

**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

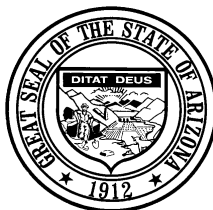
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Attendance

Present:

- **Linda Mecham** (District Central Committee Chairperson)
- **De Freedman** (District West Chairperson)(Facilitator)
- **Suzanne Hessman** (District East Chairperson)
- **Bernadine Henderson** (District West Vice-Chairperson)
- **Keith Jansen** (District South Chairperson)
- **Don Harrington** (District North Chairperson)
- **Kin Counts** (District East Member and DDAC member)
- **Jeffery Yamamoto** (Division of Developmental Disabilities (DDD) IOC Liaison)
- **Zane Garcia-Ramadan** (Assistant Director of DDD)
- **Leah Gibbs** (DDD Office of Individual and Family Affairs (OIFA) Bureau Chief)
- **Barb Picone** (DDD Office of Individual and Family Affairs (OIFA) Manager)
- **Joan McQuade** (DDD OIFA/Chief advocate)
- **Michelle Rademacher** (DDD IOC Liaison)
- **Patricia Sandino** (DDD DC PRC Chair)
- **Larry Allen** (ADOA Manager)

This editable transcript was computer generated and might contain errors. Liaison has edited some of the transcript for accuracy and ease of reading. Any blue italics transcription was missed by the transcriber.



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**DDD Quarterly Statewide IOC Chairs meeting
(2023-04-19 10:06 GMT-7) - Transcript**

Attendees

Barbara Picone, Bernadine Henderson, Diedra Freedman, Don Harrington, Jeffrey Yamamoto, Joan McQuade, Keith Jansen, Kin Counts, Lawrence Allen, Leah Gibbs, Linda Mecham, Michelle Rademacher, Patricia Sandino, Suzie Hessman, Zane Garcia Ramadan

Transcript

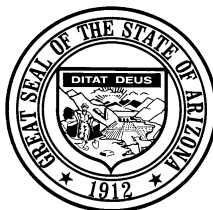
Call to Order

Diedra Freedman: Okay. This session of the DDD Independent Oversight, Committee Statewide Meeting is now called to Order. The date is April. 19th 2023 and my clock says it is 10:07 am.

Diedra Freedman: I have a statement on disclosure that we've been asked to read "Do have anyone that has to disclose a conflict of interest? if there is, we ask that the committee member disclose why". Does anybody have any conflict of interest that they need to disclose? I'm not seeing any conflict of interest. And we don't vote. So, you wouldn't have to abstain from voting, But I guess you'd have to just you'd have to abstain from a discussion if there was a conflict. And we are ready for our Agenda Item "District updates".

District Updates

Diedra Freedman: District Central. Do you have an update for us, Linda?



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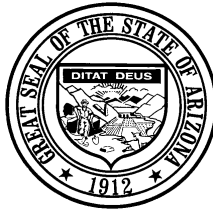
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Linda Mecham: Yeah, we are probably going to be losing a couple of members here in the near future, so we need to have some serious recruitment done. And I'm wondering who is in charge of doing that for us. Is there some, can someone answer that for me? Barb.

Barbara Picone: Oh, I was gonna say Liz Perez is on our team and she is responsible for recruitment. So, if we need to meet and talk about some individualized recruitment for District Central, we can absolutely do that.

Linda Mecham: Okay, we do have a need, and as you may or may not know Sherry Wilhelmi passed away a couple of weeks ago and so now, we've had two deaths and Carol's getting ready to retire. And so, we were down a few numbers. So, we just need that. And Sherry, just for your information, Sherry's celebration of life is going to be held Saturday, April 29th and I will send out an email to that effect to those of you that might like to attend and celebrate, she's been a real force to be reckoned with in the DD world. I'm sorry she was my vice-chairs. We worked pretty closely together. but she started out in high school at the Facility in Phoenix. And that was where she met Jose Palomino. Who got her involved with all the DD stuff. She met Karen Van Epps, who also passed away. um because Karen and her mother walked into the facility and said, "We're here to shut you down", doesn't that just sound like Karen and that was of course when the lawsuit had been passed it went through and so they were getting ready to close down the facility and that's how they got involved in that. And Sherry's been involved ever since she has been a foster mom to so many kids, she fussed. She would, one member on our committee works for an at-risk, just school, district in South Phoenix, and Sherry was a foster mom to a lot of those students there just to make sure that they had clothing and pencils and paper and whatever they need her, heart was just as big as her mouth, which could sometimes be offensive, but we loved her anyway. She said What a lot of us wanted to say but couldn't and so she will be missed, and District Central needs some new blood and um, we have We're kind of struggling to be honest with getting the incident reports read and were pretty good at attending PRC. I do it probably six, seven, eight times a month and I have another member that does it a couple of times and so we got the incident reports going again and It's just since Karen passed away. It's just been us getting reorganized. So, we're up and about and that's about it for District Central. Thank you.

00:05:00



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Diedra Freedman: Suzie, District East.

Suzie Hessman: Um, we are doing pretty well. The one pain point we have is PRC, we had Kin who was doing that, and she has decided not to anymore because it was overwhelming. I think it's a lot for one person to do. I think the rest of our committee everybody works full-time. So, it's difficult to cover those PRC meetings. So as far as recruitment is concerned, we need some retired volunteers who can do those meetings. So, otherwise, I think our committee's doing really well. We're staying on top of the IRs and have good involvement in our meetings and have appreciated all the people that are able to attend since we're doing them on these Google meets. So, Yeah, that's it for us.

Diedra Freedman: Thanks, Suzie before you joined us. We talked about whether or not this meeting because it's during the day, is the most convenient. So, we're going to talk about that as item 12, when we discussed the next meeting date and facilitator. So, if it's an issue for you or anybody from District East because you are working full-time, We can. I'm very amenable to looking at a different time. I don't know why the meeting is at this time of the day, but it's our meeting. So, we can have it. Whatever works for us.

Diedra Freedman: Don, from the North.

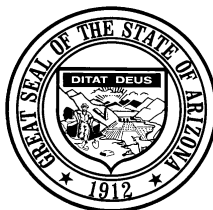
Don Harrington: We are struggling. We have two members, me and one other. And she's not the most consistent person in the world but that's okay. We are doing the best we can with the IRs. And other than that, you know, it's going. "All right", I feel.

Diedra Freedman: Okay. And Don, I don't know if you heard Barbara Picone had offered to have a meeting with Liz. Perez the volunteer coordinator with Linda in the District Central crew, I'll bet you she would extend that same invite to District North so that you guys could get a quorum.

Don Harrington: Absolutely. I would, I would love to help you out. Anyway, I can, um, I enjoyed the last volunteer event we had and don't mind doing it again.

Barbara Picone: Thank you, John. I'll connect with you too.

Don Harrington: Okay.



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Diedra Freedman: District South, Keith.

Keith Jansen: District South has all the IRs done. We have made all our PRC meetings. If somebody needs somebody to attend a PRC in their district. You know, they could if they asked me. I'll cover. I'm just a reservist, so not on full active duty. We got four people but we're still slugging on. The advantage we have with the four people is we are spread out all over our district. Which keeps us in touch all over our district. And by doing that, I let some of our superiors know that in Sierra Vista they just opened a behavioral health center. first one ever down in this district, And it's from one of the gentlemen that talked yesterday from Chiricahua Health. They have their main building and then off to the side is another building. So, it's a totally separate building and it has its own specialized staff, and they actually do house calls and stuff like that. So, I let the state know if they couldn't get a hold of state personnel. They could contact your account health and maybe get something rolling with them so just trying to help out. you know, the clients we have in the district and make sure that they have other assets available just in case.

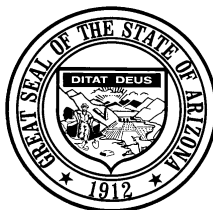
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Diedra Freedman: Okay. And Bern, do you want to give the update for District West, or do you want me to do it?

Diedra Freedman: I assume I'm doing it, OK, that's fine. In District West, luckily, we have Bernadine Henderson who does PRC for us, we have a new member Crystal Fox whom I introduced to a few of you at yesterday's lunch. Crystal is a Psychiatric nurse who spent 30 years working at ASH, she's retired from the state. but she's young enough so that she's still working at a private psychiatric hospital, and she's very interested in participating in the program review committee and is just an amazing asset to our committee. Our new member Diane. I'm going to mess up her name and I don't have any excuse but it's. It's Cocolino. Is that what it is? Michelle.

Michelle Rademacher: I believe so, Concolino.

Diedra Freedman: Okay, Diane is a retired, former CPS Investigator, CPS/DCS investigator, and APS Investigator. so, she's also very interested in PRC although she hasn't started to review the reports yet. But she's reviewing the incident reports and she's a great asset. So, we're up to eight members. In District



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West. They're all strong professionals who bring a lot to the table. We have seven more to go so my goal when I retire, which hopefully is happening in four to six years, is that I leave a 15-member committee behind. So, I don't have to worry about the IOC, any longer. And of course, as Leah and Barbara, and Michelle know the majority of our members are very concerned about policy issues, we continue to advise on those, and we continue to ask plenty of questions.

Diedra Freedman: So, the next item on the agenda is the discussion about the volunteer appreciation event. Keith, you asked for this. Do you want to give us an update? Please.

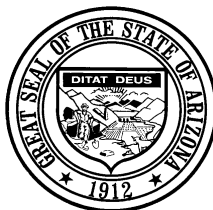
Discussion on Volunteer Appreciation Event

Keith Jansen: Yes, it was very much appreciated, the people I talked to you know, especially the volunteers were appreciative of it, and you know it is the First Annual. So, You know, going on they can say second annual, third annual whatever, and hopefully continue doing it. One of the things that several people said could improve it is at the end or at some time, give everybody an after-action report, you know, a questionnaire. You know what could have made it better? Because there were some suggestions I heard and there was no way to voice them. so, if they put out an after-action report, you know, said, Hey, tell us what you thought of this. And how can we make it better for next year for the, you know? Hopefully, it either rewards volunteers or encourage new volunteers. But it was a beautiful luncheon, it was very much appreciated, and it was done in a beautiful setting. I enjoyed it and I brought a guest. They enjoyed it.

Diedra Freedman: Anybody else want to? Chime in on the event.

Barbara Picone: You know, I just want to let everyone know Keith if you do have feedback, absolutely share. This was our first Liz Perez did a fantastic job, but we are always looking for feedback to make it better next year and yes, we did say annual. So hopefully we can do this every year. It was a great event.

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Don Harrington: I'd like to say that since we've been doing PRC for the last couple of years online and most of our IOC meetings are online. Now I just enjoyed meeting everybody, I enjoyed meeting people that I've said on board with the venue was fantastic. The food was good, and I enjoyed the company at my table, so it was A+ all the way around.

Diedra Freedman: Barbara. If you could, if you were Leah, could do me a favor, there were District West people who got awards yesterday. I understand that you wanted the awards to be a surprise, but if you could send me their names, the award, in an email, I know that the District West IOC would like to send them a "Thank you and congratulations" if that's possible. If they're willing to share their contact information,

Barbara Picone: Yes, and I know we are sending those who couldn't attend. We're sending the awards out via mail, and also, we did a video of it so those who couldn't attend will be able to watch it on video as well. So as soon as we get that link, we'll share it with everyone.

Linda Mecham: Me too if you don't mind. Also, Barbara, I understand that there were a few people from District Central that got awards. And so, if you could also send me that same information, I'd appreciate it. And I also heard that District Central's PRC/IOC was not mentioned. We do have the PRC and IOC.

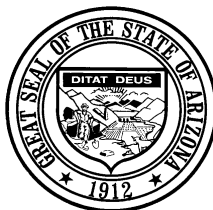
Barbara Picone: Yes.

Keith Jansen: Yes, I did. I did notice that they talked about four other districts, and I said, I turned to the person next to me and I said, "What happened to District Central's, did they dissolve?"

Barbara Picone: I think there was one speaker that left out one of the districts and we apologize for that. But you were all in our hearts and it was all about all of you in every district.

Linda Mecham: That's fine. Actually, I heard it from three different people on three different phone calls. Yeah. "Linda, did you know?" I'm like, Anyway, so but we are around and strong.

Keith Jansen: Yeah, I knew your word because you're Central and, you know, you got Phoenix right there, but it was just kind of funny, little thing, you know that happened.



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Barbara Picone: Hmm. It's our first event, remember that we can only get better, right?

Linda Mecham: Well, you know what, they used to do these events a long time ago, I mean, because I've been serving for what 20 plus years and they did do the volunteer celebrations quite some time ago and then COVID hit and you know, regime changes and all that. So, it's nice to get back into it. So, thank you.

Diedra Freedman: Jeffrey.

Introductions

Jeffrey Yamamoto: Real quick if I could have everybody do a quick introduction. And this is more for the transcriber. So that we know who's at this meeting, because we did not actually do the introductions,

Diedra Freedman: And that's my fault. I apologize. I'm Diedra Freedman. I'm chair of A District West IOC. Linda.

Linda Mecham: Linda, Mecham, District Central chair IOC. And I apologize to De. I just asked her to do this at the last minute because I'm not feeling well. So doing a good job. My dear.

Diedra Freedman: Yeah, Suzie.

Suzie Hessman: Suzie Hessman. I am the chairperson for District East.

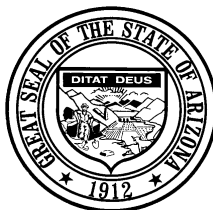
Diedra Freedman: Don.

Don Harrington: Don Harrington, IOC chair for the North.

Diedra Freedman: Keith.

Keith Jansen: Keith Jansen. IOC chair for District South.

Diedra Freedman: Bern.



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Bernadine Henderson: Bernadine Henderson, Vice-chair District West.

Diedra Freedman: Jeffrey.

Jeffrey Yamamoto: Jeffrey Yamamoto, the IOC liaison for District Central, and District East.

Diedra Freedman: Joan.

Joan McQuade: Joan McQuade, Office of Individual and Family Affairs Manager.

Diedra Freedman: Kin.

Kin Counts: Good morning, everyone, Kin Counts. IOC Member District East.

Diedra Freedman: And what else, why did we ask you Kin?

Kin Counts: Sorry, what again?

Diedra Freedman: You can throw in your other two memberships for us too? Please

Kin Counts: Oh, I'm also on the Arizona Developmental Disabilities Planning Council and the Advisory Council member.

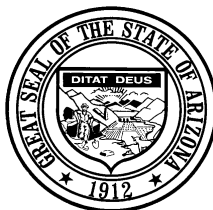
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Diedra Freedman: And you're the IOC representative on the Advisory Council. Correct.

Kin Counts: No. Not on the IOC, just the committee member.

Linda Mecham: I thought you were the IOC rep?

Diedra Freedman: No, I think you're the IOC rep.



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Kin Counts: Oh yes, I am. the IOC. Yes. Yes, absolutely District East right? oh,

Diedra Freedman: No. You are actually our representative on the Advisory Council.

Kin Counts: oh, Am I?

Diedra Freedman: Yes. At least according to the website.

Kin Counts: Oh, okay. Okay. All right.

Keith Jansen: Now, you got more work. You didn't know you had?

Kin Counts: Right? I'm trying to get away from extra work. Okay, I'm just coming here. Got it. Thank you.

Diedra Freedman: That's why I was asking you earlier if you could attend these quarterly meetings so that you could update us because you're our representative.

Kin Counts: Oh okay. All right because I thought so Suzie is one so anyway. Okay, got it. Thank...

Diedra Freedman: Yes. Suzie is the IOC chair for District East. Leah.

Leah Gibbs stated she was the Administrator for the Office of Individual and Family Affairs.

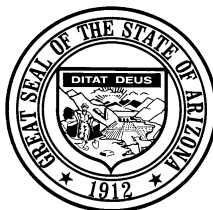
Diedra Freedman: Michelle.

Michelle Rademacher: Michelle Rademacher DDD. IOC liaison District North, District South,, and District West.

Diedra Freedman: Patricia.

Patricia Sandino introduced herself as the PRC Chair for District Central

Diedra Freedman: And Zane.



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Zane Garcia Ramadan: Good morning, Zane Garcia Ramadan, Assistant Director for DDD.

Diedra Freedman: Okay. Are we back on track?

Jeffrey Yamamoto: Yes, thank you, De. Back on track.

Discussion on Article 9 and updates and ASH

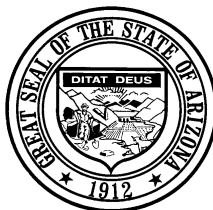
Diedra Freedman: Our next. Our next item is a follow-up discussion on Article 9, any updates? And we're wondering if Article 9 Applies to ASH. We, in District West, I requested this, and we in District West asked a series of five questions in January and DDD, I don't want to say nice enough because it's their job to answer but, They did a very professional job in answering the question. Unfortunately. It brings up. the elephant in the room that DDD is always based with. Zane or Leah or somebody? From the DDD's staff. If I'm recounting this incorrectly. Please jump in and correct me. Article 9 should apply whenever a DDD dollar is spent on support or service. However, the only oversight ability that DDD has is when a provider is not part of the in-network provider. With the DDD-qualified vendor agreement network, it is contractual. So, it makes it difficult when we're talking about ASH, especially since it's another agency. For DDD to have any kind of authority to enforce anything. Do I have that correct? Zane

Zane Garcia Ramadan: Yes, well so let me just address the two things. You said first any QVA, no matter what they're doing, they are subject to Article 9, They must comply. ASH is not a QVA and not only is it not a QVA, but DDD does not have oversight of ASH. We don't fund ASH. So, we have confirmed that we are not able to enforce Article 9 in ASH

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Diedra Freedman: But I Yeah.

Zane Garcia Ramadan: However, if let's say, let's say there were an individual residing in ASH and as part of their service plan, it was identified that Habilitation provider would come into ASH and work with the individual. And that HABILITATION is being provided through a QVA that provider would need to



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comply with Article 9. But when it's not, you know, when it's just the individual residing in ASH and there's no DDD supports or services in the facility, then Article 9 would not apply.

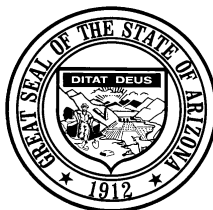
Diedra Freedman: Linda.

Linda Mecham: So, my question with regards to that is what dollars are being used to pay for the three individuals at ASH Where is that money coming from?

Zane Garcia Ramadan: I believe it's coming from the Department of Health Services who funds ASH and I think there's also a legislative fund that might be separate and apart from ADHS that regulates ASH and provides funding. So, it's a combination of both of those but DDD is not directly paying for those individuals to live in ASH.

Linda Mecham: I've been asking this question for about a year. Is there a way we can find out? Who specifically is funding? Those three members at ASH and how much they're spending there? I mean, I understand, because I've done as, you know, I've been asking a lot of questions about these three individuals for quite some time because two of them are in Central, but I understand that at least one of them are not candidates is not a candidate for, Step down unit. Provided by DDD. I don't know about the other two, but my concern always has been and always will be. "Is the active treatment that's not going on there for them"? They don't understand. From what the answers I've gotten they are not; they do not understand why they are in seclusion. They do not understand why they are being chemically, restrained, or physically restrained. And I mean nobody deserves that but even if even if you're not DDD, but I'm just wondering if we can follow, you know, go down the rabbit hole and find out who is funding these kiddos or keep young people, men, people, you know, individuals. Is there a way to get? Some active treatment to them.

Zane Garcia Ramadan: Yes. I mean I think in terms of the individual needs of those three people, I don't really think it's appropriate for us to be discussing that here but I think, you know, that is a conversation that the Support Coordination team should, should definitely be having with those individuals and we will make sure that they are so that you know, they're getting the best support possible.



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Linda Mecham: I'm sorry, I didn't mean to be specific about the three even though I did say three, but I meant in general. So that we have a policy in place for if we have someone in ASH that they do that, they are able to receive active treatment moving forward. Once we get through this maze, that's I'm sorry I didn't mean to because I understand you know, the public forum issue and all that. And but I'm just speaking generally even though I did say three. So,

Zane Garcia Ramadan: Sure.

Linda Mecham: Thank you.

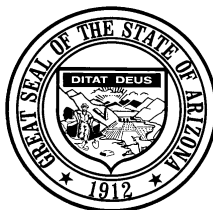
Zane Garcia Ramadan: Yes.

Diedra Freedman: It's my understanding. From other discussions and meetings, that DDD is the MCO for any individual who is receiving DDD ALTCS services? So, does that mean that Article 9 also applies for any services from the health plans?

Zane Garcia Ramadan: So, this is, this is part of the challenge that has been in place since the integration took place in October of 2019. And you know, to be perfectly honest is a reason why, you know, we do need to at least make some updates to Article 9 to address this because the reality is when this integration occurred, DDD became the quote, unquote "financial supporter" of the health plans who are delivering sometimes, you know, behavioral health services or other services to individuals previously prior to October 2019. That was delivered. Those behavioral health services were delivered by the RHBA, and those behavioral health providers were not subject to Article 9. When this transition occurred. We, have this situation where now technically they would you know, need to comply with Article 9, but at the same time,

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Zane Garcia Ramadan: We as DDD don't have the authority to impose our rules on the behavioral health boards and other things that those behavioral health professionals need to go through for licensing, regulation, etc. And that's handled by the Department of Health Services. So, there's this sort of conflict



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Meeting Minutes
April 19, 2023 - 10:00 am to 12:00 pm**

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that exists at the moment that we were hoping to address it through Article 9 so that we could grant some clarity to this issue where there's an inherent conflict at the moment, so it is not being enforced.

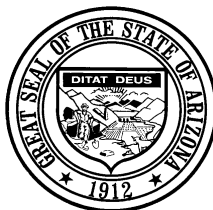
Diedra Freedman: So, where are we with Article 9 then we're just in a holding pattern?

Zane Garcia Ramadan: Yes, we are, and, you know, when we decide to move forward with reinitiating that process the IOCs and stakeholders will be engaged from the very beginning, one of the ideas that we have been Contemplating is potentially working with a third party to, to facilitate some of those initial conversations and feedback given the challenges that we've had, you know, facilitating that directly. And you know, some of the, let's just call it, distrust that appears to exist and so, whatever we can do to, you know, make the division seem sort of independent in this process. When we're gathering stakeholder feedback, and then utilizing that feedback to inform, the changes that we do propose in the final rulemaking, that's one idea that we've considered But again, at the moment, you know, there's no real progress on that. But as soon as we do decide to move forward, you all will certainly be engaged from the beginning.

Diedra Freedman: I don't know if. Everyone is aware but Phoenix Children's Hospital. Just announced that they're opening 16 locked Med rooms that are targeted specifically for individuals with autism. Because it's too expensive. To provide the one-to-one staffing that some individuals with behavioral issues may need. They mentioned autism. They mentioned individuals with feeding disorders.

Zane Garcia Ramadan: I had not heard that.

Diedra Freedman: I can send you the article. It was in the Arizona Republic, For me. it is very scary, that this is the way that it's going. And it makes Article 9. all the more important and all the more important that DDD because DDD ALTCS members. Receive care at Phoenix Children's Hospital. because especially for our most complex members, It's the only game in town. You cannot get the same caliber, or even type of specialists through the Banner network. Um, I know this both through personal experience and from other parents. So, so this overall trend, I don't know how to say it enough. But it's a slippery slope back to Willowbrook. So, as far as I'm concerned, that's why Article 9 is the foundation of everything that we do as an IOC. And it's so important that The philosophy, that comes through Article 9, is very clear and that we are here to protect human rights and due process. And that DDD. Set the trend for DDD members, no



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

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matter where they're receiving supports and services. At least if the least we can do is set a philosophical bar.

00:35:00

Diedra Freedman: As to what we expect the standard to be. Even though Because of other issues DDD can't regulate and enforce. At least the bare minimum we can do is set those expectations high. So that's my opinion. I don't know if anybody else has anything to add. Before we move on to the next topic.

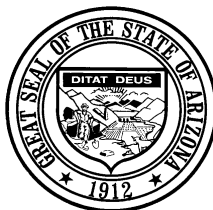
Linda Mecham: De, I've got my hand raised. I have a question for Zane and as everybody here knows, I was the big mouth on Article 9. I'm sorry. But we got to see what the goal is. We can see what the problems are. Exactly. What your ultimate goal is and how we can work together? So that we can see the goalposts before we even start. Well, we're still back at the 20-yard line, getting ready to kick off.

Zane Garcia Ramadan: Let me just tell you right now. Linda, you could not have said it any better than we could explain it than what you just said. That's exactly like when we talk about the lessons, learned from the previous iteration.

Linda Mecham: Yeah.

Zane Garcia Ramadan: Exactly what you just described is what we have realized that we need to do if and when we reengage in this from the very beginning state. What the, you know, two three items are that we've identified that that need to be addressed and then work with you all to figure out how best to address them.

Linda Mecham: Then the other thing was could, okay? So, we had Leah and her team come in and talk to us about ECT And how there's a law that says, anyone with IDD with cannot receive ECT treatment, that's the law doesn't matter where they are, It doesn't matter what facility they're in. So, I'm wondering if legislatively because Article 9 is good. Can we get a law like that for the DDD kids that no matter what facility, they're in Article 9 applies, just as ECT applies to DDD individuals. Would that work? Something like that? I mean there might have to be tweaked. I understand that.



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

This meeting took place by electronic means due to the Public Health Emergency still in effect. There was not a physical location.

Zane Garcia Ramadan: Yeah, I think I think we would need to kind of go through that and in detail and work that out and Right.

Linda Mecham: But it's a thought.

Diedra Freedman: Keith.

Keith Jansen: I was going to say, I thought from discussions Six months ago, or so. I thought ASH had its was supposed to have its own IOC committee.

Linda Mecham: They do.

Keith Jansen: Okay. I never heard from them and I'm gonna.

Linda Mecham: Excuse me, I did get an invitation to attend one of their meetings. I was not able to because of the members that are there. You're South, right? Aren't you?

Keith Jansen: Yes.

Linda Mecham: You and I can go to their meetings; they've invited us if we want and express. Well,...

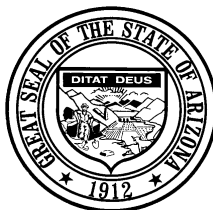
Keith Jansen: I've never been invited.

Linda Mecham: I just sat in on meetings where they've been there. So anyway, but we can it's a public meeting so you can go.

Keith Jansen: Yeah, it's a long drive, but

Linda Mecham: No, it's virtual. It's like our IOCs. It's a virtual meeting.

Keith Jansen: well, then you got to get the invitation to



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

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Linda Mecham: Go to their website, go to the DDD website, or ADOA Larry's website, He's got them. All right there, there's DDD IOC, there's ASH IOC. There are all of the IOCs, and you just go to ASH. And find out when their next meeting is and click on to it and you'll get the link.

Keith Jansen: Okay, thank you very much for that information. I'm sorry if I'm sounding stupid.

Linda Mecham: No, you're not. No, I'm just trying to explain.

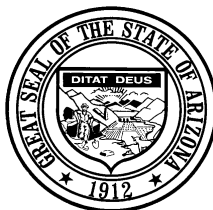
Keith Jansen: One of the things I've got to say from experience, not the state, but with the United States government, something Zane said, does not ring true with me. And that's what he said, The IOC would be in on it from the very beginning. That's not ever been the case ever. It's always been Executives' legislators. Whatever, you know, Zane gets together with some of the other people in the state, they write something up, they send it to us, we look at it and review it. That type of thing, instead, if you, if you really want us to be in on it from the beginning when you're having those meetings, Have the IOC chairs there in the room with you.

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Diedra Freedman: Okay.

Keith Jansen: And that way, we're in it from the very beginning.

Diedra Freedman: Suzie. I see your hand up but Keith, my experience is different than your experience. I'm currently sitting in a workgroup with Leah Gibbs about insurance. And I, I've got to tell you, except for the Article 9 experience. I've seen stakeholders. And have been one of the stakeholders. Who have worked cooperatively with the DDD staff at beginning of the issues in this is over two decades. I know, we're having different experiences but at least the staff that I've interacted with Zane. You know me, I'm when I haves. when they're negative issues and bring them up but when they're positive I also bring them up and I have to say since you've become the. And I'm going to screw up your title because I just want to call you Director. And I know that's not. That I don't know if you're the associated or the assistant or I'm just going to call you the head of DDD. Since he took over in 2019, I've seen a marked positive difference



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

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in Public participation in with DDD. So, it was just Article 9 in the revision was begun before you came into the role. So, there's a whole history there...

Zane Garcia Ramadan: Right.

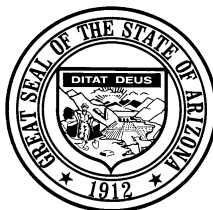
Diedra Freedman: but on the other issues and especially since Leah has become head of OIFA, There has been a lot of reaching out for cooperation and collaboration but I'm sorry to jump in there Suzie. Your hand is up. Go ahead.

Suzie Hessman: Um, Linda mentioned ECT and that DDD members are not allowed to receive that. That is not true. They can receive it. And we need to be careful about pushing for policy or legislation to remove treatment options that can be very beneficial to our members. Those are decisions that ought to be made with the patient, their family and their doctors.

Diedra Freedman: Okay, Linda.

Linda Mecham: So, this in response to Suzie, I'm just quoting what Leah said to us because we said, Couldn't we go through the PRC process and have it approved and they said No, even if it was approved through PRC, it couldn't I that meeting was the first I'd heard of it. So however, I would like to piggyback on these comments to Zane and regarding Zane and his involvement with all of us. I have heard numerous where you've gone out like to group homes in neighborhoods and talk to families. And I and you have always been open especially with me and Karen and I appreciate the openness that you have had, and De is right, Article 9 started before you came on board, you got involved with us after you came on board, and we appreciate that. And my experience since you've been on board, has been a good one with the interactions. So, it was just there, there was just a short period of time. Between the old regime and this transfer over to the new regime where there was this disconnect between IOC and DDD. But I think we're all back on track and I think we're working well.

Zane Garcia Ramadan: Well, thank you both, I appreciate that. I do want to address Suzie's, comment and Linda's about ECT and then Leah, please feel free to jump in because there have been some recent developments in this. This is something that, you know, DDD has been trying to you know Understands



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

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given the fact that there was a statute that was passed in 1978 that references electro-shock treatment. And you know nowadays there have been you know very...

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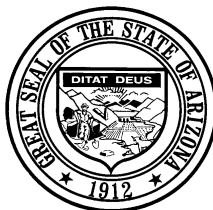
Zane Garcia Ramadan: Strong medical advances as it relates to in electroconvulsive therapy, which is also both things are referred to as ECT and there's some language in the in the statute that that kind of makes it ambiguous. And so, we have been talking with access to try to get clarity on this issue. And just in the past, couple of weeks, I think, after Leah, had been engaging, in those meetings, with District Central, and another district IOC around this ECT topic. We did get clarity from access. That ECT is a cover benefit for ALTCS members, when medically necessary. And so, that is the guidance that we've passed down to the health plans and that we're working from as it stands right now. I do think, you know, as time goes on, we are gonna have to revisit that statute and kind of have our legislators. Give us some clarity on how we want to proceed. Because at the moment it does appear to be outdated. And, you know, the way that it's written, it doesn't really apply to current times. Linda.

Linda Mecham: So, does that mean the whole presentation that Leah gave us is off the table for now?

Zane Garcia Ramadan: Leah. Do you want to take that one?

Leah Gibbs: I would love to. Linda, No it does not necessarily mean that it's not really off the table. It's just that the message that I presented to you has had some clarity from AHCCCS, but it does put us in a position that there is this piece of legislation. That's kind of been conflict with practice. And so, I do believe, and I still haven't had a chance to meet with all the committees. I've only met with you and with the East at this point, but I do think that we're gonna continue to have the conversation and that it will be something that we're hoping we'll be able to work together to look at the current legislation and potentially make some proposed changes so that we're not in conflict with the medical practice. so

Linda Mecham: So, it's not applicable. That's I just want to make sure I'm keeping it on my radar for agenda items. That's all.



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

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Leah Gibbs: And I appreciate that, and I still think even when we started our dialogue, we talked about even with the changes we want to talk about safeguards and policies and ensuring that it's still appropriate. When it's being considered for our members. So, are you okay with that Zane? Anything you want to add?

Zane Garcia Ramadan: No, I think that covers it, thanks.

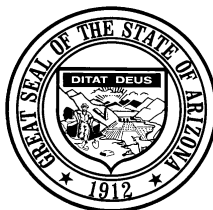
Diedra Freedman: Leah. Can I just ask you one when you're having these discussions? Can you also include Pacemakers and Vagus nerve stimulators? Because basically what those things do is in electric shock. I don't know if you're familiar with what a Vagus Nerve stimulator.

Leah Gibbs: I'm actually familiar with both, but isn't at an interesting interpretation to the law, Zane. Yeah, that's...

Diedra Freedman: Leave it to the retired attorney, right?

Leah Gibbs: because we know that they've been medically provided and then there hasn't been a conversation about that.

Diedra Freedman: But what I'm what I'm worried about, not with the pacemaker, but with the vagus nerve stimulator. because I have personal experience with the vagus nerve stimulator, Andy had one. And you can see when you waive the magnet. You can see that there's a physical reaction in the body because it's delivering an electric shock. It could be abused. And so, we need to make sure that the tuning has been done properly. And that human rights are protected. Even though it is a medically necessary device that For my son, really improved his quality of life, but like everything else can be used in ways that it shouldn't be used. So, When you're having these discussions, make sure that we talk about. Anything that may produce an electric shock. Again, it's our duty to make sure that human rights and due processes are protected so that things aren't used the way that they shouldn't be used but I'm not going to be surprised in Vagus nerve stimulators are they're going to be used for GI issues. They're going to be used for depression. There's a lot of research that is on the way. We're going to be surprised in the next decade. And individuals with developmental disabilities. Will benefit greatly from such things. I mean, we have no idea what else they have left to invent, but it's coming, it's out there.



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

This meeting took place by electronic means due to the Public Health Emergency still in effect. There was not a physical location.

00:50:00

Leah Gibbs: Thank you.

Diedra Freedman: Is there anything else?

Linda Mecham: Just one more thing. On to piggyback on what you said. I did a PRC, maybe a week and a half ago, two weeks. And they actually had the VNS, and they were using it to treat to, and they said this right there in the plan and the in the PCSP, that they used it to while the individual was having to behavior And of course, that's a rights violation. But then I, When I asked for clarification, they said it was a seizure, not a behavior. So, I said, Well, you need to clarify that, but that's just an example of how it can be misused, this was by people at the day program not the group home staff. The (*unintelligible*) reported that.

Diedra Freedman: Keith.

Keith Jansen: You might want to. Correct the transcription because it said DNS when she said VNS.

Diedra Freedman: It's a vagus nerve stimulator.

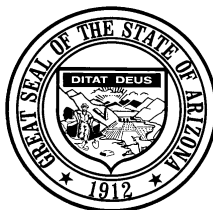
Keith Jansen: Yeah, but the writing said DNS, It didn't say VNS. I was watching the transcription.

Diedra Freedman: Okay. So, um Bernadine Henderson is leaving us. Thanks for joining us Bern, we always appreciate it.

Diedra Freedman: We basically covered. Item number five While we were discussing item, number four, Linda is there anything else that you want to add regarding ASH, or can we move on to number six?

Linda Mecham: We can move on.

Follow-up Discussion on the Historical Background information on the PCSP.



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

This meeting took place by electronic means due to the Public Health Emergency still in effect. There was not a physical location.

Diedra Freedman: Okay, follow up. Discussion on the historical background information on the

Diedra Freedman: PCSP. I was trying to use the words. It's the personal person-centered service plan is it. Did I get it? I they didn't.

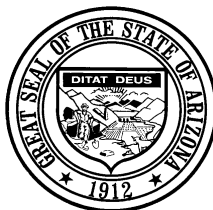
Linda Mecham: Yes.

Diedra Freedman: We are not a so on the person-centered service plan and recommendations to AHCCCS. This is yours Linda.

Linda Mecham: Thank you. So, I brought this up at our last meeting with using and since then, as I said, I sit on PRC quite a bit and so I started counting them. And in the last why was gone last, you know, for the last 10 days. But prior to that, there were 24 documents, 24 of them were not filled in with complete historical background information. One of them. I was with the support coordinator. I am said, You know, we need to have what's in the behavior treatment plan recorded in the PCSP because that's the primary document plus they both need to agree as De will talk about in a minute. But I said Right there under member profile, it says Describe the brief background of the members life experiences place of birth development. education. and employment history, judicial involvement that sort of thing and I said There's nothing here. I've got four and, in this particular one, there were four and a half pages in the behavior treatment plan of judicial information on the member as well as his personal background, how he grew up. There was absolutely nothing under that paragraph in the PCSP. And the support coordination. Linda, I don't even see where you're reading that And I said, It's right. It's just right there under member profile. Number two, and she says, You know, I've never seen that before. I've never paid attention to that. So, what I have noticed in this PCSP is that under member profile, that particular paragraph is left alone. They don't pay attention to it. But then, they go right into the notes of the, of the meetings that they have held.

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Linda Mecham: The 90-day Meeting. There's nothing there about the background. Also. Just throughout the document. It's inconsistent. and then and it was nice District Central thankfully, our program Manager, Program Director, Megan. She was made it mandatory for support coordinators to be at our meetings and I, and the last couple weeks I've noticed that they weren't there, and I asked, I said, Where's the support



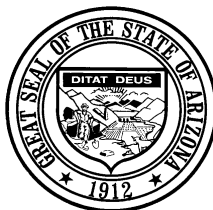
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Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

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coordinators? I thought they were supposed to be here, and I was told that Megan or that it's now not necessary for them to be there. Personally, I think that they need to be there because they're the keeper of this whole document. They're the keeper of it, they need to be there. They need to know what changes are being made. And if they're not there they can't make the changes. I mean Patricia our PRC chairs, she can send it in but it's better for us to be able to have that conversation and explanation like the like the supporters says Linda, I don't even see where that is in the document. So, I pointed it out there and she goes That's the first time I've seen that. How long have we had this out? And she's never read that. So, I'm just telling you that 24 out of 24 in a two week. Period did not have that completed. There's more in the behavior treatment plan than there is in the PCSP. so and so that's my first recommendation, that that Filled out completely, even if they have to copy and paste what's in the behavior plan. I got a phone call from a provider 6:30 in the morning. One morning. And she says, Linda, listen to this. And she told me what was going on and she says, I can't write a plan with this. There's no information here. so, it's difficult if the, if the support coordinator is not doing that part and then Let's see. Um, I guess that's it for that. For that particular thing. I can't remember, you know I'm not feeling good.

Diedra Freedman: Linda, I'm going to move item number eight discussion on "concerns of the accuracy of DDD records" to dovetail with number six because as one of my law, professors used to say we're in the right church, just a different pew. um, I'm very concerned. About the accuracy of records. These records that are their official records. They're in my background in using them in court proceedings. Where because it's in the record. It's automatically assumed to be correct information. And we know, even though I'm not doing behavior plans, I hear From Bernadine Henderson who unfortunately left, the behavior plan herself, there's Med Lists that don't match the med list is listed in three different parts of the of the behavior plan and they don't match. As I said in the update for District West, we have a psychiatric nurse. Who is very interested in attending PRC meetings in reviewing behavior plans for us. She personally has a professional license. That even though she's not being paid to do this, there are still professional standards that she has to adhere to, because she has that license. Just as I have to adhere to, even though my New York State law license is in retirement, I'm still required to follow those standards. I've asked a couple of times. At District West IOC meetings, when we have had staff from DDD's behavioral health department. And basically, and I'm paraphrasing, this is not their word. but we were told that accuracy in records is aspirational not required. Because especially regarding the behavior plan. It's the providers that do the behavior plan. It doesn't matter. They are subcontractors of DDD, and they're required to adhere to the same standards for record-keeping as AHCCCS holds DDD to, which obviously,



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

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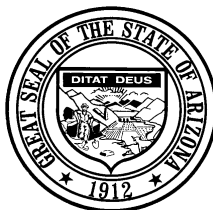
AHCCCS is not holding DDD to, because it doesn't seem to be a priority among the staff. We're trying very hard in District West. to follow the law when we recruit members for our IOC...

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Diedra Freedman: which means that we're asking professionals who have personal licenses like Crystal and myself, And it's very difficult for them to participate in reviewing behavior plans if the standards are not there. but as a professional compliance officer, In my other life. I can tell you DDD is opening itself up to serious liability. If there's ever a lawsuit. and also, from the feds because we're talking federal money here. If your records aren't accurate So, I'm wondering. Perhaps. If DDD's staff needs a reminder. That it's not aspirational it is required. There's no wiggle room here. Records have to be adequate and it's not my job as a volunteer to edit and police records staff should be doing it. You now have staff, who are overseeing the program review committees. They are licensed behavior analysts in the state of Arizona. They're putting their own personal professional license online because they could be held professionally. Liable and responsible in front of the psychology board that licenses them because they're not meeting their own professional standards. So, this is serious issue that needs attention and correction. So, I don't know. Keith.

Keith Jansen: Whenever we're doing that, we're very big on the med list. Yes. That's a very big problem and you name an excuse and they come up with it. but the problem is, if I'm working at the house, this person needs medical treatment. And I hand them. The behavioral treatment plan with the meds on it or I just read them off. The meds from the behavioral treatment plan, And then later on in the list you find out all, they changed them. you could wind up killing somebody because they got medications that interfered with what the actual medications they're taking are So, we're very big on that.

Zane Garcia Ramadan: Okay, Yes, so I want to, I want to kind of try to address both of what, we'll start with what Linda brought forward. And then we can talk about the behavior plan topic because I think both of these are incredibly important and I really do appreciate you all as the IOC's bringing these to our attention. Linda, I mean, that's pretty shocking to hear that. You know, you looked at 24 PCSPs and all 24 didn't have that section filled out. So that's something that we're definitely gonna take back to the support coordination team and look into that and understand why that's happening and, you know, put in place some guidance to support coordinators to ensure that they're doing that and that that also brings up a



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

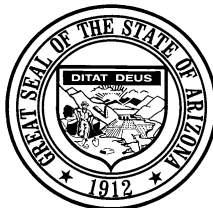
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point that I want to share. Because I don't think I've shared this with the IOC and this forum. Perhaps it's been shared in the District IOC meeting, but we are in the process of creating a new unit within support coordination. That's called the Operations Unit and essentially, their main task is going to be doing more focused, internal auditing of PCSPs and other issues that come to our attention so that we can, you know, ensure we have a statewide understanding and perspective of where there are issues and put in place strategies to address them because, you know, we are getting very large from a support coordination standpoint. We're nearing a thousand support coordinators, supporting 50,000 members becomes hard to manage all of that and ensure that we're appropriately, you know overseeing, to a specific level specific issues and so this to me would be the perfect example of what we can have that Operations Team begin to look into and do some audits across the state is to determine what's going on with this historical background information on the PCSP. Why is it not being included? So, that's something that I am definitely going to take back to our support Coordination team. one of the things that I would request if possible and I hate to ask you to

01:05:00

Zane Garcia Ramadan: do more with, you know, your volunteer time but if you could maybe send into Jeffrey a list of some member names where you saw that on the PCSP so that we can kind of look into it with some specific points of reference to go back to that support coordination team.

Zane Garcia Ramadan: Now, as it relates to the Behavior plan issue from what I understand. It's a like you said, the very similar, but maybe slightly different in that, the PCSP issue that Linda brought forward is that some information was simply not being filled out, whereas, with the behavior plans were identifying that there's inaccurate or conflicting information within a behavior plan. So, first and foremost, I would say that I do not share the opinion. That medical records compliance is aspirational and I'm sorry that that was communicated, but we will certainly, you know, let our teams know that that's not the case and we're going to work to try to fix whatever these recurring deficiencies are that have been identified. But I would ask the same of you De and Keith, you had mentioned one as well. If you all can provide some specific member name example, so that we can look into it and get a very specific sense of what you're noticing. And then that'll allow us to better. Follow up on it. But really at this point in time there's nothing else that I can say except that I appreciate you bringing this our attention and we're gonna definitely look into this and work to address it.



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

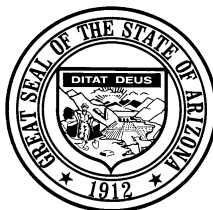
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Jeffrey Yamamoto: So, because I know that the PRC redacts, the names of the individuals if you just get back with your PRC chair. On those specifics. The PRC chair can then send to myself or Michelle the name. And then we can go ahead and forward that off to Zane, Leah, and the behavioral health team.

Diedra Freedman: Linda.

Linda Mecham: First of all, I just want to give a shout out to our PRC chair, Patricia she is wonderful. Do not ever get rid of her she's the best. She I love her to pieces, and she works really, really hard. So, kudos to you Patricia. Secondly, I'm finding with these comments, which she was talking about the inconsistencies, but inconsistencies are not just limited to the BTPs. There are inconsistencies in the PCSP as well as inconsistencies between the BTP and the PCSP. So, when I'm reading them, I am constant because I request a hard copy is too hard to read it on the screen and flip back and forth. But as I'm reading, and it takes me probably about an hour and a half to read each one to flip through these pages. Nice, wait a minute. I in fact, I just read this one yesterday. She's not, she's no longer a one-on-one that's in the BTP, but in the PCSP, she is a one-on-one. So, well, which is it, you know, That's the kinds of inconsistencies that we're finding throughout and to this point with regards to her professional people and their licenses. I'm not I'm a professional person but I'm not a professional person in medical or legal but I don't want my name on a document that's not correct either. That's not fair to any of us as volunteers. They have to do that. And then the second, the third thing I mentioned this, and I would really appreciate it Zane if you could go back and let the support the District program managers know that the support coordinators need to be at these PRCs. And I know it's one more meeting for them and it's hard and you're under staff and I get it. But we're making this, this is life threatening here, you know, I mean We need them there if we're going to be making these kinds of changes in the documents and because like I said, they're the keeper of the records, they're the go-to and if they can't be, then a supervisor needs to be there. But somebody from DDD that represents that person's PCSP needs to be there because the behavior plan is a part of the PCSP not the PCSP, as a part of the behavior plan. So, I would and then the other thing, too, make sure that they invite the Guardians because this is just like any other meeting. Where a guardian needs to be included and Patricia has been asking, was the Guardian invited? Oh, I don't know. I'm no, well, yeah, the Guardian, you know, they don't know. They

01:10:00



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

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Linda Mecham: So, it's important that the entire team be at this. These meetings for PRC and that the support coordinator be there or somebody. Thanks.

Keith Jansen: I was just going to say you were talking about using, you know, sending in names. If we just sent in a case number, would that be sufficient? Because you got the IR number right there or when you're doing a BTP, You can right then and there talk to your PRC chair and say, Hey, you know, can you flag this one and have somebody look at it?

Zane Garcia Ramadan: I think that would be sufficient. What do you think, Jeffrey?

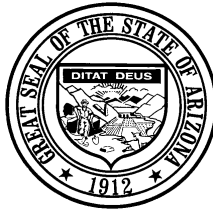
Jeffrey Yamamoto: I was going to say, I believe that if we at least have an IR, number specific to what you're looking at that, we can find that out. As far as the number that's been used to catalog that specific Behavior plan. I would have to defer to Patricia on that if that is enough to identify that individual.

Patricia Sandino: Well, this is Patricia and I'm sorry to say but those numbers also need to be redacted. So Unfortunately, we need to get that fixed. So, that's identification number to that individual. And again, it should be redacted. However, I think if Linda can give me a list of names over the days that we reviewed them, and I know we have a first name. And then I can look them up and send them to you and that would probably be the same for the other chairs. That's my recommendation.

Linda Mecham: Hey Diedra. If I may, well I've had questions on a particular one I will contact Patricia and I will just say it's the one we had on such and such a date at 12:10 and she can look it up. So that's work for us. So that would probably work for everybody. I would imagine but we have no PII except for first name on there. So, Forever.

Diedra Freedman: And I, Jeffrey Michelle Patricia. Um, Leah' or Zane one of you, maybe able to answer this. I, I like to. Whenever I'm corresponding about IOC matters. I just like to automatically C/C Michelle because she's our IOC liaison for DDD. I want to make sure I'm not violating anything. If I do that am I am I able to do that?

Michelle Rademacher: De, to me when you're talking about, c/c me on an email and you send something up the line, As far as I'm aware, because it's internal with DDD, you're not violating anyone's privacy.



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes
April 19, 2023 - 10:00 am to 12:00 pm**

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01:15:00

Diedra Freedman: Okay, so for any of these, because what I, what I'd like to do, I'm going to put together an email for our District, West, IOC members. And ask those that are participating with PRC and those that are reviewing. The incident reports or for whatever reason. If they find these inconsistencies DDD is now keeping track of them and I'll work with you Michelle so that we come up with a list but I want to make sure to put on there. They should always be C/C and you so that you can track and try and because I know you're going to go with that information, you're gonna go up the chain with that information so it you're gonna go to Joan and then Joan's going to compile it all come up with a report Joan's going to bring it to Leah and then Leah's gonna bring the report to Zane or Whoever or Nicolette or whoever's in the in the list. But I like the fact at least your District West because you're our liaison, the, you know, what's going on all the time. And if they have to come back to somebody, They can come back to you, there's an accountability there. I'm not saying that you're not doing everything you need to do, but it just makes it easier for everybody if there's a point person and for District West, you're it. So, you can't provide that technical assistance and expertise. If you're not in the loop, It's a long way there.

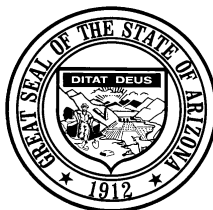
Michelle Rademacher: Right. And we would actually prefer that you send that all through me. And then I could reach out to who would be the correct person, the subject matter expert, the person that could get the information, so that's perfect.

Diedra Freedman: Now do we also have to cc Larry Allen to make sure that we're kosher or

Michelle Rademacher: If that is an official committee "ask" Yes, please do include Larry Allen.

Diedra Freedman: Okay. And it's we're not violating any we're okay.

Zane Garcia Ramadan: And the only thing that I would add though is and I think it's fine to include Larry on it. But for this particular "ask" where you all are going to be providing us with examples, it's not as if you're Asking us a question where we need to get back to you in 21 days. This is just for us to be able to act on this. And then you know, in future meetings we can give you an update on the progress we're making. But Just so like we're not going to be responding to you formally within 21 days with anything, because it's going to take more time than that to make some progress here.



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

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Diedra Freedman: Yeah, there's no question. We're not going to be asking you a question. We're just going to be helping you gather information but just if you haven't noticed, Zane with all the questions that are coming out in District West, what we're really trying to do? again, it comes from my compliance background. If we know, if everybody knows what the rules and the procedures are then we can all follow the rules in the procedures. So, we're just asking clarifying questions. It is a matter of fact, the last question we asked, I don't think I'm talking out of school, but Leah was extremely helpful in helping us to formulate the question that we needed to ask. Because it's not a There's no DDD "gotcha" here. What we're trying to do is make sure that everybody understands everything at the same time and we're doing what we can to help DDD. So that when we're advising you, The advice is actually useful in, we're helping you. In, you know, we understand you deal with other agencies and there are contracting issues and there's It's complex. It's convoluted. It's complicated. um, so. We're trying. So, I just want to make sure that we're not stepping on. That we're not leaving ADOA out of the loop in the So they're included, so they can't. Say we haven't got it all of our "I" and crossed all of our "T"s, that's all.

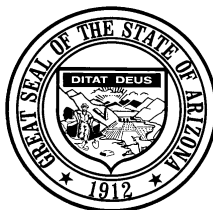
Diedra Freedman: So, Michelle, you and I will work on that for District West. Are, are we done with? Number eight.

Linda Mecham: I just would say too. When I bring these issues to use Zane or to this meeting it's I just feel like we're kind of the eyes and ears out there. We're seeing things specifically and minutely that you appear don't always get to see everything from your view, you know and so and I agree where, you know, we just want to work together as a team and it's all for the betterment of these individuals served by the division. So, I really do hope that sooner than later, the support coordinators will be at PRC. Like, you know, starting quickly. Just throwing that out there. So, thank you. No, I'm done with that one De, thanks.

Diedra Freedman: Okay, are we ready for number seven? Linda, it's you. Professional problems with residential billing.

Linda Mecham: Yes, So, our district has brought this to Zane's attention through emotion and then we also met with him and Zane, I'm just wondering what the updates are on the residential billing.

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**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

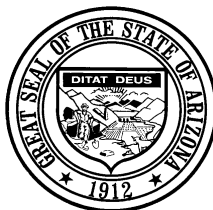
April 19, 2023 - 10:00 am to 12:00 pm

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Zane Garcia Ramadan: Yeah. So, after the meeting that we had with you, we understood that the issue wasn't so much with the policy but rather the manner in which the information is presented on the billing statement and how it sometimes could appear inaccurate or extremely confusing. And so, we did follow up on that and the billing statements that are sent out for residential billing at DDD actually is managed through one of our DES offices, the Office of Accounts Receivable and Collections. And so, we met with them. Seeing what we could do to try to make this billing statement more easily understandable, Unfortunately, they said that at this moment in time because it's on this mainframe that sends out billing statements that 30 different programs that DES, they're not going to be able to make any changes in the near future, but they are. They think in the next year or so, going to be going to a new system. And once that is updated, they'll be able to take into our account, our guidance, feedback, etc., to make it more understandable, but one of the things that we're gonna do in the interim time frame, is. so, I guess every time a new every time, A member family opens up a new residential billing account. They received this "welcome letter" from this office, which explains like how to read the billing statement who to contact specifically if you have questions, etc. And so, we our DDD revenue desk team because we have full-time employees within DDD, that address, this specific topic, They've proposed some modifications to that "Welcome letter" that are more tailored to DDD and give their specific contact information. So that if someone receives a billing statement, and it appears inaccurate, or they just don't understand it. They have right there on the letter who to contact in DDD and normally that's only sent out when an account is open, but we're gonna change that now that every year that letter is sent out to all Members' families that pay residential billing so that they'll be a more frequent opportunity for people to try to understand that. I know that doesn't necessarily solve the issue at hand and so in the meantime we are really going to just have to treat it as If people are getting these statements and they think that it's inaccurate, or they just don't understand it. They need to reach out to those contacts people in the DDD revenue desk. Or if they don't have that information, go through the customer service center, so that we can address them on a case-by-case basis.

Linda Mecham: Would it thank you for that? Would it be inappropriate to ask that even though it's April, almost May that you send out a letter that new letter to all of those who are enrolled in that,

Zane Garcia Ramadan: Yeah. So, when whenever they settle on the final edits to that letter, though, they'll be sending it out and then from there on once per year. So hopefully, in the next couple of months,



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Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

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people should receive that. quote unquote, "welcome letter", even though it's not necessarily welcome to some.

Linda Mecham: Right. Well, might be what some people might welcome that, you know "Gee we got an answer here". Would it be appropriate to ask? For example, if they're living in a group home and the rate is \$10, I mean an ADH and the 10 the rate is \$10 a day. That there be a formulary in there that the family can figure out. Because that's the issue. It's just an inaccurate amount that's due like you know, one month, it's 12 12. And next month is zero, you know? But like and or if it's 30 30 days in the month and you're at a group home, this is how much you would pay for 31 days group home. This is how much you would pay. Would that be?

Zane Garcia Ramadan: Well, that's gonna be difficult because every single person, their income levels are different. So, the amounts, not always going to be the same, but I think having some sort of general calculation is something that we can strive towards when we do this. Update. Here's generally how it would work. If your income is "x", This is how much you would pay for this service, etc. But we're not going to be able to get it probably exactly every time on that letter.

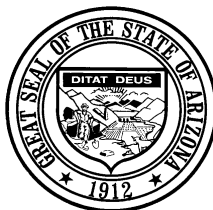
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Linda Mecham: And then finally, I believe finally. Is there? A reason why we bring this up is that this is a question that my committee asks, is there a reason why we have to send it to Saint Louis and not somewhere here in Arizona?

Zane Garcia Ramadan: I, Think it has to do with our Office of Accounts Receivable that they have some affiliation with something going on in St. Louis, I'm not exactly sure.

Diedra Freedman: Zane, is there a way to put that information on the website? some sort if you have an issue with your billing, here's whom you contact.

Zane Garcia Ramadan: Yeah, I don't think that should be difficult at all especially once we get the language that we're going to put in the letter. I think we could definitely mirror that onto the website.



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

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Linda Mecham: Hi, I'm also wondering Zane if just in response to our motion, once you get this figured out, you could just shoot us back and answer to that so that I can read it, we've got a meeting Monday and I know it won't be done by then, but I can at least give them this update. What you said, but just as an official response to our motion. Okay, thank you.

Zane Garcia Ramadan: Sure.

Linda Mecham: That's all De. Thank you. Thank you.

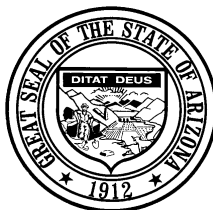
Updates from DDD Assistant Director

Diedra Freedman: Okay, we're ready to go to number nine, but Zane, if you would just indulge me because we have Kin Counts. Who joined us today? And she's the IOC representative on the DDD Advisory Council. And she's also a member of the DDPC. If you could give us an update Kin and as I said, , we would love to have you join us every meeting, so you can give a set update if you, if you don't mind. I know we're putting you on the spot because you weren't prepared today, but if you could do that, we would appreciate it.

Kin Counts: I certainly would in the next meeting. Thank you.

Diedra Freedman: Right. Zane, You're next, your number nine.

Zane Garcia Ramadan: All right. Yes. I have about maybe 10 minutes' worth of updates to give so bear with me. If you do have questions throughout, please let me know. I do want to start with what I think is the most important update at the moment in that. Planning meetings. Resumed in person across the state on April 1st you know due to the pandemic ongoing public health emergency Meetings have been being conducted overwhelmingly virtually for the past you know, nearly three years now. And so, we're excited that that in person connection is resuming because we do feel that it will strengthen relationships between members families support coordinators. And while it's only been about, you know, what 19 days? We are getting some initial feedback at least internally from our support coordinators that. You know, the return has been very positive and everyone's excited to be out, you know, seeing people in person again. So, we're hopeful that that feeling will continue and obviously, you know, we'll solicit feedback from members



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Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

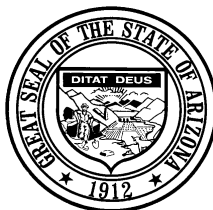
April 19, 2023 - 10:00 am to 12:00 pm

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families, etc., on how that's going as well. From a more strategic perspective, I did want to provide a quick update on where we stand with the Divisions, Current to Future initiative, which I think you've probably heard me discuss in previous meetings. We started this right before the pandemic hit in 2020 and so you know, before we knew what was to come, we had, we had made this sort of long-term strategic plan that was initially primarily focused on addressing the ongoing compliance issues. We had with access at the time. DDD was on five notices secure. We recognize that if we wanted to get to our desired, future state first and foremost, we needed to address compliance. So, you know, nearly three years later. Now, I am proud to say that we've been released from three of those notices to cure the other two, we've requested release from access because we feel we've met all the requirements and we're waiting on their review and response of those final two. It's also important of course that we haven't received any additional notices to cure during that time frame. But what's really most exciting from our perspective here at DDD is that you know, while of course, we're gonna work to ensure that ongoing compliance and all those areas. It does free up. Some additional resources for us to focus more on forward-thinking innovative. Performance improvement types of initiatives. So, we're really in that next phase of the current to future initiative right now. And the new sort of priority projects for the division are primarily involving the use of the American Rescue Plan Act or ARPA funds that the federal government has made available for HCBS in states around the country. So, there's four separate projects that were, you know, in the midst of working on right now.

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Zane Garcia Ramadan: I know that you all have heard about some, if not, all of these ones about developing positive behavior support training. That's going to be delivered to direct support professionals and interested family members. There's also a project aimed at implementing additional dual diagnosis training for behavioral health providers. In an effort to strengthen their capacity to serve individuals with developmental disabilities, We're also looking to utilize ARPA funding to incentivize. Startup costs and other incentives for QVAs that are willing to serve members under the new enhanced behavioral group home. service, which is really aimed at, you know, providing appropriate residential services, individuals, with the most complex needs, and you go ahead.



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

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Diedra Freedman: Yeah. I have a question about that considering that as of March 31st. You closed your network. So, there are no new contractors and no new services. Are you going to make be making exceptions? From what you just talked about.

Zane Garcia Ramadan: Yeah. Well, so fortunately if you had submitted it by that time, you know, we are still considering the application and working through that process, and I don't remember the exact number but it's somewhere around. We had somewhere around, 40 different, QVA applications for that particular service that had already been submitted. So, we're going to continue to work those through now. I don't anticipate that all 40 of them will be awarded debt service. There isn't going to be a pretty stringent criterion because this is a very, you know, challenging service to provide. And we need to ensure that the quality is there. But I do believe we have a big enough pool from which we'll be able to identify some capable providers to deliver this service, and, that March 31st won't necessarily impact it.

Diedra Freedman: Have you considered coming up with some sort of? case by case if the situation arises Exemption to that closure, some sort of a necessity or procedure.

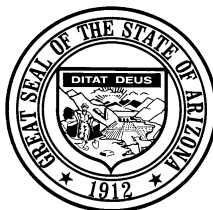
Zane Garcia Ramadan: At the moment, we are not really addressing exceptions. If there were to be something that was extremely compelling, I think we would consider it, but I don't, I don't think that we have any plans at the moment to make any exceptions.

Diedra Freedman: There's just a lot of concern because it's an indefinite closure date. We know it's 2024, we don't know if it's January 1, 2024, and we don't know if it's December. 31. 2024 that the new QVA will go into effect, and you'll start accepting not only Applications from brand-new providers but also applications for additional services to current in-network providers. So, it's just that it you're talking about. You're talking about. 20 months of waiting.

Zane Garcia Ramadan: Leah correctly if I'm wrong here. But I do believe that there is a firm date and that's July 1st, 2024, in which we would, you know, resume.

Leah Gibbs: Right. That is my understanding.

Diedra Freedman: Is that published anywhere Zane?



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Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

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Zane Garcia Ramadan: I believe it's in the vendor announcements. We've sent out about the RFQVA, but I can double check that.

Diedra Freedman: That I appreciate it.

Zane Garcia Ramadan: Suzie.

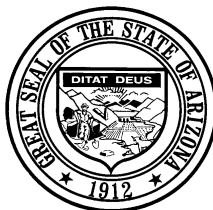
Suzie Hessman: I just wanted to know real quick. Can you clarify what? That closure was I was unaware of them.

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Zane Garcia Ramadan: So, the division for the past, three or four years has been working to update the RFQVA, which is essentially the contract to which all of the QVAs must adhere to. It hasn't been updated and probably over 10 years. And so, we worked to make some updates to the contract to improve the quality of service. That's delivered to the individuals that we serve. And so, What? We're in order to ensure that all of our existing providers are able to effectively make that transition. We stopped accepting applications for new QVAs on March 31st, 2023. And so, we're working to prioritize getting all of our existing contractors contracted for the new RFQVA, and then beginning next year, we would accept new applications for Vendors. That would have to adhere to this new. Qualified vendor agreement. So, the last Project that we're working on, as it relates to the ARPA funds is around. Enhancing our Internal Case Management System. So that you know we can allow our staff to more efficiently, support the members that they serve. And then while it's not necessarily a project per se, we are also about to send out the second year of directed payments to Qualified vendors in an effort to support with recruitment and retention of direct support professionals. So, vendors will be receiving that in the near term, and they'll be able to use that funding for sign-on bonuses, retention bonuses, or other incentives to recruit and retain the DSPs.

Diedra Freedman: Hey Zane. I'm sorry to interrupt but last week I sit on the ALTCS Advisory Committee.

Zane Garcia Ramadan: Uh-huh.



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

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Diedra Freedman: And there was a presentation. Done by Bill Kinard. About AHCCCS workforce development.

Zane Garcia Ramadan: Okay.

Diedra Freedman: I'd, I'm sure that you're familiar with it.

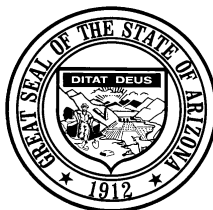
Zane Garcia Ramadan: Yeah.

Diedra Freedman: But there's tuition reimbursement that they're going to be providing and he said that direct care workers qualify for that tuition reimbursement at community colleges. I don't know how closely DDD is working. With access in that workforce development effort.

Zane Garcia Ramadan: Yeah, we have we have a representative that works on that group and so yeah, we are, there are a couple of. There are a couple of ARPA initiatives that I didn't mention that AHCCCS is leading in which all of the MCOs to include DDD, would be able to participate. And I anticipate that would be one that we would be able to participate in as well.

Diedra Freedman: I just I know when you sent out the letter that you were closing the network, that you promise. And I don't mean that negative negatively. I mean, it positively you promise to work with your current QVAs Specifically to help them to recruit train and retain. Workers, especially direct service provider workers. So

Zane Garcia Ramadan: Right. And that's really the key and I think this kind of ties back to that conversation of the gap here. From our perspective, it's not necessarily about bringing on new vendors. It's about strengthening the capacity of the current vendors to, you know, increase their amount of direct care workers that are able to serve the population etc. I mean, you could add 20 new QVAs who each, add 10 DCWs, or you could add one, or you can keep your existing network and they each add five QVA or five DCWs and then you have way more DCWs in the system then with the 10 new QVAs. So that that's definitely the path that we're trying to go down in the immediate future. A couple other things that we just touched on the RFQVA. We also continue to move forward with EVV, the new claims processing system. WellSky. you know, we're aware that there have been bumps along the way, but I think there are



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

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You know, that most of those challenges that we've seen from the immediate transition that we're past them and we're settling into a place where more and more vendors are becoming accustomed to this new reality and that we're, we're beginning to see more of the benefits of these systems over the long term, and we continue to have various teams that are dedicated to supporting vendors as they experience challenges or require technical assistance. Um, we are also currently in the legislative session and...

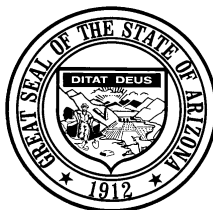
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Zane Garcia Ramadan: While there have been a lot of bills, proposed that would potentially impact DDD throughout the session. We're beginning to see that some will not make it through. But there are still a handful that are alive, and up here, poised to move forward. And so, some of the bills that we're tracking closely to see whether they do pass or not because if they do, they certainly will have a big impact to DDD. There are a couple different bills that would add an additional qualifying diagnosis for DDD eligibility. One being Spina Bifida and the other being Prader-Willy Syndrome. Where again not yet? Sure, if those will move forward, but it does seem like it's very possible that they will become law. We're also tracking House Bill 2166, which would establish a new Level of behavior support group home, that would be licensed by DHS. and then finally there, you know, there's another bill out there for a provider rate increase which If it were to pass, would more than likely be folded into the appropriations bill and would allow us to, you know, provide additional funding to our providers, which hopefully would allow them to, you know, increase wages for direct care workers.

Diedra Freedman: Hey, Zane. Can I just have a comment? I don't know if anybody did the math, but the last time that you were the DDD was proposing rate increases, you were looking for 85%. Am I correct to go to the actual workers themselves, it was at 85.

Zane Garcia Ramadan: You know, so that that was through the through those ARPA incentives, that was it. There was an 80% threshold, but that's just for those, you know, that's not tied to the rate. Those are those bonus payments etc.

Diedra Freedman: Well, what's it was somebody actually did the math. In order to meet minimum wage. They had paid more than 80%. But they were complaining. And they are already by law. Had to meet what you were asking them to do. That was the point that I'm making.



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

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Zane Garcia Ramadan: Okay.

Diedra Freedman: so, it's just ironic. Just It's philosophically they don't want you to tell them how to run their businesses. So, but In minimum wage is going up again.

Zane Garcia Ramadan: Yeah.

Diedra Freedman: We already know because of the formula. It's probably going to be \$15. January 1.

Zane Garcia Ramadan: Yep.

Diedra Freedman: So, I know, welcome to your world. It's a challenge.

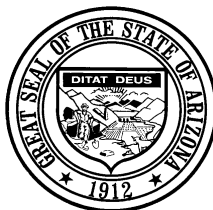
Zane Garcia Ramadan: And then, you know, speaking of legislative issues, we are still working to implement one big piece of legislation that passed last session Which is House Bill 2865 and that is the bill that requires the Arizona Center for Disability Law to work with the division on an independent group home monitoring program for group homes, that houses individuals with complex needs. And so That legislation also actually requires that the division deliver an annual report to the legislature, which includes some specific reporting fields relating to incidents that occur in group homes. We been trying to kind of get the word out to group home vendors that you know, ACDL will be doing this work. And they, they've been hiring monitors and investigators over the past couple of months, and they're set to begin, you know, in the very near future, like, in the next week or two, this is really going to kick off with some of that group home monitoring occurring. So, we're certainly going to be monitoring that in the you know, months in years ahead. Linda.

01:45:00

Linda Mecham: Is that is that limited to the complex needs?

Zane Garcia Ramadan: Yes.

Linda Mecham: So, are there homes that are complex needs? Duly diagnosed complex needs only.



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

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Zane Garcia Ramadan: Well, so the criteria was defined in the legislation and I forget exactly what it says, but based on our analysis, we identified around 500 or so, group homes, that house individuals with complex needs based on the definition in the legislation.

Linda Mecham: Wow. I thought, when I, when I was hearing about it that it only dealt with homes classified as complex needs and I thought Well do we even have those, you know, just uniquely class duly diagnosed because Well, good luck. Sorry about that.

Zane Garcia Ramadan: Yeah. And then the last update I'll share because I know that I continue to provide updates on this relating to staffing capacity. We are really continuing to see strong momentum when it comes to support coordination hiring recruitment, retention in the last nine months, we've netted over a hundred and thirty new support coordinators, which you know was sorely needed in order to decrease caseloads of our existing support coordinators. Obviously though that does mean that we have a lot of new support coordinators, who are, you know, not as experienced. And so we are, you know, very cognizant of the need to provide really good training ensure that they're up to speed on how best to support members and family. But We do believe that this is gonna give us, you know, over the long-term, a solid base and foundation, so that we can have more stability when it comes to support coordination staffing, which you know, will hopefully lead to, you know, increasing levels of the quality of support that is provided by support coordinators to members. So, we're hopeful that trajectory continues in the months ahead. And that is that's where I'll leave you with my update. I don't know if there's any questions about anything.

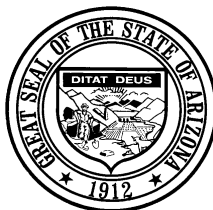
Diedra Freedman: Suzie, did you leave us or She left us, okay.

Linda Mecham: She's gone. Yeah. Zane. So, what about the bill regarding guardianship?

Zane Garcia Ramadan: From what I understand. That's made its way to the house. I'm not sure if it's going to be heard in the house or not. That's about all that. I know at the moment.

Diedra Freedman: Zane. I have obviously serious problems. About the bill that was proposed.

Linda Mecham: I think we all did.



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

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Diedra Freedman: I know it's I know it's been amended.

Diedra Freedman: And in, from what I understand. The amendment is going to require DDD to do what DDD already does. Which is provide information about guardianship to members and their families before their 17th birthday. Um, I know DDD already, does it? Because I personally experience. Andy's support coordinators brought it up with us, we discussed it. On. I'm just wondering, I know your hands are tied. there are certain things you can talk about, and you can't talk about, but I'm wondering with your marketing department. If we can somehow talk about, Guardianship in the need for a guardianship or the other alternatives that are available. If DDD can not only bring that information, To DDD members in their families and friends. But also, to the community at large, I was surprised to learn that. Only 30% of DDD members. I have a guardian. So, I think there's a public misconception. about the needs of DDD members and I know, At yesterday's volunteer luncheon. There were two DDD members who were highlighted, one of them is an accomplished...

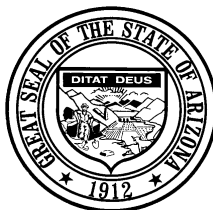
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Diedra Freedman: Cello player, he played the cello right if I remember correctly,...

Zane Garcia Ramadan: Right.

Diedra Freedman: cello. And the other woman is in a golf tournament.

Diedra Freedman: Couldn't attend because she's so I assume she's semi-pro. Whatever, she's performing at a very high level, but obviously still needs support and services because she's a DDD member. I just think that it's important given things that were said by members of the legislature, not only the senator who introduced the bill but her colleagues They don't know. DDD members. They don't know their needs; they don't know the possibilities. They don't know their accomplishments. And as a parent of an individual that had Severe and complex challenges. None of them had a clue about the needs of an individual like my son, Andy. And I found it highly offensive and highly disheartening the way, that DDD members were portrayed by members of our legislature. So, I'm wondering if DDD, with your marketing department. And every one of your employees can help us to get the word out to the community. That



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

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they don't they don't understand who DDD members in their families are and in they need to be educated, they need to know us. They need to experience us. Because they represent us.

Zane Garcia Ramadan: Well said,

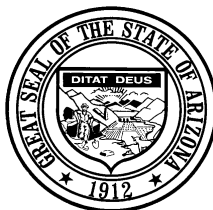
Linda Mecham: Can I just say something to I did a PRC a couple of weeks ago, there was a dad on and his son is highly functioning. I mean functions well, he's his own guardian, and Dad is the rep payee. But Dad said, I know there's going to come a time when he's going to need additional support with regard to guardianship. And he said I'll take care of it at that time. I think that parents also, to just piggyback on what De's saying, I think that they need to understand that it takes some time to get guardianship. And there are levels of guardianship available. So, you know, even just POA medical because this is a, this young man is an adult. If he goes into the hospital, they're not going to talk to Dad because he's not POA, you know? But just that kind of information is needed. The public needs to be aware of that, that it does take time, and that they don't lose all of their rights. Because there are different levels of guardianship depending on the need, that's there. Or if there's no need, but just, you know, just needs to be out there.

Diedra Freedman: I also found it highly offensive. That the Fifth and 14th amendments of the US Constitution. Were ignored. To me. They were ignored by the legislature, not by DDD. To me that labels DDD members is non-persons. Who aren't entitled to the same rights as every other individual? In the United States. but I also, took umbrage with the fact that somehow, they wanted DDD to be the agent that ignored those Fifth and 14th Amendment rights for DDD members. And I think that that puts DDD in an untenable position. I don't think. That there's a reason that we have a procedure in probate court. and we have an independent judge, and we have an independent evaluator and they're entitled to representation by an attorney. To safeguard those rights because those rights are so important. And as the IOCs, That's the core of what we do in the core of our responsibility. And again, Zane, I know. That. Because you're an agency of the state you have to keep quiet. You couldn't say anything. But I'm just wondering.

01:55:00

Diedra Freedman: How we bring that message home, and we educate people and how DDD can do that.

Linda Mecham: With our help.



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Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

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Zane Garcia Ramadan: Yeah. I think it's something that we'll need to continue to talk through. I know that the advocacy community has been working together really well as it relates to this specific bill but to your point being a state agency, we're really not supposed that you know take any side on any bill. And so, I think this is one that you know we would unfortunately have to leave to the advocacy community, to kind of take the lead from a publicity standpoint.

Diedra Freedman: Keith

Keith Jansen: According to the United States Constitution, but according to the United States Constitution, even if your government employee, you can stand up and say no, you cannot force me to do this because it's unconstitutional.

Zane Garcia Ramadan: so, I think, though, One of the things that you have, we have to take into account, is that, as I said, the bill is in the house, it does not appear to be moving forward. But, you know, there are a lot of steps that would need to be passed before it goes into law. And if it got close, I think that you would probably hear a different tone from DDD than what you're hearing now. But the fact of the matter is, you know, it appears and not going to be moving forward. Yeah

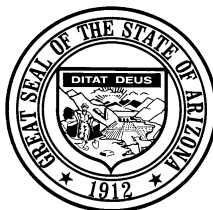
Keith Jansen: Until it gets passed. Okay, but I'm just saying because I've seen it happen before in, you know, the United States government and through our history and, you know, it's just your right to stand up. And if you ever need help in that, I'm sure the IOC would back you guys up, if they passed it.

Zane Garcia Ramadan: Absolutely.

Diedra Freedman: Yeah. Or is Zane? Is there anybody else from? DDD leadership and staff. That has any updates, Leah.

DDD Executive Leadership and Staff Updates

Leah Gibbs: My only update is I'm looking forward to our, I'm on the agenda for the other IOC committees that I haven't met yet and I'm looking forward to those meetings. Thank you.



**Arizona Department of Administration
Arizona Department of Economic Security
Division of Developmental Disabilities (DDD)
Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

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Diedra Freedman: Leah. Can I just say Well Zane's here and Zane knows? I just don't say stuff just to be nice. But the committee Leah, the workgroup, not the committee, the workgroup that Leah has put together to work on insurance issues. Number one, not only is a very important. Number two is actually productive, very productive. So, I just want to recognize that they're doing great work over at the OIFA. And they're also, I've seen when people bring issues to my attention, And I bring them to the attention of the health plans and I always c/c Leah. Somehow automagically. The issues get solved. So, they're doing good work over there. Thank you.

Zane Garcia Ramadan: Totally agree. Thank you for sharing.

Diedra Freedman: Anybody else? From DDD Leadership and staff any updates.

**Roundtable discussion of next meeting agenda and Discussion on
Time and Date of next meeting**

Diedra Freedman: Roundtable topics for the next meeting. Can we talk about changing the meeting? So that. People who are working full-time can participate. Is that a possibility? Can we do a 5:30 meeting? Does anybody have any thoughts on that?

02:00:00

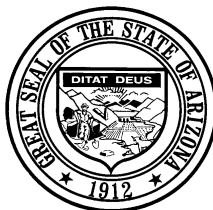
Keith Jansen: I would not be objectionable to that myself.

Diedra Freedman: Linda. Don.

Linda Mecham: That's fine.

Don Harrington: Yeah, we can do that.

Keith Jansen: Would you be able to get the government employees? Because they were nine to five?



**Arizona Department of Administration
Arizona Department of Economic Security
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Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

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Diedra Freedman: But you know what, we meet from 5:30 to 7:30 for District West, on the fourth Tuesday of every month. so,

Diedra Freedman: Michelle. Is extremely flexible for us. In, we had Jeffrey before, and he decided to throw us aside for District Central and the other district that he's got. So, it's not the staff, that's an issue. And we have senior staff, Zane doesn't come to our meetings, but Leah and Joan are always at our meetings and there are other senior staff. So, can we go ahead and pick a different date? And do a 5:30 meeting so that we make sure that we get participation. Does everybody like that? Or do we leave it alone?

Keith Jansen: I'm fine with 5:30. And Zane just said he is.

Diedra Freedman: Okay, Jeffrey. Can you pick us a 5:30 date?

Linda Mecham: What about Wednesday the same day, but just at 5:30

Diedra Freedman: It works for me, but I don't know.

Jeffrey Yamamoto: We do have a conflict with the District North meeting since it is set for five o'clock on the same day.

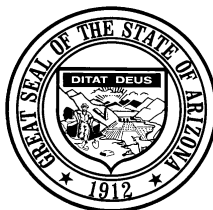
Linda Mecham: What about the second Wednesday? Is this what? I don't know what Wednesday this is.

Jeffrey Yamamoto: This is the third Wednesday of the month.

Linda Mecham: What about the second Wednesday of the month at 5:30? How about Free State workers? Is that okay for you?

Jeffrey Yamamoto: Yeah, I was in this day. I think there's something on that one. We can change it to a different day,...

Kin Counts: That is the District East IOC meeting.



**Arizona Department of Administration
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Leah Gibbs: It's District East.

Diedra Freedman: How about that Jeffrey?

Jeffrey Yamamoto: if you wish.

Diedra Freedman: Yeah, that would work. It seems to be the time that is so important.

Diedra Freedman: And you guys are good about.

Diedra Freedman: Giving us advance notice. I mean, we're, you know, we're talking about three months down the road, But you guys are good about sending the notices out a month early, so everybody can get it on their calendar. Jeffrey.

Jeffrey Yamamoto: So, my suggestion was just that, why don't each one of the chairs go back to their committees. Or I just I guess if it's not even a thing, it's for the chairs. If you guys wanted to just get together and figure out. The date. We can schedule it in on. Whichever date. We have three months.

Diedra Freedman: I'm you pick a date and tell me I'm available whenever at 5:30 as long as it's not the fourth Tuesday of the month, because that's our IOC meeting. So, if you just pick one that doesn't conflict Jeffrey, I think we'll be fine.

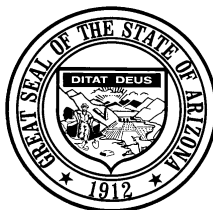
Linda Mecham: What about the third Tuesday? Let's just say the third Tuesday. Let's figure it out. Now, let's do it. We're all here.

Keith Jansen: Yeah, well, we got four of us here out of five. Yeah.

Jeffrey Yamamoto: Third Tuesday, for July would make it the

Diedra Freedman: Kin says, it's okay for District East. So

Leah Gibbs: Looks like the 18th Jeffrey.



**Arizona Department of Administration
Arizona Department of Economic Security
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Statewide Independent Oversight Committee (IOC) Chairs
Meeting Minutes**

April 19, 2023 - 10:00 am to 12:00 pm

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Jeffrey Yamamoto: 18th and I don't have any meetings so there should not be any, it should not interfere with any IOC meetings.

Diedra Freedman: Let's do it.

Jeffrey Yamamoto: **So that would be July 18th at 5:30.**

Keith Jansen: To 7:30.

Jeffrey Yamamoto: Do you have any volunteers for a facilitator while we are here?

Linda Mecham: Keith. I volunteer you De and Linda doing it. De and Linda are tired of doing it? You need to.

Diedra Freedman: Jeffrey. I can do it if we can't get anybody else.

Jeffrey Yamamoto: All right. Well, I'll leave it open and then I will make that request.

Keith Jansen: Diedra can do it. Diedra can do it. She can have all the fun in the world.

Jeffrey Yamamoto: I will ask for facilitators when I send that out a month ahead.

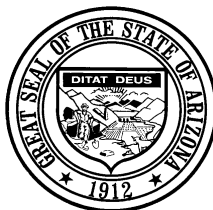
Diedra Freedman: Okay. And does anybody else have anything or can we adjourn? Because we're already 11 minutes over.

02:05:00

Keith Jansen: Zane, I just wanted to apologize to you. I didn't want to make it seem like, you know, with Article 9 You know, that it was your fault or anything. It's just it's been so frustrating. Trying to get that.

Zane Garcia Ramadan: So, I totally understand that. No need to apologize.

Keith Jansen: Okay, so I'm sorry if it was taken the wrong way. You just tell me to shut up and...



**Arizona Department of Administration
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April 19, 2023 - 10:00 am to 12:00 pm**

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Zane Garcia Ramadan: Not at all.

Keith Jansen: I'll shut up; you know?

Zane Garcia Ramadan: Never.

Adjournment

Diedra Freedman: Okay. Since we don't do motions because we don't do votes. I am declaring the Meeting adjourned at 12:12 on April 19th, 2023.

Diedra Freedman: Thank you very much and We'll see you all on July 18th. 5:30 to 7:30 pm for the next meeting.

Linda Mecham: 5:30 or 5. Okay.

Keith Jansen: 5.

Diedra Freedman: By.

Linda Mecham: Thank you. Have a great day.

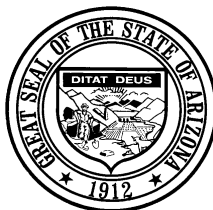
Diedra Freedman: You too.

Keith Jansen: You all have. really great three months and maybe

Leah Gibbs: Hi everyone.

Joan McQuade: Thank you, everyone.

Diedra Freedman: And Larry I got the statement in there, right? Conflict statement. So, we're all cool, right? Okay,...



**Arizona Department of Administration
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Lawrence Allen: You got it?

Diedra Freedman: nothing else I needed to do.

Lawrence Allen: No, you're fine. This is its open meeting.

Diedra Freedman: All right.

Lawrence Allen: All really doesn't really pertain to this meeting. Um, so it's not a public meeting.

The meeting ended after 02:06:35 🤝