

**Regional Interagency Coordinating Committee
Minutes from 03-17-09**

1. Welcome/Introductions
Present: Anna Bergman, Sandy McMerty, Roxane Romanick, Jody Bettger-Huber, Rebecca Helm, Dorothy Larson, Lorri Sandal, Keri Milas, Lori Bergquist, Michelle Hougen, Lisa Keidel, Jennifer Restemayer, Vicki Peterson
Deb Tibor, Carol Olson, Shonda Wild, Ava Tomahawk

2. Minutes from 11-18-08
The Minutes were reviewed and approved with one change from Deb Tibor.

3. Member Updates

Vicki Peterson:

- She recently went to training in Utah to develop a plan for the state with early diagnosis for children with autism. They started developing the state plan to be presented. Deb Balsdon will be reporting the state plan. They determined short term outcomes and long term outcomes. They networked with Colorado who has over 10,000 children in medical home. Their wait list is over 4 years. There are 275 children on the autism waiver.
- The autism legislation Senate Bill 2174 passed, which is a bill for the governor to create an autism council that would do a study on autism in North Dakota. They are still waiting on the autism waiver. There are 8 states that have passed their insurance mandates, 14 states still pending autism insurance mandates. Most states that have the autism waiver have a wait list of at least 2 years.

Lori Bergquist:

- They have a new unit manager, Moe Benz.
- Keri Milas is their new social worker.

Lorri Sandal:

- The waiver changes April 1st. They will finish their training on the 30th. The biggest change is that a child that only receives DD case management for the waiver as DD Case Management is no longer considered a waiver service. This means that a family may incur a recipient liability if they want to continue to receive Medicaid.
- DD Case Managers will now be called DD Program Managers.
- They will have more paperwork and a quality assurance role.
- Children in NICU will not be able to access the waiver while in NICU.

Rebecca Helm:

- Attended the Dr. Bruce Perry conference.
- The last tribal meeting was cancelled.
- They have gone through an influx of numbers quite frequently. They have had 12 referrals within the last couple weeks.
- Rebecca's caring bridge site - www.caringbridge.org/visit/anikaandnadiahelm

Jody Bettger-Huber:

- Healthy Families is continuing to expand. They had 14 referrals this week. Medcenter One has been doing a lot of referrals. The referrals are coming from a variety of ways: YCC, Youthworks, Head Start, hospitals, clinics, Early Intervention.
- The Healthy Families program has continued to do outreach for purposes of increasing referrals.
- They are feeling positive on legislative bills. They are anticipating getting expansion dollars. Senate Bill 2397 is expected to pass.
- They are looking at hiring another half time person.

Roxane Romanick:

- Pathfinders Conference April 16 and 17.
 - Staff from Part C will train with Dr. Larry Edelman on April 14 and 15 which will be on setting up web based meetings, using video cameras, webcams, etc. in service delivery - using technology to support programs and services.
 - Family Voices, ARC, and Pathfinders will be bringing in Jennifer Gronberg on Thursday. She will be talking about advocacy in writing and blogging and using the internet.
 - Pathfinders will offer family stipends. If you have a child under 3, their expense will be paid. No daycare will be reimbursed unless the child is in Early Intervention which Deb will reimburse.
- May 4th - Dr. Julianne Woods, speech/language pathologist, will be presenting on routine-based family directed Early Intervention services. This will be a free event.
- Family Voices Institute - May session is full. There is still room in the August session.
- April 2nd is Disability Awareness Day at the Capitol. There will be a book reading for children around noon. They are looking for children to be there.

Anna Bergman:

- Lisa Keidel coordinated home visitor safety training for staff. It was a very educational training.

Carol Olson

- They are still working on the document for milestones and red flags for early childhood up to 5 and the service matrix.
- There will be a picnic for families in the Family Mentor Project on May 3rd.

4. Legislative Updates/Federal Updates

a. Part C Application Public Comment

- Roxane Romanick: House Bill 1012, Department of Human Services budget. One of the primary concerns for Infant Development is always increased funding. The governor put in a 7% increase, it came out of the House at 6%, and right now they're trying to restore it in the Senate back to 7%.
- Roxane Romanick: Another negotiated item is \$2/hour raise for everybody. Initially the \$2 raise was for anybody making under \$15 an hour. They are trying to restore that as well to everybody working in the developmental disabilities system. They are also trying to negotiate rates for people working in nursing homes, providers of home base services for elderly and disabled, etc. There were also four additional developmental disabilities case manager positions that was taken out in the House, they are trying to restore that as well. Family Voices has sent out mailings on asking for increases. There was also some money that wasn't chosen in the Governor's budget on increasing infant development salaries - this was not taken up by either the House or the Senate.
- Roxane Romanick: Pre-K issue - there is funding in House Bill 1400 (funding package for education). Part of that was to fund a public funding preschool. There was money to start a 4 year old public funding program, it made it through the House for 4 pilot projects, the Senate took that money out, and now they are trying to get it restored.
- Roxane Romanick: Development of Early Learning Council - comes out of Federal House Bill. As far as Roxane knows that didn't get taken out.
- Roxane Romanick: Federally, Part C became part of the economic reinvestment and recovery package. Part B 3-21, along with preschool, got between 13-15 billion dollars in economic recovery money. Part C (Infant Development) got 500 million dollars that will be part of the 2008 allocation. We don't have any guidance or directives on how that money will be used. Part B is saying it will go towards saving jobs. They haven't heard that the state will cut state funding because of the extra money. There is a strong need for a Right Track database and also a strong need for an Early

Intervention database. The Part C application is due this week. The state has to put in how they're going to use the 2008 money, then it has to go for public comment. Roxane will send the link for the public comment but it should also be on the Department of Human Services website.

- Roxane Romanick: There is a Legislative Working Committee that meets every Saturday from 10-12 at Myhre if anyone is interested.

5. Program Reports:

- BECEP Right Track - Lisa Keidel
 - There was a question on Right Track visits at the previous RICC meeting. They were behind on kids that wanted visits and should have been seen. They would like to see newborns at about 2 months and Right Track hasn't been able to do that for a long time because of the state cutting the number of visits. Right Track is allowed an average number of 162 visits/month. We're slightly ahead of that. Lisa is working on a priority system, hopefully seeing all of the kids but trying to spread out the kids that are doing well. They are working on keeping better track of statistics. They are working hard on serving some of the outlying areas. They are pretty much caught up with those referrals.
 - The consultants have had many trainings: speech/language pathologists, BITSEA, Brigance, Dr. Bruce Perry.
 - Lisa has instituted a quarterly consultant meeting. Right Track has a lot of old handouts so she is in the process of updating them. She is also working on a Right Track policies and procedures manual.
 - Sandy asked how Lisa is working on her prioritization piece. Lisa is sorting it out where newborns automatically get assigned. She is also looking at indicators if they're at risk, born early, young mom, any comments written indicating they had medical problems. If we get a call requesting a visit, a follow up is made within 2 weeks. Sandy asked if the allotted visits are set by the state. Lisa said yes. One thing that caught Sandy's eye was when comparing the 2006 data from the 2008 data, there was a drop in eligibility. Lisa said it's related a little bit to tighter eligibility. Part of it is families are not interested in a referral or some families want referrals but they are not eligible. They have also changed their screening tool to the ASQ which does not match well with the eligibility evaluation. Also, the consultants need more training. They need confidence in recommending activities to families. Also, sometimes families are being referred to

hospitals or other services because they do not qualify for Early Intervention.

- Roxane Romanick: In looking at 3rd quarter and 4th quarter reports handouts, the 3rd quarter eligibility rate was 42% then back up to 57% even though Right Track went down in the 4th quarter. The average age of referral has not gone down (15 months).
- Shonda asked if Lisa tracks the rate of eligibility per consultant. Lisa said yes.
- Michelle asked if the RICC would like to address to Deb Balsdon just in terms of the large number of kids that need to be seen but can't be seen because of our limitation in the number of visits. Sandy asked why it was cut? Lisa said it was primarily because of funding. Some went to Early Intervention and some to other Right Track programs in the state. There was over \$1 million then it went down to \$800 thousand. Also there was initially no formula for assigning dollars to the region and then they went to a census formula which caused Region VII to lose out because before we were typically assigned funding on usage. We have 17% of the population so we got 17% of the funding. Jody said originally this region got 140 visits a month, then it was looked at again, then Deb upped it to 162 visits, so we originally have what we should have based on population. Sandy asked if there have been changes with other regions and whether or not they are seeing more kids and whether that change has impacted those areas? Roxane said West Fargo was serving under 2% and now their number has exceeded us. Sandy asked if we are the only area maxing, are other areas maxing. Roxane said the State ICC hasn't seen usage data for a long time. She will request it. Sandy asked if Right Track providers in the state get together. Lisa said she's attended one Right Track meeting and is attending another one tomorrow. Rebecca said there was talk about adding Right Track with the quarterly tribal meetings. Sandy said when we lost first Right Track dollars this committee stood up. Before we do that we need to see statewide data. It's nice to see where other regions sit. She would like to find another region that's having similar issues. She would like to have some good data before this committee stands up. Jody suggested requesting from other regions how much money was allocated, how much was used, how many screenings were made, how many referrals were made, and what their eligibility was. Roxane said the directors

and coordinators are meeting this afternoon. Roxane will put in a request.

- Right Track will be receiving OAE and tympanogram equipment. Lisa will attend a training Thursday morning on this equipment.
- Standing Rock Early Intervention - Rebecca Helm and Dorothy Larson:
 - There are only a handful of kids that have not been found eligible.
 - They have hired additional Right Track staff.
 - They have to do more training with staff. They are trying to encourage staff to sit down with parents and fill out the ASQ since they are not getting them back.
 - Referrals have gotten younger. Between 5-6 kids were referred from NICU.
 - Dorothy talked with Jimmy McLaughlin, investigator with CPS, on CAPTA referrals as she is not sure what to do with them. Lorri suggested referring them back to the county.
- BECEP Early Intervention - Michelle Hougen:
 - The biggest issue right now is the funding that will be changing. We're currently on a membership funding system, meaning regardless of how many times a child receives services for the month, we still bill for that child the number of days times the unit rate. The primary source is Medicaid. Medicaid is not pleased with the system of funding for Early Intervention and is requiring that our state go to a fee for service, meaning that we will be doing billings for every time we do a service (home visits, etc). The point Infant Development is at right now is trying to make sure that we are listing every single activity that we do so that it can be covered whenever we start billing fee for service. There still is a question as to whether or not when we will begin fee for service. Initially Deb thought we wouldn't have to start until July 1, 2010. Evidently the feds are getting impatient and said they would like it to start April 1, 2009. Deb has proposed starting January 1, 2010 which would also be the middle of our fiscal year.
 - Roxane Romanick: What happens now is the unit rate for programs look different. One of the difficulties right now is we're trying to look at fee equity. We are trying to figure out what special circumstance would it be that you would get more money for certain things (a lot of travel in your region, more kids with low incidence). We are worried about all the small programs that operate only in Infant Development that don't have any other

source of income, cash flow issues, coverage issues and being able to maintain their staff.

- Michelle Hougen: Wanting to make sure that all of the administrative costs are a part of this fee for service, all the time it takes and all activities you do outside of seeing the child in the home. The reason there's such a difference is because the legislature mandated a retrospective rate setting which nobody really understands. All we know is it looks at the number of kids you were serving at that time, as a result you have new programs that don't have the history that end up with a unit rate in the 20s, whereas our unit rate is 18. There's so much variability in unit rates. The professionals we have employed across the state do not make salary comparable to the school system and private practice.
- Michelle Hougen: We appear to have leveled off in kids. The average is 205 kids and we have not been meeting that.

6. Old Business

- Use of Regional Allocation for Staff and Family Training
 - Sending parent with staff to training - Roxane said staff has been told. There's about \$3,000 left in the budget until the end of June. Do we want to use it to go out for training or to bring somebody in for the staff? The only issue is we already have so much training scheduled. If somebody would have suggestions for family training for Early Intervention issues we could do something in June for families. Rebecca said one thing she hears a lot about is CPR/first aide. Anna said discipline/behavior. Jennifer said navigating the health care system.
- RICC Screening Work Group Report - Roxane Romanick
 - We're moving forward. The project has morphed into a portfolio that has milestones and red flags on the inside. It will have a sheet that will go to the parents on who does screenings and then tips on how to ask for screenings when you call. The back will have tips to childcare providers on how to talk to parents. Do we do developmental milestones and red flags or a combination of both? Red flags are helpful to childcare providers but not family friendly. Sandy said she likes red flags as a parent, it gives the provider a better piece of information to approach the parent with.

7. Program Determinations and Quality Improvement Plan

Roxane is hoping to have the regional information when we come back

together in April

8. Adjourn

The next RICC meeting will be April 21st. Motion to adjourn the meeting made by Shonda Wild. Motion seconded by Rebecca Helm. MOTION PASSED. The meeting was adjourned at 12:01 p.m.