



**MAC 2.0 Stakeholder's
Meeting Minutes**

Meeting Date	November 12, 2013	Meeting Leader	Kristi Plotner
Meeting Time	2:00-4:00pm	Meeting Scribe	Shelia Funchess
Meeting Location	MS Children's Home Services	Next Meeting	Tuesday, February 25, 2014 2:00pm

Attendees:

Margaret Brim	Marissa Whitehouse	Jan Larsen	Cleveland Joseph
Celita Miller	Shirley Rainey	Cleveland Joseph	Nova York
Charlotte Derrick	Misty Jenkins	Paige Kennedy	Jan Larsen
Chelsea B. Crittle	Renee Dean	Bill Richardson	Trisha Hinson
Thelman Lander	Janet Flint	Ashley Turnipseed	Wanda Kennedy
Mary Smith	Beth Fenech	Ashley Lacoste	Carnell Kitchens
Cammie Kitchens	Juliette Reese	Veronica Vaughn	Melinda Bertucci
Stanley Devine	Matt Nalker		

Division of Medicaid Staff:

Kristi Plotner	Sandra Bracey	Buddy Parham	Dr. Linda McDowell
James Horton	Jennifer Fulcher	Ann Ricks	Easter Culpepper
Shelia Funchess	Tressa Eide	John Randazzo	Laureta Cameron
Chuck Terry			

Welcome by Kristi Plotner with each stakeholder introducing themselves and with their workgroup affiliation. A special thanks was extended to MCHS for hosting the meeting.

Agenda Item: MAC 2.0 Logo Selection

MAC 2.0 Logo Selection: Kristi Plotner covered the purpose of voting cards given out at the meeting for voting on the MAC 2.0 Logo. The logo was created in house specifically for the MAC 2.0 website. Shelia Funchess presented a brief power point presentation on the three designs that were approved. Each design had three different fonts from which to choose from. The participants were asked to vote for only one design.

Agenda Item: Reports from Learning Collaborative Team Leaders

1. **Trisha Hinson – Housing:** Trisha reported some of the basic strategies they plan to work on over the course of the next year. John Randazzo leads the Housing Work Group along with Demetria Simpson who's the Executive Director of the South MS Housing and Development Corporation. Olmstead Housing Work Group goal is to expand opportunities for affordable and accessible community-based housing for people with disabilities. Trisha stated what they have done with the housing initiatives to become more actively involved with the Olmstead Policy Academy covering housing for Mississippi. They have taken this as an opportunity to bring together a broad state-wide action plan in the area. There are several other people at the meeting who are a part of the housing group. It comes under the overall umbrella of housing and community living in the state. The housing plan is still in processing but it will be combined with an employment plan and a peer support plan for the overall strategic action plan for our state. This will involve an action plan and peer plan. The strategy for the housing team includes:
 1. Katrina CDBF funds- Request allocation of remaining unused funds for developments supporting community-based housing options.
 2. HOME Program – Pursue several possible options for housing resources (stock and/or funding) through the HOME Program.
 3. Encourage PHAs to establish preferences for persons with disabilities.
 4. Housing Trust Fund (HTF) – Talk to HTF working group about plan(s) for a special purpose HTF (share of sales tax on construction materials).
 5. Coordinate with MS Health Care Zone Initiative.
 6. Pursue opportunities for housing for veterans.
 7. SocialServe.com – Follow state's progress in the decision to acquire and use this locator service.
 8. Pursue other HUD support for other MS Olmstead initiatives.

In October a presentation to the IPS Advisory Council covered a number of housing initiatives for individuals with disabilities. A lot was shared with what everyone is doing across different agencies and all are moving in the same direction.

2. **Nova York-Conflict Free Case Management:** Nova reported that she does not have anything to report for any recent activities. The group is not meeting at this time. Several months ago they did turn in recommendations to the Division of Medicaid and to CMS. They are presently awaiting a conference call with CMS to receive feedback on their recommendations and will give them some direction on their future goals.
3. **Jan Larsen-Transportation:** Jan reported on looking at the best way to resolve transportation issues. Transportation exists only to help people where they are trying to go. They have been trying to pace themselves as the project moves along so the services that are developed are where they need to be. The services can be placed anywhere in the state. They have come up with a few ideas on transportation in order to get people where they need to go.
4. **Ashley Lacoste -Assessment Instrument Design:** Ashley reported the assessment instrument workgroup has a lot going on. BIP requires that you have a Level I and Level II assessment. Even before this discussion we have talked about with PAS, we called it a screener but we think it will be called a self- assessment that would be on the MAC website. It would be a place for someone to go for more information. It would begin with questions like, "How can we help? Do you need more information about this topic? Do you want someone to call you? Do you want more

information by mail or email?" Then it will lead into the Level I and Level II assessment. Ashley requested anyone on the assessment group to stay after the meeting to look over some of the screening questions.

5. **Dr. Craig Escude-Community Medical Support Team:** Dr. Craig Escude was not present. Mary Smith, Stanley Devine, and Kristi Plotner reported on the information below in his absence.
 1. Develop and encourage home based medical services.
Area Leader – Mary Smith continues to work in this area. New proposals are pending. Mary and Stanley are working together on Areas 1 and 2.
 2. Education of medical providers and consumers on medication compliance issues.
Area Leader – Stanley Devine
Proposal is in the works with North Central PDDs for a pilot project. If they agree to proceed, the agreement will be submitted to DOM for approval.
 3. Development of consultative clinic to address the needs of the target population.
CMS has approved this project. MOU is nearing completion and project set to begin soon.
Project name DETECT Developmental Evaluation, Training and Education Consultative Team of Mississippi.
 4. Development of the CAY center collaboration between UMMC and MS Children's Home Services for a children's behavioral health care partnership in MS. The Children's Collaborative recently received notice that CMS would fund the project. (see attached handout)
6. **Quality Assurance Data- Juliette Reese:** Juliette reported her group had several meetings initially and also meetings with consumers and conservators to see what their needs are. The goal is to stay in line when all of the other services are in place to measure quality and make things more accessible. Juliette requested assistance from anyone who has an interest in joining her group to be a voice. She requested more input from stakeholders due to group being a lot smaller. If you are interested please forward information to MAC email address at mac@medicaid.ms.gov.
7. **Kris Jones- Guardianship:** Group has not met and is working off-line.
8. **Lisa Burck- Available Services:** Team has not met and there is no information to report.
9. **New Learning Collaborative Group:** Kristi introduced a new collaborative work group. CMS requires the Balancing Incentive Program to include No Wrong Door. During the last meeting, Melinda Bertucci spoke about the MAC Centers and their development and how the No Wrong Door will be the place for information and referral. These services will be referred to other programs that will be able to enroll them in Long Term Services and Support. The MAC Centers includes information about resources that can be accessed without going into a program. Kristi recommended forming a new learning collaborative workgroup specific to information and referral which is the first piece of No Wrong Door. Kristi offered the recommendation to the floor. Matt Nalker thought it was an excellent idea and that it fell in line with the MAC project that was discussed 12 years ago. Matt Nalker volunteered to work on the new workgroup. Kristi suggested that Melinda Bertucci become the lead on new learning collaborative group. Everyone at meeting voted yes and motioned for Melinda Bertucci as leader of the new learning collaborative group named Information and Referral. Melinda accepted her new role.

Agenda Item: LTSS Presentation by FEI

FEI Systems was chosen as the vendor for No Wrong Door computer system effective October 1, 2013. Kristi introduced Ashton & Chirag as the presenters for FEI. They provided a presentation on the project. FEI is presently working on an IT system for the Division of Medicaid to merge with other agency systems to ensure that each person will only need to tell their story one time. Kristi stated, "How we talk to people and being person centered cannot be managed without software." The need for an IT system to help manage the Balancing Incentive Program is needed. The procurement was completed and the contract was awarded to FEI Systems.

There are several things that FEI are handling. They are as following:

- Core Standardized Assessment
- Information and Referral System
- Plans of Care, Service Plans, Plans of Services
- Electronic Visit Verification System

They will handle the program from an IT perspective. The policy decisions are driving the IT System. Kristi informed everyone that the design is not complete. FEI provided information on what other states are doing with their project. The plan for Mississippi has not been completely developed. The contract has been active for 6 weeks. There have been a lot of meetings and a lot of effort put forth in moving forward. A lot still has to be determined and it will happen pretty quickly. FEI spoke about the work schedule that will roll out on April 2014. It is a very short timeline and will require a lot of effort from staff.

Agenda Item: B2I Update

Charles Terry, Bureau Director for B2I and Jennifer Fulcher, Assistant Project Director for B2I presented information on the B2I program. B2I continues to assist individuals as they transition from institutions into home and community-based settings. B2I has a new marketing and outreach team. B2I had a participant recently featured in the Vicksburg Post.

Agenda Item: Use of Funds

- Kristi reported the approval of two projects for the Community Medical Supports Group- DETECT and the CAY center collaboration.
- Autism pilot project was approved by CMS. The waivers grew by 5 million dollars on last year. The use of the BIP funds will replace match funds put up by the agencies.
- There has been a lot of training completed. Jennifer Fulcher mentioned some training has been done for B2I.
- Ashley Lacoste has also completed some training with staff and has expanded out to others as the interest has grown. The Department of Mental Health has a MOU with the Division of Medicaid. The Department of Mental Health has contracted a company named Support Development Associates based out of Maryland to provide trainings. Their founder is Michael Smulls. He is known as the grandfather of Person Centered Planning. They have two processes:

1. Person Centered Thinking training will give the people who are going to be trained for completing Person Centered Training the tools to listen to information and to help them interact with the person. It gives the person a different way of thinking. For example we don't say client or individual we say person. It gives them the basic to make it about them and not about the process.
 2. Person Centered Planning Facilitation main focus is on the Intellectual/Development Disabilities (IDD) Waivers, support coordinators, and providers. It can certainly be expanded at some point in the future. The Person Centered Training will be provided to all 80 IDD Support Coordinators and 160 providers. They will be trained in December and January. There are more to be scheduled. Ashley stated, "Medicaid has been so generous with providing funds. There will also be Customized Informant Training."
- Kristi reported CMS approved the system that was presented to the group by FEI Systems to provide infrastructure to track people from one place to another without the person telling their story more than once. So far there are funds that will be allocated over the next two years. We are presently looking to see if there are any more additional funds available.
 - The 1915(i) was submitted to CMS which is a Home Community Based State Plan Option that will address IDD and try to address those that don't need the intensity of services that are on the waiver for IDD. They also address some of the waiting list issues. It has been submitted and we continue to negotiate with CMS. If the 1915(i) is approved it will begin with funds from the Balancing Incentive Program.

*** Subsequent to the meeting the percentage of Long Term Support Services for non-institutional services and supports was calculated to be 28.86% for the quarter ending September 30, 2013.

Agenda Item: Date of Next Meeting

Meeting is scheduled for Tuesday, February 25, 2014 at 2:00pm at **MS Children's Home Services**. Feel free to contact Kristi Plotner individually for questions at 601-359-6698 or at Kristi.plotner@medicaid.ms.gov.

Community Medical Supports Group 11/12/13

Team Chair: Craig L. Escudé , MD

Team Members: Amy Bishop, Ann Barnes, Cindi Thompson, David Elkin, John Damon, Joye Steen, Juliette Reese, Kate Holland, Lance Sigrest, Margaret Wilson, Mary Smith, Rudy Johnson, Shannon Spooner, Stanley Devine, Tracy Buchanan

The current status of the Community Medical Support Group areas of interest are listed below.

1. Develop and encourage home based medical services –

Area Leader - Mary Smith - continues to work in this area. New proposals are pending. Mary and Stanley are working together on Areas 1 and 2

2. Education of medical providers and consumers on medication compliance issues.

Area Leader - Stanley Devine

Proposal is in the works with North Central PDDs for a pilot project. If they agree to proceed, the agreement will be submitted to DOM for approval.

3. Development of a consultative clinic to address the needs of the target populations.-

CMS has approved this project. MOU is nearing completion and project set to begin soon. Project name - DETECT – Developmental Evaluation, Training and Educational Consultative Team of Mississippi. Primary focus is to provide educational opportunities, training for residents and students and clinical support to community medical providers to enhance and develop competency in caring for those with intellectual and developmental disabilities in Mississippi. Presentation to the MAC 2.0 group is available at next meeting if desired by the group.



4. Development of the CAY center collaboration between UMMC and MS Children’s Home Services for a children’s behavioral health care partnership in MS.

The Children’s Collaborative recently received notice that Medicaid would fund the staffing and implementation of the Collaborative through the Balancing Incentive Program funds. The Collaborative is a partnership between the Center for the Advancement of Youth (CAY) at the University of Mississippi Medical Center and Mississippi Children’s Home Services. The goal of the Collaborative is to provide cutting-edge developmental and behavioral assessment and treatment for children, adolescents, and youth on the state of Mississippi. We are now actively planning for this collaboration, and are very excited that Medicaid has taken a lead on improving developmental and behavioral care for children and their families.

Respectfully submitted,

Craig L. Escudé, MD