Illinois Department of Healthcare and Family Services N.B. Stakeholder Subcommittee of the Medicaid Advisory Committee January 25, 2021

3:00 pm - 4:00 pm

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

Members Present

Y	Crider, Regina	Youth and Family Peer Support Alliance
^	Chuch Neuma	

x Danes, Andrea Accelerant Health

x Walsh, Amanda IL Children's Mental Health Department

x Hampton, Angie Egyptian Public and Mental Health Departmentx Lindsey, Marvin Community Behavioral Healthcare Association

x Daniels, Sarah Illinois Collaboration on Youth (ICOY)

x McGowan-Tomke, Jennifer NAMI Chicago

x Naylor, Michael Illinois Psychiatric Society

x Ryan, Dee Ann Family Advocate

Members Absent

Achre, Christine Primo Center for Women and Children

Keeler, Jason Allendale Association

Roethlisberger, Margo Ada S. McKinley Community Services

Carmichael, Michelle Education Consultant

Doyle, Tamara Family Advocate

Foster, Eric Illinois Association for Behavioral Health

Lenzo, Eric Mt. Sinai Health Services
Nierman, Peter Illinois Psychiatric Society

Roberts, Katrina Family Advocate

I. Welcome and Call to Order

The meeting was opened, and roll call was taken.

II. Introductions

A quorum was not met, so minutes from the previous meeting were not voted upon for approval. Attending members discussed the need to identify new members of the subcommittee and remove members who consistently were absent from meetings.

III. Workforce Development Workgroup Report

Workforce Development Workgroup provided a presentation of their draft recommendations to increase both the clinical intervention skills and the availability of paraprofessionals for children's behavioral health services.

Comments and questions were then taken from committee members and the public as follows:

Comment was made by CBHC regarding the potential availability of tuition reimbursement for paraprofessionals who are obtaining education / certification through higher education.

Question was asked regarding if the paraprofessionals would be required to maintain full-time employment or would part-time also be allowed. Answer was that full time would not be a requirement.

Question was asked regarding paraprofessionals having to be associated with an existing employer (CMHC or BHC) in order to obtain training. Answer was CMHCs and BHCs will want to send existing employees for training, but the plan to is open the training for any interested individual, especially if community colleges or other higher education institutions offered the training and certification as part of educational programming.

Question was asked whether any other state had implemented Practice Wise at this scale or with paraprofessionals. Answer was that this information was not known.

Question regarding next steps in approving the recommendations. Kristine indicated that the committee needed to vote to approve the report and officially make the included recommendations to HFS for consideration. Since there was not a quorum established, Kristine indicated that the vote to approve the recommendations for submission to HFS would have to wait until a quorum was present to vote.

Kristine also asked that the workgroup provide additional information about how new paraprofessionals would be identified to participate in the training and eventually provide services to children.

IV. Implementation Update

Kristine Herman reported the final application and comment/responses have been posted on HFS' webpage. HFS received well over 200 comments and responded to all of them. Most comments were related to implementation and did not require changes to the application, so it was submitted to CMS in late December. CMS has two 90 day "clocks" in the approval process. The first "clock" will be up in April during which time CMS will have questions and comments for HFS to address. If HFS is able to address CMS' issues during that time, the application can potentially be approved during the first 90 day "clock", so we are hoping that will be the case. We have not received any questions or comments from CMS as of Jan 25th, but hope to soon. We will not have a clear idea of what issues CMS may or may not have until we receive their first round of questions. Federal approval is really the first step in the implementation process and will establish many of the timelines moving forward. After federal approval, we will need to submit a rule to JCAR. Once that is moving forward, we will need to develop and release the Request for Applications for Care Coordination and Support Organizations (CCSO). At this point, we are anticipating that we will have the RFA posted in early summer.

Between now and then, we will be completing the following:

- -TownHalls with more detailed implementation information,
- -conducting smaller regional meetings with local agencies to discuss implementation in specific areas,

- -having bi-monthly meetings with this group to discuss implementation, review implementation materials and make recommendations for improvements,
- -working on internal eligibility, billing, payment and claiming systems.

Given all of the implementation steps that need to be taken, we are anticipating that CCSOs will be identified and services will begin later in 2021.

V. Adjournment

Next meeting scheduled for March 25^{th} 3:30pm -4:30pm.