WEBVTT

1
00:00:02.035 --> 00:00:14.515
Thank you everyone for joining us just a quick reminder, submit your
questions through the chat box. And when you do make sure at a minimum,
you send them to all panelists that way since we're in different
locations.

2
00:00:15.445 --> 00:00:19.074
All of our presenters can see those. And if you send them to me.

3
00:00:19.379 --> 00:00:26.670
Um, it's just mean that sees them so don't send them to the host to make
sure you send to adding minimum. I'll place our panelists.

4
00:00:26.670 --> 00:00:30.210
And with that, I am going to turn it over to valves.

5
00:00:31.320 --> 00:00:38.670
All right, thank you my day. Can you send that link? I sent to we'll just
do that. 1st I would love to.

6
00:00:38.670 --> 00:00:51.390
Thank you so the 1st thing we're going to do last week, the governor, and
now the, the show needs strong public health, public facing dashboard.

7
00:00:51.390 --> 00:00:54.659
And I'm going to have to scroll down.

8
00:00:55.979 --> 00:01:07.290
On this to kind of the bottom of the page, there's the link so it up
there and you guys can get access to stop there hold on right there. Oh,
back up just a little bit. airgas. Okay.

9
00:01:07.290 --> 00:01:20.185
So this just the yellow part of the top, so it'd be the day that the
dashboard was updated. So that, you know, it also, so do for anything
that is 7 day data. It shows you what those 7 days are and that's
important.

10
00:01:20.185 --> 00:01:30.655
So, I sent an expert, you saw the yellow box and 6 notice what it is.
This dashboard includes at the top right now it is showing you cases
today as all of our cases, and the state.

11
00:01:30.959 --> 00:01:41.004
Death today test today and then in that right hand box next to it and have cases in the past 7 days and then it even shows you those case number 5 days.

12
00:01:41.424 --> 00:01:48.444
Please know that the 3rd and the 4th or weekend, and we do get your cases reported on the weekend and then that way all along.

13
00:01:48.780 --> 00:01:58.584
But it shows you that kind of rolling 7 days of what, 7 days they're looking at the important desk, 57 desks over the last 7 days, and how those are reported.

14
00:01:58.584 --> 00:02:04.435
And then the same for the number of tests in the past 7 days was already sent over a 100000 tests per cobit.

15
00:02:05.430 --> 00:02:14.610
So, scroll down to the bottom because this is where I find it to be, and there's a lot of tabs at the top that you guys can look at. I'm not going to oh, not quite that far. Hydrogens a little bit.

16
00:02:14.610 --> 00:02:20.189
So, I want to be able to see these dots up here where it says for the massive bar chart the left.

17
00:02:20.189 --> 00:02:33.840
What you would like to display and you can either look at best testing, positivity rate or cases we're gonna keep that on cases. Then you have 2 more options for all of those categories you can look at. Yeah, it's gonna take a minute.

18
00:02:33.840 --> 00:02:47.610
It was already on cases, but that's okay. Okay. So, and then it shows you total volume in for 100000. we're going to look at total volume. 1st, but then I'm going to have high things like that per 100000.

19
00:02:47.610 --> 00:02:55.349
So that it really gives you kind of a better look but right now some of the volume has already been like, so you don't need to do anything, I guess.

20

00:02:55.349 --> 00:02:59.939
So you can tell cases find jurisdiction to date. This is total cases.

21
00:02:59.939 --> 00:03:11.395
Since March, and we started reporting cases, and you can see that St Louis has the most obviously largest county in the state with 24000 Kansas City has 12000 Jackson county has 8000.

22
00:03:11.395 --> 00:03:25.375
so Kansas City crosses multiple county lines for those of you on the West side. You know, that, for the rest of you, you probably knew that, that you don't think about what that means in terms of reporting. So if you live in Kansas City, Metro, you get reported to Kansas City metro.

23
00:03:25.375 --> 00:03:30.264
If you live in Jackson County, but not in Kansas City metro. You get reported in Jackson County.

24
00:03:31.979 --> 00:03:40.020
You can't necessarily add those numbers together for Jackson in Kansas City because we know Kansas City Cross has been declined county for example.

25
00:03:40.020 --> 00:03:53.639
And so, um, that's kind of why those are shown that way the other place in the state, where that happens is between Joplin and Jeff for county and county because Joplin also crossed the line. But just wanted to make you guys aware of that when you see this.

26
00:03:53.639 --> 00:03:57.990
I know the question we actually got on the commission yesterday, so this is.

27
00:03:57.990 --> 00:04:09.449
This total volume of cases for 100000, for all the counties in the state, and where they rank the system the beginning. Then if you look at the past 7 days, total volume of cases.

28
00:04:09.449 --> 00:04:15.780
Now, what I want you to really do hiking boots that per 100000, instead of total volume.

29
00:04:20.220 --> 00:04:30.418

And it'll take it the 2nd, and if you look at the per 100000 scroll up on
your cases over there, I guess, on the left, where it says sorted by
case.

30
00:04:30.418 --> 00:04:44.543
Where the red, where the red dots are by, can we get there? So you can
see St Louis is no longer the largest, uh, per county neither are Kansas
City Jack, but none of those are showing up. It's more of our rules
county.

31
00:04:44.574 --> 00:04:52.223
So that means we have a greater rate of inspection, and those rule
counters since the pandemic started, then we do in the urban county.

32
00:04:52.524 --> 00:04:53.694
The other thing I want to look at,

33
00:04:53.694 --> 00:04:56.963
because I think if you're making business decisions day to day,

34
00:04:56.963 --> 00:05:04.163
what you see on the right here is probably most relevant to you and that
if the past 7 day cases for 100000,

35
00:05:04.163 --> 00:05:08.244
it shows the counties and where those stand in terms of cases are 100000.

36
00:05:08.274 --> 00:05:12.233
now, you can scroll down on there. All of these are way too high.

37
00:05:13.949 --> 00:05:17.459
And actually, I'm going to have her scroll down there.

38
00:05:17.459 --> 00:05:31.199
And you can even do this at the county level if you want to. So that's an
option in this dashboard, but just wanted you guys to see how high these
case stories for 100000 for the past. 7 days are and the counties across
our state.

39
00:05:31.199 --> 00:05:35.218
Keep going, keep going I think eventually you'll hit St Louis.

40
00:05:35.218 --> 00:05:44.009

Down there somewhere, but let's just like a boon county. So boot county to that 134.7 pages for 100000.

41
00:05:44.009 --> 00:05:57.803
St Charles county of that 122.6 staples per 100000 over the last 7 days. So you can see how that makes the diet difference also. Where do you want to be at take a per 1000? If you can click on how to read this chart? I guess.

42
00:06:00.059 --> 00:06:14.249
This is based off of the White House and reporting tool and so you can see that new cases for 100000 population per week at that very 1st metric. And if you can make that a little bigger, or I can hold on.

43
00:06:14.249 --> 00:06:22.194
For myself, cause I'm getting old. I know. I yeah, it won't let me it won't. Let me just just you. I can't get bigger either.

44
00:06:22.704 --> 00:06:33.473
So if it's less than 4, if you have less than 4 cases for 100000, you're good or you're in dark green. If you have between 5 and 9 cases for 100000, you're in my dream.

45
00:06:34.889 --> 00:06:46.978
In order to get even outer red, you have to have less than a 100 cases per 100000. when we go back, you can see our severity. So you can I'm not sure how you close out of that.

46
00:06:46.978 --> 00:06:51.149
It's tricky. Yeah, there you go.

47
00:06:51.149 --> 00:07:01.678
You can see that. We have very few. We don't we haven't found we're on number 82 county. In the state of Missouri. We have not that academy with less than 100 K for 100000.

48
00:07:01.678 --> 00:07:06.869
For the last week, so I can if you want to go ahead, keep going down. So we can see.

49
00:07:06.869 --> 00:07:12.059
So, there are some counties in this state, uh, that are below that level.

50
00:07:12.059 --> 00:07:17.098

And the very bottom 1, who is our, who is the lowest number case for 100000 out.

51
00:07:17.098 --> 00:07:23.218
We do have some counties in our state that have not reported in any case. This is not the other day, which is also excellent thing.

52
00:07:23.218 --> 00:07:28.348
So, if you can scroll down a little bit further, like, I would, I explain these bottom boxes.

53
00:07:28.348 --> 00:07:33.629
And again, you can change this, the state or county. It doesn't have to be at the state level. This is.

54
00:07:33.629 --> 00:07:46.163
This is misery versus other states, and so new cases for the past 7 days, we are 7 in terms of severity cases caseload, growth and 142 for 100000. we've had 8723 cases.

55
00:07:46.163 --> 00:07:49.733
We're also 7 in terms of death because we've had 57 new death.

56
00:07:54.059 --> 00:08:08.723
And our positivity rate is not. Right but we have a 13.9% profitability. Right? And if you go, we're not going to do this right now. My guess. But if you want to know what your positivity right needs to be not to be read, you go back to how to read this chart. And it will show you that the answer is 3%.

57
00:08:08.723 --> 00:08:13.884
So we need to come down 10.9% on the number of people. We're testing positive in order to get.

58
00:08:16.889 --> 00:08:20.038
If positivity rate that would put us in the group.

59
00:08:20.038 --> 00:08:31.139
We do still do an excellent job on testing. We re, 17th in the nation for testing with 104000 test. Um, our testing turnaround time is accessible at 2 days.

60
00:08:31.139 --> 00:08:41.009

But you can, I just wanted to show you this is available for you all to look at and I think you'll go back up to the top. There's a couple tabs in here. I just want you to look at or click on for me.

61
00:08:41.009 --> 00:08:51.178
Um, the school district, so you, we're not going to click on the county tab and you can kind of dig into this data at the county level. You click on the county tab, go to the school districts tab.

62
00:08:51.178 --> 00:08:55.798
There we.

63
00:08:56.183 --> 00:09:10.943
And I'm just I really, there's a lot more data on here and I highly recommend you take the time to look through this. I want to show the school district tab, because I'm not sure that everybody knows this data is out there and available, but we're getting there. So maybe you can get it. Okay.

64
00:09:10.943 --> 00:09:24.803
There we go. So this actually shows by school districts, and there's gonna be a map that pops up here too, but if they take it a little bit, but it looks up there. It is. So it will show you buy school districts who've got 41 or more new cases.

65
00:09:25.798 --> 00:09:33.418
31 to 4021 to 30, and all of these little lines represents a school district. Then if you go down here.

66
00:09:33.418 --> 00:09:38.938
You can actually see by ages by school districts how many cases they have.

67
00:09:38.938 --> 00:09:50.068
If they're reporting between 1 and 10, that means they have was putting 1 in 10, but because they're going to keep that number relatively, uh, but you can't actually figure out what it is, but that's why they do that.

68
00:09:50.068 --> 00:09:58.589
But you can see this has got you and have some cases and then it's got some cases for the last 14 days. So this is another tool you may want to be looking at.

69
00:09:58.589 --> 00:10:11.788

Especially if you're trying to understand what's going on with your workforce, because we know that our employees are going I have kids going to school and how that works. What? That looks like, affects their ability to work for us. So.

70
00:10:11.788 --> 00:10:23.038
Also some other good day, but there's lots of great data on this. If you scroll to the top and I'll see if you can click on it, but we will spend a lot of time, the health care systems. Another place that I go to pretty regularly.

71
00:10:23.038 --> 00:10:29.879
And we'll see what we got if we got anything, it makes them for a while. This is going to show you though.

72
00:10:29.879 --> 00:10:33.629
Um, hospital based and information, um.

73
00:10:33.629 --> 00:10:45.083
I see that they can be information all of that kind of stuff and you can click by region up and top to get what's going on in your region. Now, we're not going to spend any time on that today that you guys can do that on your own.

74
00:10:45.864 --> 00:10:54.563
So, that is what that's kind of what I wanted to show you in the future himself. We expect to have a POV vaccination update.

75
00:10:54.869 --> 00:11:04.229
Probably at the end of next week, so we'll rediscuss that in 2 weeks. So we feel like that information needs to be pushed out. Sooner. We will we will set up a time for that. Be pushed out sooner.

76
00:11:04.229 --> 00:11:14.038
We continue to support agencies with testing. I know that some of you have matured your relationship with your testing partners and.

77
00:11:14.038 --> 00:11:21.719
I think a lot of you who decided to start testing early, have developed some pretty good relationship with your testing partners and.

78
00:11:21.719 --> 00:11:35.729
Are you even getting the opportunity to take advantage of some of their improvements in testing? So if you are a provider and you're still

interested in getting involved in testing, it is never too late. We've reached out to us and we will hook you up.

79
00:11:35.729 --> 00:11:42.208
With potential testing partners, so, and there's going to be the potential for more testing partners in the future.

80
00:11:42.208 --> 00:11:56.188
Uh, we're looking at some end to end testing partners, uh, the state working with right now and hopefully we can get that out to both end to end testing means. You guys just shove to get tested. They do all the registration and they do all the courier to and from.

81
00:11:56.188 --> 00:12:00.089
The laboratory, they do all the results reporting, so.

82
00:12:00.089 --> 00:12:03.869
Um.

83
00:12:04.464 --> 00:12:18.114
Anyway, I'm going to look at those questions in a 2nd, I'm going to move on now to the budget. So we did have some really good news this week. In terms of the budget on Wednesday. The governor released 3.9M dollars in general revenue.

84
00:12:19.854 --> 00:12:29.874
For the wait list and so that what that means is we're going to be able to start serving people who have been on the waitlist effective immediately.

85
00:12:29.874 --> 00:12:35.933
Hopefully, we will start that on Tuesday working with folks to get those off the whitelist between now and December. 1st.

86
00:12:36.239 --> 00:12:44.879
Where are we working on getting 20 people off the wait list for residential and 30 people off the wait list for the community support waiver and home waiver.

87
00:12:44.879 --> 00:12:55.109
Also the partnership for hope flavor anybody, anybody was on the wait list before October 1st is eligible and that we don't have to wait, but anybody, that's like, 414 people. I believe.

88

00:12:55.109 --> 00:13:04.948
Any of those folks can now come off the waitlist as soon as we get that
information out if we're hoping for on Tuesday. So we can start getting
those folks into services as quickly as possible.

89
00:13:04.948 --> 00:13:18.269
Then every month after that, so, December 1st, January 1st, February 1st,
we won't be taking 20 people a month off of the residential waitlist and
30 people a month off the community support. Waitlist. We will be
focusing.

90
00:13:18.269 --> 00:13:24.418
Those efforts on the 12 on the community support wait list. So, doing
doing the plan we have.

91
00:13:24.418 --> 00:13:32.639
Allow 30 people to come off the waitlist a month, allows us to serve 240
people on the community support waitlist for the rest of this fiscal
year.

92
00:13:32.639 --> 00:13:40.558
At this point, we have 171 of those are 12 on the community support wait
list that we will be focusing on the 12.

93
00:13:40.558 --> 00:13:47.038
Yes, I can receive the information on the wait list again. We will also
be sending this out.

94
00:13:47.038 --> 00:13:50.519
So the beginning.

95
00:13:50.519 --> 00:13:59.609
Next week, we will start removing people from the waitlist. We cannot
remove everybody all at 1 time because.

96
00:13:59.609 --> 00:14:07.229
We don't have enough money to do that so we will be staggering. Yet. We
will be doing 20 people a month off of the residential white list.

97
00:14:07.229 --> 00:14:11.609
We will be doing 30 people a month off of the community support.
Waitlist.

98
00:14:11.609 --> 00:14:18.058

We only have we have as of October 1st 414 people on the partnership for platelets.

99
00:14:18.058 --> 00:14:21.808
All of those individuals can be removed from the whitelist.

100
00:14:21.808 --> 00:14:32.308
On the community support side we are that allows doing 30 individuals a month, allows us to take 240 people off the waitlist between now and July. 1st.

101
00:14:32.308 --> 00:14:39.989
So doing that at 30 per month, which we're technically starting in November, but we can go ahead and start moving those off. Now.

102
00:14:39.989 --> 00:14:46.619
Doing that will allow and we have 171 of those on the community support waitlist.

103
00:14:46.619 --> 00:14:57.178
So, those folks will obviously get the services 1st, based on 30 a month and then residential it's 20 per month. So we're going to do 20 between now and December. 1st.

104
00:14:57.178 --> 00:15:04.078
The month in December, we can take 20 off the January. We could pay 20 off the month of February. We can take 20 off.

105
00:15:04.078 --> 00:15:11.458
We know that we've got a lot of vacancies out there with our residential providers. So we're working on getting a list of vacancies.

106
00:15:11.458 --> 00:15:19.438
So, uh, that would be places where we can more quickly get somebody moved into services if that's what is needed and it's the right fit.

107
00:15:19.438 --> 00:15:25.168
Uh, it's still to server choice, but we want to make sure that everybody's aware of where those vacancies are.

108
00:15:25.168 --> 00:15:35.068
Uh, mostly because there is a lot of stress on our provider system right now. So you need to be taking that into consideration, especially when you're talking about services to families.

109
00:15:35.068 --> 00:15:46.078
We are all incredibly under staff and, um, we need to take advantage of
where we've got opening and that. I'm, I'm just going to leave it at
that.

110
00:15:46.078 --> 00:15:51.928
So that is is excellent news. Um, we will still have a white list.

111
00:15:51.928 --> 00:16:01.229
Uh, that doesn't eliminate our weight list, but it does start moving
people off of it and we continue to have conversations on what that wait
list is and how we can manage it in the future.

112
00:16:01.229 --> 00:16:16.048
There's also been some news at the federal level, and they have more
terrorist acts funding available. So, in the form of a provider relief
fund, and that came out October 1st.

113
00:16:16.048 --> 00:16:21.208
They've got another 20B dollars at the federal level available to
providers.

114
00:16:21.208 --> 00:16:33.328
Um, providers that have already received provider lease payments can
apply for additional funding and this funding will look more closely at
financial losses and changes in operating expenses tossed by Brenda
virus.

115
00:16:33.328 --> 00:16:40.229
Also, anybody who had previously been ineligible, um, will be able to
apply. So.

116
00:16:40.229 --> 00:16:54.024
Hopefully you will have from October 5th through November 6, so apply for
this phase 3, general distribution funding as the provider release plan
again. This is a federal event. This is not a state event. So I want to
make sure.

117
00:16:55.889 --> 00:17:00.928
I just want to make sure that people understand.

118
00:17:00.928 --> 00:17:12.864

That also we do have our state cares act money that 20M dollars that was included in our budget through Thursday. Only 3.6M of those allocations had been claimed by providers.

119
00:17:12.864 --> 00:17:24.713
We're getting a lot of questions about being able to reallocate any of the funding that have not been playing by providers. We are not allowed to do that at this point. That is not a department or a division decision.

120
00:17:26.398 --> 00:17:36.929
That is a decision at a higher level, and it has to take into account everything, the status using here as dollars for. So but to make sure that everybody understands that.

121
00:17:36.929 --> 00:17:50.638
We did have some questions submitted to the division via E mail. Um, there was a question in regards to the county status for what we do with the counties for TCM.

122
00:17:50.638 --> 00:18:04.439
And the question really is, can we still do face to face business even though it says we're remote only the answer to that is yes, you can do face to face. This is remote. Only is there as a way to.

123
00:18:04.439 --> 00:18:08.278
Offer protection and so a.

124
00:18:08.278 --> 00:18:21.114
We know that the state is never going to have at least while this is going on, but they're going to new places in this state where remote only is probably the best option for a while. Then there's gonna be places on the state remote only. It's not gonna be necessary.

125
00:18:21.114 --> 00:18:24.923
Like, we showed you on that 7 day map there's counties with no active cases.

126
00:18:25.673 --> 00:18:39.384
So that's why we've done that, but just because we say remote only does it mean it has to be remote only so what to make sure people understand that we, what face to face visits to be occurring.

127
00:18:39.743 --> 00:18:47.124

So, if you can do that comfortably, and everybody is comfortable with that, it is fine to do a face to face visit.

128
00:18:47.669 --> 00:18:51.298
Um, the next question that we got was.

129
00:18:51.298 --> 00:19:01.048
The public health emergency has been like, that's not me. That's for somebody. That's closer to the back. Sorry? I, I yeah.

130
00:19:01.048 --> 00:19:06.179
So, we have residential providers who have been post researcher practices, pandemic.

131
00:19:06.179 --> 00:19:16.259
And they are continuing those restricted practices. Are these restrictions allowed if not what are your suggestions in dealing with these providers? And there's some other questions about that.

132
00:19:16.259 --> 00:19:24.898
If you think that a provider is putting somebody in jeopardy, please try to work with it. If you don't think that that is still.

133
00:19:24.898 --> 00:19:39.713
Working for you, then we have a requirement to report that, but we want to try to work with these providers and educate them and show them ways. So we can do the things we need to do was very limited risk and maddox's going to doctor's appointments. I've been to several doctor's appointments.

134
00:19:40.644 --> 00:19:52.854
My mother's a cancer, so my husband has several doctor's appointments. My father who has a major heart condition, been several doctor's appointments so we still continue to do those things. And the individuals we support can still continue to do those things.

135
00:19:52.854 --> 00:19:55.794
It's just we've got to work with people and make sure they are educated.

136
00:19:56.098 --> 00:19:59.729
Other risk mitigation things that they can do to make sure that.

137
00:19:59.729 --> 00:20:14.513

People are as safe as possible and 1 of the things I've always like to remind people and this is true for the have centers too. We have, I mean, we do doctor's visit, the most kind of things in the center when we need to but we've had people there since March not really doing much.

138
00:20:14.544 --> 00:20:23.874
Not really seeing any was you can't keep it out. You cannot keep corona virus out of your facility. It's not it's when it happens.

139
00:20:24.239 --> 00:20:30.749
So, I want to make sure that you are not thinking that that's going to protect you from something because it's not.

140
00:20:30.749 --> 00:20:45.683
As long as your employees are out, as long as their kids are going to school, as long as they go to the grocery store, or do whatever they do in the community there is risk. So you are never gonna be a 100% risk free. So, let's make sure we're not limiting what the individuals do support.

141
00:20:46.828 --> 00:20:50.909
Have access to, especially if it's important for their health and safety.

142
00:20:50.909 --> 00:21:04.499
Um, okay, and I think that is the end of my questions I'm going to look at the chat, and I'm going to turn it over to Angie or Leslie and you just point it.

143
00:21:05.423 --> 00:21:14.663
Thanks now the public health emergency has been extended to January 23rd 2021. so this means that our section 1135 waivers will extend to January 23rd 2021 as well.

144
00:21:14.663 --> 00:21:26.874
The Phoenix K is still set to expire on January, 26, 2021, the waiver amendments for reduction of waiver slots. And the removal of the person centered strategies, consultation and counseling services are out and posted for public comment.

145
00:21:34.048 --> 00:21:45.388
You know, that there was some emails that went out, letting me know about that. And with the announcement of the funding that Val just talked about for a portion of the waitlist, we will adjust the waiver slot on those amendments accordingly.

146

00:21:45.388 --> 00:21:49.439
And that public comment, period in October 23rd.

147
00:21:49.439 --> 00:21:59.098
Thanks sounds good. All you have. No, that's all right. Well, I didn't get a chance to really go for all these questions. So I'm going to do my best on the fly.

148
00:21:59.098 --> 00:22:03.148
The 1st question we have is about the token hazard pay bonuses.

149
00:22:03.148 --> 00:22:14.159
Um, it says, can they be a reimburse of federal care provider release on and, or with state as they know they can use both but they're trying to find which funding 1st to apply their hazard pay bonus to.

150
00:22:14.159 --> 00:22:19.858
So the answer you're right Kristen is exactly yes both can be used. I would apply it to the state fund.

151
00:22:19.858 --> 00:22:29.003
Um, I think that, uh, it'll I think that might be easier for you to reconcile in the long run. So, that's what I would do. If I have another provider in your position.

152
00:22:29.034 --> 00:22:41.273
Um, also, because we've just got that announcement for loss revenue and all that kind of stuff on the provider release button side. I would put some of that stuff over there. If I was trying to figure out how to put all this in the right bucket for right now.

153
00:22:41.638 --> 00:22:51.929
We also are the death that are not Co related reported as coban. I don't really understand that question, but I want to say that the answer is no.

154
00:22:51.929 --> 00:23:06.509
I'm not totally related deaths are not reported up so good. I think that might have something to do with if I died in a car accident, and I had cobit, is it called a cobit death, or called a car accident? That the answer that would be a car accident. So.

155
00:23:06.509 --> 00:23:11.999
Um, it does get a little difficult when you're dealing in situations like, especially in nursing homes.

156
00:23:11.999 --> 00:23:25.523
Where we know, we've got folks with some pretty intense chronic conditions, or even in some of our mobility patients that are folks that are at, and the life type situations, and that's a decision that is made at the death certificate level.

157
00:23:25.554 --> 00:23:39.443
So, they look at all that information to try to make that decision and that's the wait list. Yes, it is. Great things about the way list. We're very excited about that. Follow the vacancy. Let's be completed. When will be released across the table at come from. Pr.

158
00:23:39.443 --> 00:23:43.913
K, we are working on that. That's actually just something we started talking about yesterday.

159
00:23:44.219 --> 00:23:55.739
So, we'll be working and I would say for any provider out there that wants to get there vacancy. Listen, I would definitely miss out to our.

160
00:23:55.739 --> 00:23:59.308
Well, autism project be adding new participants this year.

161
00:23:59.308 --> 00:24:09.058
So, there's no new money there so well, we still have to watch that spending to see where we're at in terms of adding new participants of the offices and project.

162
00:24:09.058 --> 00:24:12.568
We are in the October right now, so we can take a look at that again.

163
00:24:12.568 --> 00:24:19.229
Does anyone on the panel know if the P service will remain as an option through the autism project spending.

164
00:24:19.229 --> 00:24:26.249
Um, I'm going to have to get back to you on that question. The audio missing out? Yeah. Sorry about that. Um.

165
00:24:26.249 --> 00:24:31.618
With the public health of our existing being and oh, this is an anti question.

166

00:24:31.618 --> 00:24:44.364
All right with the emergency, be extended to 123 2021 power what effect
does this have on the appendix? K right? So it does not have an effect on
our appendix. K. appendix K still is set to expire January 26.

167
00:24:44.453 --> 00:24:46.943
so it's just 3 days later.

168
00:24:49.019 --> 00:24:53.638
Um, the, it's the 1135 that it has the, um, the impact too.

169
00:24:53.638 --> 00:24:56.939
So that's our target case management, um, component.

170
00:24:56.939 --> 00:25:11.909
And that has been extended then to the January 23rd. Okay. And then I'm
happy about the funding for the wait list. I concerned though that our
providers are extremely short staff. Are there still ongoing
conversations about re, rebating in the plan?

171
00:25:12.233 --> 00:25:19.523
Any idea about timing there, because the waitlist and provider is selling
our forms. So, Nancy is a great question.

172
00:25:19.794 --> 00:25:27.864
What I would say to that is so in those, just in the last week, and this
is why we've got the money for the waitlist.

173
00:25:28.259 --> 00:25:41.729
There's been some things that were really uncertain that have been made
more concrete, both at the federal level at the state level on the
revenue side. So we can't spend money. We don't have everybody knows
that.

174
00:25:41.729 --> 00:25:50.753
And there was a lot of uncertainty about what kind of money we were
definitely going to have the 3 things that happened just in the last week
1,

175
00:25:50.753 --> 00:25:52.884
we got the September revenue numbers in,

176
00:25:53.183 --> 00:25:57.624
and our September revenue numbers were better than they were last year.

177
00:25:57.959 --> 00:26:07.703
In September the month, where there's nothing weird going on so, you know, July and August, we have some weird stuff going on with tax deadlines and those kind of things September we have nothing going on.

178
00:26:08.124 --> 00:26:21.564
So the state revenue numbers do look better than what we probably originally expected and so that's good news. Now of course, that doesn't mean we spend all our money, but it is, it does, it does improves confidence.

179
00:26:21.564 --> 00:26:23.483
And the ability that we're going to have the state revenue.

180
00:26:23.939 --> 00:26:36.983
That's something that happened was with the extension of that emergency, that public health emergency, they didn't send it. We get a whole nother quarter of the extended estimate. So that is I states like 170M dollars for this date.

181
00:26:39.028 --> 00:26:47.003
So that is also really good news that we did not know, we thought that was going to end and now we get a whole extra quarter. So that's really good news.

182
00:26:47.003 --> 00:26:57.413
And that again, that's federal information that is firming up our position to make decisions on the revenue side on the financing side of things you said, the revenue, then the 3rd thing that we have.

183
00:26:57.923 --> 00:27:09.443
Is the state actually got our every year from the federal government we get what they're going to pay for Medicaid and what the state's responsibility is for Medicaid.

184
00:27:09.443 --> 00:27:13.163
We call that the federal math or the, some of you for those terms.

185
00:27:13.528 --> 00:27:27.594
But that changes every year, and some years, what the state has to pay goes up in some years, what the state has to have to pay goes down this year that's going to go down. And that's gonna say the state what the state has to pay is going to go down with teams.

186
00:27:27.594 --> 00:27:29.483
The federal government will be paying more.

187
00:27:29.818 --> 00:27:34.528
To the extent of about 80M dollars that just a rough back of the envelope calculation.

188
00:27:34.528 --> 00:27:39.148
So those are 3 really key pieces of revenue news.

189
00:27:39.148 --> 00:27:46.108
That allow us to make some of these decisions, and it will hopefully allow more of those decisions to take place. So.

190
00:27:46.108 --> 00:27:49.138
Okay.

191
00:27:49.138 --> 00:27:52.138
You mentioned that you're able to.

192
00:27:52.138 --> 00:27:59.429
Okay, there's a question about, you mentioned that you're able to link provider to POV testing partners are these.

193
00:27:59.429 --> 00:28:13.193
For testing, individuals supported or for testing staff for both. Well, everybody will test the residents. We'll test the staff. We'll test the individuals you support if you're today have if you've got employment services, we'll test them. So you don't see that.

194
00:28:13.193 --> 00:28:22.733
There's just linked to folks and we will make sure that you get after we get you connected to a testing partner. All right. Hi guys. That is all I see in the stack.

195
00:28:23.189 --> 00:28:29.999
Um, I think we have some answers on the opposite side, but other than that, I think we're pretty good. Thank you. Guys what you're doing. I.

196
00:28:30.804 --> 00:28:45.023
I'm going to be optimistic and positive today, because I need to be and I know our employees are tired. I know the individuals who support retired,

everybody is tired. Everybody a frustrated the level of stress is so high.

197
00:28:45.054 --> 00:28:52.913
I mean, we all feel like, right a breaking point and you don't at some point during the day, take that data when because if everybody feels that way so.

198
00:28:53.278 --> 00:29:05.038
Um, we have a lot of resources at the Department of mental health. We've got the crisis counseling programs. There's a number you can call if you're under stress. Just go to most show me hope dot org.

199
00:29:05.038 --> 00:29:10.588
There's more information there crisis counseling program is available to everybody in this state.

200
00:29:10.588 --> 00:29:16.138
We've got suicide hotlines that we want people to taking advantage of and.

201
00:29:16.794 --> 00:29:28.913
You gotta put my side, we've also got a texting line for folks that need to text. So you could text most states that to 7 4 1, that's 7 for 1.

202
00:29:29.094 --> 00:29:31.403
if you're in a crisis and you need to talk to somebody,

203
00:29:31.433 --> 00:29:39.413
you can call you show me how hotline that's 1 809 85599 0T if you're in a crisis and you need to talk to somebody,

204
00:29:39.413 --> 00:29:48.144
because it's with everything going on and this big world right now it is hard to get a little panicky everyday and I completely agree with that.

205
00:29:48.233 --> 00:29:57.534
So they say, take care of yourselves take care of each other take care of your employees. You're doing a great job, keep it up.

206
00:30:00.179 --> 00:30:03.358
It's not gonna get easier. So how can we get by.