



Meeting Minutes

Targeted Case Management – Children with Severe Emotional Disturbances

Wednesday 9/25

9:00 – 2:00

Meeting called by Meghan Peel, Children's Mental Health Bureau Chief

Attendees: Meghan Peel, Rebecca de Camara, Renae Huffman, Mary Windecker, Phil Quinn, Jake Henderson, Jeff Folsom, Will Tedrow, Nicole Tucker, Kim Chouinard, Barbara Cowan

Location 111 N. Sanders, Room 107

9:00 – 9:30

Welcome / Goals / TCM Purpose Statement

Group provided feedback, what is going well in meetings, and what items we need to focus more on.

Team agreed the TCM Purpose Statement needs to be revised to reflect family focus.

Action item: Kim will update the purpose statement and present the recommended language during the next workgroup.

9:30 – 10:00

Family and Youth Voice

Will Tedrow presented results of a survey YDI completed, to solicit youth and family feedback on the most important aspects of case management. A few common themes: Individualized treatment is appreciated. Access to speak with someone they can relate to is important. Quality of services is important to caregivers. Case Plan development is important to the youth. A lot of discussion regarding continuity of care, case management being the consistent link. Discussion about placement, and how cumbersome it can be, and the desire for the process to be effective yet simple.

Action item: all providers will solicit feedback from a sample of youth and families currently enrolled with their organization. All workgroup members will reach out to 3-4 stakeholders including: CFSD worker, juvenile probation officer, and schools (administrators, counselors, and teachers). All feedback will be submitted to Renae.

10:00 – 10:30

Eligibility

Meghan presented the general structure section of the Targeted Case Management Program Design Document, which outlines the populations to be served. Group agreed as presented, with the recommendation to add in emphasis on family.

Action item: Barb and Nicole will review the SED section of the current Children's Mental Health Bureau Medicaid Manual to ensure it is aligned with family focus. Barb and Nicole will present any recommended updates during the next workgroup meeting.

10:30 – 11:30

Assessment

Clinical: All workgroup members agreed they are satisfied with the way this requirement is outlined in the current Mental Health Center administrative rules, no changes to this section recommended.

Functional / Acuity: Reviewed options. The team agrees a functional/acuity assessment will be beneficial. The tool must be simple, cost effective, include social determinations of health, and doesn't minimize clinical judgement. The team selected a few assessment tools to review further.

Action items:

Jake, Jeff, and Will, will review the CASII, and report back to the group including potential budget impact. They will also review the ECASII, ASQ, and DECA for youth under 6.

Meghan and Mary will reach out to Bob W. and Sydney to present on the DLA20.

Meghan will determine how AMDD is funding IOP training, and the anticipated cost.

11:30 – 12:00

Lunch

12:00 – 1:30

Tiers

Overview / Pros & Cons of tiers were discussed. Pros: Creates consistency in language. Challenges: not as adaptable, administrative burden, share risk. Wishlist: must be easy to move between tiers.

Jeff presented TCM model.

Billing options discussed: FFS, PMPM, Daily Rate, Weekly Rate, Fee for services with a cap.

Discussed the possibility of capping by services type (i.e. monitoring, assessment)

Minnesota rule discussed: if you haven't had face to face contact in three months, then the youth will auto discharge.

Nicole presented her model; the tiers are based on TCM activities that are being completed.

Daily tiers were discussed:

1. Monitoring (level 2), increased reliance on natural supports
2. Engagement/referrals (levels 1 &3)
3. "Our families" (level 4)

Action item: Everyone take reimbursement back to their organizations, so we can continue the discussion during the next workgroup meeting.

1:30 – 2:00

Wrap Up / Action Items / Next Meeting

Next meeting will be from 9:00-3:00

Assessment presentations and make a recommendation

Continue the methodology and process measurements discussions