

North Metro Community Services Board Minutes

February 22, 2024

Agenda

Dr. Bertagnolli called the meeting to order at 6:00 PM. He asked the board for a motion to approve the minutes of the January Board meeting, to approve the agenda for the February meeting and to excuse John Coates, Hannah Martinez and Josh Dobratz. Warren Taylor made the motion, seconded by Doug Shepherd. The motion passed unanimously.

Finance Committee Report: Doug Shepherd presented the January 2024 Financials

Statement of Activities

In the month of January 2024 a net loss of \$40,868 was recorded. The loss for the month exceeded the expected \$1,685 loss by \$39,183 for the month. Total revenues for the month were near budget overall with Early Intervention being ahead of budget and Day Program and Residential being under budget. Year to date the net loss of \$324,521 exceeds the budget loss of \$77,316 by \$247,205. The first half of the year losses are not atypical as holiday pay and holiday bonus payment negatively exaggerate performance in the first half of the fiscal year.

Administration

- Administration recorded a net loss of \$928 in the month of January which is about \$10,000 better than what was budgeted for January.
- Total revenues in Administration are \$2,479 short of budget for the month but were helped with strong interest revenues on our money market account.
- The loss in Administration is primarily caused by the payment of \$29,387 to our financial auditors.
- Year to date net revenues in Administration are \$141,321 and are \$77,983 under budget for the year.

Day Program

- Day Program recorded a loss of \$99,391 in January and exceeded budget by \$27,830.
- Revenues overall were short of budget in Day Program by \$43,525.
- Due to weather our Day Program was closed for 2 days in January. This closure costs us revenues of approximately \$35,000.
- Attendance improved to 85% in the month of January. This is an improvement from the 80% in December but still short of attendance percentages that were over 90% in the fall. The percentage of attendance will improve as the weather does.
- The weather closures and New Year's holiday impacted the financial performance as well in the month of January.
- The year to date net loss of \$658,148 is \$1,498 ahead of budget for the year.

- The Brighton Day Program is beginning to show improvement financially. The reduced rent combined with improving attendance in the next few months is likely to have the Brighton Day program show some net revenues in the spring.

Supported Living Services (SLS)

- Supported Living earned net revenues of \$15,362 in the month of January.
- Revenues in January were short of budget but remain adequate to support the overhead of the program.
- Year to date we have earned net revenues of \$26,423 and are short of the budgeted amount of \$47,909 by \$21,000.

Residential

- The residential department had net revenues of \$17,205 in December. The net revenue for the month is \$50,244 less than budget for the month.
- Total revenue for Residential in January are \$42,612 less than budget for the month. Growth in Residential is flat as we work through systemic enrollment issues post transition to the new CMA RMHS. The lack of growth has negated the offset of losses from the regular attrition and absences.
- There are 3 new enrollments that are currently being held up by delays with the new CMA.

Early Intervention

- Early Intervention recorded a net revenue of \$26,855 in the month of January which compares favorably to the month budget.
- The net revenues in Early Intervention tend to fluctuate based on salaries and the amount of administrative and TCM funding in the month.
- Year to date net revenues are \$53,729 and are \$33,638 ahead of budget through January 2024.
- Despite the strong overall month in Early Intervention, the Evaluations program had a loss of \$5,179. We purchased a large supply of Evaluation materials for \$4,465 in the month of January.
- No shows for Evaluations have hurt revenues for that program.

Brain Kraft made the motion to accept the financials for the month of January, Lori Freyta seconded and the motion passed unanimously.

Executive Directors Report

Dr. Bertagnolli told the board that the Executive Committee discussion would be covered in the Executive Director's report and called on Randy Brodersen to provide the report.

Randy told the board that the transition of Case Management is still going very poorly. There are a number of reasons for this. First it is a huge undertaking. Over 80,000 people are involved and the new Case Management Agencies (CMAs) are not just providing case management to people with IDD but to people in all long term care waivers, which include the waivers for people with mental health issues, the Elderly, Blind and Disabled and people with Traumatic Brain Injuries. Moving Case management for that many people would be a huge undertaking under the best of circumstances.

The second stumbling block is the fact the Public Health Emergency (PHE) ended last spring so for the first time in three years people in these waivers must go through the process to confirm their eligibility for services. This has created an enormous workload at county departments of human services across the state. Many of these offices are understaffed and all these redeterminations happening at once are overwhelming them. These offices are also impacted by problems with the data processing system at Health Care Policy and Financing (HCPF).

The most significant problem though appears to be the new Care and Case Management (CCM) data system that HCPF rolled out 7/1/23. To put it simply, the system doesn't work and it requires a great deal of additional work by the CMAs and the counties. The end result is that people who rely on long term care supports are being unjustly terminated from services. This is a problem regardless of what waiver people are in and when it comes to medical care it could be life threatening.

Our Statewide organization Alliance and its CMA members are actively working with HCPF and others at the State including staff for the Joint Budget Committee (JBC) to get the funding needed to help the CMAs do their job and to insure that the CCM system is working properly. HCPF is working on a plan to address the situation which should be made public by March 1. Time is of the essence because the JBC is scheduled to approve funding for our programs on March 6.

In the meantime The Colorado Center on Law and Policy and the National Health Law Program, two groups that advocate on the behalf of people with low income and/or disabilities, have filed a complaint requesting that the entire transition process be placed on hold. Stopping the transition isn't practical at this point but they are also asking that all Medicaid terminations be paused, which would really help. It is yet to be seen if this complaint will produce results but it does seem to have put additional pressure on HCPF to deal with the situation.

We are starting to see the impact of this at North Metro with a number of people losing eligibility. We are working with them to get eligibility re-established. We also have two new Resource Facilitators who can help people with issues like this. Regardless these are trying times, in 28 years I've never seen our system in such disarray. I hope to have better news to report at our next meeting.

Dr. Bertagnolli thanked Randy for his report.

Program Report Early Intervention

Kelley Montoya, the Early Intervention Director introduced her Associate Director Claudia Casillas and the EI Evaluation Coordinator Lynn Craig before starting her power point presentation.

The Early Intervention Program provides services to children from birth until their third birthday who have developmental disabilities or delays. This is a program that NMCS has long supported, back to the days when it was known as “Infant Stimulation”. Its importance was stressed to the board by our past Executive Director Roxanne Pinneo and there were years when NMCS spent as much of its own money on the program as did the State of Colorado.

Kelley emphasized how important it is to address these issues early in life. 80% of brain growth occurs by age three so it is very important to teach these fundamental skills at an early age.

The Early Intervention Program has two components at NMCS. The first is the Evaluation Team. This is a group of program area professionals, Physical Therapists, Occupational Therapists, Speech/Language Pathologists and Early Childhood Education Specialists headed up by Lynn Craig. Two members of this team are assigned to assess every child to see if they have delays that qualify them for Early Intervention. To qualify they must have a delay of 33% in one area or delays of 25% to 32% in two areas. However, the evaluators have some leeway to exercise their professional judgement when children don’t meet the technical guidelines and qualify children under “informed opinion”.

Evaluations are completed at our facilities in Westminster and Brighton though families can opt for remote evaluations if that works best for them. The team completed 1186 evaluations last year. If the child qualifies for services the team refers the family to the NMCS EI Program.

The Early Intervention program consists of the Director, the Associate Director, 2 administrative staff, 3 Lead Service Coordinators and 18 Service Coordinators; 9 members of this team are bilingual to help us serve the Spanish speaking population in Adams County. We also employ interrupters for both evaluations and services when needed.

The Early Intervention process is family centered. Every family has a Service Coordinator and an Individual Family Service Plan that is based on the specific needs of the child and their family. It has been shown that infants and toddlers learn best through everyday experience and interactions with familiar people in familiar settings, which makes building the plan around the family so important. Service Coordinators help families locate professionals that can provide the specific supports their child needs. There is no cost for eligible children to participate in the program.

Service Coordinators work with families and their providers to monitor services and make sure they are addressing the child’s needs. They review the Individual Family Service Plan every 6 months to make sure that the child is progressing towards their goals. The Service Coordinators work with school districts to help transition children who may need special education services.

Our Service Coordinators also help families access other community resources. If the family is struggling to put food on the table or keep a roof over their heads the special needs of the child involved can easily fall by the wayside so it is important to do what they can to support the family in general.

This past fall NMCS added two Resource Facilitators who also work with the Early Intervention Program. These staff can help families access other services as they age out of Early Intervention. They are also now helping families connect with Rocky Mountain Human Services who will be providing them case management if they continue to qualify for IDD services.

Board members asked Kelley and her staff a number of questions about the program when they completed their presentation.

Dr. Bertagnolli thanked Kelley and her team for their presentation and then said he would entertain a motion to adjourn the meeting, Doug Shepherd made the motion and Cheryl Candelaria seconded, the motion passed unanimously and the meeting was adjourned at 7:03.