

State Interagency Coordinating Council

Meeting Minutes



Wednesday, April 24, 2013

Puget Sound Skills Center
18010 8th Ave. S.
Burien, WA 98148

Attendance:

Members

Maryanne Barnes, Service Provider, Developmental Center
Kelli Bohanon, State Lead Agency, Department of Early Learning
Magan Cromar, County Human Services
Melinda Dyer, OSPI/Education of Homeless Children and Youth
Marijean Holland, Office of Insurance Commissioner
Amy Kocher, Parent
Jena Lavik, Parent
Maria Nardella, Department of Health
Sharon Reddick, Health Care Authority/Medicaid
Sugely Sanchez, Parent
Janet Spybrook, Personnel Preparation

Members Unable to Attend

Val Arnold, Office of the Superintendent of Public Instruction
Sarah Fader, Parent
Janet George, Department of Services for the Blind
Michael Luque, DSHS/Children's Administration (Foster Care)
Kris Pederson, DSHS/Division of Developmental Disabilities

Others Attending

Angie Ahn-Lee, Snohomish County
Joy Caldwell, King County Parent Coalition
Sandy Carlson, SKIP
Kris Ching, Center for Deafness and Hearing Loss
Kerianne Christie, Center for Deafness and Hearing Loss
René Denman, Island County
Athena Elrod, Pierce County
Kathy Fortner, Kindering Center
Wendy Harris, King County DDD
Lisa Herzig, Seattle Children's
Debbie Jackson, PAVE
Cecile Lindquist, Public Policy
Janie Nelson-Clark, Jefferson County
Phil Olson, Cowlitz County
Suzanne Quigley, Listen and Talk
Michelle Stiller, Wonderland Developmental Center
Tiffany Wheeler-Thompson, Parent/FLIC
Connie Zapp, Kitsap County

ESIT Program Staff Who Participated

Karen Walker, Program Administrator
Kathy Blodgett, Program Consultant
Sheila Ammons, Program Consultant
Linda Jennings, Program Specialist

BUSINESS MEETING

I. Introductions/Announcements

As Acting Chair, Maryanne Barnes called the meeting to order.

Ms. Barnes led introductions of the Council and audience present.

Motion: A motion was made to approve the February 27, 2013 minutes. The motion was seconded and passed.

Motion: A motion was made to accept the April 24, 2013 agenda. The motion was seconded and passed.

April is Autism Awareness Month and Maryanne shared there was a copy of Dr. Charles Cowan's blog, "The State of Autism in 2013" included in the handouts. It is also Child Abuse Prevention Month and a handout and a pinwheel (Pinwheels for Prevention) are included for all in attendance.

II. Department of Early Learning (DEL) Update

Kelli Bohanon, Assistant Director, Partnerships and Collaboration provided a PowerPoint update to the Council.

Highlights:

- DEL Legislative Highlights:
 - HB 1203 will allow DEL to redact children's personal information before releasing records (Agency requested)
 - HB 1968 directs the Fire Marshall to promulgate rules that allow licensed school-age child care in school buildings under the same version of fire code as the school building
 - HB 1723 (in negotiation) would:
 - allow up to three school days for WaKIDS family connection;
 - convenes a technical workgroup to review alignment of child care and ECEAP eligibility requirements and funding;
 - requires DEL to reserve 80 percent of any additional appropriated home visiting and parent/caregiver support funding for HVSA and up to 20 percent for other parent/caregiver supports; and
 - requires ECEAP participation in Early Achievers starting in state fiscal year 2015.
 - SB 5595:
 - Requires additional training for DEL and DSHS staff to help ensure high-quality service for Working Connections Child Care families;
 - Creates a legislative task force on child care issues including eligibility, co-pay scale; and
 - Directs DEL to streamline WCCC rules.

- DEL provides a weekly bill update on the website under Government Relations > State Legislature:
<http://www.del.wa.gov/government/legislature/week.aspx>

III. Early Intervention Programs across the United States

An “Analysis of current Trends and Changes over Time to Early Intervention Programs across the Nation” presented by Lisa Herzig, MD and Brenda Hussey-Gardner, PhD, MPH

Highlights:

- Part C of IDEA:
 - Ensures early intervention services to infants and toddlers with disabilities
 - Evidence has shown that services are beneficial
 - Great discrepancy between state programs
- Each State:
 - Names their program
 - Identifies a lead agency
 - Establishes a fee structure
 - Establishes eligibility criteria
 - Determines contact information
- Results of a 2010 survey:
 - Eligibility ranged from ANY delay to 50% in one domain
 - 26 states provide services at no direct cost to the family
 - There are three different lead agency types:
 - Health
 - Human Services
 - Education
 - There are a total of 19 different program names, however, most use one of three different terms in their name:
 - Early Intervention
 - Infants and Toddlers
 - Early Steps
 - Would one single nationwide definition be helpful?
- What is to come? Over time...
 - More states are moving to a system that charges a fee to the family
 - States are becoming increasingly complex and stringent in their eligibility criteria
- More money needs to be spent on early intervention
- ONE website that houses up-to-date information for all EI programs across the country

IV. Autism Benefit Overview

Presentation by:

Gail Kreiger, Manager, Health Care Authority, Autism Alliance & Advocacy
Connie Zapp, Director, Holly Ridge Center

Highlights of Gail Kreiger:

- Definition of Applied Behavioral Analysis (ABA) Services:
 - A set of principles applied through a family-centered therapeutic intervention to improve core deficits associated with autism spectrum disorder (significant issues with communication, social interaction and injurious behaviors).

- Includes the design, implementation and evaluation of environment modifications using behavioral stimuli and consequences to produce clinically significant improvement in behavior and skills.
- Includes use of direct observation, measurement and the functional analysis of the relationship between the environment and the child's behavior.
- Eligibility Criteria:
 - An established supporting diagnosis of Autism Spectrum Disorder as defined by the most current DSM criteria; made by a neurologist, pediatric neurologist, developmental pediatrician, psychologist or psychiatrist who is experienced in the diagnosis and treatment of autism, using a validated diagnostic tool (those proven through studies); AND
 - There is objective documentation by a clinician, which may incorporate family members observations, establishing the presence of any of the core symptoms of autism: functional impairment or delay in communication, behavior, and or social interaction; AND
 - There is documentation by a clinician, which may incorporate family member observations, that the child's behaviors are having an adverse impact on development and/or communication such that:
 - The child can't adequately participate in home, school or community activities because the behavior interferes; AND/OR
 - The child exhibits behavior in the nature of self-injury; aggression towards others; destruction of property; stereotyped/repetitive behaviors, elopement; or severe disruptive behavior, where the behavior may be construed that the physical health or safety of the child or others may be placed in serious jeopardy; AND
 - There is documentation that less intrusive or less intensive behavior intervention have been tried and not been successful; OR there is no equally effective and substantially less costly alternative available or reducing the interfering behaviors, increasing pro-social behaviors, or maintaining desired behaviors; AND
 - There is documentation of a reasonable expectation that the requested services will result in a measurable improvement in the child's skills and behaviors.
- Access to ABA Services:
 - Step 1: Child referred by any other health care professional or parent for diagnostic testing, comprehensive evaluation and multi-disciplinary treatment plan
 - Step 2: Comprehensive evaluation performed; diagnosis confirmed; treatment plan recommends and orders ABA services
 - Step 3: Child assessed by qualified, DOH licensed/certified BDBA and outcome-oriented, time limited ABA treatment plan developed
 - Step 4: Prior authorization for ABA services requested
 - Step 5: Authorization determination made
 - Step 6: ABA services initiated
 - Step 7: Re-certification required every 3-6 months, at agency's discretion
- Delivery Model for ABA services, ages 2-5:
 - Delivery of intensive services in:
 - Natural setting, e.g., home, clinic and/or community, OR
 - Facility-based day program
- Who can provide ABA services?
 - Option 1 – Independent Practice Model
 - Lead Behavioral Therapist
 - Therapist Assistants
 - Option 2 – Agency Model
 - Lead Behavioral Therapist
 - Therapist Assistants
- More information is available at: www.medicaid.hca.wa.gov/abatherapy/index.html

Highlights of Connie Zapp:

- Process to obtain ABA licensing:
 - Submitted application fee
 - Utilizing the Division of Behavioral Health and Recovery (DBHR) Agency Self-Evaluation and State ABA Licensing Survey tool, we reviewed WACs and produced policies and procedures.
 - When draft complete, scheduled on-site visit for DBHR review.
 - DBHR provided a statement of deficiency/plan of correction and ongoing guidance on finalizing the Policies and Procedures.
 - Submitted annual license fee to DBHR after completing plan of correction.
 - After license received, staff could submit for their individual DOH Agency Affiliate licenses. Individual licenses required to be able to obtain NPI billing numbers. NPI billing numbers are required to be credentialed in Provider One.
 - Ken Lowery, HCA, very helpful in Provider One set up. Once credentialed, fully set up within a week.
- Timeline for ABA licensing:
 - Began applications and Policies and Procedures in November/December
 - Site visit from DHBR in December
 - Received license effective January 8th
 - DOH individual licenses took approx. 2-3 weeks
 - NPI number take 5-7 days
 - Credentialing was done in 24 hours
 - Completely in Provider One by February 15th
- Process for enrolling in Autism Services
 - Diagnosis made
 - FRC/Educator gives Autism letter to parents for signature
 - When returned, BCBA makes contact within 10 days with family to schedule functional analysis
 - Functional analysis is completed within 30 days of letter being returned. A service log is completed for this, this is billed without pre-authorization
 - BCBA completes: service log for Functional Analysis, ABA request for services/severity checklist, treatment plan for services/IASP to include goals and a serve log documenting treatment plan development
 - A copy of the functional analysis/treatment plan report and IASP need to go to ITP Director
 - IFSP review is completed to add Other Services: ABA and then the IASP
 - ITP Director to complete the 13-835 Prior Authorization form
 - Full packet to be submitted to Gail Kreiger:
 - Diagnostic report and prescription
 - IFSP and initial evaluations
 - Functional Analysis/treatment plan report
 - IASP and goals
 - 13-835 PA form
 - Approval received. HRC will begin services with the completion of the IFSP review knowing that this may occur prior to HCA approval
 - All services rendered will be documented on a service log and service log summary
- Tips we learned
 - Created master cheat sheet to work from to complete the 13-835 due to all the variations
 - If child has Medicaid as secondary and primary denies ABA, Medicaid will cover
 - Created letter for families whose child is turning three and our services would discontinue; provided info to contact Gail for community providers. This is now provided at transition planning, if not sooner.

- Incorporated some “safety training” information to our new employee orientation to assure that this occurred for all staff up front
- In creating a new “ABA Assistant” position, we had to create a new pay scale and to maintain staff this scale is significantly higher than our Para-Educator scale (which needs to be factored into the income/expense tracking).

V. Agency Reports

Agency reports, when available, are included in handouts within the Council packets.

Office of the Insurance Commissioner, Marijean Holland

Highlights:

- Marijean is retiring from public service and is looking forward to volunteering at Paul Newman’s summer camp for children
- The OIC has not yet determined a replacement for Marijean on the Council
- Pam Crowley, from OIC, will provide Health Benefit Exchange updates

Department of Health, Children with Special Health Care Needs, Maria Nardella

Highlights:

- Governor Inslee appointed John Wiesman, DrPh, MPH as the new Director for DOH. He began work on April 16, 2013.
- Sequestration
 - No reduction to MCH Block Grants through December 31, 2013
 - Federal funding from various funding streams was reduced by variable percentage points
- CSHCN moving forward to renew two year grants with NDCs and Maxillofacial contracts
- Children’s Developmental Center (CDC) in Richland is joining the NDC network
- New provider being sought to provide maxillofacial team services for the eastern region
- DOH/CSHCN is requesting feedback on their Data Report Evaluation. To provide feedback, please go to:
www.doh.wa.gov/dataandstatisticalreports/diseasesandchronicconditions/childrenwithspecialhealthcareneeds.aspx
- The Washington Autism Advisory Council (WAAC) met in February in Tacoma to focus on the implications of the use of seclusion and restraint, including chemical restraints, on persons with autism.
- The University of Washington Professional and Continuing Education program is opening up a certificate training program beginning in the Autumn Quarter 2013 and continuing through Spring Quarter at the UW campus in Seattle.
- The Washington State Autism Implementation grant and the Centers for Disease Control and Prevention enhancement, Learn the Signs. Act Early promotion, have officially ended and the final report to Health Resources and Services administration has been submitted.
- DOH would like to have people comment on the Health Care Authority’s new section: 182-531-1410, applied behavior analysis (ABA. Comments are due by COB April 30, 2013 and may be sent to Jason Crabbe, Rules and Publications Program Manager at: Jason.crabbe@hca.wa.gov .
- Work is continuing on promoting universal developmental screening. Pilots in Yakima and at WithinReach continue and 20 local health departments will be starting DOH contract work in this area.
- Currently writing the Early Childhood Comprehensive Systems federal grant with Health Resources and Services Administration.
- Through a contract with the Health Care Authority (HCA), DOH is collaborating with managed care organizations to develop developmental screening practice guidelines which include developmental screening tools and mental, behavioral health screening tools.

- Great MINDS Grant Updates
 - Continues to progress in Washington
 - On track to have six more provider trainings completed by June – Tacoma, Spokane, Chehalis, Vancouver, and Everett – with the sixth still TBD
 - The Project Steering Committee held its third quarterly meeting in February. The Committee determined to generate policy recommendations/issue briefs on reimbursement and, referral and connection to services
 - Community Asset Mapping coordination and implementation planning continues in Spokane and Clark counties. Both locations plan a kickoff event in June.
 - Planning is almost complete for the Medical Home Leadership Network & Great MINDS Summit on May 10, 2013.
 - Great MINDS continues to help with planning the roll out for DOH's newest medical home promotion collaborative to ensure the integration of pediatric practices. The initial rollout will occur in Whatcom (May), and Lewis, Mason and Thurston counties (June). Self-paced, self-directed online modules will be available statewide by the end of April.

Health Care Authority, Sharon Reddick

Highlights:

Most of the focus of legislation this year is around the implementation of the ACA and Medicaid expansion. There are no HCA bills in Legislature that impact birth to three.

VI. Committee Updates

Public Policy, Debbie Jackson

Highlights:

- Representative Ruth Kagi continues to champion/advocate for ESIT and IDEA, Part C issues
- WEECARE was very happy to have encouraged Governor Inslee to reappoint Bette Hyde as DEL director.

Family Leadership and Involvement Committee (FLIC), Amy Kocher

Highlights:

- The Committee will meet tomorrow. There are a number of items on their agenda for discussion:
 - Guest Speaker: Cecile Lindquist – Overview of the Importance of Family Advocates
 - Brochures: Family Cost Participation and Understanding Your Insurance
 - Update the committee timelines
 - Review the committee guidelines and discuss current member terms
 - Discuss IECC presentations

Data Committee, Kathy Fortner

Highlights:

- No Report
- ESIT has a “hot list” that shares what’s being worked on

Funding Committee, Maryanne Barnes

Highlights:

- System of Payments and Fees (SOPAF) has been the focus of monthly meetings
- Kathy Fortner has been creating scenarios for the committee, helping to develop policy
- FLIC has been helping with the development of forms for families

Personnel and Training, Janet Spybrook

Highlights:

- The Committee continues to meet by conference call.
- The group completed a draft of the qualified personnel grid. The draft is now on the ESIT website.
- Developing a basic FRC job description and minimum educational requirements, so basic competencies can be identified.
- The Committee completed work on several policies and procedures and ESIT has received approval from OSEP
- Completed work on three Part C modules. These were required viewing (?) for all LLA administrators
- Proposed to have ESD 112 to do presentation to committee on Project Seek
- Committee will meet face-to-face in July, following SICC meeting

VII. ESIT Update

Highlights:

- ESIT revised the application process for annual funding for Local Lead Agency (LLA) early intervention services contracts that will begin July 1, 2013. ESIT will evaluate each application submitted in response to the request for application process and will award contracts to applicants based on application evaluation data.
- ESIT will submit its application for FFY 2013 federal Part C early intervention funding by mid-April. The application will contain the revised policies and procedures based upon the new federal regulations that went into effect October 28, 2011. These funds are intended to support the development and sustain the early intervention infrastructure that must exist across the state. These funds are also to serve as payer of last resort when necessary.
- ESIT will not receive the \$400,000+ anticipated increase in federal funds as a result of the increase in its birth rate over the past year. Instead, due to Sequestration, ESIT's anticipated budget will be reduced by \$65,286, from \$8.832M to \$8.767M. In response, reductions will be made to the ESIT administration budget and LLA EIS contract allotments.
- The APR was submitted to OSEP in February, 2013. Based on the data submitted, Washington will receive its next annual determination in June 2013.
- The Infant and Early Childhood Conference will be held May 1-3 at the Tacoma Convention Center.
- DMS information on system updates and enhancements are provided through the DMS listserv: <http://listserv.wa.gov/cgi-bin/wa?A0=del-esit-dms-news>
- ESIT continues to work with the Governor's office on the SICC Executive Order. When the Executive Order is completed and signed, the public will be notified regarding the need to fill existing SICC vacancies. At that time, applications to fill existing vacancies will be requested.
- Basic FRC training will be held April 17-18, 2013, via ESD video-conference sites. The next Year Two one-day training will be held on June 6, 2013. The coming year's FRC training curriculum and format has been updated and revised to better meet FRC training needs. The revised curriculum will be implemented July 1, 2013.

VIII. Emerging Issues/Other Topics

July Focus: Innovative Programs and Practices
Meeting adjourned.

Next SICC Meeting Dates: Wednesday, July 24, 2013

Highline School District Office; 8:30 a.m. – 3:30 p.m. with a working lunch