



# TUG HILL REGIONAL PLANNING CONSORTIUM

Welcome!

## Stakeholder Town Hall Meeting

DCS Co-Chair: Pat Fralick, Lewis County DCS

Community Co-Chair: Jennifer Earl, Government Liaison United Healthcare

RPC Coordinator: Beth Solar



# REGIONAL PLANNING CONSORTIUM

## GOALS FOR TODAY'S MEETING

Review the Regional Planning Consortium Process

RPC Impact

Discuss Elections/Voting Process

Tug Hill Goals for 2020



# REGIONAL PLANNING CONSORTIUMS

## Who are we?

**A Regional Planning Consortium (RPC)** is a regional board populated with community-based providers, peers/family/youth, county mental health directors, regional healthcare entities and managed care companies from each region.

**There is 1 RPC in each of the 11 regions across New York State.**

**FOUNDATION:** Each region will experience unique challenges and opportunities as the behavioral health transition to managed care occurs. These challenges require in person dialogue and collaboration to resolve.

# REGIONAL PLANNING CONSORTIUMS



WESTERN NEW YORK REGION	FINGER LAKES REGION	CENTRAL REGION	SOUTHERN TIER REGION	TUG HILL SEAWAY REGION	MOHAWK VALLEY REGION	CAPITAL REGION	NORTH COUNTRY REGION	MID- HUDSON REGION	NEW YORK CITY REGION	LONG ISLAND REGION
Allegany Cattaraugus Chautauqua Erie Genesee Niagara Orleans Wyoming	Chemung Livingston Monroe Ontario Schuyler Seneca Steuben Wayne Yates	Cayuga Cortland Madison Oneida Onondaga Oswego	Broome Chenango Delaware Tioga Tompkins	Jefferson Lewis St. Lawrence	Fulton Herkimer Montgomery Otsego Schoharie	Albany Columbia Greene Rensselaer Saratoga Schenectady	Clinton Essex Franklin Hamilton Warren Washington	Dutchess Orange Putnam Rockland Sullivan Ulster Westchester	Bronx Kings New York Queens Richmond	Nassau Suffolk



# RPC Authority & Support

- **AUTHORITY:** The Regional Planning Consortia derive their authority from the CMS 1115 Waiver with New York State.

*CMS considers the RPC's a necessary element in the transition to Medicaid Managed Care.*

- **STATE GOVERNMENT SUPPORT:** The RPC is backed by NYS DOH, NYS OMH, NYS OASAS and NYS OCFS.
- **PLAN PARTICIPATION:** The State has required each MCO/HARP to participate in the RPC's.



# REGIONAL PLANNING CONSORTIUM

## Function

- Work collaboratively to identify and resolve issues related to access, network adequacy and quality of care as the public behavioral health system transitions to Medicaid Managed Care.
- Synthesize and strengthen the regional voice when communicating concerns to the state partners (OMH, OASAS, OTDA, OPWDD, DOH)
- Serve as neutral conveners for information exchange – a place where people can come to get updates and provide experiential information on the behavioral health transformation as it occurs.



# REGIONAL PLANNING CONSORTIUMS

## WHO IS INVOLVED?

**All stakeholders impacted by the transition of Medicaid behavioral health services to managed care:**

- Consumers and Families
- Community Based Organizations
- Hospital and Health System Providers (FQHC's & Health Homes)
- Managed Care Plans
- County Directors of Community Services
- State Partners – OMH, OASAS, OCFS & DOH
- Other Key Partners – FLPPS, DSS, PHIP

**ACCESS:** The public is welcome to attend all board meetings in the gallery. The subcommittee and workgroup members DO NOT have to be Board members to participate.



# REGIONAL PLANNING CONSORTIUMS

## RPC Impact

1. System Changes that were the direct result of RPC work:
  - Expedited managed care enrollment for 820 residents
  - Transportation form (2015) changed to allow all licensed providers to authorize
  - Regional SUD bed finder website (PILOT) for real time availability for IP & OP detox, stabilization and rehab
  - Elimination of long HCBS assessment process
  - Expansion of HH+ and Eligibility Assessment educational requirement and addition of “waiver” process
2. Frequent Meetings with State Partners
  - Co-Chairs Meetings held Bi-annually in Albany
  - State Partners are actively involved with each region’s board and workgroups
  - Coordinators work very closely with field office representatives
  - Ongoing Communication with the Albany office and the RPC Project Director





# REGIONAL PLANNING CONSORTIUM

## Tug Hill Region Highlights

- **Current workgroups:**
  - Children and Families Subcommittee: LGU Lead provided by Alicia Ruperd and additional support from St. Lawrence SPOA/SPOE Coordinator, Lindsey Newvine.
  - HARP/Health Home/HCBS (HHH) Workgroup: Co-chaired by Angela Doe and Jessica Gonyou.
  - Value Based Payment (VBP) workgroup: This workgroup is in partnership with the North Country Region. The workgroup is used as an information sharing platform.
- **Held two educational events**
  - New Choices in Recovery presentation by NYAPRS in November 2018
  - Adult HCBS Education and Panel Discussion in March 2019
    - Education presentation by Joe Simko, OMH
    - Panelist discussion with representation from an MCO, Peer service provider, and two CBO's



# RPC Election Process

The RPC boards will be built using a popular vote process by people who attend the stakeholder meetings.

- The vote process is structured for:
  - Community Based Organizations: Up to 6 seats
  - Hospital/Health System Provider: Up to 6 seats
  - Peer/Family/Youth Advocates: Up to 6 seats
- Key Partners are appointed to the board at the 2020 First Quarter meeting
- This is an **open nomination process**. People can nominate their own organization or other organizations.
- Voting will be done electronically via **survey monkey**



# Seats Up For Election

## Community Based Organizations

- (1) Mental Health Rep
- (1) Substance Use Rep
- (1) Housing Rep
- (1) Children's Services Rep
- (1) HCBS Rep
- (1) Rural Rep

## Hospital/Health System Providers

- (1) Health System Provider
- (1) Health Home
- (2) Hospitals
- (2) FQHC's

## Peer/Family/Youth Advocates

- (2) Youth Advocate
- (2) Peer Advocate (includes both certified/non-certified Peers)
- (2) Family Advocate



# VOTING PROCESS

## **One vote, per agency/organization**

- Organization must submit the voter registration form to the RPC coordinator in order to receive a ballot.

Organizations will only be voting for their stakeholder group

Only **ONE person from each agency** may serve on the RPC board



# VOTING TIMELINE

- Deadline for nominations is **November 14, 2019**
- Voting will begin on **November 18, 2019** (Voting process lasts 2 weeks, due by **December 2, 2019**)
- RPC Board Announcement will be made in December after the voting process has ended
- Board meeting will take place in March 2020, formal calendar invite will be sent.



# Board Member Expectations

1. Board members will serve **3 year terms**
2. Attend quarterly meetings (in person, no proxy)
  - *Tug Hill By-Laws require you to attend at least 2 of the 4 meetings each year to hold your seat*
3. By volunteering for board consideration, you agree to represent the collective views of the respective stakeholder in the region
4. Board members should expect to serve as an access point for members of the community who have questions or would like to bring issues to the attention of the RPC
5. Should you leave your organization, please notify the coordinator of your departure. The seat belongs to that organization and will have 30 days to appoint a new representative.



# REGIONAL PLANNING CONSORTIUM

## HOW TO PARTICIPATE

- **Board Membership by Election or Appointment**
  - Elections for New Three Year Terms at end of 2019
- **Attend the workgroup or subcommittee**
  - HARP/HCBS/Health Home (HHH) Workgroup
  - Children & Families Subcommittee

For more information contact:

Beth Solar, Coordinator for Tug Hill Regional Planning Consortium

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# Tug Hill Goals for 2020

- What would you like to see the Tug Hill RPC accomplish in the upcoming year?
- What “hot topics” would you like to see the Tug Hill Region