

WEBVTT

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00:00:00.000 --> 00:00:08.425

Morning everyone, I would like to thank you for joining us on this Friday morning. Just a couple reminders. Replays.

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Remember that when you submit questions to submit those to all panelists that way, all of our presenters have an opportunity to see that question. That has come in and we can address that accordingly. The 2nd piece is I know that.

3

00:00:23.245 --> 00:00:37.645

Sometimes I get messages and people say, oh, my goodness in mind the only 1 on here. No, I promise you're not right now. We have 232 folks and there are others still rolling in. So you are not on here alone. We do have a really nice turn out today.

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00:00:37.645 --> 00:00:41.784

So with that, I will go ahead and turn it over to Dr. SaneBox.

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00:00:43.619 --> 00:00:50.429

Hey, buddy.

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00:00:50.429 --> 00:00:55.170

1 of the things I want to talk about today.

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00:00:55.170 --> 00:01:04.439

Is the is the photos recommendation by CDC.

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And Department of health and senior services, there is a document.

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00:01:09.120 --> 00:01:16.260

Which, which we'll talk about, what who are the individuals.

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00:01:16.260 --> 00:01:19.439

Who are eligible.

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00:01:19.439 --> 00:01:23.099

To get the, the shot.

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00:01:23.099 --> 00:01:28.439
So this is the information that came out.

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00:01:28.439 --> 00:01:36.810
From on August, 17, from the health and Department of health and senior services and I know there are a lot of questions.

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00:01:36.810 --> 00:01:41.040
Regarding, uh, for the ones who would be eligible to get.

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00:01:41.040 --> 00:01:48.510
To get the 3rd tells, give me 1 moment while I pull up the document on my end as well.

16
00:01:50.670 --> 00:01:54.359
So this is a recommendation.

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00:01:54.359 --> 00:02:01.530
Um, far who's gonna get it 1, is that if you have a medical condition.

18
00:02:01.530 --> 00:02:06.510
Are a combination of an immuno, suppressive medication treatment.

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00:02:06.510 --> 00:02:12.930
But it also says not including so these are some of the things that I'm going to go through in order.

20
00:02:12.930 --> 00:02:17.819
But not including meaning that, in addition to this that I'm going to talk about.

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00:02:17.819 --> 00:02:23.490
If there are other conditions that the doctor and the physician beliefs.

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00:02:23.490 --> 00:02:27.719
Would meet criteria for them to give the to DOS.

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00:02:27.719 --> 00:02:32.280
Then they would a little bit of background as why.

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00:02:32.280 --> 00:02:36.629
Cdc, and and if they had recommended a dose.

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00:02:36.629 --> 00:02:40.199

Is because that is some studies that have shown.

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00:02:40.199 --> 00:02:45.840

That the effect of the 2 things have shown to the studies have shown were number 1.

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00:02:45.840 --> 00:02:54.300

Some individuals with immunocompromised conditions, such as those who have had transplant or taking medication, the separate immunity.

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00:02:54.300 --> 00:02:59.009

They do not mount the same amount.

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00:02:59.009 --> 00:03:05.909

Of antibody response that a person without those conditions does. So how do they know that.

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00:03:05.909 --> 00:03:14.580

They are tested the antibody level so basically, when they get the shot in the arm, um, the body produces.

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00:03:14.580 --> 00:03:21.389

In response to that shot Andy bodies in the body that will protect the body against.

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00:03:21.389 --> 00:03:26.759

The viable invasion, or even if it invades it, it it will fight it.

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00:03:26.759 --> 00:03:30.659

So that is the antibodies antibodies are those that are.

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00:03:30.659 --> 00:03:34.409

Produced by the body to fight the virus.

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00:03:34.409 --> 00:03:41.370

So, this antibody production is very important after vaccination, because that is how you protect your body.

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00:03:41.370 --> 00:03:53.335

From the ill effects of the virus, which can cause pretty serious side effects, which can cause pretty serious illness. So this protects it. It's like a is really important that the body produces the antibodies.

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00:03:53.724 --> 00:04:02.425

So, research has shown that individuals within our compromised conditions did not their bodies did not produce the same amount of anti bodies.

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00:04:02.669 --> 00:04:12.509

That a healthy individual body produced so there was 1 reason they thought, well, those who have immunocompromised conditions should get a dose.

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00:04:12.509 --> 00:04:18.569

Another reason is that they have found that, especially with Pfizer.

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00:04:18.569 --> 00:04:27.329

That, as the period went on, for example, when they were in a month 1, there's a little decrease in it and the antibody level.

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00:04:27.329 --> 00:04:31.319

Month to say, even a slight decrease a few percentage points.

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00:04:31.319 --> 00:04:37.889

Antibody decrease, and then as event on the month, 3 is dropped even further.

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00:04:37.889 --> 00:04:51.803

So, for month 1, it was 90% for Pfizer month. 2 is 85% and then month 3 was 78%. So there's a few percentage points drop in the antibody level with Pfizer. So, based on these 2 information.

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00:04:55.019 --> 00:05:01.319

Cbc, and the FDA have come up and recommended that they give.

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00:05:01.319 --> 00:05:06.478

And also the 3rd dose of the backseat.

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00:05:06.478 --> 00:05:10.798

So, let's look at what conditions they are.

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00:05:10.798 --> 00:05:13.798

And I'm going to go through them and they're on the screen.

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00:05:13.798 --> 00:05:21.059

Number 1 is those who, uh, of immunocompromised you to solid organ transplant? What does that mean?

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00:05:21.059 --> 00:05:26.069

Like, a kidney transplant, a liver transplant that is a solid organ transplant.

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00:05:26.069 --> 00:05:31.139

And any time you take, you have a kidney transplant or a liver transplant.

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00:05:31.139 --> 00:05:37.139

Individuals prescribed immuno, suppressive medication. So the, the body does not.

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00:05:37.139 --> 00:05:42.178

Reject the target the number 2 is if somebody's getting treatment.

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00:05:42.178 --> 00:05:52.019

Slaughtered tumor a solid tumor, or have blood cancer so it just leukemia or any other kind of blood cancers.

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00:05:52.019 --> 00:05:55.588

The 3rd 1 is if somebody has received.

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00:05:55.588 --> 00:06:03.928

A C. R. T. cell auto or something of a stem cell transplant as a treatment for their medical condition.

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00:06:04.673 --> 00:06:19.254

Number 4 is they have a primary immunodeficiency condition, and these are some examples of it that means the doctors have told them that they are not the body. It does not produce a normal immune response.

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00:06:19.468 --> 00:06:25.559

If they already know for whatever reason, they, they, they just don't know the same.

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00:06:25.559 --> 00:06:36.028

In a response so there are some medical conditions. The next 1 is if someone has advanced or tweak and infection.

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00:06:36.684 --> 00:06:51.564

Entry does the word entered in infection and there are other the next 1 is when you have active treatment with high those corticosteroids, and there may be compromised conditions that may need a high dose.

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00:06:52.408 --> 00:06:56.668

Steroids, a lot of diseases where.

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00:06:56.668 --> 00:07:08.278

The treatment is with corticosteroids or better, and other medications, such as humera, or any of those other medications that suppressant immune response has rheumatoid arthritis.

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00:07:08.278 --> 00:07:22.103

Is considered 1 of those kind of medical conditions and and you are on high issue, the treatment of rheumatoid arthritis could be you are high those corticosteroids or on a immune suppressing medication.

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00:07:23.548 --> 00:07:33.358

Or any of the medications have changed the immunity or separate statement or modeling immunity, then those individuals will also qualify.

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00:07:33.358 --> 00:07:40.769

Okay, so it's very technical the language in here, but basically, if you had an auto human condition.

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00:07:40.769 --> 00:07:44.249

Um, examples that arthritis.

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00:07:44.249 --> 00:07:57.809

And there are several of these autoimmune conditions, crohn's disease arthritis collide is several of them. And if you suffer from any of these conditions, are they individually are caring for.

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00:07:57.809 --> 00:08:04.168

In your in your care, maybe an individual with intellectual disability who's under your care?

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00:08:04.168 --> 00:08:07.978

And they have these medical conditions, they own qualify.

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00:08:07.978 --> 00:08:21.478

For the 3rd dose. Okay now, again, the key word is not limited to. So, let's say the physician believes that you have not it doesn't fall into all these categories, but still have.

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00:08:21.478 --> 00:08:27.298

Something they believe that you may be moderately, a signal, even a compromise then.

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00:08:27.298 --> 00:08:31.168

You know, you the doctor can decide and recommend.

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00:08:31.168 --> 00:08:44.788

A, 3rd dose now, if your individual living in the community, and how can you go get the dose pretty much at this time all the places CBS pharmacy.

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00:08:44.788 --> 00:08:50.428

A walderings pharmacy or any, even your doctor's offices. Any of the places that are capable, or.

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00:08:50.428 --> 00:08:56.609

Able to provide the vaccination. The 1st, and 2nd bills can also give the dose.

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00:08:56.609 --> 00:09:06.869

So, what do you do, you just call them and say, hey, I need a 3rd dose and many of them. I think I heard from what somebody yesterday they said, they just called CBS pharmacy.

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00:09:06.869 --> 00:09:10.649

And basically, the person said, are you in for your first second, third.

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00:09:10.649 --> 00:09:17.339

So does that simple so you can just go in there and there is a self registration form.

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00:09:17.783 --> 00:09:32.183

Where you just self test saying that you do have a mental compromised condition, or the person you're taking and has an imminent compromise conditions of self a destination you don't need any evidence. No documentation. Nothing is needed. You just say that you have the condition.

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00:09:32.458 --> 00:09:41.609

And they will allow you to get the photos. So eventually get the 3rd, the 3rd should occur. At least 28 days. Should.

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Be between your 2nd dose and dose.

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00:09:45.298 --> 00:09:51.658

okay so at least twenty eight days have you had a second dose and less than two weeks then you want to wait another two weeks

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00:09:51.658 --> 00:09:56.938

So, but if it's any time more than 28 days, it could be 2 months, 3 months. It doesn't matter.

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00:09:56.938 --> 00:10:01.259

Um, but it is at least 2 days before your.

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00:10:01.259 --> 00:10:05.788

Before you before you are after your 2 doses.

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00:10:05.788 --> 00:10:13.019

So, if they can get and what can, what can you get? Like, for example, if you have 2 doses of Pfizer.

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00:10:13.019 --> 00:10:17.578

You can get you a 3rd, does Pfizer. If you've got 2 doses of Madonna.

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00:10:17.578 --> 00:10:23.969

You can get 3rd, does someone down. Now the only thing is J and J has not.

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00:10:23.969 --> 00:10:38.278

Spoken about what needs to be done, you know, whether they are going to come up with a boosted dose or not. We do not know that. So right now those individuals have had the J. J. vaccine at this point.

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00:10:38.278 --> 00:10:42.899

There is no recommendation to get another dose of GE vaccine.

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And they actually discourage individuals to mix different. Um.

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00:10:50.188 --> 00:10:58.048

You know, is not given now, there is a statement though, in this in this particular document that you're looking at.

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00:10:58.048 --> 00:11:04.859

Where it says that if the backs in product given for the 1st, 2 doses is not available.

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00:11:04.859 --> 00:11:08.158

Is unknown either.

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00:11:08.158 --> 00:11:21.509

19 product can be given. Okay. So, um, so so, for example, if you get Pfizer and or you didn't know what they got, they didn't, you didn't know what you got the latest Pfizer.

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Either Pfizer, or you can get, or if it is not available in your place, like you got Pfizer, but the Pfizer is not available. They can give you a dulcimer. Diana.

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00:11:30.479 --> 00:11:33.808

But it's preferred you get the same.

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00:11:34.583 --> 00:11:48.803

Dose is preferred that you get the same vaccine as your turn. Does somebody have raised a good question about Jay? Can we get another? Just go get Pfizer Pfizer the.

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00:11:49.109 --> 00:11:53.369

The CDC does not as not provide any recommendation.

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At this point, but I would say, talk to your doctor because there are some studies that have shown that mixing the vaccines has helped produce better antibody response. There are some scientific data out there.

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00:12:07.438 --> 00:12:13.168

But, um, the CBC has not recommended anything. So what I would recommend as you talk to your doctor.

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00:12:13.168 --> 00:12:16.528

Or the physician, if you are taking care of somebody.

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00:12:16.528 --> 00:12:23.068

Intellectual disability, individual, intellectual disability, then that's a conversation to be had the physician.

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00:12:23.068 --> 00:12:27.509

Caring for the individual, because at the present time.

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00:12:27.509 --> 00:12:34.408

Um, CBC and the Department of health and senior services is not recommending that.

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00:12:35.548 --> 00:12:41.428

Any questions I'll be glad to take questions. Let me.

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00:12:41.428 --> 00:12:47.129

Open up the chat hi. Thought, can you read those questions or.

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00:12:47.129 --> 00:12:51.389

The check question, so we can answer.

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00:12:51.389 --> 00:12:55.889

Absolutely, we have.

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00:12:55.889 --> 00:13:08.489

Someone said if a 1st, and you may have touched on some of these a bit, but I don't want to miss any of a person is immunocompromised, but not in the categories listed. Do they need written prescription to get the phone?

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00:13:08.489 --> 00:13:14.609

No, basically you can walk into any place that gives vaccination currently.

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00:13:14.609 --> 00:13:22.918

Sign the self at the station form. Basically you are saying, you have a condition, you meet the criteria, or you just sell a test.

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00:13:22.918 --> 00:13:26.788

And they give it to you, so you don't need it off this letter or anything from the doctor.

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00:13:26.788 --> 00:13:34.558

Okay, and then we have, are you recommending that everyone gets a booster 8 months after their 2nd shot?

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At this time that has not come out of.

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00:13:39.509 --> 00:13:53.428

And Department of health and senior services, it is in the works, they are talking about it. I think the, um, um, the organization, because the organization that makes recommendation.

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00:13:53.428 --> 00:13:59.849

On immunization protocol they are meeting sometime I think it's August 25.

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00:13:59.849 --> 00:14:04.948

And if that passes, then, I think by September.

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00:14:04.948 --> 00:14:10.948

20 individuals, maybe maybe eligible to get the 3rd dose.

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00:14:10.948 --> 00:14:14.668

Just automatically after 8 months of the 1st.

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00:14:14.668 --> 00:14:18.719

So, at this point, that has not been.

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00:14:18.719 --> 00:14:22.859

Promoter that has not been given in writing by CDC.

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00:14:22.859 --> 00:14:25.948

All the Department of health and senior, but.

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00:14:25.948 --> 00:14:29.009

That is in the works once we have a final.

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00:14:29.009 --> 00:14:33.178

Decision and a recommendation by CVC, then we can do it.

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00:14:33.178 --> 00:14:38.458

But until then just hold until September 20th for that.

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00:14:39.538 --> 00:14:52.828

We have sensitive suggested that amino compromised individuals receive a certain dose. Does the efficacy of the vaccine decreased every month and will those individuals need to get a 4th booster?

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00:14:52.828 --> 00:14:57.958

We don't know that answer. I wish we knew.

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00:14:58.283 --> 00:15:13.224

Because this is again a new virus. We don't know much about it. We are learning as we as everybody is experiencing it. The scientific community is learning about it. So, um, it would be great for people to really hope for the best when we give the vaccine.

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00:15:13.224 --> 00:15:14.484

And say how long it last.

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00:15:14.698 --> 00:15:20.609

But and again, there are 2 different things to remember. That is the lab data meaning.

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00:15:20.609 --> 00:15:34.798

They take somebody's blood or serum after they may not have been immunized and then they test it against these little viruses and see how much utilization occurs and the lab. There's 1 kind of scientific data.

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00:15:34.798 --> 00:15:49.793

And then the other kind of signed it, the data is observation when it in real life data what happens to individuals who come out in the community with all kinds of medical conditions, how does it work? So, sometimes it's a discrepancy between the lab data and the.

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00:15:50.068 --> 00:15:53.548

Uh, community data and the community data, we can only.

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00:15:53.548 --> 00:16:04.769

Really have an understanding of community analyst when it is in the community for for 6 months or longer. So it is something that is monitor closely and will be studied closely.

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So, at this point, we do not know it may or may not. Um, so we just have to wait to get more guidance on that. But there is definitely some indication, at least with Pfizer.

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00:16:17.999 --> 00:16:23.788

That there is a decline, maybe a few percentage points is not a lot. It's like 5%.

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00:16:23.788 --> 00:16:28.469

Decline after several months again, it may not be for everybody.

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00:16:28.469 --> 00:16:32.879

You know, again, it's but that is a decline.

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00:16:34.259 --> 00:16:41.729

okay someone asks is the best or different than just getting a third shot why do they call it a baster

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00:16:41.729 --> 00:16:47.399

They shouldn't, they should not be calling it them booster. It's a 3rd shot. It's basically.

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00:16:47.399 --> 00:17:01.408

I mean, anything about just boost the immunity that the body's already produced and respond to the 1st, to the 1st 2 had had some response, but there's not enough in the compromise individually.

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00:17:01.408 --> 00:17:06.509

The 3rd also go and boost that immunity by they called the.

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00:17:06.509 --> 00:17:11.219

But I see it as both an interchangeable you could call in the booster or the 3rd dose.

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00:17:11.219 --> 00:17:21.148

Okay, and I think that address is pretty much the next question that came in that is, does the vaccination based or have more effects toward the variance.

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00:17:21.148 --> 00:17:28.108

In the book, it actually the more antibodies you have in your system, it can fight.

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00:17:28.108 --> 00:17:31.888

The variance is that 100% match to the very end.

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00:17:31.888 --> 00:17:35.699

We do not know what do we do know is that.

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00:17:35.699 --> 00:17:41.999

Even though individuals are still testing positive or vaccinated testing. Positive are.

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00:17:41.999 --> 00:17:50.124

They are not even the delta they're not ending up in the hospital beds as much the rate of individuals hospitalized and,

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00:17:50.124 --> 00:17:50.483

um,

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00:17:50.663 --> 00:17:55.644

and and dying from coal in vaccinated numbers are much much lower,

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00:17:56.513 --> 00:17:57.534

significantly lower.

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00:17:57.534 --> 00:18:00.473

I would say less than I think 90% of those who are in the hospital.

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00:18:01.378 --> 00:18:04.739

Or on IC bids are vaccinated.

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00:18:04.739 --> 00:18:07.798

Say does protect they build from.

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00:18:07.798 --> 00:18:11.429

Getting seriously ill and ending in the hospital and death.

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00:18:11.429 --> 00:18:18.328

But when he comes to field protection, he said, 100% match for Delta um, at this point.

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00:18:18.328 --> 00:18:21.598

We know is it adds it gives production and it.

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00:18:21.598 --> 00:18:33.538

Stops you from, because obviously you okay, next question is, have there been a study on the booster shot to determine the side effects.

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00:18:33.538 --> 00:18:43.199

It's the same. It's exactly the same though. So, if you, I think at this point, I have, I don't remember exactly, but it is point 3 mode for.

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00:18:43.199 --> 00:18:47.788

Or that end point 5 animal for Pfizer I think it could be the other way around.

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00:18:47.788 --> 00:18:51.628

It's the same vial. It's the same dosage.

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00:18:51.628 --> 00:19:02.759

It is everything is data. Everything is same more studies we have has been given that the dose, especially the studies have come up and induces immunocompromised conditions as fact, especially those.

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00:19:02.759 --> 00:19:08.278

Who had transfer and renal transplant individuals they found that when they did get the 3rd.

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00:19:08.278 --> 00:19:12.118

Their, um, their, their body was able to produce more.

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00:19:12.118 --> 00:19:15.388

And the bodies and sustainably higher.

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00:19:15.388 --> 00:19:23.038

You know, just kept the level up, especially in transplant individuals. So that was the reason behind.

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00:19:23.038 --> 00:19:31.199

This current recommendation from CDC so does the same Victor the same thing. So, if you.

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00:19:31.199 --> 00:19:36.239

Uh, you did okay for the 1st, 2 you should be okay for the 3rd 1 as well.

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00:19:36.239 --> 00:19:42.898

Again, do we have long term data and how much longer this antibodies are going to last after the 3rd, those.

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00:19:42.898 --> 00:19:52.378

We don't know that information we just have to really rely on science and have you had to give that time so that the scientists that correct.

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00:19:54.054 --> 00:20:05.513

Okay, someone asked if you had coven, let's see if you had both doses of the vaccine, would it be necessary to get a booster or 3rd shot?

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00:20:05.574 --> 00:20:19.733

Is your system protected more because you've had both of these things. Okay. So, what we're finding is that individuals with cobit again, they're already starting to have dropped even more drastically.

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00:20:20.219 --> 00:20:27.358

Then that from the vaccination, because the vaccination produce is several fold more.

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00:20:27.358 --> 00:20:31.469

Antibodies and the CO infection itself produce, especially those.

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00:20:31.469 --> 00:20:35.818

Who had asymptomatic or mild carbon infection the 1st, time around.

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00:20:35.818 --> 00:20:39.239

They a, we are finding a lot of infection.

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00:20:39.239 --> 00:20:43.888

So, that is not protecting the individuals right now.

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00:20:43.888 --> 00:20:48.838

So, if you already had a corporate infection, let's say you had covered and.

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00:20:48.838 --> 00:20:54.479

But and, um, last year in 2020, and then you had vaccinated.

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00:20:54.479 --> 00:21:02.429

Then that helps increasing immunity a little bit more both together and then taking that 3rd dose will stop it even for the.

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00:21:05.608 --> 00:21:11.878

All right, I think that is all the questions we have at the moment.

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00:21:13.019 --> 00:21:19.828

So, you know, the reason I yeah, go ahead.

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00:21:19.828 --> 00:21:23.638

Anybody have a question.

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00:21:23.638 --> 00:21:27.118

I think we're good.

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00:21:27.118 --> 00:21:36.989

All right, so it's important that individuals that are in the care ID individually suddenly the individuals in the care.

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00:21:36.989 --> 00:21:41.038

Of community providers that you particularly take a look at.

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00:21:41.038 --> 00:21:44.788

Conditions that they have, and if they may qualify.

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00:21:44.788 --> 00:21:49.858

For the, um, for the the dose, and if they do, please, do.

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00:21:49.858 --> 00:21:57.628

Make sure that they get them. The important thing to remember with vaccination is that.

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00:21:57.628 --> 00:22:02.219

But most of the individuals and intellectual disability, they don't make the decision for themselves.

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00:22:02.219 --> 00:22:07.229

They have a caregiver or a guardian who makes a decision. So it's very important.

193

00:22:07.229 --> 00:22:18.239

Then we provide the information, the Guardian needs so that they can make an informed decision when it comes to vaccination. As I said earlier. I don't know if anybody had heard me say this.

194

00:22:18.239 --> 00:22:24.689

The amount of people those with intellectual disability are dying at a much higher rate.

195

00:22:24.689 --> 00:22:35.909

Uh, from covert and having long conflict, more complications from cold than those without intellectual disability there was a huge study done in England.

196

00:22:35.909 --> 00:22:41.098

And they came up that having intellectual disability itself, a risk factor.

197

00:22:41.098 --> 00:22:44.189

To have a negative outcome from cold.

198

00:22:44.189 --> 00:22:51.808

And we know that, I mean, the number of individuals that Id industrial disability, who have not been.

199

00:22:51.808 --> 00:22:58.378

Vaccinated is very high, and I can tell you in the last, just looking at the data.

200

00:22:58.378 --> 00:23:03.328

In the last month, and I've seen at least the last 2 to 3 weeks, and I have seen.

201

00:23:03.328 --> 00:23:12.868

four individuals who had passed away with intellectual disability had passed away and all four of them are vaccinated and under the age of thirty five

202

00:23:12.868 --> 00:23:17.128

So, it's really hitting really young people.

203

00:23:17.128 --> 00:23:28.409

And who are vaccinated so, this is really a wake up call for the intellectual disability community to see what can we do to prevent debts among.

204

00:23:28.409 --> 00:23:40.828

Our our residents and the other thing is also if I live in a home, I have control over who comes inside my home, how I can protect myself. And what I can do.

205

00:23:40.828 --> 00:23:45.058

Unfortunately, those with intellectual disability are at the mercy of the staff.

206

00:23:45.058 --> 00:23:51.058

So they are if there's more community transmission going on.

207

00:23:51.058 --> 00:23:55.528

Staff live in the community and they can easily transmit within the.

208

00:23:55.528 --> 00:24:03.298

Within their homes, so they have really no protection. The 3rd thing is many of those with the intellectual disability at least if they are on a moderate.

209

00:24:03.298 --> 00:24:07.558

Intellectual disability, or or or how many of them cannot wear a mask because.

210

00:24:07.558 --> 00:24:16.679

They, it's not safe for them to wear a mask higher functioning those within the, because they can better mask and.

211

00:24:16.679 --> 00:24:22.528

You know, those are working, we're able to function higher or able to better mass, but without them, they don't. So.

212

00:24:22.528 --> 00:24:27.179

Yeah, there's so many mitigation strategies that we cannot use for intellectual disability.

213

00:24:27.179 --> 00:24:36.388

So, vaccination really makes a huge difference for this population and staff getting vaccinated and makes a huge difference because that way they are protecting.

214

00:24:36.388 --> 00:24:41.308

The resident as well and masking I cannot stress the importance of masking.

215

00:24:41.308 --> 00:24:42.413

In the group homes,

216

00:24:43.403 --> 00:24:43.854

you know,

217

00:24:43.884 --> 00:24:48.384

just when you mask that you are less likely to get the,

218

00:24:49.284 --> 00:24:56.723

this is the anything that virus only exists comes out of a person from the nose and mouth.

219

00:24:56.999 --> 00:25:04.409

If you mascot, there's no way it's going to get out so it's very important that people mask, especially staff will work in the.

220

00:25:04.409 --> 00:25:13.469

Work with intellectual disability and vaccination, it cannot stress the importance of that. Any other comments or questions from the Chad.

221

00:25:14.153 --> 00:25:26.933

1, other 1 is going to provide the opportunity for us to get the 3rd vaccination here at the office. If we want it. I'm asking as it would help us ensure that we have received the same dosage rate.

222

00:25:26.933 --> 00:25:30.203

We received last time get in touch with me.

223

00:25:30.538 --> 00:25:37.798

Let me know, and we can walk through it if you got I mean, if you have the thing is that the image has ability.

224

00:25:37.798 --> 00:25:45.088

To get them, I mean, our department of mental health deviation Department of behavioral health facilities, like Fulton.

225

00:25:45.088 --> 00:25:51.058

State hospital. St. Louis Louis slippery.

226

00:25:51.058 --> 00:25:55.618

Farmington, so these visiting medical center.

227

00:25:55.618 --> 00:26:01.108

the rest of the state cbm northwest they're getting rehabs they have this incentive

228

00:26:01.108 --> 00:26:05.939

All are vaccinate is so they can provide the vaccination.

229

00:26:05.939 --> 00:26:10.259

So, but you but the offices are not.

230

00:26:10.259 --> 00:26:21.898

So, the best thing would be that either if you send us how many vaccinations you need, or how it could be arranged, we can find a way to get you vaccinated within the state system.

231

00:26:21.898 --> 00:26:26.219

Or, I think vaccination is so much more available these days.

232

00:26:26.219 --> 00:26:29.338

You can just walk into a CBS pharmacy or a.

233

00:26:29.338 --> 00:26:35.788

Any any place and get vaccinated. So I think that'd be easier to do. If you if you're walking in an office.

234

00:26:35.788 --> 00:26:40.199

Versus a facility, but you can work in a facility, get in touch with your.

235

00:26:40.199 --> 00:26:55.074

With the administration and the facility in the office, and you've tried other methods to get the photos you meet the criteria, and you try to other ways, like a pharmacy and you're having struggle struggling to get it.

236

00:26:55.554 --> 00:26:57.894

Send me an email. We'll figure it out. We'll be out.

237

00:26:58.199 --> 00:27:09.898

Okay, I do not think that there are any other questions that have come in at the moment. All right.

238

00:27:09.898 --> 00:27:16.949

I will let the can you do the rest of the agenda? Thank you all.

239

00:27:16.949 --> 00:27:24.509

Thank you. Okay Thank you. This is Angie.

240

00:27:24.509 --> 00:27:27.628

I have a couple of updates to provide everyone.

241

00:27:27.628 --> 00:27:32.999

The 1st, 1 is that we did receive partial approval of our.

242

00:27:32.999 --> 00:27:36.749

Spend plan for the enhanced 10%.

243

00:27:36.749 --> 00:27:47.338

An email blast, and a posting will be going out from net soon, and then our division and we'll also follow up with an email blast to make sure that everyone sees that.

244

00:27:47.338 --> 00:27:52.318

Now, the partial approval from CMS that only qualifies Missouri.

245

00:27:52.318 --> 00:28:01.348

To receive the temporary 10% increase of the enhanced federal match. It's not yet an approval for claiming.

246

00:28:01.348 --> 00:28:08.939

Any federal financial participation so that's a lot of big words that basically, that means that they've approved for us to earn.

247

00:28:08.939 --> 00:28:13.169

Enhance federal match, but we do not have approval to claim.

248

00:28:13.169 --> 00:28:17.669

Any federal match on items that we've included in our plan.

249

00:28:17.669 --> 00:28:23.638

Cms has additional questions for Missouri for all of our departments Department of mental health.

250

00:28:23.638 --> 00:28:29.939

Health and senior services and social services and to get that full approval.

251

00:28:29.939 --> 00:28:34.439

Including implementation of rate standardization and the rate increases.

252

00:28:34.439 --> 00:28:39.028

Is conditioned upon us resolving those issues requested by CMS.

253

00:28:39.028 --> 00:28:42.298

And the 3 agencies were currently drafting responses.

254

00:28:42.298 --> 00:28:47.249

And to the CMS questions, and we're working to submit those as quickly as possible.

255

00:28:47.249 --> 00:28:52.288

Based on those outstanding items that we have, we're not expecting.

256

00:28:52.288 --> 00:28:55.528

Approval from CMS for at least another 30 days.

257

00:28:55.528 --> 00:28:59.578

So that does push back or anticipated timeline for the right adjustments.

258

00:28:59.578 --> 00:29:10.259

So, probably late September, sometime in October, but we will definitely keep you posted on that. And I will say that has scheduled a call for us to discuss.

259

00:29:10.259 --> 00:29:15.358

The rate standardization and the spend plan the 1st, week of September.

260

00:29:15.358 --> 00:29:19.439

We believe that we'll have more information after that call.

261

00:29:19.439 --> 00:29:24.028

We understand how frustrating this is for you for our providers.

262

00:29:24.028 --> 00:29:29.009

It's just as much as it is for us so please know that we are continuing to work hard.

263

00:29:29.009 --> 00:29:35.878

On this from our side, and then responding to CMS as their concerns as quickly as possible.

264

00:29:35.878 --> 00:29:39.719

So we will definitely keep you posted on how that moves forward.

265

00:29:39.719 --> 00:29:44.219

We also received approval on August, 13.

266

00:29:44.219 --> 00:29:47.398

For our 5th appendix K.

267

00:29:47.398 --> 00:29:54.749

A submission, and that was to add a new health assessment and coordination waiver service and all of our waivers.

268

00:29:54.749 --> 00:29:58.739

And that is to be effective July 1st, 2021.

269

00:29:58.739 --> 00:30:03.479

So, we are working on guidance and that we're going to send out to transition.

270

00:30:03.479 --> 00:30:08.278

People from using the current station Mt service to the new.

271

00:30:08.278 --> 00:30:16.888

Waiver service basically, it's it's gonna be the same same type of the same service, but we're just able to draw down federal match.

272

00:30:16.888 --> 00:30:22.679

For that, and it's part of our opinions K, waiver services with the hopes that we can eventually.

273

00:30:22.679 --> 00:30:29.398

Put it in permanently to our waivers, so be looking forward to that guidance that will be coming out as well.

274

00:30:29.398 --> 00:30:33.449

I think that is all the updates that I have today.

275

00:30:33.449 --> 00:30:38.068

So, I'm going to pass it over to Wendy. I think she has a few more for.

276

00:30:38.068 --> 00:30:41.219

Thing where you can you hear me Angie?

277

00:30:43.348 --> 00:30:46.618

Yep, I can. Okay thanks.

278

00:30:46.618 --> 00:30:54.148

I just want to go over the support coordination, monitoring guidance that went out and there's a few.

279

00:30:54.148 --> 00:30:59.848

Questions in the chat that I think that will relate to this so you might also have to.

280

00:30:59.848 --> 00:31:05.189

Send some more information to me in the E mail so that we can get more specific.

281

00:31:05.189 --> 00:31:11.459

But the support coordination monitoring guidance was not intended to change.

282

00:31:11.459 --> 00:31:19.588

Any monitoring schedule so, if you are, if you have someone on your caseload that gets an annual visit.

283

00:31:19.588 --> 00:31:23.818

They will still get an annual visit and that annual visit needs to be.

284

00:31:23.818 --> 00:31:32.669

Face to face, and they need to be seen if they get quarterly visits and 1 of those visits has to be face to face.

285

00:31:32.669 --> 00:31:38.878

Then you've got flexibility in there based on when they were seeing last face to face if it needs to be.

286

00:31:38.878 --> 00:31:44.278

This early visit needs to be in person, or if they need to be seen face to face.

287

00:31:44.278 --> 00:31:48.719

It is really guidance for our residential services.

288

00:31:48.719 --> 00:31:51.749

That require a monthly visit.

289

00:31:51.749 --> 00:31:58.259

A monthly face to face visit when we put counties or our notify the counties.

290

00:31:58.259 --> 00:32:02.848

Can observe a remote, only monitoring status.

291

00:32:02.848 --> 00:32:09.749

Those services for 2 months in a row can be remote.

292

00:32:09.749 --> 00:32:13.409

Can be virtual.

293

00:32:13.409 --> 00:32:20.969

But on that 3rd visit, so that you're not going more than 90 days without seeing a person face to face.

294

00:32:20.969 --> 00:32:27.749

So, I hope that helps to clear up some of the confusion around.

295

00:32:27.749 --> 00:32:41.398

The schedule of it, the intent is that no person that is supposed to be seen monthly you'll go more than 90 days without being seen in person all the other schedules.

296

00:32:41.398 --> 00:32:44.429

Already allow for.

297

00:32:44.429 --> 00:32:48.598

You know, there'd be a year before they're seen.

298

00:32:48.598 --> 00:32:52.528

But in that years time, you have to see them.

299

00:32:52.528 --> 00:32:59.308

Um, so just know when you come up upon that year, even if your county is in a remote only status.

300

00:32:59.308 --> 00:33:02.308

But it's it's time for that annual.

301

00:33:02.308 --> 00:33:10.078

Um, visit that needs to be in person if that is how the, the services regularly monitored and.

302

00:33:10.078 --> 00:33:22.439

Same with the quarterly, we have to see folks that support coordination is a very critical and crucial service in ensuring that our folks.

303

00:33:22.439 --> 00:33:28.709

Maintain their wellbeing, health and safety and so.

304

00:33:29.693 --> 00:33:43.973

Being able to see people face to face still is very, very important, and very critical and there are ways that we can do it face to face in the open air, but still see someone in person and be completely safe in doing the monitoring.

305

00:33:43.973 --> 00:33:47.963

If you're seeing them through a patio door or.

306

00:33:48.328 --> 00:34:02.969

Um, a window or something of that nature you are seeing them personally, you can lay eyes on them and you can somewhat see the environment and then do a visual tour of the home to see the environment.

307

00:34:02.969 --> 00:34:06.959

Aside from that, so I hope that that helps.

308

00:34:06.959 --> 00:34:10.648

To clear up some of the confusion around.

309

00:34:10.648 --> 00:34:17.818

That guidance again, not intended to change your monitoring schedule that doesn't change.

310

00:34:17.818 --> 00:34:21.509

Just the allowance of it being remote.

311

00:34:21.509 --> 00:34:27.418

And when it needs to be in person, and no, I should go more than 90 days and that's why we didn't want to say quarterly.

312

00:34:27.418 --> 00:34:39.688

Because if you went and saw someone the 1st, month of a quarter, and then the 3rd month of the following quarter, you would have more than 90 days in that time span before you solve them again.

313

00:34:39.688 --> 00:34:45.599

So, it's not 1 time quarterly that you have to see them once every 90 days.

314

00:34:45.599 --> 00:34:49.289

So, if there is still questions or confusion around that.

315

00:34:49.289 --> 00:34:55.619

Please put something in the chat or send it to the DD mail and.

316

00:34:55.619 --> 00:35:00.329

I will call you or we'll, we'll work through that, depending upon the.

317

00:35:00.329 --> 00:35:09.719

It wouldn't be a couple. There are a couple questions in the chat. If you have time at some point forward done. I just want you to know that they're there.

318

00:35:11.789 --> 00:35:21.838

Okay, so can we do in person visits to waiver case management only quarterly if they fall in between now.

319

00:35:21.838 --> 00:35:30.208

And September 30, I think the question is, have you seen them.

320

00:35:30.208 --> 00:35:37.079

During the case management, or if you are supposed to see them face to face quarterly.

321

00:35:37.079 --> 00:35:41.309

Then the question is, have you seen them in the last.

322

00:35:42.989 --> 00:35:49.588

90 days, when you do your next, when you're due for your next quarterly visit.

323

00:35:49.588 --> 00:35:53.668

If you had not seen them in the past 90 days, then.

324

00:35:53.668 --> 00:36:01.318

Then that visit needs to be in person for our needs to be in person. If each of your quarterly visits is supposed to be in person.

325

00:36:01.318 --> 00:36:05.909

Then they need to be in person because that is 90 days. That's your Max.

326

00:36:05.909 --> 00:36:10.199

But if it is a service that does not require.

327

00:36:10.199 --> 00:36:15.148

A face to face meeting quarterly, then you have flexibility.

328

00:36:16.378 --> 00:36:23.668

Can I see them in person at their home, but then go back to the office and complete the annual fee review paperwork.

329

00:36:23.668 --> 00:36:27.179

What 13? Yes, yes you can do that.

330

00:36:28.349 --> 00:36:32.818

Once every 90 days, just for residential.

331

00:36:34.949 --> 00:36:42.028

Yes, again the quarterly monitoring visits.

332

00:36:42.028 --> 00:36:46.559

If those quarterly visits are each supposed to be in person.

333

00:36:46.559 --> 00:36:51.179

Then they would need to be in person if.

334

00:36:51.179 --> 00:36:55.798

It's allowable for 3 of them to be over the phone.

335

00:36:55.798 --> 00:37:03.539

And 1 a year to be in person, and you need to be sure that that 1 a year happens in person.

336

00:37:03.539 --> 00:37:07.318

You have the flexibility on those other quarterly physics.

337

00:37:07.318 --> 00:37:15.059

Services aren't active. I think it's even more important to see them. Do you agree when you.

338

00:37:15.059 --> 00:37:23.818

Yes, absolutely. That's why we don't want for if you're only seeing them annually.

339

00:37:23.818 --> 00:37:32.878

We don't want that visit to be a remote visit. A virtual visit. It needs to be you need to see them. It needs to be in person.

340

00:37:32.878 --> 00:37:43.739

Absolutely agree. So, for those surfaces we need to see really do we need to go out and see them each quarter even if we have seen.

341

00:37:45.869 --> 00:37:54.748

Someone since April. 1st yes. This is updated guidance. So that, that 1st guidance where we talked about April 1st.

342

00:37:54.748 --> 00:37:59.699

Was to give guidance around just the timeframe.

343

00:37:59.699 --> 00:38:05.398

I think we said through August or 3, September that we were.

344

00:38:05.398 --> 00:38:09.509

Going remote, and now we've extended the remote.

345

00:38:09.509 --> 00:38:14.820

Monitoring guidance and so we've set a different parameter.

346

00:38:14.820 --> 00:38:19.739

So, that you can understand when do you need to see someone in person.

347

00:38:19.739 --> 00:38:25.349

Versus not seeing them, so if you haven't seen them in over 90 days, you need to be seeing them.

348

00:38:26.519 --> 00:38:38.340

Case managers are just doing regular visits instead of open air they are going into homes and day programs and not trying to do open air. Can you offer guidance around how to handle this?

349

00:38:38.340 --> 00:38:46.500

This I think you need to work with your teams. We, we believe that visits can be done safely.

350

00:38:46.500 --> 00:38:50.340

It depends upon the circumstances of the folks.

351

00:38:50.340 --> 00:39:02.610

In the programs, and the staff that are are visiting the support coordinators who are visiting, we need to give each other grace so that everybody feels that they are.

352

00:39:02.610 --> 00:39:11.610

Doing what they need to do and being respectful of their concerns for spread. But if people are coming to a day program.

353

00:39:11.610 --> 00:39:16.289

Then there that would imply that there's already some.

354

00:39:16.289 --> 00:39:22.349

Comfort level with them being around other people so it doesn't really strike me as.

355

00:39:22.349 --> 00:39:30.840

A problem that a support coordinator would go in to the day program and do that to that visit.

356

00:39:30.840 --> 00:39:34.829

Because they're already those folks are already.

357

00:39:34.829 --> 00:39:38.969

Agreeing to be out in the public and out in the community and.

358

00:39:38.969 --> 00:39:47.309

And going to that day program, with other folks around, if you are going to a home or a group home, you need to work with that.

359

00:39:47.309 --> 00:39:51.119

Agency staff and determine what is the best.

360

00:39:51.119 --> 00:39:54.360

Way to to do that visit.

361

00:39:54.360 --> 00:40:01.320

It again, you can see someone open air and be completely safe and meet the requirements for being in person.

362

00:40:01.320 --> 00:40:07.559

If you are concerned for the safety, or well, being of 1 of the individuals in the home.

363

00:40:07.559 --> 00:40:15.420

If there's an allegation of abuse and neglect that you need to check on if it is a provider or a house.

364

00:40:15.420 --> 00:40:20.010

That you have had concerns about.

365

00:40:20.010 --> 00:40:27.059

The safety of the home, or the people in the home, then you need to go and you need to see those individuals.

366

00:40:27.059 --> 00:40:37.230

You need to 1st, take that into account if you need to see them for the safety of the individual. That's why we can't make just a blanket statement that covers.

367

00:40:37.230 --> 00:40:46.650

Everybody all the time, because there's so many individual circumstances and you know what those circumstances are, you know, who you're concerned about.

368

00:40:46.650 --> 00:40:49.710

You know, if there's a provider that's really struggling.

369

00:40:49.710 --> 00:40:57.030

Or if they're really having a hard time with staff, and you want to see if they've got staff in the home, or.

370

00:40:57.030 --> 00:41:07.409

Or whatever the case may be, you need to go see those people if you have those concerns, always err on the side of safety and see people in person.

371

00:41:07.409 --> 00:41:11.730

Do the personal just the social distancing wear a mask.

372

00:41:11.730 --> 00:41:16.320

What are 2 mass that that makes you feel more comfortable and safer?

373

00:41:16.320 --> 00:41:23.400

Um, if you need to go into the home, or if you can do your visit through an open window or.

374

00:41:23.400 --> 00:41:28.829

Through a patio door or something like that.

375

00:41:29.304 --> 00:41:41.215

Okay, there's jumping up hike I might need you to help me keep track where I'm at with question. Sure. And a quick reminder make sure you send those to all panelists.

376

00:41:41.215 --> 00:41:49.675

I know that I received several messages just to the host, and also asking I clarification South, make sure they come to all panelists.

377

00:41:49.675 --> 00:41:49.855

So,

378

00:41:49.855 --> 00:41:50.244

Wendy,

379

00:41:50.275 --> 00:42:01.704

I don't think you have had is the statement about going to see someone and just talking quickly outside to see them and completing paperwork such as appendix reviewing progress,

380

00:42:01.704 --> 00:42:05.664

notes and calling and having further conversation about satisfaction at the office.

381

00:42:05.969 --> 00:42:12.150

Apply to non residential services, like, et cetera.

382

00:42:13.530 --> 00:42:17.039

Yes, you can do those activities remotely.

383

00:42:17.039 --> 00:42:22.769

You're it's your in person monitoring visit that you need to.

384

00:42:22.769 --> 00:42:27.239

To abide by and follow your schedule for it.

385

00:42:27.239 --> 00:42:36.690

And the other paperwork pieces that you would normally do while you're there on the visit can be done remotely.

386

00:42:38.460 --> 00:42:50.639

What do we do about the day have providers or other service providers not having the video technology to do open air monitoring and not allowing staff into the building.

387

00:42:50.639 --> 00:43:05.010

Do you need to regret with your tech and provider relations in order to resolve those issues? It's a requirement for all of our providers by now to have that remote technology available to them.

388

00:43:05.010 --> 00:43:13.980

So, we'll need to work through that individually with those providers. So please reach out to your TCM tech and your provider relations person.

389

00:43:13.980 --> 00:43:17.579

Um, in that region, for for more help us out.

390

00:43:19.284 --> 00:43:33.144

Okay, with the positive apps for tracking visits are essays to submit for all visits, including telehealth and in person, or only went into the telehealth visit. If I'm understanding that. Correct?

391

00:43:33.929 --> 00:43:42.059

Is that we were requiring support coordinators to record in apps if they were doing any sort of.

392

00:43:42.059 --> 00:43:50.699

Modified monitoring, so if you're doing the open air in person visit, you would just note that you're doing that open air in person visit.

393

00:43:50.699 --> 00:43:55.769

And why, if it's, you know, the.

394

00:43:55.769 --> 00:43:58.889

For safety, if it's there's positive staff.

395

00:43:58.889 --> 00:44:11.905

In in the home, where there's a positive client in the home where there's exposure, or this is just a precaution that you're all taking. So, but if you're just doing a regular, your regular visit, you're going in, you're going into the day or whatever.

396

00:44:11.905 --> 00:44:14.094

Then that would not need to be documented.

397

00:44:14.519 --> 00:44:18.090

And I.

398

00:44:18.090 --> 00:44:22.199

I did put that question out to Carrie Williams too, to.

399

00:44:22.199 --> 00:44:30.420

To look at that, so if she has any clarification to that question, we will get that out.

400

00:44:31.585 --> 00:44:42.625

Okay, there are a couple actually a handful of additional questions that have come in. I know we're about to hit that 1115, Mark, and we still have some other folks that have information to share.

401

00:44:42.625 --> 00:44:53.065

So, I'll make sure we pull the report on this so that we can follow up with those questions. And then when the, if there's anything else you wanted to touch on.

402

00:44:53.849 --> 00:45:00.510

Yeah, no, I think that's a good idea and just remember this is no different than what we did the 1st time around.

403

00:45:00.510 --> 00:45:12.599

So, however, you dealt with the situations in providers or families, not being comfortable with an in person visit. It would be the same thing. You would do this time around.

404

00:45:12.599 --> 00:45:15.780

So, we will go through and answer these questions.

405

00:45:15.780 --> 00:45:21.900

Um, and if you have any more, please send them into the mail. That would be great.

406

00:45:23.099 --> 00:45:32.219

Okay, and I think that brings us to station M. D. and Dr. I believe you are on with them.

407

00:45:32.219 --> 00:45:35.699

Yeah, right. Can you hear me all right?

408

00:45:35.699 --> 00:45:44.280

Yes, okay. Thank you. I just wanted to give a little update on what's going on and then also.

409

00:45:44.280 --> 00:45:52.375

To speak to some issues regarding what's on. I know Dr stance loss went through a pretty thorough overview.

410

00:45:52.764 --> 00:46:06.085

Um, but from the perspective of station empty in our so 1st, and foremost, I just want to let everyone know that our services are there a, don't want to sound like a broken record, but we are.

411

00:46:07.980 --> 00:46:20.340

There's been some confusion about when to call and when not to call the bottom line all us. If you have any questions about Coke, any medical concerns that you may have.

412

00:46:20.340 --> 00:46:34.139

What we're saying right now in Missouri and, and also in other states, of course, is that our hospital systems are are reaching capacity or at capacity or near capacity um, anything we can do.

413

00:46:34.139 --> 00:46:46.139

To reduce the burden on the healthcare system, meaning if you don't really need to be in the doctor's office urgent care are right now please do all your best not to. And that's where we come in.

414

00:46:46.465 --> 00:46:56.094

If you need a med refill, you need an evaluation, you have a question about anything that's related to medical station. Empty is available. Again.

415

00:46:56.125 --> 00:47:04.375

The division has been fantastic about providing this service, and also all the great work that Angie and her team have done is transitioning this to a waiver, but we are there.

416

00:47:04.769 --> 00:47:15.840

Um, and I think it's imperative that we all let the individuals that we serve know that this service is available. Um, in that vein, we, this week, uh, we will be sending out another Mailer.

417

00:47:15.840 --> 00:47:20.579

Which basically a postcard, which kind of talks about our services and has the.

418

00:47:20.579 --> 00:47:24.929

1877 number, but if you go to a website.

419

00:47:24.929 --> 00:47:31.974

There's plenty of information, there's packets for families, um, to kind of explain to you what the services and if there's any questions.

420

00:47:33.295 --> 00:47:40.824

The other thing I will let you guys know is we had a town hall meeting on the 17th, um, and there's another 1 coming up today at 2 0 PM.

421

00:47:42.025 --> 00:47:51.114

About really the vaccine and the importance of getting vaccinated, and just just a general informational session Dr status loss will be on and Dr.

422

00:47:52.135 --> 00:47:58.644

from station and D will be on to kind of go over what's going on a review of the latest.

423

00:47:58.889 --> 00:48:03.809

From CDC and there'll be an opportunity, I believe to answer questions.
Um.

424

00:48:03.809 --> 00:48:11.460

They are also we have also planned another Facebook live event, which
will let you guys know when that happens. Um, and.

425

00:48:11.460 --> 00:48:17.610

I just want to reiterate that, um, what we are seeing right now, uh,
especially in the community.

426

00:48:17.610 --> 00:48:23.130

Those individuals that are living in residential settings that maybe are
not part of a group home. Um.

427

00:48:23.545 --> 00:48:37.795

They are really struggling with issues of their ongoing medical needs,
whether it's covert or not but we want to make sure that people continue
to get the care that they need the refills that they need on the medical
attention that's needed. And again.

428

00:48:38.159 --> 00:48:43.110

As you're probably reading about in the paper know that, that hospitals
are getting full.

429

00:48:43.110 --> 00:48:51.715

And unless it's a true emergency, uh, and even in those instances,
sometimes they're they're having trouble getting people to use and
transferring and being on diversion.

430

00:48:51.715 --> 00:49:02.605

So, I'm now more than ever, um, we're on this 2nd, kind of wave of coded
and, um, you know, we are we want to let, you know that this service is
available and please let.

431

00:49:02.880 --> 00:49:06.539

Everyone know that that this service is not changed.

432

00:49:06.539 --> 00:49:21.054

Um, it's there for, for anyone that's on the waiver, completely free of
charge. So that's really it in terms of updates. Um, and I don't know if

there's any questions in the chat or anything about that, but, um, if not, I will turn it over Jess.

433

00:49:21.054 --> 00:49:28.284

And again, we are there. If you have questions, you can also contact me and the website has a lot of information as well so that you.

434

00:49:30.000 --> 00:49:34.260

Thanks buddy. I.

435

00:49:34.260 --> 00:49:38.519

I'm looking forward to the webinar. I appreciate you putting that on next week and.

436

00:49:38.519 --> 00:49:45.840

I think it'll be extremely helpful so, just a couple of updates. I know we're getting into.

437

00:49:45.840 --> 00:49:54.809

Kind of the last few minutes here so the questions that came in in the chat regarding the updated monitoring guidance.

438

00:49:54.809 --> 00:49:58.320

Have led me to believe that.

439

00:49:58.320 --> 00:50:05.460

It may not be crystal clear so, captain obvious statement. So.

440

00:50:05.460 --> 00:50:11.940

kim's dog had a great suggestion that she sent to me privately about.

441

00:50:11.940 --> 00:50:25.050

Creating a decision tree, perhaps even breaking some pieces of that memo off into an based on the questions that we've received here today as well as.

442

00:50:25.050 --> 00:50:30.630

Those that come into to the email as we, as we move forward.

443

00:50:30.630 --> 00:50:34.320

To make sure that it's just really clear to everyone.

444

00:50:34.320 --> 00:50:44.099

When in person monitoring is required, and again, in person open air, it's the same thing in person means.

445

00:50:44.099 --> 00:50:48.090

Being the person with your own eyes, not through a screen.

446

00:50:48.090 --> 00:50:59.219

And so that will be coming out and we will get back together as quickly as possible and look forward to your feedback on that. I hope that's helpful.

447

00:50:59.219 --> 00:51:04.530

Also coming soon will be some information regarding.

448

00:51:04.530 --> 00:51:10.710

More vaccine education and what the coordinators can do to.

449

00:51:10.710 --> 00:51:15.869

Help families and individuals make decisions regarding vaccinations.

450

00:51:15.869 --> 00:51:21.090

And that is also going to be including some information.

451

00:51:21.090 --> 00:51:28.739

Regarding some possible incentives, and we're just looking at everything we can do to partner with KC the partner with.

452

00:51:28.739 --> 00:51:35.309

The counsel on on what is available to make sure that we're getting education out in the best way possible.

453

00:51:35.309 --> 00:51:38.820

And providing you all with all of the resources that you need.

454

00:51:38.820 --> 00:51:51.389

Whether it's a provider or coordinator or anyone involved in, that person's life, being able to have the information they need at their fingertips. That's easily understandable.

455

00:51:51.389 --> 00:51:57.239

As well, as kind of where to go through additional costs for additional questions and information so.

456

00:51:57.239 --> 00:52:04.920

Look for that to come out very soon. There is something that is on the page that you are on right now.

457

00:52:04.920 --> 00:52:08.909

That I wanted to talk about, I guess so.

458

00:52:08.909 --> 00:52:15.929

Luckily, you can read my mind if you can just expand the testing information.

459

00:52:15.929 --> 00:52:29.340

So, give me just a 2nd, that's actually a static image, so I will share the appropriate screen 1 moment. Okay. So, while hike is doing that I did want to.

460

00:52:29.340 --> 00:52:32.519

Say that another.

461

00:52:32.519 --> 00:52:39.210

Captain obvious statement here you may have seen in the news that President vitamins.

462

00:52:39.210 --> 00:52:45.300

Put out information and it's going to be requiring.

463

00:52:45.300 --> 00:52:48.750

The vaccination for.

464

00:52:48.750 --> 00:52:55.860

Long term care facilities to receive and facilities to receive Medicare and Medicaid funding.

465

00:52:55.860 --> 00:53:01.019

The requirement for CMS to develop the rule around that.

466

00:53:01.019 --> 00:53:04.380

Is not the deadline is not until September.

467

00:53:04.380 --> 00:53:11.639

So, there's a lot that we don't know that we will be finding out in the coming months. As far as.

468

00:53:11.639 --> 00:53:16.230

How does that apply to any of the settings that might be.

469

00:53:16.230 --> 00:53:21.150

Within our purview, and it's in our world so we will continue to keep you updated.

470

00:53:21.150 --> 00:53:25.079

But I think in the meantime, it's really important to.

471

00:53:25.079 --> 00:53:33.929

Access testing and do everything you can around that especially.

472

00:53:33.929 --> 00:53:40.289

From the, the those that we've seen so far implement.

473

00:53:40.289 --> 00:53:47.010

Required vaccines, not that this will happen with, but I'm just giving you an example is that.

474

00:53:47.010 --> 00:53:51.900

The, the entities are requiring the vaccination or.

475

00:53:51.900 --> 00:54:02.635

Weekly testing or BI, weekly testing as as a condition of employment. So again, we don't know what the actual decision rule from CMS will look like.

476

00:54:02.965 --> 00:54:09.625

But I do think regardless of that, it's more important than ever to do regular testing.

477

00:54:09.929 --> 00:54:14.309

Um, we know it work and finance testing is available.

478

00:54:14.309 --> 00:54:20.880

See, all of our, our partners and the information on how to use it, how to obtain it.

479

00:54:20.880 --> 00:54:32.309

Is all on this page under testing information and we really encourage you to do. So we do that here at our building. Everyone is tested once a week. We do it at our facilities.

480

00:54:32.309 --> 00:54:41.190

More often, and that's just kind of depending on the current situation of if we have any positives or.

481

00:54:41.190 --> 00:54:45.929

Or what's going on in the local, the local community surroundings.

482

00:54:45.929 --> 00:54:50.760

That that facility or stage are for your program.

483

00:54:50.760 --> 00:54:55.349

So, it just really encourage you to utilize that resource and identify.

484

00:54:55.349 --> 00:55:02.159

Positive as early as possible prevent infection of others in a threat or outbreak.

485

00:55:02.755 --> 00:55:17.094

And that's really all of the information that I had to share. So everybody gets to have 5 minutes back in their day, because I didn't see any other questions up in the chat while I was talking about that. I hope everyone has a wonderful weekend.

486

00:55:17.094 --> 00:55:20.485

And I know lots of kiddos are going back to school next week. So.

487

00:55:20.789 --> 00:55:24.389

Good luck with that. All right. Thank you.