

2024 Advocacy Priorities

Conflict-Free Case Management

BPHASA (Behavioral, Physical Health, and Aging Services Administration) has released the implementation plan and models to meet the rules for Conflict-Free Case Management. The Arc Michigan will continue to monitor the activity around this issue.

Direct Care Workers (DCWs)

The Direct Care Workforce crisis continues to be a pain-point for many individuals living with disabilities and their family members. The Arc Michigan continues to prioritize advocating for increased compensation for this workforce, as they are the ones who continue to serve as the backbone to our state's behavioral health system, by supporting, empowering, and caring for our most vulnerable.

The Arc Michigan continues to facilitate a <u>coalition</u> consisting of 14 state-wide disability advocacy agencies as well as disability service provider organizations that focuses on increasing state Medicaid funding to offer higher wages for direct care workers. In Michigan, DCWs bring home very small paychecks, and often have no benefits. While direct care workers received a \$0.85 per hour wage increase in 2023, in addition to maintaining the \$2.35 during the pandemic, *the average starting wage of a DCW in 2023 is still only \$15.72 per hour.*

DCW Wage Coalition's current efforts include:

- Urging our state lawmakers to increase DCW wages to a \$20/hour starting wage for the state's 50,000 DCWs who work within the behavioral health system. This would require a total general fund budget expenditure of \$200 million in the Fiscal Year 2025 state budget. See our coalition's full position statement <u>here</u>.
- Recommending that the Michigan Department of Health and Human Services (MDHHS) establish uniform contractual standards for behavioral health providers funded through the Prepaid Inpatient Health Plan (PIHP)/Community Mental Health Services Program (CMHSP) system. These standards should

include uniform training requirements and reciprocity, claims and billing procedures, quality assurance standards, record retention requirements, documentation of services provided including progress notes, and audit requirements. A full list of our administrative efficiencies can be found <u>here</u>.

In addition to facilitating the Wage Coalition, The Arc Michigan also actively participates in the State of Michigan's Direct Care Workforce Advisory Committee, Care Can't Wait Michigan and the Olmstead Coalition to advocate for and support DCWs.

Education

It is important that The Arc Michigan Education Committee is aware of and provides input when changes to Michigan Administrative Rules for Special Education (MARSE) or education legislation is proposed that impacts students with disabilities.

- The Education Committee discusses relevant education topics, including reviewing and studying Michigan Department of Education, Office of Special Education guidance, proposed changes to the Michigan Administrative Rules for Special Education (MARSE), and proposed education legislation. The committee provides public comment as appropriate. The committee develops and updates The Arc Michigan Position Statements related to education. Committee members share the above information with their organizations to further advocacy efforts. <u>https://arcmi.org/public-policy/education-committee/</u>
- The Arc Michigan received a grant in Fiscal Year 2023 from MDHHS to provide <u>Foster Care Disability Navigation</u> for students with a disability experiencing foster care. Local Arc chapters are contracted to provide these direct services across the state. Through intensive outreach, the program is continuing to expand and support more students across the state, although the grant funding ends at the end of this fiscal year. To continue this program, we are working hard to find longterm sustainable solutions to maintain a level of external Foster Care Disability Navigation for this marginalized population.

Person-Centered Planning, Self-Determination, Independent Facilitation

Inconsistency in access to, and implementation of, Person and Family-Centered Planning, Self-Directed Service Arrangements and Independent Facilitation must be addressed by MDHHS. The Arc supports a statewide effort aimed at improving current systems, as well as improving individual/family experiences for those served within the Public Behavioral Health System.

- The Arc Michigan <u>interviews</u> people with disabilities and family members about their experience with person-centered planning during the MDHHS site reviews to improve services at CMHSPs.
- We facilitate <u>Partners Advancing Self-Determination</u>.
- Arc Michigan staff also maintain the Person-Centered Planning & Self-Determination <u>Help Desk</u> which answers questions people may have about selfdirected services and person-centered planning.
- Arc Michigan staff participate in the MDHHS Independent Facilitation Workgroup, which is an effort to further use of Independent Facilitation across Michigan through policy change and training.
- Arc Michigan staff participate in the MDHHS Self-Determination Design Team, which is an effort to improve Self-Directed practices across programs under MDHHS.
- Additionally, the Arc Michigan helps to plan MDHHS' annual Self-Determination Conference.

Regional Entity Status Change

The ten Prepaid Inpatient Health Plans (PIHPS), the managed care entities responsible for distributing Medicaid to the forty-six community mental health services providers (CMHSPS) and enforcement of state and federal rules, regulations, statutes, and contract provisions were formed under the regional entity statute section of the Mental Health Code, 330.1204(b).

- The boards of directors of the PIHPs are populated with board members from the community mental health services providers who comprise the PIHP. This constitutes a conflict of interest in light of the role of the PIHP. The board structure of the PIHPS needs to be revised so that the majority of board members are not CMHSP board members.
- The Arc Michigan and partner organizations are working to make this change in the PIHP Boards of Directors.

Statewide Service Discrepancies

The state-funded behavioral health system **must eliminate statewide discrepancies in the availability of services and supports**. Where you live cannot determine the quality or scope of services and supports. Significant inequalities across the state are found in person-centered and family-driven/youth-guided planning, self-directed services and supports, and criteria for priority service and CMHSP pre-admission screening determinations. Existing discrepancies must be eradicated for statewide equity and quality.

- The Arc Michigan participates in a Statewide Advocacy Group that is focused on this issue, and data will continue to be collected during site reviews.
- The Arc Michigan is monitoring developments at MDHHS (Michigan Department of Health and Human Services) and its Executive Director meets monthly with staff from BPHASA.

Supported Decision-Making

Far too often guardianship is granted in the courts of our state as a matter of course when no evidence of a need for guardianship has been presented or argued.

- The Arc Michigan will actively support legislation requiring a finding on the record of the necessity of guardianship before a guardian can be appointed and that the record shows the court has considered whether the individual's needs may be met without the appointment of a guardian through other supports, services, and alternatives.
- We will work with Guardianship Diversion Committee of the Elder Abuse Task Force to develop a process that will provide information and support, when a petition for guardianship is filed with the court, to assist with putting in place needed supports, services, and/or any other alternatives available to the individual, that would eliminate the necessity for guardianship.
- To implement actions, and engage services, which are consistent with a person's wants and needs, a Guardian must meet regularly with their ward to ask, see for themselves, and establish what those wants and needs are.
 - ✓ The Arc Michigan will actively support legislation requiring mandated regular meetings between guardians and their wards.
- People with Developmental Disabilities deserve equal treatment under the law. The current laws of the <u>Mental Health Code</u>, under which most guardianships for people with developmental disabilities fall, does not provide the same protections that people receive under <u>Estates and Protected Individuals Code</u> (EPIC).

✓ We will advocate for parity between the laws of guardians EPIC and under the Mental Health Code.

Issues We Monitor

Home Help and Electronic Visit Verification

Home Help is the Medicaid State Plan Personal Care Program that provides in home services to those who qualify for assistance with Activities of Daily Living (ADLs), which include: eating or feeding, using the bathroom, bathing, grooming, dressing, transferring, and mobility. If the individual qualifies for assistance with ADLs, then they may also get assistance with Instrumental Activities of Daily Living (IADLs), which are: taking medication, meal preparation, laundry, housework, and shopping.

• We will continue to advocate for closing wage disparities between individual direct care workers (DCW) in Home Help and those providing supports and services in other Medicaid funded programs.

The Electronic Visit Verification (EVV) process is underway in the state. The Cures Act, enacted by the U.S. Congress in 2016, added Section 1903(I) to the Social Security Act to require all states to use EVV for Personal Care Services (PCS) provided under a Medicaid State Plan. EVV is a technology-based application that intended to be used to validate that PCS have been completed for an authorized beneficiary.

- We have continued monitoring its roll out and are advocating for those who it will directly impact to ensure ease of use, accuracy, flexibility, and accessibility.
- We have urged MDHHS to exempt specific groups from EVV, especially live-in family caregivers who provide Home Help in their private home as it is not realistic or person-centered to demand family caregivers to track their Home Help tasks daily on an app. Recommendation #3 <u>here</u> also has further suggestions.

Funding

Our public mental health system is underfunded. Additionally, state law requires CMHSPs to be the safety net for persons who have nowhere else to turn and those who have no insurance. The current system leaves many non-Medicaid individuals with unmet needs, they are not given the proper consideration for eligibility, are placed on waiting lists, and left without services or assistance from anyone. An increase in general fund dollars and working to **ensure sufficient funding** for our public mental health system must be a priority.

Supplemental Security Income (SSI)

Currently individual SSI recipients may not have more than \$2,000 in assets. An SSI eligible couple may have no more than \$3,000 in assets. Asset limits have not been raised since 1989, and that increase only partially offset the effects of inflation up to that point. These asset limits do not allow people to save for the kinds of emergencies we all face, like having to move, or a furnace that needs to be replaced, or even some auto repairs.

Currently individuals receiving SSI get a Federal Benefit Rate of \$943 per month. An amount that is below the federal poverty rate and would not even cover rent in many areas of the state. A couple who both qualify for SSI get \$1,415 a month, or about 1 and a half times the individual rate.

- We will continue to support the advocacy work of the Arc of the US to pass legislation such as the <u>SSI Restoration Act</u>, which would do many things to bring this important support system up to date, including:
 - ✓ Increasing the asset limit to \$10,000 for an individual and \$20,000 for a couple.
 - Raising the Federal Benefit Rate by about 31% to make it equal with the federal poverty rate, and index increases to inflation.
 - Making the rate for couples twice the individual rate, eliminating the marriage penalty for an eligible couple.

Waiver Renewals

Michigan's Waivers are up for renewal this year.

• The Arc Michigan will follow the progress, offer to assist, and provide comments for any drafts provided. If we are not allowed to participate in the process, The Arc Michigan will provide comments during the public comment period.