MINUTES OF THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE, STATE OF CALIFORNIA



<u>2.0</u>

9:00 a.m. being the time set for Beilenson Hearings.

Bill Luna, Executive Officer, gave opening comments.

The following individuals spoke in regards to the budget.

Susan Harrington
Dr. Richard Rajaratnam
Christina Bivona
Dr. Tim Watson
Penny Slater
Jena Jensen
Lawrence Waterman
Marina Poulson
Ann Vesser

I hereby certify entered on	y that the foregoing is a full true, a May 16, 2011	nd correct copy of an order made and of Supervisors Minutes.
(seal)	Dated: May 16, 2011	seal of the Board of Supervisors the Board of Supervisors, in side, State of California. Deputy
	() ,	ACENDA NO

AGENDA NO. **2.0**

XC:

Harper-Ihem, Kecia

From: Sent: Mora, Susan [SMora@rivcocha.org] Wednesday, May 18, 2011 8:27 AM

To:

Harper-Ihem, Kecia

Cc:

Mack, Sarah S; Harrington, Susan

Subject:

FW: CCS Hearing

Attachments:

Henson letter.doc; Susie &Nick.jpg; Nick Dec. 2009.jpg

Hi Kecia,

Attached are the letters and photos that we received before 10AM on Monday.

Thank you for distributing them to the supervisors.

Susan

From: Lennan, Susan

Sent: Tuesday, May 17, 2011 5:18 PM

To: Mora, Susan

Subject: RE: CCS Hearing

Hi Susan,

I received the letter in my email in box at 9:55 am and the photos at 9:56 am on Monday 5/16/11. They are attached.

Thanks, Sue

From: Mora, Susan

Sent: Tuesday, May 17, 2011 8:44 AM

To: Lennan, Susan

Subject: FW: CCS Hearing

Sue, please forward the letter to me. Can you document the time that it was received?

Susan

From: Harper-Ihem, Kecia [mailto:KHarper-Ihem@rcbos.org]

Sent: Tuesday, May 17, 2011 8:40 AM

To: Mora, Susan

Subject: RE: CCS Hearing

Good Morning,

Yes, it was nice to meet you. You can forward the letter to me, however, if it was received after the close of the hearing, it will be noted that way.

Thanks,



Kecia Harper-Ihem

May 16, 2011

To: Riverside County Supervisors

From:

Susan Henson

2675 Jefferson Circle Corona, CA 92881 (951) 734-8683

Dear Riverside County Supervisors,

Today I am writing to you in response to the proposed budgetary cuts to the CCS program you are voting on today. My name is Susan Henson, and my son Nicholas, 13, has been involved with California Children's Services since he was a small baby, 3 months old. Nicholas has Cerebral Palsy, a seizure disorder and cortical blindness, and I am raising him on my own. He is non-ambulatory so he has needed to use a wheelchair since he was three. CCS has been instrumental in so many areas of our life, and I really don't know how, without the support, training, and financial help of the organization how Nicholas and I would have managed. The Corona MTU unit have been invaluable to me - always available to help answer questions related to Nick's equipment, physical therapy (a very important issue that needs constant monitoring and diligence) and daily living. Nick is now over 100 pounds, so I have needed advice and the assistance of CCS to help with equipment to help me life and bathe Nick.

I am writing today just to say that without CCS, I do not believe I would have been able to afford to take care of Nick on my own and raise him at home. When I heard about the proposed cuts, my heart sunk because I think of all the children who will be harmed by this, denied the essential services that make it possible for families to take care of them. I understand the severity of the financial situation of the state, but logically, I believe this is a short term decision made to quickly eliminate dollars off the bottom line. But the long term affect of this decision will be increased costs in the long run. And more importantly, by not giving families the resources and tools that are necessary to take care of disabled children at home, some of these children may have to be placed outside the home. The thought of not raising my son at home completely breaks my heart and I know this is feeling is shared by Moms and Dads who are devastated by the thought of not having all their family together. Please take these children and families in your mind as you make your decisions today.

Kindly,

Susan Henson

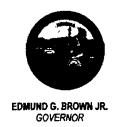
Bielenson 2.0 05/16/2011







State of California—Health and Human Services Agency Department of Health Care Services



May 12, 2011

Bob Buster, Chairman Board of Supervisors Riverside County County Administration Center 4080 Lemon Street Riverside, CA 92505

Dear Chairman Buster:

This is in response to an announcement by Riverside County of a public hearing to be held by the Board of Supervisors on May 16, 2010, regarding a proposal to limit health care services for low income children served by the Riverside County California Children's Services (CCS) Program. I understand that Riverside County faces severe budget constraints and funding shortfalls similar to those that are being experienced by local and State government programs throughout California. The budget crisis has resulted in service reductions in government programs across the State. These reductions have created inconvenience and hardships for the citizens served by many programs. My concern is that the proposed Riverside County action could have severe consequences resulting from increased morbidity and mortality for children and adolescents entitled to services through the Riverside County CCS Program.

Existing law governing the CCS Program establishes the following mandates applicable to Riverside County:

- Section 123845 of the Health and Safety Code (H&SC) requires Riverside County to administer the CCS Program for residents of the county.
- Section 123895 H&SC requires Riverside County to determine CCS Program eligibility for children suspected of having a CCS condition.
- Pursuant to Section 42131 and 42132 of Title 22 California Code of Regulations
 (CCR), if Riverside County declines to authorize services for a CCS eligible child,
 the county must issue a Notice of Action (NOA) to the child's family.

05/14/2011

- If the family appeals the county decision specified in the NOA, pursuant to Section 42140 et seq., Title 22 CCR and requests continuation of services pursuant to Section 42321, Title 22 CCR, Riverside County must continue the authorization of CCS services for the CCS child pending the outcome of the appeal.
- Pursuant to Section 17000 et seq. of the Welfare and Institutions Code a California county is the 'health care provider of last resort' for its residents. If the Riverside County CCS Program declines to authorize medically necessary services for a CCS eligible child, then Section 17000 could place 100 percent of the responsibility for providing and funding the necessary care on the county with no direct state financial participation. If the county covers the child's care through CCS it can recover 50 percent of the cost of care from the State, rather than assume 100 percent of the cost of the care under Section 17000.

There is no authority in existing law for Riverside County to refuse to accept new referrals to the CCS Program or deny new applications for CCS services for a child who is a resident of the county. Additionally, there is no authority for Riverside County to deny services for a CCS eligible child or adolescent who is no longer eligible for Medical or enrolled in Healthy Families.

If Riverside County implements the proposed reduction of county funding for the CCS Program, the county must continue to fulfill its obligations to its CCS clients.

Sincerely,

Louis R Rico, Chief

Systems of Care Division

cc: Susan Harrington, M.S., R.D., Director

Department of Public Health

Riverside County

Health Administration Building

4065 County Circle Drive

Riverside, CA 92503

Mr. Buster Page 3 May 12, 2011

cc: Susan Mora, Administrator California Children's Services Program Riverside County 19769 Hole Avenue, Suite 220 Riverside, CA 92505



State of California—Health and Human Services Agency Department of Health Care Services



May 12, 2011

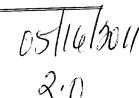
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Rocio Aceves (mother) Remberto Mancilla (patient) 50660 Eisenhower Dr., #1514 La Quinta, CA 92253 (760) 296-1739

CCS Program

May 12, 2011

To Whom It May Concern:

In the first place, I would like to thank this stupendous program for all the benefits that are provided to all the children with disabilities.

My son, Remberto Mancilla, is one of those children. I am very happy with all that has been done for him. Without your help these children would not progress or get ahead in life. I would like this program to stay the same as it is today. Now that my son is receiving therapy I am concerned that any change would affect his progress.

Also, I want to thank CCS for providing my son's wheelchair and for covering all neurology testing that he needed. Also, thank you for the services of the orthopedic and pediatric doctors. Without CCS's help all the families that have children with special needs could not progress without this program.

Thank you,

Rocio Aceves

Translated by Virginia Rodriguez.

5/12/11

05/14/2011

Rocio Aceves (Moma)
Remberto Moncilla (Paciente)
50660 Eisenhower Dr. #1514
La Quinta, Ca. 92253
(760) 296-1739

CCS Programa:

Por medio de la presente en primer lugar quiero agradecer a este estupendo programa por todos los beneficios que brinda a todos los niños discapacitados.

la que mi hijo Remberto Moncilla es uno de ellos, yo estoy muy contenta con todo lo que hon hecho por el, ya que sin su ayuda estos niños no progresarian igual en su vida ni saldnan adelante. Quisiera que este programa siguiera lgual como hasta ahora ya que mi hijo esta en reabilitación y areo que evolquier Combio afectoria su progreso.

Tambien muchisimas gracias al CCS por proporcionarle su silla de ruedas a mi hijo y por eubrir todos sus estudios Neurologicos que ha necesitado, por la otención de los Ortopedistas y de su Pediatra, ya que sin su ayuda todas las familias que tenemos ninos especiales no podríamos salir adelante sin este Programa CCS.

Pocio Acares



Pediatrics

Highland, California 92346

(909) 425-3939 FAX: (909) 425-5612

7223 Church Street, Suite C1

May 10, 2011

Dear Riverside County Board of Supervisors,

I am Dr. Allison Hensley, a Board Certified General Pediatrician who has been involved with CCS since 2000. As a Pediatric Medical Consultant, I provide medical case management in the form of Pediatric Conferences at the Medical Therapy Units. CCS provides diagnostic & medical treatment services, medical case management, and physical & occupational therapy services to children with CCS eligible medical conditions until the age of 21. Hundreds of children and their families rely on these services; services that are medically necessary.

As a Pediatric Medical Consultant, I provide my knowledge and expertise in the overall assessment of many children who are eligible for medical therapy and/or equipment needs. The Pediatric Conference assessment makes sure that the children and their medical conditions are being properly managed and include assessment of their medical, therapy, and psychosocial needs, as well as, physical exams, review of medical records/reports, and referrals to specialists as deemed necessary and appropriate.

I am gravely concerned about the current proposed cuts/changes to the current CCS Program. The proposed cuts to CCS and its services directly affect many medically fragile children. Some of those services include equipment/DME needs, medications, surgeries, and physician care/follow-up. Eliminating these services will create more medical problems which will require more medical expenses in the long run. Denying new applications to some children will greatly affect them, due to the inability to find qualified medical providers to care for them. Delaying reimbursement of medical providers will have a domino effect in the medical care of almost every child enrolled in CCS. Many providers will not be able to continue providing their services if they are not being reimbursed and where will that leave the children who rely on their services? Imagine a child with severe spine or extremity deformities who needs to see



Pediatrics

7223 Church Street, Suite C1 Highland, California 92346 (909) 425-3939 FAX: (909) 425-5612

a specialist that would provide surgical repair/correction. If that specialist is no longer able to provide that service, that child would continue to suffer needlessly. Or a child who is not able to walk due to cerebral palsy and is dependent on a wheelchair for mobility; what if the wheelchair needs repairs and the company no longer provides services. How will that child be transported to/from school (due to safety issues, a school bus would no longer provide this service) or be able to get around in his or her community? What about the child with a chronic medical condition such as diabetes, leukemia/lymphoma and sickle cell disease? Without Specialty Team Centers, who would provide the highly specialized care that they currently are getting through the many CCS medical providers? These are just a few examples of the problems many children would face with the current proposed cuts. These cuts will definitely create more pain and suffering to a lot children and cause more economic hardships on those families, many of whom already cannot afford this specialized medical care.

I believe that these children deserve the right to have access to ALL medically necessary services and I would ask you to reconsider the current proposed cuts to the CCS Program. Although I understand the status of our State's and Riverside County's budget deficits, I am very concerned that the full effects of these cuts haven't been fully addressed. The ramifications towards our most medically fragile children in the county are of utmost importance and it is imperative that we continue to provide them with these services.

Thank-you for your time and consideration in this important matter.

Sincerely,

Dr. Allison C. Hensley

Submit request to Clerk of Board (right of podium), Speakers are entitled to three (3) minutes, subject Board Rules listed on the reverse side of this form.					
SPEAKER'S NAME: Ann Vessey (RCO)					
Address: (only if follow-up mail response requested)					
City:Zip:					
Phone #: 226 - 6476					
Date: Agenda #					
PLEASE STATE YOUR POSITION BELOW:					
Position on "Regular" (non-appealed) Agenda Item:					
SupportOpposeNeutral					
Note: If you are here for an agenda item that is filed for "Appeal", please state separately your position on the appeal below:					
SupportOpposeNeutral					
I give my 3 minutes to:					

Submit request to Clerk of Board (right of podium), Speakers are entitled to three (3) minutes, subject Board Rules listed on the reverse side of this form. Address: (only if follow-up mail response requested) City:_____Zip:____ Phone #: PLEASE STATE YOUR POSITION BELOW: Position on "Regular" (non-appealed) Agenda Item: ____Support ____Oppose Note: If you are here for an agenda item that is filed for "Appeal", please state separately your position on the appeal below: ___Support ____Oppose Neutral

I give my 3 minutes to:_____

Submit request to Clerk of Board (right of podium),

Speakers are entitled to three (3) minutes, subject Board Rules listed on the reverse side of this form.				
SPEAKER'S NAME: Christina BIVONA Telles				
Address: (only if follow-up mail response requested)				
(only if follow-up mail response requested)				
City: Riverside zip: 92501				
Phone #: 951-222-2284				
Date: 6-16-41 Agenda # 20				
PLEASE STATE YOUR POSITION BELOW:				
Position on "Regular" (non-appealed) Agenda Item:				
Position on "Regular" (non-appealed) Agenda Item:SupportOpposeNeutral				
SupportOpposeNeutral Note: If you are here for an agenda item that is filed for "Appeal", please state separately your position on				

Submit request to Clerk of Board (right of podium), Speakers are entitled to three (3) minutes, subject Board Rules listed on the reverse side of this form.

SPEAKER'S NAME: JIM Watson, M.D.					
Address: (only if follow-up mail response requested)					
City: Perris zip: 92373					
Phone #: 9515323593					
PLEASE STATE YOUR POSITION BELOW:	Date:				
PLEASE STATE YOUR POSITION BELOW:					
LEASE STATE YOUR POSITION BELOW:	Position on "Regular" (non-appealed) Agenda Item:				
Position on "Regular" (non-appealed) Agenda Item:					
Position on "Regular" (non-appealed) Agenda Item:	Note:				
Position on "Regular" (non-appealed) Agenda Item: SupportOpposeNeutral Note: If you are here for an agenda item that is filed or "Appeal", please state separately your position on	Note: for "A the ap				

Submit request to Clerk of Board (right of podium),

Speakers are entitled to three (3) minutes, subject Board Rules listed on the reverse side of this form. SPEAKER'S NAME: Penny Slater Address: 41791 Laurie LA.

(only if follow-up mail response requested) City: Hemet zip: 92544 Phone #: 951-929-9333 Date: 5/16 Agenda # 2.0PLEASE STATE YOUR POSITION BELOW: Position on "Regular" (non-appealed) Agenda Item: ____Support ____Oppose Neutral **Note:** If you are here for an agenda item that is filed for "Appeal", please state separately your position on the appeal below: ___Support ____Oppose ____Neutral

I give my 3 minutes to:______

Submit request to Clerk of Board (right of podium), Speakers are entitled to three (3) minutes, subject Board Rules listed on the reverse side of this form.

SPEAKER'S NAME: Jena Jensen				
Address: (only if follow-up mail response requested)				
City:Zip:				
Phone #: 714 · 5/6 - 4206				
Date: 5-16-11 Agenda #				
PLEASE STATE YOUR POSITION BELOW:				
Position on "Regular" (non-appealed) Agenda Item:				
SupportOpposeNeutral				
Note: If you are here for an agenda item that is filed for "Appeal", please state separately your position on the appeal below:				
SupportOpposeNeutral				
I give my 3 minutes to:				

Submit request to Clerk of Board (right of podium),

Speakers are entitled to three (3) minutes, subject Board Rules listed on the reverse side of this form. SPEAKER'S NAME: Lawrence Waterman Address: 15150 Spinnaler Dr.

(only if follow-up mail response requested) City: Lake Elsinore zip: 92530 Phone #: 95\ 639 3389 PLEASE STATE YOUR POSITION BELOW: Position on "Regular" (non-appealed) Agenda Item: Oppose ___Support Note: If you are here for an agenda item that is filed for "Appeal", please state separately your position on the appeal below: ___Support _____Oppose Neutral

I give my 3 minutes to:_____

Submit request to Clerk of Board (right of podium), Speakers are entitled to three (3) minutes, subject Board Rules listed on the reverse side of this form.

SPEAKER'S NAME:	MARINA	7 POULSON
Address: 5781 p	7- <i>PLE CR</i> -up mail respon	osc D2.
City: RIVERSIE	E Zip:	92507
Phone #: 951 786	7609	
Date: 5/16/11	Agenda #	2
PLEASE STATE YOUR P	OSITION BEL	.ow:
Position on "Regular"	(non-appeale	ed) Agenda Item:
Support	Oppose	Neutral
Note: If you are here for "Appeal", please stathe appeal below:	_	
Support	Oppose	Neutral
I give my 3 minutes to):	