

Date / Time of Meeting	February 2, 2018 10:00 AM - 12:00 PM Dial in: <u>866-906-9888</u>			
	Access code: 7258371			
	Conference Room: 3A			
Meeting Purpose	Interagency Governance Team			
Host	Treena Clark, Division of Behavioral Health			

Voting Members	Att'd	Participant	Att'd
Ross Edmunds - DBH		Cindy Day - DBH	X
Candace Falsetti - DBH	X	David Welsh - Medicaid	Х
Carol Dixon - Advocate	X	Holly Riker - DBH	X
Connie Sturdavant - Provider	Х	Lynn Thull - Consultant	
Dave Sorensen – Provider	X	Pat Martelle - DBH	
Eric Walton - Youth		Rhonda House - DBH	X
George Gutierrez - Medicaid	X	Seth Schreiber - DBH	
Jason Stone - IDJC	X	Tiffany Kinzler - Medicaid	
Jennifer Griffis - Parent	Х	Treena Clark - DBH	Х
Kim Hokanson - Parent	X	Valorie Leirmann - DBH	
Lael Hansen - County Juvenile Justice	X	Venecia Anderson - Medicaid	X
Lynn Thompson - DBH/CMH			
Maria McConnell - Advocate	Х		
Matt McCarter - State Dept. of Ed	Х		
Matt Wimmer - Medicaid	Х		
Michelle Weir - FACS			
Roxanne Printz - FACS	Х		
Vanessa Morgan - Parent	Х		

AGENDA

#	Торіс	Topic Owner	Discussion	Decisions
1	Welcome and Roll Call	Dave Sorensen		Notes from last meeting
1	Approve minutes from last meeting	Dave Surensen		approved as written.
			The request asks that QMIA review the process for transitional	The QMIA Council will
	2 IGT Request - Residential Care Transition Planning	Carol Dixon	planning and step-down programs as well as membership of the	seriously consider
2			team.	undertaking the request and
			Candace shared that it had been brought to the QMIA Council	the development of a
			as an issue to review. The council was unable to get to a point	quality improvement plan.



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			of addressing it due to the volume on the agenda. However, the QMIA Council did agree that issues not being addressed elsewhere would stay with the QMIA Council, and would, therefore, take another look at the issue in February.	Candace will report back on a final decision by the QMIA Council.
3	IGT Request - Partner Agency/Department Children's Mental Health Service Budgets	Jennifer Griffis	Jennifer shared that this request's purpose is to help educate IGT members to help them more accurately fulfill their roles in making recommendations going forward. Jennifer stressed that it is not her role as a stakeholder to dictate where resources be spent, but rather to request information to better educate herself. Candace suggested sending it back to QMIA to find out what is available, as they have been working to collect shared information of similar natures as well. <u>Questions:</u> Matt M. stated that additional clarification on the request would be helpful. For example, what types of things fall under children's mental health? -Jennifer stated that the questions to ask are not always known and that it is helpful to have the agency experts make that judgment call to help educate. Matt M. asked if this information is intended to be reported out to the general public or more targeted for just IGT's purposes. -Jennifer answered that this specific request at this point was just for the IGT. George asked if the request was to include expenditures for a three-year span or for what was budgeted. -Candace explained that the settlement references expenditures. -Vanessa stated that she would like to see both.	This request is going to the individual IGT representatives for follow up as well as to the QMIA Council. Reporting back on the request will be the responsibility of the individual IGT members (Jason, Matt M., George, Candace) The request is to include both budgeted and expenditures.
4	IGT Request - Liberty Contract Questions	Pat Martelle	The request is for the Liberty contract to be shared. The contract is a public contract and can be obtained through a public records request. <u>http://healthandwelfare.idaho.gov/AboutUs/PublicRecordsReq</u> <u>uest/tabid/132/Default.aspx</u> Vanessa stated that she would rather have a summary from	Tiffany will provide the information for a public records request to be made. Maria will make the request. Carol will collect the
			Medicaid of what went into the contract rather than read	questions regarding the



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			through the actual contract. Dave S. clarified that the desire was to see if the contract lines up with the implementation of CANS, etc.	contract and provide them to Maria in the week prior to next month's meeting. Provide questions to Carol by February 26 th .
			Dave W. stated that it would be perhaps more helpful if Medicaid were provided with specific questions in order to better respond.	Tiffany will identify someone to come and discuss with the group when
			 Dave S. provided an example wherein there seemed to be a difference in the CANS training received and the responsibilities of Liberty. Tiffany stated that the contract is set up to ensure there is agreement before the CANS is even completed. Concerns were raised that decisions/diagnosis were being given over the phone. Tiffany explained that what Liberty is trying to do is gather all the information necessary to complete the assessment. The phone call is to report on the functional assessment and the CANS that was completed. Carol asked if we could put together a list of questions. 	needed. Maria will share what she learns from the contract at the next IGT meeting
			Matt M. suggested having the contract manager come and discuss the contract.	
			Maria stated that she would like to formally request the contract to review and look through.	
			Vanessa proposed that Maria request and read the contract and then report back.	
			Tiffany shared that it will be best to start reviewing the contract with the Scope of Work.	
5	Review of IGT Request Process	Treena Clark/ Cindy Day	The concept of the process is to create a more official process for tracking and ensuring responses and follow through are completed. Submissions would be made to the IGT chair/co-chair, who would then bring it to the IGT as a whole.	The process was clarified that the IGT will accept and assign requests. The requests will be shared with the Leadership team.



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			Then, the decision would be made as to whether or not it would be sent on to the leadership team for assignment/decision. Cindy would then take it to the leadership team. This comes as a result of all the leadership wanting to be invested and ensuring that work can be assigned to the correct parties, with the understanding that the requests may already come with assignments having been made.	Tracking of the requests will remain with the IGT and a section will be added to the agenda/notes for tracking.
			Jennifer stated that it only seems fair that if tracking is a concern that the IGT be given the chance to maintain the tracking mechanism.	
			Dave S. added that it is important to complete the request in its entirety.	
			Roxanne stated that her understanding was that if an assignment came from the IGT and upon taking it on, barriers were identified, then it would go to the Leadership team for additional collaboration and assistance.	
			Questions:Kim asked why the IGT now must go through the leadership for these tasks where the original intent was that the IGT would maintain oversightCindy stated that the intent would be to better assist the assignments and resourcingVanessa stated that it seemed confusing because the leadership was represented at the IGT, and now it must go elsewhereCarol added that it now seems like the Leadership Team is managing the IGT requestsVanessa clarified that as a governance team, the IGT would decide where the request would go, and the IGT member would take it to their teamCarol stated that she could understand requests that were not clear cut, but those that are obvious it would seem unnecessary to send on to another levelTreena clarified that it truly is meant to be a tracking system to make sure requests get followed up on. -Rhonda stressed that there is a difference between	



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			 governance and management. -Matt W. agreed that there often is too much bureaucracy added to processes, but that it is also valuable to add a layer for formal tracking and enforcement. -Vanessa asked why the tracking had to be done outside of the IGT. -Jason agreed that it is helpful to go to another layer of management. -Vanessa expressed concerns about delays in the process. -Matt W. expressed that the desire of leadership is to truly fit into the intent of the IGT. -Jen voiced the concern that the leadership team has fewer stakeholders. -Matt W. added that he would like to hear Ross and Jamie's feedback on this process as well. -Cindy stated that perhaps we should take a step back and truly consider it as more of an FYI to the leadership team than anything. 	
			The request form will be submitted to chair/co-chair, who will then decide if it comes on to the IGT and it will be added to the agenda.	
			Jennifer added that there may be need to update the request form to make it an easier to complete document.	
	Clinical and Training Subcommittee Review and Update	Dave Sorensen	Dave S. shared an updated version of the recruitment email for the subcommittee as well as a list of potential people willing to participate.	
6			Dave S. stressed that he will not be chairing this subcommittee and requested feedback on the letter.	Send Dave S. any names of people you think would like to participate and he will send them an invite.
			Kim Hokanson volunteered to serve on this subcommittee. Dave W. stated that he'd like to add Suzette Driscoll to the list from Medicaid.	
7	Family Engagement Subcommittee	Carol Dixon	Carol stated that the training and the time involved is a concern being voiced by the parents and that perhaps things could be broken up to be more manageable and appealing to parents.	Gina Westcott will be invited to the Family Engagement subcommittee to provide an updated



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			Carol stated that they'd like to ask Gina Westcott to attend the next Family Engagement subcommittee meeting and share what Workforce Development is currently working on.	regarding Workforce Development. Gina Westcott will also be invited to provide the IGT
			Jennifer expressed concern that communication around the increase Medicaid eligibility and cost sharing burdens have not yet been communicated out to parents. While the start date is not until July 1, the sooner the communication can out, the better.	an update. Valorie Liermann-Mello will be invited to attend the subcommittee meeting.
			Holly provided an update that Laura Wallis is working with the youth to put together a services document.Holly met with the youth to help identify youth training and provided the information to Gina.Holly added that they are working on recruiting two youth to	George will follow up and report on Medicaid's communication plan regarding the new Medicaid eligibility as well as potential premium costs.
			add to the IGT membership. <u>Questions:</u> Cindy asked if there was going to be overlap between the Family Engagement subcommittee and the Training subcommittee. -Rhonda answered that the perceived overlap comes	
			from the fact that the training subcommittee does not yet exist and once it does those issues will go there. Carol asked how parents are being made aware of the new Medicaid eligibility. -Dave W. shared that he has participated in trainings around the state aimed at educating the community.	
			Carol stated that this was great training, but asked about how the follow up was being done as parent participation at the training was minimal. -Dave S. suggested utilizing the Regional Behavioral Health Boards. Carol asked if Medicaid had a deep reaching plan to	
			communicate to the public. -Dave S. suggested that providers be educated to help increase awareness. -Dave W. suggested that this be a good topic for the training subcommittee to tackle.	



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			 -Matt M. suggested providing language to be used by the schools to help educate. George asked if the communication plan included this in particular? -Cindy explained that there is an overarching communication but that each of the partners has their own as well. Suzette is in charge of the communication plan for Medicaid. Matt M. asked if the IGT is the proper forum for "one-off" situations that may or may not be patterns. -George stated he would like to hear about these sorts of issues as it provides an opportunity to provide better service. Vanessa asked about federal requirements around notifying schools about a child who has been identified as a class member and if communication can be done to help this process. -Matt M. asked for more information. -Candace added that some of this may be a question for Seth and Automation. 	
8	Other Items	Dave Sorensen	Operational Guidelines - Rhonda Rhonda shared that the updates and changes were made to the Operational Guidelines. There is still language regarding interfacing with legislators needed. Rhonda requested that the IGT review the document prior to the next meeting. Maria stated that the way it is now is okay and no additional language may be needed. Implementation Progress Report - Candace Candace stated that she did not receive input from the entire IGT but that it will be very important to put it on the agenda for the next meeting. Vanessa stressed the importance of reading the governance section at the very least. There needs to be a discussion regarding the frequency of longer meetings and when they may be needed, as well specifically having a longer meeting in January to accommodate the review of the Implementation Progress	Operational Guideline review will be added to the agenda for review at the next IGT (please review prior to the next meeting). The Implementation Progress Report will be on the agenda for the next IGT meeting. Scheduling for longer meetings with a certain regularity is needed at the next IGT meeting.



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			Report.	
			February 21 - Suicide Advocacy day at the Capitol	
9	Topic Confidentiality Review	Dave Sorensen		
10	Action Item Review	Treena Clark		

The IGT will track action items and their status from the meetings here:

Follow Up Items	Date Opened	Owner	Due Date	Complete/Comments	Status
Add IGT Request Form section to notes to track progress on IGT Requests	2/2/18	Mindy	3/2/18		
Report on Medicaid's communication plan regarding the new Medicaid eligibility and potential premium costs	2/2/18	George	3/2/18		
Dave will reach out to those who have been identified to participate in the Clinical/Training Subcommittee and invite them to the meeting on March 2nd	2/2/18	Dave	3/2/18	Email sent 2/12/18	Closed
Invite Gina Westcott to the next FE and IGT meeting to give updates on the Workforce Development Plan	2/2/18	Treena	2/9/17	Meeting invites sent to Gina and Gina updated	Closed
Candace will discuss the Provider Subcommittee moving to the IGT with the QMIA Council.	1/5/18	Candace	Next QMIA Council Mtg		
Candace will send the Implementation Progress Report to the IGT for review prior to next month's meeting. *THIS IS CONFIDENTIAL UNTIL PUBLISHED; DO NOT DISTRIBUTE OUTSIDE THE IGT.*	1/5/18	Candace	1/12/18	Sent via email on 1/8/18	Closed
Send Medicaid proposed rules to IGT members	1/5/18	Treena	1/8/18	Sent via email on 1/12/18	Closed
Carol will submit to Chair/Co-Chair the Family Engagement request for QMIA to review the transition planning issues	1/5/18	Carol	February Meeting	Submitted via email on 1/24/18	Closed
Venecia will work on a document that can be shared with the providers outline the service grouping and the	1/5/18	Venecia	February Meeting	This item came from a formal request from the provider community, but nothing has been received to date. (2.2.18)	



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tentative date ranges				2/2/18—Follow up action is a response to an IGT Request and will be moved to that tracking log.	
George (Medicaid) will provide an update on Medicaid paid travel for treatment.	10/6	George	November Meeting		Ongoing