

COMMONWEALTH OF PENNSYLVANIA
HOUSE OF REPRESENTATIVES

JOINT PUBLIC HEARING
OF
HOUSE AGING AND OLDER ADULT SERVICES COMMITTEE
HOUSE HUMAN SERVICES COMMITTEE
SENATE HEALTH AND HUMAN SERVICES COMMITTEE
SENATE AGING AND YOUTH COMMITTEE

NORTH OFFICE BUILDING
HEARING ROOM 1
HARRISBURG, PENNSYLVANIA

MONDAY, AUGUST 23, 2021
12:30 P.M.

PRESENTATION ON
DEPARTMENT OF HUMAN SERVICES' INTENT TO CONTRACT WITH
MAXIMUS AS ITS INDEPENDENT ENROLLMENT BROKER

BEFORE:

HONORABLE MICHELE BROOKS, MAJORITY CHAIRWOMAN,
SENATE HEALTH AND HUMAN SERVICES COMMITTEE
HONORABLE ART HAYWOOD, MINORITY CHAIRMAN,
SENATE HEALTH AND HUMAN SERVICES COMMITTEE
HONORABLE JUDY WARD, MAJORITY CHAIRWOMAN,
SENATE AGING AND YOUTH COMMITTEE
HONORABLE MARIA COLLETT, MINORITY CHAIRWOMAN,
SENATE AGING AND YOUTH COMMITTEE
HONORABLE GARY DAY, MAJORITY CHAIRMAN,
HOUSE AGING AND OLDER ADULT SERVICES COMMITTEE
HONORABLE STEVE SAMUELSON, MINORITY CHAIRMAN,
HOUSE AGING AND OLDER ADULT SERVICES COMMITTEE
HONORABLE FRANK FARRY, MAJORITY CHAIRMAN,
HOUSE HUMAN SERVICES COMMITTEE
HONORABLE STEPHEN KINSEY, ACTING MINORITY CHAIR,
HOUSE HUMAN SERVICES COMMITTEE
HONORABLE MIKE ARMANINI
HONORABLE LISA BAKER
HONORABLE JESSICA BENHAM
HONORABLE TIMOTHY R. BONNER
HONORABLE AMEN BROWN
HONORABLE AMANDA CAPPELLETTI

(CONTINUED)

HONORABLE CAROLYN COMITTA
HONORABLE ISABELLA FITZGERALD
HONORABLE ANN FLOOD
HONORABLE MARK M. GILLEN
HONORABLE NANCY GUENST
HONORABLE DOYLE HEFFLEY
HONORABLE TIM HENNESSEY
HONORABLE SCOTT HUTCHINSON
HONORABLE BRIDGET KOSIEROWSKI
HONORABLE SHELBY LABS
HONORABLE CARRIE LEWIS DELROSSO
HONORABLE MILOU MACKENZIE
HONORABLE MAUREEN E. MADDEN
HONORABLE ABBY MAJOR
HONORABLE STEVEN C. MENTZER
HONORABLE MARCI MUSTELLO
HONORABLE NAPOLEON NELSON
HONORABLE DANIELLE FRIEL OTTEN
HONORABLE DARISHA PARKER
HONORABLE F. TODD POLINCHOCK
HONORABLE DEVLIN ROBINSON
HONORABLE DAVID H. ROWE
HONORABLE JOHN SABATINA
HONORABLE MARIO SCAVELLO
HONORABLE JUDITH SCHWANK
HONORABLE MELISSA SHUSTERMAN
HONORABLE PATRICK STEFANO
HONORABLE JAMES B. STRUZZI
HONORABLE WENDI THOMAS
HONORABLE KATHLEEN C. TOMLINSON
HONORABLE PARKE WENTLING
HONORABLE CRAIG WILLIAMS

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*Pennsylvania House Of Representatives
Commonwealth of Pennsylvania*

HOUSE COMMITTEE STAFF PRESENT:

ERIN RAUB

MAJORITY EXECUTIVE DIRECTOR,
HOUSE HUMAN SERVICES COMMITTEE

DAWN PELLETIER

MAJORITY LEGISLATIVE ADMINISTRATIVE ASSISTANT II,
HOUSE HUMAN SERVICES COMMITTEE

IMOGEN WRIGHT

DEMOCRATIC EXECUTIVE DIRECTOR,
HOUSE HUMAN SERVICES COMMITTEE

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*Pennsylvania House Of Representatives
Commonwealth of Pennsylvania*

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SUBMITTED WRITTEN TESTIMONY

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(See submitted written testimony and handouts online.)

P R O C E E D I N G S

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3 CHAIRWOMAN BROOKS: Good morning, everyone. I
4 call this joint public hearing of the Senate Health and
5 Human Services Committee, Senate Aging and Youth Committee,
6 House Aging and Older Adult Service Committee, and the
7 House Human Services Committee to order.

8 I'd like to welcome everyone to today's public
9 hearing to discuss the Department of Human Services' intent
10 to contract with Maximus as its Independent Enrollment
11 Broker or IEB for managed long-term services and supports
12 and the impact this grant agreement has had and will
13 continue to have on Pennsylvania's seniors and adults with
14 disabilities.

15 The Department first entered into a grant
16 agreement with Maximus through the Office of Long-Term
17 Living in 2016 to begin handling all of the new aging
18 waiver enrollments. This role had previously been held by
19 the 52 local Area Agencies on Aging or AAAs as people here
20 at home like to call them. Then about two years later, DHS
21 expanded the agreement with Maximus to become the IEB for
22 all long-term services and supports through its new
23 Community Health Choices, or CHC, managed care program.

24 This transition was perhaps even harder than the
25 first as it included approximately 420,000 seniors and

1 adults with physical disabilities statewide. Most of the
2 waivers that previously supported these individuals were
3 folded into CHC as the new LTSS waiver program ultimately
4 approved by the Federal Centers for Medicaid and Medicare
5 Services, or CMS.

6 It was also CMS that had instructed Pennsylvania
7 in 2016 to unpack the perceived conflicting roles held by
8 the AAAs that at the time included choice counseling,
9 program enrollment functions, and service delivery. Today,
10 we don't believe a conflict exists with the AAAs. Some
11 five years later, the Department is essentially recreating
12 what they claimed was once a directive from CMS to
13 disassemble but this time by outsourcing and redirecting
14 these functions to Maximus.

15 In the last 17 months, our consumers, our
16 seniors, adults with disabilities, children, parents, and
17 guardians have all experienced unprecedented times. If we
18 as a Commonwealth have learned anything from this past year
19 and a half, it is that we must rely on our local
20 infrastructures to support our seniors, our loved ones, our
21 fathers, mothers, grandparents, friends, and neighbors.
22 They deserve better than a benign contractor who doesn't
23 know them or the communities that they live in.

24 Every individual that we serve in this
25 Commonwealth is different and requires their own unique

1 person-centered care and services that are organized,
2 dependable, and tailored to meet their specific needs.
3 This is a large task but one that has been successful and
4 more personable through the work of the AAAs in our local
5 communities and the Centers for Independent Living. No one
6 has confidence in 1-800-nowhere numbers, which is what
7 often occurs when large impersonal companies are awarded
8 these contracts.

9 We've spent millions of dollars on a company that
10 has time and time again fallen short on meeting the
11 individual needs of our loved ones here in our communities.
12 My goal today is for us to focus on the experiences of our
13 consumers, our Medicaid beneficiaries, our AAAs, our CIOs,
14 and our counties, and local providers that have fought to
15 provide support to the individuals they serve despite the
16 Maximus contract.

17 People need help, and Maximus isn't helping. I
18 look forward to hearing from our testifiers today and
19 highlighting both their experiences thus far under Maximus
20 and moving forward what we should expect if the Department
21 has not learned from the past and awards Maximus the IEB
22 contract again.

23 I want to thank my colleagues here in the Senate
24 and in the House for agreeing to a joint hearing of this
25 magnitude and to our Committee members and testifiers for

1 joining us today. Before I ask the other Committee chairs
2 to share their opening remarks, it is important to note
3 that the association of AAAs recently filed their third bid
4 process against this IEB procurement with the Department.
5 Due to this ongoing litigation, the Department will not be
6 testifying today, nor will Maximus, and the AAAs may be
7 limited in their ability to answer that line of
8 questioning. I ask my colleagues to please appreciate the
9 nuance when posing their questions.

10 And now I would like to invite my cochair of this
11 Committee, Senator Art Haywood, to offer a few remarks.
12 Senator Haywood.

13 CHAIRMAN HAYWOOD: Thank you so much, Chairwoman
14 Brooks, and for this conversation.

15 I as well recognize the importance of the work of
16 the AAAs and all the organizations, including the
17 independent living organizations, all of which are trying
18 to make sure that individuals who have desperate needs have
19 those needs met both as consumers and as caregivers.

20 I'm also very much aware of the concerns with
21 respect to the Maximus contract but want to hear much more
22 today about those same concerns.

23 I do feel we're in an awkward position, as the
24 Chairwoman has indicated, that there is litigation. There
25 are bid protests, and so the subject of this hearing is in

1 dispute. And as the Chairwoman mentioned, we will not get
2 testimony from Maximus or the Department.

3 Of course, that limits our ability. One thing
4 that we try to do here in the Senate is hear both sides of
5 the story. As many years in litigation, I knew that there
6 was usually two sides to the story. Here in the State
7 Senate, I've realized there's about four or five sides of
8 the same story. And it's unfortunate, of course, that we
9 won't be able to hear that as it will affect any kind of
10 judgments that we would have along the way.

11 But again, I want to thank everyone for
12 testifying. Certainly want to hear the concerns and take
13 them into account. And thank you so much.

14 CHAIRWOMAN BROOKS: Thank you, Senator Haywood.

15 Next, the Chairs to the Senate Aging and Youth
16 Committee, beginning with Majority Chairwoman Judy Ward
17 followed by Chairwoman Maria Collett.

18 CHAIRWOMAN WARD: Thank you, Chairwoman.

19 As Chair of the Senate Aging and Youth Committee,
20 I am pleased to join with fellow Chairs of the Senate
21 Health and Human Services, House Aging and Older Adult
22 Services, House Human Service Committee in holding today's
23 hearing to discuss the impact of a DHS pending contract
24 with Maximus for seniors and adults with disabilities.

25 Up until 2016, the Area Agencies on Aging played

1 a critical role in the state's long-term care services and
2 support systems by providing enrollment and assessment
3 services, among other programs, for seniors and individuals
4 with disabilities. However, the enrollment portion of the
5 long-term care services was contracted out by DHS to
6 Maximus as an Independent Enrollment Broker.

7 Unfortunately, our seniors experienced numerous
8 issues with Maximus, such as not receiving services to
9 problems with phone calls and paperwork delays. One of my
10 fellow Senators reported that they had applied for services
11 for her mother-in-law. And it took so long to get the
12 services that her mother-in-law died without ever receiving
13 services.

14 Fast forward to today, and DHS now has a contract
15 pending with Maximus to also include assessment services as
16 the Independent Enrollment Broker for community health
17 choices and the LIFE program, despite continued concerns
18 with the performance of Maximus.

19 The AAAs and the Centers for Independent Living
20 have provided invaluable service and assistance to our
21 seniors and adults with disabilities for several decades
22 and have a proven track record. The AAAs have a
23 performance rating of 99.75 percent. This contract would
24 negate the current system that is working well and replace
25 it with a contractor whose performance has been lacking.

1 That said, I believe a popular phrase would
2 apply. If it ain't broken, don't fix it. I have
3 communicated my concerns along with Senator Brooks and
4 members of our caucus with this pending contract to the
5 Department of Human Services, as have Members of the Senate
6 Democratic Caucus and Members of the House.

7 Today's hearing involving four legislative
8 standing committees speaks volumes to the interests and
9 concern in this matter. I wish to thank all our
10 testifiers, especially Mr. Steve Williamson of Blair Senior
11 Services for participating in this hearing so they can
12 voice their concern for how this pending procurement will
13 impact the delivery of long-term care services in
14 Pennsylvania.

15 My hope is that their message will come through
16 loud and clear to the Department of Human Services and the
17 Administration and they will reconsider this procurement
18 and revert to the previous system for eligibility
19 assessments, which has been proven to be far superior. In
20 other words, leave well enough alone.

21 Thank you, Madam Chair.

22 CHAIRWOMAN BROOKS: Thank you, Senator Ward.

23 Senator Collett.

24 CHAIRWOMAN COLLETT: Thank you, Madam Chair. And
25 thank you to all of the chairs of this joint committee

1 hearing. I'm proud to be a part of this historic hearing
2 where all four oversight committees have joined together to
3 discuss the impact that selecting Maximus as the
4 Independent Enrollment Broker for Medicaid enrollment
5 services will have on seniors and adults with disabilities
6 here in the Commonwealth.

7 The fact that we have never had a joint hearing
8 this large before and with so many members in agreement
9 about the impact this decision could have for our
10 communities underscores our collective resolve to see our
11 Commonwealth's government do better by our constituents.

12 I'm proud to support the Area Agencies on Aging
13 in my district and across the Commonwealth. For over 30
14 years, the 52 AAAs have been a trusted partner and resource
15 serving our constituents across all 67 counties. And as my
16 colleague Senator Ward said, they've enjoyed a 99.75
17 performance rating. The staff of these organizations have
18 assisted our parents, grandparents, friends, and loved
19 ones, not to mention our staff's seniors, family members,
20 and other aides to navigate the confusing and complicated
21 Medicaid enrollment process.

22 All too often, the AAAs have supplemented the
23 role of the IEB by serving as a face-to-face or case
24 manager point of contact with whom beneficiaries can engage
25 as they have questions, seek to clarify enrollment

1 documentation, and complete application materials.

2 My colleagues and I from across the aisle and
3 from across this Capitol are committed to ensuring that the
4 good work of the AAAs and the community partners their
5 services impact are heard before the Legislature. I'm
6 confident that through today's hearing we will be able to
7 demonstrate how crucial the AAAs are to serving the
8 Pennsylvania Medicaid population.

9 The testimony we are about to receive will beg
10 the question why would we want to strip local service
11 providers away from our communities in favor of another
12 business, turning Pennsylvania tax dollars into profits
13 which leave the state. Surely we can do better. And I
14 look forward to hearing from our panelists how those of us
15 here today can be of assistance.

16 Thank you, Madam Chair.

17 CHAIRWOMAN BROOKS: Thank you, Senator Collett.

18 Next the Chairs of the House Aging and Older
19 Adult Services Committee, beginning with Majority Chair
20 Gary Day followed by Chairman Steve Samuelson.

21 CHAIRMAN DAY: Thank you very much. And I'd like
22 to thank these esteemed chairs of each committee working
23 together this afternoon to host this hearing. And I want
24 to thank all the committee members that participate in
25 these important issues.

1 We have a bipartisan group of committees here.
2 It's been said already, but I'll say it again. Doesn't
3 happen too often, and that should show that this is on the
4 minds of legislators both in the House and in the Senate.

5 There's not much more to add, but I will say that
6 the IEB or the Independent Enrollment Broker issue that
7 we're discussing here today and gathering information on
8 was brought to our attention about two months ago for the
9 second time. Many of my colleagues and people in the
10 industry heard about this back in 2016 when it was rolled
11 out for older adults.

12 Now there is a new contract up for discussion,
13 and these same calls outlining similar problems have once
14 again become far too frequent. Many times appointed
15 government officials often feel that they can do things
16 with their own decision-making on their own. This group
17 here today shows that we want to bring the experience and
18 the knowledge of the Legislature from the people that we
19 represent to bear on these decisions.

20 It's important that we have coequal involvement
21 from all branches of government on these issues that are of
22 vital importance. And I think it strengthens each decision
23 made by state government. In my opinion, the life-saving
24 services that this will affect and the individuals working
25 on the front lines every single day deserve their voices

1 and their experiences to be heard and considered in the
2 decision-making process here in Harrisburg.

3 Many times government officials have much to
4 learn from experts. And before us here today presenting
5 we'll have people to ensure that we all continue to do
6 everything in our power to best serve our most vulnerable
7 citizens. We as a state cannot afford to get this wrong.
8 It is important. It's too important to challenge the
9 challenges of managing an increasing aging population in
10 Pennsylvania. The number, the percentage of the aging in
11 Pennsylvania is increasing. And this process helps us put
12 out services to seniors. And this process, in this case
13 the IEB, plays a crucial role in helping people receive
14 services and stay out of sometimes long-term care
15 facilities for longer and be able to stay at home.

16 I applaud my colleagues for our conversations on
17 this important issue. Look forward to the testimony this
18 afternoon. For our viewers, that IEB, the Independent
19 Enrollment Broker, it's an important, important role that
20 plays a crucial role in serving senior citizens. I want to
21 make that point here today.

22 And I look forward to hearing more testimony this
23 afternoon. And I want to thank again all the chairmen of
24 all the committees and all of our engaged committee members
25 for being here and being part of this process. Thank you.

1 CHAIRMAN SAMUELSON: Thank you, Senator Brooks,
2 and all of the chairs of these committees for setting up
3 this meeting to raise this critical issue. And also thank
4 you, Senator Brooks, a former member of our House Aging and
5 Older Adult Services Committee a couple years ago.

6 CHAIRWOMAN BROOKS: Thank you.

7 CHAIRMAN SAMUELSON: So we have a letter. The
8 House Democratic Caucus has sent a letter to the Department
9 of Human Services signed by 59 members of the Democratic
10 Caucus, including our leader, Joanna McClinton, and all 10
11 members of the House Aging and Older Adult Services
12 Committee from our caucus.

13 Our concern is for the seniors and the
14 individuals with disabilities who are signing up for
15 critical services, critical home and community-based
16 services and going through this Medicaid process to access
17 Medicaid services.

18 Our letter encourages the Department to suspend
19 negotiations with Maximus to serve as the Independent
20 Enrollment Broker because currently the Area Agencies on
21 Aging, as we have heard, handle the assessment process for
22 Medicaid applicants. Well, Maximus currently does the rest
23 of the enrollment process. If this contract, proposed
24 contract, with Maximus goes forward, that would eliminate
25 the Area Agencies on Aging and the Centers for Independent

1 Living from a critical part of this process. And we think
2 this would work to the detriment of Pennsylvania's senior
3 citizens and also Pennsylvania's individuals with
4 disabilities.

5 The AAAs and the Center for Independent Living
6 have served as trusted partners for seniors and individuals
7 with disabilities for decades. And this has been reflected
8 in the 99.75 percent performance rating that we've heard
9 about. These agencies provide critical face-to-face,
10 in-person assistance and it cannot be replicated by the
11 centralized model used by Maximus.

12 Area Agencies on Aging and the Centers for
13 Independent Living are community oriented and mission
14 driven organizations. And they even help with all facets
15 of the enrollment process when there's gaps in what Maximus
16 is supposed to provide. If this entire process is
17 outsourced to an outside contractor, this will impact the
18 staffing levels at our Area Agencies on Aging and our
19 Centers for Independent Living. And I believe you'll hear
20 about that in the testimony today.

21 So we believe that the Department of Human
22 Services should reconsider its decision to negotiate a
23 contract with Maximus for independent enrollment services.
24 Our AAAs, our Area Agencies on Aging, our Centers for
25 Independent Living are based in our communities. They have

1 proven time and again that they possess the mission and
2 commitment to serve the needs of our citizens in
3 administering these services. The Commonwealth should
4 serve our citizens by continuing to utilize the Area
5 Agencies on Aging and the Centers for Independent Living to
6 administer the assessment function as a critical component
7 of the Medicaid enrollment process. Thank you.

8 CHAIRWOMAN BROOKS: Thank you, Representative
9 Samuelson. I appreciated the opportunity to serve with
10 both you and Representative Day during my time in the House
11 of Representatives.

12 Now I would like to introduce the Chairs of the
13 House Human Service Committee, Majority Chairman Frank
14 Farry as well as Representative Steve Kinsey for Chairman
15 Angel Cruz.

16 Representative Farry.

17 CHAIRMAN FARRY: Thank you, Chairwoman.

18 And in the interest of trying to stay on time
19 with our schedule and get to the two panels of testifiers,
20 I will be very brief. Simply put, I believe the six chairs
21 that spoke before us have fairly laid out the concerns that
22 we have heard from our constituents, from our Area Agency
23 on Aging, and other concerned parties. The fact that you
24 have both chambers as well as a bipartisan effort here to
25 raise concern, I hope certainly gives the Administration a

1 little bit of pause in terms of them providing sufficient
2 answers to ensure that we're comfortable moving forward
3 with the services that our seniors and disabled populations
4 will receive.

5 So with that, I'll turn it over to Acting Chair
6 Kinsey for some remarks.

7 REPRESENTATIVE KINSEY: Thank you, Madam Chair.

8 And I too will be brief. Unfortunately, Chairman
9 Cruz regretfully could not be with us this afternoon. But
10 on his behalf, I wish to thank the chairs of the respective
11 committees for the invitation to participate in this joint
12 hearing to better understand the concerns regarding the
13 Department of Human Services' potential decision to
14 contract with Maximus as Independent Enrollment Broker.

15 And Madam Chair, I think that the comments that
16 were laid out by the previous chairs really represent how
17 we as the Democratic Members of the House Human Services
18 Committee feel. And so therefore, just to save on time,
19 I'll conclude my remarks with that and proceed with the
20 hearing. Thank you, Madam Chair.

21 CHAIRWOMAN BROOKS: Thank you, Representative
22 Kinsey.

23 My colleagues had mentioned just the overwhelming
24 bipartisan concern that we have with the Administration's
25 and the Department's decision to contract with Maximus and

1 the detrimental impact it's going to have with our senior
2 citizens across the state of Pennsylvania.

3 I'm very quickly going to read all of the
4 Senators and Representatives that are on today's hearing
5 just to truly demonstrate how many of us are concerned.
6 And these are members that are on the various committees
7 that are represented here today.

8 Senator Cappelletti, Senator Comitta, Senator
9 Hutchinson, Senator Robinson, Senator Schwank, Senator
10 Ward, Senator Baker, Senator Collett, Senator Sabatina,
11 Senator Scavello, Senator Schwank, Senator Stefano,
12 Representative Flood, Representative DelRosso,
13 Representative Major, Representative Mentzer,
14 Representative Rowe, Representative Thomas, Representative
15 Benham, Representative Fitzgerald, Representative
16 Kosierowski, Representative Shusterman, Representative
17 Armanini, Representative Bonner, Representative Heffley,
18 Representative Labs, Representative Lewis DelRosso,
19 Representative Polinchock, Representative Struzzi,
20 Representative Williams, Representative Benham,
21 Representative Fitzgerald, Representative Guenst,
22 Representative Kinsey, Representative Madden,
23 Representative Otten. Just some of the Senators and
24 Representatives that are very concerned with the decision
25 to contract with Maximus.

1 Now we have two panels today. Each of our
2 panelists will have 10 minutes of testimony followed by
3 questions from members, beginning with our committee
4 chairs. For the sake of time, Members, please limit your
5 questions at the beginning to two questions. And we will
6 have a second round of questioning if time allows.

7 Our first panel is focused on those serving
8 adults with disabilities. Unfortunately, our content
9 expert Brenda Dare from Independent Living, Project Manager
10 for Voices for Independence and TRPIL, the Center for
11 Independent Living in Washington County had a medical
12 emergency today and is unable to join us.

13 She has recorded video testimony which we will
14 post on the Committee website for your review. Questions
15 for Brenda can be sent to my executive director, Joan
16 Bradbury, who will compile them for Brenda and then share
17 her responses. We wish, of course, Brenda well today and
18 appreciate her efforts.

19 Joining us remotely today is Tammy Schwab,
20 Caregiver and Mother of Teneille, who resides in Mercer
21 County. Thank you for joining us today, Tammy. You may
22 begin your testimony.

23 MS. SCHWAB: Hello, there. My name is Tammy
24 Schwab. I am the mother of Teneille, a 20-year-old who has
25 lived in Mercer County all of her life. On September 29th,

1 in part because of COVID, we lost nursing services for my
2 daughter Teneille during the shortage and have been trying
3 to work through the system to get some sort of help so that
4 I can return to work and so she can safely be cared for.

5 Shortly after September 29th and the week that
6 followed, I contacted the Behavioral Health Commission and
7 DPW and various local agencies and was told that the
8 process now was to file through Pennsylvania early
9 enrollment brokers for the community and home-based
10 services.

11 I started immediately contacting what was -- I
12 always refer to it as PAEIB, and apparently it's IEB,
13 Independent Enrollment Brokers. And I only mention that
14 because it became an important fact as I placed a phone
15 call a few times after -- being in contact and going
16 through the steps, I called one day and I was trying to
17 reach PAEIB. And the lady very abruptly hung up on me and
18 told me that was a wrong number.

19 So obviously no respect for the fact that caring
20 for special needs individuals was stressful and all the
21 letters of the alphabet soup that go along with the
22 different services get confusing for the caregivers in that
23 overwhelmed state.

24 And ultimately, though, the first week of
25 October, I received -- I talked to someone there and gave

1 them the basic information via phone and was anticipating
2 the arrival of a packet. The packet never arrived. I
3 contacted them yet again to get a packet. That time I did
4 finally receive one, and I filled it out, sent it back, and
5 then was waiting to hear back from that. Again, I am
6 placing the phone calls. And you get a hold of a
7 department that has so many different departments within in
8 that the right hand doesn't know what the left hand is
9 doing.

10 Again, this process started in October of 2020
11 amidst COVID. People were working from home. Your
12 messages are being emailed back and forth through these
13 people, and it's getting lost. The next time I called, I
14 heard that they didn't have any record. So I had to get
15 the packet again.

16 Somewhere along the line, by the time February
17 rolls around and I'm extremely frustrated, four months has
18 passed, I was contacted by a lady by the name of Julie
19 Evangelista that works for Active Aging in Mercer County.
20 She needed to do, like, an evaluation certification of some
21 form. And she was very helpful in getting that done. We
22 had to do it via telephone as the COVID restrictions. She
23 forwarded that information, and finally I received letters
24 back from Pennsylvania early enrollment brokers. They
25 basically said that, you know, they hadn't received the

1 paperwork that they needed.

2 I had one paper from them saying that we were
3 registered as of March 8th, and yet then I receive a paper
4 on April 12th saying that we was denied because my daughter
5 has intellectual disabilities in combination with her
6 medical disabilities. And they told us that we would have
7 to file an appeal.

8 Paperwork got lost again. They said it hadn't
9 been sent appropriately. Julie Evangelista seemed to be
10 the only person that I could call, the only entity that I
11 could get a person to answer. And I contacted her. And
12 she tracked down the paperwork down. It had somehow
13 inadvertently been emailed to the wrong department. And
14 instead of that person at Maximus or Pennsylvania
15 enrollment, whoever it was that had it, instead of them
16 following through to make sure that it got back on track,
17 they had just left it lay and it had laid there for several
18 weeks.

19 Julie assisted me in getting that back on track.
20 And then we filed an appeal to expedite the hearing. I
21 have an injury to my left arm that has me not able to use
22 it. It's to be in this classy little brace here all the
23 time. Teneille is a total care individual. I help with
24 her bathing. Help with all her ADLs. Help in walking.
25 With one arm, it's pretty hard to comb a young lady's hair

1 and change her diaper and bathe her and feed her. It's
2 just difficult. In my frustration, I would call Julie
3 repeatedly, again, the only person that would answer, the
4 only person who seemed to follow through.

5 At one point, I was assigned a special consultant
6 through the Pennsylvania Enrollment Board, Mr. Abercrombie
7 (ph). He was supposed to assist with the expedited hearing
8 so that our case could be heard earlier as Teneille
9 continued to go backwards in her functionality of her own -
10 - back in foot braces, not able to attend school, didn't
11 have a nurse to attend school. The schools don't allow
12 parents to bring them.

13 So Mr. Abercrombie was supposed to assist. I
14 kept getting repeated letters from them stating that the
15 doctor was not filling out the form and forwarding it to
16 them. Contacted the doctor. They showed me confirmed
17 transmission reports where it had been sent by FedEx. They
18 had also snail mailed it. Used every opportunity they
19 could to try to get the paperwork there. And again, that
20 paperwork got lost and Julie Evangelista had to track it
21 down, get it back on track.

22 We had our hearing or the expedited hearing to be
23 heard quicker so that Teneille didn't further decline. And
24 we got on the phone only to find out that Mr. Abercrombie,
25 who I had spoke with two or three days in a row prior to

1 this hearing who's supposed to be Teneille's advocate
2 actually stated that he still didn't have the letters from
3 the doctor, which the day before my doctor's office had
4 faxed them additional information and he told me he
5 received it. If he didn't have the letter that he needed,
6 I'm still unclear to this day why he didn't state so so
7 that it could be sent.

8 I received a letter for that hearing with that
9 judge stating that -- and that hearing was held on May
10 14th. The result of that hearing was that Teneille did not
11 meet the criteria of being in a medical crisis or having
12 situations or conditions that would cause her to decline.

13 After that, Teneille had inadequate care. I had
14 a medical appointment. Teneille is now blind in her right
15 eye and awaiting surgery on her left eye for an injury that
16 happened with staffing that was not adequately, I don't
17 know, screened or whatever. So now she requires more care.
18 We were declined from that.

19 They set up a new hearing which we had -- finally
20 we had -- we couldn't get the expedited. So finally, July
21 26th, the day before Teneille's 20th birthday, we had
22 another hearing before a different judge. Someone from
23 Maximus was also in this phone hearing and I believe ODP
24 was involved and I want to say OLTL, but I sometimes get
25 confused with all of those letters. Julie Evangelista from

1 Active Aging who had been the ongoing sole support through
2 that process had told me that she would join us. In
3 preparing for that hearing, I counted solely on Julie to
4 get the information to Pennsylvania Enrollment Brokers
5 because multiple phone calls got me nowhere.

6 I scheduled a new appointment with Teneille's PCP
7 on July 20th. Went over all the paperwork. Faxed it.
8 Snail mailed it every place that we could think, and I
9 still didn't feel confident that they would receive it.
10 They wouldn't answer my calls as to whether or not they
11 received it. So I took a copy to Julie Evangelista who
12 then faxed it to all of the appropriate places and then
13 also faxed it directly to the judge that was doing the
14 appeal.

15 Julie assured me that on July 26th she would be
16 merged into that call and be there for support because by
17 that time I am so confused by everything that is going on
18 and I needed Julie. She assured me she would be there.
19 The phone call started with -- the hearing started when the
20 judge called me. He told me the other people would be on
21 the call, and when he didn't list Julie's name I told him
22 that she was to be included and could they please do that.

23 The lady from ODP and Maximus both stated that
24 they had received emails from Active Aging of Mercer County
25 stating that this was not their responsibility and that

1 Julie wished not to be included in this hearing. I was in
2 tears. She's the rock that steered me through some of the
3 roughest days, and she didn't want to be included.

4 About 10 minutes into the hearing, my phone rang,
5 and it was Julie's number. I paused in the conversation,
6 told them that I had an emergency call coming in, and I
7 merged Julie in because she informed me that she had never
8 sent such an email and that she intended to be added and
9 thought something had happened, that the hearing hadn't
10 taken place.

11 In the course of that hearing 10 months after
12 repeated phone calls with Pennsylvania early enrollment
13 brokers and Maximus, mailings back and forth, lost fax
14 mails or fax messages and emails, we discovered that ODP,
15 Maximus, all of the entities still insisted that the
16 doctor's letter had never been sent, that it was my
17 responsibility as a parent to see to it that they received
18 it and that the appointments were made and that the stuff
19 was submitted properly.

20 The judge interjected. He said, well, they're
21 stating that Julie Evangelista sent them on top of the
22 doctor sending them. He said the doctor would not send
23 directly to the judge because he wouldn't have my
24 information, but Ms. Schwab and Julie Evangelista had my
25 name and they faxed it directly to me and a carbon copy

1 that also was sent to ODP, Maximus, and Pennsylvania early
2 enrollment. He said, so I don't know why you didn't
3 receive it because I did.

4 So then we proceeded with the hearing, much to
5 ODP's disappointment. And though they said that the
6 paperwork was filled out correctly and Teneille met all the
7 requirements because she was not yet 21 they were declining
8 services. I guess my question is with as many people that
9 I know that I receive the over waiver that have multiple
10 disabilities -- Teneille's primary disability is a
11 chromosome disorder.

12 She has dysphagia. She has a complicated gait.
13 She has a scoliosis, which makes things even worse. She
14 has high tone and low tone issues. Those things are all
15 primary in comparison to the intellectual disability. The
16 lady from ODP informed us or the lady from Pennsylvania
17 Enrollment Board -- quite frankly I'm not sure who's
18 informing -- it gets all complicated. But their point was
19 even though it doesn't list an intellectual disability that
20 a chromosome disorder makes that obvious. I know people
21 with chromosome disorders who are very high functioning
22 intellectually and have a physical disability.

23 I don't understand the denial and stated such.
24 And the judge had said what they would do is they would
25 look over this -- they would continue the hearing

1 basically. They would look over the information and ODP
2 was to make those phone calls to go over the details and
3 come back with a clear answer. They weren't giving us a
4 decision. They would make a decision based on additional
5 information that they were able to obtain.

6 I asked the judge who would be responsible for
7 that information and explained that I had been trying since
8 October of 2020 and had not got a clear answer. My
9 daughter was declining. I had been unable to receive the
10 surgery I need for my own arm or to return to work to
11 provide for my family. I live alone with Teneille, one
12 arm. The whole situation is physically difficult on me and
13 on her and mentally draining.

14 He said that the lady from ODP -- he made an
15 agreement with her. She said she could expedite that
16 review process, that it normally takes 30 days but she
17 would try to get it in 24 to 48 hours. That was on July
18 26th. Repeated phone calls to the Bureau of Hearings and
19 Appeals to find out anything -- I get messages that the
20 Bureau of Hearing and Appeals is closed due to COVID, to
21 leave a message. They were monitoring calls. They would
22 get back to me. It's been two weeks. I haven't got a
23 return phone call.

24 One day I contacted the Bureau of Hearings and
25 Appeals and a lady answered. And she said that the judge

1 who -- or the secretary who worked with that particular
2 judge was out of the office for the day. She would leave a
3 message and have her contact me back the next day. That
4 was seven days ago.

5 So here we sit today still with no answers. A
6 pile of paperwork a mountain deep. And the only person who
7 has helped me is Julie Evangelista from Active Aging of
8 Mercer County. And recently, she has brought in several
9 other people, Michele Brooks' office and some other local
10 supports. They're desperately trying to help us meet a
11 September 1st deadline before our family is further
12 negatively impaired by not having help.

13 I guess that pretty much closes everything other
14 than to finalize with I certainly do not support Maximus
15 taking over. Ten months of fighting to try to get help in
16 a situation that by Behavioral Health Commission and the
17 ARC and MCAR, all of Mercer County have determined is
18 critical need. Teneille's father is deceased. I'm the
19 only parent involved. My other children are grown adults.
20 Teneille is the baby. They live out of state with jobs and
21 families of their own.

22 My family that can help, help when they can. My
23 mother's almost 80. My siblings work full-time jobs as do
24 their spouses. They can't quit their job to take care of
25 Teneille any more than I can quit mine. I just need close

1 supports. And calling an entity out of state that really
2 doesn't get it isn't helping. I'm open to any suggestions
3 anyone has as for how to proceed, but please don't vote for
4 Maximus or Pennsylvania Enrollment Board because they
5 certainly aren't here for us.

6 CHAIRWOMAN BROOKS: Thank you, Tammy, very much
7 for sharing your story and just the challenges that you've
8 faced for nearly a year and the contradictions time and
9 time and time that you've received, you know, that your
10 daughter didn't qualify because of the illness or now it's
11 because of her age and that they never received paperwork
12 and so many other things.

13 And I think what's every bit as startling to me
14 is that they pointblank said to you that the Area Agency on
15 Aging or Julie didn't want to participate in the hearing.
16 And that was not accurate.

17 MS. SCHWAB: They said they had an email, and yet
18 have never produced that email.

19 CHAIRWOMAN BROOKS: And that is startling in
20 itself. I think that your testimony just clearly
21 demonstrates how local is better. I mean, it seems as
22 though the only folks that are trying to help are the AAAs
23 and different agencies within two different counties. And
24 it's very disappointing, you know, that you've had to go
25 through this.

1 And so you're still waiting from my
2 understanding?

3 MS. SCHWAB: Yeah. I have no services. Nothing.
4 This hand, I was supposed to have surgery, but that surgery
5 would have put me in a sling for four to six months. That
6 injury occurred on July 5th of 2020. I've been unable to
7 have the surgery and at this point it's been determined
8 that even at this point now with the surgery that hand --
9 that arm, that left upper extremity will never lift more
10 than 10 pounds.

11 My daughter's 20 years old and is in diapers.
12 Changing her at this point means changing her using a hand
13 and a foot, which I'm sure -- I've managed to do it. She's
14 gotten changed. She's sitting here with me right now. But
15 she is also back in orthotic devices for her feet because
16 with only one hand I can't properly support her to do her
17 physical therapy to keep her moving forward. Teneille had
18 not had orthotics for her feet since she was 10 years old.
19 We have regressed 10 years simply because we can't get
20 help.

21 And we have fought -- those who know Teneille and
22 the long story of Teneille's care, Teneille was never to do
23 anything knowingly. She's a very tenacious special needs
24 little girl. She fights very hard, and I support her. I'm
25 proud to be her mom. But at this point, I feel like I'm

1 failing my child because I can't physically perform her
2 physical therapy that needs to be done. And because she
3 doesn't have a nurse and because of COVID, she can't go to
4 school. And then the school district stopped paying the
5 physical therapist that would come to the house because I
6 didn't have services to send her to school. So they ceased
7 the other services as well.

8 The whole system is wrong. I need the local
9 supports. Like I said, without Julie, I don't know where
10 we would be. She's the only one who was following up,
11 following through, and even went outside of the county to
12 Crawford County's Active Aging and spoke with, I believe,
13 Krista Geer there who contacted your office.

14 We did a documentary that aired on the web, like,
15 saying, you know, we desperately need services out here. I
16 am friends with many special needs parents. We support one
17 another. And I'm not alone in the struggle. Our situation
18 right now is not very good. But there are other people who
19 are in similar situations. And we just all need help.

20 CHAIRWOMAN BROOKS: Thank you.

21 I believe Senator Judy Ward has a question for
22 you.

23 CHAIRWOMAN WARD: Yes. Thank you, Chairwoman.

24 And it was along similar lines. I will just say
25 that your testimony here today, Tammy, is troubling and

1 disturbing, to say the least. You've told us that your
2 local providers is the only place that you've gotten any
3 assistance; is that correct?

4 MS. SCHWAB: Yeah. When I would call back to
5 Maximus and Pennsylvania Enrollment Board, it was like --
6 if you've seen the movie 20 First Dates, that's what it
7 feels like. They don't know who you are. You give them
8 the number, and they're, like, I'm sorry, we don't have
9 that number in our system. Apparently once we had the
10 appeal and were denied, then we were assigned a new number
11 for our case, but they don't give you what that new number
12 is and they don't give you a phone number to call anybody
13 direct.

14 You call in. You leave a voice mail on a
15 computer. And you pray to God that someone who cares
16 stumbles across it and forwards it to the next department
17 because -- in my mind, I visualize an office with Suzie at
18 one desk and Barb at another and Joe working at another.
19 And if one of them gets a message that's intended for the
20 other, they share that. At least, that's what happens at
21 the Mercer Aging Office and the Crawford County Aging
22 Office. I was trying to get connected this morning, and I
23 am computer savvy. Hands on, I can dig in the gutter, but
24 computers are not my forte. And I called into the
25 Meadville office trying to reach Krista who is doing her

1 own stuff to be set up to speak later today. And I
2 couldn't reach her, but I left an SOS. And I'm telling
3 you, I had people calling from Mercer County Active Aging,
4 Crawford County Active Aging, Michele Brooks' office. They
5 were all reaching out to their computer illiterate friend
6 making sure that I got here.

7 If that had been PAEIB, I might have received a
8 phone call six months from now saying I'm sorry, we don't
9 know, we'll have to research that and get back to you.
10 I've over it. My sense of humor is still intact, but
11 that's probably because it's early in the day and I haven't
12 tried to call Maximus or Pennsylvania Early Enrollment
13 Board because I didn't want to be in negative mindset. I
14 needed to make a point today, and angry doesn't serve
15 anybody well.

16 CHAIRWOMAN WARD: Thank you for what you do for
17 your daughter and for your testimony here today. Thank
18 you.

19 MS. SCHWAB: Thank you.

20 CHAIRWOMAN BROOKS: Thank you, Senator Ward.

21 Senator Robinson, you have a question?

22 SENATOR ROBINSON: Yeah. Thank you, Madam Chair.
23 I just wanted to direct my question to Ms. Shoe [sic]. I
24 just want to say thank you for your testimony and for the
25 care that you show for Teneille. That was very

1 inspirational. And we are happy that somebody like you can
2 show that much passion for Teneille.

3 I would also, though, like you to expand on how
4 you feel a contract with Maximus will prevent you from
5 doing all the great work that you're doing for Teneille.

6 MS. SCHWAB: Well, I've been working with Maximus
7 for 10 months trying to get a contract or services to do
8 home and community based. And 10 months later they don't
9 have a real grasp of her disabilities or her needs and
10 can't follow through with a phone call. We've faxed them
11 document after document which they have apparently lost or
12 misplaced or conveniently set aside because when the doctor
13 sent them they said they never received them. And then I
14 was responsible for the fact that our case wasn't moving
15 forward.

16 And then when I involved Julie from Active Aging,
17 she had the foresight not to only send it to Pennsylvania
18 Enrollment Board and to Maximus but she carbon copied it
19 and sent it directly to the judge. They were carbon
20 copied. If the judge got his, please tell me why
21 Pennsylvania Enrollment Board didn't get theirs. Why did
22 ODP not get theirs? Why did Maximus not have a copy? I
23 believe they received their copy. I believe it just wasn't
24 put in the proper hands.

25 And if Julie, the local entity hadn't faxed it

1 directly to the judge, I would have been once more
2 chastised on that phone call for not doing or fulfilling my
3 responsibilities to my daughter. And I'm here to tell you
4 that hurts. I don't just care about my daughter and her
5 disabilities. I had a half sister who I feel guilty as an
6 adult that I didn't participate in enough because I didn't
7 understand.

8 As an adult, I now understand. I reach out to
9 help the other people who are living and fighting the same
10 path that I am. And I do the best that I can. And when
11 Pennsylvania Enrollment Board and Maximus make me feel like
12 I fail my daughter because I didn't do the paperwork or I
13 didn't follow the doctor's orders or that I was
14 scatterbrained and not doing my job, that hurts. It is a
15 personal attack. It becomes very passionate, and I fight
16 back. And then when I'm ignorant and angry, they judge me
17 for that.

18 My child is suffering because Maximus doesn't
19 care. I'm a number on a piece of paper, and I don't
20 matter. And my daughter matters less, apparently. No.
21 I'm not okay with them taking this contract. They will let
22 myself and my daughter forever in that pit and not reached
23 in to even offer us condolences. And when I called them,
24 make me feel worse. No. I have nothing good to say from
25 my experience with Maximus or Pennsylvania Enrollment

1 Board. Mr. Robert Abercrombie's supposed to be the
2 advocate for me through there. He did nothing. And after
3 the appeal hearing, he was still supposed to be our
4 advocate. Would not return phone calls. I left multiple
5 messages begging for help.

6 In the midst of all this, I contracted COVID
7 myself. Did I have any help? Nope. My sister could drop
8 food off periodically at the end of the ramp. Other than
9 that, we had nothing. I was on quarantine for two weeks
10 for myself and then quarantine for my daughter for an
11 additional two weeks. In that period of time that I
12 discovered that I had COVID was because I had further
13 injured my hand trying to do dishes and maintain my
14 household.

15 Ended up in the emergency room trying to seek
16 help for that and was on Mother's Day -- a practitioner in
17 the hospital threatening to take my daughter from me
18 because one hand I was not able to provide what he deemed
19 to be appropriate care and that she deserved better. Happy
20 Mother's Day. This is the world that we live in.

21 SENATOR ROBINSON: I understand. And I really
22 appreciate your testimony here today. I know how difficult
23 that must be. I want to reassure you that we appreciate
24 the care that you're giving Teneille. And we have heard
25 your concerns loud and clear. We definitely will do what

1 we can to better this situation.

2 MS. SCHWAB: And I will say in closing I
3 appreciate that everybody says that I take good care of her
4 and they take me for that. She's my child. I love her. I
5 don't need thanks. That's the job of a mother. I don't
6 want a lot. I just want to be able to work to provide. I
7 don't want to lose my home.

8 SENATOR ROBINSON: Thank you.

9 CHAIRWOMAN BROOKS: Thank you, Senator Robinson.
10 And unfortunately, Tammy's story is not the only story and
11 tragedy that we're hearing about in relation to Maximus and
12 the whole process and the whole system. I think we all
13 agree that our most vulnerable -- it's not acceptable. You
14 know, the Department and the Administration need to do
15 better. And we look forward to working with them to do
16 that.

17 So again, thank you, Tammy, for joining us. We
18 are going to hear from our second panel which actually
19 includes someone that was trying to help you. You're
20 welcome to continue to, you know, stay on the Zoom and
21 listen to the hearing. And again, we just can't thank you
22 enough for sharing your story and God bless. Most
23 certainly there are many folks that are still going to try
24 and help you and your daughter. And again, thank you for
25 joining us today.

1 MS. SCHWAB: Thank you.

2 CHAIRWOMAN BROOKS: Our second panel is focused
3 on those serving older adults. And joining us remotely are
4 Krista Geer, Executive Director of Active Aging in Crawford
5 County; Steve Williamson, President of Blair Senior
6 Services; JR Reed, Executive Director of the Lehigh County
7 Office of Aging and Adult Services; Najja Orr, President
8 and CEO of Philadelphia Corporation of Aging; and Bucks
9 County Commissioner Diane Ellis-Marseglia.

10 And we will begin with Krista followed by Steve
11 Williamson, President of Blair Senior Services. Krista, if
12 you could begin.

13 And Members, I would like to remind you, if you
14 have questions, please let Joan know if you're in the
15 hearing room or you can text her or you can text me as
16 well.

17 Go ahead, Krista.

18 MS. GEER: Thank you, Senator Brooks. Good
19 afternoon, Chairpersons and Members of the House and Senate
20 Committees. And thank you for the opportunity to provide
21 testimony before you today. As Senator Brooks indicated,
22 my name is Krista Geer. I'm the executive director of
23 Active Aging. We are the Area Agency for Crawford County.
24 This is the second time I've (indiscernible - recording
25 malfunction) --

1 CHAIRWOMAN BROOKS: Krista, could I stop you. I
2 don't know. You're not real clear. The members in the
3 hearing, can you hear Krista okay?

4 UNIDENTIFIED VOICE: No.

5 MS. GEER: Okay. Let me see. Any better?

6 CHAIRWOMAN BROOKS: No. And again, that's rural
7 Pennsylvania and the broadband used, which is a whole
8 nother hearing that we need to have.

9 MS. GEER: Indeed. Indeed. Well, I can call in,
10 if that's okay.

11 CHAIRWOMAN BROOKS: Okay. If you don't mind, if
12 we could go ahead and move on to Steve Williamson,
13 President of Blair Senior Services and then come back to
14 you. Is that okay, Krista? Perfect.

15 All right. Mr. Williamson.

16 MR. WILLIAMSON: Good afternoon. I would like to
17 thank the Chairs and the Members of the Committee for the
18 opportunity to come before you and provide testimony
19 regarding the Independent Enrollment Broker. As was
20 already mentioned, my name is Steve Williamson. I'm the
21 President of Blair Senior Services.

22 Blair Senior Services is a nonprofit Area Agency
23 on Aging. We also serve as the shared ride transportation
24 provider and the medical assistance transportation provider
25 in Blair County. The agency serves about 8,000 older

1 adults a year, and we employ about 125 staff. We have a
2 budget of about \$10 million.

3 So me personally, I tend to approach things
4 practically and pragmatically, so that's going to be the
5 lens of my testimony today. Simply put, and as you've
6 heard from Tammy, the enrollment process is complicated and
7 to a degree probably rightfully so. It involves state
8 dollars and rules, federal dollars and rules, and results
9 in the expenditure of a tremendous amount of money.

10 That said, the programs for which we're trying to
11 determine eligibility involve some of the highest need,
12 most at-risk individuals in the Commonwealth. So to be
13 deemed eligible for service, you have to be nursing
14 facility clinically eligible meeting common asset
15 guidelines.

16 Folks that meet these criteria come to us through
17 any number of clinical or life circumstances. Some have
18 never had much in terms of income or assets and some have
19 spent their way down through their life savings and find
20 themselves in this situation and they can no longer pay for
21 the care.

22 Regardless of the individual circumstances, one
23 thing is certain. Folks trying to gain access to these
24 services face very real and very big challenges. And most
25 of the time they don't hit the service system until they're

1 at the end of their rope and they really need the service.

2 Eligibility determination for these programs
3 should not be one of the big challenges. People may or may
4 not be eligible for this service. That's part of the way
5 the service works. People should not have to go through
6 what Tammy Schwab went through to find out whether they're
7 eligible or not.

8 I think DHS recognizes that the current way the
9 process works is not the best thing for folks that need to
10 access these services. They've issued an RFI in an attempt
11 to try to make some positive changes and provide assistance
12 in a process that's more reflective of the needs of the
13 individuals trying to access those services.

14 At present, as everybody has well covered, the
15 incumbent provider of this service is a national vendor.
16 They're not based in Pennsylvania, let alone in any local
17 communities. To them, this is a contractual process. It's
18 transactional. I do X, Y, and Z and get paid A to do it.
19 There's nothing wrong with transactional processes in
20 certain situations.

21 This is not one of those situations. It involves
22 high risk, high need individuals trying to access services.
23 The application process is complicated. To be completely
24 honest, people need help to navigate the process. Simply
25 put, we're not using the right tools and right

1 organizations for the job.

2 Folks might call that statement self-serving. I
3 stand by the statement. To that, I would say let's look at
4 the last 10 years of outcomes. This started more than a
5 decade ago with eligibility determinations for individuals
6 with disabilities that led to the Mosley-Alexander
7 decision. It's a well-known decision. I won't waste the
8 committee's time with it.

9 Half a decade later, with many of the same
10 problems still in existence, the system was expanded to
11 include older adults. That resulted in House and Senate
12 hearings, unfortunately, many of which participating in
13 this hearing today participated in half a decade ago. Here
14 we sit still with the same valid ongoing complaints about
15 how this process works.

16 The existing way of doing this is process-driven.
17 It's not person-driven, and that's a problem. It doesn't
18 provide the desired outcome -- and I'm not talking about
19 eligibility. I think most people can understand I've been
20 determined eligible or ineligible. It's a
21 government-funded program. That's the way these things
22 work. I think what people can't reconcile are experiences
23 like what Tammy and her daughter have gone through. That's
24 no good for people trying to access the services. Frankly,
25 it's no good for the Commonwealth.

1 While DHS is trying to change how the system
2 functions, I believe there's more than a sufficient body of
3 evidence to demonstrate that it will not change with the
4 current vendor. I don't think I'm saying anything that's
5 probably all that debatable. Their body of work says so.

6 Some would say but look at the last quarter.
7 They were compliant. Okay. I would say if the last
8 quarter is something other than a blip on the radar, why?
9 It certainly doesn't reflect their body of work. Was it
10 their looming RFI award that drove the performance? Did
11 they underbid the cost of the work simply to secure the
12 contract only to not be able to perform the required work
13 within the cost of their proposal?

14 If they could do it last quarter, why haven't
15 they done it for years? They either couldn't and the last
16 quarter was an anomaly or they could and chose not to. I'm
17 not sure which of those is more concerning.

18 AAAs, on the other hand, are not only
19 Pennsylvania based but present in the local community
20 across the Commonwealth. We're an existing gateway for
21 services for older adults. Centers for Independent Living
22 offer the same gateway for individuals with disabilities.
23 Our relationships with these individuals are not
24 transactional. Within the rules of our operation, these
25 relationships are about improving access to service and are

1 person driven.

2 In 2016, DHS cited federal conflict of interest
3 as one of the reasons to roll older adults into a system
4 that was already producing questionable results. Over the
5 last five years, that conflict of interest has been
6 eliminated. Continuing in that same vein, it would be
7 disingenuous to say the AAAs don't have an interest in the
8 outcome of the IEB decision. Of course we do.

9 But you know who has a bigger outcome in the
10 decision of that? The people who access these services.
11 And I don't think anybody can argue that this works the way
12 we want it to. Likewise, it would also be disingenuous to
13 say that AAAs have never struggled with timely completion
14 of assessments. Frankly, at one point in our history, we
15 did. However, we understood that, internally acknowledged
16 the issues, and corrected them. That's what you would
17 expect to have happen over an extended period of time. I
18 think that's responsible behavior.

19 Since the inception of the FED, I've heard lots
20 of people say about AAA performance. And it's frankly been
21 very good. So the one thing I would like to say is that by
22 the basic nature of these organizations -- and I'm talking
23 about nonprofit and county-based local organizations versus
24 a national for-profit provider. They exist for different
25 reasons and they function for different purposes. And I'm

1 not saying it's good or bad. I'm saying we need to apply
2 the right tool to the right situation. And right now, I
3 don't think we are. There's a place for for-profit private
4 entities, national or otherwise, in our service system.
5 This is not that place.

6 So I would just simply ask the question, which is
7 more suited to help navigate higher risk nursing facility
8 clinically eligible participants through what everybody
9 will admit is a complicated eligibility process. The last
10 decade says it's not the current provider. I think DHS
11 recognizes that, hence the RFI.

12 I'll just end my comments with a couple of basic
13 observations. The path this is traveling on doesn't make
14 any sense. The existing vendor has struggled for years to
15 meet the existing requirements of the current agreement.
16 Now we're going to add layers to the process in hopes of
17 improving outcomes and expect different or better results.
18 I once heard the definition of crazy described as doing the
19 same thing over and over again and expecting a different
20 outcome.

21 The last thing. I've seen nothing in the last 10
22 years that would suggest we should expect to see a
23 different result. I would also add that sometimes the
24 cheapest solution is just that. It's cheap. It doesn't
25 provide the best overall results, especially in complicated

1 situations. If we're happy with the results that we're
2 seeing, don't change. This is way above my pay grade. I'm
3 happy I don't have to decide these things. I just do it on
4 the ground.

5 If we're not happy about the outcomes, we
6 shouldn't keep doing the same things we've been doing while
7 expecting a different result. A different result is not
8 going to come. This is what it is. It's provided by who
9 it's provided by. A decade has demonstrated what that is.
10 Older adults and individuals residing in Pennsylvania
11 deserve better and we can do better, but not by ignoring
12 history. Thank you.

13 CHAIRWOMAN BROOKS: Thank you, Mr. Williamson.
14 For the Members, we are going to take all of these as a
15 panel and then ask the questions after everyone has given
16 their testimony.

17 Bucks County Commissioner Diane Ellis-Marseglia
18 is under some time restraints, so I am going to have her
19 give her testimony next. Commissioner Marseglia.

20 MS. ELLIS-MARSEGLIA: Thank you very much. You
21 know, it's really an honor to be able to be here on this
22 issue that is important to the County Commissioners
23 Association of the entire state of Pennsylvania, not just
24 Bucks County. And I appreciate the honor of your letting
25 me just be able to share my experience.

1 And I'm here as a social worker and I'm also here
2 as a county commissioner but I am also here as a daughter.
3 And in 2010, my mother who had Alzheimer's needed to have a
4 higher level of care. My father was unable to provide her
5 care anymore. And in order to do that, they needed
6 financial assistance. And I was a commissioner at the
7 time, so I knew to refer my father to our Area Agency on
8 Aging.

9 But I well remember the months that he had to go
10 through all of the, you know, look at the financial backup,
11 having people assess my mom. It was arduous for him. And
12 at that point, he had probably the kindest social worker in
13 Bucks County from the Area Agency on Aging assigned. But
14 it was still difficult. And I would sit there and wonder
15 as I wondered over the years how on earth do other families
16 manage this process if they don't have a daughter who's a
17 social worker and a county commissioner and has somebody
18 assigned to that case. How do they make it through this?

19 And then I think now let's add Maximus. How bad
20 can it possibly get? Once Maximus took over, the calls
21 just to my office about people having trouble with the
22 system quadrupled. We opened a hub system just in January,
23 and that's only been taking calls since January, and they
24 are taking calls from people in the community who are
25 unable to get the assistance they need because of Maximus.

1 Our Area Agency on Aging took 3,300 calls last
2 year or 3,300 people they went out and assessed. But they
3 also got 842 calls from people asking for help with
4 Maximus. It's unbelievable they should have to spend
5 double time doing something that they could have done on
6 their own.

7 I think the hardest part for me at this point too
8 is to know that the people oftentimes who are calling the
9 Area Agency on Aging and then have to deal with Maximus are
10 people who are at the worst point of their lives. Some of
11 them were just widowed and they were not the person who was
12 dealing with the financial and paperwork in their families.
13 And now they're trying to get assistance for themselves,
14 and they don't really know where anything is.

15 Sometimes they're sick. They're in a hospital,
16 and now they've got to figure out how to get help. Lots of
17 times, like my mother, they are struggling with dementia.
18 And we can't assume that everybody has a child that's
19 living right in their county. Some people are truly all by
20 themselves. And that's where the Area Agency on Aging has
21 come in and been like a family member. They work through
22 you. We have said they literally will climb under the bed
23 and pull out those boxes and find the missing bank
24 statements that are out there. That isn't what happens
25 when you call Maximus.

1 When I've talked to people who have called, they
2 tell me how they have to steady themselves before they make
3 that phone call because they don't know what's going to
4 happen on the other end. Sometimes it's confusing.
5 Sometimes they get different answers. And if it weren't
6 for our Area Agency on Aging being able to back them up,
7 they wouldn't know what they would do.

8 So I close today with the thing that I need you
9 to think about the most is the people who have not called
10 my office, who have not called the Area Agency on Aging to
11 ask for help with Maximus. Those people, what happened to
12 them? Did they drift off? Are they still out there
13 waiting for help? These are our senior citizens, some of
14 the most important people, the people we owe, you know, the
15 future to and we owe our past to.

16 So I would ask you to really take a look at this,
17 not allow Maximus to take over that which we can do better
18 right here in this community. In Bucks County, we like to
19 be able to send people who are the neighbors of our senior
20 citizens out to help them navigate this process. The very
21 fact that we're considering Maximus when we know what has
22 happened to them in other states, when we know that they
23 have been investigated for abuses, we shouldn't even be
24 considering them now.

25 I am happy to take your questions. I know that I

1 heard you say you wanted to do them at the end. I can try
2 to hop back on. But if you did have a specific question to
3 Bucks County, I'm happy to take that now.

4 CHAIRWOMAN BROOKS: Absolutely. Thank you,
5 Commissioner Marseglia.

6 Anyone have a particular question for County
7 Commissioner Marseglia? Senator Collett.

8 CHAIRWOMAN COLLETT: Thank you. Thank you, Madam
9 Chair, and thank you Commissioner Marseglia for being here
10 with us today and providing your testimony.

11 The AAAs and Centers for Independent Living in
12 Bucks County and across this Commonwealth have been
13 crucial, as you've said and as we've heard here today, to
14 enrolling seniors and adults with disabilities in programs
15 for services that they need to survive and to thrive. And
16 the AAAs have been able to offer and screen for the
17 multitude of services they provide in our community all
18 while assisting folks through Medicaid counseling.
19 Meanwhile, Maximus has had a track record of underbidding
20 and understaffing service obligations, improperly filing
21 Medicaid claims, placing states in financial jeopardy, and
22 poor performance across the nation.

23 Can you please speak to what Pennsylvanians and
24 specifically those in Bucks County stand to lose by
25 switching IEB services to Maximus and the burden that

1 counties like Bucks County will encounter as a result.

2 Thank you.

3 Thank you, Madam Chair.

4 MS. ELLIS-MARSEGLIA: Thank you. I think most of
5 what I spoke to was kind of what the experience has been
6 from Bucks County seniors who have been in the second part,
7 the part where you go to Maximus and you say, you know,
8 here I'm just trying to make sure that I qualify. But you
9 are talking about with IEB that Maximus would be doing the
10 assessments. I mean, that is something that is deeply
11 personal. You are talking to people about their most
12 personal details of their lives as well as financial items
13 that they have never talked to anyone about.

14 And you would ask them to do this with somebody
15 who isn't even from the county, who is not aware of them,
16 who is not aware of the services that really are available
17 in this county. That's why I think it's so important that
18 we leave this with the social workers and staff that we
19 have at our Area Agency on Aging who can provide a deeply
20 personal and private service.

21 CHAIRWOMAN COLLETT: Thank you, Madam Chair.

22 CHAIRWOMAN BROOKS: Thank you, Senator Collett.

23 The next question, Representative Farry.

24 CHAIRMAN FARRY: Thank you. Actually
25 Representative Thomas has a quick question, Madam Chair, if

1 I could move to her real quick.

2 CHAIRWOMAN BROOKS: Sure.

3 REPRESENTATIVE THOMAS: Thank you, Commissioner.
4 Thank you for being here. Quick question. If you could,
5 would you go back and take on the enrollment services as
6 well?

7 MS. ELLIS-MARSEGLIA: Absolutely. No question.
8 And I had those -- we were doing it all when I was going
9 through it with my parents. That's one of the reasons I
10 wanted you to understand that it's confusing and stressful
11 when you're dealing with the best social workers there are
12 and people in the Area Agency on Aging from beginning to
13 end. When you put this almost automated system in the
14 middle of it, it just makes it so much worse. We would
15 love to go back to doing everything.

16 REPRESENTATIVE THOMAS: Thank you.

17 CHAIRWOMAN BROOKS: Thank you, Representative
18 Thomas.

19 Representative Farry.

20 CHAIRMAN FARRY: Yes. I just wanted to have a
21 quick comment. I wanted to thank Commissioner Marseglia
22 for being on the call today. And I want to thank the Chair
23 for allowing her to go out of order. I've worked with now
24 Commissioner Marseglia long before she was ever a
25 Commissioner and long before I was ever a State

1 Representative. And I know she is somebody that leads with
2 her heart and will charge very hard to address things that
3 are of concern, especially for our vulnerable population.

4 So to the Committee Members that are here today,
5 I do want to say please do not take what she said very
6 lightly. She knows what she's talking about and is a very
7 strong-willed person to ensure our needs are being met for
8 our most vulnerable population. And so Diane, thank you
9 for being on this call and thank you for all you do for our
10 county.

11 MS. ELLIS-MARSEGLIA: Thank you, Representative.

12 CHAIRWOMAN BROOKS: Thank you, Representative and
13 Chairman Farry.

14 Representative Williams.

15 REPRESENTATIVE WILLIAMS: Thank you, Chairwoman.
16 And Commissioner, thank you also for being with us today.
17 I represent a district that's not too far from you in
18 Delaware and Chester Counties. I'm told that I have more
19 senior communities in my district than any other district
20 in the Commonwealth at well more than 20. My constituency
21 is aged, which is why I volunteered not only for the Aging
22 Committee but also Human Services.

23 In your testimony, you had said that you started
24 a call hub for which you received over 3,000 calls and more
25 than 800 of those related to Maximus. I think it would be

1 helpful to these four Committees in the House and in the
2 Senate and to our populations back home to hear just a few
3 very specific examples of the complaints with regard to
4 Maximus.

5 MS. ELLIS-MARSEGLIA: So let me just clarify
6 those numbers. So we do about 3,300 evaluations in the
7 county every year from the Area Agency on Aging. But the
8 Area Agency on Aging has kept count, and they have gotten
9 842 requests for people to help them with Maximus because
10 they can't get through the system. So that didn't actually
11 go to the hub.

12 The hub is a separate unit that we just started
13 in January. And it's where anyone can call with a problem,
14 but it's brand new. So as you know, when something's brand
15 new, people don't know. They don't usually call. But that
16 hub has gotten calls from senior citizens to a brand-new
17 place. I don't have their total number complaining about
18 Maximus, but that speaks to me a lot that they were that
19 desperate that they found a place to complain besides the
20 Area Agency on Aging.

21 Geez, I'm trying to think of different examples
22 that I've had people complain about. One of the most
23 specific ones has been a family who the husband died. And
24 he had been the one that had handled all the bank things.
25 And a few months later, the wife fell, had a broken hip.

1 That set into motion all kinds of things as a senior with
2 dementia and whatnot. She needed help, and she needed to
3 be in a long-term placement. But her children did not live
4 around here. There was no one to help.

5 Area Agency on Aging went out. They absolutely
6 found that she needed that kind of support, but she got
7 stuck in the Maximus part. Someone called me because when
8 she would call she couldn't understand what they were
9 saying. She didn't know what they meant. And that's when
10 it's so important to be able to call your local Area Agency
11 on Aging and maybe have someone come out to your home and
12 be able to help you.

13 REPRESENTATIVE WILLIAMS: I appreciate that
14 clarification. Thank you very much. I think it's very
15 important for all of those listening, whether it's the
16 public or these committees to understand, you know, for
17 example, with Mrs. Schwab, she is clear of mind and able to
18 help her child and still stuck in a communications loop. I
19 can't imagine what it would be like for one of our seniors
20 who have to navigate this. Thank you again for your
21 testimony.

22 MS. ELLIS-MARSEGLIA: Thank you.

23 CHAIRWOMAN BROOKS: Thank you, Representative
24 Williams. A very important point. Thank you for making
25 that.

1 Senator Schwank.

2 SENATOR SCHWANK: Thank you, Chairwoman Brooks.

3 Commissioner Marseglia, thank you for your
4 testimony. I think a County Commissioner knows very well.
5 You're right at the heart of the services. And obviously
6 your personal experience has helped you to really
7 understand what's going on here.

8 Here's my question. And by the way, while I'm
9 sitting here listening to the testimony, Maximus is an
10 international company. It is not just in the United
11 States. They have contracts all over the world.

12 But my question is as Commissioner and as
13 probably the direct liaison to the AAA in your county, has
14 any formal complaint been made to DHS, even if just through
15 your State Reps or through your Senators as to the
16 experience that you've had already with Maximus. And I
17 wish I would have asked this question of my AAA because
18 I've talked with them as well. Everybody's concerned about
19 what the future's going to look like here. So I wonder,
20 would we have gotten this far had we made some formal
21 complaints regarding the existing contract with Maximus?

22 MS. ELLIS-MARSEGLIA: Well, you know, I'd have to
23 check on whether we made formal complaints with Department
24 of Health. I'm actually trying to text and get an answer
25 to that right now. But I know that we wrote letters asking

1 that this stop. We definitely let them know. I've called
2 the Governor's Office. I've called or sent letters to all
3 of our State Senators and State Representatives, so.

4 SENATOR SCHWANK: Well, that certainly should
5 have been sufficient to throw up a caution flag that moving
6 forward on this would be a grave mistake. Thank you for
7 what you're doing not just for your parents but all the
8 seniors in yourself county and those that need services.
9 Thank you.

10 MS. ELLIS-MARSEGLIA: Okay. Thank you.

11 CHAIRWOMAN BROOKS: Thank you, Senator Schwank.

12 Just to follow up on that, Commissioner, have you
13 received a response from the Department?

14 MS. ELLIS-MARSEGLIA: I did. They did make
15 complaints when this came up and when Maximus came up to
16 have I guess an RFP a few years ago. But they did not
17 complain about (indiscernible - recording malfunction).

18 UNIDENTIFIED VOICE: We have some minor technical
19 difficulties.

20 CHAIRWOMAN BROOKS: Thank you.

21 UNIDENTIFIED VOICE: There we go.

22 MS. GEER: Good afternoon, Chairpersons and
23 Members of the House and Senate Committees. You already
24 know my name. I don't have to belabor that, but I do want
25 to say that this is the second time I've had the privilege

1 of speaking with some of you about the challenges facing
2 our older adults and people with disabilities who are
3 trying to enroll for long-term care services and supports.

4 Unfortunately, many of the same challenges we
5 discussed in 2016 remain today. As Steve said, the process
6 of enrolling for services is not simple and most people who
7 are seeking services have no real idea of what they need or
8 how to get it. They call us with their story and their
9 problem and they're seeking guidance and assistance. The
10 Area Agencies on Aging were created under the Older
11 Americans Act specifically to locally plan, develop, and
12 coordinate long-term care services to ensure that older
13 adults can remain in their home and communities.

14 For over 30 years, older adults and their
15 families have known that when they need help, they can call
16 us and they'll get that help. No matter where they live,
17 any township, any village, any borough, or any city, our
18 staff are ready to serve at a moment's notice. They're
19 trained to listen to the circumstances of every person who
20 calls to determine how best to help them. Our staff know
21 the services available in every community, and they help
22 those who call navigate the process.

23 For the last six years, our agencies, your
24 offices, and longstanding advocates have been listening to
25 the horror stories and frustrations from those we serve.

1 We've heard stories from families about contacting a call
2 center to talk to a different person every time, about
3 chronically lost paperwork, and long delays with no contact
4 or return calls.

5 But even more, we've heard from and about the
6 families that couldn't wait any longer and had to put their
7 loved one in a nursing home. When I testified in 2016, I
8 talked about George and Jean, both of whom waited months
9 after referral to even receive a phone call and both of
10 whom relied on our extensive intervention to ultimately
11 make it through the process.

12 Their stories and their experiences are not
13 unique. And these stories aren't just stories. They are
14 people who need and deserve our help. Enough is enough.
15 The people who make these decisions cannot be allowed to
16 continue to ignore the cries for help from people who are
17 suffering. During that same hearing in 2016, I heard DHS
18 say that they were working on releasing an RFP for
19 enrollment services that would address these issues. In
20 2017, I heard the same. In 2018, I heard that stakeholder
21 input was being sought to ensure that the future would be
22 better than the past and the present.

23 In 2019, I heard that the final product would be
24 released soon and in that final product we would see,
25 finally, a community-based, person-centered supportive

1 system. And this system would improve the experience for
2 our consumers and make the process faster while offering
3 beneficiary supports to those who need them most. I was
4 cautiously optimistic. This entire description fit exactly
5 what every consumer we have collectively heard from for the
6 past six years wanted and needed. It sounded like we were
7 preparing to fix a broken system and put it back where it
8 belongs into our communities.

9 We all know the history of the ill-equipped,
10 poor-performing international vendor that epitomizes the
11 flaws in the system and highlights them in the worst
12 possible way. We all know the suffering, anger, and
13 frustration that so many of our consumers have endured. So
14 I can't help but sit here and ask how. How did we end up
15 here all over again? How can we believe that Maximus has
16 demonstrated the ability to expand their current business
17 model and take on more responsibility when they have failed
18 so miserably for so long? How can anyone really think that
19 acknowledging this failure and choosing to perpetuate it is
20 the best thing for Pennsylvanians, older adults, or people
21 with disabilities? I know better. You know better. And
22 DHS must do better. Thank you.

23 CHAIRWOMAN BROOKS: Thank you, Ms. Geer.

24 Next we have Mr. Reed, Executive Director of the
25 Lehigh County Office of Aging and Adult Services. Before

1 Mr. Reed speaks again, Ms. Geer, I would ask you as well as
2 Mr. Williamson if you could stay on. The Representatives
3 and Senators, we're going to have questions after the
4 entire panel. Thank you very much.

5 Mr. Reed.

6 MR. REED: Thank you to all the Chairs and
7 Members of these House and Senate Committees and to all the
8 guests listening today. I really appreciated being invited
9 to speak on this very important topic on this agenda.
10 Again, I'm the Executive Director of Lehigh County Office
11 of Aging and Adult Services. Because of lack of time, I'm
12 going to skip over all the formalities about who I am and
13 what I've done, but one of the things I want to stress to
14 everybody is I believe that these services that we're
15 talking about are best administered at a local level with a
16 local presence as already has been stated.

17 These services have been done this way for many
18 years, especially the assessment part. Local level
19 understanding by current providers, Area Agencies on Aging
20 in partnership with entities in each community, hospitals,
21 doctor's offices, home health agencies, and so on will be
22 lost with choosing an outside entity with no local
23 presence. These working relationships have been developed
24 over the years between Area Agencies on Aging and community
25 partners. If this contract is moved forward with Maximus,

1 these relationships will be lost and it will create a lot
2 more gaps in guiding consumers through the eligibility
3 process.

4 In Lehigh County, our Department of Human
5 Services has worked extremely hard to develop an integrated
6 approach to any case that comes to the Department. A lot
7 of cases need assistance from two or more offices. This
8 approach makes sure that the needs of the whole family are
9 taken into consideration and the services are client
10 centered. Area Agencies on Aging are able to take this
11 approach currently because of our interaction with clients
12 during the assessment process and the relationships that we
13 have with local entities.

14 Referrals can be made for Older Americans Act
15 services or lottery fund services, whatever client needs
16 that are identified. This will be lost if the assessment
17 function is given to an outside entity that does not have a
18 local presence, the familiarity with the community partners
19 and the overall understanding of how human services work in
20 each community. The end result is that it negatively
21 impacts older adults or those with disabilities in the
22 Commonwealth.

23 I want to discuss the current status of the
24 enrollment process and waiver programs and LIFE programs.
25 My colleagues have mentioned all the issues over the last

1 few years with Maximus and the enrollment process. I
2 really want to focus on what has occurred since that
3 transition. It is well established was a very poor
4 transition with issues that occurred to individuals that
5 fell through the cracks, as we've already heard.

6 The Department of Aging looked into adapting some
7 federal funding through ADRC as the link program to assist
8 individuals with being navigated through the Medicaid
9 process. They adopted a few of the rules after consulting
10 with the federal government. And Area Agencies on Aging
11 were encouraged to utilize a program called Person-Centered
12 Counseling. This program did not increase the amount of
13 federal funds coming to the Pennsylvania Department of
14 Aging. It took funds that were currently coming in and
15 used some of those funds for Person-Centered Counseling
16 services specifically to assist individuals to navigate
17 this process. The reimbursement is \$110 per successful
18 individual enrolled into a waiver program.

19 Lehigh County currently averages 15 to 20 per
20 month. This funding does not adequately reimburse for the
21 time is spent assisting these individuals and families.
22 Area Agencies on Aging are mission-driven to advocate for
23 older adults to get the appropriate assistance to meet
24 their care and needs.

25 We see a need and we find a way to assist.

1 Funding is going to Maximus currently to assist with
2 enrollment from PA Department of Human Services and now
3 some federal funding from PA Department of Aging has been
4 adapted to assist with the same process. This right here
5 points to problems with the overall process.

6 Lehigh County also averages three cases per week
7 in our information referral unit that are problematic. We
8 receive phone calls from families and older adults that
9 have not been followed up with by Maximus, are confused by
10 the process, or are having varying issues. We problem
11 solve these cases and try to assist the families in getting
12 the appropriate information to the appropriate place by
13 resolving their issues.

14 So when Lehigh County caseworkers have assisted
15 consumers in various cases, we have found that Maximus does
16 not follow up in a timely manner like everybody has really
17 stated and that the process does not get to the county
18 assistance office or there's just a breakdown of a whole
19 bunch of different varying things that occur.

20 So everybody's mentioned all that. We've had the
21 same kind of issues here in Lehigh County. One of the
22 things I do want to stress in our region is we have a large
23 Spanish speaking population. And so with the Spanish
24 speaking population, we've experienced that Maximus does
25 not always send all the forms out in Spanish. The Spanish

1 speaking people that come to us seem to be more confused
2 after talking to Maximus and after dealing with that
3 process with them.

4 One of our bilingual caseworkers had to interpret
5 in Spanish for the consumer and the family when they were
6 meeting with Maximus on a case. That should not occur.
7 That should not happen. And so I really think that that's
8 an important part to this.

9 We also reached out to a bunch of other entities
10 in our county. One of our local hospice providers,
11 caseworkers told Lehigh County intake that it takes at a
12 bare minimum three months to get on a waiver program, but
13 it usually takes closer to six months for them to become
14 eligible. Their clients don't have this amount of time to
15 be without services. In addition, they don't have the
16 ability to process all the paperwork. And Maximus is not
17 very helpful with their clients. They feel that Maximus is
18 not responsive as they should be with hospice patients.
19 With Maximus, it is hard to get in contact with someone who
20 knows what is going on with their case, and they don't
21 follow up very quickly.

22 The local hospice caseworker said Pennsylvania
23 sends a message out that they want to assist individual
24 families to stay in their homes by providing long-term
25 service. However, working through this process with

1 Maximus sends another message when consumers have to reach
2 out to other agencies for assistance and finds it extremely
3 difficult to get these services.

4 We reached out to also some local hospital
5 caseworkers to get feedback on their recent experiences
6 with Maximus. These caseworkers in the hospital said that
7 Maximus continues to have long waiting periods with
8 processing for referrals. They have experienced long
9 waiting times on the phone to talk to someone at Maximus.
10 When they talk to an individual at Maximus, the individuals
11 don't know the case. They tell the caseworker they will
12 receive a return phone call in six to eight weeks. Often
13 these return calls don't occur from Maximus.

14 One of the most concerning issues with local
15 hospitals is the assessment piece that Area Agencies on
16 Aging currently perform. The same assessment is done for
17 Medicaid eligibility for skilled nursing facilities. Local
18 hospitals need this assessment to be done quickly so that
19 discharges can happen in a timely manner. If that doesn't
20 happen, then there are costs that would occur that would
21 not be covered by insurances. And my question is, who's
22 going to cover these costs?

23 The current process for assessment works well
24 with local hospitals because of the relationships that we
25 have developed at the local level. An outside entity

1 without a local presence is going to struggle with being
2 able to manage this assessment part. One of the local
3 hospital caseworkers was concerned about this process being
4 changed. They noted that these assessments need to be
5 completed quickly with the appropriate paperwork completed
6 accurately.

7 They feel that if Maximus is doing this part,
8 they will not be timely and it will drive healthcare costs
9 up at hospitals. They want this process to stay at the
10 local level where they can reach out and get a timely phone
11 call back to resolve issues. This will be better for
12 consumers and families.

13 And then I also want us all to understand that we
14 need to be fiscally responsible, that part of that is
15 choosing the correct contractor to provide services in a
16 quality fashion that serves our most vulnerable populations
17 well. More cost impacts can be incurred by the
18 Commonwealth if this important service isn't provided in a
19 timely, quality, and caring way. We all know that it costs
20 more money to serve someone in a skilled nursing facility
21 or a hospital. When a contractor of this service isn't
22 timely and responsive, then more individuals will stay
23 longer in hospitals and end up in skilled nursing
24 facilities. The most important part is that the older
25 adults and those with disabilities will not receive the

1 assistance they need without a quality contractor.

2 Thank you again for inviting me to come and
3 discuss this important issue with all of you.

4 CHAIRWOMAN BROOKS: Thank you very much, Mr.
5 Reed.

6 Next we will go to Najja Orr, President and CEO
7 of the Philadelphia Corporation for Aging. Mr. Orr.

8 MR. ORR: Thank you, Madam Chair. Good
9 afternoon, Chairpersons and Members of the House and Senate
10 Committees. Once again, my name is Najja Orr, and I'm the
11 President and CEO of the Philadelphia Corporation for
12 Aging, the designated AAA for Philadelphia.

13 PCA is a nonprofit AAA with a fiscal year budget
14 last year over \$86 million and a staff compliment of over
15 400. We've touched the lives of more than 140,000
16 consumers annually. The AAAs are the longstanding trusted
17 research and unbiased gateway to services for older adults
18 in their communities. Removing the assessment function
19 from AAAs will certainly affect the network's ability to
20 help older Philadelphians and those with disabilities
21 navigate what we find to be a confusing and complicated
22 Medicaid eligibility process.

23 From our perspective, the DHS decision has three
24 main implications.

25 One, putting older Pennsylvanians at risk.

1 Various aging organizations across the state have been
2 concerned about the proposed contract, long-term history of
3 failure to go the extra mile to assist older Pennsylvanians
4 overcome paperwork requirements and barriers to accessing
5 needed benefits.

6 When AAAs completed the enrollment function, we
7 would sift through boxes of financial documentation, often
8 making copies and mailing or hand delivering the packets to
9 the county assistance office and returning the original
10 documents to the consumer. Older Pennsylvanians,
11 particularly those assessed for nursing home level of care,
12 need a trusted partner that will take a more active role in
13 assisting them to navigate this complex process.

14 Older Pennsylvanians need trusted partners who
15 really know the community and can provide localized
16 response-based assistance that can respond flexibly to
17 critical consumer needs. This is particularly true for
18 those being assessed for nursing home level of care.
19 Helping older adults and their families figure out what to
20 do when long-term care services arise or are needed and the
21 challenges of supporting someone in their home is
22 absolutely necessary.

23 The failure to perform these functions properly,
24 including helping individuals to successfully overcome
25 complex paperwork and financial history requirements has

1 profound financial and access implications to necessary
2 care for older Pennsylvanians.

3 Utilizing public funding to provide this service
4 is analogous to contracting with first responders, police,
5 fire, and emergency medical services that address the acute
6 and the critical needs of consumers that can't wait for
7 necessary services and supports.

8 Two, the decision will also degrade the overall
9 capacity and capability of core aspects of the Aging
10 network. PCA completes approximately 30,000 initial and
11 annual level of care assessments annually. Removal of the
12 AAA network from this function, a principal advocate of
13 older Pennsylvanians as mandated in the Older Americans Act
14 will further degrade the holistic and person-centered
15 approach to navigating the long-term service and support
16 system.

17 And three, undermining coordination and creating
18 service silos. Perhaps the most important, the DHS
19 decision undermines a key strength of PA's Aging network
20 and overall commitment to a no wrong door approach to
21 accessing services and coordinating specific care for older
22 adults.

23 Despite DHS's apparent decision to select Maximus
24 for continued navigation of this function, AAAs have still
25 assisted consumers in need, helped completing the

1 application process through lottery-funded Aging and
2 Disabilities Resource Centers. This is where the ADRC
3 staff still provide hands-on assistance to older adults
4 that require additional support throughout this process.

5 In short, the decision will be detrimental to the
6 Commonwealth's overall efforts to coordinate effective and
7 efficient service with a growing older adult population in
8 Pennsylvania, particularly those at risk for more expensive
9 institutional care.

10 Thank you for your opportunity for sharing our
11 thoughts on this important proposed change and for your
12 continued support of your older adult constituents. I want
13 to continue to thank you for your continued support. And
14 we look forward to working with you to address these
15 challenges. Thank you.

16 CHAIRWOMAN BROOKS: Thank you very much.

17 I do have just two questions, and then we'll move
18 on to other members. I do want to remind the members,
19 please let Joan or myself know if you have any questions.

20 My first question would be first to Krista and
21 then perhaps to the other side of the state, maybe to Mr.
22 Orr or the county commissioner. From your experience, have
23 the complaints about Maximus lessened since they began
24 enrollment functions in 2016? First Ms. Geer.

25 MS. GEER: It's a hard thing to say. You know,

1 when you hear a drum beating all day every day, eventually
2 you don't hear it as much anymore. So I have to say that I
3 hear the same complaints, the same kind of issues. And
4 just like we heard from Tammy earlier, that paperwork thing
5 is a consistent -- it's always an issue.

6 So I would say there's probably not quite as
7 many, but they are still the same complaints.

8 CHAIRWOMAN BROOKS: That's unfortunate. Thank
9 you very much.

10 Mr. Orr, do you still see the same amount of
11 concerns and complaints that you did in 2016? Do you think
12 Maximus has made any progress in firsthand helping our
13 seniors or those with disabilities?

14 MR. ORR: Madam Chair, I'll echo the comments
15 that Krista made. It's hard to say whether the same number
16 of complaints have come in because now, as I mentioned a
17 little earlier, when we receive a concern or a complaint,
18 our ADRC staff just jump in and provide assistance when
19 technically we should be removed from the process, should
20 step back, and let Maximus handle it. We're having to
21 still jump in and provide additional supports to ensure
22 that we do our parts, navigate that process for the older
23 adults.

24 So are we receiving the same number? It's hard
25 to say. But I can say we are receiving the same type of

1 complaints about people not being served efficiently, not
2 receiving enough support walking through the process,
3 assistance with the paperwork, which we did very well.

4 CHAIRWOMAN BROOKS: Thank you very much. It's
5 startling to me that the county commissioner from Bucks
6 County had said that they had heard from over 800 people
7 that needed assistance. It's just so amazing to me that
8 after all these years there's just still a lack of
9 awareness of how Maximus is not doing the job that you
10 folks did.

11 And I might add, Maximus is being paid far more
12 than the AAAs ever were paid. Actually, Krista or any of
13 the panelists, can you talk about how much more Maximus is
14 being paid than what the AAAs are being paid or were being
15 paid?

16 MS. GEER: Gentlemen, you'll have to correct me
17 if I'm wrong because you guys were here longer than me, but
18 I want to say it was somewhere in the neighborhood of \$79
19 an enrollment for us, and it had to be a successful
20 enrollment. And I don't believe that Maximus is paid by
21 enrollment anymore. They are given a certain amount to
22 cover their six-month period. And I want to say it's,
23 like, 18 million for six months. Somewhere in that
24 ballpark.

25 CHAIRWOMAN BROOKS: Any other comments from any

1 of the other panelists on the disparity of what the AAAs
2 were paid and what Maximus, who's falling woefully short in
3 serving our seniors? Any comments from any of the other
4 panelists on the pay structure?

5 MR. ORR: I'll jump in, Madam Chair, to echo once
6 again Krista's comments. When we were completing the
7 enrollment function, it was under \$100 per successful
8 enrollment. And when the enrollment contract was first
9 implemented, they received just under \$1,000 per successful
10 enrollment. As Krista mentioned, since then, the
11 enrollment contract has shifted so it's now a flat rate for
12 the six-month or annual contract. But we were initially
13 thinking this was going to be a cost saving measure for the
14 Commonwealth. But seeing the disparity in the rate
15 structure, to us it was very clear that that was concerning
16 as well.

17 CHAIRWOMAN BROOKS: So it's my understanding that
18 the AAAs were paid \$79 for a successful enrollment, but
19 Maximus was paid at first \$1,000 and now approximately 18
20 million or at least millions of dollars. Is that accurate?

21 MR. ORR: And just a small point of
22 clarification, I think it was either \$95 or \$97 per
23 successful enrollment, so very close. And then when the
24 initial contract took place, correct, it was just under
25 \$1,000 per successful enrollment.

1 CHAIRWOMAN BROOKS: I mean, that is just
2 stunning.

3 MR. ORR: Astronomical.

4 CHAIRWOMAN BROOKS: And just disappointing. I
5 mean, I think all of us are aware of how precious those tax
6 dollars are and how hard the working families work. And
7 then they have to send some of their paycheck to Harrisburg
8 and to pay a company that is not even doing the job they
9 need to do for millions of dollars versus the AAAs were
10 being paid under \$100. Only in government. You can't even
11 make that up. So I will end there. That is just
12 staggering to me. And it's such a disappointment.

13 I want to add the General Assembly does not
14 authorize those contracts. It's the Department and the
15 Administration.

16 So with that, I'm going to ask Representative
17 Day, I believe, you have a question.

18 CHAIRMAN DAY: Thank you, Chair. I appreciate
19 the opportunity. My question is about efficiency. So I
20 really appreciate the testimony because today it was talked
21 about. I just want to bring up that these AAAs, in my
22 experience, they consider themselves partners with the
23 state in their mission. I guess I can direct my question
24 about efficiency to Mr. Orr, Mr. Reed, or really anyone.

25 But I really need to get some thoughts out on the

1 table of why I'm interested in efficiency. I used to be a
2 guy -- it would be a guy like me that would support bidding
3 for services as a regular check on government costs. But
4 how you write the RFP or the RFQ or a bid or whatever
5 acronym you want to call it is vital. And when I used to
6 do this, the other party, and rightfully so, they would
7 question and say, you know, Gary, these decisions can't be
8 just made only on cost.

9 So then I quickly adopted services have to be at
10 least equal or better when I do a function like this. And
11 then you see cost. And you do that through that RFP
12 writing process.

13 Now everything that I've come in contact with,
14 this process seems to -- not everything. Some of the
15 things seems to be backwards. And I want to just say many
16 times I go home and we go home and viewers watch this. And
17 they don't understand the importance. Why are four
18 committees together? Why are eight chairmen concerned
19 about this?

20 And I just want to kind of draw a box around this
21 question of efficiency because it leads towards a
22 measurement of services. What's the importance? The AAAs
23 do a clinical assessment. So the folks understand what
24 clinical assessment is. That means I'm going to pick one
25 idea, one service. A nurse comes into your home. Well,

1 government doesn't want to pay for that unless you need a
2 nurse to come in your home. That's a clinical assessment.
3 The AAAs were doing that.

4 The county offices would do a financial
5 assessment. If you could pay for it yourself, the
6 government doesn't need to pay for it. So that's
7 reasonable. All parties used to agree on that.

8 Then in 2016, the Aging Committee has experience
9 with Maximus. And in 2016, Maximus was put into the
10 process after the clinical assessment, after the financial
11 assessment. They'd sign you up for a program. They'd say,
12 hey, there's three MCOs to choose from -- or that's what it
13 is now. LIFE program. But they'd sign you up for what
14 provider would be best. And that's actually smart as an
15 administrator. Don't give them the whole kit and caboodle.
16 Bring them in. Try them out. See how they do with a small
17 piece.

18 Now, it's been testified by the AAAs that the
19 AAAs are still working with them and doing some of that.
20 Some of the questions were, why not outrage? Well, it's a
21 small piece. And I'm not sure that they thought that the
22 Administration would move toward to actually giving it to
23 the group that would be awarded this, to the group that
24 really didn't have a good track record when they were tried
25 out.

1 Now I sit there and I keep asking myself the
2 question. What are we supposed to do as legislators? And
3 I think about our role for legislative oversight. And it's
4 really incumbent upon us, and that's why I want to thank
5 profusely -- did I say that correctly, Chairman -- everyone
6 who's involved here because there's people on my committee
7 here today and online here as I look at the board. There
8 are a ton of Representatives online. And each one that I
9 talk to is concerned about this issue.

10 Many Members of the House have called me. People
11 from all over the state have called me as Chairman of the
12 House Aging Committee to talk to me about these things.
13 And this is rightfully on the top of our mind. So what do
14 we do going forward? I think a question about performance
15 efficiency -- I know it's our collective understanding that
16 you have a pretty high-performance rate at the AAAs. And I
17 wanted to learn more about that. I have a number of 99.75,
18 which is -- I want to see what that process is to rate to
19 get to that number because in the private sector it's hard
20 to get to 92 or 94 percent of good performance rate. So
21 I'm interested in that.

22 And I want to know if any of you have any
23 experience, can actually say there are metrics out there
24 that show that our services are high or whatever you do in
25 your individual AAAs to show your performance rates.

1 MR. ORR: I'll jump in and allow my colleagues to
2 respond as well. I agree 100 percent. It's efficiency and
3 I'll also add effectiveness. And we have been tracking our
4 performance since the FED level of care assessment has been
5 put in place. From my standpoint, we've done a stellar job
6 in making sure that we do our part to assess people for
7 level of care.

8 I can say, echoing comments that my colleague Mr.
9 Williamson said, we haven't seen the same level of
10 performance with Maximus, and that's what concerns us.
11 When we're assessing people and know they need to be
12 enrolled for such critical supports and services that
13 frankly keep people out of a nursing facility. So that has
14 been a concern to us, efficiency and effectiveness.

15 We can show statistically how our network has
16 done a stellar job. But with our counterpart Maximus as
17 the Independent Enrollment Broker, they haven't performed
18 until recently for years, for years with that same level of
19 performance.

20 MR. WILLIAMSON: I'll jump in and add that while
21 we've done very well recently, it wasn't this way five
22 years ago. So there was some pretty serious
23 self-reflecting that went on within the Aging network
24 because we understood our environment was changing. And if
25 we were going to perform the same way that we always did

1 that we ran a real risk of not being a viable partner as
2 these things evolved.

3 So this didn't get there overnight. This was
4 three years probably in the making prior to the FED process
5 starting. And then there was compliance standards that we
6 had to meet. Statistically, we've done very well with
7 those compliance standards. So I don't want to leave
8 people with the impression that this came out of nowhere,
9 there's some magic formula. There was a point in time
10 where we didn't do very well. You know, we reflected back
11 on that and understood to be a viable partner in this
12 system going forward that we had to change how we did that
13 work. Then we changed how we did that work.

14 MS. GEER: And just to clarify, Chairman Day, the
15 99.75 percent is how frequently we get our FED done in the
16 timely matter that we are required to. That's the metric.
17 We have 10 business days to complete that, and 99.75
18 percent of the time, we do that in that time frame or with
19 an allowable exception. Perhaps family members want to be
20 there and they can't and so they ask us to push it out a
21 little further.

22 CHAIRMAN DAY: Thank you very much. I really
23 appreciate your answers. And if there are other metrics
24 that you guys manage by -- and I appreciate one of the
25 previous answers was that we had some soul searching and

1 changes. Maybe it could have been possible this process
2 might have helped that along. But any metrics that you
3 have, would you provide that to Chairwoman Brooks or my
4 office, whatever is easiest. You can go through Chairwoman
5 Brooks' office if that's easier. Thank you very much.

6 CHAIRWOMAN BROOKS: Thank you, Chairman Day.

7 Chairman Samuelson.

8 CHAIRMAN SAMUELSON: Thank you, Senator. We've
9 heard a lot today about how the Area Agencies on Aging and
10 the Centers for Independent Living used to do both the
11 assessment and the enrollment until that was split five
12 years ago and Maximus is supposed to do the enrollment
13 process.

14 We have a lot concerns hearing these examples
15 from around the state that even though Maximus is supposed
16 to be doing the enrollment people are still calling the
17 Area Agencies on Aging for help. 842 phone calls in Bucks
18 County. Phone calls in Philadelphia. Calls every single
19 week in Lehigh County in the Lehigh Valley where I'm from.

20 So my question, maybe I'll start with JR Reed
21 from the Lehigh Valley, from Lehigh County, is if the
22 entire process would be handed over to Maximus and people
23 would still be calling for help, would this kind of
24 outsourcing of the entire enrollment process affect the
25 staffing levels at the Area Agencies on Aging and the

1 Centers for Independent Living? And if those staffing
2 levels were reduced, wouldn't that decrease the ability of
3 the Area Agencies on Aging to help folks navigate -- having
4 a local presence to help folks navigate this process?

5 MR. REED: Thank you, Representative Samuelson.
6 Yes. Here at Lehigh County, we feel that would impact us,
7 probably about five casework staff and maybe a supervisor.
8 And that would reduce our levels. And I think there's a
9 couple things that would happen. So we would have less
10 individuals to help assist through this process that we
11 currently are.

12 And I think the other part of is right now
13 because we do the assessment process and that whole process
14 with assessment and the other parts of getting on CHC is in
15 a different database, we would be entirely cut out of that
16 whole process. Therefore, if a constituent would call your
17 office and not know where they're at and you reached out to
18 our office, at that point in time we would have a very
19 difficult time, I think, finding out where they're at in
20 that process. It would hinder us being able to assist with
21 that individual through the process, which I find very,
22 very concerning considering what we've all demonstrated to
23 you and what we're seeing right now.

24 So I think that that would impact this greatly by
25 us being cut out of the assessment process.

1 CHAIRMAN SAMUELSON: Thank you.

2 CHAIRWOMAN BROOKS: Does that conclude your
3 questioning, Chairman Samuelson?

4 CHAIRMAN SAMUELSON: Yes. Very concerned.
5 That's six positions in one county out of our 67 counties.
6 And that would have a tremendous impact on the ability to
7 help folks at the local level. Thank you.

8 CHAIRWOMAN BROOKS: Thank you.

9 Senator Ward?

10 CHAIRWOMAN WARD: My question is for Steve
11 Williamson or any of the AAAs. Can you give us an idea of
12 how long it took individuals to be enrolled into services
13 before Maximus and then with Maximus? Can you give us an
14 idea or some specifics if you would?

15 MR. WILLIAMSON: I'll start and then ask my
16 colleagues to bail me out where I might be a little
17 shortfalling with my answers. It's a little bit hard
18 because the processes have changed. It's not exactly an
19 apples-to-apples comparison because of some of the changes
20 that have happened. But we were in that 50 to 60 day range
21 from start to finish, and that included everything from
22 assessment, to work with the CAO, to the actual eligibility
23 determination. If I've mischaracterized that, if one of my
24 partners in crime could bail me out, I would appreciate it.

25 But what we saw is less than two months. That

1 doesn't sound real quick, but I think compared to where
2 we're at now and with all the i's that had to be dotted and
3 all the t's to be crossed, that was relatively expeditious.
4 And we provided that hands-on assistance that folks needed
5 to push that over the finish line.

6 MS. GEER: This is Krista. And I just want to
7 build off of what Steve said. And he's right. And the
8 only metrics we have at this point for what Maximus does,
9 they're only counting the people that are actually enrolled
10 to tell you how many days it took those people. It doesn't
11 take into consideration the people who didn't get enrolled
12 in that month whereas our metrics were from the beginning
13 of the process to the end of the process. Theirs are just
14 based on monthly -- how long did it take those people in
15 that month to be enrolled.

16 CHAIRWOMAN WARD: That lets a big sector of
17 people out of the equation, out of the reporting.

18 MS. GEER: Agreed. Yes.

19 CHAIRWOMAN WARD: All right. Well, thank you.
20 Thank you so much.

21 CHAIRWOMAN BROOKS: Senator Ward, does that
22 conclude your questioning?

23 CHAIRWOMAN WARD: It does, Madam Chair.

24 CHAIRWOMAN BROOKS: Thank you.

25 Senator Schwank.

1 UNIDENTIFIED VOICE: Senator Schwank has stepped
2 away. I think she had another appointment. Sorry.

3 CHAIRWOMAN BROOKS: Okay. Thank you. Senator
4 Stefano.

5 SENATOR STEFANO: Thank you. Just wanted to make
6 a couple comments. I really don't have any questions. I
7 just want to thank, of course, all the Chairs of the Senate
8 and House Committees for holding this hearing. Special
9 thanks to our testifiers today. You know, sharing your
10 experience means a lot and having a joint hearing of this
11 size is proportional to the gravity of the situation.

12 Now, our Administration here talks about being a
13 government that works. I don't think this vendor is
14 working very well. I believe in government transparency,
15 making changes when they need to be made, and then
16 listening to hear if those changes were effective or not.
17 And I think what we've heard today is they're not very
18 effective. We also heard that centralized enrollment
19 services just don't work. And we hear that personalized
20 care does.

21 And I wanted to make that point talking with my
22 AAAs in here in Fayette County and Somerset County, they
23 are beside themselves as we heard in the testimony today
24 that they cannot provide the services they need to make.
25 They are very frustrated as well.

1 So I just ask that these Committees and Chairs
2 continue the pressure on the Administration, and we will
3 get these changes made. Again, thank you for this hearing.
4 I had talked to my AAAs about it, and they were listening
5 in today to give you their support as well. Thank you.

6 CHAIRWOMAN BROOKS: Thank you, Senator Stefano.

7 Any other questions or comments from the members?

8 I would like to thank all of the testifiers today
9 for sharing your stories and challenges but also for your
10 passion to care for our loved ones, our elderly, and those
11 with disabilities. It's my hope and I think many of our
12 hopes that the Department and the Administration hear the
13 voices of our most vulnerable in our communities and decide
14 that perhaps Maximus is not the most meaningful way to help
15 our loved ones within our communities and throughout the
16 state of Pennsylvania and that our local AAAs are there.
17 They perform and give personal service. They know these
18 folks. They know the families and they know the
19 communities and the resources that are also available to
20 our most vulnerable.

21 So with that, I would like to thank Chairs
22 Haywood, Ward, Collett, Day, Samuelson, Farry, and Kinsey
23 for your leadership in bringing all of these committees
24 together as well as the Representatives and Senators for
25 joining us today and your interest in this conversation.

1 I hereby adjourn this joint public hearing of the
2 Senate and House Human Services and Aging Committees.

3 Thank you and enjoy your day.

4 (Hearing adjourned at 2:43 p.m.)

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C E R T I F I C A T E

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