REALTIME FILE

DDA - TOWN HALL Region 3 APRIL 9, 2020

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>> JEREMY NORDEN-PAUL: Good afternoon, everyone. We'd like to welcome you to the disabilities community town hall conversation. We're going to talk to you about COVID-19. This event is being co-sponsored by Developmental Disabilities Council, the Arc of Washington State, and the Developmental Disabilities Administration, or DDA.

For those of you who I don't know yet, my name is Jeremy Norden-Paul, and I am the executive director of the Washington State Developmental Disabilities Council.

I'm going to go over a few quick points before I turn it over to Sarah Blanchette, who's going to give us a Zoom overview.

I want to make sure everyone is aware that this meeting is being recorded. It's a live event, but we're recording it, so that people who cannot attend have the opportunity to see it later.

And also, after we post it, even people who do attend the event, will be able to go to the link and listen to it or watch it as many times as you'd like.

And so, we did have our first town hall event earlier this week on Tuesday morning. And we had another one this morning. And so this is going to be the third one. Both of the previous ones have already been posted online, and as soon as this one is over, we will do the same thing. We will post it online, and then we'll share that link with you.

I gave this reminder a couple minutes ago. Just a reminder to keep your video camera turned off, that way the presenters have plenty of space for their slides. And if you're joining with a computer or other device, there's a mute button on your screen. Make sure that you're muted so that we don't get any feedback or background noise or conversations that might be happening in your home or office.

And if you're joining from a cell phone or land line, just make sure that the mute button is pushed so that we don't get those noises.

You've probably noticed that we have CART Captioning services. You'll see those going across the bottom of your screen. And we are very thankful to have those services for folks who prefer to read what we're saying.

In terms of asking questions, we want to make sure that every single person who is here today has the opportunity to ask questions when the time comes for Q&A. The best way to ask your question is going to be in the chat box, and we'll talk about that in just a minute.

But, if for some reason, you don't have access to the chat box or you prefer not to type or whatever reason, we want to make sure that you still have the chance to ask your questions.

So, there's a couple of other ways that we'll talk about in a couple minutes. One is you can raise your hand. There's a feature to raise your hand. Or you can type your name or click a key. And if that doesn't work for you, we will open up the microphones a little bit later for you to ask your questions.

So we'll make sure that we get to you. And if we're not able to get to every single question, we will make sure that we include every single question in the Q&A document that we put together.

Something else that I want to acknowledge real quick is that there's a lot of updates and questions that we're going to cover today that are specifically about DDA, and that's -- you know, that's the way that we've organized this. We've organized it by DDA region.

But we've also been very clear that this meeting is open to all people, including people who do not receive DDA services or who are not even eligible for DDA services.

So make sure that you have questions that are not about DDA. Please feel free to ask them. We highly encourage that, and we want to make sure that you have a chance to do that.

Lastly, before I turn it over, the primary audience and the primary focus of this conversation is for people with developmental disabilities and their families. And of course, providers and other professionals are welcome to be here too and ask questions. You're very, very much a part of the community. But please also know that there are some provider-specific webinar opportunities, and we can share more information about those later.

The next one I believe is going to be on Monday. So, if you don't have a chance to get your provider-specific questions addressed today, don't worry, because there will be plenty of opportunities in the near future for that.

So, without further ado, I'm going to hand it over to Sarah so that she can give us some tips and pointers about using Zoom today.

>> Excellent. Thank you so much, Jeremy. My name is Sarah Blanchette. I'm with Developmental Disabilities Administration, but today I'm part of your Zoom Room crew. So, we are all learning a different way to be, a different way to connect, and we are coming to you live from Zoom, and we don't assume that people know about this platform. So we're going to give you a little mini orientation

and we're going to be doing a lot behind the scenes to try to make this the best possible experience for everyone.

Whether you have a lot of technology experience or just none at all.

So, I'm going to introduce you to the Zoom room crew. I'm going to be on the chat, managing the PowerPoint. I also have two other people helping me. We have a host today. Martin, I'm going to have him talk to you in just a minute about why it's so important to mute and why that will help our whole process and how to do that. Martin is from Service Alterntives. We also have a technical assist person that's here if you lose sound or can't see.

His name is Mitchell, so wave at everybody, Mitchell. So he's going to be talking to you a little bit about technical support and how you get in touch with him if anything goes wrong during the Zoom meeting.

But I first want to turn it over to Martin. Martin, will you please talk about muting and unmuting and why it's so important?

>> The bottom left part of the screen, you'll see that microphone icon which allows you to mute and unmute. There are a lot of people in this call, so we like to try to only have the speaker unmuted at any time in the meeting.

If you have a question, if you want to pose it in the chat, and I will address it. And, yeah. Aside from that, I actually think that's everything, right?

>> Yes, absolutely. And the biggest thing is we want you to be able to see the PowerPoint. So the less video we have, the less overwhelming it is. We're also going to have the speakers or presenters, if they're up for it, to unmute their video, so you can see them. And it adds a little human element.

And if they're the only ones with their video unmuted, you see them first and it goes really well. So, thank you, Martin. Martin is behind the scenes doing this.

This is something I want to talk to you about. This slide is really a lot for my presenters, but I think we can all practice this. This is a new way that we're learning how to be. So this is how you introduce yourself to the Zoom world.

So what I want you to do is I want you to go into your toolkit and hit participants. And once that window opens up for participants, I want you to find your name. It should be right at the top. And then two blue buttons are going to appear. One blue button says mute. You have another blue button that says more. Hover over the blue button that says more. Click on it. And then all of a sudden a little button is going to pop up and it says rename.

Go ahead and click rename, and I want everyone to put in their first and last name. Now, if you can't figure this out, don't stress. It's not a big deal. This will just help us, if you have a question, or if you're a presenter and we need to find you and help you unmute yourself. It's going to help us find you faster.

Now, if you're on the phone, of course you're not going to be able to do this. But if you're on the computer, this will help us

so much. So, again, hover over your name, two blue buttons. One says mute or unmute. Don't hit that one. Hit the one that says more. And then another button will pop up, and it says rename.

And then a little window will come up. It's really easy. Type in your first name, your last name. Then we can find you.

Be careful just giving us a first name. There's a lot of Sharons, a lot of Jennys. We've had trouble finding presenters if they just put their first name in. If you can't figure it out, don't stress about it. It's not going to be the end of the world if we don't have your first and last name.

All right. So, next on the little Zoom orientation, I want to talk to you a little bit about chat. So, on one side of your task bar is mute and unmute. On the other side is a little bubble called chat. This is how with such a big audience we're going to communicate with each other.

So what you're going to do if you have a question during the presentation, you're just going to click right on chat and you're going to type your question, any time. We have a moderator, Stacy Dem, who is going to be in charge of facilitating those questions and answers, so she's trying to make sure she captures all of your questions.

Now, for etiquette, please do not chat back and forth with each other. That's going to crowd our chat. We will maybe not get to your question, and we don't want to do that. So please don't use the chat to chat back and forth. If the you have a helpful link, that's fine. This has been really helpful for people when they can think of something helpful, they'll throw a link in to a website or something of that nature. So, please feel free to do that.

The final piece of the orientation is I want to turn it over to Mitchell Strenk. He is your go-to person for all technical issues. That's him, again, in the video. What you're going to do is make sure when you're in the chat, if you have a question, make sure it's marked for everyone, so we get your question about content, like where to find information about DDA.

If you have a technical difficulty, filter your chat just for Mitchell. Super easy to do. Go into your chat button where it says everyone. Click the little upside down triangle and look for Mitchell's name. You can type in Mitchell.

And then you can say, hey, Mitchell, my sound is not working, and all of that. Mitchell, go ahead and let them know how else they can get in touch with you.

>> Like you said, you can just direct message me in the chat. I'm also going to be just typing in my email right there.

So if you have issues, get in contact with me in the chat. You can just send me an email right there and I should get back to you as soon as I can. It should be pretty quick.

>> Without further ado, that's from your Zoom room crew. Thank you so much. Please sit back and enjoy the presentation. Jeremy, I'm sending it back to you.

>> JEREMY NORDEN-PAUL: Thank you, Sarah. We are very excited

to be here with you this afternoon. But at the same time, we know that this is an incredibly difficult moment in time for us, and that each of us as individual people and as family units, we are struggling. Our world is changing. We're trying to adapt. We're trying to figure out what the new normal is. And just trying to get through the day in most cases.

Many of us know someone who has had COVID-19 or who currently has it. I know for a fact there are some of us on this call who have had it ourselves, or who currently have it.

And also, very sadly, there are people within our networks, within our circles, within our families who have passed away because of COVID-19. So, as excited as we are to be here with you today, we also know how difficult this time is, and so we appreciate your time.

This challenge is really pushing us in so many ways and challenging us in ways that we didn't think was possible. But something that I think is really amazing, and I know that everyone has seen it, I've seen so many stories, and I've heard so many short stories shared with me, is that people are really stepping up and coming together in all sorts of new ways, whether it's virtual or figuring out creative ways to support each other that help out your neighbors, your friends, people in your family.

One of the most amazing things is when we see people like healthcare professionals and provider staff and direct care staff who are putting themselves on the line and risking their health and safety every single day to make life better for other people, whether it's someone in their family or just as part of their daily job.

They are literally saving people's lives and we are deeply indebted to those people for doing that.

We see the same thing if we look at our state agency and provider agencies. People are working around the clock, just to make life better and to make sure that people have what they need.

So it's certainly not exactly what we need it to be yet. We certainly have a lot of challenges that we need to -- am I muted?

- >> No.
- >> JEREMY NORDEN-PAUL: Okay. I just got a little signal that I was muted for a second, so I wanted to make sure that you still could hear me. You can still hear me, right?
 - >> Yes, we still hear you.
- >> JEREMY NORDEN-PAUL: Okay, great. I'm so glad. That way I'm just not talking to no one.

So we know that we're far from being where we need to be, and this is just one step in terms of getting information and sharing information and sharing challenges and resources, but we are moving forward together. We see progress happening every single day, and we are more disconnected and more isolated from each other and our families and our friends and the people who support us than we've ever been before.

But the only way we're going to get through this is if we stick together, we keep communicating, we keep expressing our needs,

expressing our challenges, and do it together. And that's the only way we're going to get through it.

So, thank you again for being here, for giving up your precious time that we know is being spent away from your family, who needs you right now.

I'm going to just share briefly about who the DD Council is and what we do, for those who may not be familiar with us, and I want to move on with the rest of our presentation today.

For those who are not familiar, the Developmental Disabilities Council is a federally funded agency here in Washington State. There are 56 DD councils all around the country, one in every single state and territory.

And we get our marching orders from a federal law called the DD Act and we also get direction from our council members, who are appointed by the governor of Washington, and those council members include people with developmental disabilities and family members of people with developmental disabilities. So we are very much by and for people with developmental disabilities.

And our simple job is to advocate for people with developmental disabilities and their families all across the state, not just for the people who are receiving DDA services, certainly very important to us, but also for the 100,000-plus people with developmental disabilities across the state.

So if you ever want to know more about the DD Council, you can contact me or go to our website. If there's ways that you might want to get involved with us. And with that, I am going to hand it over to Stacy to introduce herself and to talk about the Arc of Washington State briefly.

>> Hi, everybody. I'm Stacy Dym. I'm currently the executive director of the Arc of King County and the incoming executive director for Arc of Washington State. The Arc is a national non-profit organization that promotes and protects the rights of people with developmental disabilities, ensuring their full inclusion across all aspects of society throughout their lifetimes.

In our state, we have a state chapter, and we have nine local chapters across the state. And the Arcs are different in every region. All of the Arcs provide some level of direct service and advocacy for children and adults with developmental disabilities as well as for their families and caregivers.

We've all moved most of our services to be virtual. We're busier than ever, supporting families, caring for their young children at home and adults who are living independently in the community. Who need the support even more than ever.

So, we definitely want to hear from you. We each have COVID pages developed on our website. The Arc of Washington State has one as well as most of the local chapters, so you can get local information there.

We want to hear from you and we're here for you. Thank you again for being here today, and I look forward to moderating some of your questions. Back to you, Jeremy.

>> JEREMY NORDEN-PAUL: Great. Thank you so much, Stacy. So, the next thing that we're going to do is we're going to introduce a few folks from the Developmental Disabilities Administration. We're so grateful that they were able to be here with us today.

We have with us Evelyn Perez, the assistant secretary of DDA, and also Kris Pederson, and a few other folks from DDA's central office who are going to be available later to answer some questions. With that, I'm going to hand it over to Evelyn to share some updates with us.

>> EVELYN PEREZ: Thank you, Jeremy. I'm Evelyn Perez, assistant secretary of the Developmental Disabilities
Administration, and I really want to welcome everybody to this forum.
Thank you for taking the time to participate and to share.

I really do appreciate the continued partnership we have with the Developmental Disabilities Council and also with the Arc of Washington State, and of course, you, the folks out there, who we worked with very closely.

I want you to know that DDA's team has been focused on working around the clock to really ensure that we receive the approvals that we need and to ensure that we can provide the services we need to provide in the most flexible manner possible.

And we are advocating every single day for the needs of individuals with developmental disabilities and making sure that their needs are kept in the forefront.

So, I just really want to thank you for being here. We have a great team that's going to help you. I, unfortunately, have to get on another call, so I'll be leaving for a bit. But I hope that all of your questions are -- we're able to answer them and we're certainly going to strive towards that.

Kris?

>> KRIS PEDERSON: Hi. Good afternoon, everyone. Thank you very much for this opportunity to come and join this town hall. My name is Kris Pederson, and I'm the regional administrator for Developmental Disabilities Administration in Region 3.

Just to help the area Region 3 covers, we have 13 counties and 15 different fed rated tribes that we work with. We have offices in our Port Angeles, Port Townsend, Brimmerton, Tacoma, Tumultuous Water, South Bend, Aberdeen, Kelso, and Vancouver Washington.

I do want to make sure everybody knows, while we've been honoring the governor's proclamation of stay home and stay healthy, our offices are closed to the public, but we still have all of our staff working. Our staff are working diligently, still contracting providers to be able to get them working, being able to continue doing intake and eligibility to get clients eligible for services.

And our customer service specialists are supporting our front desks to make sure that people's phone calls are being addressed. All of our case managers are working. They are all available by phone and email. I know that it may take a little bit longer at times for people to be able to get a response back, but they're working diligently to help work through issues with clients, get assessments

done, authorizations, get people connected to services.

Each of our offices has signs posted with phone numbers that people can contact if they're trying to drop information off. You can schedule appointments or contact your case manager and schedule appointments. So if you need to have something dropped off, then we can arrange it that way. Or you can email it to your case manager.

There's many questions that are going on right now regarding COVID and how services will continue, and how our clients are continuing to struggle to adapt to our -- the proclamation of staying home, stay healthy.

Every day is a new challenge for everybody. Please be sure, though, our case managers are working hard every day to make sure that clients are getting the resources that they need to be able to continue to service us.

In addition, we have developed different resource sites within our regions for each offices, so if you have questions regarding COVID, the COVID-19 testing sites, housing options, option regarding behavioral health services, interpreter services, food bank resources, we have a variety of resources that case managers can assist you.

And lastly, we've been having our customer service specialists, resource managers, and our performance quality improvement team contact providers and clients who are most vulnerable to ensure that they're getting the information regarding COVID and the resources within their communities so they can continue to get access to services.

So, thank you very much, and I hope we will have a great conversation.

>> JEREMY NORDEN-PAUL: All right, great. So, as I mentioned, we do have a few folks from the DDA central office with us on the call and we're very grateful for their time. Before Beth gives updates about waiver services, I wanted to provide a little bit of national context, because I've seen a lot of updates from other states. We know all states all across the country are working very hard right now to make changes to their waiver services.

So that they can provide flexibilities and adapt to the changing challenges. And so one of the ways that states can do that is through something called an Appendix K, and Beth is going to talk more about that in a minute.

But Washington state was the very first state in the country to apply for and have approved an Appendix K document that allows us to implement some of those flexibilities. There's several other flexibilities that Beth will talk about that Washington state was on the very front end of to get those applied for and implemented.

So with that, I'm going to turn it over to Beth so she can talk about what it is that Washington applied for and what some of those service updates and flexibilities are that we're using here.

>> Beth Krehbiel: Thank you so much, Jeremy. So the centers for Medicare and Medicaid services allow for temporary flexibility during time of emergency

Since governor Inslee's emergency declaration at the end of February, the Developmental Disabilities Administration has been working in partnership with the healthcare authority and The Centers For Medicare and Medicaid Services to adjust our Medicaid system so that Washingtonians are supported.

Washington State DDA was the first state in the nation, as Jeremy said, to have emergency authority under the Appendix K, approved for our 1915c waivers. And 1915c waivers are individual and family services, children's intensive in-home behavioral supports, basic plus, core and community protection.

Washington was also the second state in the nation to have approval under 1135 waiver authority. We have also submitted an 1115 waiver and state plan amendments for added flexibilities that cannot be addressed through the Appendix K or the 1135 waiver.

So those are a bunch of letters and numbers to describe a number of different ways that we're getting flexibilities to support the people in Washington.

So what those things get us is the ability to do work differently. So, examples of doing things differently are doing assessments over the phone, adding provider types for certain services, expansion of some service limits or scope of services, delivering services over the telephone.

You may see some of your providers doing services via the telephone. This is also similar to what the healthcare authority is doing by delivering some services via telehealth. So, speech, your doctor visit, other things. Those could be delivered over the telephone, too.

And that could be regular telephone. It doesn't have to be a smartphone or an iPad or something fancy. Just the regular telephone can do just fine.

So, as these efficiencies are created and as we explore through this, we're also looking at what we can do next. So we continue to get feedback from the community, from providers, from our clients to see what we can do next to support you and keep folks healthy and safe through this challenging and difficult time.

So, thank you so much for having me speak. I'll turn it back over to you.

>> JEREMY NORDEN-PAUL: Thank you so much, Beth. Before we hand it over to Shaw Seaman to talk about personal protective equipment, we included this information specifically because this is one of the most common topics and concerns and questions that come to us around PPE, and personal protective equipment, which Shaw will talk about in a minute, includes gloves and facemasks and other ways of protecting ourselves from getting sick and protecting other people from getting sick as well.

And it's incredibly important, when we're caring for people or when people are caring for us, we want to make sure that we're staying healthy and they're staying healthy. He's going to talk about measures that DDA and others in the state are doing to make sure that people receiving care and care providers have access to the PPE that

they need.

>> SHAW SEAMAN: Thank you, Jeremy. Good afternoon, everyone. That's exactly right. Personal protective equipment, which does include masks, gowns, gloves, goggles, has been a huge topic with increasing interest over the last three weeks, understandably, with COVID-19 spreading as it has across our state. Tapping into national supplies, depleting local supplies.

Manufacturers have started producing that historically had never produced I. Retooling manufacturing plants. We've got some in Pierce County that are putting out masks in pretty good volume now.

Nonetheless, with the prevalence of the illness spreading as it has, the demand has far outweighed the supply. The tiered system that DOH uses, just so people know at a high level, there's three tiers. The highest tier are large facilities, nursing facilities, assistive living facilities that have active confirmed COVID cases. So that is where the department of health has determined that's the number one priority for receiving things.

Since this outbreak has occurred, DHHS has played a role in the disbursing of these materials, especially masks, gloves, and that sort of thing.

So, for example, some of the state operated facilities that we have include our RHCs, our psychiatric facilities, and within DDA, we have our solar programs. So there's a pretty good system that we've developed now where they've gotten just recently really, to be honest, into a rhythm where there's some pretty consistent supplies being made. The next frontier involves some of the tier 2 level settings, which is the home care industry, care providers, in-home personal care services, supported living services, adult family homes.

And so we've gotten services on the radar for suppliers, and again, it's still evolving in terms of systemic distribution.

So, probably the most important thing you'll hear from me today is your local health jurisdiction is still a very important point of contact. Should you or your family members run into a situation where you have a confirmed case and you do not have a mask, you do not have gloves, you need protective equipment to care for your family member or your loved one, or in the case of a personal care provider, it's the same thing.

Your first point of contact really should be the local health jurisdiction. I have included here a link, I believe I included a link. I may not have included a link. But we will send you a link for the local health jurisdictions. Here's some other resources as well on things that are happening with PPE. But the local health jurisdiction, and in some areas, some of the rural areas, my understanding is that they do have the emergency command centers, usually the sheriff's office that are actually disbursing some of the PPE.

But largely, it is the local health jurisdictions, so that's your first point of contact. You may also, you know, look at some

of these organic things that are happening more recently.

We have people asking their moms and grandmothers and family members, people have their kids making PPEs. What you see on the screen here is a link which includes some videos within it of how to make your own homemade mask for protection. And you can actually do a pretty good job with just things laying around the house, materials laying around the house.

I've heard more recently the fabric stores are starting to run low. I know a lot of people are out there making their own. You can use scarves, bandannas. Up until recently, they were very cautious about directing anybody other than the healthcare providers and the first responders and the direct care industry to use masks, for example. Because of the shortness of supply.

But more recently, and especially as the supplies start to come in, the direction has changed a little bit. That is use whatever you can find, protect yourself. We certainly do not want this to be spread, and masks are the most effective way to contain the spread of the illness.

So if you do have to be around people, especially if you have to be around people that are symptomatic with COVID-19 type symptoms, use a mask, protect yourself. Use a mask, goggles, and/or a gown if you have one.

So that's kind of the high level. Here's some additional resources. I also want to promote to everybody listening here the DDA Internet site that we've developed. If you go to DHHS.wa.gov/dda, right at the top of our main page, we have a link to our COVID-19 information and resource page. We have sections in there. So we have sections for community residential, for clients and families, et cetera.

If you're a client or a family member, go in there, click on that, and you'll see a whole series of information we've put out over the last three or four weeks, and it includes DOH information, DDA specific information. We have videos that are good for clients and families, educational things. There's a lot on PPEs. So I would encourage people to go into there.

Again, to the DDA website. Click on the client information and resource. And just find clients and families and you'll see quite a bit there.

Okay. Thank you, Jeremy.

>> JEREMY NORDEN-PAUL: Thank you, Shaw. Like he said, we're going to share all of these links with you, and they're going to be included in the document that we create with all of the different questions and answers that we gather from the town halls.

So, one other topic we wanted to address very briefly before we get to the question and answer portion is related to what is sometimes called economic impact. There's a lot of people out there, including people with disabilities and family members of people with disabilities, who are wondering how these stimulus checks will affect them. The stimulus checks that are being sent by the Federal Government in terms of how that might affect their benefits, or if

they have to file a tax return.

And so Stacy is going to give us a really quick overview of some of those key points and share a couple of resources to find more information about that.

>> STACY DYM: Hi, everybody. This has been a common question. Certainly, we don't know the full economic impact for all of us in this situation, but for people with developmental disabilities, we've been keeping an eye on a few important pieces. In particular, the federal stimulus checks that are being distributed for people of certain economic levels.

What we know right now is that for folks who receive SSDI and for folks who receive dependent adult child, DAC, checks or payments, those individuals will be automatically receiving their stimulus checks. Social Security knows how to distribute checks to them, has all of their information, and those are going to go out automatically.

What has not been worked out yet is how to get those checks to people who receive just SSI. So, those individuals generally don't submit a tax return, and there's been some talk about whether or not those individuals would need to file a tax return in order to get their stimulus check.

But that's a difficult thing to do when you make less than \$12,000 of reportable income.

And so right now, Social Security is diligently working to try to figure out how to just automatically provide the stimulus check to people on SSI. So, just hold tight for more information about that.

As soon as we get more information, we'll distribute that either through an FAQ, on the DDC or on the Arc website so that you can get more information.

Just know that people are aware that this is a particular issue.

There have been some questions about whether or not that

stimulus check is going to affect people's resource limits. It will not for one year. So folks don't need to worry about that so much.

What we have -- another question we have gotten about being overresourced, though, is for a lot of people who receive Social Security, they don't have a credit card, and for people who are ordering things online, having home delivery, having a credit card is pretty essential.

And the EBT card is not accessible as a credit card. So folks aren't able to get home delivery that way, if that's their only source of income. And they don't have a credit card.

We have not been able to figure out how to resolve that yet until EBT cards can be used to make purchases online potentially. In addition, we have folks reporting that because they can't get out to go get things that they need, they're starting to accumulate some amount of savings, and they're worried that they're going to be overresourced because they can't get out to spend.

And again, as soon as we can try to figure out how folks can order more things online, or if people can make sure to find places where they can go to places that are essential, so stocking up on

other things at their grocery store, that should be helpful.

It is a real dilemma. The other thing you could potentially do for some people who are able to is to open an ABLE account. Those are relatively easy to do. You can do it online. And then individuals who receive Social Security can put extra money into that account, and then spend that more freely. So that they don't get overresourced.

So that's kind of the update on those main points. I'm in contact with the Arc of the United States regularly. There are some of these issues being renegotiated right now in the federal package 4. So if you're in touch with your congressional people, please let them know how you're being impacted through Social Security, and that will be helpful because we still need some of these things to come through.

One other related topic is the issue of siblings and parents of adult children who are now home caring for a disabled family member, and whether or not they can collect unemployment. And just this week, there's been some clarification that the same definition that's used under FMLA can be used in unemployment now. And that those individuals can now qualify for unemployment if they have to stay home to care for a family member with developmental disabilities.

And that application can be made online.

I have gotten a note here from Emily Randall, who says that Amazon and Walmart are both doing an online EBT program in Washington, and that Safeway, in addition, has got -- is close to being able to participate. So that's very exciting news.

We had heard that that was coming, but I wasn't sure that that was actually happening. So that's great, you should watch for that. With some additional information.

Okay. Well, that's it for just an update on the economic information, and I'll hand it back to you, Jeremy.

>> JEREMY NORDEN-PAUL: Thank you, Stacy. Adrian was kind to include a link to that pilot program, and we'll be sure to include that in all the resources that we share.

We have a few slides. We wanted to give you a sense of some of the different resources that are out there. And again, we'll have make sure that you have access to all of these links later.

The first thing is some general websites from each of the hosts' organizations, where we are collecting and organizing information about COVID-19, so the Arc of Washington State has a dedicated COVID-19 site. The same is true for the DD Council through our Informing Families Program.

The Developmental Disabilities Administration has a site that has a bunch of information that Shaw and others referenced earlier.

And like we mentions, we will be posting these recordings and they will be linked in these -- all of these websites will have the links to the town hall recordings and the Q&A documents.

If you're not already signed up to receive email messages, it's called Gov Delivery. There's a link for you to be able to do it.

It's an excellent way of getting up-to-date instant information from DDA when it's released.

So, here's a couple of other slides. I'm not going to talk in detail about these things. We're going to share all of these links. These are some resources that have been shared with us during the last two town hall events that we've had this week. Any resources that any of the folks share today with us, we'll be sure to do the same thing. We want to make sure we're not only sharing what we know about, but that we're adding to it based on what you share with us.

So, with that, I think we'll go through -- we have one more slide related to education. Stacy, was there anything in particular you wanted to say about these education links?

>> STACY DYM: I do. I think this issue comes up usually first and foremost in our questions, so I'll just start with a little bit of background information. If people have additional questions about school issues on this call, we can get through those as well.

Most of you have probably heard in the last week or so Governor Inslee come on along With Superintendent to talk about the fact that school will be closed for the rest of this year, and there's a strong indication that summer school programs will likely not be available.

And so families, particularly of kids with developmental disabilities and other disabilities are certainly struggling to figure out how to connect with their school, how to teach their children at home, and to get additional supports.

And so there's some information on here about what you can do. There was a recent large document of guidance published by OSPI called supporting inclusionary practices during school facility closure. That is the first set of guidance that's out for parents and schools, directed at schools for how to work together to educate children with disabilities while they're at home.

And that includes connecting with parents about their child's IEP, ensuring that IEPs are reviewed appropriately with families, setting up a list of priorities for families to go through at home, and then some suggestions for how to go ahead and implement those services.

Every service has managed this differently in our state, partly because of local control. Families are reporting that they're getting a different response, depending on what district they live in.

So be sure to continue. Every day, things are changing. Try to reach out to your child's special education teacher, to your district's special education director, if you haven't heard anything yet from your child's school to talk about the IEP and how to implement that.

Make sure that you're aware that the governor's office in the education ombudsman is also still open, taking questions and calls, and is trying to provide as much information as possible about what might be going on in your region.

And then there are documents listed here as well, just generally on what the U.S. Department of Education and OSPI have issued

regarding COVID and as it relates to all children in continuing their education as well as document from the Department of Education, from the Office of Civil Rights on protecting the rights of students with disabilities.

That's just some general information. Certainly other questions may come up as we go along and we'll try to get to those as much as we can. Back to you, Jeremy.

>> JEREMY NORDEN-PAUL: Okay. Well, stay tuned, Stacy, because I'm going to pitch it right back over to you. What we're going to do now is start going through questions that we have received in the chat box, and maybe some other questions that we've received by email. We're going to address them. This is the time if you haven't already asked a question in the chat box, please do that.

And like we said earlier, if you have a question but you don't feel comfortable typing it in or you don't have access to a keyboard or any other reason, please hang on and stay tuned because once we get through some of the chat questions, we are going to give you the opportunity to unmute yourself and ask the question verbally.

So, I'm going to turn it back over to you now, Stacy, to take a look at some of these questions that folks are giving.

>> STACY DYM: Great. Thanks, Jeremy. So the first set of questions we have, I'll direct toward DDA and, Kris, you might want to take a shot at this first. And if there's more to add, maybe Beth can jump in.

The first question is how do I get more CFC hours to meet the personal care needs of my son or daughter since they're not in school any longer and they now need personal care, an additional six hours a day.

Related to that question, is there going to be an expansion of case management services and hiring to meet the needs of so many families that are now qualifying for additional personal care?

>> KRIS PEDERSON: We always say contact your case manager. Processing exceptions to real requests for any additional hours needed as a result of summer coming up, and also with the school programs no longer in session.

So continue to contact your case manager. They will forward those requests and determinations made.

As regarding for expansion of case management, we continue to meet all the requests that come forward. We continue with our same process and our staff, you know, legislation budget will make determinations if there's additional staffing. But right now, we are continuing managing the workload with the staff that we have.

>> STACY DYM: Great. Thank you, Kris. That's really helpful information.

I know that several families are contacting their case managers to get additional hours, and that would be an exception to rule process, correct?

>> KRIS PEDERSON: It may be an exception to the rule, or it may be that there's a significant change in the individual. And so we may have to do a reassessment over the phone. There may be other

services that people are eligible for, such as the community guide, community engagement, or respite services. So those are discussions that can happen with the case manager.

- >> STACY DYM: Great. And that should be relatively easy to do, right?
- >> KRIS PEDERSON: It should be. Yes, absolutely. Our staff are working hard. Everybody's learning this new world, right, or working through technology and having assessments over the phone and getting our participants engaged in this discussion.
- So, as we tell all of us, let's have patience, but we work through every single thing.
- >> STACY DYM: That's great. There's another set of questions here too related to if my child's school para educator or their ABA therapist is willing to provide personal care hours or respite, this is certainly an unusual situation, but because it's harder to find providers, is DDA making exceptions for how to allow them to be able to be in the home to provide that service, is there a change in rate they can be paid?

And are there any other things people need to know about that situation?

>> KRIS PEDERSON: I think there's actually two approaches to that, and I'm going to ask Beth to chime in on part of the answer.

But we can always get people contracted to actually become a provider if there's not exceptions. So, it's about provider choice. So that is an avenue we can still do that.

Beth, can you help me out with the response about exceptions for provider types?

- >> BETH KREHBIEL: Yes, Beth, thanks. One example would be a provider that we currently contract as a behavior support provider. So, if the person meets those qualifications, during the emergency, they would also be able to provide respite. So the case manager would need to be contacted, they need to go through who the provider would be, their qualification, and they may be able to do other services, too.
- >> STACY DYM: That's great. Thank you, Beth, for that additional clarification.

And Kris, I have another question for you. Someone has asked who are the high risk clients that you're referencing before that you're doing some additional checking on? And what does that look like?

>> KRIS PEDERSON: We started looking through our assessment information and pulling those people who don't have other people in their lives. There's no collateral contacts identified or they have high medical needs, or they don't have a regular provider come in.

So we try to pull information from a database to get this first list. So we're starting off with about 1,700 people that we're contacting through customer service specialists right now. We will also get them connected to their case manager.

These people will also not have an assessment coming up within the next 30 days or have a service monitoring within the last 60 days.

So, that's our first list. And then from there, we'll be going into the next layers, those people who have, you know, a little bit more support, but more than none.

>> STACY DYM: That's great. Thank you so much.

We have another question here. There's a situation, and this has been coming up quite a bit, if a family member has brought their son or daughter home because they're, you know, anxious about COVID or kind of wanted to have them home for a period of time, now an adult family home or a group home is not allowing the client to return home because they left the house.

There's either a quarantine period or the provider is saying that this may not be allowed because the person was outside of the home.

What are your suggestions for people who may be in that situation?

>> KRIS PEDERSON: So, I strongly suggest to contact the case manager. So, we're working through each of these different situations. Our providers are trying to adhere to the proclamation of stay home, stay safe from our governor as well and trying to make sure that they're keeping everybody safe.

So, we try to get the family and the provider connected about trying to see if we can mitigate any of those barriers, and really seeing about how we can best support both groups, the provider and the client.

So, contact the case manager. We also have field service administrators as well as field quality improvement staff that are connected to adult family homes. We try to work as a team with this.

Every situation is different, and every situation has its own nuance. So, contact the case manager. That is the first good spot to go.

>> STACY DYM: That's really helpful. I know everybody is struggling to do the right thing and keep everybody safe. Sometimes it takes every people to put their heads together to solve that.

There's a question earlier, there was a reference to the availability of pro bono attorneys or free or low-cost attorneys who can help with certain legal issues, including issues right now around guardianship for medical decision-making, planning. An issue came up earlier today around, if I'm a single parent and I get sick, how do I get support and help someone to care for my daughter? Certainly something you want to be planning for now and not waiting until you're ill.

And if I run into certain questions around Social Security or access to healthcare services, what can I do? Adrian Stuart at the Developmental Disabilities Council has been helpful and placed in the chat box resources for Washington Law Help, which is where you can get access to that level of low cost service. So, please just take a note of that. Because that is an important question now.

We have another quick question here. So the issue of whether or not people can access therapy services, including the one thing that's come up frequently is access to behavioral health services. So getting support for positive behavior support in a way around telehealth and how families might get access to crisis support. There are a lot of families who, because they're the sole care provider now 24/7, or they don't get a break through school, they're feeling a little stressed out.

Are there things, Kris, that you can suggest for people to initiate getting access to telehealth or behavioral support if they haven't had to do that before?

>> KRIS PEDERSON: Yeah. So, they can -- you contact their managed care organization, or their behavioral health administration regarding the provider that they're connected to right now to see about telehealth.

They also can contact their case manager if they're not familiar with what the local resources are for a crisis. We have a clinical team who has developed some crisis resources for our teams that are associated by county.

And so they can also contact the case manager to be able to get some information on how to get connected.

- >> STACY DYM: Great, thank you.
- >> KRIS PEDERSON: Beth, did you have anything else to share
 with that?
- >> BETH KREHBIEL: Those are great suggestions, and I would say for behavioral health services, healthcare authority as well as Medicare and Medicaid globally have widely opened up telehealth, for behavioral health along with many other services like speech and regular doctor visits.

And then DDA has done the same for HCBS services, which include positive behavior supports and other things. So, Kris is right on with that. Thanks.

>> STACY DYM: Great. So, again for those of you who might just be joining us, this is a town hall on COVID-19 and how it's affecting people, individuals with developmental disabilities and intellectual disabilities and their families and caregivers.

If you want to ask a question, please feel free to put that in the chat box. I think we've covered several of the questions that are already here, so if you've got one, now would be a good time to put that in the box.

And then we are going to open up this for people who just don't prefer to type, or might want to just ask their question. So because I'm not seeing any additional other bigger questions right now, I'm wondering if there's anybody on the call right now who would like to unmute and just ask a question of someone here that's on the panel?

And if you want to remember how to unmute, just go to the bottom-left corner of your screen where it says mute, and click the button.

Okay. Well, it's late in the day and it's possible we've answered everybody's questions.

There was an opportunity we've had in each of the different regions to talk a little bit about a particular issue that came up regarding rationing of care for people with developmental disabilities during COVID-19 if the system were to get overwhelmed.

And so Jeremy and I have both participated in some calls with the Department of Health. I'll give you just a little bit of background on that. Disability rights Washington filed a complaint with the federal human services agency with some particular focus on our department of health's rationing of care -- scarce resource management rationing of care document.

And that document is put together if and when our healthcare system may be overwhelmed and has to make some difficult decisions.

And we want to make sure what happens is that people with intellectual and developmental disabilities have an equal opportunity to receive life-saving, life-sustaining stream. -- treatment.

When we brought the concerns to the Department of Health, they were very open to understanding how their document may unwittingly discriminate against people with developmental disabilities, and they made it very clear that that was not their intent. In fact, the document was developed to prevent those kinds of things from happening, and they were very open to some language changes.

So I want people to know who might be following that particular issue. One, we're not rationing care in Washington State right now. In fact, we've done a pretty excellent job of flattening the curve and making sure that people are getting access to care.

Two, there is a new draft that will come out for that scarce resources management document that helps clinicians understand and make decisions about life-sustaining care and treatment when there isn't enough care and treatment for every person who needs it.

And our state is also planning to work on an overarching document. It just makes it very clear that the value system is that people with developmental disabilities will get access to life-sustaining care. And that a developmental disability will not be a factor in that.

So that's a quick update there. Jeremy, do you have anything that you want to add to that particular conversation?

>> JEREMY NORDEN-PAUL: That was a great overview. And for me, the three big takeaways right now are, number one, so far, the department of health and the groups they're working on have been open and responsive to our concerns, which is good.

The second piece, like Stacy said, is it seems as though our efforts in Washington state to do social distancing have caused at least right now a flattening of the curve, and so right now, there are no indications that there will be rationing of care. So that was the second takeaway.

But the third takeaway for me is that we need to remain very vigilant and make sure that we are closely monitoring this issue, because it's one thing to have something -- have a statement or one thing to have something written in a guide somewhere, which is a very good step.

But it's another thing to make sure that people with disabilities are receiving the care that they deserve as human beings

in hospital settings.

And so we're going to continue having a conversation with the Department of Health and Disability Rights Washington and Arc of Washington State, and we're going to continue to be sure that that does not happen.

So those are the few takeaways from our perspective as the DD Council.

>> STACY DYM: As we mentioned, our state has done an exceptional job of flattening the curve. We know that isolation has its own health impacts, too. That this level of social distancing takes a big toll on mental health. People can't get out physically and they can't connect socially and there's some consequences from that.

DDA has some ways to help. There's a particular question here, in fact. Kris, I don't know if you or Beth might want to take it.

What are some of the ways that community engagement have been adaptive to help people adjust and still get some support and connection, and how might those providers provide services for more than one client at a time so that there's a new level of social interaction and social connection that might happen for people with developmental disabilities?

>> KRIS PEDERSON: Yeah, I can start this. This is an area that our teams are talking more about to help brainstorm ideas or providers. What we're seeing is people using some of the different online access to Zoom committees to do virtual tours through, like, museums and art centers that are set up online.

And so they're getting a group of people together to go through and do that virtual tour. So we've seen some creative things like that that's happening.

If people have ideas or if people are trying to figure out how to have that happen, or different ways of using those services, I really strongly encourage, we have a resource developer within our region, and we also have our case managers, and we have our waiver specialists who really get together to talk about how can we utilize these services differently. That's just an example.

- >> STACY DYM: Thank you. And there's a couple of questions here then too about because there's search a need now for independent providers and additional providers, how -- I know Jaime Bond is on the line, and Jaime said she had ideas about the flexibilities, becoming a provider, and more information on that topic. Jaime?
- >> Hi, thanks, Stacy. I just want to talk a little bit about -- there were questions around maybe para educators becoming individual providers to provide personal care or respite, or some other provider types, and folks I know are trying to reach out to people who may either be out of work, or not. But they're interested in coming the homes and providing care.

And I just wanted to let you know that some of the flexibilities that we've received because of the governor and CMS allowing us to waive some of the requirements and make it easier for people to be individual providers, things like we've waived the requirements for

FBI fingerprint background checks because fingerprinting offices aren't open.

Folks don't have to be certified as a home care aide right now. They don't have to complete that 70 hours of basic training. At the moment, to be an individual provider. So it's easier for folks to become providers.

And our contract staff are diligently working away, able to contract folks online via email and doing their contract appointments over the phone and, you know, remotely. So people don't have to take the time to go into the offices.

So it's easier at the moment to become a provider and start providing care to folks.

>> STACY DYM: Great. And I'll open this up to anybody. Some families are under significant stress, and some people are working with families where the senior caregiver is getting ill and is not able to care for the person with the developmental disability. This transition could happen, of course, at any time. Not just during this time.

There are two questions. One, how is DDA able to manage an energy I situation, where a senior caregiver may pass away or become so ill that this person with the developmental disability needs to come into the DDA system.

And two, are supported living referral packets being sent out and can providers start accepting people still?

>> KRIS PEDERSON: I'm going to answer the second question first, because it's a little simpler. Yes, referral packets are continuing. And people are continuing to be accepted into services.

It definitely is slowing a little bit just because of the situation we're in with people getting sick. But we continue to get people out into the community, we're continuing to get people into supported living services, and our resource managers are continuing to send referral packets out.

Regarding the first question about people whose loved ones are getting sick. You know, this planning, it actually doesn't start during crisis, it really should be starting prior to crisis about who those other informal supports are and those loved ones' life and who are the decision makers when one -- somebody does fall ill, who has been helping and supporting, and is the decision-maker for that loved one.

If that hasn't occurred or if that plan didn't lay out, then what DDA does is that we step in and try to get providers, depending on the situation in that home. We'll send out referral packets. We'll look at adult family homes. We'll look at short-term stays. We look at all avenues possible to be able to get the person services.

We've seen situations where when the loved one actually ended up in the hospital because they had a medical condition that warranted them, and the ambulance driver actually brought their loved one with them to the hospital, and then we had to work through the situation during that time.

But the case management role is to really figure out what

services are available to them, how can we get them services, where do they want services at.

So we look at it both as a short-term, as what's the most emergent need and how can we address it, and then what that long-term need is.

- >> STACY DYM: Great. It sounds like DDA is still positioned to be able to help those families.
- >> KRIS PEDERSON: We're still tackling every single situation as they come across.
- >> STACY DYM: That's great. There's a follow-up question to that, and that is, that we have someone who said they've heard that planned overnight respite services are no longer available right now. So are there any other options for families to use?
 - >> KRIS PEDERSON: Is Seph Hakeem on?
- >> Sharon is on, and she'd be happy to answer that question. Sharon, can you unmute yourself? And if Sharon cannot, Valerie, will you unmute yourself? Oh, Sharon's got it.
- >> So, the answer about respite is that it has been postponed for a temporary basis, and we're still looking at options and trying to figure out what we can do currently. So go to your case manager.
- >> STACY DYM: Great. Thank you. I have another question about community engagement services. This individual said they heard there was an emergency rule that stated that a provider can work with more than one provider at a time during a single session right now.
 - Is there more information about that and can that be posted?
 - >> KRIS PEDERSON: Is Anne on?
 - >> Hello. I am.
- >> KRIS PEDERSON: Oh, terrific. You'll be better suited to answer this.
- >> Yes. So, we did create some flexibilities. We got approval for some flexibilities with the centers for Medicare and Medicaid services to allow for a community guide or engagement provider to offer support to more than one individual at a time.

And one example that I really appreciated from Kris that she was speaking to earlier was the example of an individual providing service remotely to more than one person, going out and exploring museums or other opportunities in the community.

Additional information around the posted emergency rule is on the DDA website, and we can forward a link in the comments toward the end of this presentation, so that you have access to that information.

You can also contact your case manager and they can provide you more information as well.

>> STACY DYM: Thanks, Ann, that's great. Just another quick question about IPEs.

So a family has lost their provider and would like to increase the hours with another provider. Over time or more hours in this particular situation.

>> It's Jaime again. I can't answer specifically about this

case, but we have provided direction out to our case managers who are -- who already have the authority to approve short-term -- what we call workweek limit increases for providers.

So they're probably going to ask -- so, you get a hold of your case manager, they're probably going to ask some questions like, what's the situation, who's the provider, how many hours do they want to work, all that kind of stuff.

But we have given direction to case managers that for short-term workweek limits, if the situation is justified, which in this case, just not wanting to have so many people in your house is justified, they can approve those for a short period of time.

>> STACY DYM: That's great. Thank you so much. We have a quick here -- so we know that a lot of people with developmental disabilities are supported and served in an adult family home setting. And that adult family homes often rely on donations and fundraisers to cover the extra costs to ensure that people with developmental disabilities have a full and meaningful life in their residential setting.

Because of that current economic situation, there's some fear that adult family homes are not going to have access to the same level of donation. And there's a question about whether or not DDA is considering how it might help in these situations to ensure that people can stay in their residential setting and adult family home.

Even given the significant likelihood the state cutbacks could occur. Is that something that DDA is talking about?

>> BETH KREHBIEL: Thanks, Stacy, for that question. So, the adult family home council is working with the state on rate questions, and adult family homes are collectively bargained.

So the state is definitely taking things like that into consideration as we look forward during this COVID emergency. So, thanks.

>> STACY DYM: Great. And a related question, this might be one for Evelyn, although I don't think she's still on. In anticipation of the economic situation that we're going to be in, it seems likely that there will be some significant state cutbacks in the next budget, the next legislative session.

Is DD being very clear with legislators and the governor's office and other people that services for people with developmental disabilities are essential, and therefore should not be subject to cutbacks?

>> BETH KREHBIEL: I'll take that one again. Absolutely, in our role as employees of the governor, we have regular calls with representatives of the legislature, and Sheryl and Evelyn and others pass on that strong message, that especially during a difficult financial times, services for people with developmental disabilities are critical.

So we're sending that message now, and in the future, that continued services are important. So, thanks.

>> STACY DYM: Thank you. We have one more question that's come in. As a potential provider, what if you were not Medicaid or

Medicare certified?

>> Hi. I think that was in response to my conversations about home care agencies and individual providers.

So, we've had prior conversations. But she's a home care agency, a private home care agency who was not Medicare or Medicaid certified, and the answer to that question is that we -- DA does not oversee the home care agencies, but our sister agency, aging and long-term support administration does.

So what I have promised to do is get a hold of folks over there and find out -- I'm not familiar if they got some flexibilities around allowing providers who don't meet the Medicaid certification requirements to be home care agencies, but we will get her an answer.

>> STACY DYM: Just a quick shoutout. Senator Claire Wilson is on the line with us. She said she heard loud and clear that she thinks DD services are essential, so that's great to here. Thank you for that comment, Senator Wilson.

So, there has been enough questions that has come up because people are starting to rely on telehealth so much right now.

What if I can't get access to a cell phone or an iPad and I just don't have access to Internet, and I won't be able to access that service, even if I'm eligible for it.

And we have posted in a couple of the other chats how to access a TED application so that you could apply to get those kinds of services.

I know that Beth is also working on having other equipment available to families, and I thought I'd ask you, Beth, if you want to do a little bit of information about that.

>> BETH KREHBIEL: Sure. So, I think you might be referring to equipment that might be available through CFC or the waivers. Through those services, there is assistive technology that could be available to a client based on their need, and we are very flexible right now. Even more than normal.

So if a person has a creative use or need for a device, definitely get that request to the case manager. We are trying to work with folks for how we use technology.

Most importantly to know, though, for remote supports, just a telephone is sufficient for many -- for many needs. But if a need for a more -- for a different technology, like an iPad or something is needed, just give that request to your case manager, and they'll put that request forward for you.

>> STACY DYM: Thank you. I wanted to give an opportunity -- I know we have a couple of people here on the line from PAVE. Doreen, I know that you're there and I think Michelle is on the line.

Do one of you want to talk just for a moment about some of the ways that your organization has adapted to provide services to families who have school age children and provide other services to people that are now having to look a different way at getting support at home?

>> Hi. My name is Doreen. I work For Partners in Action Voices For Empowerment. We host the Parent Training and Information Center

for Washington state to support families who have children in the special education system, and the family-to-family health information center, and we have a little Arc program in Pierce County parent-to-parent.

Yeah, we're really taking -- and I think the whole statewide network is doing a lot of online support for families. We're doing one-to-one calls with families over media. We're hosting a number of webinars and groups. We took our tools for success conference online.

So there's a lot of ways that we're trying to make things accessible for folks. We're still providing one-to-one technical assistance for families if they're having questions about their educational process. So, our help line is available online at wapave.org.

And there's some really great articles that are being updated on a weekly or multiple times a week basis as COVID is changing to try and provide really good, simple articles that are parent-focused in this time. So, thank you, Stacy.

>> STACY DYM: Thank you so much, Doreen. We really appreciate it.

So in our last few minutes, I want to open it up again to people who just feel like they might want to unmute and ask a quick question. Rather than type it in.

We've got about ten more minutes, if anybody's got a question.

- >> Hi, I have a question.
- >> So --
- >> Sorry.
- >> Go ahead.
- >> Thank you. My question is about day providers. I see or have heard additional options that are offered to community engagement on providers, which I understand.

But are there any, I guess, exceptions that are being made for adult providers?

Can you clarify what you mean by an adult day provider? Do you mean adult day health or adult daycare?

- >> So it's an adult day service provider. So it's where they come in, congregate and do like Zumba or the painting sessions, adult-based center, essentially.
 - >> BETH KREHBIEL: Okay.
- >> But it also has an adult day health component, so I guess both.
- >> BETH KREHBIEL: Okay, thanks, that helps. So, it depends on how the center is implementing the governor's directive to stay at home, stay healthy, and that would be the decision of that center.

They are making, you know, different decisions based on how they can keep people separated per the governor's directive. There could be flexibilities. I would recommend talking to a case manager or a resource developer.

DDA primarily pays for services in those settings through respite. And we are offering quite a few flexibilities through the

respite contract.

So we might be able to work with you on that, if you're an adult day provider, and get creative with you in how you provide the service of respite. But definitely in congregate settings, the providers need to take into account the need to stay separated and healthy and safe. Thanks.

- >> I have a question. Can you hear me?
- >> STACY DYM: Yeah.
- >> So my name is Terry Giles, and just to go back and reiterate a topic that was discussed with maybe the stimulus money that may be coming to an adult SSA recipient.

So, my question is -- my understanding is that they don't really know because those individuals have not filed a tax return, how maybe those funds should be distributed to those individuals. But that is information that probably or may be coming in the future.

And then is it correct that if they were to receive that money, that they would have up to a year to either disburse it or use it for goods or services needed for them before they may be outside of the limit for accessible resources?

>> STACY DYM: You have that exactly right. Any day now, we should hear whether or not Social Security is going to figure out how to just automatically distribute the stimulus to recipients of SSI. Hopefully, that's going to be the case. That seems to be where the conversation is going, that would be the easiest way to resolve it. Yes, it would be up to a year.

You can spend that, you could also remember open an ABLE account potentially to shield that money, so that it does not affect a person's resource if you're getting close to that 12 months.

We had an earlier conversation about how it's hard for people right now to spend their money to get out.

- >> Because everything's shut down.
- >> STACY DYM: Yeah. But there have been a couple of links in this conversation about a pilot project that's here. Amazon, Walmart, and Safeway are starting to use EBT cards and they're trying to be as accessible as possible. So you might check out that as a resource as well.
 - >> Okay, thank you for the clarification.
 - >> STACY DYM: Yeah, you bet.

And we have another question. It's come up a couple of times. Beth, you might be able to answer this question. Whether or not our state, in light of this crisis, would consider revising our state plans so that parents who have kids under the age of 18 could be paid to care for them.

I know some other states do that. Our state does not have that in their state plan. Is that anything that we might be reconsidering?

- >> BETH KREHBIEL: I actually think I want to throw that question over to Jaime. We haven't made that choice yet. It's a possibility. Jaime, are you still on?
 - >> Yeah, I'm just slow. Sorry. So, we haven't made -- we

haven't got the rule around parents being able to care -- or not being able to care for their minor children waived, which doesn't mean that we, you know, couldn't attempt to do that. We just haven't done that yet. I do know that there are resources for parents in the act passed by Congress, the Families First Act, for participants who have to take time off to care for their children because their kids aren't in school.

That program is an option until we can figure out if we can do the other one.

>> STACY DYM: Great. Yeah. That's what I've heard as well about parents being able to collect that now.

That was a great conversation. I'm glad we're going to be looking at that. Okay, does anybody else on the line want to unmute and ask a question? We have just a couple more minutes.

>> I have a question for Beth. How do I find a resource developer?

>> BETH KREHBIEL: So, I think Kris Pederson mentioned resource developers in the call. So, a resource developer is a position that our regions have that has a focus of developing new providers. And you can call their regional office, and they can connect you to a resource developer, if you want to become contracted as a provider.

But just generally calling one of the region's numbers, which are posted on our website. You can get connected with the right person to help you with whatever you're needing.

>> KRIS PEDERSON: In region 3, we have one resource developer, and her name is Teresa O'Donnell. The Olympia office, and they will get you connected.

>> STACY DYM: That's a great question. We had another person who asked that question as well earlier.

Okay. Well, I think at this point, I'm going to turn it back over to Jeremy. We'll have some closing thoughts. I just want to thank everybody again, I think, as the governor would say, you know, stay at home, stay healthy, but definitely stay connected and know that you have a lot of people here that care about you and want to make sure that we're offering as much support as possible.

Jeremy?

>> JEREMY NORDEN-PAUL: Yes, thank you, Stacy. Thanks to all of you for being here and for your questions.

For those questions that may have come into the chat box that we're not going to get to, that we haven't gotten to yet, rest assured that we will.

At this point, I'm going to hand it over to Sarah because she has a few logistical comments to make about the Zoom meeting and what's going to happen next with the chat questions and everything like that. And then we're going to leave it open for another few minutes after that, just in case anyone else wants to get more questions in for the record.

So I will hand it over to Sarah to do that.

>> Excellent. Hi, everyone, from your Zoom room crew. Thank you so much to Martin and Mitchell, who have been behind the scenes

helping this meeting happen and helping everybody be heard.

So, from here on, we are, like Jeremy said, we're taking everything seriously. We are going to look at this chat, we're going to save this chat log, we're going to make sure if there's any questions unanswered that we find a way to communicate with you. This will not be the last time you hear from us. Please rest assured.

Now, some things to know. In the chat box, there's a lot of links that have been dropped in there. Please know there's some things to know. You can click in the chat box on that link, and the window will pop up for that resource.

Now, there's going to be a challenge if you go to copy and paste it in a Word document. Something called a hyperlink goes away, which the hyperlink is just that thing that makes it blue, so that when you click on it, the window pops up.

Don't fear, that website is still good. You'll just have to copy that website and paste it directly into Google or your web page, and it will take you right there.

The second thing that's going to happen is we are going to publish these links. So, all the websites, we're going to post those recordings. We're also going to bundle these links and we'll put them together in a nice document that will have live hyperlinks. So, if you need it right now, get into this chat box, we're going to leave this open for the next five minutes, so if you want to click on some windows of things you're really interested in.

I'm also going to publish in the chat all the links that were in this PowerPoint. And please rest assured, we're going to get you this information as soon as possible, so there won't be any information lost.

On behalf of everyone, thank you so much. Thank you for being flexible. Thank you for working through all the technical difficulties we're all experiencing. And thank you for trying something new in this new way of connecting.

And with that, I'm going to sign off. We're going to keep the chat box open. And goodbye, everyone.