



COMMISSION ON DISABILITY

MINUTES

1:00 p.m., Wednesday, December 3, 2014

Los Angeles City Hall Board of Public Works

200 North Spring Street, Room 350, Los Angeles, California 90012

COMMISSIONERS PRESENT:

Robert Bitonte
Theresa de Vera
Michael Griggs
Harriet Posner
Richard Rothenberg
Robert Williams
Betty Wilson
David Wolf

COMMISSIONERS ABSENT:

Alisa Schlesinger (excused)

DEPARTMENT ON DISABILITY:

Stephen Simon, Executive Director
Tony Abraham, Senior Management Analyst
Angela Kaufman, ADA Compliance Officer

COMMISSION STAFF:

OTHER CITY DEPARTMENTS:

GUESTS:

Neal Richman, Westside Independent Living Center
Stephanie Lee, NSCLC
Dr. William Averill, LACMA
Louis Burns, Access Services
Michael Greenwood, Access Services

* AUDIO TAPE(S) and CAPTIONING NOTES ARE AVAILABLE UPON REQUEST

ITEM NO. (1): CALL TO ORDER, ROLL CALL, ANNOUNCEMENTS AND INTRODUCTIONS

DISPOSITION: ACTION TAKEN.

President Bitonte called the regular meeting to order at 1:15 P.M. Roll call was conducted and a quorum of the commissioners was present.

ITEM NO. (2): APPROVAL OF THE REGULAR COMMISSION MEETING MINUTE

DISPOSITION: ACTION TAKEN

Commission approved minutes for meeting convened on November 5, 2014.

ITEM NO. (3): PUBLIC COMMENT

DISPOSITION: PUBLIC COMMENTARY RECEIVED – FOR ANNOUNCEMENT PURPOSES ONLY*

Public comments were granted.

ITEM NO. (4): VETERANS HOMELESSNESS AND PROPOSITION 41

DISPOSITION: NO ACTION TAKEN, INFORMATIONAL PURPOSES ONLY*

At the August 6, 2014 Commission meeting the Commission approved motion 08062014-5D that recommended to the Mayor and City Council to seek support of the City's and Commission position on housing of homeless veterans in Los Angeles from the Los Angeles County Medical Association and other appropriate organizations.

The Commission discussed the needs of disabled veterans. President Bitonte will offer a resolution to the California Medical Association (CMA) to support the Commission on Disability and its motion 08062014-5D.

President Bitonte will report back next month.

ITEM NO. (5): CALIFORNIA COORDINATED CARE INITIATIVE.

DISPOSITION: ACTION TAKEN.

At its meeting of November 5, 2014, the Commission approved the motion that was relative to the Commission on Disability recommending the study of the Coordinated Care Initiative (CCI) and its impact on people with disabilities by inviting testimony from people with disabilities and from subject matter experts.

At today's meetings of December 3, 2014, there were presentations by **Neal Richman**, Westside Independent Living Center; **Stephanie Lee**, Supervising Attorney, Health Community Center, Neighborhood Legal Services of Los Angeles which serves as the CCI Ombudsman for Los Angeles County; **Dr. William Averill**, Torrance Memorial Medical Center.

Mr. Richman discussed a number of topics. People who are dual eligible need assistance to navigate through options of CCI, but the assistance provided in writing is not always clear.

Clients find it difficult to compare their options and the managed care plans.

Clients are changed into managed care plan, if they don't affirmatively choose to opt out. A client might find that a primary care physician may not be covered by a particular managed care plan.

Medical providers are dropping out the program, because a Medicare provider may not want to work with a Medi-Cal managed care program.

Also prescription drugs and durable medical equipment (DME) services are changed for those who are in CCI.

Furthermore, unlike the Affordable Care Act, CCI didn't fund an extensive educational outreach that could have used community groups with immediate access to clients in their neighborhoods.

Questions arise how the program is being evaluated, since it is a pilot program. Mr. Richman suggested that perhaps some of the organizations present at the meeting today could draft a point paper that evaluates CCI.

Commissioner Wilson recommended using the California Advisory Committee on Medicare and Medi-Cal for assistance.

Ms. Lee is Health Community Center, Neighborhood Legal Services of Los Angeles, which is the local ombudsman for the CCI program. Her organization can be contacted at:

1-800-896-3032

Ms. Lee indicated the problems with the CCI program can be divided into pre-enrollment and post-enrollment issues.

The pre-enrollment starts with the notices that are sent out. To have people make an affirmative option to opt out of the CCI program has posed barriers to individuals needing to understand and express choice. People not eligible for the Cal-Medicconnect program has been mistakenly enrolled into the program.

The post-enrollment issues is the disruption of service, due to passive enrollment in Cal-Mediconnect and people not understanding the consequences. Doctors may believe that their offices does not accept the new plan, so deny services.

Clients have an option of "continuity of care," which allows clients enrolled in the Cal-Mediconnect program to retain their same doctor for a period time, even if the doctor does not contract with a particular managed care plan.

But the continuity of care provisions does not apply to durable medical equipment (DME), physical therapy, and other services.

Yet it does cover transportation services.

The continuity of care provisions no longer requires clients to show the Medi-Care or Medi-Cal card. One card replaces them, because all of the benefits are under one plan.

Question posed whether statistics have been recorded about the number of deaths associated with denial of health access associated with CCI. Ms. Lee recommended the Center for Medi-Care and Medi-Cal Services (CMS)

Dr. Averill discussed a number of topics. He is a member of the dual task force of Los Angeles County Medical Association (LACMA).

LACMA filed a suit to stop the implementation of CCI and requested a preliminary injunction in the Sacramento Superior Court. The Court rejected the request.

CCI purports to be voluntary, but those with Medi-Care benefits who fail to affirmatively act will be enrolled and have some Medi-Care rights taken away. The information is not clear to the clients he serve which could result in them being deprived of Medicare benefits.

CCI purports to be a demonstration or pilot program, but it involves 460,000 Californians, 200,000 of whom are in Los Angeles County.

Beneficiaries are overwhelmed by the paperwork, which could result in them be deprived of services.

Beneficiaries with ongoing medical problems requiring specialized attention from one or more specialist have built up a network of service that could be disrupted by passive enrollment into CCI.

ITEM NO. (6): LAWA ADA Access Advisory Committee and consideration of motions

DISPOSITION: ACTION TAKEN

Commission considered and approved the following two motions:

MOTION 12032014-A relative to confirming the appointment of Louis Herrera to the LAWA ADA Access Advisory Committee.

MOTION 12032014-B relative to confirming the appointment of Joyanne (Jody) Schinnerer to the LAWA ADA Access Advisory Committee Commission recommended entertaining a motion at the next meeting, in order to approve creating an ad-hoc committee to investigate fund raising strategies.

ITEM NO. (7): UPDATE BY ACCESS SERVICES

DISPOSITION: NO ACTION TAKEN, INFORMATIONAL PURPOSES ONLY*

Louis Burns and Michael Greenwood of Access Services discussed a number of items.

Access is developing standard operating procedures on their practices to ensure agreement and implementation by service providers.

Access contracts with transportation companies to provide the paratransit service known as Access Services.

Additionally, Access and the Los Angeles County Sheriff Department are working together, using a few detectives for fraud and other crimes, such as disturbances during client trips.

Access is using Smart Drive as its video camera for activity inside and outside of its vehicles. Standard operating procedures are developed to safeguard the video evidence and for directing Access contractors about using the cameras.

All service providers to Access Services will have their facility inspected to ensure the security of vehicles and contract employees. Access will also have its employees conduct field visits on route to evaluate the quality of service.

Regarding emergency preparedness, Access Services join a regional, 12-member group that assist each other during emergencies or disasters. The regional group is called the Transportation Mutual Assistance Contract (TRANSMAC). Access has also developed a continuity of operation plan to address operating during disasters.

GPS is not installed on Access vehicles, but video cameras can record events and act as information for customer complaints.

ITEM NO. (8): FUND RAISING

DISPOSITION: ACTION TAKEN, INFORMATIONAL PURPOSES ONLY*

At its monthly meeting on November 5, 2014 the Commission discussed fund raising and recommended considering a motion to create an ad hoc committee on fund raising. The Commission approved the following motion:

MOTION 12032014-C relative the Commission on Disability establishing an Ad Hoc Committee from members of the Commission on Disability that will research and coordinate efforts to raise resources to support the activities of the Commission on Disability and the Department on Disability.

ITEM NO. (9): DISCUSSION EXECUTIVE DIRECTOR REPORT.

DISPOSITION: NO ACTION TAKEN, INFORMATIONAL PURPOSES ONLY*

Stephen Simon provided an update on department's activities.

ITEM NO. (10): PUBLIC COMMENT.

DISPOSITION: DISCUSSION.

ITEM NO. (11): NEW BUSINESS

DISPOSITION: NO ACTION TAKEN, INFORMATIONAL PURPOSES ONLY*

ITEM NO. (12): ANNOUNCEMENTS

DISPOSITION: NO ACTION TAKEN, INFORMATIONAL PURPOSES ONLY*

ITEM NO. (13):

ADJOURNMENT

MEETING ADJOURNED AT APPROXIMATELY 3:31 P.M.

Robert Bitonte, President DATE
COMMISSION ON DISABILITY

Tony Abraham, DATE
DEPARTMENT ON DISABILITY