

Children with Special Health Care Needs East Region

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East Region Representative/facilitator – Jan Steinbach

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TOPIC	DISCUSSION
Welcome and General Announcements	<p>Introductions were made. Callie and Sheri are retiring this December. This will be their last East Region meeting. We welcome new staff from Whitman, Lincoln, and Adams counties.</p> <p>Melissa Charbonneau from SRHD and Jan Steinbach from NETCHD will share representation at the Communication Network State meetings for 2016.</p>
Review of State Minutes	<ul style="list-style-type: none"> • County of Residence is to enter the CHIF. This can become an issue when children are seen in NDC's and Maxillo Facial Review Boards and metabolic formula program. • Section 6000 of the manual will be revised. CwSHCN pays 85%. Some items approved this last year were, Music Therapy, baby weight scales and a breast pump. Be sure the item or services requested will benefit the medical condition covered and denied by Medicaid.

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	<ul style="list-style-type: none"> • Reviewed the purpose of the CTF and how to access the dollars. Also discussed the advantage to having one pot versus allocation to each LHJ. The dollars are still accessible to all LHJs. We can spend on medically related summer camps and other items as discussed with Ellen. • State is working on a cross walk for the change from ICD-9 to ICD-10. • Foster Children will have a single state wide plan as of January 1, 2016. The bid has been awarded to Coordinated Care of Washington. This will help with continuity of care and reduce gaps in services for Children in Foster care • Coordinated Care Health Plan has a texting program and a healthy kids club for 13 to 17 year olds. They can get a prize for getting their well child check-up. The plan pays for car seats for babies and breast pumps. They ask mom's to fill out a notice of pregnancy so they can pull all the high risk into case management. Start Smart for Baby. The goal is to decrease the need for NICU and decrease negative outcomes. Coordinate Care is in all our counties except, Ferry and Pend Oreille. They are working on getting accepted by the health care system in those counties. • WISE wraparound with intensive services information was given and should be in the handouts from state minutes. This is a new approach to helping youth with mental health challenges in their communities. • Planning for a Fall Regional meeting to be in Spokane or Moses Lake. Work groups will be formed for our focus of work. • OSPI report biggest reason for dropouts is health. OSPI working with DOH on vaccination issues. School based telehealth services for children on IEP's. HCA making changes so schools can bill. SNOW is working with on how to expand billing Medicaid for school-based nursing services.
Roundtable Adams	<ul style="list-style-type: none"> • Medical Home Team Meeting was held on October 28th. In addition to the FRC's with 0-3, CSHCN and providers, membership also includes the Parents as Teachers grant parent educators who serve approximately 100 clients and use the ASQ in their home visitation. Two new providers were invited and one attended this meeting. • The medical home honorarium was spent and books and developmental toys were purchased. The medical home team will decide what they want to do with the 2015-16 honorarium. • The child health note on Autism, New DSM-5 definition was sent to providers in October. • The Achieve Center opened a site in Moses Lake and provides speech therapy there. They have two bi-lingual therapists and accept Provider One. It is a great addition of another therapy option for clients in our area. • ACHD has a new WIC certifier that is assisting a lot of the Spanish language families with SMS (transportation) requests. She is doing a great job and we are considering sending her through the DOH health care worker training in the spring to increase her assistance to the CSHCN coordinator. • Callie is retiring at the end of the year and Leslie Spencer will be the new CSHCN coordinator. She attended the meeting today with Callie.

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Asotin	<p>After August 31, Asotin County will no longer be administering vaccine to children and adults. We are transitioning the program to Tri State Memorial Hospital and will refer callers there. We will also not be administering flu vaccine this year. Our numbers have dropped in recent years due to the availability of it in other places. We will retain oversight of the immunization program and be a resource to the providers.</p> <p>Our foster care system is struggling with the number of children in care and there are no longer enough homes in Asotin County available to house them. Some children are being sent to other areas and families are occasionally split and sent to different homes. The caseworkers are asking foster care parents who are no longer providing care, to renew their license and help with the load. There are some who have reactivated their license to help with the crisis. They are also recruiting new families to provide care.</p> <p>Our WIC caseload continues to drop a few clients each month. We are really pushing the outreach activities to try to increase our numbers. We moved to Asotin, from Clarkston last spring and it is difficult for some clients to travel the 6 miles, but others say they are working a couple of jobs and just cannot get away to come to their appointments. We have talked about a satellite clinic in Clarkston and/or alternative hours, but no changes have been made to date.</p> <p>In addition to WIC, the only client services we will be doing is pregnancy testing. We gave up the ECP distribution when our supply ran out and we were no longer able to obtain them.</p> <p>I was the last person in our office who had a child passenger safety seat technician certification, and when it expired in July, I did not renew it. On a more positive note, we are fully staffed and our new people are learning their duties and becoming an integral part of the health district.</p>
Columbia	<p>Columbia County Public Health no longer has the Birth to Three Program contract. Our FRC is now employed by ESD123 and not only serves children in Columbia County but covers a portion of Walla Walla County. Her office is in Dayton and we have been able to continue our collaboration. Our second RN resigned in August and our new hire, began September 21. She is primarily working at the school, trying to get up to speed three weeks after the start of the school year. Our LHJ contracts with the school for two days per week and the other two will be spent in our office once she gets acclimated. When she gets up to speed, she will be taking over the CSHCN coordinator position.</p>
Garfield	<p>97% vaccinated and 3% exempt vaccines for K-12 grades. This percentage is consistent. The school has taken over the Preschool which allows us more involvement with the students and parents for vaccines, MCH needs, etc. We are done with heights and weights, vision screening and HIV/puberty classes for 5th and 6th grades. We are seeing more kids with needs starting school and have had more interaction with them to help problem solve.</p>

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Lincoln	<ol style="list-style-type: none"> 1. I am retiring Dec. 31st and Jolene Erickson, PHN, jerickson@co.lincoln.wa.us will be doing my programs. Her phone number is 509-725-9213 ex 27. 2. The ESD 101 has taken on the Birth to Three contract for Lincoln County, they have hired a person, Deanna Wagner to be the FRC and she will be housed at our office 1 ½ days a week, Usually Wed. afternoon and all day Thurs. but this will change as needed. 3. I have met again with our local providers to talk about UDS and introduced them to PEDs test and talked about ACEs. 4. Met with our local ICC group and introduced them to the new FRC. Talked about Aces and UDS.
Spokane	<p><u>Total CHIF</u> # was 333 in Spokane county for the last quarter(4-1-15 to 6-30-15)</p> <p><u>Trends</u> that we are seeing are with the providers that the ITN contracts with for services, they have had significant issues with billings lately. They bill for a therapy, it gets denied, they rebill...they try to see if it is a coding thing....they make TCs to the insurers....even for preauthorized services, the insurers are denying claims....so I recently contacted Ellen Silverman at DOH and have explained what we are seeing in Spokane. We have given her the contact information for the folks that have been dealing with billing issues with each of the providers that I have been aware of having issues and Ellen is working with each of the offices individually. We have talked about how this may be something that we need to monitor at the monthly Early Intervention meetings and then f/u with DOH, if there begins to be a cluster of issues again, as some of the providers have shared that this is definitely an ebb and flow issue.</p> <p>I get a large # of calls from families wanting to have their child diagnosed with Autism or looking for services for their child with Autism. The families are frustrated with the long wait times to get in for evaluation.</p> <p>There has reportedly been a very large # of babies in the NICUs here in town, so those children will be discharged and may be in need of ongoing services.</p> <p><u>Conference</u> – the Young Child Expo and Conference is coming to Spokane September 30 – October 2. The conference will provide early childhood professionals and parents with the latest info about early childhood development services, resources, and product to help all children reach their full potential. It will include information for typically developing children and well as those with special needs, and they emphasized that included Autism. (212-787-9700, ext. 333)</p> <p><u>ACEs Toolkit</u> – A group of Public Health Nurses has been working on an ACES toolkit to be ready to present at the Young Child Expo Conference. I pulled the Introduction for the toolkit and here is the ACEs flyer that we developed in Spokane that is being used across the country.</p> <p>I also shared the 1-2-3 Care Poster that can help child care providers, parents, foster parents be more trauma sensitive.</p>

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Guest Speaker	<p>We had the pleasure of a video conference with Christy Polking and Ellen Silverman.</p> <p>The CwSHCN data base was explained and how the data is shared and utilized. Christy told us the program shares the CHIF data with the Health Care Authority. Our data goes through a HCA match with managed care plan.</p> <p>In the PRISM tool, RDA developed a flag in PRISM to alert plans to so better care co-ordination can be done.</p> <p>NDC's must send a completed CHIF to the LHJ the child lives in. If the CHIF is incomplete, return to the NDC with a request to complete the information.</p> <p>We were reminded to collect the provider one number and put the number in the Soc. Sec. tab.</p> <p>ICD-10 code books have been sent to each LHJ. We will need to manually enter the ICD-10 code in the ICD-9 field as the program will not automatically do that yet. The system redesign is still in the planning phase. Hopefully up and running in 2016.</p> <p>At the LHJ level we should renew the CHIF every 12 months.</p> <p>We discussed the plan to do away with allocation allotment and keep CTF. This step is less work for the State there by reducing program costs and keeping treatment dollars. Remember to be creative in assisting families with health needs Medicaid does not cover to utilize the treatment funds for the child.</p>
Future Meeting Dates	<p>January 14,2016</p> <p>Teleconference is an option.</p> <p>Meeting will start at 8:30.</p>
Minutes taken by:	<p>Jan Steinbach, RNC</p>