

Call to Order

This meeting is being held virtually due to the Coronavirus (COVID-19) concerns.

Meeting called to order by De Freedman. The date was April 27th, 2021 at 5:38 pm. The address of the meeting was Virtual, no physical address.

Welcome and Introductions

- Attendance in Person: None This meeting was virtual only due to COVID-19 concerns
- Attendance by Google Meets unless noted: **Diedra (De) Freedman, Pat Thundercloud (by Phone), Bernadine Henderson, Cynthia Macluskie (by Phone), Brad Doyle,**
- Absent: Julie Heineking, Pam Grady, Laurene Zemis
- Public in Attendance: None
- Other IOC members: **Bob Malloy** (DDD District North Chair)
- Arizona Department of Administration (ADOA): Larry Allen
- Healthcare Plan Liaison: Janet Holtz, (Mercy Care Liaison) Laurie Ganzermiller (UHC)
- DDD staff: Jeffrey Yamamoto, (DDD IOC Liaison), Leah Gibbs (OIFA Administrator),
 Ryk Scott (Quality Supervisor), Nicolette Fidel, (Deputy Assistant Director, Network) Eva
 Bighorse (DDD Tribal Liaison) Barb Picone (OIFA Manager) Michelle Pollard (NCI
 coordinator) Jocelyn Beard (DES Tribal Relations Manager), Delorah Grant (Quality
 Manager)
- The Committee, DDD staff, United Health Care and Mercy Care introduced themselves.

The IOC make up in attendance: **De Freedman** is a former Lawyer, **Pat Thundercloud** is a former Physician's Assistant, **Bernadine Henderson** is a former School Teacher and a current Foster Parent, **Cynthia Macluskie** is the Vice President of the Greater Autism Society of AZ. **Brad Doyle** is a Parent and Advocate. All these members have children who have or had services with DDD.

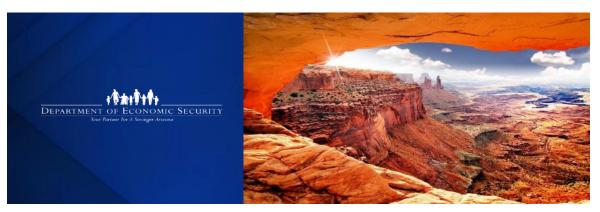
Call to Public

De Freedman: Called for public to announce themselves. **There was no public in attendance during this meeting.**

DDD Staff Updates

Jeffrey Yamamoto introduces **Nicolette Fidel** to update the committee. Nicolette started the updates with this PowerPoint presentation.





Arizona Provider Network Development Consultation

Provider Network Development Consultation







National Association of State Directors of Developmental Disabilities Services



Provider Network Development Consultation

Project Purpose:

Support DDD to improve <u>service models</u> and <u>contract design</u>, with stakeholder input, aligned with the Division's "True North"

"True North" means the DDD empowers Arizonans with developmental disabilities to lead self-directed, healthy, and meaningful lives

Provider Network Development Consultation

We conducted research and talked to stakeholders to recommend ideas for improving services and contracts We focused on:

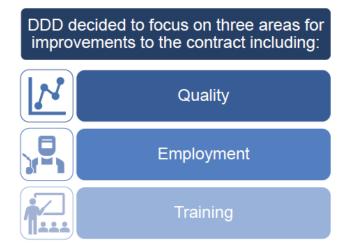
What would make services better?

What would make contracts or the process of becoming a vendor better?

What would support vendors to deliver the best possible services?



Provider Network Development Consultation



Some of the changes we recommend will be ongoing beyond when the new contract is implemented. No changes will be final until after the public comment period.

Provider Network Development Consultation

Proposed "New" Contract	Future
Quality Management Plan	Accreditation
Workforce Development Plan	Strengthening employment training
Quality Monitoring	for some employment services
Vendor Standards	Expanding DSP training requirements
Changing Service Specifications	
Focus on Employment Services	



Provider Network Development Consultation

Current Services

- Attendant Care
- Career Preparation Readiness
- Center-Based Employment
- Day Treatment and Training, Adult
- Day Treatment and Training, Child (After School)
- Day Treatment and Training, Child (Summer)
- Employment Support Aid
- Group Supported Employment
- Habilitation, Communication
- Habilitation, Community Protection and Treatment Hourly
- Habilitation, Consultation
- Habilitation, Early Childhood Autism Specialized

- Habilitation, Group Home
- Habilitation, Hourly Support
- Habilitation, Individually Designed Living Arrangement
- Habilitation, Music
- Habilitation, Nursing Supported Group Home
- Habilitation, Specialized Behavior: Service Not Being Solicited
- Habilitation, Vendor Supported Developmental Home (Child and Adult)
- Home Health Aid
- Homemaker
- Individual Supported Employment
- Nursing

- Occupational Therapy
- Person Center Planning Facilitation: Service Not Being Solicited
- Physical Therapy
- Respiratory Therapy
- Respite
- Room and Board, All Group Homes
- Room and Board, Vendor Support Developmental Homes (Child and Adult)
- Speech Therapy
- Support Coordination (Case Management): Service Not Being Solicited
- Transition to Employment
- Transportation

Provider Network Development Consultation

Service Changes

Removed:

- Support Coordination (Case Management)
- · Person Center Planning Facilitation
- Habilitation, Specialized Behavior
- Habilitation, Consultation
- Habilitation, Early Childhood Autism Specialized

Transitioned:

Day Treatment and Training, Child (After School) Day Treatment and Training, Child (Summer)

Day Treatment and Training, Child

Habilitation, Group Home

 Habilitation Group Home
 Habilitation Group Home, Enhanced Behavioral

Employment Support Aide

- Attendant Care
- Independent Supported Employment

Career Preparation and Readiness Transition to Employment

Pathways to Employment



Provider Network Development Consultation

Current Section 9 – Attachments, Certifications, Agreements, Plans

- · Section 9A Application and Award Agreement
- Section 9B Qualified Vendor Application and Directory System
- · Section 9C Certification Regarding Lobbying
- · Section 9D Debarment
- Section 9E Data-Sharing Request/Agreement View Sample
- · Section 9F Developmental Home Third Party Agreement
- Section 9G Request for Central Registry, Background Check
- Section 9H Business Plan
- · Section 9I Contingency Plan
- · Section 9J Business Associate Agreement
- Section 9K Utilization Data
- Section 9L Participation Boycott of Israel
- · Amendment #7 with Signature Page

Proposed "New" Section 7 – Attachments

Section 7A - Assurances

Section 7B - Business Plan

Section 7C - Contingency Plan

Section 7D - Developmental Home Subcontract

Provider Network Development Consultation

Join us in the public comment period

- During public comment, the contract will be posted for people with disabilities, families, vendors, and advocates to review and provide feedback.
- Expected to start in May 2021
- Will last for approximately 60 days
- Comments will be used to make changes and finalize the contract
- We're having meetings this month to discuss with different stakeholders



Provider Network Development Consultation

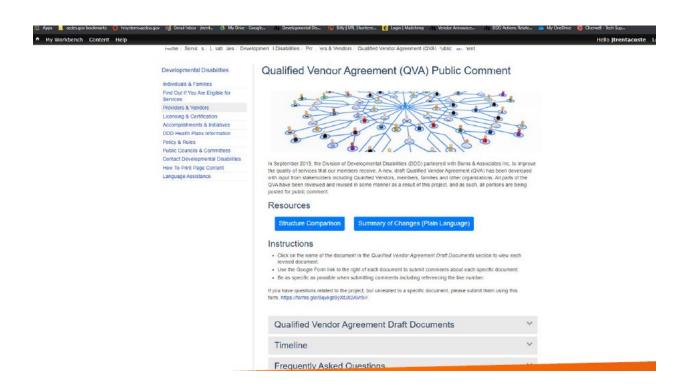
Application Submittal Checklist Section 1 - Notice of Request for Qualified Vendor Application Section 2 - Table of Contents Section 3 - Instructions to Applicants Section 4 - Background Section 5 - Services Requirements / Scope of Work Section 6 - Standard Terms & Conditions Section 7 - Service Specifications Section 8 - Arizona Geographic Map

Section 9 - Attachments, Certifications, Agreements, Plans

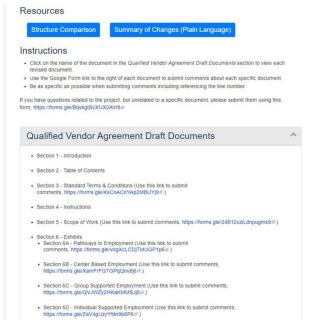
Section 0 - Cover Page
Section 1 – Introduction
Section 2 – Table of Contents
Section 3 – Standard Terms & Conditions
Section 4 - Instructions
Section 5 - Scope of Work
Section 6 – Exhibits

Proposed "New" Contract

Section 7 - Attachments







ECONOMIC SECURITY Division of Developmental Disabilities RFQVA Public Comment Submission Form - Section 6G Transportation The Attons Department of Economic Security (Department" or ADES)/Division of Developmental Disabilities (Window) or ToDio propose new or revisions to Section 60Transportation of the Causified vendor Agreement. Use this form to submit your comments regently these revisions. Written comments and opinions on the proposed policy will be accepted until 11:59 PM (Attonos Transportation) First Name * Your email Last Name *



Provider Network Development Consultation

Stay Involved!



De Freedman had several questions for Nicolette about Network and the PowerPoint presentation.

- 1. Are vendors being given a value-based purchasing incentive to stay in the service network? **Nicolette**: Yes, but it will not be added at the contract level but in the policy level. If the vendor makes policy metrics, they will be eligible.
- 2. Are there crossroads between old and new contracts for vendors still include policy and procedure manuals, AMPMs, in the DDD website?
 - **Nicolette:** No, it doesn't. There has been a change in the strategy in how DDD references policy.
- 3. Is there a contract expiration for the vendor? And is there a clause for qualifications for each annual renewal.
 - **Nicolette**: The contracts are intended to be a 5-year contract but will have annual renewals. Yes, there will be qualifications for annual renewals.
- 4. Does the "Pathway to Employment" program allow for reasonable accommodations?

 Nicolette: This is expected in every contract agreement with any vendors. She said that there have been changes made in the Policy for Public Comment specific to address it.
- 5. Section #9, will the vendors have a list of what is needed to commit to the contract and where to gather anything required?

Nicolette: There will be a list available for any agencies for their requirements.

Leah Gibbs from DDD OIFA updated the committee on COVID-19 and DDD.

- 45,040 members being served by DDD
- 2,801 members tested positive for COVID-19



- 74 Member deaths attributed to COVID-19, No deaths since beginning of March
- Tracking weekly. January was high of positivity, now single digits
- Support Coordinators are making contact and informing the members on all the flexible COVID-19 benefits which are available for them
- Over half of members are vaccinated. Still encourage members and families for vaccinations

Leah Gibbs also mentioned that Betty John has retired from DDD and is now working for Mercy Care.

De Freedman asked about the District Program manager- **Leah Gibbs** responded that Barbara Crawford has been moved to the acting Administrator for the Support Coordination and Dalman Dore is the interim District Program Manager for District West. DPM Dore has been invited to the DW IOC meetings.

Eva Bighorse presented her PowerPoint presentation on DDD interactions with Tribal nations.





Agenda

- · Review of Tribal Nation information
- How is DDD working to meet the health needs of DDD-AIHP Members as their health plan?
- What will DDD-AIHP Care Management look like post integration with AHCCCS in 2022?
- What tribal supports are available to tribal DDD members?
- Is there an equivalent Tribal APS/DCS investigation done when incidents of neglect or abuse are reported? Do they report any results to the state?
- Are there tribal congregate residences (group homes) for DDD members on any reservations?

Federally Recognized Tribes

574 Federally recognized "tribes" in US

• Some call themselves: tribes, nations, bands, pueblos, communities, or native villages

The federally recognized tribes are located in 35 states

22 are in Arizona

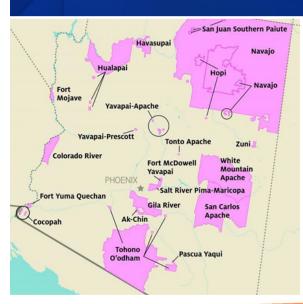
Note:

Approximately 229 of these ethnically, culturally, and linguistically diverse nations are in Alaska

Source: http://www.ncai.org/about-tribes



22 Federally Recognized Tribes in Arizona



There are over 300,000 people located throughout the State of Arizona who are American Indian/Alaska Native

They represent approximately 4.5% of Arizona's Population

Of the more than 45,000 people served by DDD, approximately 2,000 have self-identified as American Indian/Alaska Native

Tribal Sovereignty

What does tribal sovereignty mean for tribal nations?

- American Indians are a distinct class of citizen because they have a political and legal relationship with the United States¹
- U.S. Constitution, Article VI, Clause 2
 According to the U.S. Constitution, Indian Treaty law trumps federal statute because it is the supreme Law of the Land²

¹ The State of Indian Country Arizona, 2013

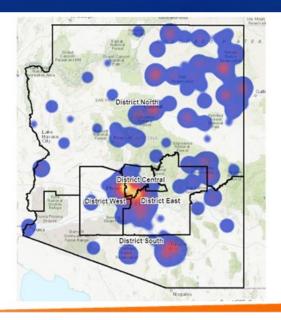
² https://constitution.congress.gov/browse/article-6/clause-2/



Tribal Governments within Arizona



DDD Tribal members map by District





Tribal Health Care Options

- Intergovernmental Agreements: Case Management with the Navajo Nation
- Indian Health Service
- 638 Facilities
- Urban Indian Health Programs
- Tribal Regional Behavioral Health Authorities

DDD-American Indian Health Plan

Target implementation is April 1, 2022

The Communication Plan has been developed in partnership with AHCCCS which includes opportunities to receive feedback from the Tribes

- Department of Economic Security began discussing during June 25, 2020 Tribal Consultation
- AHCCCS began discussing during July 7, 2020 Tribal Consultation

GOAL:

Improve care coordination and increase system transparency for members and providers



Meeting the health needs of DDD-AIHP members

Future of DDD-AIHP:

- Challenges with continued administration of the program in its current form for the long-term future
- DDD's strengths are Case Management and Long-Term Services and Supports
- Challenges with delivering physical and behavioral health services through a Fee for Service system
- Benefit to the member to identify a system that better meets their need
- AHCCCS expertise w/ Fee for Service and Claims
- DDD began collaboration w/ AHCCCS to determine long-term solution that is in the best interest of DDD AIHP members and families

DDD-AIHP Care Management

Current

- Internal referral process through the Support Coordinator
- District Nurses for Physical Health needs
- Complex Care Specialists and Behavioral Health Advocates for Behavioral Health needs

Future

- DDD and AHCCCS are working together to identify policies for care management
- The current plan is to develop care management policies in alignment with the current DDD contracted Health Plans
- If an AIHP member has complex care needs, the hospital social worker will help the member connect to appropriate resources while hospitalized and for discharge planning



Tribal Consultation & Tribal Liaison

Consultation and Cooperation with Arizona Tribes

Division of Developmental Disabilities Tribal Informational Forums

DDD Tribal Liaison

- · Participates in workgroups and community events
- · Educates tribal entities on DDD eligibility, services, and policies
- · Collaborate with DDD staff to resolve any tribal concerns

Division Supports available to tribal DDD members

Division Support	Description	Contact	
DDD-AIHP	Fee <u>For</u> Service Program that would allow members to use any AHCCCS registered provider. May require prior authorization.	See page 30, DDD ALTCS Member Handbook	
Tribal Informational Forums	Open to members and providers. Takes place every spring & fall. Next forums are September 7 & 9, 2021 from 10am-11am	DES Office of Tribal Relations Calendar website here: bit.ly/QTRCalendar	
DDD Tribal Relations Website	Information for Members, Providers, & FAQs	Website here: bit.ly/DDDTribalRelations	
Tribal Liaison	Tribal reach-in services	Eva Bighorse, ebighorse@azdes.gov	
Tribal Health Coordinator	DDD American Indian/Alaska Native member coordinator	Vacant.	
Tribal Liaison Nurse	RN dedicated to tribal member services	Vacant. Position open to applicants.	



APS & DCS incidents with DDD Tribal members



- These cases depend largely on where the member lives on or off tribal land
- In some situations, the Tribe takes the lead. In others, it's the state.
- Tribal Liaison coordinates with the appropriate Tribal Social Service team or programs



DDD Group Homes on tribal land

DDD monitors all Division contracted group homes. See https://ddd.azdes.gov/Organization/DDD/VendorProfile/Profile/

District West - 2 (Gila River)

District East - 24

District South - 9

District Central - 0

District North (Navajo & Hopi) - 27

For a total of 62



Who to contact?

- Support Coordinator, primary contact
- CSC Customer Service

General Inquiries and Grievances

1-844-770-9500 option 1

DDDCustomerServiceCenter@azdes.gov

Tribal Liaison:

Tribal Ombudsman

Eva Bighorse, ebighorse@azdes.gov

DDD LTC eligible members:

Tribal Health Coordinator (vacant)

Tribal Nurse Liaison (vacant)



UnitedHealthcare Community Plan

Shawn Sellers, Tribal Liaison, shawn_sellers@uhc.com

Diane Weaselboy, RN Tribal Coordinator, diana weaselboy@uhc.com

MercyCare

Betty John, Tribal Liaison, JohnB2@MercyCareAz.org

DDD Tribal Relations website: https://bit.ly/DDDTribalRelations



De Freedman had some questions for Eva Bighorse during her the PowerPoint presentation.

- How many DDD Tribal affiliated members does District West have?
 Eva: There are 215 members who identify with a tribe are being served by District West.
- 2. What are the tribal nations are being served by District West?
 Eva: There are many tribes identified by those 215 members in District West, including Gila,
 Colorado River, Salt River, Navajo, Tohono O'odham, etc. So, there are a multitude of different tribes and each different in its relationship with DDD and services they choose.
- 3. Is it Federal Law that a "Fee for Service" is the only way for services to be paid?

 Jocelyn: Long term members have the ability to use both the AIHP and the managed health care plans to garner services for their needs.
- Are there specialized Support coordinators for tribal members?
 Eva: Not at this time, except for the Navajo Nation does have a specialized unit for their members
- 5. Is there a good communication relationship with the DDD Tribal liaison and the Integrated Health Plans?
 - **Eva:** If there is a specific need to communicate with the HP, each manage care plan has a tribal liaison as well as a DDD liaison to work with. She said she hasn't really had to reach out to them so far.
- 6. Is District West receiving those IRs from the two Group homes which reside on the Gila River reservation?

Leah: answered "yes" DDD does and it's part of their contract as a group home.

Ryk Scott asked for any questions from the members. **Bernadine Henderson** mention that if Quality could give follow up on the IR question which was responded that the incident is still under police investigation. Ryk said he would follow up with this IR.

ADOA Update

Larry Allen: Informed that there is no update from ADOA currently. (Larry had audio problems during this meeting and communicated this through the Chat)

Health Plans (HP) Updates

Janet Holtz (Mercy Care) informed the committee that there is an effort to bring the vaccine to the members' homes and to check with Mercy Care and DDD on available providers to this service. She also went over an update that Alterative and Augmented Communications devices that the transition is going well and that they are speeding up the approval process.

Laurie Ganzermiller (UHC) was unable to stay on the line. She did not update.



Discussion on documents on Behavior Plans

Bernadine Henderson asked Mary DeCarlo and the Medical Director be invited to the next meeting in May. To discuss the keeping of the Planning Document part of the Behavior Plans. Also, to invite Amy Rose and Dalman Dore.

Discussion and Voting on Requests for DDD

There were 4 request/votes that were made during the meeting at various time and for various topics and those requests and their voting is listed below.

De Freedman proposed that the committee make motions and vote on the following items throughout the meeting.

1) **Bernadine Henderson:** Motioned that the All of the 2020 IR's be archived leaving only the Jan / Feb open IR's left.

Brad Doyle: Seconded the motion

The Motion Passes with all present members voting "Aye" and No "Nay" votes

2) Bernadine Henderson: Motioned that Mary DeCarlo and the Medical Director be invited to the next meeting in May. To discuss the keeping of the Planning Document part of the Behavior Plans. Also, to invite Amy Rose and Dalman Dore.

Pat Thundercloud: Seconded the motion

The Motion Passes with all present members voting "Aye" and No "Nay" votes

3) **Bernadine Henderson:** Motioned that DDD reports on Group home modeling be released to the committee

Brad Doyle: Seconded the motion.

The Motion Passes with all present members voting "Aye" and No "Nay" votes

4) Brad Doyle: Motioned that the DDD District West IOC does not meet in June and July of 2021 due to summer vacations and unavailable members.

Cynthia Macluskie: Seconded the motion

The Motion Passes with all present members voting "Aye" and No "Nay" votes



DDD IOC Liaison Updates

Jeffrey Yamamoto began by informing the committee that the February IRs are all loaded to each District and available to review. There are 3 new redactors hired to catch up the IRs so that the committees can have access to the most recent occurrences to the IRs. Ideally within 2 weeks of the incident.

Discussion of Membership for the IOC

Jeffrey Yamamoto: Still making recruitment efforts for District West and all Districts. Leah Gibbs also said she has been including requests for IOC volunteers in the OIFA newsletter to all members.

Discussion of Incident Reports (IR) & Behavior Plans (BP)

Jeffrey Yamamoto: There was no other questions than the follow up with Quality on Bernadine's question on an ongoing investigation.

The Feb IRs for the Committee members have been loaded into the Shared Drive. The reported IRs are listed below.

February 2021

Туре	Open	Closed
Accidental Injury	6	56
Consumer Missing	2	5
Deaths	1	11
Emergency Measures	0	25
Human Rights	1	0
Legal	2	17
Medication Errors	7	58
Neglect	21	21
Other Abuse	0	4
Other Behavior	15	256
Other Hospitalization, Unknown injury	26	272
Physical Abuse	8	7
Property Damage	0	2
Suicide	0	3
TOTALS	89	737



The IRs will be reviewed by the committee members.

Number of Questions for QIM: members of the committee will comment on incident reports directly and the liaison will send to QIM.

All PRC meetings are being attended by Bernadine Henderson and Pat Thundercloud.

Number of Behavior Plans turned in by IOC Members: 0

The Program Review Committee (PRC): None.

Adjournment

De Freedman adjourned the meeting at 7:35 pm

The next District West IOC meeting will be held on Tuesday May 25th, 2021 at 5:30 pm. Will be virtual meeting should COVID-19 concerns still be in effect.