



**Division of Developmental Disabilities (DDD)
District Central Independent Oversight Committee
(IOC) Public Meeting Minutes Summary**

Monday, Oct 24, 2022 – 10:00 AM to 12:00 PM

Call to Order

Meeting called to order by Committee Chairperson, **Linda Mecham**. The date is Oct 24, 2022, at 10:02 AM. **The meeting took place Virtually due to the Public Health Emergency still in place.** Physical location when meetings resume in person may be at 4400 N Central Ave, Ste (to be determined) Phoenix, AZ 85012.

Welcome and Introductions

Attendance Virtually:

- **Linda Mecham**
- **Sherry Wilhelmi**
- **Eva Hamant**
- **Carol McNulty**
- **Carolyn Willmer**
- **Lisa Ehlenberger**

Attendance by Phone:

- **Eduarda Yates (phone)- 05**
- **Mandy Herman (phone)-15**
- **Debbie Stapley (phone)-22**

Absent:

- **Tina Buettner**
- **Andrea Potosky**
- **Michael Sanderfer**

Public in Attendance:

- **Mr. Lionel Degado** (joined by phone after Call to the Public)

Health Plans:

- **Dawn McReynolds** (UnitedHealthcare)
- **Vera Kramarchuk** (Mercy Care) on Phone

ADOA:

- **Larry Allen**



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DDD:

- **Dr. Susan Arnold** (DDD Behavioral Health Director)
- **Leah Gibbs** (DDD OIFA Administrator)
- **Jeffrey Yamamoto** (DDD IOC Liaison)
- **Mary DeCarlo** (DDD PRC manager)
- **Patricia Sandino** (DDD District Central PRC Chairperson)
- **James Maio** (DDD District Central Quality Improvement Manager)
- **Joan McQuade** (DDD Chief Advocate)
- **Michelle Rademacher** (DDD IOC Liaison)

Call to Public

Linda Mecham asked for the call to the public. At the time, no public was present.

Dr. Arnold: DDD Behavioral Health (Linda)

Susanne Arnold stated she has been on the 988 committee. She provided some information from the AHCCCS website azahcccs.gov/behavioralhealth/988. She suggested reviewing the FAQ pages. 988 is an addition to the local (Regional Behavioral Health Authority) RBHA crisis lines. The RBHA lines are still active as our local crisis lines. The 988 is easy to remember for individuals experiencing a crisis. This has been added without anything taken away. The RBHA is responsible for the first Emergency 24hrs of treatment for those with AHCCCS. AHCCCS MCO then take over. Nothing has been changed, just 988 added. Solari has been identified as the call center for the RBHA crisis numbers. When DDD would get the reports in the past, the notification would come from different places. Now with Solari, it is easier to track due to the information coming from Solari and La Frontera have been contracted for the national 988 lines. Email is sent to DDD about any of our members who have called into the crisis line. The information is sent to the SC. Monthly the information is sent to DPM on members who have had multiple calls to the crisis lines. This way the SC knows right away and Division leadership knows of members that have made multiple calls. The question was given to her that did the 988 affect the other crisis calls. The answer was that both the 988 and the RBHA local numbers have been increasing in volume. One important thing people should know is that 988 does not geolocate. If someone has a cell phone number from another state using 988, then the caller would be routed to the phone number's state.

Eva Hamant asked how it works with the city of Tempe when people called 911 with mental health issues, starting Oct. 1. **Susanne Arnold** stated 911 is a completely different system and some of the calls are being diverted over to the crisis lines. Susanne stated in her discussions with AHCCCS 911 is not reporting into the crisis system of those calls that are transferred. Susanne stated in the last 988 meeting, a 911 diversion report was tracked, recorded, and provided visually to the IOCs in the



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meeting. Susanne also stated that representatives from AHCCCS could be present in the future to provide more information. **Jeffrey Yamamoto** informed the IOC that AHCCCS will be making a 9-8-8 presentation during their next meeting. The presenter will be C.J. Loiselle.

Linda Mecham asked if **Susanne Arnold** knew why there may be an increase in both numbers. **Susanne Arnold** stated that since this is the first draw of data this was really more setting the benchmark to the systems. Further reporting may indicate where or why the increase.

Sherry Wilmelmi shared that the use of the RBHA crisis numbers are free of charge to all of the Arizona citizens. She shared that this is not commonly known by individuals that use of the crisis line is a free service.

Discussions related to Medical Protocols and Histories.etc. (Carolyn)

Carolyn Wilmer stated she reviews medication incident reports and has questions. She said she sees comments about members receiving COVID boosters. She asked about the DDD protocol on making sure how the members receive their flu shots and COVID vaccines? **James Maio** stated that the division provides information and recommends the members receive the vaccinations but it is not forced on the members. Information is provided to the public in newsletters and provider publications. Carolyn asked due to PRC meetings. James stated there is a communicator system that goes out to group homes, family, and on the website. Eduarta asked about provider staff vaccinations. James stated DDD does not force anyone to be vaccinated.

Carolyn Wilmer also asked about seizure disorders specifically seizure plans in describing exactly what a member's seizure may look like. She wanted to know if a description on the person's seizure description is included in the plan. **Leah Gibbs** stated that as part of the person centered planning process the seizure description and protocol should be captured and written up as such.

Carolyn Wilmer asked about repeated refusals to take medications. She asked in terms of the issue which is causing the refusal and is there problem solving going on to encourage the member to take the medication in the future, e.g. reward system or finding the reason why member does not want to take the medication. **James Maio** shared the refusals are being tracked, entered into IMS. James stated the team would follow up with problem solving and coming up with a solution on a case by case basis. Carolyn stated the responses of the medication refusal incidents are not described but would be helpful.

Carolyn Wilmer asked about clients with head injuries, falling out of bed or bump on the head, and what happens as follow-up to those incidents. **James Maio** added the triage team of RNs review each incident report, look at the evaluation process, and determine if the appropriate medical intervention was performed.



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Update from Statewide meetings (Linda)

Linda Mecham stated that most of the updates from **Leah Gibbs** were what was on the Statewide updates. Article 9 is under its final go around with the Governor's Regulatory Review Council (GRRC) and will hopefully see it become law in December or January. **Leah Gibbs** and the liaison stated they would send out the first time they see any final version of Article 9.

Linda Mecham stated that **Jon Meyers** from the Developmental Disability Planning Council held a presentation over the Crisis Problems dealing with the ID/D population and referred to the report they had submitted.

Access to the planning council's report will be given out to the committee. Here is the link:

<https://addpc.az.gov/sites/default/files/Crisis%20Response%20IDD%20Final%20Report%20for%20Public%20Dissemination.pdf>

Crisis and 9-1-1 (Eva)

Eva Hamant stated the planning council on the crisis response report brought about questions with her. She spoke about DDD and the integration of behavioral health services left out crisis services. She stated when people go to RBHA and come out, they are supposed to have a follow-up within 72 hours. Eva stated per the report, there is no way to know if a follow-up occurred. She stated per the report there is no penalty if no follow-up occurs. Eva stated that per her reading of closed IRs, this impacts our members.

Leah Gibbs stated that AHCCCS runs the crisis system, but it is not part of DDD. Leah asked if **Larry Allen** could filter the IOC's questions through DDD.

Susanne Arnold asked if the IOC's are aware of (AHCCCS Medical Policy Manual) AMPM 590 where the Division has created some corresponding policies. DDD calls it the ADSS Medical policy 590 relating to the monitoring of the health provider. There is an oversight of health plans regarding follow-up from crisis services. The public comment information will be coming out to the IOC's soon. Susan Arnold provided the link to the AHCCCS policy

<https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/500/590.pdf>

Summary of items from PRC attendance (Linda)

Linda Mecham commented concerning concerns that have been raised in the Program Review Committee (PRC). She mentioned that the "History's" portion of the BP and PCSP are very short and not very informative. **Zane Garcia-Ramadan** confirmed that this is important to include in the BP and



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PCSP from the earlier Quarterly Statewide meeting. The Public will be able to address the form when AHCCCS put the document up for any public comments for its review time. This should happen in early 2023. “What works and Doesn’t Work” not being included also can be changed during the public comment time period. Linda commented that the Committee members performing duties on PRC are required to have Article-9 certification. She asked if the IOC would like to have re-certifications done at the next meeting. The IOC decided to try to do the certification via the free DDD volunteer program to get Article-9 certified. The liaison will send out the information to the IOC on the procedures to register for Article-9 certification.

Review, discussion and vote on Annual report (IOC)

Linda Mecham stated that she had finished the annual report and asked if the members had a chance to read the report. Members in attendance commented jointly that the report was well done and that the tribute to **Karen Van Epps** was very special. The committee commented on some minor spelling corrections and Linda stated that she had received the final numbers from the PRC and will add it.

Linda Mecham asked for a motion to accept the Annual Report with changes.

- **Sherry Wilhelmi** motioned to accept the Annual Report with changes.
- **Carol McNulty** seconded the motion
- **All the members present** (see Welcome and Introductions for attending members) **voted “aye” and there were no “nay” votes**

DDD Staff updates, Health Plans and ADOA

Leah Gibbs stated that HB-2113 for Down’s Syndrome as the fifth qualifying diagnosis, today is the last day for public comments. DDD will be moving forward and be live by the end of the month. DDD will have updated information on the webpage and also in the newsletters. The new qualifying diagnosis needs to have been manifested before the age 18 and members will need to meet the requirements of functional limitations.

Leah Gibbs informed the committee that HB-2560 is the legislation where DDD is partnering with Arizona Center for Disability Law) AZCDL in group home monitoring of complaints for complex care members. Pilot is scheduled to begin in Jan. 2023. Every year a summary report will be submitted to the legislatures. **Eva Hamant** asked if the IOCs can make a referral to who will be identified as a complex care member. **Leah Gibbs** stated she would have to take that back to the committee. **James Maio** stated that he believed they have already identified the 700ish complex care members. He stated the existing pool has been determined as well as how many group homes are



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involved. James stated this information was needed per the contract with AZ Centers for Disability Law. Leah shared it is a brand new process and the future would have more updates on this.

Leah Gibbs stated that DDD has successfully been kicking off the new billing system. Open Q&A sessions are still available for the vendors. Leah stated that DDD is monitoring daily any inquiries and concerns. Vendors are being paid but they are having line errors. Leah stated if any agency is having problems with payments that they need to complete the process and open an inquiry.

On ARPA funding, **Leah Gibbs** stated DDD is continuing to move forward on plans to roll out positive behavior training for providers and family members. Rolling out training for behavioral health agencies in how to work with IDD people. Public health emergency did get extended on Oct 13 for 90 days. DDD expects around mid November that the public health emergency will end in 60 days. Correspondence through newsletters, Support Coordination will be sent out to aid in the changes to service flexibilities.

Linda Mecham asked about the members' being over resource funds and risk of losing AHCCCS benefits due to the Public Health Emergency (PHE) flexibilities being lifted. **Leah Gibbs** stated that DDD is preparing for the change and time will be permitted for spenddowns that will not be wasteful of the funds. Leah also mentioned that the Support Coordinators with agreement from the Planning team for those members with DDD as payee, can start to help spend down the amounts up to \$499 for the members without direct supervisor approval. Linda stated this is a good thing due to the slowness of getting approvals from management at times.

Dawn McReynolds (United Healthcare) stated he had no updates.

Eva Hamant commented that the Total Complete Card from UHC has all of the benefits in one card for all of their programs.

Vera Kramarchuk (Mercy Care) stated that she had no updates.

Patricia Sandino stated the PRC volunteer calendar for available PRC meetings is available to volunteer. **Linda Mecham** and the committee filled the appointments for the month of October. Patricia said that all required have been attending.

James Maio stated that he had nothing for the public session.

Roundtable Reports from Members for next meeting

Sherry Wilhelmi had pain and educational issues



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Carolyn Willmer had Medication issues of refills and DTA and GH

Carol McNulty had none

Lisa Elhenberger had none

Linda Mecham did not have a comment.

Eva Hamant stated she had none

Mandy Herman stated she had none

Debbie Stapley no issues

Motion to go to Executive Session

Linda Mecham asked for a motion to go into Executive Session to discuss Eva Hamant IR questions.

- **Sherry Wilhelmi** motioned to go into Executive Session to discuss Eva Hamant IR questions.
- **Carol McNulty** seconded the motion
- **All the members present** (see Welcome and Introductions for attending members) **voted “aye”** and there were no “nay” votes

The IOC voted to go into executive session at **12:05 PM**.

Discussion and Review of Incident Reports and Behavioral Plans

For Sept IRs, the Committee members have been given **587** for July incident reports in the Shared Drive. This included **36** for open and **551** closed reports.

| Type | Open | Closed |
|--------------------|------|--------|
| Accidental Injury | 0 | 128 |
| Consumer missing | 1 | 6 |
| Deaths | 0 | 3 |
| Emergency Measures | 0 | 13 |
| Human Rights | 2 | 11 |
| Legal | 0 | 0 |



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| | | |
|-----------------------|-----------|------------|
| Medication Errors | 3 | 47 |
| Neglect | 15 | 16 |
| Other Abuse | 11 | 22 |
| Other-Behavior | 0 | 188 |
| Other -Injury unknown | 0 | 96 |
| Physical Abuse | 5 | 15 |
| Property Damage | 0 | 1 |
| Suicide | 0 | 5 |
| TOTALS | 36 | 551 |

The desired IRs will be divided by the chair and equally distributed amongst the members.

Questions for QIM: Members of the committee will send the incident reports questions to the DDD Liaisons **Jeffrey Yamamoto and Michelle Rademacher** to be forwarded to Quality for responses.

Motioned to Adjourned the Executive Session & Public Meeting

Sherry Wilhemi motion to adjourn the executive session and public meeting

Carolyn Willmer seconded.

Vote was taken by attending members (See attendance)

There were all “Aye” with no “Nays” to this motion to adjourn the meetings.

Adjournment

Meeting adjourned at 1:09 PM

The next District Central IOC meeting will be held on November 28th, 2022, at 10:00am in the same virtual format.