



<b>Date/Time of Meeting</b>	October 13, 2021 10:00 a.m.-12:00 p.m. MT Dial: 415-655-0003 Access code: 177 349 0248 Meeting password: phD6rJX3xM8 (74367593 from phones and video systems) Webex: <a href="https://idhw.webex.com/idhw/j.php?MTID=m4a48b7aa97850f51d0408971e3cc0e3c">https://idhw.webex.com/idhw/j.php?MTID=m4a48b7aa97850f51d0408971e3cc0e3c</a>
<b>Meeting Purpose</b>	Interagency Governance Team (IGT)
<b>Host</b>	Janet Hoeke: Chair, Ross Edmunds: Co-Chair, Vice-Chair: David Welsh & Co-Vice-Chair: Patrick Gardner

Voting Members	Att'd	Voting Members	Att'd	Participants/Non-Voting Members	Att'd
Ross Edmunds - DBH	X	Nat Parry - Youth Leader	O	Shane Duty - DBH	X
Janet Hoeke - Parent Leader	X	Laura Wallis - Parent Leader	O	Craig Ward - BH Director for CDA Tribe	O
David Welsh - Medicaid	O	<b>Proxy Voting Members</b>	<b>Att'd</b>	Joyce Broadsword - DHW Regional Director	O
Patrick Gardner - Child Advocate	X	Candace Falsetti - DBH	X	Joy Jansen - School District	O
Howard Belodoff - Child Advocate	X	Michelle Weir - FACS	O	Ruth York - Family Advocacy Agency	X
Cameron Gilliland - FACS	O	David Bell - Medicaid	O	Tricia Ellinger - Parent Leader/Co-Chair of FE	O
Lael Hansen - County Juvenile Justice	X	<b>Recorder</b>	<b>Att'd</b>	Amy Minzghor - Parent Leader/Co-Chair of FE	O
Eric Studebaker - SDE	X	Megan Schuelke - DBH	X	Lydia Dawson - Chair of ICAT Subcommittee	O
Laura Treat - DBH CMH Representative	X	<b>Participants</b>	<b>Att'd</b>	Dora Axtell - Nimiipuu Health	X
Monty Prow - IDJC	X	KayT Garrett - IDHW DAG	X	Francesca Barbaro - Medicaid	X
Marquette Hendricks - Tribal Representative	X	Kimberli Stretch - IDHW DAG	X	Josie Graham - Medicaid	X
Doug Loertscher - Provider	O	Georganne Benjamin - Optum	X	Mallory Kotze - Medicaid	X
Pat Martelle - Family Advocacy Agency	X	Casey Moyer - Optum	X	Jenna Tetrault - Medicaid	X
Kim Hokanson - Parent Leader	X	Chad Cardwell - FACS	X	Madeline Titelbaum - IFF Program Coordinator	X
		Jon Meyer - DBH	X	Kylie Turner - Attendee	X

**MEETING NOTES**

#	Time	Length	Topic	Topic Owner	Discussion	Decisions
1	10:00am	10 mins	Welcome, Roll Call & Approve Minutes	IGT Executive Committee	<p>Ross Edmunds motioned to approve the IGT Meeting notes from September 2021 and Patrick Gardner seconded this motion.</p> <p>Ross Edmunds shared that Cameron Gilliland has taken an Administrator position with IDHW and Chad Cardwell will be taking over the FACS position for IGT.</p> <p><b>Next Steps:</b> Chad Cardwell will confirm with Cameron Gilliland that he should transition as the FACS voting member of IGT. This update will be emailed to Megan Schuelke and, pending the response, this item will be added to the November IGT Meeting agenda and the vote will take place at that time.</p>	<p><b>Vote:</b> The IGT Voting Members voted unanimously to approve the IGT Meeting notes from September 2021.</p> <p><b>Vote:</b> The IGT Voting Members voted unanimously to approve of the amendment to the current IGT Meeting agenda for October 2021.</p>

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					<p>Ruth York shared that Nat Perry will not be able to attend the IGT meetings regularly due to her school schedule. As a public member of IGT, the Idaho Federation of Families (IFF) has asked Madeline Titelbaum to attend these meetings regularly as the Program Coordinator for the youth involved with IFF.</p> <p>It was then proposed that we amend the current IGT Meeting agenda to remove Item 4, "Discuss Access to Services for Children with DD and Behavioral Health Issues", as Tricia Ellinger is unable to attend this meeting. This agenda item will be moved to an upcoming IGT Meeting. The time allotted for this item will be distributed throughout the other agenda items. Patrick Gardner motioned to approve of this amendment to the current IGT Meeting agenda and Ross Edmunds seconded this motion.</p>	
2	10:10am	20 mins	Review Sponsor's Report	DBH & Medicaid	<p>Shane Duty reviewed the Sponsor's Status Report for October 2021. Pat Martelle asked if this report includes the entire scope of work that the Department has been involved in. Is it correct that no additional work that relates to YES that the IGT needs to know about is listed in this report? Ross Edmunds confirmed.</p> <p>Patrick Gardner asked, in terms of actual service delivery, if there is something that this report will provide on a monthly basis that will tell us how things are going. From this report we cannot tell how things are going or what challenges may be arising. In order for the IGT to do problem solving, the Department needs to share these areas. How do you envision addressing these concerns? Ross Edmunds shared that the Department is open to feedback about the contents of this report. The understanding was that the QMIA Council identifies the areas that would raise concern based on the data. The QMIA Council identifies those areas, creating recommendations, and bringing those forward to the IGT. We do not want to duplicate this information. KayT Garrett added that once the Implementation Assurance Plan (IAP) is approved, the goal and the plan is to develop a project plan, which will lead to more specific updates. Patrick Gardner agreed that we do not want to duplicate the QMIA Quarterly Reports. The plaintiff attorneys and the parents talked about the QMIA recommendations and questions arose about what will happen with those recommendations. One way to make</p>	<p>Sponsor's Status Report for October 2021</p>  <p>Sponsor's Status Report for IGT October 2021.pdf</p>

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					<p>that connection between this report and what the QMIA Council is reporting would be to include what is working well in this report. As well, the leadership members of the QMIA Council will be meeting with the IGT Executive Committee (EC) to begin discussions about how to better coordinate the IGT and the QMIA Council. Previously, parents have also shared the challenges that they face in securing services. There is no connection between those challenges and what is included in this Sponsor's Status Report. This is another element that we would want to build into this report because it goes directly to what is not working, what needs to get resolved, who provides input, etc. . KayT Garrett added that the Defendant's Workgroup previous met and discussed the QMIA Report recommendations and how to develop the priorities and make those connections.</p> <p>Patrick Gardner suggested that this report also include more narrative in addition to the bullet points. This is the best way to track progress, determine what has been accomplished, and how far we have to go. Ross Edmunds noted that these suggestions will be shared with the YES Sponsors. Patrick Gardner added that a regular presentation to the IGT would be helpful. It would also be constructive to know how these elements relate to the IGT Strategic Plan. Ross Edmunds confirmed that all of the suggestions that have been shared will be discussed with the YES Sponsors.</p>	
3	10:30am	15 mins	Update on Implementation Assurance Plan	IGT Executive Committee	<p>Ross Edmunds shared that we have been making good progress on the Implementation Assurance Plan (IAP). The most recent draft was emailed to the plaintiff attorney's and an upcoming meeting has been scheduled to discuss this draft further. There is cross-over that relates to the IBHP and this is why it the development of the IAP been a confidential process. Patrick Gardner added that an updated notice on the IBHP has been posted. This notice informed the public that the Department has changed the methodology on how they will move forward with the process and the deadline has also been extended. With regard to the status of the IAP, a limited version that does not include the information about the IBHP has been shared with the members of the Implementation Workgroup (IWG). The sense is that the parties will come to an agreement in the near future about the IAP and the hope is that it will be finalized by November 2021. KayT Garrett added that the public</p>	<p>Public Notice about the IBHP</p>  <p>IBHP ITN Public Communication - Se</p>

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					notice about the IBHP can be found here: <a href="https://publicdocuments.dhw.idaho.gov/WebLink/DocView.aspx?id=19791&amp;dbid=0&amp;repo=PUBLIC-DOCUMENTS">https://publicdocuments.dhw.idaho.gov/WebLink/DocView.aspx?id=19791&amp;dbid=0&amp;repo=PUBLIC-DOCUMENTS</a> .	
4	10:45am	30 mins	Discuss Access to Services for Children with DD and Behavioral Health Issues	Tricia Ellinger	<i>The IGT Voting Members unanimously voted to approve of the requested agenda amendment. This agenda item has been removed and will be added to an upcoming IGT Meeting agenda for discussion.</i>	
5	11:15am	15 mins	Discuss PRA Replacement Proposal and Decide on Next Steps	Ross Edmunds & ICAT	<p>Ross Edmunds reviewed the PRA Proposed Solution document and shared that, based on this proposal, the Department would like to request that ICAT develop a first draft of this certification pathway. There are some areas of collaboration that have to take place, such as with the State Department of Education (SDE) and providers that have to comply with the public standards. We do not want to put forth regulations but rather an agreed upon pathway. The certification will be organized through the future IBHP and the new MCO will be overseeing the credentialing. Pat Martelle, as the chair of the ICAT subcommittee, shared that at the last ICAT Meeting, the members decided to form a subgroup of members that would be willing to put in the hours to work on this project. This subgroup includes staff members from Medicaid, DBH, and SDE. Cheryl Hawkins, an Admin Assistant for DBH, is working to survey these members to determine the meeting schedule. Pat Martelle asked what a reasonable timeline would be for a first draft proposal. Is it reasonable to say that a first draft could take 6-8 months as we want to make sure that the research is accurate? Ross Edmunds confirmed that 6 months is a reasonable timeline. If the subgroup completes the proposal sooner then the state can begin to move forward from there.</p> <p>Janet Hoeke asked that, due to the certification requirement being suspended because of the public health emergency, is there a timeline that would impact how quickly we need to have this completed. Is there an event that could occur which would put this certification requirement back in place? Is there any additional support that this subgroup needs to complete this work? Pat Martelle stated that the subgroup could use administrative support to assist with coordinating the meetings and documenting the work that is being done. Cheryl Hawkins currently supports the ICAT meetings however, we are not sure if she would have the capacity to</p>	

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					<p>assist with these meetings as well. It was determined that Ross Edmunds and Megan Schuelke will follow-up with Cheryl Hawkins supervisor to gather more information on whether Cheryl Hawkins has the capacity to assist with the subgroup that will be working on the draft proposal.</p> <p>In relation to Janet's first question, Pat Martelle asked if this was a question for Optum. Georgeanne Benjamin explained that the decision to pause the PRA certification requirement was made by Medicaid. Georgeanne Benjamin shared some thoughts with Medicaid last week and noted that she will send this email to Pat Martelle as well. Pat Martelle added that a member from Optum will be joining the ICAT subgroup as well. Josie Graham noted that the pause on the requirement for the PRA certification will not be extended indefinitely. This would be a good topic to discuss at the next IGT Meeting. Janet Hoeke added that this information would impact how quickly ICAT would want to move forward.</p>	
6	11:30am	5 mins	Update on the IGT Operational Handbook	IGT Executive Committee	<p>Patrick Gardner noted that the next step in the process of creating the IGT Operation Handbook relates to the meetings that the IGT Executive Committee is having with the leadership members of the FE subcommittee, the ICAT subcommittee, and the QMIA Council. These meetings are scheduled to take place the week of October 25 and will be used to examine the relationship between the IGT and these subcommittees. The idea is to get input from the people that are doing the work as this is essential to better design how these committees work with IGT. Once we have gathered this input, we will put together a proposal of solutions and use these to develop and write the IGT Operational Handbook. We will have more information and updates to report on at the IGT Meeting next month.</p> <p>Patrick Gardner also noted the Deputy Attorney Generals (DAGs) wrote a memo on the relationship between the IGT and the Settlement Agreement. We need to use this to begin to develop this Operational Handbook however, we do not have someone lined up to do that at this time. This is a topic that should be discussed at the next IGT Executive Committee Meeting. Ross Edmunds added that the Department plans to be engaged in this work and can offer some technical writing expertise and resources. We want to collaborate on the contents of this handbook so we may need</p>	

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					to create a temporary committee and pull some members together to work on this. Pat Martelle noted that when she was previously the chair of the IGT, the members worked to renew the existing IGT Operational Handbook. It would be useful to start with that document.	
7	11:35am	10 mins	QMIA Quarterly Report	Candace Falsetti	<p>Candace Falsetti shared that the April-June QMIA Quarterly Report has been posted on the <a href="#">YES website</a> and was also shared via email with all of the IGT members. One question has come up about the QMIA Council recommendations. The Defendant's Workgroup (DWG) will be reviewing these recommendations and they will then be shared with the IGT. The priorities will be identified by both groups and the requests will be reviewed with the YES Sponsors as well as Medicaid. The second question was related to when the QMIA Quarterly Reports are due and will be published on the YES website. This information has now been added into the QMIA Quarterly Reports.</p> <p>Patrick Gardner asked if there is more information within the references of each bullet point that explains how and why these recommendations were chosen. Why were these items the most important items? Are these the most important items that the IGT should be focused on in terms of implementation? Candace Falsetti explained that the QMIA Council looks at the data that is included in the report and the recommendations reflect the areas that we feel are related to improving the system. These decisions are based on the decision points that PRAED has shared with us. After three years of gather data, we can now see any concerning consistent trends. The critical area is the access to services. Over the next year, we will likely see an evolution of these recommendations.</p> <p>Pat Martelle requested clarification on how the QMIA Council recommendations will be prioritized. Patrick Gardner also asked what the process will be for the IGT when they receive these recommendations. The IGT needs to respond to these recommendations as a part of the problem-solving process. We need to determine who will do the work, how it should be done, etc. It may be helpful to have the QMIA Council attend an IGT Meeting so that we can discuss these items further. The recommendations listed are broad and we need the "why" of the problem to be explained in greater detail</p>	

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					<p>so that we can determine the best solution. Patrick Gardner noted that it would also be helpful for the recommendations to be numbered rather than to be listed as bullet points.</p> <p>Janet Hoeke asked if the recommendations listed in the report coincide with what the IGT would say the recommendations should be based on where we are with the implementation of YES. Patrick Gardner stated that third and fourth recommendations listed go to the core purpose of the IGT. For now, the answers seem to be within the IBHP. Janet Hoeke asked how we are going about setting up statewide access in the meantime. Ross Edmunds added that the solution is not solely to wait for the IBHP. The overall issue is related to workforce. Medicaid, Optum, and DBH are continuing to work to be able to deliver the services that people need. Optum has previously shared data that shows the amount of treatment that they are providing. The new procurement shows that in-patient and out-patient services will be delivered to both Medicaid and non-Medicaid clients. Janet Hoeke added that there are a lot of issues that are the reasons for our workforce issues right now. Are there things that we can be doing that would help the workforce issue beyond the lack of people to fill the positions? Ross Edmunds stated that these issues are being worked on per the Idaho Behavioral Health Council (IBHC) and the IBHC Strategic Action Plan. The first priority is to develop a comprehensive workforce plan across the behavioral health services in Idaho, which is due in December 2021. As it is developed, more information about this plan will be shared with the IGT.</p> <p>Janet Hoeke stated that the purpose of the IGT is to determine what should happen with the recommendations. If this is going to happen then all of the IGT members need to be engaged in the conversations. Patrick Gardner stated that, in all fairness, the QMIA Quarterly Report is a 90-page document and one of the challenges that we have is to make materials accessible within the constraints of the membership. This brings us to the key issue of staffing as we do not have the staff resources needed. Ross Edmunds asked what a staff member would do in that capacity and what their responsibilities would be as a part of IGT. Patrick Gardner stated that it might make more sense for the IGT</p>	

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					<p>Executive Committee to put out a confidential questionnaire to determine how much time the members are able to spend on the work that relates to IGT. We could ask the members what gets in the way of things that they want to accomplish at IGT, how could we be more effective, what would a staff position be composed of that would be helpful, etc. The other problem is the fear of speaking up in this meeting and having it negatively effect your career. A confidential survey would help with this issue and may be the most practical way to get clarification on why we do not have more engagement. Ross Edmunds agreed and suggested that we talk through the specifics of these questions during the upcoming IGT Executive Committee meeting. An anonymous survey could be emailed out to all of the members and the results would also be anonymous. This is something that DBH could assist with and facilitate.</p> <p>Patrick Gardner asked if a survey would be useful and constructive and present IGT members agreed that it would. Patrick Gardner added that it is also difficult to determine how many members are engaged in a virtual meeting. Candace Falsetti added that she did not express her opinion as she is not an official IGT voting member. Patrick Gardner stated that this is another item that we need to clarify, and Janet Hoeke agreed. Shane Duty noted that, in regard to the survey, if you are asking for the opinions of the members, then you also need to be willing to change how things operate. Ross Edmunds added that a portion of this work falls on the Department and in order for this to be successful this has to also be a safe place for state employees to express their concerns without worrying about the repercussions. It was confirmed that the IGT Executive Committee will discuss this idea further and determine how to create and distribute the survey so that all of the IGT members can provide their input.</p> <p>Patrick Gardner stated that he had an additional question about the recommendations. Why is it that none of the bullets include out-of-home care considering how much the cost has increased? A number of the complaints that we receive from parents have to do with residential care. Candace Falsetti explained that we have been collecting this data for over a year and we now have the information that</p>	



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					shows the trends for this service. Now that we have the information, this is another area where you will likely start to see recommendations. This feedback will also be shared with the QMIA Council to make sure that we are focused on reviewing this kind of data.	
8	11:45am	5 mins	New Business Items	IGT Members	<i>No new business items were shared.</i>	
9	11:50am	5 mins	Public Comment	IGT Members	<i>No public comments were shared.</i>	
10	11:55am	5 mins	Review Future Agenda Topics & Action Items	IGT Executive Committee	<p><u>IGT Agenda Items for November:</u></p> <ul style="list-style-type: none"> <li>• Vote on Chad Cardwell as the new IGT voting member from FACS - IGT Members <i>pending confirmation from Cameron Gilliland</i></li> <li>• Review Sponsor's Status Report - DBH/Medicaid <i>standing agenda item</i></li> <li>• Update on Implementation Assurance Plan - DHW/Patrick Gardner</li> <li>• Discuss the possible impact of the public health emergency on the development of the PRA solution by ICAT - IGT Executive Committee</li> <li>• Update on draft of PRA Proposal Solution - ICAT subgroup <i>as needed</i></li> <li>• Update on the IGT Operational Handbook - IGT Executive Committee</li> <li>• Discuss Access to Services for Children with DD and Behavioral Health Issues - Tricia Ellinger</li> <li>• Update on the Engagement Questionnaire for all IGT Members - IGT Executive Committee</li> </ul> <p><u>Future IGT Agenda Items:</u></p> <ul style="list-style-type: none"> <li>• Review Draft IGT Operational Handbook - IGT Members</li> </ul>	
11	12:00pm	--	Dismissal	IGT Members		

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

Follow-up Items	Date Opened	Owner	Due Date	Comments	Status
Regional SOC Project and the intention to have one region present at each IGT Meeting.	3/6/20	Ross Edmunds	4/3/20	1/11 Update: Patrick Gardner suggested that we target the CMH subcommittees of the Regional Behavioral Health Boards (RBHBs) to gather the information. It would be helpful to create and distribute a list of questions that the IGT would like answered by the CMH subcommittees.	3/10, In Progress. Ross Edmunds spoke with the RBHB Leadership members. Ross Edmunds sent the questions to the CMH subcommittees again requesting feedback.