# IDAHO BOARD OF HEALTH AND WELFARE MINUTES August 2, 2011

The Board of Health and Welfare convened at:
Pete T. Cenarrusa Bldg.
450 W. State Street
Boise, Idaho 83720

## **BOARD MEMBERS PRESENT**

Richard Roberge, Chairman
Janet Penfold, Vice Chair
Richard Armstrong, Secretary
Representative Janice McGeachin
Darrell Kerby
Commissioner Tom Stroschein
James Giuffré
Tammy Perkins

### STAFF PRESENT

Drew Hall, Deputy Director, Family and Community Services, Public Health and Welfare Services

Leslie Clement, Deputy Director, Behavioral Health, Medicaid, and Managed Care

David Taylor, Deputy Director, Support Services

Kim Thurston, Administrative Assistant to the Board

Peg Dougherty, Lead Deputy Attorney General

Tom Shanahan, Public Information Manager Tamara Prisock, Administrative Services Manager

Eric Brown, Program Supervisor, Division of Medicaid

Paul Leary, Administrator, Division of Medicaid

Ross Edmunds, Administrator, Division of Behavioral Health

# OTHERS PRESENT

Sara Stover, Division of Financial Management Mark England, Magellan Health Systems

### CALL TO ORDER

Following proper notice in accordance with Idaho Code, Section 67-2343, and pursuant to call by the Chairman, the meeting of the Idaho Board of Health and Welfare was called to order by Richard Roberge, Chairman of the Board, at 8:07 a.m. Tuesday, August 02, 2011, at the Pete T. Cenarrusa Bldg, 450 W. State Street, Boise, Idaho.

# ROLL CALL

Richard Armstrong, Secretary, called the roll. Roll call showed **eight** members present. Absent and excused were Senator Patti Anne Lodge, Stephen Weeg and Dan Fuchs. With **five** voting members present, Chairman Roberge declared a quorum.

### **PUBLIC COMMENT PERIOD**

Chairman Roberge opened the floor for public comment. There being none, the Board advanced to the next order of business.

# **ADOPTION OF MINUTES FROM BOARD MEETING ON MAY 11, 2011**

Motion:

Tom Stroschein moved that the minutes of the May 11, 2011, Board

meeting be adopted as prepared.

Second:

Janet Penfold

Vote:

Ayes: Kerby, Roberge, Giuffré, Stroschein, Penfold

Nays: None

Motion Carried.

## **COMMENTS FROM THE CHAIRMAN**

Chairman Roberge referenced a discussion he had with Mr. Stroschein regarding a tobacco tax increase. In follow up to the discussion, Chairman Roberge stated that the District 3 Board of Health met in Caldwell in June 2011 and voted against the tobacco tax increase.

Also, Chairman Roberge complimented Jane Smith, Administrator, Division of Public Health, and Christine Hahn, M.D., on their presentation to the Board of Health.

Chairman Roberge announced the National Association of Local Boards of Health, (NALBH) is having its 19<sup>th</sup> Annual Meeting September 7-9, 2011, in Coeur d'Alene. Steve Scanlin, Central District Health Department Board, is the Idaho President. Anyone can register. The NALBH pamphlet, registration instructions and conference schedule were emailed to all Board members.

Chairman Roberge reported that he received a call from Joel Pollard from the Wyoming Institutional Review Board, asking personal health questions related to Idaho. Chairman Roberge wanted to know if the Department of Health and Welfare was aware of this or if it was partnered with the Wyoming Institutional Review Board.

Director Armstrong explained that the Department of Health and Welfare was not contracted with the Wyoming Institutional Review Board to complete research and instructed that a follow-up would be done to inquire about the nature of the mentioned call.

### **APPROVAL OF RULES**

# Rules Governing Residential Habilitation Agencies Docket No. 16-0417-1101 (Temporary)

Presenter: Eric Brown, Program Supervisor, Division of Medicaid

As an introduction to the presentation of Rules Governing Residential Habilitation Agencies rule docket, Leslie Clement discussed issues surrounding the referenced rule. Leslie explained that this rule is a state certification rule only. There is no reduction in services to the clients.

Eric Brown, Program Supervisor, Division of Medicaid, presented the Rules Governing Residential Habilitation Agencies rule docket for the Board's approval.

These rules clarify the certification requirements for residential habilitation agency providers, the health and safety critical incident reporting requirements, and certification enforcement procedures.

Motion:

Darrell Kerby moved that the Idaho Board of Health and Welfare adopt the

temporary rules for the "Residential Habilitation Agencies Licensing

Requirements," presented under Docket No. 16-0417-1101 with an effective date

of August 5, 2011.

Second:

Janet Penfold

Vote:

Ayes: Kerby, Roberge, Giuffré, Stroschein, Penfold,

Nays: None

Motion Carried.

# CONCURRENCE OF APPOINTMENT FOR PAUL LEARY-MEDICAID BENEFIT PLAN ADMINISTRATOR

Paul Leary was introduced as the appointed Medicaid Benefit Plan Administrator by Director Armstrong. Paul has served in Medicaid for many years and has presented various Medicaid issues in front of the legislature. As Medicaid Benefit Plan Administrator, Paul will report to Leslie Clement, Deputy Director, and will be responsible for the day-to-day operations of Medicaid.

Chairman Roberge expressed appreciation for Paul in regards to a meeting they both attended. The outcome of the meeting was positive. Paul explained to Chairman Roberge his responsibilities include managing the Medicaid State Plan, which is essentially a contract between the state and the federal governments.

Motion:

Janet Penfold moved that the Idaho Board of Health and Welfare concur with the Director's appointment of Paul Leary as Medicaid Benefits Plan Administrator for the Idaho Department of Health and Welfare.

Second:

**Darrell Kerby** 

Vote:

Ayes: Kerby, Roberge, Giuffré, Stroschein, Penfold,

Nays: None

# CONCURRENCE OF APPOINTMENT FOR ROSS EDMUNDS FOR ADMINISTRATOR, DIVISION OF BEHAVIORAL HEALTH

Ross Edmunds was introduced as the appointed Administrator, Division of Behavioral Health, by Director Armstrong. Ross has moved through various positions within the Department and has shown tremendous management skills. As behavioral health evolves, the Department of Health and Welfare, specifically the Behavioral Health Division, is developing ways to change the face of delivery for this care. One of the first steps to take is to define the Department's service package with crisis services being the first priority. Next would be to design an emergency response system that is effective in reducing the risk of people causing harm to themselves or others. With Medicaid becoming a managed care option, this will impact decisions.

Motion:

Tom Strochein moved that the Idaho Board of Health and Welfare concur with

the Director's appointment of Ross Edmunds as Administrator, Division of

Behavioral Health, Department of Health and Welfare.

Second:

**Darrell Kerby** 

Vote:

Ayes: Kerby, Roberge, Giuffré, Stroschein, Penfold,

Nays: None

# 2012-2016 STRATEGIC PLAN

Tamara reminded the Board Members that one of their statutory responsibilities is to review and advise the Director regarding the Department's strategic plan. The 2012-2016 Strategic Plan was reviewed. The goals, objectives and performance targets have not changed since last year, with the exception of Goal 3, Objective 5. This change was made to increase the Department's performance target for delivering health and human services. The Strategic Plan is submitted to the Division of Financial Management in the Governor's Office annually as well as the Performance Measurement Report that is submitted every September. The Performance Measurement Report gives a four year comparison of how the Department has moved in each area. Every state agency is required to submit a Performance Measurement Report. This report, along with the Strategic Plan and Facts, Figures and Trends report, gives an overall view of who the Department of Health and Welfare is serving, what services we offer, and how well the Department is doing providing those services.

# **DIVISION OF WELFARE REPORT**

Deputy Director Drew Hall started his report with news that the Division of Welfare continues to meet or exceed federal and state performance requirements in all of the programs it administers. He reported that it is critical to continuously explore new processes and technology to effectively deliver services. The Division remains focused on priorities and is actively searching for new ways to manage work. The Division is also exploring options for improving partnerships with private and non-profit organizations that share the same vision and purpose, and sometimes participants.

In June 2011, 168 new individuals enrolled in the Food Stamp Program – a significant drop in growth compared to the 1,000-plus new individuals who have joined each month since July 2008. As of June 2011, there were 234,763 Idahoans receiving food stamps, which equates to approximately 15 percent of Idaho's population.

The food stamp asset test was successfully implemented in June. It is too early to conclude impacts on participation; but, it has added additional time to complete the eligibility process. The impacts to current participants who must be re-evaluated for ongoing eligibility with the asset test have yet to be assessed.

The Division continues to refine options for reducing fraud and the trafficking of food stamp benefits. Possible solutions are being discussed with other states and federal partners. Implementing low cost options as quickly as possible and seeking funding from the legislature for other higher cost strategies have been considered.

# **DIVISION OF FAMILY AND COMMUNITY SERVICES REPORT**

Deputy Director Hall reported that the reorganization and consolidation of central office staff and programs for the Division of Family and Community Services have been completed. Video conferencing has been installed to allow the Child Welfare, Developmental Disabilities and Infant Toddler programs the ability to video conference state-wide. This will increase communication, standardization and efficiencies.

The Child Welfare Program held its first annual supervisors' training summit in Boise. The goal was to continue training of regional supervisors from across the state.

Federal partners have approved changes to the IV-E plan in respect to relative guardians. Financial assistance for relative guardians in the past has been funded entirely by general funds. With this approval, relative guardians may qualify for financial assistance up to the foster care rates.

### **DIVISION OF PUBLIC HEALTH REPORT**

Deputy Director Hall started this report for the Division of Public Health by including a notation of gratitude to Dick Schultz, who provided leadership and guidance to the Department for over 30 years. He will be missed.

The Patient Protection and Affordable Care Act (PPACA) combines funding for new health care reforms with funding for long-standing public health programs. The Division is carefully reviewing all grants and funding requests to ensure adherence to the Governor's Executive Order limiting access to federal health care funds, while ensuring that ongoing programs important to the citizens of Idaho are given a proper review at the Executive level.

Deputy Director Hall also provided an update about the WIC Information System Program (WISPr) and the Maternal, Infant and Child Home Visiting Program. With approval from the Governor's Office and support of First Lady Lori Otter, the Bureau of Community and Environmental Health made an application for the Centers for Disease Control and Prevention (CDC), Prevention and Public Health Fund Community Transformation Grant. This supports implementation of evidence and practice-based community and clinical prevention and wellness

strategies that will lead to measurable health outcomes to reduce chronic disease rates. The primary goal of the Idaho implementation plan is to create healthier communities by supporting implementation of interventions in four strategic areas: 1) Tobacco-Free Living; 2) Active Living and Healthy Eating; 3) High Impact Quality Clinical and Other Preventive Services; and 4) Healthy and Safe Physical Environment

### DIVISION OF BEHAVIORAL HEALTH REPORT

Deputy Director Leslie Clement reported the following priorities have been identified in response to budget constraints and in an effort to establish statewide standards and improve consistency:

- 1. Crisis intervention services for individuals who are in imminent danger of harm to themselves or others. Because of its emergent nature, crisis services are provided by Division staff to anyone, regardless of income or insured status.
- 2. Services to people committed to the Department by the courts because they are a danger to themselves or others or are mentally incompetent to assist in their defense in a court proceeding.
- 3. Assessment and treatment of people who have been ordered by the court. The treatment is designed to divert people with mental illness out of the criminal justice system.
- 4. Serve mental health court clients.
- 5. Serve voluntary clients who are indigent and uninsured.

Deputy Director Clement reported the importance of technology innovation and development. Organizational changes have also been made to improve efficiency and responsiveness to local concerns by consolidating management into three administrative groups or Hubs. Hub administrators oversee regional operations in Northern Idaho (Regions 1 & 2), Southeastern Idaho (Regions 6 & 7) and in Southwestern Idaho (Regions 3, 4, & 5). The Central Office role is to focus on policy, data and quality assurance activities.

Tele-health has been successful in bringing needed psychiatric services to areas of the state without psychiatrists.

State Hospital South has passed accreditation and licensing survey. Due to reductions in personnel, there is concern with its continued compliance. New admissions are more acute, requiring more intensive staff intervention. Use of restraints and seclusion is increasing, although only used in emergency situations where the physical safety of patients or others is at imminent risk.

### **DIVISION OF MEDICAID REPORT**

House Bill 260 - Medicaid Cost Containment and Health Care Improvement Act. Deputy Director Clement stated that the Department is on track for implementing the provisions of House Bill 260. Projected general fund savings is approximately \$34,480,000. The Division will be watching closely to determine if the change results in cost shifts to other areas.

Deputy Director Clement gave an overview of the Medicaid Managed Care planning efforts - Medicaid Managed Care Implementation.

- Actuarial Analysis: Cost data by population type, by plan, by county.
  - o Existing contract with Milliman amended to meet legislative direction.
- Medical Homes: Reform payment, practice, initial focus on high-cost patients.
  - O Medicaid received funding for staff to support the Governor's Medical Home Multi-Payer Collaborative, an initiative intended to transform payment along with practice through implementation of primary care medical homes. Staff will be hired no later than September, and they will work on designs to implement "Health Homes" that focus on high-cost populations to include those with serious mental health conditions.
- Mental Health: Contract based on capitation payment that covers evidence-based benefits and is delivered by a qualified provider network.
  - O A Request for Information was initiated for a mental health managed care carveout. Six managed care companies responded. The Department is also in the process of scheduling a "Public Dialogue" to engage in-state experts and the public on advising Medicaid on Request for Information requirements for a mental health managed care system. We will host a web site that includes educational materials on managed care and will be developing a survey to obtain additional public input.
- Other State Medicaid Programs: Obtain best practices and lessons learned.
  - We are in the planning stage and are targeting this fall to bring other state experts to Idaho to share their managed care experiences/wisdom.
- Listening Sessions: Panel of experts from hospitals, physicians, long-term care and safety-net providers to share their thoughts, concerns and advise about managed care in Idaho.
  - We are in the planning stage and are targeting this fall to convene the panel.
- Monitoring National Conversations regarding Medicare and Medicaid.
  - o Several pilot and demonstration opportunities are being monitored and evaluated to determine whether the models are a good fit for Idaho Medicaid.

#### SUPPORT SERVICES REPORT

Deputy Director Dave Taylor started his report by reminding the Board Members that one of their statutory requirements is the ability to advise the Director regarding fiscal matters.

Deputy Director Taylor explained the definitions of three categories that he used while explaining the budget report. The report discussed was a draft and will not be final until September 2011 when it is submitted to the Division of Financial Management.

Deputy Director Taylor and Deputy Director Clement explained in detail each request for funds. Each request was described by division, description and dollar amount.

Medicaid ended this past fiscal year in balance. This is the first time in 2 years Medicaid has not had to carry over requests for the next budget year.

Deputy Director Taylor ended his report by providing information on the interim payments to Medicaid providers. From last year, \$118 million was advanced to Medicaid providers to keep them in business while the Molina system issues were being resolved. Deputy Director Taylor was pleased to report that as of July 24, 2011, all of the money was collected back except \$11.4 million. The Department is working with providers and collection agencies to recoup the remaining balances. There have been some providers who have repaid very little or no money.

### **DIRECTOR'S REPORT**

Director Armstrong started his report by stating that the Department has come a long way and is at a good operating level. The Department has managed through many issues. However, changes are occurring that are federally required and will be very challenging to the Department.

Director Armstrong provided an update on mental health and the transformation from the Interagency Committee on Substance Abuse Prevention (ICSA) to the Behavioral Health Interagency Cooperative, which was recently established by Governor's Executive Order. This consists of state agencies, including the Department of Health and Welfare, Department of Juvenile Corrections, Department of Correction, Idaho State Police and The Courts. The cooperative will continue the work of ICSA, which involves substance use disorder treatment, as well as take over the work of the Behavioral Health Transformation Workgroup. The cooperative has developed policy for the type of computer system each agency will use as the electronic medical record.

Other policy being developed is credentialing, maintaining network integrity and quality control. The goal is to maintain one database to allow the Department to report on activities and monitor the efficiency that will take place.

The cooperative will propose modifying the State Planning Council to be the Behavioral Health Planning Council. Many chronic mentally ill patients do not receive care until they are in crisis. The goals of this group are to have community-based mental health programs to keep people out of crisis management. Through more effective collaboration, a difference can be made at the community level. This will allow proactive community level care for chronic mentally ill patients.

#### ADJOURNMENT

The next meeting of the Board of Health and Welfare is scheduled to be held November 17, 2011. There being no further business to come before the Board, Chairman Roberge adjourned the meeting at 1:06 pm.

Richard M. Armstrong, Secretary

Kim Thurston, Administrative Assistant