



Interagency Governance Team (IGT) Annual Report 2023

Created by the Division of Behavioral Health (DBH) System, Design, & Implementation (SDI) Bureau Children's Mental Health (CMH) Project Coordinator for the Interagency Governance Team (IGT) with approval from the current IGT members.



Interagency Governance Team (IGT) Annual Report 2023

TABLE OF CONTENTS

Purpose	3
IGT Mission	3
Introduction	3
IGT Year in Review	4
IGT Accomplishments in 2023	5
Updated IGT Bylaws & Clarified IGT Membership	5
Updated IGT Meeting Minutes Format	5
Presented with the Updated DBH Organizational Chart.....	6
Presented with Updated Medicaid Organizational Charts	6
Implemented Project Coordinator Role.....	6
Progress on Implementation	7
Idaho Behavioral Health Plan (IBHP) Updates	7
YES Sprint Project	8
Implementation Assurance Plan (IAP) Deliverable Updates	10
Joint Court Report Presentation.....	10
Developing Issues	11
Feedback Process between the IGT Subcommittees/Workgroups & IGT	11
Communication Process between the IGT Subcommittees/Workgroups & IGT.....	11
Recommendations & Advice from Stakeholders	12
Family Survey Results	12
Services, Provider Shortages, & Idaho Behavioral Health Plan (IBHP).....	12
Idaho School Districts & Local Education Agencies (LEAs).....	13
YES Sprint Project Recommendations.....	13
One Kid One CANS Workgroup Decision Point Report	14
Unaddressed Input.....	15
IGT Meeting Timeframe	15
IGT Membership	15
Open Action Items.....	16
Possible Future Agenda Items for 2024	16
References	17
IGT Reference Materials	17
IGT ICAT Subcommittee Meeting Notes	17
IGT FAM Subcommittee Meeting Notes	17
IGT Monthly Reports from the YES Communications Workgroup	17
Acronyms List	18

Purpose

Based on the [Interagency Governance Team \(IGT\) Roles & Responsibilities Grid](#), the IGT's Idaho Department of Health & Welfare (DHW) Division of Behavioral Health (DBH) System, Design, & Implementation (SDI) Bureau Children's Mental Health (CMH) Project Coordinator will produce an annual summary report from IGT meeting minutes that includes IGT's viewpoints on developing issues, recommendations, progress on implementation, unaddressed input and advice from stakeholders, and other applicable information germane to the [Jeff D. Settlement Agreement](#). The report will be reviewed for approval by the IGT at its *February meeting each year for distribution in *February, along with posting on the [Youth Empowerment Services \(YES\) website](#). This report will be delivered to the Idaho Behavioral Health Cooperative (IBHC), the plaintiff's attorneys, and any other parties desiring a copy.

**This updated timeline for the IGT Annual Report was approved by the IGT.*

IGT Mission

As stated in the [June 2015 Settlement Agreement, Appendix D of the Jeff D. class action lawsuit](#), and refined on January 29, 2021, by the IGT Strategic Planning committee, the [IGT Strategic Plan 2021-2024](#) states:

"The mission of the Interagency Governance Team (IGT) is to collaboratively work with partners to coordinate and oversee the ongoing successful implementation of the Youth Empowerment Services (YES) system of care. In order to be successful, the IGT will:

- Serve as a vehicle for communication among partners;
- Identify and remove barriers to working collaboratively and implementing services and supports for Idaho youth and their families;
- Ensure sustainable access to appropriate levels of service for Idaho youth and their families;
- Monitor and provide feedback on implementing the Jeff D. Settlement Agreement.

The overarching responsibility of the Interagency Governance Team is to provide for:

- Adherence to the Jeff D. Settlement Agreement and Implementation Plan among constituencies;
- Steady progress in implementing agreed-upon commitments, practice improvements, and quality management, improvement, and accountability;
- Meaningful partnership with families, youth, and other community stakeholders;
- Effective use of data to inform progress in achieving cross-system outcomes;
- Appropriate interface with key advocates, including the State Legislature and the Judiciary;
- Sustainability of the YES system of care, a shared investment including vision, empowered leadership, and system improvements."

**The mission of the IGT can also be found in the [Implementation Assurance Plan \(IAP\)](#)*

Introduction

This Interagency Governance Team (IGT) Annual Report covers the IGT meetings that took place from December 2022 through December 2023. This report is comprised of information directly from the approved IGT meeting minutes during this timeframe and has been categorized. Each category; IGT Accomplishments, Progress on Implementation, Developing Issues, Recommendations & Advice from Stakeholders, and Unaddressed Input; includes the chronological correlated IGT meeting minutes. IGT meetings did not take place during December 2022, January 2023, and February 2023. During this three month period, the Division of Behavioral Health (DBH), Division of Medicaid, Division of Family and Community Services (FACS) Developmental Disabilities (DD), and Division of Family and Community Services (FACS) Child Welfare (CW) organized a YES Sprint Project around four identified focus areas related to services for high needs youth. The goal of these sprints was to complete a comprehensive review of each service, research ways to improve services moving forward, and increase cross-divisional collaboration. Presentations on the recommendations related to these focus areas were shared throughout the subsequent IGT meetings. In 2023, IGT also focused on the Child and Adolescent Needs and Strengths (CANS), reinstating the One Kid One CANS Workgroup, and providing feedback on the One Kid One CANS Workgroup Decision Point Report.

IGT Year in Review

In 2023, the Interagency Governance Team (IGT) accomplished many operational objectives, such as updating the IGT Bylaws, clarifying the IGT's membership, and updating the format of the IGT meeting minutes. The IGT continued to serve as a vehicle for communication between its partners by collecting updates from the Division of Behavioral Health (DBH) and the Division of Medicaid. Progress was made on an Implementation Assurance Plan (IAP) deliverable when the Project Coordinator role was successfully implemented for the IGT. The IGT monitored and provided feedback on the progress of implementation as regular updates were shared regarding the Idaho Behavioral Health Plan (IBHP) and the IAP deliverables. Additionally, many presentations about the YES Sprint Project were shared with the IGT. The YES Sprint Project covered four identified focus areas related to services for high needs youth, including Out of Home Placements (OHPs), Intensive Care Coordination (ICC), Intensive Home and Community-Based Services (IHCBS), and crisis services. The IGT focused on identifying and removing barriers through presentations, and subsequent discussions, and review of the Joint Court Report and Class Counsel's Annual Report response. Over the year, issues developed around the focuses, feedback process flows, approval process flows, and ongoing communication needs between the IGT, IGT Executive Committee, and YES-related subcommittees and workgroups. Recommendations and advice from stakeholders was routinely provided to the IGT about a multitude of topics, specifically the IBHP, Family Survey Results, YES Sprint Project recommendations, One Kid One CANS Workgroup Decision Point Report, and YES implementation for the Idaho school districts and Local Education Agencies (LEAs). Collaborating with partners to oversee the successful implementation of the YES system of care has identified possible goals for the IGT in 2024. These future IGT meeting agenda items for 2024 could include the following:

- Updates on the status of the IAP deliverables
- Coordination with the Local Education Agencies (LEAs) & Idaho school districts
- IGT involvement in the Family Survey process
- Magellan transition
- YES Sprint Recommendations
- Access & service delivery
- PRTF's & PRTF progress
- Workforce development
- IGT effectively interacting with the state & state agencies
- One Kid One CANS Workgroup Objective 1: Streamlining the CANS
- One Kid One CANS Workgroup Objective 2: User Experience
- Coordinating outreach & communication with the Idaho tribes
- Youth Leader representation at the IGT meetings & youth/young adult collaboration
- Next steps for the CBRS Recommendation documents provided by the ICAT Subcommittee
- Review the QMIA Quarterly Report

IGT Accomplishments in 2023

This information has come directly from the IGT meeting minutes and includes IGT's viewpoints on the accomplishments that they have made in 2023. *For more details, review the linked IGT meeting minutes and materials below.*

Updated IGT Bylaws & Clarified IGT Membership

IGT meeting minutes from May 10, 2023: The issue is the need to vote in the new IGT Executive Committee members, which includes the Chair, Co-Chair, Vice-Chair, and Co-Vice-Chair. The IGT Executive Committee looked at the IGT Bylaws and found that the rules state that the Vice-Chair will perform the duties of the Chair in their absence, taking the role of Chair at the end of the term. It also states that the Co-Vice-Chair will perform the duties of the Co-Chair in their absence, taking the role of the Co-Chair at the end of the term. The IGT Executive Committee feels they need to revisit the issue about how these positions work. A meeting will be scheduled for the IGT Executive Committee before their term expires at the end of May 2023.

IGT meeting minutes from June 14, 2023: The IGT Executive Committee discussed updating the IGT Bylaws. One issue had to do with the changes to agency membership. Rather than vote on those members, it made sense for them to be appointed by their agency administrators or directors. Another suggested update was having members of the subcommittees become IGT voting members. There is not a formal mechanism for reappointing the agency members of the IGT Executive Committee. It would make sense to affirm those two positions in each June IGT meeting when the public members are elected. It was suggested that the Medicaid and DBH Administrators write a [Membership Memo](#) to the IGT in June of each year stating who they are appointing or reappointing.

IGT meetings minutes from July 12, 2023: The proposed changes to the IGT Bylaws were discussed. The hope was to streamline the IGT Bylaws and clarify the status of ex-officio members and whether they are voting members or not. If someone leaves before their term ends, we want to ensure that the position is still represented. The chairs for the subcommittees were moved into voting status. The piece about ex-officio members becoming voting members would need to be looked at. It was suggested that the IGT Bylaws feedback be submitted by July 26, 2023.

IGT meeting minutes from August 9, 2023: The recent updated version of the IGT Bylaws has been distributed. The IGT will postpone the vote until our next meeting.

IGT meeting minutes from September 13, 2023: The IGT Bylaws were sent out in advance so members could review them. Patrick Gardner motioned to accept the IGT Bylaws distributed on September 6, 2023. Marquette Hendrickx seconded the motion. This motion was carried unanimously and the [updated IGT Bylaws](#) were approved.

IGT meeting minutes from December 13, 2023: Brittany Shipley and Megan Schuelke met in November 2023 to work through the terminology in the IGT Bylaws that made IGT and voting memberships confusing. There are IGT voting members listed at the top of the agenda, everyone is welcome to participate.

Updated IGT Meeting Minutes Format

IGT meeting minutes from July 12, 2023: IGT members asked if they could have a transcript of the meetings in the future so that the minutes could be abbreviated. Sally Bryan will look into getting a transcript with the abbreviated meeting minutes.

IGT meeting minutes from November 8, 2023: IGT expressed concern about the IGT meeting notes from October 2023 due to inaccuracies and decided not to approve the IGT meeting minutes. Ross Edmunds motioned to hold the IGT meeting minutes from October 2023 for approval until the next IGT meeting.

Highlights

- ✓ Successfully updated the [IGT Bylaws](#)
- ✓ Clarified the IGT membership and roles for IGT members
- ✓ Successfully updated the IGT meeting minutes format
- ✓ Collected updates regarding the [DBH organizational chart](#)
- ✓ Collected updates regarding the [Medicaid organizational charts](#)
- ✓ Successfully implemented the [Project Coordinator role for the IGT](#)

IGT meeting minutes from December 13, 2023: The IGT Executive Committee clarified that this is an open meeting and everyone is welcome to attend. Details of the discussions will not be included in the future meeting minutes. Instead only next steps, decisions, and higher-level discussions will be captured.

Presented with the Updated DBH Organizational Chart

IGT meeting minutes from March 8, 2023: Ross Edmunds reviewed the [updated Division of Behavioral Health \(DBH\) organization chart](#). DBH is transitioning to a statewide format, which includes the Oversight & Statewide Operation (OSO) Bureau and a small Quality, Management, Improvement, and Accountability (QMIA) Bureau. There is the Clinical Bureau, which is focused on the customers, direct services, and the involuntary system. The System, Design, and Implementation (SDI) Bureau is focused on looking for grants and ways to improve the system. The Center of Excellence (CoE) Bureau is focused on lifting the overall quality of care throughout the state through training, coaching, and mentoring. The intention is that these staff members will work with the provider network, the Managed Care Organization (MCO), and lift the quality throughout the state. As DHW is moving to the new MCO with this intentional design, we eliminate the bifurcation that exists today with DBH providing direct services and private providers providing care. Under this new contract, DBH will no longer deliver direct services and needed an infrastructure that best helped fulfill this.

Presented with Updated Medicaid Organizational Charts

- ◆ [Updated Division of Medicaid Administration Organizational Chart](#)
- ◆ [Updated Division of Medicaid Policy & Innovation Organizational Chart](#)
- ◆ [Updated Division of Medicaid Bureau of Financial Operations Organizational Chart](#)
- ◆ [Updated Division of Medicaid Bureau of Clinical and Quality Management Organizational Chart](#)

IGT meeting minutes from June 14, 2023: Medicaid shared that four Medicaid organizational charts were sent out to the IGT. The charts focus on the critical components for understanding the YES system. DHW is in the process of developing a joint bureau called the IBHP Governance Bureau. Once it is formed, DHW will provide a new organizational chart. This bureau will be the main team that will be responsible for the oversight and implementation of YES and the IBHP. IGT members asked if it is possible to identify on each box if they have a connection to the YES program so that IGT knows who works on YES. Medicaid explained that every individual on these organizational charts has the potential to interface with YES. It was suggested that as our full-time staff for the IGT, Megan Schuelke, could pick the top ten individuals who are doing work on YES and provide a few sentences on what their role is and how they interact with the YES team. Medicaid noted that they could work with Megan Schuelke around the scope of the responsibilities for those key players.

Implemented Project Coordinator Role

IGT meeting minutes from March 8, 2023: IGT members asked where Megan Schuelke's position as the IGT support role landed on the updated DBH organizational chart. Megan Schuelke explained that her position is listed under the SDI Bureau in the CMH Unit. IGT members asked where the state is in the process of shifting Megan Schuelke to this role. DBH explained that the transition is in progress because we are working with the Administrative Support members to figure out who will take over Megan Schuelke's administrative role.

IGT meeting minutes from August 9, 2023: Megan Schuelke will fully transition to her new role in October 2023. It would be helpful for the IGT to think about what types of projects she could take on for the IGT.

IGT meeting minutes from September 13, 2023: Megan Schuelke shared that she is working on her transition as the Project Coordinator for IGT. The transition plan has been discussed with the IGT Executive Committee. The details of the plan will be shared with the IGT at the October 2023 IGT meeting.

IGT meeting minutes from October 11, 2023: Megan Schuelke presented the [IGT Project Coordinator Presentation](#) and explained her new responsibilities as the [Project Coordinator for the IGT](#). The overall goal is to accomplish the mission, vision, and strategic goals of the IGT. Clarification was provided that Megan Schuelke's previous role as the Administrative Assistant has been filled by Sally Bryan.

Progress on Implementation

This information has come directly from the IGT meeting minutes and includes IGT's viewpoints on progress that has been made on the implementation of the Youth Empowerment Services (YES) system of care. *For more details, review the linked IGT meeting minutes and materials below.*

Idaho Behavioral Health Plan (IBHP) Updates

◆ [Summary of IBHP Litigation Memo](#)

[IGT meeting minutes from March 8, 2023:](#) The IBHP Governance Bureau will focus on moving forward with the MCO. This will be a shared bureau and the members will report to both DBH and Medicaid. With this bureau, the intent is to create one interface with our participants. DHW is trying to eliminate the complexity around accessing behavioral health services, which includes both Medicaid and non-Medicaid services. The only things that fall outside of this are the state hospitals and the Designated Examiners (DEs).

[IGT meeting minutes from April 12, 2023:](#) The state is actively in progress with the Department of Purchasing (DOP) to complete the procurement process. DHW will have a continued active partnership with Optum as we move forward. The requested funding for the behavioral health services was approved and includes rate increases. Medicaid is working with Optum to see where the greatest access to care challenges are and will begin by increasing rates there. This includes supporting the stand-up of Certified Community Behavioral Health Clinics (CCBHCs), Psychiatric Residential Treatment Facilities (PRTFs), and the new Crisis Assessment Centers. They will continue to coordinate for out-of-home placements (OHPs) and the Early Periodic Screening, Diagnostic and Treatment (EPSDT) team will continue to review the applications and work with providers and families. Outpatient services will go through Optum, and DBH will continue its engagement to keep some clinicians involved. IGT members shared that one concern is the availability of providers, specifically providers who are serving rural and non-rural communities. Juliet Charron shared that through the [Idaho Behavioral Health Council \(IBHC\)](#), there is a Workforce Plan that was created that DBH and Medicaid are working on. Workforce development is called out in the YES Sprint Project that was done. The Governor of Idaho has a Workforce Task Force as well. IGT members asked, as it is relevant to the future IBHP contract, will the state enter into a contract with Optum starting July 1, 2023. Medicaid explained that they are working with Optum on a process where DHW has access to care for services. In terms of the teeth of the contract, that is where the provider network monitoring comes in so that Medicaid can see where there are issues with access to care. It was suggested that Medicaid and Optum share how they monitor the contract, including how that functions with the provider network monitoring and what we are expecting with the new Centers for Medicare and Medicaid Services (CMS) rule. IGT members noted that the IAP relies significantly on the state's effort to implement the Jeff D. Settlement Agreement with the new IBHP. Since this is not going to happen in the timeframe that the state had planned, how are those requirements going to be met? Medicaid members explained that work has continued for the implementation of the IAP. The work does not stop but it may look different if it is not falling under new IBHP. IGT members added that there are a number of deadlines in the IAP that are based on the timeline for the new IBHP. How does the state intend to address these deadlines? DHW is still working towards meeting those deadlines. Some of the pieces have to evolve with the implementation of the contract when that happens. Unfortunately, this is out of our control as we are following the state's procurement law. Once the new contract has been awarded, there will be a considerable amount of outreach and education. DHW has a contract award date and a contract go-live date and there is work that has to be done between those timelines.

[IGT meeting minutes from June 14, 2023:](#) DHW is in the final stages of the procurement process. IGT members shared that the public documents suggest that business cannot continue as usual and have a

Highlights

- ✓ Regularly collected status updates on the implementation of the new [Idaho Behavioral Health Plan \(IBHP\)](#)
- ✓ Collected updates on the completion of the [Implementation Assurance Plan \(IAP\) deliverables](#)
- ✓ Collected updates on the implementation of services as described in the [YES Sprint Project](#)
- ✓ Collected status updates on YES implementation through the [Joint Court Report presentation](#)

straightforward transition. Medicaid shared that complaints were filed about the intent to award the contract and they are protesting this for various reasons. DHW is planning to move forward unless we are told to stop. Optum is still our business partner today and Medicaid will continue to execute the provisions in that contract.

IGT meeting minutes from August 9, 2023: Magellan will be the new contractor and Medicaid is in the implementation stage now. The go-live date is scheduled for March 1, 2024. The current IBHP with Optum is for outpatient Medicaid services only. It was mentioned that the IGT needs to be aware that the contract was signed on June 16, 2023, and the IAP has a number of deadlines that are keyed to the go-live date. A number of provisions in the Jeff D. Settlement Agreement need to be included in the contract with the IBHP. The state will be negotiating with the new contractor to ensure that these provisions are addressed.

IGT meeting minutes from September 13, 2023: The state filed a motion to dismiss legal challenges brought by failed bidders. The motion to dismiss the lawsuit by Beacon will be heard September 22, 2023 and the motion seeking to dismiss by Optum will be heard October 25, 2023. DHW is moving forward with Magellan to go live in March 2024. We are meeting with Magellan on a regular basis. IGT members wondered how many kids are involved in the transition. DBH explained that they are performing case management but not performing direct services. We do maintain and oversee the contracts that help serve these kids. It was estimated that this was 1,200 – 1,500 kids statewide. IGT members asked how this will work to transition kids to the new services. DBH explained that Magellan will have to establish contracts with all the providers before go-live. The direct services are case management and wraparound services.

IGT meeting minutes from October 11, 2023: Motions have been heard on the cases challenging the IBHP contract with Magellan, but there will not be a decision before the end of the year. There is one more motion to be heard on October 25, 2023. The services will begin to be provided March 1, 2024. Once the contract is signed, DHW starts transferring the services to the MCO so there is no gap in care.

IGT meeting minutes from November 8, 2023: The court has issued a decision for Beacon and dismissed that lawsuit. The hearing was held on the Optum litigation and the decision will be shared within the next two-to-four weeks. Medicaid is continuing to move forward with the Magellan contract and working toward an implementation date. Members requested and it was determined that Magellan will provide a presentation to the IGT during the IGT meeting in January 2024.

IGT meeting minutes from December 13, 2023: The implementation of the Magellan contract will be moved to July 1, 2024. The Optum contract is being extended. More time was needed to have a successful launch of the new contract. There was a dismissal of both Beacon and Optum lawsuits, which have now been appealed. Providers and participants will be updated on the progress of the transition. There are a lot of existing services that will be transitioned. There is a CMS review that will need to happen. That review process will be moved out to a later date, which will ensure that the review is successful. The Youth Crisis Centers will be operational until Medicaid reimbursement is available. Members asked what the other impacts are of this new implementation date. DHW will continue to provide the services we have until the go-live date. Members asked what will happen now that staff with DBH are not able to transition. The work will continue just as it has been. DBH staff members have stepped up to ensure that kids are continuing to receive services.

YES Sprint Project

IGT meeting minutes from March 8, 2023: DBH shared a [presentation on the YES Sprint Project](#), which explained the decision to organize a YES Sprint Project around four identified focus areas related to services for high-needs youth. The four focus areas were Out of Home Placements (OHPs), Intensive Care Coordination (ICC), Intensive Home and Community-Based Services (IHCBs), and crisis services. In April 2023, the state would like to present on the recommendations and ask the IGT to provide their input to help guide us on prioritizing the recommendations and creating a plan to move forward. Members expressed concerns as the state is already having staffing problems and the plan is to decrease 25% of the authorized positions. The state explained that they will be able to be more direct in attacking these with this method. Members shared their second concern; this sprint process would be more helpful if the state incorporated parents and providers. DBH shared that we have done highly-focused work with the intention to work smarter and not harder. We highly

value feedback and want feedback from the stakeholders. Members shared their third concern; the recent Quality Review (QR) report provided concrete and smart proposals on how to make changes. It is not clear that other recommendations, such as these, are showing up in these sprints.

IGT meeting minutes from May 10, 2023: Ross Edmunds reviewed the presentations for the [YES Sprint Project Recommendations for Out of Home Placements \(OHPs\)](#). Members shared that it would be helpful to know how this impacts children directly in the short-term and the long-term. This will give us a better sense of what the impact will be by doing these things so that we can better understand one choice over another. David Welsh shared that he could talk to his team and see what information we have. In terms of quality measures, that data would take time to gather and develop. IGT members shared that there are issues related to capacity and accessibility. How is this going to be done with the new MCO? Will the issues about workforce and the providers that we do not have be addressed? These services are not going to happen if we have no one to do it. It would be helpful to know the population, how it is being defined, and the numbers and definitions for ICC. For residential care and PRTFs, what type of capacity are we looking at for the projected numbers served in the state? For treatment foster care, we need to know how many there are. How is that all going to be done, especially if it is not covered by Medicaid? It would be helpful to have this information for the discussion.

IGT meeting minutes from June 14, 2023: Ross Edmunds reviewed the presentation for the [YES Sprint Project Recommendations on Intensive Care Coordination \(ICC\)](#). IGT members shared that it would be helpful to have the information across a variety of topics sorted where we are guided how to provide feedback. It is hard to prioritize all these items. Regarding the action plan that DHW comes up with, it has to include everything that we need, including who, what, where, when, resources, workforce, and timelines. The IGT needs more substantive information and dialogue at the front end to provide feedback. This way they can give effective and useful feedback to the state. The IGT Executive Committee needs to come up with a proposal on how to do that. The IGT Executive Committee will talk about this at their next meeting. DHW can task members to put together a model where information and feedback can be gathered in a comprehensive way.

IGT meeting minutes from July 12, 2023: David Welsh reviewed the presentation for the [YES Sprint Project Recommendations on Intensive Home and Community-Based Services \(IHCBS\)](#). Members asked what the IGT can do to ensure that these things are implemented as soon as possible. Medicaid mentioned that some of these items are already being done. The IGT could help prioritize the pieces that DHW should work to execute, review how we are accomplishing items, and how they are coinciding with the Implementation Assurance Plan (IAP) and the Jeff D. Settlement Agreement. Members would like direction for how the IGT can move this work forward. The state explained that they want the IGT to be aware of the work that is being done and ask for recommendations from the IGT on which services they could start with that would have the biggest impact. IGT members shared that one example would be to tell them how long it will take to implement, how many kids it would affect, and what are the barriers to providing these services. Would it be possible for the state to come back to the IGT and add how long the recommendations would take to implement and how many consumers it would effect? Ross Edmunds will explain during his presentation next month what the plans are moving forward. For the YES Sprint Crisis Recommendations presentation, we will have to figure out how to estimate the impact on those services. Concern was shared about the ability to work through all four of the YES Sprint presentations to gather this information by the next IGT meeting. IGT members also mentioned that it would be helpful for the state to address where the findings are from so that it is clear that there is direct input from stakeholders and providers. They should put in the provisions from the Jeff D. Settlement Agreement or the IAP. DHW intends to take the input and incorporate it into the planning process.

IGT meeting minutes from August 9, 2023: Ross Edmunds shared the presentation for the [YES Sprint Project Recommendations on crisis services](#). Members asked how the IGT would give feedback on the recommendations. DBH mentioned that there is a plan on how to include many of these recommendations with the IBHP. There is no plan that takes the sprint work from beginning to end, there are individual plans. IGT members shared that the IGT needs to be effective in working together with the state agencies in meeting the requirements of the Jeff D. Settlement Agreement. They recommended that the IGT Executive Committee considers how to have these conversations to meet their obligation.

Implementation Assurance Plan (IAP) Deliverable Updates

IGT meeting minutes from May 10, 2023: David Welsh reviewed the [Services & Supports Crosswalk Status Update presentation](#). Ross Edmunds reviewed the [Update on the Status of the YES Access Maps presentation](#).

Class counsel has commented specifically on the group of Access Pathways Maps and raised the issue that DHW did not consult with Optum, users of the system, parents, etc. This is a demonstrated weakness. We had a long list of other issues that we raised, and they were never formally responded to in this process. This deliverable was due five months ago and it is not completed. DHW asked for an extension, which the Implementation Workgroup (IWG) agreed to, and we are still waiting for a formal response. DHW explained that in response to the input received from the IWG, additional maps are being developed by the state. Dr. Israel is working on these maps based on source materials, the Optum Guidelines, rules, statutes, etc. The balance is that we are trying to draft these maps as we envision the system to be or as we see reflected in the source materials that we have. The input that we received told us that if something is missing then we need to develop rules, statutes, etc. Patrick Gardner shared that the Services & Supports Crosswalk is supposed to describe, with a lot of specificity, what is the service array that is required under the Jeff D. Settlement Agreement. It should be used to determine that the services proposed are the services that are being delivered. The Access Pathways Maps are supposed to describe the process through the system. Together these two documents describe the system design. There seems to be some confusion by the state around describing what they have now, what the system is supposed to do, and then trying to fix it. As it relates to the Implementation Compliance Task Force (ICTF), DHW has taken on responsibility to establish how the task force operates. This includes determining what the structure looks like and what the document looks like that explains what compliance is. This includes the establishment of a measure for how much service has been delivered, the baseline data, and the established goal and data to see that we are working towards. The deadline date is at the end of August 2023, and it may not be accomplished because of the challenges.

IGT meeting minutes from August 9, 2023: The major area is the IBHP implementation, which is taking a lot of resource time. There will be a version of the Services & Supports Crosswalk that we will use when working with the IBHP because that creates the authoritative document. The Access Pathways Maps are being worked on. There were nine maps shared with the IWG and the state received their recommendations. Some areas were missing, such as screenings, access to all into outpatient services, case management, and intensive care coordination connection. Dr. Israel is looking at how we could fill those gaps to be compliant with the Jeff D Settlement Agreement. We need to consider what the measures are for compliance. There may be progress with the implementation of the new IBHP contract and we will work on what compliance looks like.

Joint Court Report Presentation

IGT meeting minutes from November 8, 2023: The plaintiff attorneys and Deputy Attorney Generals (DAGs) provided updates on the last court report. The plaintiff attorneys shared their [Joint Court Report Presentation](#) to the IGT. Class Counsel determined it was necessary to file a response to the Annual Report, the [Class Counsel's Annual Report Response](#) and [Appendix](#), because Defendants' filing did not meet the requirements of paragraph 67 and did not provide the Court with an objective status of implementation that included the accomplishments, potential or actual compliance issues, and proposed or actual remedial efforts necessary to address compliance with the Jeff D. Settlement Agreement. The focus of this presentation is on the Quality Management, Improvement, and Accountability (QMIA) information and data regarding the status of the implementation. The plaintiff attorneys explained that after looking at this data, mandated services and supports are less accessible, provided to fewer children, and in declining intensity on average. Many key services for youths with the highest acuity or service needs are unavailable in most communities in all regions. What is more, a shrinking workforce is providing inadequate care to many children, frustrating class members and their parents who seek treatment services. Overall, the data indicates that progress on implementation appears to have gone backwards since the parties last reported on implementation status to the Court. The DAGs acknowledged that there are challenges. We have been making some positive advances and there is going to be some great work that will be happening with the new MCO.

Developing Issues

This information has come directly from the IGT meeting minutes and includes IGT's viewpoints on developing issues. *For more details, review the linked IGT meeting minutes and materials below.*

Feedback Process between the IGT Subcommittees/Workgroups & IGT

IGT meeting minutes from September 13, 2023: The [One Kid One CANS Workgroup Decision Point Report](#) was distributed and they

would like feedback by the end of the month. IGT members mentioned that there is a provision in the IAP regarding workgroup products and they are more formal. We need time to review the document and have a discussion that leads to a recommendation.

Members mentioned that the document went out in July 2023, but it has never been added to the agenda. They might not have realized the feedback role that the IGT plays. It was clarified that the idea was to shorten the CANS. Providers and parents both gave feedback. This leads to feedback needed by the IGT. It was suggested that feedback from the IGT be sent before the end of September 2023. The IGT Executive Committee will gather what is on the table and the IGT comments.

Communication Process between the IGT Subcommittees/Workgroups & IGT

IGT meeting minutes from June 14, 2023: Laura Scuri shared that the Interagency Clinical and Training (ICAT) Subcommittee has been focused on the workings of the subcommittee. We are going through the charter and operational guidelines to make sure they are clear. Would the IGT like copies of the documents and if so, how do we communicate that to the IGT? We are looking for opportunities for further exploration and are always happy to take direction from the IGT. IGT members shared that it sounds like there are no present deliverables on order from the IGT at this point. Is that correct? Laura Scuri confirmed and explained that they have the charter and the directive in process. Members noted that the charter for a subcommittee should be overseen by the IGT. This is the structure under the governance provisions in the Jeff D. Settlement Agreement. The IGT Executive Committee agreed to look at the documents and they can be listed on the IGT meeting agenda for review.

IGT meeting minutes from July 12, 2023: Laura Scuri reported that the last ICAT Subcommittee meeting was spent on how we are going to make decisions and what projects we are going to take on. The ICAT Subcommittee [Charter](#) and [Statement of Purpose](#) were provided for approval from IGT. Once those are approved, we will implement them. IGT members wondered if the ICAT Subcommittee could use direction and if the ICAT Subcommittee Chair/Co-Chair could join an IGT Executive Committee meeting to help with coordination. Laura Scuri agreed.

IGT meeting minutes from November 8, 2023: The IGT Executive Committee would like to check-in with the IGT subcommittees/workgroups more often so that the IGT Executive Committee can be a support and give more direction to these groups.

IGT meeting minutes from December 13, 2023: The IGT Executive Committee is working to connect with the Subcommittee Chair/Co-Chair persons in a meeting to discuss our communication flow and process. We want to explore barriers that they may be experiencing. The goal is to work and check-in with them on a regular basis.

Highlights

- ✓ Identified need for a feedback process for recommendations between IGT Subcommittees/Workgroups, IGT Executive Committee, & IGT
- ✓ Identified need for an approval process for IGT Subcommittee/Workgroup authoritative documents
- ✓ Clarity needed on the focus of the IGT Subcommittees/Workgroups
- ✓ Identified need for a communication process for updates between IGT Subcommittees/Workgroups, IGT Executive Committee, & IGT

Recommendations & Advice from Stakeholders

This information has come directly from the IGT meeting minutes and includes the recommendations and advice from stakeholders that was provided during the IGT meetings that took place in 2023. *For more details, review the linked IGT meeting minutes and materials below.*

Family Survey Results

IGT meeting minutes from July 12, 2023: DBH shared that on the Family Survey, families indicated that overall, 70% are receiving what they need. For families that have kids with higher needs (Level 2 or 3 on the CANS) 50% said their needs were not being met. IGT members shared that the survey methodology is flawed and overrepresented by parents with lower level of needs so it does not represent a true picture of the system.

IGT meeting minutes from November 8, 2023: Dr. Williams presented on the [Family Survey Results](#), which is an annual survey used to find out what the experiences are of the family members. This presentation included information on the YES Quality Indicators, CANS implementation, and Child and Family Teams (CFTs). The most notable finding was that we are not seeing improvement in Idaho. Feedback was provided that the questions do not go deep enough as there are some services that are not available and would not be offered to parents. It would be helpful to see the survey develop to include a little more detail. It was clarified that this survey is from the family perspective, not from a provider perspective. As well, this year DBH is doing some intensive interviews that will hopefully improve the system of care. Members shared from a parent perspective, they would say that services are recommended that are not available. The IGT expressed interest in being more involved in the Family Survey process with Dr. Williams and Boise State University (BSU). It was determined that any input should be provided to Ross Edmunds who will get in touch with Dr. Williams concerning the recommendations.

Services, Provider Shortages, & Idaho Behavioral Health Plan (IBHP)

IGT meeting minutes from March 8, 2023: Members shared that they hope that telehealth services for non-licensed providers, like Peer Support professionals, can be included in the work to extend pandemic benefits. It helps keep providers in the field who make no money once they pay their own travel expenses to visit families and youth. Medicaid shared that they are currently working with Optum to determine what telehealth flexibilities will continue. Laura Scuri shared that providers are maxed out, and with an expensive transition coming up, we are not in the same financial position that we were in for the Optum transition. It is likely that there will be a provider shortage within the next 6-8 months without a rate increase.

IGT meeting minutes from September 13, 2023: DBH would like to work together to develop a checklist for parents during this IBHP process. IGT members commented that having a checklist would be helpful.

IGT meeting minutes from November 8, 2023: Laura Scuri shared that the providers are operating at significantly reduced capacity. We are tucking in for the new IBHP, which is rolling out much like the last transition with Optum. We are working closely with Magellan, however, the exact same issues exist as did with Optum. Lack of a good implementation with the IBHP will result in the system of care as we know it being decimated.

IGT meeting minutes from December 13, 2023: Members shared that there are kids that are not able to get the higher level of care that they need. This has been detrimental to families who must wait to get a higher level of care. Ross Edmunds asked that if there are cases as described, IGT should contact Val Johnson so it can be addressed.

Highlights

- ✓ Provided feedback on the [Family Survey Results presentation](#)
- ✓ Supplied feedback on telehealth services and provider shortages
- ✓ Regularly provided feedback on the implementation of the new [Idaho Behavioral Health Plan \(IBHP\)](#)
- ✓ Supplied advice about YES implementation for the [Idaho school districts and Local Education Agencies \(LEAs\)](#)
- ✓ Provided advice about recommendations in the [YES Sprint Project Recommendations presentations](#)
- ✓ Provided feedback on the proposed changes to the CANS outlined in the [One Kid One CANS Workgroup](#)

Idaho School Districts & Local Education Agencies (LEAs)

IGT meeting minutes from March 8, 2023: Joy Jansen asked where the school districts and local schools will fit into this YES work. The LEAs are the school districts that we are working with. There is more local hospitalization and trauma occurring in local schools because of the increase in behavioral health crises. It would be helpful to know what our role is and if there will be a training. DHW explained that the state will not move forward with anything that does not include our partners. It is hard to partner with everyone as there are hundreds of LEAs. DHW will plan to work with the State Department of Education (SDE) to help us work with the LEAs so that there is a good understanding.

IGT meeting minutes from April 12, 2023: Joy Jansen shared feedback and issues regarding YES services and the behavioral health system specific to the LEAs and school districts. These issues are occurring for families, youth, and school districts. There is a crisis happening because we do not have the providers we need to serve these children. The teachers and those in the schools are on the front line with students every day. When teachers recommend that a student goes to a hospital, they are often denied by the hospital because the recommendation is from a school and not from a licensed Social Worker. This means that the student comes back to school the next day with the same issue. The school districts need help as they are not set up to provide behavioral health needs. We want to understand where the LEAs will fit in with this new behavioral health model. Juliet Charron asked if it would be helpful to have a specific conversation with the LEAs. We could have quarterly meetings and bring Optum. Joy Jansen explained that when families cannot find therapists for their children, it is landing on the school district's shoulders. The provider vacancy and the administrative burden are real issues. Medicaid shared that they have been working to reduce the administrative burden and are working with Optum to increase the number of providers based on the legislative budget increase. This will go into effect on July 1, 2023. Joy Jansen added that she has seen YES work for families, but it needs to work for the high-needs children as well. It is critical that we address that there are no services in the home after a child is denied at the hospital. Feedback was shared that it is ten steps backwards for the whole family to have a child moved from our structured environment into a traumatic and often more detrimental setting. We need more counselors. Finding care for these kids that have dual issues is hard and often burdensome to the parents. Online services are not a great fit for our kids on the spectrum but it is a start. Feedback was noted that our dual kids have missing skills and schools that are designed to meet educational needs are not trained to meet those lagging skills. Getting that support in rural communities is nearly impossible, cross-trained direct providers are almost nonexistent. Members asked which workgroups are part of this process and can take this work on. DHW shared that there is not one workgroup that focuses on this issue. It is a part of all of them to some extent. It was suggested that each party come back to the next meeting with ideas about how IGT can help solve this issue.

IGT meeting minutes from June 14, 2023: Optum shared that they followed up with Joy Jansen following the April 2023 IGT discussion. The available supports were discussed at the Children's Subcommittee meeting, and they talked about the options of working with the hospitals. They did reiterate that this is a broader system issue and broader discussions need to occur. One update is related to Optum's work with [Project ECHO](#). Optum funded this program with Project ECHO to put together a behavioral health series that they will conduct virtually for schoolteachers and support staff. We are reaching into the schools for more trainings on the classroom setting for kids with behavioral health issues to help them. This series will be rolling out in September for 2023-2024 school year. Matt Johansen added that when they met with Joy Jansen, they asked if she knew of other LEAs that we could connect with to collaborate on the services that are provided. Joy Jansen agreed and we are waiting for that list.

YES Sprint Project Recommendations

IGT meeting minutes from July 12, 2023: Parent representatives shared that there are difficulties when they navigate services for their children in crisis. For the Implementation of Intensive Home and Community-Based Services (IHCBS) Modalities and Sustainability for Providers and Improved Reimbursement Model, this needs to be flexible and timely. IHCBS in the community is a huge need as many providers, schools, families and even hospitals are not aware of the forms of services that exist. Some providers won't attempt to set a youth up

with YES services given the past history of them not being available. This is a disservice and something that is difficult to change should IHCBS become more readily available for children with high behavioral health needs. Secondly, but equally as critical, is the improved reimbursement rates for providers. Many providers share that they do not find the level of work worth the reimbursement rate so they do not choose to pursue being providers or do not continue to be providers in this field, thereby contributing to the shortage of providers.

One Kid One CANS Workgroup Decision Point Report

IGT meeting minutes from September 13, 2023: The [One Kid One CANS Workgroup Decision Point Report](#) was distributed and they would like feedback. It was clarified that the idea was to shorten the Child and Adolescent Needs and Strengths (CANS). Providers and parents both gave feedback. This leads to feedback needed by the IGT. It was suggested that feedback from the IGT be sent before the end of September 2023. The IGT Executive Committee will gather what is on the table and the IGT comments.

IGT meeting minutes from October 11, 2023: IGT discussed developing a new version of the Idaho CANS. Clarification was provided that there is no impact on the existing model by using this new model. The terminology has been changed from an algorithm to a Decision Support Model. The IGT needs to provide feedback to the One Kid One CANS Workgroup. It was recommended that the workgroup move forward on the proposal and provide a follow-up on whether the shortened CANS will affect the level of care determination. Do the members concur with the decision to move the strength-based provision to the front and to simplify the trauma questions to yes/no questions? There was a consensus from the IGT to support the One Kid One CANS Workgroup and its identified next steps and objectives. It was suggested that the assessment be reimbursed by the service, not by the time it takes to perform the assessment. The current business model is discouraging the best practice and encouraging less than optimal use of resources. The goal of this objective was to shorten the CANS and lessen the number of questions on the CANS as well as improving the experience of the CANS by families, youth, and providers. The shortening of the CANS will benefit families as well by focusing first on the strengths and shortening the other portions. The CANS should not be redone and instead, it should be updated. Providers have shared that it has been difficult for them to get the previous CANS through the ICANS system or from the previous provider, which causes the provider to do a new CANS. There should be a way to obtain a copy of the CANS without the family needing to get multiple CANS. It would be helpful for all parents to get a copy of the CANS after it is done so that it doesn't have to be redone. There are inconsistencies with how the CANS is being presented to various families and it has been a problem that children have been traumatized during the CANS. IGT agreed that having a provider training on how to gather information for the CANS would be helpful. Members also discussed parents taking part in the provider trainings and the trainings now including Continuing Education Units (CEUs). Members added that it is important to remember that Idaho has a long history with punitive audits and surveys. It may take time to build back trust with providers. As well, families and youth frequently do not experience this as a strength-focused process. Members noted that another idea is to add interviewing techniques to the training. Having a mandatory CANS update training that is quick and available virtually would start that conversation.

Unaddressed Input

This information has come directly from the IGT meeting minutes and includes input that the IGT has yet to address. *For more details, review the linked IGT meeting minutes and materials below.*

IGT Meeting Timeframe

IGT meeting minutes from April 12, 2023: IGT members noted that we often run out of time to cover the planned agenda items. Can the time for this meeting be increased to meet the discussions that occur? It was explained that last month we increased the time for this meeting by an hour. It may be difficult to increase the time for each IGT meeting as everyone has full schedules. However, we want to be able to get through the important discussions. Ross Edmunds suggested that he and Brittany Shipley help guide the agenda along. The IGT Executive Committee asked if the IGT would like a more aggressive time facilitator or if we want to provide more time increments along with the agenda requests. This is an important question that the IGT should answer.

IGT meeting minutes from May 10, 2023: The use of a timer during the IGT meetings to keep the agenda on track was suggested. The IGT Executive Committee discussed and agreed with this suggestion. If additional discussion on a topic is needed, we will either agree to update the agenda to allow for more time or assign a future agenda item. However, feedback was provided that we have not demonstrated that we can get through the items on the agenda in two hours. It has been awhile since updates were provided from the IGT subcommittees and the One Kid One CANS Workgroup. This is something that we should discuss further.

IGT Membership

IGT meeting minutes from May 10, 2023: Before we consider moving someone new into the Youth Leader position, we need to talk about what we want from this position. We need to discuss how we are going to engage them and what background about the IGT is helpful so that they fully understand these meetings. As it relates to the IGT Bylaws, this raises a question about how a person gets on the list for candidates for the IGT Executive Committee. This is something that we do not have a process for.

IGT meeting minutes from July 12, 2023: Members asked if there are recommendations for the tribes about the CANS being required or not. There is confusion in the tribes, and they are not sure how to move forward with this. The ICAT Subcommittee has not taken this on but will keep it on their radar. Members asked if there is a tribal representative on the ICAT Subcommittee. DHW suggested that there be and wondered if members could assist with finding a tribal representative for the ICAT Subcommittee and the One Kid One CANS Workgroup.

IGT meeting minutes from December 13, 2023: A member asked if there is only going to be one tribal representative or one from each tribe. It was shared that there is a need for more tribal representatives. There is also a youth participant position open on the IGT. There have been discussion on how to make this a meaningful role for the youth as well as the IGT. Megan Schuelke and FYIdaho have been looking at ways to incorporate youth participation. There have been conversations with other government entities to help guide how IGT might accomplish this. Members shared that it might be better to have more than one youth in this role.

Highlights

- ✓ Input about increasing the IGT meeting timeframe
- ✓ Ideas about increasing the Idaho tribal representatives for the IGT, ICAT Subcommittee, and One Kid One CANS Workgroup
- ✓ Input about fulfilling the IGT Youth Leader position
- ✓ Ideas for the nomination process to the IGT Executive Committee
- ✓ [Open action items](#)
- ✓ [Possible future agenda items for 2024](#)

Open Action Items

The open action items from the IGT meeting minutes in 2023 informed the possible agenda items for 2024.

1. Action Item: The IGT will bring their suggestions and ideas to the next IGT meeting about how the IGT can help the coordination process among agencies, providers, stakeholders, etc. with the LEAs and Idaho school districts.

2. Action Item: Kyle Hanson will follow-up with the algorithm questions and will move forward with the One Kid One CANS Workgroup regarding Objective 1.

3. Action Item: Karol Dixon and Juliet Charron will get together later to discuss the CANS and the exemption from the CANS assessments for tribal members.

4. Action Item: Megan Schuelke will seek feedback on some of the projects that were requested in the past from the IGT.

5. Action Item: Ross Edmunds will collect any content that IGT would like to see in the Family Survey and will shared these recommendations with Dr. Williams.

Possible Future Agenda Items for 2024

- Updates on the status of the IAP deliverables
- Coordination with the Local Education Agencies (LEAs) & Idaho school districts
- IGT involvement in the Family Survey process
- Magellan transition
- YES Sprint Recommendations
- Access & service delivery
- PRTF's & PRTF progress
- Workforce development
- IGT effectively interacting with the state & state agencies
- One Kid One CANS Workgroup Objective 1: Streamlining the CANS
- One Kid One CANS Workgroup Objective 2: User Experience
- Coordinating outreach & communication with the Idaho tribes
- Youth Leader representation at the IGT meetings & youth/young adult collaboration
- Next steps for the CBRS Recommendation documents provided by the ICAT Subcommittee
- Review the QMIA Quarterly Report

References

IGT Reference Materials

- ♦ [IGT Roles & Responsibilities Grid](#)
- ♦ [IGT Bylaws](#)
- ♦ [IGT Operational Guidelines](#)
- ♦ [IGT Workgroup Charter](#)
- ♦ [IGT Strategic Plan 2021-2024](#)

IGT ICAT Subcommittee Meeting Notes

- [ICAT Subcommittee Approved Meeting Notes from December 2022](#)
- ICAT Subcommittee Approved Meeting Notes from January 2023 – No meeting took place.
- [ICAT Subcommittee Approved Meeting Notes from February 2023](#)
- [ICAT Subcommittee Approved Meeting Notes from March 2023](#)
- ICAT Subcommittee Approved Meeting Notes from April 2023 – No meeting took place.
- [ICAT Subcommittee Approved Meeting Notes from May 2023](#)
- [ICAT Subcommittee Approved Meeting Notes from June 2023](#)
- [ICAT Subcommittee Approved Meeting Notes from July 2023](#)
- [ICAT Subcommittee Approved Meeting Notes from August 2023](#)
- ICAT Subcommittee Approved Meeting Notes from September 2023 – No meeting took place.
- [ICAT Subcommittee Approved Meeting Notes from October 2023](#)
- [ICAT Subcommittee Approved Meeting Notes from November 2023](#)

IGT FAM Subcommittee Meeting Notes

- FAM Subcommittee Approved Meeting Notes from December 2022 – No meeting took place.
- FAM Subcommittee Approved Meeting Notes from January 2023 – No meeting took place.
- [FAM Subcommittee Approved Meeting Notes from February 2023](#)
- [FAM Subcommittee Approved Meeting Notes from March 2023](#)
- [FAM Subcommittee Approved Meeting Notes from April 2023](#)
- [FAM Subcommittee Approved Meeting Notes from May 2023](#)
- FAM Subcommittee Approved Meeting Notes from June 2023 – No meeting took place.
- [FAM Subcommittee Approved Meeting Notes from July 2023](#)
- [FAM Subcommittee Approved Meeting Notes from August 2023](#)
- [FAM Subcommittee Approved Meeting Notes from September 2023](#)

IGT Monthly Reports from the YES Communications Workgroup

- [YES Communications Strategic Planning Workgroup Monthly Report from January 2023](#)
- [YES Communications Strategic Planning Workgroup Monthly Report from February 2023](#)
- [YES Communications Strategic Planning Workgroup Monthly Report from March 2023](#)
- [YES Communications Strategic Planning Workgroup Monthly Report from April 2023](#)
- [YES Communications Strategic Planning Workgroup Monthly Report from May 2023](#)
- [YES Communications Strategic Planning Workgroup Monthly Report from June 2023](#)
- [YES Communications Strategic Planning Workgroup Monthly Report from July 2023](#)
- [YES Communications Strategic Planning Workgroup Monthly Report from August 2023](#)
- [YES Communications Strategic Planning Workgroup Monthly Report from September 2023](#)
- [YES Communications Strategic Planning Workgroup Monthly Report from October 2023](#)
- [YES Communications Strategic Planning Workgroup Monthly Report from November 2023](#)
- [IGT Monthly Report from YES Communications Workgroup from December 2023](#)
- [Vouchered Respite – Strategic Communication Plan from December 2023](#)

Acronyms List

BSU	Boise State University	IBHC	Idaho Behavioral Health Cooperative
CANS	Child and Adolescent Needs and Strengths	IBHC	Idaho Behavioral Health Council
CCBHCs	Certified Community Behavioral Health Clinics	IBHP	Idaho Behavioral Health Plan
CEUs	Continuing Education Credits	ICAT	Interagency Clinical and Training
CFTs	Child and Family Teams	ICC	Intensive Care Coordination
CMH	Children's Mental Health	ICTF	Implementation Compliance Task Force
CMS	Centers for Medicare and Medicaid Services	IGT	Interagency Governance Team
CoE	Centers of Excellence Bureau	IHCBS	Intensive Home and Community-Based Services
CW	Child Welfare	IWG	Implementation Workgroup
DAG	Deputy Attorney General	LEAs	Local Education Agencies
DBH	Division of Behavioral Health	MCO	Managed Care Organization
DD	Developmental Disabilities	OHPs	Out of Home Placements
DEs	Designated Examiners	OSO	Oversight and Statewide Operation Bureau
DHW	Department of Health and Welfare	PRTFs	Psychiatric Residential Treatment Facilities
DOP	Department of Purchasing	QMIA	Quality, Management, Improvement, and Accountability
EPSDT	Early Periodic Screening, Diagnostic and Treatment	QR	Quality Review
FACS	Division of Family and Community Services	SDE	State Department of Education
FAM	Family and Advocacy Meeting	SDI	System, Design, and Implementation Bureau
IAP	Implementation Assurance Plan	YES	Youth Empowerment Services