

CQI Workgroup on Part C Fees

Meeting Summary February 15, 2000 Conference Room C - Henrico CSB Glen Allen, Virginia

Those Attending: Glen Slonneger, Elisabeth Hutton, Shirley Ricks, Anne Lucas, Anne Simmons, Barry Mason, Carmen Sanchez, Forrest Mercer, Geri Pratt, Elizabeth Fletcher, and Mary Ann Discenza

Those Absent: Patti Seklemian, Pat Abrams, Emily Dreyfus, Joan Pine, Christa Shifflett, Joe Sharrer, Wanda Pruett, John Jackson, Joy Yeh, Martha Adams, and Joel Rothenberg

Workgroup members were provided the following information and the handouts were summarized and the suggestion was made that members review the information:

Early Intervention Fees - Illinois
Virginia Department of Health - Income levels based on Personal Income
Majority of State
Northern Virginia
Connecticut Fee Scale As A Percent of Annual Income

Since many members had left the February 7 meeting and did not hear concerns raised about the ongoing process for the next several meetings and related issues, discussion occurred about the issues that were raised. They included the following: 1) ensuring the preliminary recommendations from the DMHMRSAS internal workgroup were fully analyzed, 2) avoiding treating the recommendations in isolation from each other, 3) analyzing the fiscal impact of the all the recommendations, and, 4) developing recommended policies and procedures for consistent and reasonable family fees. Related to these concerns, the suggestion was made that the whole workgroup continue analyzing the recommendations and when appropriate, smaller groups would assume specific tasks related to the activities of the whole group. Consensus from the members follows: a) fundamental to the work of this group the product(s) must be interrelated and several options considered, b) the product(s) must be sellable to decision makers, c) the fiscal impact will play a significant role in decision-making by the Agency Heads, d) several different options should be considered, and, d) recommendations should be responsive to families to help resolve these issues . In addition; each recommendation will need to be well-researched as to whether a *Code* change or a state policy or procedure change will be needed, there needs to be a determination of which Part C services will have a charge, and these issues should be considered in the context of fee scales and ability to pay procedures.

Outcomes of the workgroup:

- 1) Policies and procedures should strike a balance between simplicity in order that families can understand them and this should be balanced with complexity to handle multiple situations
- 2) Early intervention services should be accessible
- 3) Services should be affordable
- 4) Services should be considered in the context of total cost annually to families
- 5) Whatever fees are in place should not impact those families who may need more services.

Questions for the workgroup to consider:

- 1) How much do fees add up to over time?
- 2) Is there a better mix of fees?
- 3) Do simple solutions exist?
- 4) What is the breaking point for families?
- 5) What are sets of services for families that bring them to this point?

Issues identified related to the above:

- No statewide system for collecting information about fees.
- While revenue data from local boards would include state and local funds and fees, the data does not differentiate revenue collected by payor source (i.e. family fees, Medicaid, and private insurance).
- There is no revenue data collected from private providers and other agencies.
- Timeliness of data collection would be an issue.

Principles to be used include, but are not limited to the following:

- ☞ The system will not work all the time for all families, but can be uniform and work for the vast majority of families.
- ☞ The appeals process becomes the exception.
- ☞ Simplicity of the system in order that most families can understand it and its application.
- ☞ The elements/components in determining the fee must be neutral and consistently applied.
- ☞ Use gross income.
- ☞ There should be a monthly cap on the amount that a family is expected to pay.
- ☞ The monthly cap is a “family fee” regardless of the number of children receiving early intervention services.
- ☞ For purposes of “family fee”, family is defined as.....
(Note: This needs discussion).
- ☞ If a family is eligible for WIC or Medicaid, the family fee is zero.
- ☞ A family whose income is just above WIC/Medicaid up to median income level should have a “nominal” fee.

Around the analysis of the sliding fee scales of Utah, Connecticut, Department of Health Children’s Specialty Services, and Fairfax County’s fee scales, Carmen presented information about income levels divided according to family size and the percent difference between each

family size for each income level. Several issues emerged from looking at the information and included:

- a) service delivery issues and discussion around what is appropriate early intervention,
- b) the current structure of early intervention services in Virginia,
- c) what other options are available for the workgroup to consider, and,
- d) the need for a paradigm shift for some early intervention providers of early intervention service models.

Points were made about current research and the relationship of learning opportunities for children and the intent of early intervention services, other initiatives such as the Local Continuous Improvement Project of the VICC Local/Regional Direct Services Committee which will provide information and data to support specific service delivery models and the importance of developing fee scales that are not regressive.

A small group was formed to work on a draft of consistent procedures to present to the Workgroup in March. A draft financial agreement form will be developed and disseminated to the workgroup before the next meeting. In addition, Carmen agreed to develop hypothetical versions of fee scales using monthly caps and percent of annual gross income that fee represents to generate discussion. This information will be forwarded to the workgroup before the March 1st meeting.

The workgroup adjourned after agreeing to the following additional meetings:

March 22	10:00 until 3:00	Henrico CSB	Conference Room B
March 30	10:00 until 3:00	Henrico CSB	Conference Room C
April 3	10:00 until 3:00	Henrico CSB	Conference Room C

Menus will be available for members to order lunch.