

Date / Time of Meeting	May 1 st , 2020 10:00 AM - 12:00 PM Dial in: 415-655-0003 Access code: 803 135 850 Meeting password: 99465569 Webex Only
Meeting Purpose	Interagency Governance Team
Host	Pat Martelle, Chair & Ross Edmunds, Co-Chair

Voting Members	Att'd	Voting Members	Att'd	Participant	Att'd
Cameron Gilliland - FACS	X	Matt Wimmer - Medicaid	O	Megan Schuelke - DBH	X
Jason Stone - IDJC	X	Ross Edmunds - DBH	X	Liz Perkins - DBH	O
Jennifer Griffis - Parent	X	Sabrina Griffis - Youth	X	David Welsh - Medicaid	X
Kim Hokanson - Parent	X			Craig Ward - Tribal member	X
Lael Hansen - County Juvenile Justice	X	Proxy Voting Members	Att'd	Joyce Broadsword - DHW Regional Director	O
Doug Loertscher - Provider	X	Candace Falsetti - DBH	X	Sara Stith - Medicaid	O
Pat Martelle - Federation of Families	X	Michelle Weir - FACS	O	Joy Jansen - School District	X
Eric Studebaker- SDE	X	James Phillips - IDJC	X	David Bell - Medicaid	X
				Rebekah Nansel	X
				Lynn Thull - Contractor	X
				Laura Wallis - Parent	X
				Stephanie Hoffman - DBH	X

MEETING MINUTES

#	Time	Length	Topic	Topic Owner	Discussion	Decisions
1	10:00am	5 min	Welcome and Roll Call Approve minutes from last meeting	Pat Martelle	Approve April 2020 Meeting Minutes.	The April IGT Meeting Minutes were approved as written by the voting members.
2	10:05am	5 min	Review Follow-Up Items	Pat Martelle		The below action items were reviewed and updated.
3	10:10am	15 min	Review and Vote on the Proposal for IGT/IWG Meetings	Team	Action Item: Vote on the IGT/IWG Proposal. The IGT/IWG Proposal document was reviewed. Pat Martelle stated that she also had a question about the IGT membership as this information is not included in the IGT Charter. Ross Edmunds made a proposal to amend the IGT	

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					<p>Charter to include information on the IGT membership. This information would be included in the by-laws. As well, moving forward, we will send out formal IGT membership appointment letters and have a formal IGT membership timeline. First, we should vote on the IGT/IWG proposal and then take a step back to review membership and the appointment of members into IGT.</p> <p>Kim Hokanson proposed that we add Janet Hoeke, as a parent representative, and Laura Wallis, as a parent representative or as a representative of the YES Communications Strategic Planning Workgroup, to the IGT membership as well.</p> <p>Ross Edmunds suggested that, to avoid amending the proposal, we vote on the IGT/IWG proposal as it is now, and the addition of Janet Hoeke and Laura Wallis would be a different action.</p> <p>Lael Hansen requested clarification about the IGT/IWG proposal and the previous suggestion to merge the IGT and IWG Meetings. Ross Edmunds stated that we are no longer proposing that we merge the IGT and IWG Meetings. Instead, we are proposing that IGT becomes the main meeting that discusses the broader topics that were previously discussed at the IWG Meetings. This will include discussing what the system looks like, reviewing the data and monitoring the system implementation. Both IGT and IWG will make recommendations as neither group is in the position to make decisions. IWG will shift its focus to the negotiations and legal aspects of the case and the settlement agreement. In the case of the CBRS request that IGT received, IGT will continue to review requests and give recommendations to agencies. These requests would only be discussed at IWG if it was related to the settlement agreement, such as a request to get rid of a service. These proposed changes are due to the repetition that was occurring in both IGT and IWG meetings.</p> <p>Lael Hansen asked if IGT would continue to have the co-chairs if we move forward with the proposed changes. Ross</p>	

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					<p>Edmunds stated that at the time, it made sense to have himself and Pat Martelle as the co-chairs due to the IGT functions. By adding Patrick Gardner and Howard Belodoff as IGT members as the IGT/IWG Proposal document suggests, these important conversations will now take place during IGT instead of at IWG Meetings. It will change the dynamic of the meetings however the conversations will have more weight.</p> <p>Doug Loertscher asked if the membership positions would be specific to the person or the position. Ross Edmunds stated that the IGT membership would not be done by the person and would be specific to the position. This would be an addition to the bi-laws with formalized membership positions. We would then determine who would be appointed to those positions and distribute new appointment letters.</p> <p>Stephanie Hoffman asked if all the IGT membership positions would have term limits. Ross Edmunds clarified that the IGT membership positions would have an appointment period however, he is unsure if we would want to implement term limits.</p> <p>A vote took place on the IGT/IWG Proposal document and the motion was passed to include Patrick Gardner and Howard Belodoff as IGT members. No voting members were in opposition.</p>	<p>ACTION ITEM: Ross Edmunds and Pat Martelle will discuss updating the by-laws to include membership information based on the feedback received.</p>
4	10:25am	10 min	Review and Vote on the Updated Meeting Dates	Team	<p>Action Item: Vote on the updated meeting dates. Pat Martelle stated that by voting to add the two Youth Advocate membership positions, we need to collaborate on a meeting date/time so that they can attend these IGT Meetings.</p> <p>Doug Loertscher proposed that we continue with the established IGT Meeting date/time unless we are notified that the two new members are unable to attend. Megan Schuelke stated that she could reach out to the two new members, Patrick Gardner and Howard Belodoff, to determine if they are able to attend the IGT Meetings as it is currently scheduled. Their availability will then be communicated with all the IGT Meeting members. Ross Edmunds added that if changes to the meeting schedule are</p>	<p>ACTION ITEM: Megan Schuelke will reach out to Patrick Gardner and Howard Belodoff to determine if they are able to attend the IGT Meetings as</p>

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					<p>needed, this will be communicated to all the IGT Meeting members with plenty of notice.</p> <p>A vote took place on the proposal to not change the date/time of the upcoming IGT Meeting at this time and to defer this agenda topic. The motion was passed, and no voting members were in opposition.</p>	they are currently scheduled. Their responses will be shared with the IGT Meeting members.
5	10:35am	10 min	Update and Discussion on the One Child One CANS Issue	Sara Stith	<p>Pat Martelle stated that the IGT was made aware that children are receiving more than one CANS even when the parent tells a provider that their child already has a CANS. Doug Loertscher added that sometimes providers are unable to get access to the CANS that is completed by other providers. They need to have a CANS in their records so another CANS must be done.</p> <p>David Welsh stated that Medicaid should be able to gather information from Liberty and private providers to pull a report on some of these CANS issues. This report would show trends on multiple CANS during a specific period of time. The next step would be to look at the data and try to address any issues through a provider alert. David Bell stated that the core issue is around getting providers access to the CANS that has already been done.</p> <p>Candace Falsetti clarified that this is not a technological problem. Providers are able to give other providers access to the CANS that they have completed through ICANS. This is a provider issue that requires collaboration. If the Child and Family Teams were happening, this would solve the issue because providers would be working together towards a shared vision of what the family needs.</p> <p>David Bell asked if families have access to their own CANS. Candace Falsetti stated that they do not have access to the electronic version of their CANS as this would require access to ICANS. Jen Griffis added that parents are encouraged to request a hard copy of their CANS however, the provider will still be unable to access and update the electronic version of the CANS.</p>	

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					<p>Candace Falsetti stated that the provider needs to release the information. There is also the case that some families do not want to release their information between multiple providers for various reasons. The ultimate vision is that the family and the providers are working together with a single person designated who has access to the CANS and can update the CANS as needed. A transformation needs to take place in order for this to happen. DBH continues to work with Medicaid and Optum.</p> <p>David Welsh stated that a provider alert will be sent out next week about existing CANS and the need for providers to edit that assessment rather than completing a new CANS.</p> <p>Kim Hokanson stated that she originally brought up this issue. She had questions about the ability for Medicaid or Optum to track the CANS if the same Medicaid number was being used to authorize the full CANS and if the reports would show the number of duplicative CANS. David Welsh added that this would be related to the report he was discussing earlier that would help to identify underlining issues.</p> <p>Kim Hokanson asked if we can get the number of duplicative CANS. Candace Falsetti stated that this would be a request for DBH. She could look into gathering this data however, there would be some caveats. Some families move or change providers and we would need to determine how to remove this data. There could also be additional reasons as to why a family would want a second CANS. These are questions that we would need to answer in terms of the data in order to answer the right question.</p> <p>Jason Stone suggested that the best way to move forward may be to create a small workgroup to research and answer this question. The workgroup would then bring their findings back to the IGT Meeting.</p> <p>After further discussion, it was determined that the following members would like to be a part of this workgroup:</p> <ul style="list-style-type: none"> • Jason Stone 	<p>ACTION ITEM: Megan Schuelke will email all of the new CANS</p>

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					<ul style="list-style-type: none"> James Phillips Candace Falsetti Shane Duty Potentially Seth Schreiber or a member of the DBH Automation Team Rebekah Nansel Kim Hokanson David Bell David Bell, David Welsh and Sara Stith will work to determine an Optum representative <p>David Welsh asked if this work could go through the QMIA Council first. Jen Griffis clarified that this issue has been discussed at the QMIA Council Meetings and they felt that this was an issue with implementation and needed to be brought to the IGT Meeting. Candace Falsetti offered the information that the QMIA Council was made aware of the issue but did not take it up as an issue to address because it was not determined to be a priority among the other issues the QMIA is addressing. Pat Martelle confirmed that since the QMIA Council already considered the topic but had to pass on it, then it is appropriate that the IGT address it.</p> <p>Pat Martelle requested, and it was agreed that a status report on the new CANS workgroup will be offered at the next IGT Meeting.</p>	Workgroup meeting members to assist with communication and setting up future workgroup meetings.
6	10:45am	5 min	Determine SDE Representative for the YES Communications Strategic Planning Workgroup	SDE	The SDE representative for the YES Communications Strategic Planning Workgroup was determined when the below action item was discussed.	
7	10:50am	10 min	Update on Regional Systems of Care Presentations	Ross Edmunds	The regional systems of care presentations were discussed when reviewing the below action item. See below for updates.	
8	11:00am	15 min	Discuss IGT Request Form on CBRS Training and Workforce	Team	The CBRS Training and Workforce Request document was reviewed. Rebekah Nansel stated that this request came from the ICAT Meeting members. A provider brought forward these CBRS training and workforce issues and offered some recommendations. ICAT is hoping to bring these recommendations to the IGT to see what changes can be done.	

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					<p>It was clarified that the rule related to CBRS was suspended due to COVID-19 and the rule will revert back to normal once it has been declared that the emergency is over.</p> <p>Pat Martelle asked for additional information about what aspects of the testing is difficult for Idaho candidates. Rebekah Nansel stated that candidates do not receive training in their degree programs or during their work experience which would help to prepare them for the exam. This is an expensive international exam that requires the candidates to purchase and read many books. There is also no preparatory course for this exam.</p> <p>James Phillips stated Medicaid and Optum have created a number of targeted and professional trainings for YES that are specific for Idaho. David Welsh stated that Medicaid and DBH would need to collaborate about trainings that are offered and identify the best way to move forward.</p> <p>Doug Loertscher added that the Idaho Association of Community Providers are willing to work with the IDHW to put together requirements and trainings.</p> <p>David Welsh stated that it may work best to find an existing certification that we can adopt rather than creating our own program. Doug Loertscher stated that the Idaho Association of Community Providers has discussed this topic in the past and he could pull the past suggestions for review.</p> <p>Joy Jansen stated that, from a school perspective, the training is community-based, and this does not translate well to a school setting. It would be helpful to include school elements in these training modules.</p> <p>Pat Martelle stated that this topic needs further discussion and research. David Welsh added that a partnership between Medicaid, DBH, community providers and schools is needed to figure out what options we have and the best way to move forward.</p>	

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					<p>After further discussion, it was determined that the following members would be a part of this small workgroup:</p> <ul style="list-style-type: none"> • David Welsh • Joy Jansen • Doug Loertscher will identify a few providers to participate • Doug Loertscher will also contact Optum and 'cc' Sara Stith to ask them to identify a staff member to participate • Ross Edmunds will identify a staff member from DBH to participate • Rebekah Nansel • Pat Martelle <p>Rebekah Nansel stated that this will require a rule change and a change to Optum's rules. Additionally, it would be helpful to get a provider representative from each hub throughout Idaho. Doug Loertscher stated that he would work on this request. Both Doug Loertscher and Rebekah Nansel both agreed to coordinate this new workgroup.</p>	
9	11:15am	5 min	Practice Manual Update (Standing Agenda Item)	Elizabeth Perkins	<i>Due to time, this agenda item was not reviewed.</i>	
10	11:20am	5 min	QMIA Update (Standing Agenda Item)	Candace Falsetti	<i>Due to time, this agenda item was not reviewed.</i>	
11	11:25am	5 min	Cost Sharing Update: 1915i (Standing Agenda Item)	Ross Edmunds	<i>Due to time, this agenda item was not reviewed.</i>	
12	11:30am	10 min	Family Engagement Subcommittee Update (Standing Agenda Item)	Jen Griffis	The item related to identifying members from SDE and Medicaid to attend the Family Engagement Subcommittee has been on hold until the IGT/IWG decision was made. Jen Griffis stated that she will reach out to SDE so that they can identify a member. Medicaid noted that Jen Griffis can contact Sara Stith about identifying a Medicaid member to attend these meetings.	
13	11:40am	10 min	Clinical and Training Subcommittee Update (Standing Agenda Item)	Kim Hokanson	<i>Due to time, this agenda item was not reviewed.</i>	
14	11:50am	5 min	Braided/Blended Funding Discussion (Standing Agenda Item)	Ross Edmunds	<i>Due to time, this agenda item was not reviewed.</i>	

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15	11:55am	5 min	Review Future Agenda Topics and Action Items	Pat Martelle	The following future agenda items were identified throughout the meeting: <ul style="list-style-type: none"> Status Report from the new One Child One CANS Workgroup Status Report from the new CBRS PRA Workgroup 	
16	12:00pm	--	Dismissal	Pat Martelle		

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

Follow Up Items	Date Opened	Owner	Due Date	Complete/Comments	Status
Send notices and processes related to premiums to the Federation, MMIS Call Center, Healthy Connections, DBH staff and Lael.	8/2/19	Medicaid	8/30/19	3/6 Update: Candace Falsetti from DBH and Sara Stith from Medicaid will check on this agenda item and provide an update at the next IGT Meeting. 4/3, Update: Medicaid has waived co-pays for the time being due to COVID-19. Agenda items will be combined.	5/1, In Progress. Medicaid stated that not all co-pays are being waived. A notice will be sent out about clients not losing their eligibility due to not paying premiums. This will be shared with the identified parties.
Get clarity around the value of the regional SOC project and the ability to have DBH work on the project.	3/6/20	Ross Edmunds	4/3/20	4/3 Update: Previously identified system collaboration as an interest and discussed how we could look at system collaboration. Helpful to see what collaboration looks like in each region. Work with Regional Behavioral Health Boards and request they prepare presentations. Will cover one region per meeting. This will be done by Ross Edmunds.	5/1, In Progress. This was previously identified as system collaboration. The intention is to have one region present at

Follow Up Items	Date Opened	Owner	Due Date	Complete/Comments	Status
					each IGT Meeting. Ross Edmunds will work to get these presentations scheduled at the right time.
Complete two IGT Formal Request forms for IGT on behalf of ICAT.	3/6/20	Lydia Dawson	4/3/20	4/3, In Progress. Form will be emailed to membership today.	5/1, Completed.
Follow-up with Joyce Broadsword on the tribal providers use and feedback on the CANS.	3/6/20	Shane Duty	4/3/20	Craig Ward stated that the CANS is important for utilization reasons however, the implementation of the CANS has been difficult. Further discussions with Medicaid and Optum can take place at the May Medicaid Meeting. 4/3, In Progress. Spoke with DBH about concerns. Shane Duty will contact Joyce Broadsword and attend the May Medicaid Meeting and offer to invite Dr. Lyons for further assistance.	5/1, Completed. This was discussed with Joyce Broadsword. Medicaid stated that the meeting will take place virtually.
IGT members will ask SDE to appoint a representative for the YES Communications Strategic Planning Workgroup. This information will be shared with the YES Communications Strategic Planning Workgroup facilitators.	4/3/2020	SDE	5/1/2020		5/1, Completed. Eric Studebaker stated that he and Dr. Charlie Silva can attend this meeting for now.
Discuss updating the bi-laws to include membership information based on the feedback received.	5/1/2020	Ross Edmunds & Pat Martelle	6/5/2020		6/5, New.