



REGIONAL PLANNING CONSORTIUM
Capital Region Board Meeting #6
December 12th, 2017 – 2-4pm,
Twin County Recovery Services, Inc.
350 Power Ave., Hudson, NY 12534

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1. **Call to Order** – Meeting was called to order by Bob Holtz.
 2. **Introductions (Name, stakeholder group, agency/organization, title)** – Board Members and Gallery Members introduced themselves (see page 6 for attendance list)
 3. **Approval of September 13th Meeting Minutes (Motion Needed)** – Board was asked to review the minutes from the 9/13/17 RPC Board meeting. Bob asked for a motion to approve the minutes, 1st – Bill Gettman, Minutes were approved, motion passed with no edits. Minutes will be posted to the CLMHD website.
 4. **RPC Statewide Survey** – Kathy Coons read the recruitment script for the Statewide RPC Survey being conducted by Syracuse University in partnership with State University of Albany. The board members took five minutes to complete the survey and return to Alexis.
 5. **Stakeholder Report (includes identification of issues and proposed recommendations)**
 - a. **Community Based Organizations**
 - b. **Peers/Youth/Family Advocates**
 - c. **Hospitals & Health Systems**
 - d. **Managed Care Organizations**
 - e. **Key Partners**
 - f. **Local Government Units/DCS**

Stakeholder Report Outs-

Community Based Organizations – No report this time

Peers/Youth/Family Advocates – No report at this time

Hospitals & Health Systems – Kathy Coons reported that Sam. Hospital continues to struggle with individual who cross systems (TBI), the LGU has reached out to NYS DOH for assistance.

Managed Care Organizations – Bob Holtz, reported that they have been having difficulty around getting HEDIS credit for post hospitalization if a person goes back to PROS right after discharge (since a claims is not submitted). The state is well aware of the issue and are looking into the billing process for this in order to capture this information.

Key Partners – No key partners were present.

Local Government Units/Director of Community Service – No report at this time

6. Review of State Co-Chairs Items – Feedback loop/open up for discussion of the 4 Capital RPC: State Identified Issues (1,3,6,11) – Kathy and Bob gave an overview of this meeting. Kathy directed the board attention to the RPC Chairs Meeting Minutes document.

Issue #1 – Kathy reviewed the notes regarding this issue, including some of the regional attempts that have been done to address this issue. Bob spoke about some of the internal mapping they have done at CDPHP that has helped with this issue- Angela and Lisa confirmed this issue. And that people are overwhelmed by having multiple providers. Angela encouraged ongoing education for consumers

- *Amanda Pierro reported even with one agency providing these services there may be multiple staff working with them*
- *Lisa Sioufas reported that the Western region seems to be engaging folks, this may be because of the health home investment*
- *Dave Shippee asked how many health homes there are, if there are less, is that more helpful?*
- *Kathy Coons reported that many engaged in HCBS services are not enrolled in a Health Home*
- *Kelly Lauletta encouraged quick engagement and turnaround, streamline and uniformity needs to occur, encouraging piloting something*
- *Kathy Coons stated CMAs caseload are overloaded, hoping the state can provide an opportunity to have other assessors. Kathy reported that CMAs reported that those who are HARP may no longer need care management services- Kathy also echoed the difficulty to fill vacancies in care management agencies.*
- *Linda Lewis reported that the paperwork is very burdensome and the pay is not great*
- *Bob Holtz reported that they have a very low number of Plans of Care (19), but hundreds of assessments (220)*
- *Provided by Bob Holtz per NYSDOH Data - As of November 24, 2017: Statewide*
 - *102,067 individuals were enrolled in HARP.*
 - *Of that 14,524 (14%) of all HARP members were assessed for Adult BH HCBS*
 - *987 unique claims were submitted, which indicates only 1% of the total HARP population received a service.*
- *Angela Vidile reported it is also difficult to approve ongoing services, since 6 month assessments are not coming in- this had led to admin denials*
- *Amanda Pierro reported that members report that the POC asks the same questions which are already being asked by the HCBS Provider (the POC has members develop goals for various life areas) and the questions feels a bit intrusive, especially if the care manager completing the POC is new the member's care team. After the care manager and the member complete the POC, the care coordinator asks for a release from the member to allow the care coordinator to send the POC to the provider and request the provider to sign the POC. Members are not feeling like they want the POC sent to all their providers and therefore aren't signing the release. This makes the POC incomplete and is impacting the workflow process of obtaining HCBS.*
- *Kelly Lauletta encouraged the teams of providers to work more closely together*
- *Kathy Coons reported that Central Region RPC has requested to know what the HARP algorithm is. State is working on addressing moving people off the exchange to get them enrolled in the HARP in early 2018*
- *Question around how someone gets stuck on the Exchange. . Kelly Lauletta explained the current process and Bob Holtz reported that the state is working on addressing this issue. For those who are stuck on the exchange they can call Maximus (an inpatient staff, care manager, can call to assist to help with this)*
- *Amanda Pierro made a recommendation for Facilitated Enrollers/ health care navigators to become educated about the HARP so that they could educate individuals who may be eligible for the plan*

- Alexis Harrington will outreach the local navigators and invite them to a future HARP/HCBS/Health Home ad hoc work group along with the LDSS reps.
- Bob Holtz reviewed “In Lieu of” services. These services will be made available in 2018, Providers can partner with MCOs to create new services for HARP or non HARP members. An example would be telemedicine. Another example is using “lieu of services”, to provide HCBS services to non-HARP members. It is the MCO’s decision alone if they want to provide these services. A provider cannot apply for these services. The MCO has to get approval from the NYS DOH. In lieu of services expands the treatment opportunities for the entire Medicaid population.
- Brian Stewart asked additional details around this – (see page 7 for additional links on “In Lieu of” Services)
- Kathy Coons mentioned In lieu of services could also assist those populations for those who have limited claim history (ex: someone who is recently out of prison)

Issue #3- C&F issue - DOH will be providing trainings on CANS NY to respond to this issue – Asking for vignettes to be added to the training – especially examples of cases when the acuity score resulted in a lower acuity than anticipated.

Issue #6- Hospital issue - Greg Allen of the NYS DOH encouraged regional RPC’s to leverage the DSRIP PPS’s around this issue. NYS DOH can also be outreached with difficult cases.

- Sam Bastien -OMH is rolling out a new referral process to go from a hospital to the state psych office- Sam reported that the field office may also be a resource
- Kathy Coons reported that the DCSs are also looking at this issue through CLMHD i.e. barriers to State PC discharges.

Issue #11-APG rates - Rural rates/travel costs - State looking for any additional data from the regions before going back to CMS

7. HARP/HCBS/HH Ad Hoc Work Group Update – Linda Lewis

- Linda Lewis reported on the workgroup- 30 people attended the HHH work group- next meeting the end of Jan.
- Topics included Financial modeling-will begin to collect data around HCBS services
- H-codes- clarification around H codes
- Medical Answering Services (MAS) - presentation on how to set up non-medical transportation- hoping this will help improve access to services-
- Tina L. Smith provided some HARP/HCBS data
- Calendar for 2018- all set up- rotate sites

8. Children & Families Subcommittee Update – Bill Gettman

- Bill Gettman provided an update- informal networking, technical assistance, State partners have been helpful
- Statewide issues-CANS-NY, workforce
- 2018 areas to address- plateau of membership in Children’s Health Homes, workforce issues, will new rates be viable for children providers?
- Proposed rates are out- will go live in 6 months- still some nervousness

9. VBP Work Group Update – Kathy Coons reported that this will be put on hold- since there are many trainings occurring and the State is currently reviewing the BHCC applications.

10. Data Review – OMH Central Office – Cat Huntington from OMH presented HARP/HCBS data (see attachments). OMH asked board members to think about which data is the most helpful. Board members will receive data on a quarterly basis.

Question: Will there be follow up with the Health Homes as a result of the data showing a bottleneck with Health Home enrollment for HARP enrollees?

Response: Unsure at this time – this would fall within NYSDOH.

Question: There has been a significant increase in HARP eligible in Columbia and Greene County

Response: OMH is currently looking into this increase – this has also been noted in other RPC regions.

Comment: Some Health Homes are having one person to do the assessments - HH follows up with members within 72 hrs to review LOSD, continuity of one person, reduce the number of handoffs.

Consideration for Agencies: Is there enough work for a full time person?

11. Capital Region RPC Board Feedback – Standing Agenda Item – Kathy asked for any feedback from board meetings

Update from MCOs: AOT orders- OMH will be working on some guidance to address this issue, awaiting feedback from OMH

Update from SUD Provider: Suboxone issues - Kevin spoke with OASAS representatives at an SUD work group meeting with a sub group of SUD providers. He reported that in order to resolve this issue there will need to be a lot of collaboration. The work group/sub group of SUD providers working to resolve this issue will need to focus on two fronts- macro and micro in order to develop a protocol to address the Suboxone issue. Kevin will continue to update the RPC on the progress made in these work group meetings.

Question from DCS: How do BHCCs relate to the RPCs, and CCOs (OPWDD BHCCS)?

Response: At this time, the BHCCs are not designated. Will continue to monitor how these systems will relate once the BHCCs are confirmed. Unknown at this time what the CCO interface may be, and whether or not the OPWDD transition to Managed Care will be folded into RPCs. Cathy Hoehn to ask this question to the state partners.

12. Review Attendance Policy – Kathy reviewed the attendance policy for the RPC (see page 8)

13. Success Story – Bob shared a success story- During outreach to a HARP member, a member reported that she received Peer Support through Unity House. She was very grateful for the peer specialist- she had recent stress (she has family in Puerto Rico) and was struggling. The peer was able to help her get through the situation. (Any future success stories- please send to Alexis.)

14. Adjourn Meeting (Motion Needed)- Meeting adjourned at 3:54pm, David Shippee first, Bill Gettman, second.

2018 Meeting Schedule:

- **January 17, 3-4:30pm:** Children & Families Subcommittee (In-Person, Albany County Department of Mental Health, 175 Green Street, Albany, NY – lower level auditorium)
- **January 23, 2-4pm:** HARP/HCBS/Health Home Work Group (In-Person, Catholic Charities Disabilities Services, 1 Park Place, Suite 200, Albany, NY)
- **February 13, 2-4pm:** Capital RPC Board Meeting (In-Person, Krause Center, 2212 Burdett Avenue, Troy, NY)
- **March 21, 3-4:30pm:** Children & Families Subcommittee (In-Person, Parsons, SATRI Training Facility, 60 Academy Road, Albany, NY)
- **April 3, 2-4pm:** HARP/HCBS/Health Home Work Group (In-Person, TBD)
- **May 9, 3-4:30pm:** Children & Families Subcommittee (In-Person, Parsons, SATRI Training Facility, 60 Academy Road, Albany, NY)
- **May 15, 2-4pm:** Capital RPC Board Meeting (In-Person, Four Winds Saratoga, 30 Crescent Avenue, Saratoga Springs, NY)
- **June 5, 2-4pm:** HARP/HCBS/Health Home Work Group (In-Person, TBD)
- **July 18, 3-4:30pm:** Children & Families Subcommittee (In-Person, Albany County Department of Mental Health, 175 Green Street, Albany, NY – lower level auditorium)
- **August 7, 2-4pm:** HARP/HCBS/Health Home Work Group (In-Person, TBD)
- **September 12, 3-4:30pm:** Children & Families Subcommittee (In-Person, Parsons, SATRI Training Facility, 60 Academy Road, Albany, NY)
- **September 18, 2-4pm:** Capital RPC Board Meeting (In-Person, Twin County Recovery Services, Inc., 350 Power Avenue, Hudson, NY)
- **October 2, 2-4pm:** HARP/HCBS/Health Home Work Group (In-Person, TBD)
- **November 14, 3-4:30pm:** Children & Families Subcommittee (In-Person, Parsons, SATRI Training Facility, 60 Academy Road, Albany, NY)
- **December 4, 2-4pm:** HARP/HCBS/Health Home Work Group (In-Person, TBD)
- **December 11, 2-4pm:** Capital RPC Board Meeting (In-Person, Krause Center, 2212 Burdett Avenue, Troy, NY)

Capital Region RPC: Board Meeting #6**December 12th, 2017 2-4pm**

	Name	Attendance	Stakeholder Group
1	Renee Abdou-Malta	Absent	BHO
2	Kathy Alonge-Coons		LGU
3	Jon Anderson	Absent	MCO
4	Samuel Bastien IV		H&Hs
5	Marianne Briggs	Absent	PYF
6	Michael Cole		LGU
7	Kevin Connally		CBO
8	Katie Conroy		PYF
9	Victoria DeSimone	Absent	State Gov
10	Catherine Duncan	Absent	Key Partner
11	Jennifer Earl	Absent	MCO
12	Edward Elles	Absent	MCO
13	Ruth Fennelly	Absent	PYF
14	Donna Fiscella	Absent	H&Hs
15	Bill Gettman		CBO
16	Stephen Giordano	Absent	LGU
17	Maggie Graham		LGU
18	Rachel Handler	Absent	H&Hs
19	Bob Holtz		MCO
20	Kevin Jobin-Davis	Absent	Key Partner
21	Rick Jobin		State Gov
22	Kelly Lauletta, LCSW		BHO
23	Linda Lewis		CBO
24	Michele McClave, MSW	Absent	Key Partner
25	Cher Montanye	Absent	State Gov
26	Catholic Charities Disability Services	Absent	CBO
27	John Padauno		CBO
28	Amanda Pierro		PYF
29	Frank Pindiak		CBO
30	Bill Porter	Absent	State Gov
31	Michael Prezioso		LGU
32	Eushabell Rodriquez	Absent	PYF
33	Darin Samaha	Absent	LGU
34	David Shippee		H&Hs
35	Brendon Smith	Absent	H&Hs
36	Brian Stewart		H&Hs
37	Angela Vidile		MCO
38	Lyndsi Wickert		PYF
39	Alliance for Better Health	Absent	Key Partner

Additional Attendees: Cathy Hoehn, Cat Huntington, Tina L. Smith, Dan Michaud

In Lieu Of

Hello,

Discussion around in lieu of services came up at the Fall RPC Chairs meeting and also I heard some boards discuss during the December board meetings, if you are looking for additional information please utilize the below links

It's on the DOH website under Managed Care, Information for Health Plans, below are the links.

https://www.health.ny.gov/health_care/managed_care/plans/index.htm

[Medicaid Managed Care Guidance and Application to Offer Cost-effective Alternative Services \(In Lieu of\)](#)

Capital Region RPC: Board Ground Rules

Purpose: As the Medicaid behavioral health system undergoes transformation, the RPC will work to guide behavioral health policy in the region, problem solve regional service delivery challenges, and recommend priorities for reinvestment of Medicaid savings. (Taken from Finger Lakes RPC Bylaws)

1. Allow everyone a chance to speak
2. Provide a propose solution for every issue being focused on
3. Do not undermine the consensus of the majority
4. Attendance in person is required – in alignment with the Statewide RPC requirement, no proxys are permitted. Please let the Co-Chairs or Coordinator know in advance if you are unable to make a board meeting.
 - a. Resignations and Removals (Taken from Finger Lakes RPC Bylaws)
 - i. Board members may resign at any time by submitting written or emailed notice to one of the two Co-Chairs.
 - ii. Any Board member missing two out of any four scheduled meetings (in a year) shall have been determined to be not sufficiently available to participate productively in the RPC, and the seat shall be deemed vacant and filled in accordance with established procedure.

Statewide RPC Board Member Expectations

- We have suggested that board member terms are for 2 years.
- Attend quarterly meetings of the RPC (in-person, no proxy permitted).
- By volunteering for board consideration, you are agreeing that you are willing to bring forward the views of the respective stakeholders in your region.
- Board members should be willing to serve as an access point for members of the community who would like to bring issues to the attention of the RPC.
- Board members are asked to collaborate in good faith to meet the overarching objectives of the RPC.

Proposed 3/14/17

Approved by Board 5/16/17