ADVISORY BOARD MEETING

WARREN COUNTY DEPARTMENT OF SOCIAL SERVICES

465 W 15th Street, Suite 100, Front Royal, Virginia 22630

January 19, 2023

The Advisory Board met in the Training Room of the Warren County Department of Social Services on January 19, 2023, with the meeting called to order at 4:04 PM by Mr. Martz.

Members in Attendance: Lorraine Brandon, Hayden Ashworth, Stephen Jerome, Robert Cullers

Present for the Department: Jon Martz, Director; Christie Lawson, Assistant Director; Amanda Jenkins, Administrative Secretary; Michelle Smeltzer, Community Liaison; Mikki Ewanish, Administrative Services Manager; Lisa Look, Fiscal Assistant; Lucy Riffey, Adult Protective Services /Adult Services Supervisor; Desiree Minter, Benefit Program Supervisor; Amanda McCormick, Receptionist

County Officials: Walter Mabe, Warren County Board of Supervisors

Guests: Linda Selover, Community Member

Election of Officers

Mr. Jerome was reelected Chairman of the Warren County Social Services Advisory Board by unanimous consent. Mr. Ashworth was elected Vice Chair of the Board by unanimous consent.

Approval of Minutes

With removing Ms. Selover as being presents at the last meeting, a motion was made by Jerome to approve November 17, 2022, minutes. The motion was approved unanimously.

Public Comments

Ms. Selover mentioned she was having issues with Century Link internet and was curious if other people in the community were having the same issue.

Advisory Board Comments

Mr. Jerome stated he gave Mr. Martz a print off from United Way's website regarding some resources and information that may be able to assist clients in Warren County.

Unit Reports

Community Liaison

Prepared and presented by Michelle Smeltzer, reflective of December 2022.

Ministerial Fund Spending

December spent - $1,763.93
December received - $227

Food Distribution

December – 38 clients served

Job Developer

New clients/ referrals for the month of December: 6
Total clients to date: 120
Total business contacted to date: 86

Notes of Interest

Ms. Smeltzer informed the Board that the Thermal Shelter started on December 17th located in the Presbyterian Church here in Front Royal. Ms. Smeltzer stated that all the dinners have been covered by volunteers for the whole season. The shelter has received a lot of volunteers as well as a laundry grant. Ms. Brandon commented that the neighbors located near the Presbyterian Church are not happy and are concerned about the police presence. Ms. Brandon questioned if this was a problem at the last location. Ms. Smelter replied that this is an issue that the shelter is going to have anywhere. Addiction is the main cause of some of the behavior issues. Ms. Smeltzer stated that occasionally guests need to be removed from the shelter and police may be called to handle that situation. The police will also bring guests to the shelter if they come across someone who needs a place to go. EMS is also called occasionally due to some of the guests having medical issues. Mr. Martz stated that he feels that the complaints have decreased since the previous year. Mr. Martz informed the Board that when the Thermal Shelter was located at the Health and Human Services Complex, the Thermal Shelter residents would live there. With the Thermal Shelters new location at the Presbyterian Church, the residents are venturing out. Mr. Martz stated that the Thermal Shelter and Social Services are separate entities Mr. Mabe asked how many people are staying at the shelter, and Ms. Smeltzer replied between (23-26) people. Mr. Mabe wanted to know if the number of people staying at the shelter has increased since first opening. Ms. Smeltzer said it seems to increase almost every day.

Services

Prepared by April White, Shelissa Lewis, and Lucy Riffey- Family Services Supervisors, reflective of December 2022. Presented by Lucy Riffey.

Permanency

Foster Care Cases	14 cases with 18 children total
Fostering Futures	2
Adoption Cases	8 children available for adoption 4 have identified families.
KinGap Cases	0
Resource Families in Approval Process	3
Resource Families in Completed Approval	1
Resource Families in Re-Approval Process	0

Child Welfare

Referrals Received	25 referrals/12 accepted
Family Assessments	31 Current as of 12/31/22
Investigations	14 Open as of 12/31/22
In Home Cases (Prevention)	18

Adult Services

Guardianship Cases	99
Adult Service Cases	17
Adult Protective Services Reports	31
Adult Protective Services Reports Accepted	24

Notes of Interest

Mr. Martz informed the Board that the agency is getting ready to finalize an adoption on a sixteen-month-old baby. Mr. Cullers inquired if (99) Guardianship cases was considered a high number. Ms. Riffey stated that the agency is consistently between (99-102).

Eligibility

Submitted by Desiree Minter and Katie Colton, Benefits Program Supervisors, reflective of December 2022. Presented by Desiree Minter.

Program	Applications
SNAP	125
Medicaid (F&C)	92
TANF	18
Child Care	15
Fraud Referrals	1
Auxiliary Grant (AG)	0
Fuel	8

IV-E	0
Fraud Referrals	7

Administration and Support

Submitted by Renee Pearson, Administrative Office Manager, reflective of December 2022. Presented by Amanda McCormick.

	December	Year to Date
Phone Calls	1,482	14,532
Lobby Visits	1,101	12,064
EBT Cards Dispersed	119	1,128

Notes of Interest

Mr. Mabe inquired if the number of lobby visits and phone calls calculated in December and year to date is considered an average number. Mr. Martz stated that those numbers were average, but the phone calls calculated are only those coming into the main line. Mr. Martz asked Ms. Look if she was able to pull all phone calls coming into the Department. Ms. Look replied she would try to pull this information.

Assistant Director's Report

Ms. Lawson reported that the agency has two vacant positions in Benefits and two vacancies in Adult Protective Services (APS)/Adult Services (AS). Mr. Martz reported that one of the agency's APS workers was going to another local agency, and another APS worker had decided to have a change of career.

Director's Report

Mr. Martz informed the Board the Department conducted its second Christmas toy drive and successfully helped seventeen families provide toys for Christmas. Mr. Martz reported the public health emergency (PHE) has been in effect since March 2020. The Department has been unable to close Medicaid cases unless someone has passed away, moved out of state, was imprisoned, or requested the agency to close their case. Mr. Martz reported that SNAP is determined by household size and the income of that household. The PHE took effect once COVID occurred, and SNAP went to the maximum amount allowable per household size. Mr. Martz informed the Board in December 2022 Congress removed SNAP and Medicaid from the PHE. On February 16th, the extra SNAP benefits will be discontinued and return to normal levels (pre-COVID).

Mr. Martz added that Medicaid will be going back to normal levels (pre-COVID) as of April 1st. Mr. Martz reported that there is an estimated 5,000 people who receive SNAP, and all 5,000 will receive fewer SNAP benefits than they have for the last three years. Mr. Martz stated the agency has had staff update the agency food list with food banks and food pantries in Warren County. Initially when a client's SNAP benefits decrease, the client has an option to appeal that decision. Mr. Martz informed the Board that the federal government has given some states the right to decline the appeal if the appeal is due to the PHE ending. Mr. Martz reported the state predicts 20% of people receiving Medicaid will no longer be eligible once the PHE ends. Mr. Martz informed the Board that clients can appeal this decision. The agency is expecting an increase in appeals and reapplications. Every case will have to have a renewal done to determine if the client is eligible. If a client does not qualify when they receive their notice they may go through the marketplace during open enrollment season, which runs from November 1st to December 15th. Both childcare copays and the work requirement for TANF/VIEW were reinstated as of January 1st.

Mr. Martz reported that with inflation and the PHE ending, there is going to be a need for community services. Mr. Jerome reported that a lot of the charitable organizations have seen a decline in donations. Mr. Martz stated that the Department has requested money for an Emergency Services Program to help people in crisis. Mr. Mabe inquired how much money was being requested for this service, and Mr. Martz responded $25,000. Mr. Martz informed the Board that in the proposed FY 2023-2024 budget, the Department is requesting a Housing Specialist Position. Part of this position would be to meet with community partners quarterly to bring them together to fill in the gaps of what different community partners do.

Mr. Martz reported that Ms. Lawson and himself went to the General Assembly in Richmond to advocate for bills that the agency is supporting. One of those bills was Kinship, where an agency could place a child with a family member who would then receive the same support as a foster parent. This is more beneficial for the child; rather than being placed with a stranger, this allows kids to stay local.

Mr. Martz reported that the agency is now in the third phase with the state to fix the agency's internet issue. Mr. Martz reported that the agency is having an issue with getting employees set up through Virginia Information Technologies Agency (VITA). Employees are not getting access to their computers for weeks up to a month. Mr. Martz stated he brought this information to the Commissioner who was going to talk to the director of VITA to come up with a solution to this issue.

Mr. Martz informed the Board that Ms. Selover provided a handout: CMS Announces Actions to Combat the Illegal Drugging of Nursing Home Residents, which discusses the misdiagnoses of Schizophrenia. Mr. Mabe questioned what he would consider the main problem that the Department is facing right now, and Mr. Martz replied that retention is an issue due to competing with other localities that pay higher salaries. Mr. Mabe then asked what the major concern the agency is facing with clients right now, and Mr. Martz replied that food security is the main concern with the PHE ending.

Old Business

Ms. Riffey reported that she met with the APS Supervisor and an APS worker at Shenandoah County. Ms. Riffey stated they gave her a packet with information of a caregiver support group where caregivers can talk about the challenges they face. Mr. Martz informed the Board that there is a resource app that Ms. Smeltzer created called Warren County VA Resources. Ms. Smeltzer is currently helping another locality create an app for their county.

Adjournment

Hearing no further business for discussion, Mr. Jerome motioned to adjourn the meeting. The meeting was adjourned at 5:25 PM. The next meeting will be held on March 16, 2023, at 4:00 PM.

X

Jon Martz
Director of Social Services

X

Stephen Jerome
Chair of the Board

Public Health Emergency Unwinding Information

WARREN COUNTY

JANUARY 5, 2023

Supplemental Nutrition Assistance Program - SNAP

On March 25, 2020, all SNAP recipients began receiving supplemental allotments. The allotments allowed the household to receive the maximum allotment for households of their size.

Federal Stimulus payments were not counted as income.

SNAP interviews were waived.

POST PANDEMIC – As of April 1, 2023, Federal Regulations will be lifted and households will resume receiving allotments based on income NOT the current maximum level.

There are currently over 2,000 households with over 5,000 people receiving SNAP in Warren County.

Current Levels vs. Post-Pandemic

CURRENT PANDEMIC LEVELS

Household Size	Allotment
1	$281
2	$516
3	$740
4	$939
5	$1,116
6	$1,339
7	$1,480
8	$1,691

POST-PANDEMIC LEVELS – BASED ON MONTHLY INCOME OF $1,496*

Household Size	Allotment
1	$23
2	$67
3	$291
4	$490
5	$667
6	$890
7	$1,031
8	$1,242

Income amount based on 1 member of the household earning minimum wage of $12/hour for 29 hours a week. 29 hours/week used due to ACA.

Medicaid

Medicaid coverage was not closed or reduced during the pandemic except for the following:

- Member's death
- Member requests termination of their benefits
- Member permanently leaves Virginia
- Member becomes incarcerated.

Part B premium automatically paid upon turning 65 for those receiving Medicaid.

Verbal consent was allowed for Medicaid during the PHE - gave the hospital/company the right to apply on behalf of applicant without having actual signature

As of April 1, 2023

States must re-determine coverage for all Medicaid members over a 12-month period.

Virginia will not take any negative action to cancel or reduce coverage for our members without completing a full redetermination of benefits.

All Virginians receiving Medicaid will have to complete a Redetermination application that will be sent to them automatically.

The Federal Government estimates up to 20% of current Medicaid enrollees will not be eligible to continue in the program post-pandemic

There are currently 10,086 residents in Warren County receiving Medicaid

Up to 2,000 Warren County residents COULD lose Medicaid coverage over the next year beginning April 1, 2023.

Virginians who do not qualify for Virginia Medicaid can buy health insurance through Enroll Virginia.

Individuals can sign up for insurance on the Federal Marketplace:

- Within 60 days of losing their health coverage or

- Anytime during the annual open enrollment period from November 1 through December 15

If a member no longer qualifies for health coverage from Virginia Medicaid, they will get:

- Notice of when their Medicaid coverage will end,

- Information on how to file an appeal if the member thinks the cancellation decision was incorrect

- A referral to the Federal Marketplace and information about buying other health care coverage.

Child Care

Family co-payments for child care subsidy were waived.

Job search was added as an activity for child care subsidy program.

Income limit for child care subsidy was increased.

Telephone interviews for child care subsidy were introduced.

Copayments were reinstated January 1, 2023 using a sliding fee scale based on Federal Poverty Level

Jan 19, 2023 11:00 AM

The National Consumer Voice for Quality Long-Term Care <info@theconsumervoice.org> 1/18/23

CMS Announces Actions to Combat the Illegal Drugging of Nursing Home Residents

The Centers for Medicare & Medicaid Services (CMS) announced today new steps to protect nursing home residents from inappropriate diagnosing of schizophrenia which often results in the improper use of antipsychotic medications to sedate and chemically restrain nursing home residents. In addition, CMS announced that it would now post on Care Compare citations that are under dispute by nursing homes.

Inappropriate Diagnoses of Schizophrenia

In 2008, CMS introduced a quality measure in its Care Compare rating system that calculated the percentage of long-stay residents (over 100 days) that were receiving antipsychotic medications. This measure was introduced to combat the practice of some nursing homes illegally using antipsychotic medications to sedate residents with dementia or other increased care needs, rather than providing appropriate hands-on care interventions. The measure, however, excluded residents with certain diagnoses, including schizophrenia, Huntington's disease, and Tourette syndrome. As a result, some nursing homes began to improperly diagnose residents with schizophrenia, to disguise the use of antipsychotics to sedate residents rather than provide appropriate hands-on care interventions. The improper use of antipsychotic medications is extremely dangerous and can lead to a variety of poor health outcomes for residents, even death.

In the new guidance, CMS acknowledges that there has been a steady rise in schizophrenia diagnoses since the quality measure was introduced. This announcement comes on the heels of a report from the Office of Inspector General for the U.S. Department of Health and Human Services (OIG) which found that from 2015-2019 there was a 194% increase in the number of residents diagnosed with schizophrenia who did not have that diagnosis prior to admission to the nursing home. It is important to note that it is extremely rare for schizophrenia to suddenly occur in older people. The onset of schizophrenia generally occurs in someone's late teens through their twenties. Importantly, the OIG report directly connected illegal drugging of nursing home residents with inadequate staffing in nursing homes.

CMS announced that it will begin to conduct audits of nursing homes with high rates of schizophrenia diagnoses and "examine the facility's evidence for appropriately documenting, assessing, and coding a diagnosis of schizophrenia." Facilities that have "inaccuracies" will have their Quality Measure Rating adjusted in the following ways:

- The Overall QM and long-stay QM ratings will be downgraded to one star for six months(this drops the facility's overall star rating by one star).
- The short-stay QM (under one hundred days) rating will be suppressed for six months.
- The long-stay antipsychotic QM will be suppressed for 12 months.

While Consumer Voice has expressed significant concern with the accuracy of CMS's Quality Measure, we support these actions. The Quality Measure rating often inflates a facility's overall 5-Star rating on Care Compare. This action will help incentivize compliance and make sure the public is aware of these illegal practices in nursing homes.

More Must Be Done

Despite today's announcement more must be done to protect residents. Importantly, CMS announced no other enforcement action against facilities who are found to be using this illegal practice. Additional penalties, including civil monetary penalties, should be assessed. Additionally, CMS should take steps to penalize medical professionals that inappropriately diagnose residents with schizophrenia to illegally prescribe antipsychotics.

Further, CMS must take steps to address problems identified by the recent OIG report. The report looked at the use of antipsychotic medications over the past ten years. While a reduction in antipsychotics was identified, the report found that this reduction was offset by facilities using other mind-altering drugs (psychotropic drugs) to sedate residents. CMS must take action to monitor the increased use of other drugs to chemically restrain residents.

Most importantly, CMS must implement a minimum staffing standard, as promised last year. As noted, the OIG report directly connected the use of drugging with inadequate staffing. Understaffed facilities often drug and sedate residents because they have inadequate staff to provide proper direct care interventions. Requiring facilities to have enough staff will directly address the problem of illegal drugging of residents.

CMS Will Now Post Citations Under Dispute

Also included in today's announcement was a change in policy regarding the posting of violations on the Care Compare website. CMS's policy has been that it does not post violations or citations that are in the dispute process. This process can take six months, but sometimes years, and results in consumers not being aware of deficient practice in nursing homes. CMS will now post these citations on Care Compare. Consumer Voice applauds this step as it increases transparency for consumers.

Both of these announcements were part of President Biden's list of historic reforms announced last February. While today's announcement regarding schizophrenia diagnoses is a promising first step, much more needs must be done to protect nursing home residents. Stay tuned for more on this issue from Consumer Voice.

YEA TEAM!

The United Way
People Helping People

You Are Invited To
Celebrate
The United Way Oceanic Division Campaign

Wednesday, November 8, 1989

Busch's Chesapeake Inn
Route 50 301 Annapolis

Hors d'oeuvres / Beverages

4:30 - 6:30 p.m.

Do Join Us!