

## **Virginia Interagency Coordinating Council**

### **Dorey Recreation Park**

**September 8, 1999**

### **Minutes**

The meeting was called to order by Cherie Takemoto, Chair, at 9:40 AM.

VICC members who were present introduced themselves. See *attendance list*.

**Minutes** of the June 9, 1999 VICC meeting were approved as submitted.

### **Officer Nominations**

Pat Abrams presented the slate of nominees for officers for 1999-2000. Anne Stewart was nominated for Chair, Jim Blackman, MD for Vice-Chair and Cherie Takemoto for Secretary. A motion was made, seconded and passed that the slate of nominees be accepted. The new officers will begin their tenure October 1, 1999.

## New Member Nominations

Beth Tolley reported that the slate of nominees for VICC membership has been forwarded to the governor (through the Department of Mental Health, Mental Retardation and Substance Abuse Services to the Secretary of Health and Human Services). Appointees will most likely be notified before the Virginia Babies Can't Wait! Office is informed of the selections.

## Bylaws

Liz Hutton reported that the nominating committee felt that additional membership categories would be beneficial for the VICC. Specifically, it was suggested that a representative from the private medical insurance industry and possibly a representative from public and/or private advocacy and/or funding agencies be added. Liz made a motion that the bylaws be revised in order to make such changes. The motion was seconded and was passed.

## Public Awareness Committee

Mary Ann Bergeron, executive director of the Virginia Association of Community Service Boards, presented a recommendation from the Public Awareness Committee that programs throughout Virginia adopt the ***Virginia Babies Can't Wait!*** name. She stated that use of the same name throughout Virginia will increase public awareness of the early intervention system and would make it easier for people across the state to identify programs and services that are a part of the system. Anne Lucas, Part C Coordinator stated that there is a trend among other states to use the same name for all of the programs. Jim Blackman commented that it is confusing to have so many differently named programs. He stated that having the same name would be particularly helpful for the people who arrange follow up when babies are discharged from neonatal intensive care units (NICUs).

Clarification was asked about whether agencies were being asked to change the name of their agency. Mary Ann Bergeron responded that that was the recommendation. However, it was clarified that "Virginia Babies Can't Wait" could be used along with the agency's name. A comment was made that we could not expect private agencies (such as rehabilitation agencies) to change their name. The intent of the recommendation was clarified to explain that the goal is for agencies that serve infants and toddlers with disabilities to answer the phone with "Virginia Babies Can't Wait!" so that the caller will know they have reached an agency within the system.

A concern was raised by people from the Tidewater region that the name Babies Can't Wait! may be confusing based on their experience with recent public awareness activities.

Questions arose concerning what effect **a requirement for localities to use the "Virginia Babies Can't Wait" name** will have on local councils and agencies. Pat Abrams commented that the Early Intervention Interagency Management Team would **need to have information from localities about the expected impact and cost provided to it before**

**making a decision about making such a requirement.** The management team could recommend a period of public comment.

The following motion was made, seconded and passed with the understanding that the management team would carefully study the potential impact before any action was taken:

*That the lead agency direct all programs providing early intervention services through Virginia's Babies Can't Wait system of services adopt the same name so the public awareness activities can develop a universal name recognition.*

Sarah Scott Thomas, a Public Relations Specialist who has been working with the Public Awareness Committee presented the Marketing Plan that is being recommended by the committee. See attached copy. Questions arose concerning the cost. Funding was clarified and includes budgeted funds and efforts to support many of the recommended activities through partnering with private agencies. The following motion was made, seconded and passed:

*That the VICC approve the public awareness plan as developed by Sarah Scott Thomas and reviewed by the Public Awareness Committee and the Family Support and Advocacy Committee.*

Cherie Takemoto commended the Public Awareness Committee on the work they have done.

### **Natural Environments/IFSP**

Brenda Crockett, Chair of the Local Regional Direct Services Committee reported on the work of the committee. A standardized IFSP draft form\* has been finalized for piloting throughout Virginia. The natural environments and Individual Family Service Plan technical assistance documents are being revised and integrated into one document; this will be piloted along with the form. The committee recommended that a consultant be retained to assist with completion of the document. A draft budget\* was presented. The following motion was made, seconded and passed:

*To advise the **Lead Agency** to allocate sufficient resources to complete the revision of the IFSP and Natural Environments Technical Assistance Document and to conduct a pilot study to examine the effect and efficacy of the draft IFSP form and TA Document.*

Discussion followed concerning the need for training throughout the state on the use of the IFSP form, the IFSP process and natural environments. Recommendations\* including a draft budget were presented. Shirley Ricks recommended that a registration fee be considered. Local council support for the training is also anticipated. Anne Stewart requested that the Local Regional Direct Services Committee involve the Personnel Training and Development Committee and the Cultural Diversity Advisory Board as plans are being made for training. The following motion was made, seconded and passed:

*To advise the Department to allocate sufficient resources and support to conduct statewide and regional comprehensive training on IFSPs and natural environments to ensure at least minimum compliance with federal IDEA requirements including CSPD, IFSP, natural*

*environments and procedural safeguards.*

\*See attached information packet.

Cherie commended the committee members for the work they have done.

## **Family Report**

Wanda Pruett, State Family Representative reported that most of the comments that are being received by the family representatives pertain to the ability to pay issue. There have also been calls from family members on local councils asking how to fund natural environments with the current budgets. Wanda commented that they expect to see the need for increased funding both for implementation of services in natural environments as well as for the additional number of children being identified who are eligible for services.

Wanda reported that 4 of the regional family representative positions are filled. The representatives are Rose Singleton, Richmond; Emily Dreyfus, Valley; Regina Myrick, Tidewater; and Janine Steagall, Northern Virginia.

## **Public Comment**

**Mary Lou Hutton**, Council Coordinator for Cumberland Interagency Coordinating Council commented that though she realized that the Local Regional Direct Services Committee cannot please everyone, she doesn't feel that substantial changes were made to the IFSP form as a result of the public comments.

**Kathy Phillips**, Council Coordinator for the Middle Peninsula/Northern Neck Council reported that the impact of Medicaid managed care is devastating for their region. Their council is proud of the work they have done with ability to pay issues with families. In addition, services have been provided in natural environments. However, they cannot provide the same service for \$10 that they were providing for \$50. She stated that their reimbursement had already been less than the calculated cost (using Medicaid cost reporting); how it is a fraction of what it had been.

**Linda Eggleston**, Council Coordinator for Virginia Beach reported that they put public awareness fliers in utility bills (at no cost). She requested that we not call early intervention a "new" service in our public awareness activities.

**Mary Ann Bergeron** said she hopes the evaluation of the lead agency will be a process that is public and that involves families. She cautioned that a change should not be made unless it is expected to result in substantial benefits including more resources and more efficiency for the early intervention system. She stated that we should know "what is broken before we experiment with people's lives."

**Emily Dreyfus** clarified that the handouts about the ability to pay issue were not products of the Ability to Pay Work Group. She stated that the committee had recommended a legislative solution. She stated that the "conclusion that it's a local problem we can correct with intensive technical assistance is incorrect." She said that we need to work on a broader solution.

**Nancy Wilson** stated that Virginia ARC (Association for Retarded Citizens) is requesting a meeting with agency heads and families. She requested that careful study be done before the lead agency is moved and that the Babies Can't Wait! program be a priority for whatever agency is designated as the lead agency.

**Wanda Pruett** commented that the Middle Peninsula/Northern Neck Council does have a family friendly fee schedule. She then made the following comments. "I have been coming to VICC meetings for over two years. I have seen several big issues brought before this committee. Early Intervention has tackled Medicaid managed care, is currently wrestling with ability to pay and fee scales, and I am sure natural environments will be the next big issue we all have to address."

"A lot of us feel it is time to take a hard look at our entire system. We have been implementing Part C of the IDEA for 10 years. As we think about changing the lead agency it seems like a good time to step back and look at our EI system, continue the things that are working well and fix the things that aren't."

"Several years ago Florida's state ICC appointed a group of families and providers to assess their system. This group came up with recommended improvements to their system and are now in the process of implementing those changes. In the past year or two we have gathered quite a bit of information about our own system with different studies. Now information is beginning to come in from the pilot sites for monitoring and evaluation."

"Virginia is the land of the work group. We study an issue to death and do little with the findings. It is time to take the next step. After saying that I can't believe I am getting ready to suggest we form yet another workgroup. But here goes! I would like to ask the VICC to appoint a work group and charge them with overseeing our system and coming up with some suggested improvements. I would like to see this work group made up of families, council coordinators and direct service providers. It is time to develop a new strategic plan for our EI system." Wanda further commented that legislative support and communication is essential.

**Rosalind Cutchins** stated that she is very supportive of the public awareness plan. However, she recommended careful study before proceeding with use of the Babies Can't Wait! name. She also commented that local funds for public awareness dwindle as that money is shifted to provide direct services to an increased number of infants and toddlers.

**Evelyne Louis Jeune** commented on the transition page of the draft IFSP. She said more information and more preparation is needed by families when their children transition from Part C to Part B. Evelyne also announced that PADDA is sponsoring a conference September 18, 1999. Brochures were available.

**Cherie Takemoto** (speaking in her role as a parent) stated that PEATC (Parent Education and Training Center) has relocated to 6320 Augusta Drive, Suite 1200, Fairfax, VA 22510. The phone number is 703-923-0010 or 800-869-6782 (toll free).

### **Local Continuous Improvement Pilot Project**

Beth Tolley stated that the Local Continuous Improvement pilot project will be initiated in the next couple months. The information gained through the project should help provide answers to some of the questions about the cost of providing services within the context of natural environments.

### **Ability To Pay**

Elisabeth Hutton presented a report from the EIIMT on the Ability to Pay issue to update the VICC on EIIMT activities that have taken place in response to the VICC motion made at the June 9, 1999 meeting. The EIIMT held two meetings (July 8 and August 12) on the ability-to-pay issue and made six recommendations for actions to take in order to determine effective solutions to the issues. Subsequently, a meeting was held with Commissioner Kellogg to discuss the issues and recommendations. In addition, a memo was sent to the participating State agency commissioners/directors requesting their response to the suggestion of implementing a statewide sliding fee scale for the Part C system. The Lead Agency received mixed feedback from participating State agency commissioners/directors; most of those who responded did not support a statewide sliding fee schedule based on the information submitted. The responding agency Commissioners/directors indicated they needed more specific information from localities.

In response to the need for more specific information, the EIIMT formed a small work group that recommended a team be formed to conduct site visits to at least three localities to obtain additional information for presentation at the September 8 VICC meeting. The EIIMT team made site visits to three localities and followed specific criteria to review each locality's procedures for determining family fees and for informing families about fees and their ability-to-pay mechanism, including fee appeal procedures.

Data was obtained from each locality on current families served regarding actual monthly fees for services, whether they had appealed the fee, and if they used other sources of payment for services. The following conclusions were drawn from the site visits by the EIIMT regarding ability-to-pay: written legal guidance is needed from the State Attorney General's Office,

localities continue to need to expand local Part C networks, and for a more conclusive analysis, team visits must be made to localities where families reported in the family survey that they were having difficulty paying and accessing early intervention services. (See attached EIIMT report on Ability to Pay Issue).

In response to a question about the second part of the VICC motion made at the June 9, 1999 meeting, the EIIMT has not had a chance to address this yet, but will do so.

The EIIMT will continue to follow up on its recommendations and reported the following steps are planned.

1. Site visits to localities where families identified the greatest concern regarding paying for early intervention services. Invitations to participate in these site visits were extended to the State Family Representative and to Emily Dreyfus, Co-chair of the VICC ability to Pay Work Group.

2. Locality-based analysis of the family survey data will be coded to protect individual identification of localities and then shared with the VICC Ability-to-Pay Work Group.
3. The Lead Agency, on behalf of the management team, will seek legal clarification to the State Attorney General's office on behalf of the EIIMT.
4. The Lead Agency will disseminate a letter to the localities requesting that any specific family issues regarding fees and accessing early intervention services be directed to the Lead Agency.

The EIIMT will continue to obtain information from localities through site visits and information will be compiled about what is actually occurring in localities to determine potential solutions and strategies in resolving the ability-to-pay issues at the local level.

Leslie Hutcheson explained the process that state agencies must follow in proposing legislation for consideration by the Secretary and the Governor's office. The formal time for agencies to submit proposals for consideration by the Secretary and the Governor has passed. Interested constituent groups or individuals may contact legislators seeking patrons for proposed legislation. She stated that a key to success for legislative proposals is substantial supportive documentation of the issue the proposal is addressing. In order for the Administration to determine support for any legislative proposal, that proposal should be in clear alignment with the goals and objectives of the Administration.

A concern was expressed at this VICC meeting that the information in the EIIMT report on ability-to-pay could be interpreted inaccurately. In at least one locality that did not appear to have problems with ability to pay issues, the locality was not charging for special instruction as they should be. It is not known if there would be problems with ability to pay if the locality charged for special instruction.

The management team in coordination with the Virginia Babies Can't Wait! staff will continue to work with localities and with the DMHMRSAS Reimbursement office to better understand the issues and to resolve those problems that can be resolved with training and technical assistance. The issue remains very much an open, important issue.

## **New Business**

### **Lead Agency Designation**

**Discussion about a change in lead agency designation arose from comments made by Commissioner Kellogg last year to the joint subcommittee regarding whether or not DMHMRSAS was the most appropriate agency to be the lead agency. If a change in the lead agency does occur,** it is not clear how public the process of evaluation will be or how stakeholders will be involved. At this point **information regarding any change** is confidential. There will be opportunity for public comment when Part C policies are changed (which would happen if the lead agency were to change) because OSEP (Office of Special Education Programs) requires a 60 day (minimum) period for public comment for policy changes. Other changes that would have to occur if the lead agency were to change

include an executive order and changes in the interagency agreement. Legislative action is not required.

Shirley Ricks will talk with the Commissioner for the Department of Mental Health, Mental Retardation and Substance Abuse Services about the status of the discussions about lead agency designation and about what can be made public. She will share the information she receives at the next Steering Committee meeting. Wanda Pruett's suggestion about forming a work group to study the system and make recommendations will also be put on the agenda for the October Steering Committee meeting.

### **Recognition and Expression of Appreciation**

Appreciation was expressed to Cherie Takemoto for her dedication and skill as the chair of the VICC. She received a standing ovation.

### **Reports Requested for the December VICC meeting**

- Response from DMAS to Kathy Phillip's report of the impact of Medicaid managed care in the Middle Peninsula/Northern Neck Region
- Steering Committee update about lead agency designation discussion
- Steering Committee report on plans for stakeholders' participation in the evaluation of the Part C system in Virginia
- Report from the EIIMT on implementation of recommendations about the ability to pay issue
- Report from the Public Awareness Committee about the concerns raised about the Babies Can't Wait! name

The meeting was adjourned at 1:30 PM.

### **The following committees met after the VICC meeting:**

Administration

Family Support and Advocacy

Local Regional Direct Services

Personnel Training and Development

Public Awareness

### **Attachments:**

Attendance

Progress Report on the Integrated Work Plan

Committee Reports:

EIIMT

Ability to Pay - Reports from the EIIMT

Public Awareness

Local Regional Direct Services (including draft IFSP Form)

Family Support and Advocacy

Personnel Training and Development

Administrative

CoCoA Report