

**Illinois Department of Healthcare and Family Services
N.B. Stakeholder Subcommittee of the Medicaid Advisory Committee
September 19, 2022, 3:00 pm – 4:30 pm**

Due to COVID-19 concerns, the N.B. Stakeholder Subcommittee was held via WebEx.

Members Present

Amanda Walsh	IL Children's Mental Health Partnership
Angie Hampton	Egyptian Public and Mental Health Department
Anna Harvey	YWCA of Metropolitan Chicago
Ashley Deckert	Illinois Collaboration on Youth
Bernadette May	Family Service Association of Greater Elgin
Christine Achre	Primo Center for Women and Children
Dee Ann Ryan	Family Advocate
Jason Keeler	Allendale Association
Michelle Churchy-Mims	Community Behavioral Healthcare Association
Regina Crider	Youth and Family Peer Support Alliance
Stephanie Barisch	Center for Youth and Family Solutions

Members Absent

Andrea Danes	Accelerant Health
Emily Miller	Illinois Association of Rehabilitation Facilities
Brandy Moore	Centerstone
Jennifer McGowan-Tomke	NAMI Chicago
Josh Evans	Illinois Association of Rehabilitation Facilities
Jud DeLoss	Illinois Association for Behavioral Health
Michaela Granger	Youth and Family Peer Support Alliance
Jennifer Roland	University of Illinois Urbana Champaign – School of Social Work
Dr. Michael Naylor	University of Illinois at Chicago

I. Welcome and Call to Order / Introductions

The meeting was opened, and roll call was taken. A quorum was established.

II. Approval of Meeting Minutes

Because a quorum was not established at the July meeting, the minutes from the May 23, 2022, and the July 22, 2022, meeting were both approved.

III. Healthcare & Family Services Implementation Update

Chairperson Crider asked Kristine to provide an update on the implementation of the Pathways to Success program, and Kristine provided the following update:

- The Decision Support Criteria to determine eligibility has been approved. HFS will be identifying youth who are eligible for the program and will be sharing the initial draft lists with MCOs and CCSOs for planning purposes.

- IMPACT is now open for CCSOs to complete the enrollment process. A notice with instructions was sent to all of the selected CCSOs on September 15th. We are anticipating that CCSOs will begin to complete the enrollment process through IMPACT.
- IMPACT is also open for providers who want to offer other Pathways to Success services including Intensive Home-Based, Family Peer Support, Therapeutic Mentoring and Respite.
- HFS is also finalizing the ARPA Grant Agreements that CCSOs will need to sign so that HFS can begin disbursement of ARPA funds to CCSOs to support implementation and to establish Individual and Therapeutic Support Services funds. The agreement templates are going through HFS internal approval process and should be ready to distribute very soon.
- HFS has started hosting one-one-one meetings with each of the CCSOs. Those will continue through September until we have met with each of the selected CCSOs. HFS also hosted office hours on Sept 1st and 15th. The office hours are open times for any CCSO to bring questions or concerns to HFS for discussion and follow up. We will continue office hours for the foreseeable future.
- HFS has distributed the Readiness Review Tool for Mobile Crisis Response. Responses for the Mobile Crisis Response Readiness Review are due to the department by September 30th. HFS will be notifying CCSOs of the results of the readiness reviews by October 14th. If there are any deficiencies noted, then HFS will be working with the CCSO to address those deficiencies prior to the CCSO taking over responsibility for MCR in their Designated Service Area, which will happen on November 1st.
- HFS has also distributed the Readiness Review Tool for Care Coordination and Support. Those responses are due to HFS by October 24th. HFS will be reviewing those responses and working with CCSOs to address any deficiencies through November and December, including conducting an on-site review at each CCSO.
- In December, HFS will receive final staffing lists from CCSOs to determine how many children they will be able to begin serving in January. HFS will assign children to each of the CCSOs and will notify MCOs of the assignments.
- In January, CCSOs will begin engaging Pathways youth and families and will also begin providing services for youth in the Family Support Program.
- The timeline is really subject to CCSO readiness. If a CCSO is able to staff up more quickly and ready to provide services more quickly, HFS will accommodate that schedule. If CCSOs are not ready to go by January, HFs will accommodate that as well. We want to get services in the community as quickly as possible but are fully cognizant of the current challenges that providers are experiencing.
- The Pathways to Success Administrative Rule 141 was on JCARs August calendar and was approved for adoption
- The Implementation Plan and Milestone document will be updated with new timelines based on the approval date of the 1915(i).
- The CCSO Handbook is going through final approval and will be posted soon.

Q: Have rates for the Pathways services been updated?

A: Rates have been reviewed but not approved. HFS will notify the subcommittee when the updated rates are posted.

Q: Are there any updates on the uncovered DSAs?

A: HFS continues to discuss options with interested stakeholders, but there have been no final agreements reached.

Q: Given the update in the Rule 140 rates, have the rates for the Pathways to Success services been updated?

A: Yes, rates have been reviewed again in light of legislated rate increases. The rates have not yet been finalized but the increases have been taking into consideration.

Q: Was the new IATP child and family team code reviewed as well in light of increases?

A: Yes, that rate is also being reviewed.

Q: Is the IATP child and family team code only to be used when participating in the child and family team?

A: Yes, the code is to be used when CMHC or BHC staff are participating in the child and family team meeting.

Q: There is concern that the use of the IATP code will restrict communication between providers.

A: There can only be one care coordinator/care manager for an individual. Communication should be coordinated through the CCSO / child and family team to make sure that everyone on the team is updated. Streamlined communication is essential for this model to be successful.

Q: Will CARES know who is enrolled in Pathways?

A: Getting CARES access to that information is being explored.

Q: Would it also be possible for a CCSO to be notified through CRS when a screening is entered?

A: That data exchange is also being explored but will take some additional time to implement programming, if it is possible.

IV. Subcommittee Feedback on Provider and Family Engagement Strategies

Chairperson Crider provided an update from the Family Workgroup:

The Family Workgroup created a document for the purpose of assisting families who need to navigate systems to discover services that fit their needs. Members of the group are responsible for contributing information to complete document that is currently in draft form. Each member in attendance shared their information and provided an update. Jennifer, Anna, and Regina all provided updates. Jennifer will send more information to Regina this week to complete section.

The DRAFT document was shared for discussion and is attached to the meeting minutes.

Chairperson Crider asked for an update from the Provider Messaging Workgroup:

Update was provided by Stephanie Barisch, who presented a plan that included four (4) phases of communication with providers that started with top-down strategies coming from the state and bottom-up strategies coming from providers and communities. The four-phase plan is attached to the meeting minutes.

V. Additional Business: Old & New

A. Old Business

Subcommittee discussed the training curriculum for paraprofessionals and working with the infrastructure that already exists for the CRSS. Dee Ann Ryan indicated that she had spoken to representatives from the Division of Mental Health (DMH) about their process for providing supports to individuals pursuing education in mental health. DMH was interested in partnering in the paraprofessional workforce development process.

B. Items for future discussion

- None

C. Announcements

- None

IV. Public Comment

There were no public comments.

V. Adjournment

Meeting was adjourned at 4:10pm.