

EI Targeted Case Management Task Force Meeting
May 23, 2011

Attendance:

Adele Rohner, Jim Gillespie, Alison Standring, Pamela Park, Mary Parke Holland, Sandra Church, Carol Burke, Jennifer McElwee, Tim Capoldo, Joyce Howard, Chris Gregory, Debra Holloway, Heidi Faustini, Jeff Beard, Beth Tolley, Deana Buck, Cori Hill, Wendy Cary

Initial Early Intervention Targeted Case Management (90 day TCM)

(Document: Early Intervention (EI) Initial Targeted Case Management)

The document was discussed and several changes were made to provide clarity. For children who are found not eligible for early intervention, the initial EI TCM coverage will end on the eligibility determination date. Comments were made that some service coordination activities occur following the ED date (informing the family, providing information about other resources, etc. Since billing for TCM is done on a monthly basis, this will only be an issue when the ED date is at the very end of a month. Jeff confirmed that billing cannot be done for the month following the month a child is found ineligible for early intervention.

A question was raised about whether physician certification will be required for service coordination. Several attendees, including a parent, commented that this would create additional requirements without an added benefit. Jeff will discuss this with DMAS colleagues.

Draft Initial Early Intervention Service Coordination Plan (Document)

The group discussed the draft Initial Early Intervention Service Coordination Plan form:

- Inclusion of a place to note the ITOTS number on the form: The group agreed to keep it on the form as an optional field.
- The statement “*I understand and agree with this Early Intervention Service Coordination Plan*”: The group agreed to keep this as drafted.
- The bureaucratic feel to the form. Several options to allow for more individualization and a more family friendly look for the form were discussed. The group decided to add a row to allow for additional goals and activities.

Requirements for Billing for EI TCM

(Document: Requirements for early Intervention Targeted Case Management Reimbursement)

This document has been reviewed previously and the handout represents decisions made at previous meetings. One additional clarification was needed. The 4th item under Documentation will be amended to read five business days.

DBHDS Data System Work

Wendy Cary reported DBHDS data system work that is necessary to support the addition of the EI TCM Certification and the changes in Medicaid EI enrollment. She indicated that additional

IT staff is necessary to complete the necessary programming. Staff has been requested, but not approved at this point. Wendy reported that work will be prioritized to get the EI TCM into the EI Certification database system. With this prioritization, it is expected that the system will be ready for practitioners to submit online applications for EI TCM Certification August 8 and for the Part C staff to begin processing the applications September 30, 2011. Discussion followed about the fact that it will not be possible to certify over 300 service coordinators (as certified EI Case Managers) by October 1 if the process cannot be started until September 30. *Jeff will talk with DMAS staff about options if there is a delay in the certification process.*

Wendy reported that the addition of a field to enter the intake date will not be ready for a year without additional IT staff. Participants expressed concern that this will increase the local system and Part C staff workload as well as impact the timeliness and accuracy of adding the EI Benefit in VAMMIS. Wendy is continuing to provide information and justification for additional staff.

The group discussed and agreed upon working definitions for the experience requirement for certification of EI Case Managers.

- Three years means 36 (or more) months
- Full time means 32 hours/week
- Parents' experience coordinating their child's service in EI and Part B will be considered to meet the requirement for full time experience. Both the time coordinating their child's services while the child is receiving Part C services or Part B services will count toward the requirement for three years full time experience
- Documentation of experience will be required as part of the certification application.

When the EI TCM Certification is implemented, the following will occur:

- EI Service Coordination will no longer be "active"; that is, it will no longer be possible to apply for EI Service Coordination Certification
- Those who have EI Service coordination Certification will retain the Certification until it expires (three years from date the Certification was granted). However, the EI Service Coordination Certification will not be sufficient to provide services in the early intervention system after EI TCM is implemented.
 - Wendy indicated that reports will continue to list the Service Coordinator Certification; so service coordinators who have the EI SC Certification will show up on reports as having both the EI SC and the EI TCM Certification (after they are granted the EI TCM Certification).

Required Training for TCM Certification

(Document: Plan for Service Coordination Module (5/19/11))

Deana reviewed the document outlining the plan for the required training for TCM certification. Deana indicated that it will be possible to open the module and take the test (just as this is possible for the other modules). This is important for service coordinators who have already completed training through other mechanisms. It is expected that new service coordinators will complete the module prior to taking the test.

Training content was discussed. Deana has queried a national TA list to see if there are existing materials that could be utilized or adapted.

Deana asked for volunteers willing to be videotaped explaining rights or parental prior notice to families. The following was recommended by the group:

- Provide information/demonstration of explanation of rights/PPN for each step in the EI process
- Develop script of what should be said. Request examples from local systems. Ask part C staff to review content. Consider videotaping attendees at the June Kaleidoscope training.

A suggestion was made that perhaps the Funding Group from the Part C/Local System Manager April 1, 2011 meeting could contribute to development of content regarding use of multiple funding resources since this is part of the Funding Group's workplan.

Roll Out Training

(Document: Training Plan for EI TCM Implementation)

Deana shared information she received at a recent conference about requirements for effective implementation of change. She reported that while a training event can be a part of the process, there also needs to be ongoing training, access to TA and Coaching.

Participants discussed the document developed by the Training/KSA committee. The following were recommended by participants today:

- Use a webinar for the training for service coordinators rather than regional face to face meetings. This should be done in August or early September. Follow up with regional TA.
- Hold a webinar for billing and reimbursement staff. This would be a short webinar. Target date: July
- It is not necessary to have a separate training for individuals who are familiar with TCM, but not with EI TCM because the content will be included in the webinar training for service coordinators. Task Force members recommended that training focus on requirements for EI TCM without trying to cross reference what was required by ID or MH TCM.
- There needs to be a joint planning meeting of the two subcommittees to plan the trainings.

The following requests were made regarding the changes that will be made in the Infant & Toddler Connection of Virginia Practice Manual:

- Provide a track changes version
- Make each chapter stand alone so that changes can be made more readily and changes can be dated. Each chapter would start with page 1 (such as is done with DMAS manuals)
- Provide a cover sheet that lists (on an ongoing basis) the changes that are made (with dates the changes were made).

Information needs to be provided about transitioning children from ID or MH TCM to EI TCM. *Jeff will discuss this with DMAS staff.* This information needs to be included in the webinar for reimbursement and billing staff as well as the webinar for Service Coordinators, supervisors and LSMs.

DBHDS Personnel Regulations (Update)

The APA regulatory process for adoption of emergency regulations has been initiated. The draft revised regulations have been reviewed by the Office of the Attorney General (OAG) and will be reviewed again following review/incorporation of the OAG comments.

Plans:

- The documents discussed today will be revised based on today's input and sent to Task Force Members along with the Meeting notes. (Beth)
- Jeff will consult with DMAS colleagues about options if there is a delay in the EI TCM Certification Process
- Jeff will consult with DMAS colleagues about expectations for transitioning children from ID or MH TCM to EI TCM
- Deana and Cori will continue to lead the work on development of the training module
- DBHDS staff will continue work on development of the IT infrastructure to support the EI Certification process and the change in when the EI benefit will be added in VAMMIS
- Jeff and Beth will begin development of the webinar for billing and reimbursement personnel
- Deana, Cori, Beth and Jeff will begin planning for the August/September Webinar for Service Coordinators
 - The Documentation and KSA/Training committees will collaborate on development of the webinar
 - Places where changes are needed in the Practice Manual will be identified

Next meeting: June 16, 2011 from 1:00 – 4:00 at the VACSB