of voting council members constitutes a quorum.

E. The council shall meet in each district at least once a year.

F. The division must allow the council to review new policies and major policy changes before the division submits the policies or changes for public comment.

G. The council shall review auditor general reports regarding the division and services provided by the department of health services.

H. Council members are not eligible to receive compensation, but council members appointed pursuant to subsection A, paragraphs 1 through 9 and 13 and 14 of this section are eligible to receive reimbursement of expenses pursuant to title 38, chapter 4, article 2.

I. The council shall review and make recommendations to the division regarding:
   1. Coordinating and integrating services provided by state agencies and providers that have contracted with state agencies to provide developmental disability programs.
   2. The health, safety, welfare and legal rights of persons with developmental disabilities.
   3. The division's plan for service delivery and improvement.
   4. Establishing and reviewing division policies and programs.
   5. The cost-effectiveness of division services.
   6. Assessing the division's annual needs.
   7. Selecting the assistant director of the division.
   8. Monitoring the division's annual budget.
   9. The sale or lease of the real property and improvements on the real property formerly used by the department of economic security for the Arizona training program in Phoenix.

J. The council shall oversee and approve expenditures of monies from the developmentally disabled client services trust fund established in section 36-572 following expenditure guidelines established by the council.

K. The council shall provide the public with an opportunity to address the council at regularly publicized meetings.

L. The council shall submit an annual report of activities to the director, the governor, the president of the senate and the speaker of the house of representatives by December 31 of each year.

M. The department shall make meeting space available to the developmental disabilities advisory council at locations and times convenient to the council and shall provide secretarial and other staff support.
This Annual Report is generated and based upon the DDAC Meeting Minutes for the 2016 Year. Each Member of the Advisory Council has a unique perspective, based upon the Council Member’s Area of Representation, and has given The Department of Economic Security’s Assistant Director, Dr. Laura Love, information and counsel, per that perspective.

**Issues Identified by the Council**

Membership on the DDAC continues to be an issue. Even though applications have been submitted to “Boards and Commissions”, the approvals have not been made, despite continual calls to that office. Because the DDAC Bylaws allow the Council to hold meetings with a majority present of those who are appointed, we can continue to operate. However, the Council would be more effective if all positions were approved and filled.

Following a Work Group’s recommendation, the DDAC presented updated Bylaws to the Attorney General for Review and Approval. The Attorney General reviewed, made minimal corrections, and the DDAC voted to Approve and Implement the Bylaws. Public Forums were held in the Casa Grande (2/16/2016) and Winslow (6/18/2016). The Families and Support Staff who attended could express their needs and concerns to DDD Staff in order to facilitate a positive outcome.

Per 36-553, J. The council shall oversee and approve expenditures of monies from the developmentally disabled client services trust fund established in section 36-572 following expenditure guidelines established by the council. During the 2016 Year, the Client Services Trust Fund received 137 Applications. A Sub-Committee from the Council reviewed the Applications. Based on established guidelines, 34 Applications were approved, and $35,032.87 was awarded.

Per 36-553, F. The division must allow the council to review new policies and major policy changes before the division submits the policies or changes for public comment. A DDD Representative from “Policy” was invited to the DDAC Meetings to explain changes in policy, the reason for the policy change, and the impact the changes may have on Members. Because of some confusion and misunderstanding, it was also clarified that policy changes will go to the DDAC first for review and then posted online for 30 days for public comment. Comments may be submitted at any time, through Policy Mailbox at DDPolicy@azdes.gov.

The status of Providers throughout the state was a continual area of discussion, specifically focusing on the rural areas. How many children have not yet been evaluated for DDD services? What is the unmet need in terms of therapies, as well as therapies that are not being met because of a shortage of providers? This is an issue the DDAC will continue to focus on.

One focus for Providers deals with shutting down specific service areas because of the lack of financial increase from the Budget. The increase scheduled for next year (2017) is minimal. Providers are working with each other to develop strategies to maintain
services, especially in the rural areas, including: no increase in the number of Members served and salary freezes, which could bring about possible lawsuits because of the implementation of the new Department of Labor laws. AHCCCS is aware of the struggles that Providers are having. It is being looked at, evaluated and assessed in terms of rates. The new minimum wage will also affect funding.

A second focus for Providers is the way Group Homes will be funded in the future. AHCCCS has asked DDD to review the rate structure for Group Homes, and will be reviewing the possibility of going to a “per member” rate instead of “per home occupancy” rate.

Families are not receiving reimbursement from the Customer Service Department of Medical Transportation Brokerage of Arizona in a timely manner. The length of time for transportation reimbursement is about 6 months. Questions that were asked: When does the Medical Transportation Brokerage of Arizona’s RFP end? If there is going to be a renewed RFP, it would be appropriate for this Council to have input into that RFP. Does the Medical Transportation Brokerage contract solely with United Health Care? Would it be possible to have another transportation provider? It would also be good to get the transportation division of United Health Care to present their processes and protocol for reimbursements and participation for transportation to this Council to more fully understand the structure and arrangement.

DDD is tracking children who are in both the DDD and DCS systems by updating protocols with DCS. DDD will continue to provide training for DCS workers. Designated mailboxes have been created for DCS to send DDD referrals. Per the protocols, DCS is to keep DDD updated when a DDD child is moved in order to avoid disruption of services. DDD is also making efforts to put those children in DDD settings, as well as opening it up to put siblings in DDD settings. DDD is using vocational rehabilitation money with matching federal dollars for DDD foster children graduating from high school and transitioning to employment.

Eligibility: The waiting time for families to get Eligibility is longer than is allowed per Administrative Code R661801, which addresses due process, including the right to administrative review and a response within 30 calendar days of request. Failure to comply with this timeline is a denial of rights.

The “90 Day ISP” and the “Annual ISP Focus Date” was a confusing issue, including questions of, “Are there to be five 90-day meetings per year; or are the meetings to be held every 72 days or 90 days?” In addition, the location of the ISP Meeting was an issue, especially if the only Service the Member received was a DTA. Policy changes were made to align with AHCCCS, and the issues were resolved.

The “Supervisor Level” was addressed as an area of concern, especially as it related to problems with approval of services. Dr. Love noted that DDD is looking at duplicitous levels to “Lean” and make the review and approval process more efficient as well as empower the local worker. The DDAC concern is that many issues Members have experienced difficulty at the Supervisor level. Members and their advocates are unable to obtain needed approvals and, consequently, services, because most Members/Families/Advocates do not know the proper procedure for elevating an issue to the next level for resolution within DDD.
ATPC—Representatives of the parents and friends group of ATPC, the Arizona Training Program at Coolidge presented an overview of their concerns about the proposed closure of the group homes on the campus and the institution. The group fears that movement of the Members who have lived at the facility for most of their lives will have a negative impact and there was no realistic plan presented to move these Members. The Representatives met with Director Jeffries and Dr. Laura Love, but there was nothing further proposed to the group.

The usefulness of The Arc Monitoring has been questioned by the Human Rights Committees as it is currently being administered. The Contract refers to the necessity of at least 2 monitors at each visit. There has only been one. The Contract refers to The Arc Residential Committee that will review the monitoring. There is nothing that indicates this has happened. The Human Rights Committees, which are to receive the reports, have not been receiving them. Previously, Arc monitors were volunteers. Currently, DDD pays The Arc which negates the purpose of the outside oversight. Human Rights Committees would like for DDD to carefully review what The Arc contract demands. The concern is that this type of monitoring is just an “add-on” to the monitoring that DDD already does in Group Homes.

DDD Members who have a dual diagnosis of Behavioral Health and DDD issues are often not receiving needed services—especially Mental Health. Mental Health does not have residential services for dually diagnosed members. Qualified Vendors and Direct Care Workers do not have the training for such complex Members. Since DDD and RHBA’s are both contractors of AHCCCS, it has been suggested that such a dual program should be established.

Several issues were identified regarding the Client Funds:

When a Member is working, and earns a pay check, and if DDD is the Payee, DDD requested that the Member’s pay check be sent to Client Funds in order to track the amount the Member was actually earning. Because receiving and cashing a paycheck is such a rewarding experience for the Member, the HRC’s suggested there are other ways to track a Member’s earnings such as making a copy of the check and sending it in, use of the paycheck stubs, and the use of 1099’s which are sent out each year. Social Security only needs to know the amount (per an SSA Administrator).

Through the Program Review Committee, HRC’s consistently find that Member Accounts accumulating over $2000 are not monitored regularly by Support Coordinators. In addition, spend down checks have been sent to Providers without Team Approval or any team discussion regarding the Member’s needs and how to ensure the funds spent are in the Member’s best interests.

Requests for client funds are often problematic. Funds are requested for specific appointments (such as dental), but are not dispersed. Support coordinators insist they submitted requests and Client Funds report the requests were not received. Because the funds are not dispersed, the Member suffers because appointments must be cancelled. This needs to be resolved.

In addition, there have been on-going issues with the Member receiving the funds from the allotted ISP approved allowances on a regular and timely basis, which results in the Member not getting a haircut, going on an outing, etc. Also, when receipts are sent in, they are often lost, which results in reimbursements not being made in a timely manner. Again, the Member is the one who suffers.
Members who are served residually in the past could request hardship funds for dental services when applying for the Client Service Trust Fund money. We have now learned that hardship funds are not being granted by DDD.

Protection of voting access as it affects persons with disabilities: Information was sent to Providers because this is a population that has not previously been included in the process. The Center for Disability Law worked with DDD in order to provide information to members/families regarding voting rights. This effort is designed to get young voters with disabilities motivated.

Dr. Love reported the findings of the AHCCCS Operational Review: In 2014, there were 72 findings in which the Division was 47% compliant with ALTCS requirements. Since that Review, the Division created a Compliance Unit to address the deficiencies. In June 2016, AHCCCS conducted another review and identified 26 findings. Corrective Action Plans will be developed for each finding. The Division has 6 months to make corrections. If not corrected within this timeframe, the Division could be financially penalized or put on Corrective Action.

Respectfully Submitted,

Linda S. Mecham

Linda S. Mecham
2016-2017 Chairperson