

INTERAGENCY COORDINATING COUNCIL (ICC)



NOVEMBER 8, 2012 MINUTES

MEMBERS/APPOINTEES PRESENT

Lisa Chavez, Karen Lucero, Jim Copeland, Andrea Leon, Arlene Waters, Cynthia Mantegna, Peggy Denson, Sophie Bertrand, Janis Gonzales, Samantha Carl, Paula Seanez, Cindy Faris, Ida Tewa, Joanne Corwin, Maria Varela, Lourdes Vizcarra, Anita Sedillo, Anna Otero Hatanaka, Johnny Wilson, Karen Ziegler

PROXIES PRESENT

Arlene Waters Proxy for Jyl Adair

MEMBERS/APPOINTEES ABSENT

Jaime Diaz, Robin Wells, Lora Church

OVERVIEW

Lisa Chavez, ICC Co-Chair, welcomed ICC members and guests to the meeting and asked for introductions. Lisa thanked Johnny Wilson, CEO of Parents Reaching Out (PRO), for hosting the meeting.

MEETING AGENDA

Lisa Chavez asked for a motion to amend the agenda by removing the vote to recommend a new ICC parent representative. There have been no applicants as yet but the ICC Executive Committee will continue working to identify candidates for the position. ***MOTION: Cindy Faris made a motion to amend the agenda as requested. Paula Seanez seconded the motion. There were no objections or abstentions. The motion passed.***

ICC LEADERSHIP

Jim Copeland, ICC Past Chair, facilitated the discussion regarding options for ICC leadership. The following options were discussed:

- Lisa Chavez and Karen Lucero to continue serving as Co-Chairs;
- Jim Copeland to continue serving as Past Chair;
- ICC to elect new Co-Chairs, or a Chair and a Vice Chair. If this happens, Lisa and Karen would serve as the Past Chairs.

Following discussion, the ICC recommended that Lisa Chavez and Karen Lucero continue as ICC Co-Chairs and Jim Copeland continue as Past Chair. Lisa, Karen and Jim agreed to continue serving. ***MOTION: Cindy Faris made a motion that Lisa Chavez and Karen Lucero will continue serving as ICC Co-Chairs and Jim Copeland will continue serving as ICC Past Chair. Arlene Waters seconded the motion. There were no objections or abstentions. The motion passed.***

SUCCESSION PLANNING

Jim Copeland led a discussion regarding developing a mentorship plan for the Co-Chair or Chair / Vice Chair positions and the length of the term for the leadership positions. The following options were discussed:

- Lisa Chavez and Karen Lucero to continue as Co-Chairs for two (2) more years;
- Jim Copeland to continue as Past Chair for two (2) more years;
- Lisa, Karen and Jim to continue for one (1) more year;
- Go back to Chair / Vice Chair leadership positions after Lisa and Karen's term ends;
- ICC to elect mentee Co-Chairs or Chair / Vice Chair in November of 2013. Executive Committee will mentor for one (1) year. After one (1) year, the mentees will become Co-Chairs or Chair / Vice Chair and Lisa and Karen will serve as Past Chairs;

Following discussion, the ICC came to the following consensus:

- Co-Chair option provides the most effective leadership;
- ICC to elect mentee Co-Chairs in November 2013;
- Following the November 2013 election, ICC Executive Committee will mentor the Co-Chairs for one (1) year;
- ICC Bylaws will be reviewed by Executive Committee and updated as needed to reflect the above consensus. If changes are recommended, the ICC Bylaws will be presented to the ICC for approval at the January 2013 ICC meeting.

CONSENT AGENDA

MOTION: Karen Ziegler made a motion to approve the consent agenda. Andrea Leon seconded the motion. There were no objections or abstentions. The motion passed.

FIT LEAD AGENCY REPORT

Andy Gomm distributed copies of the report. The data in the report can help determine the health of the FIT System. Andy corrected the mistake on page 4 of the report by stating there has **not** been an increase of 29.04% in children served with an IFSP during the first quarter of this fiscal year. The number of children with an IFSP served in the first quarter of this fiscal year was 6,905.

The FIT Program could not sustain the past growth from fiscal year to fiscal year so difficult decisions regarding at-risk eligibility had to be made. New referrals continue to replace the children exiting the program. However, there should be a drop off in monthly numbers of children served with an IFSP when October and November data is calculated. Jim Copeland asked if the data base could determine if any of the 6,905 children receiving IFSP services were going to be turning three (3) by June 30th. Andy stated approximately 250 children will turn three and exit FIT services each month.

The FIT Program has to report the category of multi-race to the federal government. Andy stated the majority of children listed as multi-race are probably Native American. The ICC requested that future reports compare the race / ethnicity of children served to census data and also continue to compare the percentage of children's race / ethnicity to the total number of children served. A child's race/ethnicity may be unknown until the child is made eligible in FIT KIDS. Andy discussed the changes in the percentages and numbers of children eligible under medical/biological risk. Andy said there may now be more of an incentive for providers to move eligible children to the category of developmental delay instead of leaving them under an at-risk category. The number of children served under eligibility categories is based on children with an IFSP.

ICC COMMITTEE REPORTS

ICC Finance & Funding Committee

Peggy Denson reported. The Committee met yesterday and reviewed the Committee's Action Plan and the 2004 Rate Study. The Committee discussed the anticipated cost of implementing a cost of living increase and the cost of implementing the rate increase recommended in the Rate Study. The Committee will survey FIT Providers to identify the cost containment measures agencies have been forced to implement. The Committee will utilize the survey sent by Anna Otero Hatanaka to the Association of Developmental Disabilities Community Programs (ADDCP) and adapt the survey as needed. The goal is to have the survey out by end of November with data returned by the end of December. The Committee will be meeting with key DOH administrative staff to discuss fiscal issues and identify potential strategies. The Committee would like to add more members including an ICC parent.

Quality Committee

Cindy Mantegna reported. The Committee will be developing an information tool box for the FIT website for parents and providers. Cindy distributed the most recent version of the *Quick Guide to FIT Program Practices*. The *Quick Guide* will be one of the information documents available in the tool box. Cindy asked the ICC for a vote to approve the *Quick Guide*. It was decided that the vote will be held by the end of the meeting. The Committee will be looking at ways to access quality in the FIT Program and will start with the comprehensive multidisciplinary evaluation. The FIT Program could pilot a tool that assesses quality practices.

PARENT PANEL

Andrea Leon welcomed the ICC Parent Panel and introduced the first parent.

Gabrielle has a two (2) year old son who has been diagnosed with autism. Her son's pediatrician referred the family to early intervention and gave the family a list of programs. Gabrielle called the agency three (3) times but it took two (2) months for the agency to contact the family. The autism diagnosis was difficult and the family needed support. The evaluation process was also difficult but the evaluation report contained accurate information. Her son

receives speech and play therapy. The family has a great service coordinator and they are very happy with the services provided. 40 hours of service a week are recommended. The IFSP continues to include sign language goals. The family will be very sad when early intervention services end. Sophie Bertrand asked if the parents had the option to call another agency when the first agency did not call back quickly. Gabrielle's response was "the first call is difficult enough for parents to make". Andy Gomm asked Gabrielle who provides the recommended intensive level of service. Gabrielle said the recommended 40 hours a week are what they are asked to do with their child. They engage their child in play every 30 minutes to decrease the staring spells and they incorporate the strategies modeled for them in daily routines. Gabrielle said all therapy services are provided by the early intervention agency. The SLP and OT each come one (1) hour a week. Play group is two (2) hours a week.

Jeff has a daughter with a very rare syndrome. She was born with a cleft palate, turned up feet, heart, respiratory and other issues. She spent six (6) weeks in the NICU and then went home on oxygen and with a feeding tube. A week after going home, the family was contacted by the early intervention agency. The agency contracted with a feeding specialist to provide the nutrition support recommended by one of her doctors. Services include occupational therapy and service coordination. A family friend who is a NICU primary care physician also provides the family with information and support. Their daughter had her first cleft palate surgery at the end of July. She has also had foot surgery and was casted from feet to hips. A visit to the cardiologist showed the hole in her heart had closed so no heart surgery was needed. She wears hearing aids because her ear canals are very small. She will go back in December for her second cleft palate surgery. A nurse spends 37 hours a week with their daughter while the parents are at work. The School for the Blind and Visually Impaired comes every quarter. Their daughter is a very happy child. Jeff reported they like the progress note provided at the end of each home visit. He said there is a lot of paperwork and they need someone to help them fill out the paperwork.

Elizabeth has a son who was born at UNMH with no complications. After his birth, two (2) doctors came to her bedside and reported their son might have Down syndrome. The parents were told a blood test would be done to confirm the diagnosis. Later, their son started to throw up, his temperature dropped, and he was put into the NICU. They learned he had no gastrointestinal issues but did have three (3) heart issues that needed monitoring. The NICU Case manager came by and brought a booklet about early intervention. Elizabeth stated they felt very vulnerable and suspicious about early intervention but were willing to fill out the single page referral permission sheet. Their son was released from the NICU and went home on oxygen ten (10) days after he was born. At that point, the parents started thinking about the future. They chose an early intervention provider and they were quickly contacted. The evaluation was scheduled and completed. Their son started receiving physical therapy services. It was very difficult to tell family and friends that their son has Down syndrome. Early intervention has empowered and educated the parents. Services are meeting their child and

family needs. Their son is off oxygen now. He still has a hole in his heart. Elizabeth said it is priceless to have early intervention services start as soon as possible. If a child starts at 6 months of age, a sixth of the service time has been lost. The parents found out about PRO through the early intervention booklet. PRO is fabulous. They informed the family about DD Waiver services and the parents have applied. The parents participated in the Buddy Walk to raise awareness about Down syndrome. Elizabeth said it is so reassuring to know their child's life expectancy is now 55-65 years. Elizabeth said she would love to meet other parents with babies. Anita Sedillo said she has met a lot of parents on Facebook. Lisa Chavez asked Elizabeth why they chose to fill out the referral permission form. Elizabeth said it was because it was one page. If it had been a longer form, they would probably have not filled it out. She asked the ICC if they knew of a good attorney to help parents create a will as it is more complex when parents have a child with a disability. Cindy Faris stated Marianne Green is an Albuquerque attorney who has helped parents with this. Elizabeth said parents watch a number of educational videos before their babies are released from the NICU. She recommended a video about early intervention be made available.

Sophie Bertrand asked the Parent Panel about the early intervention paperwork that parents are asked to complete. The parents all agreed that streamlining the paperwork, especially the IFSP, would help parents. Lisa Chavez thanked the Parent Panel and invited them to join the ICC for lunch. Lisa thanked Andrea Leon for making the arrangements for the Parent Panel.

RECOGNITION

The ICC recognized Representative Danice Picraux for twenty (20) plus years of outstanding service in the state legislature and for her support of quality statewide early intervention services. Danice is retiring as she and her husband are moving to California to be closer to their children. Anna Otero Hatanaka said she has known Danice for 30 years. They met when Danice was a lobbyist for child care services. Anna reviewed Danice's many contributions. Danice has been a wonderful friend to the FIT Program and the developmental disability community. She was presented with a certificate of appreciation and joined the ICC for lunch and cake.

COMPLETION OF COMMITTEE REPORTS

Interagency Coordination

Paula Seanez reported. Copies of the Committee's Action Plan were distributed. Paula reviewed the three critical issues the Committee will focus on which are: access to services for children with autism; clarify and enhance the interface between early intervention and home visiting; and improve FIT interface on inclusive issues. Paula highlighted some of the action steps the committee will implement to reach their goals. Sbicca Brodeur stated it is very difficult for parents of children with autism to figure out the autism services provided by different programs. It would be helpful if the committee could identify each program, who to contact, the services provided, and the ages served.

Qualified Statewide Workforce

Sophie Bertrand reported. Copies of the Committee's Action Plan were distributed. Sophie reviewed the two (2) critical issues the Committee will focus on which are: increasing statewide availability of highly qualified staff and increasing statewide availability of therapists. Sophie highlighted several of the planned action steps. Use of distance technology to increase the availability of therapists was discussed. Jennifer Chavez at Medicaid can provide information on how to bill for therapy services provided through distance technology. Maria Varela stated that since FIT is carved out of managed care, providers can bill with codes specific to where a service is provided. Paula Seanez offered to have Growing in Beauty serve as a pilot site. Cindy Mantegna suggested that the committee add an action step about meeting with the state licensing boards regarding approval of the use of distance technology in service provision. Cindy stated meeting with and partnering with the state boards is critical as they control how services can be provided. Karen Lucero offered to help with the PT board. Cindy Mantegna offered to help with the OT board. It was suggested that Robin Wells might help with the SLP board.

Forms and Process Review Committee

Lisa Chavez reported. The first meeting of the Committee will be held by conference call on November 30 from 2:00 to 4:00 pm. Lisa reviewed the two issues the Committee will address which are: Fit forms and processes need to be streamlined; and FIT IFSP form is lengthy and time consuming. She highlighted several of the action steps.

Committee Membership

The ICC discussed committee membership from outside the ICC. The following individuals have expressed interest:

Forms and Process Review Committee:

Andrea Kyte - Los Angelitos in Taos
Magi Gerety - New Vistas in Santa Fe
Trish Pompeo - Children's Workshop in Raton
Michelle Staley - UNM CDD in Albuquerque

Finance & Funding Committee:

Ron Garcia - New Vistas in Santa Fe

Interagency Coordination Committee (Home Visiting):

Patty Shure - Las Cumbres in Espanola
Andrea Kyte - Los Angelitos in Taos

Qualified Workforce Committee:

Patti Shure - Las Cumbres in Espanola

Quality Committee:

Magi Gerety - New Vistas in Santa Fe

Trish Pompeo - Children's Workshop in Raton

There was discussion about the commitment of time and energy needed to effectively serve on an ICC Committee. Sporadic participation is detrimental to committee functioning. When outside interest in serving on an ICC Committee is expressed, the Committee Chairs will discuss the time and level of commitment needed. Committee Chairs will also ask committee members to read and sign the *ICC Committee Member Role and Responsibilities* form which outlines the responsibilities of committee members.

ICC Committee Meeting Dates / Locations

Finance & Funding Committee: 1/15/13 at 2:00 pm

Interagency Collaboration Committee: 1/15/13 at 3:00 pm at NMSD

Quality Committee: 11/30/12 from 10:00 to 12:00 & 1/17/13 from 9:00 to 11:00 at Patti Ramsey's Office

Forms: 11/30/12 - 2:00 to 4:00 Conference Call

Qualified Workforce: To Be Determined

Jim Copeland asked the ICC Coordinator to post the ICC Strategic Plan on the FIT Coordinators List Serve. During discussion, the ICC Coordinator was also asked to post the initial committee meeting information on the FIT Coordinators List Serve to encourage interest in serving on ICC Committees. It was decided that Committee Chairs / Scribes would email their updated Action Plans to the ICC Coordinator by the end of the day on Friday, November 16, 2012. ***MOTION: Peggy Denson made a motion to approve the ICC Strategic Plan as presented today. Karen Ziegler seconded the motion. There were no objections or abstentions. The motion passed.***

FIT FINANCIAL REPORT

Andy stated Deb Vering was not able to co-present as the DDSD is being audited today. Andy presented a powerpoint presentation. Andy stated the information will assist the ICC in understanding the issues around funding and help with legislative planning.

Andy reviewed the FIT FY12 Budget:

State General Fund: \$14.0 million

SGF Special Appropriation: \$.5 million

IDEA Part C: \$2.8 million

Private Insurance Revenues: \$1.1 million

ARRA July -Sept: \$1.1 million

Total: \$19.8 million

Andy reviewed the FY13 Budget:

State General Fund: \$14.0 million

IDEA Part C Grant FY 13: \$2.8 million

IDEA Part C Grant FY12: \$2.8 million

IDEA Part C Grant Carryover FY11: \$110,000 (spent by end of September)

Private Insurance: \$1.2 million

Total: \$20.9 million

Andy stated 24% of New Mexicans don't have any health insurance coverage. An increase in health insurance coverage in the state should result in an increase in FIT Private Insurance revenue.

The good news is that the FIT Program has had savings from previous fiscal years.

Projections:

- DDSD is able to carry forward the FY12 IDEA Part C Grant;
- Three (3) year old savings will become evident starting Oct-June 2012-2013;
- There will be adequate funds for FIT services in FY13 and FY 14 in both provider agreements and Medicaid match.

However, in FY14, FIT may need an expansion to fund services.

Andy reviewed Medicaid Retroactive Claiming. This is done every quarter and it has helped the FIT Program stay within its budget. Since June of 2008, the FIT Program has recouped \$2,368,622.76.

Andy reviewed the rates recommended in the Rate Study:

- Service Coordination: \$155
- Home and Community Individual: \$115.00 per hour/\$28.75 per 15 minutes
- Home and Community Group: \$52.00 per hour/\$13.00 per 15 minutes
- Center Based Individual: \$75.00 per hour/18.75 per 15 minutes
- Center Based Group: \$30.00 per hour/\$7.50 per 15 minutes
- Comprehensive Multidisciplinary Evaluation: \$625 per evaluation.

The Rate study is now nine (9) years old and the cost of business continues to go up. There has been some talk at the DOH about doing another rate study. It would cost the FIT Program \$1.9 million extra to implement rates from the rate study.

The ICC Finance Committee had asked Andy to estimate how much it would cost if 10% was added to each rate. Answer: FIT would need \$3.9 million dollars. In the past, the ICC has supported a cost of living increase (COLA). Rate Study rates + 2.83% COLA for the past 8 years: cost FIT \$6.9 million

Cost of restoring at risk cuts:

From 2 hours a month to 4 hours a month: \$2.8 million

From 2 hours a month to 6 hours a month: \$3.9 million

Using the rate study rates + 10%: from 2 hours per month to 4 hours per month: \$4.6 million
or 2 hours per month to 6 hours per month: \$5.7 million

Restore at risk cuts and rate study for home and community based: from 2 hour month to 4 hours a month: \$4.6 million or 2 hours month to 6 hours: \$5.7 million

Restoring at risk cuts and implement rate study rate +10% for home and community based:

From 2 hours to 4 hours a month: \$7.9 million

Or from 2 hours to 6 hours a month: \$9.0 million

Andy asked the Finance Committee to talk about their priorities. Jim Copeland stated the priority would be to ask the Legislature for funding to implement the rates from the 2004 rate study. If this is successful, then go back the next year and request additional funding. Janice Gonzales agreed. There was consensus that it does not make sense to spend money to do another rate study. Anna Otero Hatanaka said it will be very important to present as much data as possible and the information from the provider survey will help. Anna suggested that a three year funding increase plan may be the best. Anna asked the ICC to give authority to the Finance & Funding Committee and then to the Executive Committee to make decisions regarding FIT legislation. The Health and Human Services Committee recently met and Anna spoke during the public comment period about the needs of the FIT Program. Karen Lucero thanked Andy for presenting the data. ***MOTION: Anna Otero Hatanaka made a motion that the ICC empower the ICC Finance & Funding Committee to recommend legislation concerning the FIT Program with the recommendation to go to the ICC Executive Committee for final approval. Paula Seanez seconded the motion. There were no objections or abstentions. The motion passed.***

ICC LEGISLATIVE PLANNING

Lisa sent the master copy of the ICC Legislative Action Plan around and asked ICC members to commit and / or continue advocating for the FIT Program with their Legislators. Lisa suggested that ICC members send their legislators a note of congratulations if they were elected / re-elected. Emphasis was placed on contacting legislators now and not waiting until the legislative session. There was discussion about new legislator orientation. Could information about FIT go in their orientation packets? Anna Otero Hatanaka said she would check. Lisa discussed the importance of bringing parents to the Legislature. The ICC provides FIT parents with a packet of information, a \$50.00 stipend plus mileage, and support for parents to stop by the offices of their legislators. Lisa shared the card that she left with her legislators last year. The card has a picture of her daughter, Lisa's contact information, and a powerful statement about why early intervention was so beneficial to her child. Anna Otero Hatanaka stated she is at the Legislature every day of the session. If assistance is needed, have Anna

paged by going into any office and requesting it. Anna stated the Health and Human Services Committee and their disabilities subcommittee has a public comment period. Anna encouraged ICC members to attend and take advantage of the public comment period to talk about the FIT Program. Anna asked how to obtain DOH support of FIT funding requests. Andy Gomm suggested a meeting with Brad McGrath and asking DOH to be neutral about requests for FIT funding. It was suggested that the Executive Committee meet with Cathy Stevenson and Brad McGrath.

ICC COMMITTEE REPORTING PROCESS

Sophie Bertrand distributed copies of the *ICC Committee Reporting Form* and discussed how Committees will use the form. Sophie stated it can be challenging to report to the ICC and the form will provide a format for oral reporting during ICC meetings as well as a written record of Committee reports. The ICC Coordinator will request that the designated person from each Committee email a completed form to her five (5) working days prior to an ICC meeting. The ICC Coordinator will use the information on the form to complete each Committee's Status Column on the master ICC Strategic Plan. The form is set-up so Committee Scribes can type in the information. ***MOTION: Cindy Faris made motion to approve the ICC Committee Reporting Form with a start date added to the bottom of the form. Paula Seanez seconded the motion. There were no objections or abstentions. The motion passed.***

FIT PROGRAM - CORE VALUES

Andy Gomm and Sophie Bertrand reported. FIT Core Values are used to ground people into how FIT services are provided. At the ICC Strategic Planning Retreat, the FIT Core Values and the national Seven Key Principles documents were presented. The ICC provided input and requested that FIT do more work on the FIT Core Values document before they could endorse it. Sophie and Andy reviewed ICC input regarding both documents. They saw a greater value in keeping the national document with the addition of the NM 8 principle on reflective practice. Sophie stated the NM 8 principle on reflective practice helps FIT interface with other systems in NM providing home visiting. Maria Varela asked for an example of reflective practice. Sophie replied services providers have a content component as well as a feeling component to every home visit. Supervisors help service providers develop self knowledge about their feelings so these feelings do not impact the work in a negative way. Supervisors help service providers sort out issues and come up with their own solutions. ***MOTION: Karen Ziegler made a motion to endorse the NECTAC 7 Key Principles with the NM 8 added which replaces the FIT Core Values document. Arlene Waters seconded the motion. There were no objections or abstentions. The motion passed.***

VOTING ON QUICK GUIDE TO FIT PROGRAM PRACTICES

MOTION: Cindy Mantegna made a motion to approve the Quick Guide to FIT Program Practices with the recommended additions discussed today. Paula Seanez seconded the motion. There were no objections or abstentions. The motion passed.

ROLES AND RESPONSIBILITIES FOR ICC COMMITTEES FORM

Sophie Bertrand distributed copies of the form. The form outlines the possible roles for ICC Committee Chairs, Committee Scribes, Committee Reporters, Committee Members, FIT Staff assigned to Committees and ECLN Staff.

LETTER FROM SECRETARY TORRES

Karen Lucero, ICC Co-Chair, requested that the September 4, 2012 letter from Secretary Torres which states that the DOH has received confirmation from HSD-MAD that the FIT Program will not be a part of Centennial Care and that FIT Program services will continue to be billed on a fee-for-service basis be put into the meeting minutes.

MEETING ANNOUNCEMENTS & EVALUATION

Lisa Chavez, ICC Co-Chair, asked members and guests to complete and turn in the meeting evaluation forms. The meeting was adjourned at 4:20 pm.

FOLLOW-UP MEETING TASKS / RESPONSIBILITY

ICC Members:

- Elect mentee Co-Chairs in November 2013
- Commit and / or continue advocating for the FIT Program with their legislators (ICC Legislative Action Plan)
- Anna Otero Hatanaka will check to see if FIT information can be added to new legislator orientation packets.

ICC Executive Committee:

- Following the November 2013 election, mentor the mentee Co-Chairs for one (1) year.
- Review ICC Bylaws and update as needed to reflect ICC consensus on keeping Co-Chair positions and electing mentee Co-Chairs for a one (1) year mentorship. If changes are needed, present the ICC Bylaws will be presented to the ICC for approval at the January 2013 ICC meeting.
- ICC Coordinator to post ICC Strategic Plan and initial ICC Committee Meeting Information on the FIT Coordinator List Serve.
- Meet with Cathy Stevenson and Brad McGrath.

ICC Committee Chairs:

- Email changes to Committee Action Plans to the ICC Coordinator by 5 pm on Friday, November 16.
- Utilize *ICC Committee Member Role and Responsibilities* Form to orient potential / new committee members to the commitment of time and energy needed to effectively serve on an ICC Committee.

- Assure that designated Committee person will complete and email the *ICC Committee Reporting Form* to the ICC Coordinator five working days before an ICC meeting.

FIT Program - Andy Gomm:

- Add to FIT Lead Agency Report - Comparison of the race /ethnicity to the total number of children served. Continue to include the comparison of the percentage of children's race / ethnicity to the total number of children served.