

# INTERAGENCY COORDINATING COUNCIL (ICC)

## MEETING MINUTES

Wednesday, August 21, 2013

9:00 AM to 3:30 PM

Department of Health Services  
1 W. Wilson Street, Room B370  
Madison, WI 53707-7851

**Council Members:** Cindy Flauger (chair), Laurice Lincoln (vice-chair), William Barreau, Vicki Deer (phone), Terri Enters, Sharon Fleischfresser, Jenny Giles, Linda Huffer, Carolyn Parkinson, Laura Saterfield, Terri Vincent, Julie Walsh

**DHS Staff:** Kate Johnson; Susan Larsen, Dana Romary, Beth Wroblewski

**Public Attendance:** Michelle Davies, Carol Noddings Eichinger, Jill Haglund, Linda Tuchman, Elizabeth Wahl

### 1. Welcome and Introductions

- Chair Cindy Flauger opened the meeting and greeted visitors. Attendees introduced themselves, giving a short synopsis of their work and its relation to the Birth to 3 Program.

### 2. Public Comments

None

### 3. Member Updates

- Linda Huffer announced her retirement from the Department of Health Services and the Council effective October 2013.
- The Order of Business (Agenda) was changed to accommodate participating attendees who had to leave.
- **Motion:** Linda H. moved to accept the agenda; Laura S. seconded. Motion carried unanimously.
- **Motion:** William B. made a motion to approve and accept the April 26, 2013, meeting minutes; seconded by Sharon F. After correction noted, Council voted to approve the minutes; motion carried.

### 4. Department Updates

- Letter from Melody Musgrove, Office of Special Education (OSEP) Director, was reviewed; Wisconsin is in 'needs assessment' status again.
  - Gave synopsis of each Indicator and explained time frame county has to correct 'non-compliance' finding.
  - Questions on monitoring, other states approaches to OSEP requirements, and clarification of verification process were discussed. Laurice L. lauded the progress of the Birth to 3 county agencies.
- **Wisconsin Birth to 3 Program Handout**

- Terri E. discussed the rationale, end-of-fiscal year, verifying data corrections, 12-month findings, guidance from OSEP, and January to March representing yearly happenings.
  - Can/should there be a corrective action plan (CAP) on files examined? Should the policy be revised? Local education agencies (LEAs) are not appearing at conference meetings. LEAs are not being penalized, but DHS is, which leads to findings of non-compliance (FNC) with Indicator 8.
  - **Suggestion** to work with transition planning team to make LEAs aware of consequences to DHS Birth to 3 Program if LEA doesn't comply with requirements. This directive should come from the state level.
  - Terri V. asked if information entered correctly in system, but a typo threw off 45-day timeline, should targeted correction be considered 'Margin of Error?' This led to discussions and the outcome(s) will be added to the APR. Apply, re-assess, then refine process.
- Kate J. reviewed the distribution of the ECO surveys (Indicators 4a, 4b, and 4c). The return rate for the surveys from parents is about 34 percent; discussion ensued on how to garner better outcomes and if parents really understand their rights. Re-setting the survey targets is a possibility.
- Sue L. discussed the submission of the Birth to 3 Home and Community-Based Services (HCBS) 1915(c) Medicaid Waiver application, entitled Wisconsin's Infant, Toddler and Family Medicaid Waiver
  - This Medicaid Waiver is strongly modeled after the Pennsylvania's approved HCBS Medicaid Waiver for this target population. DHS is requesting the waiver's effective date begin January 1, 2014; using Birth to 3 Program's standard eligibility requirement of a 25 percent delay in one of the core areas.
  - Once the Department receives approval for the waiver from the Centers for Medicare and Medicaid Services (CMS), implementation and roll-out will be based on several factors, including the Third Party Administration claims process through Wisconsin Physicians Service, and the implementation of the Wisconsin Provider Index (WPI) system for qualified providers.
  - Additional children and providers are under this waiver's targeted case-management requirements; best practices (outside funding source); The Department will be launching a Birth to 3 Waiver user workgroup, WPS will participate in these workgroups; system changes to track children.
  - Discussed waiver requirements, such as breakdown of 'How to Bill' for team meetings, incident reporting; time-limited waiver with IFSP in place; can child transition to the Children's Long-Term Support (CLTS) Waiver after the Birth to 3 Waiver transition?
  - Follow-up discussion on how the Birth to 3 Program's 17 services may be impacted by the Waiver (like billing MA). The child's enrollment to the Birth to 3 Waiver is voluntary, so this funding stream is a joint decision of the parent and county.

## 5. Tribute to Jill Haglund

- A formal recognition of Jill's 14 years of service to the ICC was delivered by Beth Wroblewski. Beth presented a plaque and recounted milestones in which Jill helped shape Wisconsin's Birth to 3 Program. Jill shared the history of the development of the

Birth to 3 Program from high-level state officers to the early intervention program that it is today. Several members gave tribute to Jill's involvement in the Birth to 3 Program, and Linda Tuchman brought photos of early ICC members

## 6. OSEP Leadership Event

- Terri E. highlighted her first-time experience at this conference by discussing Implementation Plan, stakeholders, Primary Coach Approach teaming, Sequestration, and funding depletion, funds don't match work requirement across the country. Retention of Part C Coordinators is a problem across the nation; the trend is a two-year turn over for Part C Coordinators. OSEP is implementing a new initiative through targeted technical support, to help retain Part C Coordinators.
- Laurice appreciated the energy and discussed guidance for pediatricians not familiar with Part C early intervention services, PCATT training points taken from other states that will make us stronger.
- Kate J. discussed Birth to 3 Program data systems, maintenance of effort (MOE), and how the Waiver may have an impact. Terri V. wondered if uniformity would benefit discussion or if demographic difference would be feasible. Jenny G. expounded on commitment and compassion.
- Cindy F. discussed evidence-based practices and what she gained from different state ICC and Part C coordinators. Some states are blending their Early Childhood Advisory Councils (ECAC) and ICCs.
- **Suggestion:** Introduce new members to ICC committees, find out what they would like to do, which committee/workgroup to serve. All workgroups have a clear charge, and be mindful of the work to counties.

## 7. ICC Steering Committee Makeup

- Cindy Flauger, Laurice Lincoln, Terri Vincent, Vicki Deer, Jenny Giles, and Terri Enters.
- Goal is to get parents vetted and parents/new members engaged, pending appointment by the Governor's Office. FACETS could help with this.
- **Motion:** Linda H. moved to follow recommendations of Steering Committee; Carolyn P. seconded; motion carried.
  - A recommendation for DHS staff to help each workgroup; other stakeholder groups report out; parent involvement not ready yet. **Suggestion:** Workgroups meet in the morning and discuss issues; followed by the ICC meeting in the afternoon. Steering Committee will review and research. Re-evaluate and recapture goal of building parent membership on the ICC, with parents actively involved in workgroups.
  - **Goal:** Parent on each workgroup (they don't have to be member of the ICC); Cindy appoint each chair; Steering Committee member on each group. Have **suggestions** ready for the November 2013 meeting.
  - Laurice L. constructing new-member packet.

## 8. Sound Beginnings

- Children with deaf/hard of hearing issues, tracking kids, referrals, data collections tracking system, WE-Trac System (duplicity needs modification—IT working on this).
- The Birth to 3 Program and Sound Beginnings have established an MOU. [Family Educational Rights and Privacy Act FERPA](#) and [Health Insurance Portability and](#)

Accountability Act (HIPAA) requirements allow states to define who may access information within an agency. Joint training to rectify duplication or 'twin to' name.

#### **9. Bureau of Long-Term Support/Children's Services Section Updates**

- Sue L. discussed the Bureau's plans to issue a quarterly reports on all programs administered by the Children's Services Section (program enrollment, disenrollment, wait lists, fair hearings, etc.) in late fall 2013.
- She has been discussing issues related to county service coordinator/case manager staff, and is proposing launching a web-based online training program for new staff, for policies and procedures, with complementary face-to-face training sessions for program values.
- The Department of Health Services (DHS) and Department of Children and Families (DCF) are diligently working to finalize the foster care medical home (Care4Kids) contract requirements.
  - The selected vendor is Children's Hospital of Wisconsin, Milwaukee. The initiative is scheduled for implementation in January 2014 for the following counties: Kenosha, Milwaukee, Ozaukee, Racine, Washington, and Waukesha
  - Care4Kids will provide foster care children with increased access, coordination, and integrated health care, with a focus on trauma informed care, and increased access to mental health and dental services.

#### **10. Next Meetings**

- Thursday, November 21, 2013: 9:00–3:00; TBD
- Wednesday, January 29, 2014: 9:00–3:00; TBD

#### **11. ICC Council Meeting Adjournment**

Meeting was adjourned at 3:32 PM