

OPSA Meeting

12/18/25

Welcome/Roll Call- Deb Goda

Opening Remarks -Bryan Dooley

Bryan Dooley, OPSA Co-Chair said he hasn't been at last few meetings. He said Olmstead is more important now than when it was first decided and thanked everyone for their commitment and for being here. He said, "Let's get to work."

Housing Strategic Plan Updates - Josh Walker, NCDHHS

- Josh Walker is the Olmstead Housing Director for North Carolina Department of Health and Human Services (NCDHHS). He thanked everyone for being here today. He talked about the Strategic Housing Plan and hopes that everyone is engaged.
- The Strategic Housing Plan was launched in 2024. It was built on the principles of Olmstead, leveraging the strengths we had in housing in this state.
- For the Development group, the first goal is more permanent supportive housing. If you are following HUD at the federal level, this is more important than ever before. We leverage our relationship with the North Carolina Housing Finance Agency (NCHFA) in this area. We are doing an assessment to determine how much affordable housing we have in North Carolina. The Development workgroup submitted remedial preference to HUD for DD – this would allow Public Housing Authorities to prioritize people with Developmental Disabilities for housing opportunities.
- This plan was shared with the Interagency Council for Coordinating Homeless Programs (ICCHP) and developed by SMEs and also went before Olmstead Steering Committee. Housing leadership committee has reviewed it.
- Next area is non-development, which is about accessing housing and staying in housing once you have it. This includes lowering barriers, streamlining resources, housing navigation, landlord supports, tenancy supports. This group is also looking at how peer support services with housing activities and worked with MCO using mainstream vouchers. NCHFA is receiving technical assistance from the VERA institute on tenant selection plans and how they can be more tenant-friendly - for example, it could help people who are dealing with the criminal justice system to secure housing.
- The Services workgroup is identifying quality housing support services. One thing they are focused on is what is involved with housing and tenancy support services – from beginning to end of the tenancy journey and what's needed to keep people in housing. Working with different disability groups to determine what's similar and different between the groups. Found that there is a lot more in common than completely different.
- There are also groups that work on coordinating housing and partnership. They are working on alignment across the state in different state agencies, engagement and partnerships.

- The Development workgroup submitted remedial preference to HUD for DD – this would allow Public Housing Authorities to prioritize people with Developmental Disabilities for housing opportunities. The group is also working on gaps and needs analysis - what do we have currently in housing and what do we need.
- These work groups meet on an ongoing basis at least once per month.
- We have developed 755 new housing opportunities in year one – we are ahead of schedule.
- Corey Dunn noted that she was hoping that the slides would tell her what you hope to do with targeting key with respect to IDD.
- Josh discussed using targeting key program to meet housing needs for people with disabilities. Largest investment that we have in affordable mcos moved people in to not lose the units to the market. That's expanded to all four MCOs. In 2026, we will continue that work; MCOs and the Division of Aging are working collaboratively on who is taking lead on each of the properties. The housing pilot group met last week to discuss what we are doing well and what we can do better.
- Corye noted that she understands that there are procedural barriers and said it would be helpful if we could see a description of that work in this space since people in this space don't understand how helpful this could be. Taley supported the request for a training. We agreed to bring a presentation on the Targeting Key Program to the next meeting.
- Josh noted that we are working on the crosswalk of all housing services and tenancy supports to show what we are doing and what we are missing and what the impact would be if we lost any of the programs.
- Josh noted that there was an Executive Order to restart the ICCHP. The first meeting was held at the new building in Raleigh. It went well and they will meet again in January.
- Talley Wells asked about training on key.
- Gloria Garton asked if the training component includes training to public housing authorities to make their application and orientation process more plain language.

Olmstead Quarterly Report- Rebecca Boss. TAC

- Rebecca Boss is with the Technical Assistance Collaborative (TAC). This group helps us with our Olmstead planning. She noted that the new format for the Olmstead quarterly report highlights priority areas but still shows progress in the other areas in the appendix, just in less in depth.
- This quarter focused on Priority Area 3 - Addressing Gap in Community Based Services with a focus on Engaging people with disabilities and their families as partners. Some of the topics Becky spoke on were:
 - NC –PAL – has helped more than a million kids.
 - Family Respite Pilots – NCDHHS provided \$3 million and partnered with Trillium Health Resources. Two new 'Henry's House' programs provided through Victory Junction and Easterseals PORT Health will offer short stays for children with disabilities.

- High-Fidelity Wraparound: Provides a team that works with families to help children with mental health challenges stay in the home, supporting children and families to reach their goals. For each child served in this program, the state saves \$33,000.
- Intensive Alternative Family Treatment Program (IAFT) - NCDHHS contracts with Rapid Resources for Families (RRF) to expand IAFT — a program for children with needs that make it hard to find a safe, supportive place to stay. IAFT helps keep these children out of institutions. IAFT offers family-based services in a therapeutic foster home with counseling and other mental health supports. RRF created 27 Treatment Parent Specialist homes, exceeding the original goal of 25.
- Mobile Outreach, Response, Engagement, and Stabilization (MORES): MORES sends trained teams into the community to help children aged 3 to 21 who are in crisis. MORES now works in 20 counties and has secured future funding.
- Behavioral Health Urgent Care: Trillium Health Resources announced \$3.8 million in funding to open a new center in Greenville, providing a safe place for mental health care, open 24/7. This Behavioral Health Urgent Care center, run by Integrated Family Services, will be open to people from all parts of the state with any diagnosis, including mental illness, I/DD, substance use disorder, or TBI.
- The Somethings App: A free app for teen mental health support, connecting them to teen mentors. Over 400 teens in 54 counties are using the app.
- Improving the 988 Suicide and Crisis Lifeline. This is a free phone number that people can call or text if they need help. When a person calls 988, trained helpers listen and give support. They can also send help if needed.
 - About 11,443 people use 988 every month.
 - 1 in 3 people say 988 saved their life or the life of someone they love.
 - Most calls are about family, other relationships, or personal problems.
 - Over 50% report they learned ways to calm down and cope.
 - Almost 90% say 988 is important for their community.
 - Over 80% would tell others to use 988.
 - Teens ages 13–17 call the most.
 - Before contacting 988, users were feeling stressed, worried, and afraid. After contacting 988, people reported feeling hopeful, energized, and thankful, with fewer negative emotions.
- Sobriety Treatment and Recovery Teams (START) Program: Parents' use of alcohol and other drugs is the primary reason children are placed in foster care. START helps keep kids safe at home while their parents get treatment for their substance use. In Q3, six counties are implementing START. Funding for this program has now been approved as part of the Title IV-E prevention services program.
 - In 2017, North Carolina's Buncombe County became the second community in the nation to complete the START certification process. Since then, its START program has handled 198 cases, with 165 of them now closed.
 - The 165 closed cases in the Buncombe County START program served 252 children.
 - 179 of those 252 children (71%) were either not removed from their parents' care or were reunited with their parents.

- In 108 of the closed cases (65%), at least one of the child’s caregivers reached their recovery goals.
- Olmstead planning – feedback can be done by email or survey as well as community engagement sessions.
- Ongoing Community Engagement Activities:
 - Olmstead Plan Stakeholder Advisory Committee: OPSA meets four times per year and helps guide the work of the Olmstead Plan by providing different points of view and expertise. In each meeting there is a time for the public to share comments.
 - State Consumer and Family Advisory Committee (SCFAC): “SCFAC serves as the representative voice of consumers and families with mental health, substance use, intellectual/developmental disabilities, and traumatic brain injury. It advises DMHDD/SUS, other NCDHHS agencies, and the General Assembly. SCFAC gives consumers a way to have input on the planning and management of the public system.” These meetings are held monthly. SCFAC is not focused only on Olmstead. There are also local CFACs.
 - Brain Injury Advisory Council (BIAC): BIAC looks at the causes and effects of brain injuries and gives advice to the divisions, the General Assembly, and the Governor on how to plan, fund, and provide services to people with brain injuries. The BIAC meets every other month.
 - Other Councils and Committees Relevant to Services for People with Disabilities
 - The Division of Child and Family Well-Being brought together a [Transformation Team](#) made up of many different groups, including people with lived experience, to advise on the action plan.
 - The [State Rehabilitation Council](#) works with the Division of Employment and Independence for People with Disabilities to give all people a way to have input on the direction of vocational rehabilitation. The full council has public meetings every three months, and different committees meet monthly.
 - The Division of Aging (DA) has many community advisory councils and committees that hear from the community about what’s important to older adults. Many of the topics discussed are connected to Olmstead. Information about each council or committee can be found on the [DA website](#).
 - The Division of Health Benefits (DHB) also hosts several councils, committees, and workgroups, many relevant for people with disabilities, including Money Follows the Person and the Personal Care Services Committee.

Olmstead Planning Updates- Tamara Smith, NCDHHS

- Dr. Tamara Smith is the Associate Director for Olmstead at NCDHHS.
- Dr. Smith noted that we will be moving from a 2-year plan to a 5-year plan. We intend to streamline the plan, use plain language, connect to other strategic plans within the Department, reduce duplicative reporting, and hope to elevate some strengths and accomplishments. We want this to be a unifying effort to ensure a shared vision on foundational principles,
- The community engagement (webinars, in person meetings, and survey) are to reach agreement on our Foundational principles and Priority areas for the next plan.
- The proposed Foundational Principles are:
 - People with disabilities:
 - Can make their own choices and get support that respects them.
 - Are part of the community — living, working, and doing things they enjoy.
 - Get the right help at the right time and are treated fairly.
 - Live in places that are easy to get around, affordable, and welcoming.
 - Systems that help people with disabilities:
 - Work together and are easy to use at all stages of life.
 - Are fair, responsible, and support families and caregivers.
- The proposed Priority Areas are:
 - Housing stock and housing support services
 - Crisis, diversion, community stabilization
 - Long-term community-based services and supports
 - Workforce
 - Data and quality assurance
 - Employment
 - Transitions back to the community
 - Integrated health care
- We completed six virtual CE sessions; 7th session is scheduled for 1/7/26. The Top two barriers cited during virtual CE sessions were:
 - There's not enough money to fund the appropriate services and supports needed in NC for individuals with disabilities (e.g., emergency respite, housing for transitions, etc.)
 - Not enough workers to provide services for individuals with disabilities
- We received 51 responses to the CE survey – 50% were caregivers; the other 50% were mix of providers, PWD, and advocates. The most common themes from the survey were:
 - Need more choice incorporated into Olmstead
 - Self-determination
 - Involvement in decision-making
 - Need more waiver slots
 - Issues with LME/MCOs/TPs (administrative burden and reporting was top issue)
 - Need to support provider network (rate cuts and staffing demands top two issues)
 - People with disabilities want to see their voices reflected in plans/policies/decisions
- We conducted two CE in-person sessions: 12/3 in Greensboro and 12/4 in Asheville

- TAC will present a final summary of the CE sessions during the March 2026 OPSA meeting. Sign up link for 1/7/26 CE session <https://us06web.zoom.us/j/82349899533>
- An Olmstead survey and email (mailbox) was created for public input on the new plan. The survey and mailbox will close on 12/30/2025. - Link to Olmstead survey <https://docs.google.com/forms/d/e/1FAIpQLSdKrEyQIE4oe8UHNvEgAWrvOI9MYU6e2WQi6LHmOdWj64bO6w/viewform> Email to submit written plan feedback ncolmstead@tacinc.org

Public Comment

- Talley Wells is the Executive Director of the North Carolina Council on Developmental Disabilities (NCCDD). He spoke about the recent Medicaid cuts – how it is good news that the cuts have been taken back, but it is still a challenge that the Medicaid budget will run out in April without additional funds for Medicaid. The General Assembly and the Governor said they will work on it, and we are hopeful and trust that will happen. We know it's lifeblood for our community. We need this funding to be able to support people to have full and meaningful life in community.
- The rising cost of Applied Behavioral Analysis (ABA) could impact other services in the DD community. It's critical to make sure that we are getting children the essential services they need, but we also have to be good stewards of Medicaid dollars. He has heard positive and concerning reports on ABA. With the rise in that service and the high cost, it's important that we as a community and state do what needs to be done. We need to work together including on Olmstead so that what happened from October to December doesn't happen again - the 8% cuts on CAP C and CAP DA were significant.
- Corye Dunn noted that the policy paper put out by Medicaid is incorrect in saying that there is an IDD budget is incorrect and that she would like the Department to rescind that line.

Closing Remarks & Adjournment- Deb Goda

Deb thanked everyone for all that they do and their continued support.

Olmstead Plan Stakeholder Advisory Group

Dec. 18, 2025

✓ Attended; ✗ Did not attend

	Attendee(s)	Division/Organization
✓	Bryan Dooley, Chair	OPSA Community Co-Chair
✗	Debra Farrington	OPSA Community Co-Chair
✓	Deb Goda Tamara Smith Janie Shivar(alt.) Josh Walker Drew Kristel Vickie Callair	Olmstead Office, NCDHHS
✓	Willysha Jenkins	Health Portfolio, NCDHHS
✗	Angela Smith, David Clapp (alt.)	NC Medicaid
✓	Kathie B. Smith, Kenny Gibbs (alt.) Pam Lloyd-Ogoke Julie Bloomingdale Kenneth Bausell Jeanna Cullinan	Division of Division of Employment and Independence for People with Disabilities
✓	Kelly Crosbie Renee Rader (alt.) Amber Costello Tina Barrett Ginger Yarbrough Karen Feasel	Division of Mental Health, Developmental Disabilities and Substance Use Services
✗	Lisa Cauley	Division of Social Services
✓	Carla West Tammy Koger Detra Purcell (alt.) Heather Carter	Division of Aging
✓	Karen Burkes; Niki Ashmont (alt.) Brandy Burns	Division of State Operated Healthcare Facilities
✓	Yvonne Copeland; Anne Odusanya (alt.) Danielle Matula	Division of Child and Family Well-Being
✓	Ed Rizzuto Corye Dunn	Disability Rights North Carolina
		Direct Support Professional Work Group
✗	Semaj Moore	Money Follows the Person (MFP)
✗	Lacy Flintall	NC Mental Health Planning and Advisory Committee
✗	Sareefah Emanuel	Transition to Community Living (TCL; Alliance

	Jean Andersen; Jessica Aguilar	State Consumer and Family Advisory Committee
✓	Jenny Hobbs	NC Child
✓	Matthew Potter	NC Empowerment Network, CFAC, Centered Resources
✗	Cherene Allen-Caraco	Promise Resource Network
✗	Karee White	Brain Injury Advisory Council of NC
✗	Ashley Large	Statewide Independent Living Council
✓	Victoria Chibuogu Nneji	At Large, AKALAKA.org
✗	Kathleen Gibson	NC Substance Use Disorder Federation
✗	Sam Antkowiak	Student, Beyond Academics at UNC-Greensboro
✗	Tracey Craven	Association for Persons in Supported Employment
✗	Wilson Raynor	NC Providers Council
✗	Karen McLeod	Benchmarks
✗	Judy Jenkins	National Alliance for People with Mental Illness/NC NAMI/NC)
✗	Cindy Ehlers	Tailored Plans (LME/MCOs)
✓	Chad Stage	Standard Plan Representative
✗	Peyton Maynard	Developmental Disabilities Facilities Association
✗	Michael Maybee	Marketing Association of Rehabilitation Centers
✗	Trish Farnham	Coalition on Aging
✗	Kathie Smith	Association for Home and Hospice Care of NC
✗	Jeff Horton	NC Senior Living Association
✓	Representative Carla Cunningham	North Carolina General Assembly
✗	Sherrie Burnette	LA for Rep. Cunningham
✗	Senator Michael V. Lee	North Carolina General Assembly
✗	Candace Bowden	LA for Sen. Lee
✗	Senator Sydney Batch	North Carolina General Assembly
✗	Michael Hardison	LA for Sen. Batch
✗	Representative Donna White	North Carolina General Assembly
✗	Ethan Brinkley	LA for Rep. White
✓	Charlie Hittinger	NC Division of Services for the Blind
✓	Neal McHenry Pam Scott	Office of the Secretary, NC DHHS
✓	Gwen Thompson Ben Fisher	Mathematica
✓	Gloria Garton	Executive Director, NC SILC
✓	Talley Wells	Executive Director, NC Council on Developmental Disabilities
✓	Sarah Potter	Family Member
✓	Beth Brooks	Member Engagement Manager, Partners Health Management
✓	Kathleen Gibson	Oxford House

✓	Megan Lee Rebecca Boss	Technical Assistance Collaborative (TAC)
✓	Jean Anderson	State CFAC