Illinois Medicaid Comprehensive Assessment of Needs and Strengths (IM+CANS) Workgroup Meeting

Wednesday, August 14th, 2024, | 10:00 A.M. to 11:00 A.M. Meeting held virtually using WebEx. Pre-registration is not required.

I. Roll Call

Stephanie Barisch Center for Youth and Family Solutions

Cris Mugrage Sinnissippi Centers

Chelsea Mueller Heritage Behavioral Health

Michelle Zambrano Will County Health Department

Rebecca Horwitz Kenneth Young Centers

Laura Kuever Catholic Charities

Eileen Niccolai Thresholds

Quorum achieved with 7 out of 11 members in attendance.

II. Approval of Minutes:

June meeting minutes were approved.

III. IM+CANS/ PATH Training:

a. Self-paced Summary of Changes Course:

This has been recorded and is on the website for access. The plan is to keep it on the website until the end of the year, and if that changes, PATH will update.

b. PATH Website & Resource Tools:

PATH is in the process of updating its website, so if you are having issues finding things, please reach out to them directly for that information. An updated one-pager about care coordination will also be available. The summary of changes is now self-led. The previous provider notice was in error when it stated that it was required, so we will send out an updated listsery.

IV. IM+CANS Portal Consent Form:

- **a.** The updated consent form is currently being reviewed before being posted and translated into Spanish.
 - i. The main concern with the existing consent form is that it does not adequately address the subject of substance use and the current

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language around it does not meet the necessary criteria for sharing that information.

ii. HFS aims to reduce the amount of legal terminology to make the document more understandable for customers.

V. Assessment Tools:

a. Addendums:

HFS is moving in the right direction with our communications with SUPR and DCFS on the SUD and DCFS addendums. We have been able to reengage in conversation and once we make more progress with the departments, we can bring back progress within the workgroups within the next few months.

b. IM+CANS and Reference Guide:

HFS has been working with the Praed Foundation to translate the IM+CANS and Reference Guide into Spanish. They are also ensuring that these documents are ADA-compliant for screen readers.

VI. Discussion and Provider Input:

a. Shift to the new version. Are people finding that is moving more quickly?

The effectiveness of the electronic health record (EHR) system depends on the vendor and a key factor has been the training provided. The philosophical relevance of this training has contributed to positive outcomes. Some users have reported significant improvement based on how they format their Child and Adolescent Needs and Strengths (CANS) assessments in the portal. Overall, there have been positive experiences with the new tool, and it feels less repetitive than previous systems.

b. The portal rejects when we use N/A:

HFS we will take this back to the IM+CANS technical team and follow up with more guidance.

c. IM+CANS portal dashboard:

What options will be beneficial to you? Please start or continue to brainstorm and please be prepared to continue this discussion in the future.

d. Consultative Documentation reviews:

To ease providers' anxiety and fears HFS is planning to create a voluntary learning collaborative and coaching process to give providers feedback on their IM+CANS-related documentation. This will probably happen more towards 2025.

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e. MCO Internal Documentation reviews: Are the MCOs aware of the good enough with the IM+CANS? Score changes?

Yes, HFS has discussed this with the MCOs' behavioral health section, but we do not know if it has made it back to their audit section and we need to make sure, they are following policy. In the interim, HFS encourages providers to go through the MCO internal review first and if there are still issues, then please reach out to HFS, so that HFS can address your concerns with the MCOs.

f. Do we want to bring in any of the MCO staff to be part of the group? Possibly another HFS representative from HFS that manages the health plans (IAMHP).

VII. Next Steps for the Work Group:

a. Meeting Schedules:

- i. HFS would like to hold meetings bi-monthly. The next meeting is scheduled for October 9, 2024, and the final meeting for this series will be on December 11, 2024.
- ii. Starting in 2025, we will transition to quarterly meetings. We believe these changes will benefit HFS and the workgroup by providing more time for data analysis to be finalized and formalized, as well as allowing us to roll out the new application process to the groups.

b. New Members:

i. HFS is also eager to gather information on new provider types and welcomes input from Federally Qualified Health Centers (FQHCs), independent practitioners, and any other relevant trades we may need to include.

c. Addendums:

i. HFS aims to complete the addendum work with smaller workgroups between the larger meetings with DCFS and SUPR.

VIII. Meeting Links & Resources:

Reference Guide Link:

https://hfs.illinois.gov/content/dam/soi/en/web/hfs/sitecollectiondocuments/2024imc ansreferenceguide.pdf

IX. ADJOURNMENT