

**Workgroup Mtg. – March 14, 2014**

**DD Doubletree - Capitol View Room - 11th Floor**

Attendees: Dan Haug, Tricia Dusheke, Andrea Purdome, Vicki McCarrell, Kathleen Featherstone, Andrea Swope, Linda Holland, Boone Wagner, Gus Epple, Brenda Rocoberto, Linda Bowers, Etta Mitchell, Cory McMahon, Keith Schafer, Mary Sullivan-Thomas, Peg Capo, Gary Schanzmeyer, Marcy Volner, Melissa Knipp, Robin Rust, Amy Kessel, Kim Stock, Rikki Wright, Alecia Archer, Nancy Hayes, Jake Jacobs, Ron Kruse, Vicky Davidson, Stephanie Briscoe, Jeff Richards, Ann Graff, Juan Hurn, Terry Combs

**1. Dan Haug made the following remarks:**

- The Mental Health Commission would like a presentation done by this group at the June 3<sup>rd</sup> Commission meeting. A reaction to presentation would be discussed at the July Commission meeting.
- The DD Redesign website includes the minutes as well as other document and FAQs so please pass this information along to anyone who would like information. A list of all members of each of the groups will also be placed on this site.
- Brent McGinty, with the MO Coalition of Community MHC, will begin attending these meeting so he can be a resource on the allocation system and answer any questions the group may have. Brent can provide interface and client information when we get to that point as well.

**2. Les Wagner handed out his PowerPoint presentation and discussed with the DD workgroup.**  
(The PowerPoint is called “Local Option” on the website)

Key items discussed during PowerPoint:

- A few months back Dan, Les and several others met with 5 executives in Ohio to discuss how their DD System Redesign functions.
- In response to concerns of MARF members that they might be excluded from providing services, Ron Kruse pointed out that Medicaid rules require that consumers be provided choice of providers if they are available. County boards have no control over who enrolls as a provider and where they provide services.
- It was asked how working with multiple co-ops could be consistent? Alecia Archer responded that we have always talked about how to increase this but knows will be hard to do. One solution on how to be consistent is the fact the MACDDS group has been around a long time and can do training on intake and eligibility the same. Ann Graff also mention the individual sub-group is working on the conflict of interest areas and we should agree with the sup-group to move forward and follow their recommendations once those are made. MARF is coming together as a group of providers and lack of consistency now is reported to the DMH Regional Offices. Questions on who to report to in future with MARF? Alecia stated that MACDDS and MARF are working together across the state on this will also be helpful for solutions to this

issue. We need to be consistent with Medicaid and State dollars as much as possible. Dan Haug said from a department's perspective, would consider doing a contract with the co-ops and put the conflict of interest language, whatever that might be, and worded the same way for each of the contracts across the board. We need training and eligibility in the contract to be consistent there also. Keith Schafer stated we are not looking for perfect consistency which is why we don't have just one DMH Regional Office. He indicated eligibility and determination has to be the same for the utilization review process or this will create problems. When decentralize, hard to be the same across the board. Like schools, one functions well and another does not. Can't say will do this process the exact same way in all areas. Can do some things but not all things in each area. We can learn from each area on what works and share along the way with others.

- Stephanie Briscoe stated she takes calls from families at times that they don't want to report issues because of fear of retaliation at the SB40 level, State level, or lower state level and that she's not sure what to tell families. Boone Wagner replied that is violating the laws that exist and no new rules should be made but make material available to clients on how the process works and where to go to get it resolved in the proper order. Stephanie Briscoe asked if you disagreed at the SB40 level, how you would handle this process. Alecia Archer replied that in her area, hasn't heard of any issues with this but phone calls go to director and are handled promptly. They have three family members on the board of directors also and would be handled promptly. Keith Schafer replied that we will have material of a series of steps that tell them the order of which to address and in what order. Jeff Grosvenor asked if a co-op is bigger than one county, then who is going to handle conflicts? Alecia stated there is more opportunity since there are more entities to go to within that co-op. Jhan Hurn stated the sub-committee is still working on how to handle this topic and is working through all the details and the grievance procedures. Keith Schafer stated if you have co-ops in place will multiple governing boards, then accountability will need worked out. We will also have to decide how to contract and if can do contracts directly with a co-op. Rikki Wright will look into purchasing issues and legal right issues as well.
- Would be helpful for more input from families on strategic planning so we know what is needed to be done better. Keith Schafer stated the conflict of interest is one of our main issues of concerns. He stated that Partnership of Hope program didn't come from the state, but SB40 boards, and the system changed dramatically and wouldn't have happened if was at the state level alone. Protocols need to be in place to answer questions.

**3. Keith Schafer stated the Mental Health Commission will probably be asking the following questions of this committee:**

- How will this process be better than it is now? How will we deal with contracting complex issues? Risk sharing; is it a bigger issue when shifting these changes? These issues will be at the heart if this proceeds forward or not.

- Cory McMahon asked what Keith's recommendations were to get this past the Commission? Keith stated that will be their decision alone. He will have open dialog with them but will not tell them what their choice should be.
4. **Kristen Edwards from MO Healthnet went over the Waiver Considerations handout that was passed out to the workgroup. (The Waiver Considerations document is on the website).**
  5. **A one-page document called Time Lines for Community Support Waiver amendment 2011-2012 was passed out. Robin Rust went over the document.** (The Time Lines document is on the website)
    - Keith Schafer indicated one complication we have had in the past is when we submit a waiver document to CMS and the whole document has to be reviewed instead of just the amendment we submitted. Kristen Edwards mentioned that the HCBS Rule is being enforced. Keith clarified that this new definition of community is specific about no new group cluster settings so will need to be a transition plan that occurs. When we submit a change it triggers 6 big entities to be involved and takes on bigger issues so we need to keep this in mind. Kristen clarified that CMS requires when delegation is to non-governmental entities; a contract needs to be a three-party agreement with a Medicaid Agency, Operating Agency and the entity
    - Another question was if we should do items that won't require an amendment change like on Intake and Eligibility? Keith thinks all main areas will need to be addressed with Mo Healthnet in his opinion. Boone said all items don't need amendments like advocacy and such and Kristen agreed. Keith asked how the group felt on just doing the smaller functions since the 4 main core items will need amended. Keith indicated that if we start a process on ancillary services and submit the big 4 to CMS and is denied, will we be okay with just those ancillary services only and not the core? It was agreed this topic will need more discussion. Les commented the one page document discussed by Robin Rust is extremely helpful for this group on things to consider and especially the timelines.
    - Boone Wagner asked who is claiming administrative claiming and what can they bill for? Alecia Archer replied this is two pronged and 50/50. Alecia stated she needs the reports show requested 6 months ago to look into this. Keith Shafer stated Tom Flannigan is looking into this. Keith Schafer said the department started this because separating advocacy and accountability should go together. If take responsibility you must have the authority to do budget. CM only is only taking on half of this process. The idea of taking on accountability of the budget and making decisions to stay within the budget and be accountable is needed.
    - The issue of doing case management in areas that is not funded in areas of low Medicaid rates or children services was discussed. Keith Schafer said no urban counties stepped forward to do a pilot and probably because of the Case management side of things. This issue can be addressed in the transition into those areas. We cannot separate case management and the budgeting piece. This is a huge issue that will need to be discussed more.

### **Timeline Issues were discussed:**

- Alecia Archer asked how we should address the timelines? Kristen Edwards responded first you need to know what you want and how you want it, and then worry about the details of how to change. Alecia stated we need to start working on core four items now to get amended. Keith agrees but still need to talk to the regional offices and Jeff Grosvenor so we can define what has been done in the past and what would work now. Robin Rust can help write the language for this process. Dan Haug stated we need to pick the pilot groups and move forward. It was agreed would pick two pilots and we need to discuss and look into this at the next meeting. Ann Graff, Dan Haug and Greg Kramer will discuss this and it will be a topic at the next meeting. Provider choice, conflict of interest and contracting needs to be worked out at the next meeting as well. Cory McMahon asked Dan Haug what our response will be to Rep. Allen on getting a report from this group by July and if will be a hearing or not? Dan responded that a written report would probably be done.
- Les Wagner asked if we wanted to bring on more pilots if the language would need to be worded a certain way to do so? Kristen Edwards said if we want to bring on more pilots than what we originally do then we would need to write the amendment to indicate that. If we word at some time, we will bring on more pilots then we would need to submit another amendment at that time. Robin Rust stated we need to agree on the functions and who is the oversight. At this time she does not have enough information to start on the amendment. Alecia Archer didn't think we need all the answers before we started this process. Dan Haug stated we need to have the pilots decided on first. Ann Graff indicated that decisions on how the co-op will be organized and contracted will need to be solved before we can organize this much. Ann Graff stated the co-ops interested in pilots need to have a discussion within the next two weeks before the next meeting.

The sub-groups ran out of time to meet individually at this meeting.