## WEBVTT

```
1
00:00:01.044 --> 00:00:11.814
As always, thank you to everyone for joining us, we have several things
that have flown in last minute on the agenda as lots of things that are
going on. Right now. I know you're aware of that.
00:00:11.845 --> 00:00:16.464
So, I am not going to take any more time and I am going to turn this
right over to.
00:00:21.300 --> 00:00:31.620
Okay, thank you. Hi. Good morning. Everybody I see our number of
participants is quickly climbing, which is great. I had to close some
stuff on my screen here.
4
00:00:32.515 --> 00:00:42.295
Thank you all for joining us. I know we do have a lot of information to
go through today and I'm not going to lie everything. We tell you today.
We will probably be telling you over the course of the next month.
00:00:42.295 --> 00:00:47.545
So you're going to hear this more than 1 time, and we're going to be
learning about this stuff more than 1 time.
00:00:47.935 --> 00:00:51.475
The 1st thing I'm going to have to pull up is yesterday,
00:00:51.475 --> 00:00:54.924
Governor parson issued a state of Missouri,
00:00:54.924 --> 00:00:56.335
public health warning,
9
00:00:56.814 --> 00:01:04.885
and this public health warning talk specifically about what we're
expecting as residents of the state of Missouri,
10
00:01:04.885 --> 00:01:10.194
and their personal behavior and personal behavior advisory said things
like,
11
00:01:10.194 --> 00:01:15.864
```

wear a mask at all time and public or other settings outside of your home where social thing is not possible.

12

00:01:17.004 --> 00:01:23.995

Always try to maintain a limit of 6 feet wherever possible and limit close contact with other individuals to less than 15 minutes.

13

00:01:24.269 --> 00:01:37.284

Course wash your hands the biggest 1 and the 1 that I know we're still struggling with in our state facilities. I'm sure most of our provider agencies are struggling with stay home when you are sick, or if you have symptoms.

14

00:01:37.765 --> 00:01:47.185

So the symptoms are a cold, their allergies they're burning. I've burning knows. They're sore throat. They're a headache. They mimic a lot of other symptoms.

1.5

00:01:48.295 --> 00:02:01.405

I know that we've got a workforce that is exhausted and we need every employee become to work that can, but we've also got a screen out those that are not healthy because that is how it spreads. That's why we push the testing so much get them tested.

16

00:02:01.674 --> 00:02:08.125

You'll know quickly if they can come back to work or not. So wanted to make sure that we talked through that limit.

17

00:02:09.025 --> 00:02:22.224

Your regular interactions to a small group less than 10 family members. Friends are coworkers. If you live in a category 1 or a category, 2 community, and we're going to go over what those category 1 category. 2 communities are in a minute.

18

00:02:22.764 --> 00:02:32.844

There's business advisory here also. In in addition to the basic guidelines for individuals, businesses need to implement basic infection control, prevention measures.

19

00:02:32.844 --> 00:02:41.245

We do that modify physical workspaces, develop infection, disease, preparedness and response plan, monitor.

20

00:02:41.275 --> 00:02:51.384

Oh, that should include doing your own contact tracing and so I want to make sure this is clear for everybody on the call in most counties in the state right now, you.

```
21
00:02:51.689 --> 00:02:59.370
Or you as a citizen, and you, as an individual will be responsible for
doing your own contact tracing if you test positive.
00:02:59.370 --> 00:03:09.120
So try to keep track of where you've been over the last 48 hours so that,
you know, who has been close to you if you do test them and positive.
2.3
00:03:09.120 --> 00:03:22.164
So I want to make sure that people understand that, and the same for
workplace, that is gonna be workplace. I mean, we need workplaces to take
responsibility for this, at this point travel advisory.
00:03:22.164 --> 00:03:35.935
They want to minimize the risk, because it's spread within Missouri and
across the States, especially as we approach the holiday season. We're
going to go through some things that kind of help you guys think through
that in a little bit. But please minimize travel outside of Missouri.
00:03:37.495 --> 00:03:39.895
If you are going outside of Missouri,
2.6
00:03:40.764 --> 00:03:43.495
please take into account individuals that are high risk,
2.7
00:03:43.824 --> 00:03:48.474
encourage people to self isolate as much in advance of any gathering,
00:03:48.474 --> 00:03:49.284
if possible,
00:03:50.365 --> 00:03:56.004
and do not attend any gatherings family or otherwise if you have any
symptoms.
30
00:03:56.034 --> 00:04:06.835
```

I know somebody asked me the other day is diarrhea symptom yes. It's a symptom. Nadia is a symptom losing smell or take are symptoms. Those are that's the big big.

```
31
00:04:07.349 --> 00:04:10.314
Bells are ringing, not everybody has it, but it's a symptom.
00:04:11.604 --> 00:04:26.574
So, there's also a local government advisory included in this and this
really talks about how Missouri is a local control state and as a local
controlled state, it's important that local local government makes
decisions that are unique to each community.
00:04:26.995 --> 00:04:35.334
Those decisions can be more stringent than the baseline public while the
state of Missouri provides a baseline of public health standards and
expectations.
34
00:04:36.504 --> 00:04:50.423
Local communities can establish hire more stringent standards above the
state, public health advisory baseline and I know we're seeing that
across the state right now. Then I would like to go on to the next. So
you've got it up already.
35
00:04:51.413 --> 00:04:58.733
There's a note at the top of this. Oh, no. Go back real quick and then
we'll move on to that high time. Sorry there's a note at the top of this
page. I'll go back.
36
00:04:58.978 --> 00:05:07.408
At the top of the 3rd page? Yeah. Scroll down a little bit further. Oh,
no. Go back. Why is it doing that?
37
00:05:07.408 --> 00:05:10.978
I'm sorry, I'm going to have her go back 1 more time.
00:05:11.514 --> 00:05:15.954
Because this the 3rd page of that public health advisory talks,
00:05:15.983 --> 00:05:16.884
specifically,
40
00:05:16.884 --> 00:05:28.494
I think she's trying to scroll down and it's doing that to her talk
specifically about what are the categories and then what are the
advisories for those categories?
```

00:05:28.494 --> 00:05:43.374

So category, 1, academy and category 1 and considered extreme risk, if they've had a PC or 7 day positivity rate and I'm going to show you where to get this information in a minute, a 15% or above using the CDC method.

42

00:05:43.374 --> 00:05:54.803

So the state of Missouri had previously been showing to class activity rate 1 was the CBC method and 1 was the state of Missouri method we have now moved away from the state of Missouri method are only using the CDC method.

43

00:05:54.803 --> 00:06:08.153

So that is there to avoid confusion, although sometimes, I think it causes confusion. So I don't want you to know if the 1 that you're seeing on the public facing dashboard is the 1, you need to be paying attention to also the 7 day case rate per 100000.

44

00:06:08.153 --> 00:06:12.144

if that's above 350, then your county that's considered an extreme risk.

45

00:06:12.144 --> 00:06:24.713

The advisory recommend business, occupancy, limits, reflective of social does something that includes social group sizes of 10 or less note for the purpose of this advisory in big, bold letters.

46

00:06:24.713 --> 00:06:34.584

Social group is defined as any planned or spontaneous event or convening. That would bring together a group of people in a single space at the same time.

47

00:06:34.584 --> 00:06:41.423

This excludes normal business activities, religious services, schools and school activities and extended family gathering.

48

00:06:41.423 --> 00:06:54.834

So, I think this probably applies mostly to places like restaurants, gyms, but it also gives business has something to point to whenever they need to make decisions that really best reflect them.

49

00:06:54.834 --> 00:07:08.244

So, what masks are also strongly advise in all offices and businesses were social distancing is not possible at the top before we go through what all these categories are it says that.

50

00:07:10.978 --> 00:07:19.228

Entities can move down in a risk category after 2 consecutive weeks of meeting the lower category of criteria. So.

51

00:07:19.228 --> 00:07:33.774

You stay in county, you stay an extreme risk if you're an extreme risk and so you have 2 consecutive weeks as a positivity rate below 15% and a 7 day case right? Below 100000. I'm not going to go through what category 2 is or category.

52

00:07:33.774 --> 00:07:45.504

3 is because a lot of folks in this state are already in the extreme risk category category 1. so not going to have to pull up the website where you can go and see where your county is.

53

00:07:47.783 --> 00:07:58.673

And we're going to use coal County, because we know Cole county is in the extreme risk category. So this is on the state public facing dashboard. And we've shown this to you many, many times.

54

00:07:58.704 --> 00:08:09.204

So the information in the top is on the right on the left side, where it says cases today, 5426 detonate 38 tested 8, 554085, that is data since the beginning of the pandemic.

5.5

00:08:09.204 --> 00:08:23.004

So, since March, when we talk about what we talked about in category, 1, those risk levels, that's going to be on the right side of your screen. We're looking at the past 7 days so cases in the past 7 days for coal county or 556.

56

00:08:30.413 --> 00:08:44.183

That is, uh, the 7 day case rate per 100000. we may have to go down to see the 7 day case rate for 100000. so, let's scroll down a little bit hiking to the bottom. And you can see these red, these red boxes is where we need to be looking.

57

00:08:45.808 --> 00:08:56.994

So new cases are 556 for the past 7 days in cold county that equates to 724 per 100000. remember to get into extreme risk category. You only need to be at 350 or above.

58

00:09:01.558 --> 00:09:08.423

4 cases per 100000, so in Cole county county is substantially above that 350 cases per 100000 level.

00:09:08.423 --> 00:09:18.413

Thank you for putting that in the chat, the 7 day positivity rate CDC method is supposed to be anything 15% or above that you in the extreme risk category?

60

00:09:18.413 --> 00:09:32.663

Cole county is at 27.6%, those 2 boxes are the 2 boxes that you need to look at whenever you're determining if your county is an extreme risk County, a critical risk County, or a serious risk county and just so, you know, critical risk. Really?

61

00:09:32.663 --> 00:09:44.063

Everything stays in place, except social group size goes up to 25 or more, not much changes between what is expected in terms, or what advice is applied to businesses and counties to.

62

00:09:50.278 --> 00:10:01.494

To do their work, so that I wanted to go through that with you all I wanted to make sure you had access to it. I wanted to make sure you knew where the tools were and how to use those tools and apply them to your work.

63

00:10:02.333 --> 00:10:15.203

I don't think I need to tell anybody on this call because you guys have been actively participating in these calls since March. How dire this situation for the state of Missouri is at this point. And how important it is that everybody's follow.

64

00:10:15.923 --> 00:10:18.953

Just the basics and we talk about the basics all the time,

65

00:10:18.984 --> 00:10:20.244

but I think,

66

00:10:20.423 --> 00:10:31.073

I think the hardest basic for people to follow right now is staying home with you are sick and taking that fitness seriously and finding out whether or not you have code that or not.

67

00:10:31.649 --> 00:10:41.303

Uncovered negative test gives you lots of relief and and then you don't have to contact trace for the last 48 hours. But it is our personal responsibility to be doing that, at this point in time.

68

00:10:41.303 --> 00:10:47.964

So, take a look at it all of this information you guys know it's public share it's far and wide share it with your work.

```
69
00:10:47.964 --> 00:11:02.663
Folks share it with your social folks, share it with your search folks or
school folks, anybody you can get to listen and look at that needs this
information and needs to go through it. The other thing I want to show
right now is that risk website.
70
00:11:03.719 --> 00:11:04.469
71
00:11:05.333 --> 00:11:08.333
I know as we approach the the Thanksgiving season,
72
00:11:08.634 --> 00:11:19.193
it is really hard to say I'm not going to dinner with grandma and grandma
but they have a planning tool out there and we're going to scroll scroll
into Missouri.
73
00:11:19.224 --> 00:11:33.264
Actually, 1st, type it in that left side. Where it says, event box hit
right now that's showing 50 or more people. Let's go ahead and make that
25. because I think 25 is a pretty decent. I mean, if you're having a
family dinner on Thanksgiving, 25 is a pretty decent size.
74
00:11:33.264 --> 00:11:46.943
If you've grown up with families, like mine, so, 25 is the minimum that's
a small group. And if you'll go ahead and make it larger to get you set
it up there already. I just can't see for Cooper counting County,
Missouri.
75
00:11:46.943 --> 00:11:51.474
If you have event of 25 or more people,
76
00:11:51.474 --> 00:11:51.984
there is,
77
00:11:51.984 --> 00:12:00.803
I believe that says an 81% chance that someone in your group is going to
have and so when you pass the turkey 81% of the time,
78
00:12:00.803 --> 00:12:02.994
```

you'll be passing the coven around the table.

```
79
```

00:12:02.994 --> 00:12:14.033

And so that's kind of when she goes to Cole County, and, I mean, that is, I'm on, I wanted to be on the camera today to see you guys, but that means my screen is teeny. Teeny tiny. So for sage county with 25.

80

00:12:14.033 --> 00:12:27.653

Oh, save county was 25 people at the table. The risk level is 77% 77% chance that somebody at the table is going to have coded this also as a tool that you guys can share.

81

00:12:27.653 --> 00:12:36.024

I know what our facilities are doing at the state level. We're pushing this out to we call everybody that works in our facilities right now healthcare heroes because I.

82

00:12:40.948 --> 00:12:45.239

Cannot imagine doing the, the, the level of work and.

83

00:12:45.239 --> 00:12:48.899

For the time that we've been doing it, and it's and it's not getting.

84

00:12:48.899 --> 00:13:02.484

Better it's getting worse and harder right now but so we there, if we kind of and I sent this out to our providers and and so you guys can probably see this message, but it's a plug and play message where you can just take your county.

85

00:13:02.484 --> 00:13:06.354

You can use this data to say, you know.

86

00:13:07.193 --> 00:13:19.764

Please think twice before you make your plans and another thing that was included in that message is just what what those executive teams at that location we're going to be doing for Thanksgiving and they're staying home because that's what we need to be doing at Thanksgiving.

87

00:13:20.183 --> 00:13:26.063

We need we need the limited exposure as much as we possibly can and it's not going to be easy. But I am.

88

00:13:26.369 --> 00:13:39.984

I am happy to hear pretty regularly that that is the decision. So start making. So I'm proud of folks for making that decision. Testing. Update is what we'll go to next. So we did get really good news this week.

89

00:13:40.614 --> 00:13:53.754

I know a couple of weeks ago I had announced that we would no longer be able to pay for testing after November 15th, but that has been changed. So, for anybody that's got some patients facing healthcare worker. So, our residential providers are day have providers.

90

00:13:53.754 --> 00:14:05.214

If you've got an outbreak with residents or or individuals and supports or staff personal care to let us know, and we'll work on getting testing coverage for you.

91

00:14:05.214 --> 00:14:14.994

I know we've done that for a lot of folks, and a lot of folks, head testing occurring in a regular rhythm. We had a disruption for about a week. There. This has now been extended till December 30th.

92

00:14:14.994 --> 00:14:29.214

That's when the carefax funding deadline currently is we do expect Congress to make some sort of federal funding either cares act extension or other federal funding decisions for in December.

93

00:14:31.798 --> 00:14:38.578

However, they have it to date and so this is what we know, and that's the information that we have to share but.

94

00:14:38.933 --> 00:14:52.823

Also, any providers that have been doing testing I greatly appreciate that ice and you guys know this I firmly believe testing is what keeps this out of our locations no matter their size and keeps the individuals that we support.

95

00:14:52.823 --> 00:15:05.094

Say, the next thing we want to talk about is the vaccine that they oh, no 1 computer went down. Okay. I got to back up the vaccine update. So there is, let's go to that vaccine dot O dot Gov site. 1st.

96

00:15:08.099 --> 00:15:12.899

Kovio vaccine dot dot. Gov. You have that 1.

97

00:15:12.899 --> 00:15:19.318

Okay, hold, I will do this. We'll talk to this 1. no problem. We'll talk to you this. 2nd.

98

00:15:19.318 --> 00:15:23.578

Um, unfortunately our office got close today and.

99

00:15:24.504 --> 00:15:35.573

We, you know, we always find out at 4 o'clock, but that's going to happen. So we're, we're doing our best working from work and apart, and we want to work apart because we know that's where we need to be right now.

100

00:15:35.844 --> 00:15:50.813

This right here is really about vaccinated enrollment and so I want to talk about that Terminator enrollment and back when we expect to get vaccines for individuals we support. So I'm going to mute you. Hi to.

101

00:15:51.354 --> 00:15:53.754

Maybe maybe not. So.

102

00:15:55.229 --> 00:16:06.479

Specifically for the way that states plan for vaccination works right now is there's category 1 a, and category 1 a.

103

00:16:06.594 --> 00:16:16.494

Our employee patient facing health care workers and that is that that is us our community providers are patient facing health care workers.

104

00:16:16.494 --> 00:16:29.693

I don't think our target case management entities would not qualify as patient facing healthcare workers because if it's a job that can be done telehealth wise, it doesn't count. So nurses that are doing, telehealth would not count as patient facing healthcare workers.

105

00:16:30.443 --> 00:16:40.583

But all of our residential providers, no matter the size qualify as a 1, a provider in Missouri, I think our day have qualify as a 1 a provider in Missouri.

106

00:16:40.673 --> 00:16:55.254

So all of those providers should be figuring out how to get vaccinations for their staff at this point in time. And I will tell you, that there are about we estimate about 500000.

00:16:55.254 --> 00:17:08.453

we think that's a low estimate as patient facing health care workers and Missouri. That's hospitals, that's nursing homes. That's our folks in the hospitals that are working our 1st round of doses of coban vaccine that's going to be around 167000.

108

00:17:08.453 --> 00:17:19.673

so we know that we are not going to be able to get even all of those patient facing health care workers vaccine in that 1st round. So, not only are we focusing on patient facing health care workers?

109

00:17:19.673 --> 00:17:33.534

We're also focusing on this patient facing health Co workers with Co morbidities. So we want to try to get those folks vaccinated. 1st. So, if you've got diabetes and you're patient facing health care worker, you are the priority for this 1st, round of vaccines.

110

00:17:33.534 --> 00:17:38.903

And that includes everybody that works for us. And I've gotten all of that confirmed just in the last 24 hours.

111

00:17:43.223 --> 00:17:57.114

So we're going to be working on sending out some information so that you guys can help plan for that there are a couple of ways that you can and what I'm suggesting and what I think we're going to be doing on the state side. We're going to approach this from 2 different ways.

112

00:17:57.384 --> 00:18:11.903

1, if you want to be a vaccinate or yourself, you need to go to the coven 19 vaccinate or enrollment site. You will have to have a medical director to do this. So, if you don't have a medical director, this will not work. I'm not even certain.

113

00:18:11.903 --> 00:18:20.483

This state is going to be doing this coven, 19 vaccinated enrollment. And I'll tell you why, but we're going to sign up anyway because signing doesn't doesn't.

114

00:18:20.759 --> 00:18:32.423

Put you on the hook to do it, it just makes it an avenue for you to access vaccine. When vaccine is available in case you can't figure something out there are 2 vaccines out there that are more most likely to tend to Missouri.

115

00:18:32.423 --> 00:18:47.213

1 is the Pfizer vaccine and 1 is the Madonna vaccine the Pfizer vaccine requires cold storage less than negative 70 degrees. If you don't have that you've got to have dry storage as a vaccine is the issue send them.

116

00:18:47.213 --> 00:19:01.403

The vaccine can be stored in a refrigerator. So you want to sign up in this vaccinate or enrollment category if you can, because if we get access to the state to them, and they're in a vaccine, which, we don't know yet, and I know that's frustrating.

117

00:19:01.943 --> 00:19:12.534

But if we get access to the vaccine, the stories is no longer an issue for you and and you could easily become a vaccinate or at your site for some of us not for all of us. But for some of us.

118

00:19:13.074 --> 00:19:21.354

So, I wanted to make sure that you understand why it was important to enroll in this category. I'm sorry if you're hearing an echo, I'm trying to use my ear, but.

119

00:19:22.794 --> 00:19:32.124

Because that usually works better. The next 1. I wanted to talk about that. You can enroll with is call your local pharmacies and your local farm.

120

00:19:32.513 --> 00:19:46.824

Because I know most of our, especially our residential providers work directly with a pharmacy, talk to them about becoming enrolled in the vaccination program, and they would enroll through that cobin 19 vaccinate enrollment that we've got up on the screen right now.

121

00:19:47.693 --> 00:20:02.604

And then, whenever it comes time to get the vaccine, we would say pharmacy, I need 50 doses for my staff. Because remember, we're only doing patient based and health care workers in this 1st round. They would put in the order.

122

00:20:02.604 --> 00:20:06.894

And then they'll call you back and let, you know, if they get 2010, 5, whatever but.

123

00:20:08.874 --> 00:20:19.223

So I wanted to make sure people understood that there's a 3rd option 2 and in some of the counties, this is going to be your best option probably. And that's to work with your local public health agency.

00:20:19.493 --> 00:20:23.963

So the local public health agencies are all supposed to be enrolled as coven 19.

125

00:20:25.163 --> 00:20:36.294

now, I recognize that some of you live in counties in the state of Missouri, where you've got, you know, you've got 3 people that work at your local public health agency, and you may not feel like that's the way for you to go.

126

00:20:36.324 --> 00:20:49.344

However, I want you to know still contact them still work with them, because there will be some rapid vaccination teams that go out and those wrapped to help those local public health agencies with the actual vaccination.

127

00:20:49.763 --> 00:20:58.824

So they're called regional implementation team. So don't let the fact that you have a small local public health agency view. The reason you don't work with them.

128

00:20:59.723 --> 00:21:08.034

The next thing you're going to need to do, though, is you're going to need to understand how many of your employees are actually interested in getting the vaccination.

129

00:21:08.423 --> 00:21:19.134

So, because this is an emergency use authorization vaccination nobody can mandate we cannot mandate for residents. We cannot mandate vaccination for employees.

130

00:21:19.163 --> 00:21:33.503

That's not an option for an emergency use authorization vaccination. So you need to be surveying your employees to find out who is actually interested because you don't want to tell your local public health agency or your pharmacy.

131

00:21:33.503 --> 00:21:47.453

That you need 50. and then only 5 of your folks are actually interested in getting the vaccine. So wanted to share that information with you also. So I told you 1, a, is where the 1st groups, the vaccination go to those are patient facing health care workers.

132

00:21:47.453 --> 00:21:49.134

So you need to be thinking about this,

00:21:49.134 --> 00:22:04.104

and how do I get my employees vaccinated in the 1st round then you still need to be thinking about how you get the individuals who support vaccinated in the 2nd round because anybody who lives in a long term care facility and we fall into that category

134

00:22:04.463 --> 00:22:06.983

they are going to be eligible in the 1 B.

135

00:22:07.253 --> 00:22:08.453 so when we get enough back.

136

00:22:08.459 --> 00:22:14.159

Things into the state, and we feel like that 1 a category satisfied. They will move to the 1 b category.

137

00:22:14.903 --> 00:22:27.713

And again, you can do the vaccinated enrollment, talk to the local public health agencies, but you are going to have to have consent to give this vaccination to residents and you're going to need to know, or individuals you support and you're going to need to know how many of them want to do that.

138

00:22:27.713 --> 00:22:40.584

So start thinking about how we're going to be working on that at the state level. And as we get that information together, we will share it to you but start thinking about how that looks for your agencies. Hey, that's vaccination.

139

00:22:40.584 --> 00:22:55.403

I'm sure there's questions in the chat, but I'm going to keep going and then I will go back and look in the chat because I can't do both right now at the same time. The next thing I wanted to talk about, was the budget update. So, we did get really thank you. Thank you for.

140

00:22:55.403 --> 00:23:01.973

Reminding me there is also this website out there. We know a big concern around the vaccination.

141

00:23:02.459 --> 00:23:16.403

Is information and so the state has put up this website also with information for residents on if you need to get vaccinated vaccinated and how to get the facts. And so there's a lot of really good information on here.

00:23:16.644 --> 00:23:18.054

If you will scroll down.

143

00:23:19.584 --> 00:23:34.374

1 of my favorite, and I have not had, I mean, I just saw this website yesterday I go to oh, yeah. Go ahead go down maybe or maybe I might have to go to get the fax. There's a really cool thing on this website called rumor control. Okay, go back up.

144

00:23:34.614 --> 00:23:41.364

That's all really technical. And I will talk about that here in a 2nd, too so quickly get the facts.

145

00:23:43.798 --> 00:23:46.888

And then if you will scroll down.

146

00:23:47.753 --> 00:23:58.584

Or even just at the top there, Stacy effectiveness, privacy, cost availability, history and rumor control. So there's a lot of information on this website.

147

00:23:58.584 --> 00:24:07.824

And I really like the rumor control section because these are real questions that the Department of health and senior services is getting answered. So, they're posting them out there with the answers.

148

00:24:07.824 --> 00:24:17.784

So, residents the question residents will not be used as guinea pigs if they choose the vaccination residents aren't even in the 1st category for vaccination.

149

00:24:17.814 --> 00:24:25.673

So just wanted to make sure that everybody understood that this resources out there too.

150

00:24:25.673 --> 00:24:36.773

We know that, when you're starting to talk to your employees and individuals who support and guidance about the vaccinations, they are going to want more information and this is a great tool to help them get more information. I know.

151

00:24:36.773 --> 00:24:49.403

We're also working on developing some 1 pagers that we can hopefully ship out to everybody so that they understand more information about the vaccination. So I think that's all on back. To the other thing.

152

00:24:49.403 --> 00:25:03.804

I was going to tell you, and you will see this in the news today. If you haven't already Pfizer has put in their request for the approval of their emergency use authorization. So there are 2 steps that have to happen before that bytes.

153

00:25:03.834 --> 00:25:17.663

That vaccine can go in the arm and that is the emergency use authorization has to be approved and then after that is approved, then there's a secondary committee called the academy for immunization.

154

00:25:17.663 --> 00:25:21.683

It's a step and I'm not going to get those what that means right? If the federal committee.

155

00:25:22.854 --> 00:25:30.084

But then they also have to approve it before it can go out the door. Now, the vaccine is going to be Pre positioned across the country.

156

00:25:30.233 --> 00:25:38.574

So, as soon as that last approval is received, you can do vaccines that day, because there's going to be access to those for folks.

157

00:25:38.574 --> 00:25:53.304

So I, but they believe that that emergency use authorization to take between 2 and 4 weeks. Then once once that is, granted, there will be about another week for that 2nd group to finish up their approval if it's approved.

158

00:25:53.604 --> 00:25:58.223

And then so you're looking at 3 to 5 weeks right now before a vaccine.

159

00:25:58.558 --> 00:26:05.219

Probably available to go in the arm, so I just wanted to make sure people kind of understood the timeline of that also.

160

00:26:05.874 --> 00:26:20.064

Okay, that's all on vaccine. I think a budget update is next. So we have that 20M dollars of cares act spending that was available for our residential providers group home. They have unemployment providers.

00:26:21.413 --> 00:26:32.903

So, we got through the 1st round of that, and we've got about 5.4M of that that was not spent providers did not request money and I think it was about a 138 providers that did not request any of their allocations. So now.

162

00:26:37.433 --> 00:26:48.683

We have been given approval by the administration to reallocate that 5.4M dollars. So we know we had a lot of provide. So we have done that and we've done it based off the same allocation. We did the 1st time.

163

00:26:48.683 --> 00:26:59.544

So, that sets aside about 621000 dollars for our day, have an employment providers and then the remainder of that 5.4M, I cannot do math in my head quickly. Right now we'll go to the be available in an allocation format.

164

00:27:04.318 --> 00:27:13.374

For our group home providers, we were not allowed to change how we do the allocation we did ask. So I know there's gonna be some frustration out there.

165

00:27:13.523 --> 00:27:14.213

We did ask,

166

00:27:14.243 --> 00:27:20.453

that is what we were told at this time with that we are also going to open up the day,

167

00:27:20.453 --> 00:27:30.864

have an employment providers if they would rather invoice us for cost of overtime the same kind of things that we know they are experiencing with the residential providers are experiencing,

168

00:27:31.223 --> 00:27:34.854

they can choose the invoice option over the business interruption option,

169

00:27:35.304 --> 00:27:36.952

either options available to them.

170

00:27:36.983 --> 00:27:49.794

So, I just wanted to make sure that everybody understood that too. We have a very quick turnaround, so we have to have information back from

the providers by December. 1st, and then we have to get all of our stuff done on our end.

171 00:27:49.794 --> 00:28:04.644 I think, by December 5th, for processing through this round. The good news is, I think there's a lot that we can do with providers who submitted above their allocation already. And so our goal is to try to take care of that so that we don't need anything from providers. 172 00:28:04.644 --> 00:28:11.814 So, I know that provider relations will be reaching out to providers if they need additional information, but be. 173 00:28:12.118 --> 00:28:27.088 Be up in our business about this, because we got to get it done by December. 1st, and we want to get as much as this money back out the door again. Very grateful for the opportunity to re, allocate the funding that we did not spend the 1st time around. Then the next item. 174 00:28:27.088 --> 00:28:31.618 Please be paying attention to hospital status. 175 00:28:32.124 --> 00:28:32.963 We're hearing, 176 00:28:33.114 --> 00:28:34.344 and this is across the board, 177 00:28:34.344 --> 00:28:37.314 and it's not just for individuals with developmental disabilities, 178 00:28:37.344 --> 00:28:46.403 but hospitals are at capacity or near capacity at this point and depending on the type of care you need,

00:28:46.433 --> 00:29:01.374

you may need to go to a different hospital that you're used to going to also we are hearing that discharges are happening rapidly and people are oftentimes uncomfortable with that because those are discharging set before they would have

180 00:29:01.374 --> 00:29:02.784 been taken a little longer,

00:29:02.784 --> 00:29:04.584

but hospitals need the bed space.

182

00:29:05.098 --> 00:29:17.608

So, we do have tools out there to help if I mean, and I understand being uncomfortable about supporting somebody with high medical needs, because that's that's, you know, we have some folks that are very good at that. But.

183

00:29:17.608 --> 00:29:31.104

Sometimes those things come up quickly and we cannot get everybody training the way. We think we need to train them, but just you need to be paying attention to your local hospital status. Um, and I just want to make sure you're, you're keeping track of that.

184

00:29:31.463 --> 00:29:40.223

So, I'm going to go look in the chat now and I'm going to turn this over to Andrew. I know that was a lot. And thank you for hanging with me. I don't usually talk for 30 minutes on this. So thank you so much.

185

00:29:42.598 --> 00:29:49.979

Okay, good morning. Everyone I'll take over. Well, I was looking at questions 1 thing that we've talked about in the past.

186

00:29:49.979 --> 00:30:01.648

Is that we have been asking CMS about extending the appendix K waiver and then some portions of our 1135 waiver so far we have not been allowed to do that.

187

00:30:01.648 --> 00:30:16.378

Although they have been having internal discussions at the CMS level about the extension with the governor's declaration. Yesterday we went ahead and pose that question to CMS again. And they responded to us actually, while we were on this call here.

188

00:30:16.378 --> 00:30:22.648

That they are sensitive to the increasing numbers across all the States, and they are actively looking at step.

189

00:30:22.648 --> 00:30:31.378

Um, as they approach the January 26 end date for many of their appendix case again across the nation, and so they are going to follow up with.

190

00:30:31.378 --> 00:30:45.929

Follow up with us with some guidance as soon as they have that available. So just wanted everyone to know that we are in constant contact with CMS on trying to get that extension. Then the other thing is, we have those 2 waivers waiver amendments that we've submitted to CMS for.

191

00:30:45.929 --> 00:30:53.249

The duplicated participants, and then for the service reduction, they are still reviewing those.

192

00:30:53.249 --> 00:30:57.209

And we'll get back to us with some questions, hopefully in the next week or so.

193

00:30:57.209 --> 00:31:01.588

And then for the actual renewals for the comprehensive and community support waivers.

194

00:31:01.588 --> 00:31:12.538

Those are under a department of social services review, still as we speak. And so as soon as they finish that process and no health net, we'll be able to post those for public comment.

195

00:31:12.538 --> 00:31:18.989

And that is all I have, I don't know if we have file. Did you want to go back to questions or do you want to turn it over to Wendy?

196

00:31:22.618 --> 00:31:35.784

We're internal Rebel for questions. Yeah, thank you. I was like, wait, I got on mute and if that happens. So there is only really 1 question here, and it's kind of a timeline kind of a statement, and it's about.

197

00:31:36.084 --> 00:31:44.634

So tcm's are not considered patient base and health care workers. I get that you are doing our activity that involve working with individuals.

198

00:31:44.874 --> 00:31:53.243

However, when we're talking patient centered, health care workers, we're talking about people that are helping with activities of daily living. Okay.

199

00:31:53.273 --> 00:32:07.044

So, if you're not toileting, if you're not bathing, if you're not doing those things right now, we can't move you up in the category and it's all about volume of supply available. Okay.

00:32:07.044 --> 00:32:17.034

And I get it's frustrating, but I do yes, we do. We do require support coordinators to make face to face contact if there's health saved year. Well, being concerned.

201

00:32:17.453 --> 00:32:22.403

And, and I understand that and we need them to continue to do that.

202

00:32:23.548 --> 00:32:31.979

But there are community testing options out there. They're, I mean, that it's just where we're at right now. It's a volume issue is what it is.

203

00:32:32.243 --> 00:32:46.193

Okay, and moving I, and thank you Sarah for posting that you had difficulty getting a person I mean, we're hearing this all over the state, we're hearing this for our state operated facilities also. So this is this is real for sure. Okay.

204

00:32:46.403 --> 00:32:49.913

Moving on to, I believe Wednesday of next.

205

00:32:52.614 --> 00:33:03.054

Hi, thank you. Good morning. Everybody, and I just wanted to be real brief to to remind people that the options for them to modify.

206

00:33:03.054 --> 00:33:17.844

The residential situations is still out there it's covered under our appendix pay if not. I know it was real effective for folks to consolidate homes or or staff moved in, or they wouldn't homeless staff, or went home with family.

207

00:33:18.263 --> 00:33:23.364

So, those are options, but also wanting to let, you know, that if you have thought of other.

208

00:33:23.669 --> 00:33:37.523

Ideas that would really help you that are currently kind of outside the bounds of of what you think we can currently do, please contact your PR representative and let them know about your circumstances.

209

00:33:38.544 --> 00:33:48.894

If you are really your agency is really stressed with staff ratios and having difficulty, and are concerned that you might need to give notice on folks.

00:33:48.894 --> 00:33:54.324

Perhaps if you're struggling with ratios, please contact your representative.

211

00:33:54.324 --> 00:34:06.713

And we're all putting our heads together to try to identify how we can help provide overcome some of these obstacles and come up with some different things that maybe we haven't tried yet.

212

00:34:06.743 --> 00:34:12.563

And so if you already have those ideas and said, if I could only do this.

213

00:34:12.958 --> 00:34:24.208

It would help so please let your PR. Rep, no. They in turn will let us know. And we will get together and figure out if there's a way that we can make it.

214

00:34:24.208 --> 00:34:36.054

Um, work make it okay if we need to do another appendix K, whatever we need to do, but we are looking for those good ideas from you too, because they're going to more likely come from you, then they're going to come from us.

215

00:34:36.773 --> 00:34:49.224

So just please don't hesitate to reach out to your regional office if you are an agency or provider that is really under extreme stress. And you're worried about what you're going to do we want to try to help you.

216

00:34:49.943 --> 00:35:04.884

We know these are extraordinary times and it's not a reflection on you or planning or or your ability to operate your agency. These are just extraordinary times. So please reach out. Let us help if we can.

217

00:35:06.358 --> 00:35:14.878

And that's really all I wanted to to kind of touch base with you guys on. So I will turn it over to  $\mathop{\rm Kim}\nolimits.$ 

218

00:35:18.563 --> 00:35:18.923

Thanks,

219

00:35:18.923 --> 00:35:19.253

Wendy,

00:35:19.554 --> 00:35:34.434

I really didn't have anything specific just to piggyback on to bounce federal quickly earlier in regards to what we're seeing with hospitalization capacity right now just continue to please use the resources that you have available reminder station and the services are still

221

00:35:34.434 --> 00:35:41.034

available and there's opportunities for telehealth telemedicine if you're in need of brainstorming resources,

222

00:35:41.034 --> 00:35:41.454

etc.

223

00:35:41.483 --> 00:35:45.684

Please reach out to your regional office. They can be a resource to everyone right now.

224

00:35:46.523 --> 00:35:59.123

That's all I have. All right. Thank you. Can there's a couple more questions then, Chad I'm going to address 1. 1. will there be an extension of station empty? I don't know the answer to that. At this time.

225

00:35:59.423 --> 00:36:07.583

What I know is that we, everybody wants us to be able to extend station and B, so it's including station and D. so we're looking at this.

226

00:36:07.918 --> 00:36:21.204

4 different ways at this point. I know we're gonna have a call today with the National Association to try to figure out how we could maybe get station empty covered as a Medicaid waiver service and I know that's something. That would be very much interested in also.

227

00:36:22.134 --> 00:36:35.213

But that's the process you have to go through and that takes days. And then we're also talking directly with station empty folks, because I think they're willing to help us if, if we've got to wait 2 weeks or 3 weeks before we know the answer to something on the funding side. So.

228

00:36:35.728 --> 00:36:49.498

I cannot tell you all I can tell you is everybody the administration everybody likes the outcomes are seeing from station especially right now and it's going to be really difficult for anybody to even get into a doctor at this point.

00:36:49.498 --> 00:37:02.278

So, you know, you're not urgent care is probably not your 1st choice, or shouldn't be your 1st choice, especially in certain parts of the state because of all the people that are there just to get tested for. So.

230

00:37:02.278 --> 00:37:16.554

Please be using station empty right now, because the more use we have a station MV, the easier it is to sell the station empty product, but we're really having good luck with selling it. It's just they gotta find the funding for it. And that's what, and we're trying to make it cheaper.

2.31

00:37:16.554 --> 00:37:22.974

We've got on why it saves us money. People even are very supportive of just the.

232

00:37:23.248 --> 00:37:37.463

The anecdotal side of how much easier it is for providers for families to use station empty versus trying to go to a doctor. So it's very well received. The other question we have right now is our job coach is included in the 1, a class that they are providing in person services.

233

00:37:37.463 --> 00:37:49.943

Also, I'm going to say, no, at this point, when we are talking patient facing healthcare workers, we're really talking about those people that are helping with the, and as a provider, you can make that decision.

234

00:37:50.278 --> 00:38:03.773

To try to get your job coaches included in the category of 1 a but again, remember, we're looking at 167000 doses coming to state of Missouri on the 1st, go around and we're looking at an estimate of 500000 health care workers and I can promise you.

235

00:38:03.773 --> 00:38:15.744

They did not include job coaches in that when they were coming up with that 500000 number they're looking at people with job titles. Like they're looking at. You. Remember we kind of talked about this in the past people with job titles, those kind of positions.

236

00:38:15.744 --> 00:38:28.164

So, I just want I want you to be aware of that, but as a V, and I don't feel like you should try, you need to try to get them in the 100 category. We're not gonna I mean, I don't make that determination.

237

00:38:31.349 --> 00:38:41.514

Um, but I, I just based on the conversations we had yesterday, they're looking at those people that are actually just delivering that that direct level of care on a daily basis.

238

00:38:42.054 --> 00:38:49.525

So, I think Thank you guys, thank you for sticking with us for an hour and 10 minutes today, or a half or 40 minutes. Sorry.

239

00:38:49.800 --> 00:39:02.849

Today I know we've put a lot of information out there. I promise we will keep talking about this information so that you are more comfortable with it. Of course, you know, you can send us questions and stay safe.

240

00:39:02.849 --> 00:39:09.239

Good luck and we'll keep we'll keep pushing everything out that we can. Thank you guys for all. You're doing have a good weekend. Good. Bye.