

AHCCCS Central Oversight Committee (IOC)
Public Meeting Minutes
Wednesday, May 17, 2023 – 5:15pm to 6:30pm

Call to Order

Meeting called to order by Co-Committee Chair Holly Geiszl. The date is April 19, 2023 at 5:21pm. The meeting was held virtually through Google Meets.

Welcome and Introductions

Attendance in Person:

- Holly Geiszl, Co-Chair
- Jack Potts
- Matthew Moody
- Joy Green

Absent:

- Marie Raymond
- Geraldine Roll, Esq.
- Josh N. Mozell

AHCCCS: Fredreka Graham

DDD: Jeffrey Yamamoto

Arizona Department of Administration (ADOA): Lawrence Allen

RHBAs:

- Dawn McReynolds
- +1 520-***-***18: Karen Click from Arizona Complete Health
- Denise Jolley- Molina Healthcare
- +1 623-***-***82: Joe with BannerHealth
- Ashley Mason with Mercy care.

Public in attendance:

- Liz Agboola
- Shelby Graves
- Rachel Streiff
- Sommer Beach (Darren)
- Sabrina Taylor

IOC Chairs

- Dorothy OBrien
- Laurie Goldstein

AHCCCS Central IOC Meeting (2023-05-17 17:21 GMT-7) - Transcript

Attendees

+1 480-***-**64, +1 520-***-**56, +1 602-***-**31, +1 623-***-**82, +1 928-***-**09, +1 928-***-**60, Adonis Deniz Jr., ASHLEY MASON MSW, Dawn McReynolds UHC OIFA, Denise Jolley- Molina Healthcare, Fredreka Graham, goldie, Holly Gieszl, Jack Potts, Jeffrey Yamamoto, JoAnne Kautzman, Joy, Lawrence Allen, Liz Agboola, Rachel Streiff, Sabrina Taylor, Sommer Walter

Transcript

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Holly Gieszl: Okay, good afternoon. It is May 17th. The time is 5:21 pm The session of the Independent Oversight Committee is now called to order. Given the agenda that was posted, do we have any member that has to disclose a conflict of interest? And if the committee member needs to disclose why?

Holly Gieszl: Hearing no disclosure we will proceed and we'll assume that there is no conflict of interest, that none of the members present have a conflict of interest as to any of the items on the agenda. There are, I believe, perhaps members of the public.

Holly Gieszl: Present if. So this is the call to the public. It's time for the public. Members of the committee may not discuss items that are not specifically identified on the agenda and comments are limited to three minutes per person. Is there a member of the public present with who would like to address the committee?

Holly Gieszl: Does not appear. There is so we will proceed with yes.

+1 602-*-**31:** Holly. Sorry, it's Sabrina Colin.

Holly Gieszl: Sabrina did call in.

+1 602-*-**31:** Okay, this is the place where she would. Make a brief statement.

Holly Gieszl: Yes, if she's making a statement as a member of the public, certainly

+1 602-*-**31:** This Sabrina. Would you like to introduce yourself?

Sabrina Taylor: Oh, sure. For those of you who haven't met me, I'm Sabrina Taylor. I'm a detective with the Phoenix Police Department. And I am the crisis intervention, team training coordinator. Basically, behavioral health liaison.

Holly Gieszl: Yes, thank you. Sabrina is. I'm so happy that you spoke up now. I was going to introduce you later, but this is perfect Sabrina. Is a potential member of the IOC. And I am so excited because I think if there's any public policy development in the last, maybe decade, that may be an overstatement that has

has affected and has the potential to really affect the lives of those living with serious mental illness and their families. It's the CIT presence in the PPD and we're just grateful that you would give us this time and we're grateful to Matt Moody for recruiting you. So I'm really excited about it and I just think it brings an added dimension in

Holly Gieszl: To everything. I see the moms, particularly, Rachel and Sommer and Laurie. Laurie was smiling because we all know we all talk about the program and now we have a live human being that we can connect with and you shouldn't give out your phone number because everybody on here is going to start calling you. And Laurie is the queen of calling and making things happen and Rachel, but really thank you. And, Matthew you get the gold star for recruiting. This is like recruiting Chris Paul on the Phoenix Suns before he was injured. So, thank you very much. And with this,

Holly Gieszl: I think Well, now go. I don't have an update other than what I was going to introduce. Once again, I want to make sure everybody knows we have Rachel strife, who's a mom and an accomplished advocate for the SMI individuals, with SMI Summer water, who is a mom and who has experienced across the spectrum as the guardian for her brother. She has had responsibility for his entire adult life, and probably was his substitute mother when he was younger. And is, of course, a long time member and then now we have a Dr. Potts is here, Matthew's here. And now we have Sabrina as another potential member. Those who have attended the

Holly Gieszl: Prior meetings, we will and Liz. I forgot Liz because I'm not seeing her face. Was Agboola is um a CEO of a company that is in the provider space and has a variety of services and brings incredible skill and the field. And we need a provider on the committee; we've lost our prior provider. So this is really good to have a provider interested so we'll get that. The applications are going out if our new members, potential new members, fill them out.

00:05:00

Holly Gieszl: And bring will submit them before the next meeting. We can consider the applications. You will have attended your third meeting and we can vote for you in Larry and I talked about this and that's a great procedure. It's much simplified from the way it used to be and Sabrina. Yours will be Then this is your first meeting two more and we'll do the same process. And I'll get the application to you at the same time. So let's go next. If we can get the update from our community partners, if anybody has an update, please raise your hand or speak up and let's go through it.

Holly Gieszl: Any updates.

Dawn McReynolds UHC OIFA: Hi Holly. This is Dawn McReynolds

Holly Gieszl: Yes, the health plans. No, that's all right. I probably wasn't as clear as I should have been. Thank you.

Holly Gieszl: Yes, if you have Okay. sure, anybody any of the other health plans present who have an update

ASHLEY MASON MSW: No update for mercy care.

Holly Gieszl: Okay, banner is banner on.

Denise Jolley- Molina Healthcare: No update for Molina.

Holly Gieszl: Okay, Molina. Okay, great. It sounds like if anybody needs anything, please tell us. You have an update and we'll come back to it. Dr. Potts had asked to be put up at the beginning of the agenda, he had some items that he wanted to discuss, and so we will call those items. Dr. Potts, if you'd like to do that. Now, that way, we have plenty of time for you to discuss the items you wanted to bring to the committee's attention. And then also if there's anything else we can move on.

Jack Potts: Thanks, I appreciate it. I have to leave early. That's why I asked to be moved up. I think we'll have enough time.

Jack Potts: I sent all the members. And Dorothy and Lawrence. I don't think you got it, but Dorothy got it. My concerns regarding behavioral health residential facilities. And I sent it with some attachments, which I thought would be helpful. I've been to a couple different residential facilities. Recently. Where I was told and also family members told me. that they are not allowed to see on a 24-hour birth that they are not allowed to have their Loved one be with them for more than four hours a week. Off-site of the birth. When I heard that and confirmed that with a couple, birth owners that they were present at a Zoom call. I think probably January with Aetna and the head of I think. Adult services for mercy care. They were told the clients could not do overnight stays or could not be again more than four hours off-site. Per week, not per day. Unless it was specifically in the eye, in the independent individualized, treatment plan. And that treatment plan was not only approved by the clinic, but by mercy, care directly is what I was told. Well, I don't know if it's accurate enough, I would raise some concern. I also sent out a list of a couple hundred. Programs. That as of two days ago, were suspended or terminated by access because of potential fraud that the FBI is investigating. That was on the access site. and I think it's partly related to these potential policy changes because what I understand, maybe is that 24-hour births are paid obviously to do training and education rehabilitative rehabilitative services, and that someone's off-site. There may be still billing for the time, the person is offsite And so there's some real issues here, but I think the concern I have is the human rights. The people who are essentially, and I've seen this too many times, we've all seen it joy, you've seen it. Kathy has where people are told. They cannot leave the burr for the first 30 days. They can't step outside the borough for the first three days, unless it's with possible staff. So I think that was one of my major concerns that this is accurate. We need to say, see some way of making a little easier for families. To visit their loved ones or take them out to dinner because some of them have to drive 30 miles. Or more. And they were telling me about this issue. and so, I'd like to investigate what is consistent with that, I think, as I said, Message, I sent to. The Committee. The births are responsible for doing a lot of habilitative care which clearly isn't being done. You know, no one. I've talked to the House managers and I. This is just a random chance but I have taken them on the public bus system, to show them how to get tickets and how to use the public health, the public bus or public transportation system, etc, etc. But that's a different collateral issue regarding the behavioral health residential facilities,

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Jack Potts: And, and I think it's probably this new policy. Procedure change may very well affect Northern Arizona and Southern Arizona as well. And I'd remind Dot and others that you are standing members of this committee. So, you can speak any time, any questions you have. But anyway, does anyone have questions on that? Was it? My concern, clear.

Holly Gieszl: Lawrence Race. Yeah, Lawrence has raised her hand Lori you know our knowledge in this area. Certainly do you have Comments.

goldie: Yes, we have talked to mercy care. And I think what happened? It was misconstrued in this way and it's nuanced. So the rule is mercy, care, came to our acne meeting and said that it is treatment, right? So it you are providing treatment during the day so you can't interfere with programming and treatment but families if they're not toxic or harmful and that happens sometimes obviously if a birth knows that a family members going to have them drink or do drugs or whatever, they have every right to say, we're not gonna let them leave with that person but in general, it's encouraged when our son has been in many births where

goldie: You know, after hours of programming we take them to dinner, take them to the mall or go to a movie on the weekends too. But you cannot ask to go on vacation or have overnights because then the thinking is if they're well enough to go for a vacation then they probably don't need this level of care which is reasonable. So they're not trying to be unreasonable with the policy, but those that have interpreted it that you cannot see your family. That is not what Mercy care said. And they came on our call and really spelled out and said they were going to get with a provider that was not allowing. Family members visit on weekends after hours, taking them to dinner. They were.

Jack Potts: Well, Laurie...

goldie: I'm doing that.

+1 602-*-**31:** so,

Jack Potts: What the one issue of that is that in fact, a couple owners of multiple births within the last week told me that they've interpreted and believe that the four-hour limit is a four-hour maximum limit. They have so no, I believe you and it doesn't make sense. But the bottom line there is that total mercy care has not done a good job of letting them know that they won't...

goldie: Communication. Yeah.

Jack Potts: Yeah. And I had and,...

+1 602-*-**31:** Well, so if I

Jack Potts: and I and anyways, like and and I asked the birth person to provide me with some writing policy and stuff, I couldn't find any. I asked Ms, Fitzgerald. I think it was his head. I think it's Elizabeth whose name who's head of adult Christmas.

goldie: Life. Blankets show.

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Jack Potts: No Elizabeth something. But anyway, I asked her to, It's in my memo, I just sent you two gold Lori to give me some thoughts on,...

goldie: Okay.

Jack Potts: But so maybe we ought to clarify that and see what they're doing because it's clearly impacting. I saw family impacted on it. A week ago, who said,...

00:15:00

Holly Gieszl: Yeah. Matthew,...

Jack Potts: That's what their instruction was.

+1 602-*-**31:** so,

Holly Gieszl: you have a comment.

+1 602-*-**31:** A couple, but You know, firstly there's stuff that's happening with. You know, the group I'm doing sat down because of an I'm sorry, even the correct language like on group homes but residential whatever they are getting shut down. It's really upset me personally to see what's happening here and I think that that just kind of reinforces how important the iocs and visits are. So I just wanted to say that like I. I think it's important but I think that everything you said Jack is completely valid. And I think what we have to what I'd like to do is make a motion that mercy, care and, or access, whoever license, it homes for SMI individuals, provide what type of training, or, or guidance, they give, or restrictions, or documentation, they give to these group homes or you can call them first. I don't know what that means behavioral. But anyway, I'd like to request. They give that to us and tell us how they are. reviewing that information how they are, you know, licensing these agencies like I want them to explain the whole thing, so that you know, why do some of these homes that Jack is talking to how this incorrect understanding which is negatively impacting people's recover,

goldie: One thing Matthew thought, too, that what's gone on the news has been intensive, outpatient. Treatment which is in sober homes, and not bursts. So it's getting confused and conflated. So those are kind of separate issues.

+1 602-*-**31:** Earth.

Holly Gieszl: Yeah.

goldie: But as far as I think,...

+1 602-*-**31:** You're correct.

goldie: Mercy has to do a better job communicating with the providers. It is nuanced by saying you must provide treatment. They can't go overnight and go on vacations because some families have asked for that. But it is an intention to integrate in the community and they see their families are healthy. When it's outside the program.

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+1 602-*-**31:** Yeah, and I'm not trying to say, I'm not trying to say that these residential are doing improper things. I'm just saying that we are the oversight system for these things. And what I've seen happen was someone taking advantage of the American Indian health plan and sneaking in crap that way. I would like us as the IOC to review that stuff and have a presentation given to us, on, on how these places are licensed, what mercy care or whatever, agency, oversees them is doing to make sure that they stay in compliance and what Jackson said, like they should be taking people out and showing them how to use the bus or you know, whatever living skills, they need to get closer to independence. They should be doing that. So what are their requirements that are put upon these places to do that?

Holly Gieszl: I think I'm hearing a couple of things.

Liz Agboola: this is,

Holly Gieszl: So I think we're talking about birth compliance with members, being able to visit with family, how long they can be absent from a birth and that, that aspect of Jack's Communication, I think. And so we can. I'm going to Agendaize that for a more full discussion at the next meeting.

Holly Gieszl: And I think we should focus on that and have in mind, a specific language or emotion as to what we as an IOC want to do as well as our communication with access and mercy to clarify exactly in a non-nuanced way. I love that phrase, Laurie. It needs to be as clear as a fire exit sign as to, who knows,...

+1 602-*-**31:** Yes.

Holly Gieszl: the conditions under which you leave and come back. And how long and in whose company and certainly that if you leave and come back, you can be searched. For obvious reasons and...

goldie: Yeah.

Holly Gieszl: your property can be searched. So,

goldie: Untested.

Liz Agboola: Holly Holly,...

Jack Potts: let,

Liz Agboola: I just want to say a couple things. If you guys don't mind, I know

Holly Gieszl: Yes. And then Liz I was going to call you what?

Jack Potts: But I'm sorry, I'm sorry,...

Jack Potts: I'm sorry.

Fredreaka Graham: Go ahead, Dr. Potts

Jack Potts: Remember the public are not allowed to address the committee...

Jack Potts: unless they're on the committee? Just a point of rule.

Holly Gieszl: yeah, I will will get

Jack Potts: Unless the call to the public. But you know, but let me just suggest I There was a potential motion and I I would like to make a motion consistent with Matthew was saying and...

Holly Gieszl: Well, okay.

Jack Potts: it was noted about allowed to offer, emotions that proper

Holly Gieszl: No, there's a motion and now we're having a discussion. If you want to All right,...

Jack Potts: I'm sorry, we didn't have a second on that motion. And I would like to clarify that.

Holly Gieszl: I'm sorry. You are correct.

Holly Gieszl: Are you seconding the motion?

Jack Potts: I, I would like to in lieu of that,...

Jack Potts: I'd like to offer a friendly amendment to Matthew, that makes it more specific. And it's in the memo. I said that we specifically ask Elizabeth

00:20:00

Jack Potts: A foresight or an Etna and Chris Christian Morgan. We're the People and talk. We asked them for a copy of the zoom call that they provided to the providers. And we asked what policies and procedures regarding people time away from the birth, etc. So we'll have that. Before our next meeting.

Holly Gieszl: Great.

Jack Potts: And that's very specific to times allowed off from a 24-hour server, and how the individualized plan can be adjusted individually for people who may want to spend overnight or want to maybe spend six hours three times a week with their family, having dinner. So that would be my motion.

Holly Gieszl: Okay, Matthew, would you accept that amendment?

+1 602-*-***31:** I think those details are important, but I actually want a bigger picture here. I want to know The rules that they provide for these places. So yeah, everything Jack said but on top of that, I want to know how often the R or the SMI system is checking in on these homes. Not easy, Department of Health services. I want to know how often. They're making sure that their members are getting things needed. Are they auditing? These places? Are they visiting these places, those sorts of things?

Jack Potts: I think I would agree and that's fine. I think that's a secondary question that comes down to what I sent out. Also about what is required, because they're not doing oversight, but I agree with you, I would agree with that. So, I would second your emotion with that amendment.

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+1 602-***-***31: Okay.

Holly Gieszl: All right, so let me restate this motion to be sure. It's I have the pieces Matthew has moved Jack has amended Matthew clarify Jack second that the IOC

Holly Gieszl: Request from AHCCCS and Mercy care. A copy of the zoom call with access and members and Aetna. Mercy was on as well. I guess. As well as clarification of the rules. That is in effect as to absence from a birth. During treatment. And third, an explanation and documentation, regarding auditing of the services that BHRF are providing. And what efforts are made to proactively audit and determine compliance with what is required under the law. And the mercy guidelines, is that a fair restatement?

+1 602-***-***31: It sounds like an attorney wrote that. Yes it sounds great.

Jack Potts: That sounds great to me.

Holly Gieszl: Well, it's after five, I stopped being an attorney at five but because I can't bill after five right that would be double billing. No. So with that, we've rephrased the motion. We have a motion, a second, we've had discussion all in favor say aye. I Appear to pass unanimously. Okay, we will then move on on the agenda to

Jack Potts: If I made it to finish the BHRF issue, I did send to the members what they are supposed to be doing what was required. So I think that's something we can look at for site visits and the like And in a concern that Matt suggested,...

+1 602-***-***31: Awesome. Thank you.

Jack Potts: is that list of hundred people agencies that are suspended right now. I am wondering, how many of those have patients in them, how many are births and how many of those patients that could now be jettisoned from them? It's a very big concern, I have. So I don't know if it's going to happen or not, maybe Lori knows. but I sent that list out to everyone and it's a lot of places and what's happening to Our patients. So, that's

Holly Gieszl: I looked at it quickly.

+1 602-***-***31: Can we request that? Clear request that.

Jack Potts: But the dog is not good. I think it's a second motion but that Lori, you mentioned something about that. But I mean,...

goldie: No, I think that.

Jack Potts: I'm wondering. Is that a concern?

goldie: My concern hearing all this and a lot of them aren't BHRFs its intensive outpatient treatment, some have housing but the main problem was of not providing intensive outpatient treatment or saying they are and sending them somewhere else to get it and then double booking and all this other kind of crap. I think that

goldie: Good from Holly. This has been going on a long time. This isn't something new but it would be interesting to see what their plan is. It's now they say they're on suspension, More about the members. Where are they going? That's always a concern. The second concern is when someone acts badly in this area, There's kind of an overflow cast on other providers that are doing a good job. Is it going to make it harder for providers in the universe that are doing the work and are doing the services harder to collect the money? it just messes everything up for the providers that are doing a good job. So it's a concern.

00:25:00

Holly Gieszl: Yeah, I think it might be. I I think those are all. It seems all valid concerns. And something that we would maybe want to look into maybe we could. yeah, I think there was this big press conference and there were a hundred or so providers just recently, Suspended. Um, and I'm I then, but there are other cases that go back to 2019, which are all on the access Web page. So it might be wise to wait and see, what comes out of the investigation and what becomes more publicly available. I suspect that there is AHCCCS and Mercy.

Holly Gieszl: the access in particular, they're not going to really comment on an ongoing investigation but so I wonder if maybe we wait and see and try to, we have the list. We can determine who, who were births and who were not. That's a fairly easy thing to do and then we can revisit this, when we have more information, that's that's available.

Jack Potts: Well I wonder...though some of it won't be in 2019 that's four years ago. I would agree with Matt. Why don't we simply ask how many are births and what are they going to do with the clients that are in those the IOP?

Holly Gieszl: Oh, okay. All right.

Jack Potts: And that's all we just ask up.

+1 602-*-***31:** Yeah. Well

Holly Gieszl: So, is that the motion that I hear the motion is to ask AHCCCS? How many of the providers on the list on their website are births? And if and what has been done to reassign those members?

+1 602-*-***31:** Yeah, and I approve of what I'm saying. I might want to ask though, can we just get someone That is knowledgeable about all the topics to come to the next meeting and talk about this?

Holly Gieszl: What topic?

Jack Potts: The suspension.

+1 602-*-***31:** The. There you go and...

Holly Gieszl: How Providers Get Suspended?

+1 602-*-***31:** and what's happening.

Holly Gieszl: Yeah, what I think the question is, how is a provider suspended? What happens to the members? That's the human rights concern, I think when a birth is suspended,...

Jack Potts: Yes.

+1 602-*-**31:** Sure. Yep.

Holly Gieszl: what happens to the members Okay.

Jack Potts: I would second that motion Matthew,

Holly Gieszl: All right. So the motion is that we ask access to questions. One of these I guess it's one question, which is when a birth is suspended from participation and AHCCCS. What happens to the members and how are they, how is their care met by AHCCCS? I and so, that's the motion that I hear. I think that.

Jack Potts: Well no I also asked them to identify which on that list are births because we may be able to check up on our own So which on the which on the list are books? And secondly,...

Holly Gieszl: All right.

Jack Potts: What you just said is correct? Matthew: And have some attention, okay?

+1 602-*-**31:** Yep, I agree.

Holly Gieszl: Okay.

goldie: Which are, which are unlicensed. So we're living because I'm looking at the list here, and there's a lot of unlicensed, sober living and there's some that are terminated so Some of them are recognized so the terminated ones that people are likely gone.

Holly Gieszl: Yeah.

Jack Potts: but,

goldie: The standard.

Jack Potts: We're just looking at birth, we're not looking at iron licensed, we're looking at births.

Holly Gieszl: Yeah, so the motion is that we ask access to produce a list of the From that list,...

Jack Potts: Only That was the motion.

goldie: Okay.

Holly Gieszl: then members that the Entities that are births and to provide forest information is to show when that provider was suspended. The members were relocated for continuation of care okay,...

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+1 602-***-***31: Confirm.

Holly Gieszl: we've had the motion we've discussed the motion, all in favor, say I

Joy: I, Okay.

Holly Gieszl: It appears the motion passes. Thank you. Dr. Potts for those issues. Moving on.

Jack Potts: Thank you. Thank you.

Holly Gieszl: I believe, Dr. Potts, you had site visits last Friday. Would you like to give a report on that?

+1 928-***-***60: Excuse me, Holly, it's Dorothy before you move on.

Holly Gieszl: Hi.

+1 928-***-***60: Might I just ask a question about that.

Holly Gieszl: Sure.

+1 928-***-***60: Okay. By looking at the list Jack's that you're that you're discussing. And, and this will sound stupid, but I learned so much from your group. I have to ask you. Is it possible? Are any of those also in the Northern Arizona area? I mean, some of the I don't recognize any of the names, but Would I go by that number following you?

00:30:00

+1 602-***-***31: Yes, those are statewide.

+1 928-***-***60: I'm sorry.

+1 602-***-***31: That they are statewide to my knowledge. I think they're mostly concentrated in the Central Arizona region but I believe there are statewide homes.

+1 928-***-***60: They could do it. Okay, perfect. Okay. And just very briefly my daughter before she went into, Ash spent a short time in a birth down in Peoria. And the two takeaways from that experience, where the owner of the house kept saying, she has to have her head on the pillow. So, I mean, there was no, you know, we would love to have have had our home for weekend or something like that but that again, this is five years ago but that seemed to be the phrase that this woman used, my daughter's head had to be on the pillow and I don't believe there was any restriction on time, but they just appreciated my saying, Okay, we'll be home by 8 o'clock or something like that, you know? so,

goldie: I think they have to be in bed to count for the daily census from what I recall when we would take them out for dinner.

+1 928-***-***60: Exactly to get paid. Yeah.

Holly Gieszl: Well, I think as I recall from Access meetings. Access participation in the

Holly Gieszl: And ACMI's meetings. if the patient is not at the birth overnight, the birth cannot build. And so it's an empty bed.

goldie: Yeah, that's true.

+1 928-*-**60:** Right right. That seemed to

Holly Gieszl: It's, it is a policy, a reimbursement policy, no doubt by Aetna to make sure that people aren't claiming people are. Residents and they're not, they're just there three days a month or something. But it's a good example. I think of reimbursement policy that is counter to family recovery and it's it to us. I remember questioning it. And I also remember from a personal perspective, when A family member was hospitalized and in treatment at a premier place we had no contact for an extended period of time. And then and then it was gradually reintroduced under very strict regulations.

Holly Gieszl: Circumstances. And it's the end of one in terms of sample size. But boy, I can't argue with the outcome. So, it's totally anecdotal, but I think this is a good example of billing policy. I think I also have a concern about knowing some of the families that I work with and...

+1 928-*-**60:** oh,

Holly Gieszl: some of the clients that I have the last thing I want to see are

Holly Gieszl: These families showing up and wanting to spend all day there wanting to take the patient, you know, their loved one out from McDonald's in the middle of the day and then Oh I got to run by the dry cleaners. And oops, the dog is supposed to have its bath and Oh my goodness. Look, my gas is low, I got to stop. Hey, there's this great. Mexican restaurant. Next door, let's just go get an early dinner and the patient's been gone for five hours. Um I I, Dr. Olson has often said something that I think is important to remember and that is that not all families are healthy.

Holly Gieszl: Um and and so I just think we need clarity and I I loved the language that Laurie said . It's nuanced and that's where all the confusion comes from. So I think these questions that we are going to ask can really help clarify that and then Dot, I think in terms of a follow-up response, we have a great opportunity for the iocs to play a role statewide in. Fire fine. these rules and and might

+1 928-*-**60:** Yeah, I will certainly yeah. We'd love to participate in your next meeting and hear what you learn. And in the meantime, we'll take a look at that list and it's very concerning so I and...

Holly Gieszl: Yeah. No,...

+1 928-*-**60:** I'll mute myself again. I don't want to hold up your meeting...

Holly Gieszl: That's fine.

+1 928-*-**60:** but very much appreciate the support.

Holly Gieszl: Will immediately share with you as an ad hoc member of the committee, we will share whatever information we get with all the iocs and with ash, because many of the ash patients will leave and some will leave and go into a birth. So I think this is great. Statewide effort and we could use a lot more of it statewide with our iocs. We don't have a legislative update. Josh isn't here. Visit reports Joy Green. Can you give a report on the site visits from last week?

00:35:00

Joy: Yes, I can. The first place that we went. I don't have the address in front of me, Dr. Potts did. Try to get someone there and nobody answered and then the follow-up visit, I think Dr. Potts is more qualified to give you the results of that one.

Holly Gieszl: Is Dr. Potts still on or did he hop off? Yes.

Jack Potts: No, can you hear me? Okay, my video died, which is better. Two things. We did go to a manual campus of care which is 99th avenue pure. It's a sniff but it has probably a couple hundred beds. They have three secure behavioral health units there. Josh. I was very pleased because there are some secure unit options available. Besides Level 1 facilities, I found I personally have been there a number of times and I'm glad we. They let us in. It was relatively clean. I think it was a little outdated, an old motel that had been converted. Times. I've been there before, frankly. I wouldn't

Jack Potts: Some of the chaos was such that it was very disturbing and I've worked at a 3,000 bed state hospital previously, and it was more disturbing than that hospital. There are people.

Holly Gieszl: It's smaller, right?

Jack Potts: That one's a lot smaller but it was also more chaotic and very dysfunctional. One for the Cuckoo's Nest portion. But they were very accepting of us. We met with the team. At the manual campus of care. It is a place where the public would do, Sherry often puts their wards. There's a place where people on court order treatment often go, even though it's a more restrictive setting I believe than they need and that's very clear. My concerns were twofold. Primarily one is lack of real adequate programming. Again, it's more of a fiction. Number two,

Jack Potts: They don't do it. That's why they have dozens of SMI patients there at any one time. And they say they've never done an IAD. So that was a level of concern because I have deaths there, they have people being restrained, being transported. And they have three secure behavioral units, just a lot. so, It's a sniff.

Holly Gieszl: It's a licensed nursing home, right? Sniff. Okay.

Jack Potts: And so, so minus, my question would be and I think we need to inquire and I would like to and I'm one of Joy would agree, but And Kathy was there with us, it was a very good that we all met in the we'd agreed that we're going to meet in those Fridays. The first Friday and Josh came out too. So joy was that not discerning to you too.

Joy: Yes, it was. Yeah. I just

Jack Potts: I'm sorry.

Joy: Well, I just felt you know, you saw the patients that were there were just sitting around and not active enough. Not doing something like you said, with the programs.

Jack Potts: And realistically, there's a patio outside that they don't even let people go out. You know, I mean, so it's really an interesting mix there. so, My question would be: Can we make a formal request for AHCCCS or mercy care? As to why this place is not doing IEDs and our sniffs are exempt from doing IADS on SMI patients.

Holly Gieszl: Well licensure The licensure of any healthcare facility requires an effect of a tracking mechanism for incidents, accidents and deaths. That's in the license. I think we're going to have to ask the Department of Health Services that because,

Jack Potts: Except yeah, but access but they did the SMI is we can ask access. They can go there but it isn't, we're under

Holly Gieszl: Well, it's ALTCS. If it's a nursing home, it's going to be ALTCS. And it's going to be ALTCS and DHS, it's not going to be AHCCCS..

Jack Potts: Okay, some of these patients are not under ALTCS. They're there briefly just some of them are been just released out of out of the part of Valley Wise but my point is wouldn't it...

00:40:00

Holly Gieszl: Ah, okay.

Jack Potts: however you want to do it. But I think we only have the authority to ask and demand an answer from AHCCCS and mercy care about the SMI.

Holly Gieszl: Correct. Correct.

Jack Potts: So, I would move that we formally request an answer to whether or not a manual campus of care. Is exempt. And, and also our sniffs exempting. If not, why are they providing them? And why don't we see them? Because I searched the database for IADs from there and didn't see any when there were dozens of patients there,

Holly Gieszl: Right. So that's the motion.

Jack Potts: George, what?

Joy: My second time.

Holly Gieszl: Joy seconds, any more discussion.

Holly Gieszl: So, they're being none. I just to restate the motion Dr. Potts, it is, we are, you're asking that we request access and explanation, specific to a manual campus of care. As to why they are not. Submitting IADs on SMI individuals who have been committed there. By their guardian. Are there...

Jack Potts: What just was I know just residing there distance.

Holly Gieszl: who are residing there. Okay.

Jack Potts: Is that right now? That was your understanding. They said they did not do that. Correct. I want to make sure that Okay.

Holly Gieszl: Okay. Okay, Lawrence has her hand up Laurie. I continued the discussion.

goldie: I was just. Wondering. I mean just because they're in a different facility. Wherever they are, they still have their SMI rights, right? So they still are held to the same standard,...

Holly Gieszl: Yes.

goldie: so it Seems like they would have to do it. that I may not want to do...

Jack Potts: That's right.

goldie: but they have to

Holly Gieszl: Very good point.

Jack Potts: Absolutely. And that was a concern that this was right in our face when we visited.

Holly Gieszl: Yeah, absolutely. And Ashley Mason who's the veteran's advocate at Mercy. Care asks, Are we going to send what the emotions will be in the minutes? Yes they will be and those minutes of course are all online now and Google, Translate or Google. It's not Google translate. We're not translating it, translating them into Ukrainian Ukrainian where they but we get a written transcript. So yes they will be there and we will keep track of a separate document of the motions and that are made each time so we can follow up on them and track them. So thank you for clarifying asking that question. Ashley, that's good.

Holly Gieszl: A clarification and true form for a master's in social work, focusing on process and tracking things. So thank you for lending. Your expertise in that area to this group.

Jack Potts: oh,

Holly Gieszl: Yeah, I know it's very helpful. Gosh, social workers are the best at the process. So the motion has been clarified.

Holly Gieszl: All in favor say aye. Aye. It will pass unanimously. Okay, thank you very much.

Jack Potts: Anything else joy that you saw that you want to mention about the manual?

Joy: I'm sorry, I'm trying. I can't recollect, which is referring to Dr. Potts Oh no.

Jack Potts: I'm sorry. With anything else about the site visit

Joy: No, I think you mentioned it. Good. I really do. Thank you.

Jack Potts: Thank you. Thank you, Ms, Giesel.

Holly Gieszl: I believe we have proceeded now through The we're down to we did public comment first. I took that out of order. Which is unfortunate. Let me ask.

Holly Gieszl: Larry has joined. Is there any update regarding the Department of Administration and Access Interaction?

Lawrence Allen: Hello, Holly. Good evening.

Holly Gieszl: Hi.

Lawrence Allen: Sorry, I'm late. I had another meeting. Another IOC meeting, so I'm having to juggle a little bit. There is one update I have for the group is that we have an open meeting law. Training, scheduled for June 7th. At 10 am. So anybody on the call, that's welcome to our welcome to attend. If you need a link for that meeting, And training, I'd be happy to send it to you. So please let me know if you don't have it. And we will get that out to the group.

Holly Gieszl: Great, would you send me the link and I'll make sure that everybody has it and just for all the new members, this is potential new members. This is a required training and it's very helpful. I think just in general, as to how meetings can be run, it's a very, very helpful training and it is well done. Well done, Dr. Potts. You have your hand up

00:45:00

Jack Potts: Yeah, Madam Chair. If I think it's more than appropriate, if you want to have more public comments, it doesn't mean you can't re-raise the issue a couple times on the agenda. So if you're just a thought I'd love to hear from the public.

Holly Gieszl: I agree. I was working down through the items that we have covered and...

Jack Potts: Okay.

Holly Gieszl: I also want to give an opportunity to Laurie and I don't know if Dot is still on. But Laurie. Do you have an update from Ash?

goldie: Mmm, our meetings tomorrow. But they were. I think they're pretty confident that they've hired the CMO who will probably hear tomorrow night. I'm really thrilled. To get a new CMO, that's what I'll say.

Holly Gieszl: You can take the fifth on any of the following.

Holly Gieszl: I think I hope fingers crossed that they hire a psychiatrist with formal forensic training. That would be, I think, extremely important at Ash. Okay. We're down to number 13. Public comments. We are going to reopen. Is there any other potential member who wants to comment or ask questions? I think that Liz had her hand up earlier during that portion. She may not. There's Liz. Hi Liz.

Liz Agboola: bring a No.

Holly Gieszl: Thanks for popping back on.

Liz Agboola: For sure. Yeah. So I just wanted to respond regarding the outings and things you know that's why we operate the hrf. So we certainly understand that concern from family members. But what we've seen lately is we have family members that actually take their members from the facility and take them to a group at their clinic. Now that group is being billed by the clinic but we're also providing behavioral health services and as we know that's fraud,

Liz Agboola: So, that's a concern that we've always had another concern that we've that we've seen, lately is just like, you're saying, you know, they're leaving for six, seven, eight hours. Like okay. Now that doesn't seem like something we can build for. So now we have to reach out to mercy, care, and even aid completed, and they have very separate rules. These are not, it doesn't seem like they're AHCCCS linear rules. These seem like rules that are delineated based on the county. And then,...

Holly Gieszl: Yes.

Liz Agboola: The third issue is we have members that are all texts. So, we have SMI members that are receiving ALTCS services, because they are long-term. They cannot leave our facility without members or staff. Accompanying them that also poses a different issue for a different set of members all under the same roof. And so we, I mean, obviously, a lot of agencies are running under, you know, three, four, and five, especially those that are even carved certified. Very different rules based on the member. And one of the things that I've spoken with Holly in the past is, you know, we do have members that leave the facility. On their own and they come back. If they come back with any contraband we are cited for putting their lives in danger. We write an IED and we say, somebody came back with, You know, whatever it is. I think someone at one of our facilities came back with

Liz Agboola: EG, She came back with a little bottle of alcohol and we obviously, we, we confiscated it. We wrote the IED, you know, all of those things because she tried to give it to other members. Obviously, that's what caused the IED, and we were excited for putting the numbers' lives in danger, because we should not have allowed that number to leave the facility independently because they are in treatment.

Holly Gieszl: That's a, I think that's a really important issue because The member has an absolute right to leave. This is voluntary. It's their voice. It's their choice and they can leave. Now, and for you if they leave and they get into mischief, they misbehave. When they come back, are you supposed to kick them out and render them homeless?

Liz Agboola: No, because then we get a grievance for that.

Holly Gieszl: Exactly. So I think I really think it seems like this issue of. How do we balance? The. Right, of individuals living with SMI with the responsibilities of the birth under the guidelines, and the issues that you just described. I, I bet. And I want to hear from Rachel, I bet

00:50:00

Holly Gieszl: This has not been examined closely. And I think there's a big contribution there,...

Liz Agboola: so that

Holly Gieszl: I don't know, Laurie may have things to add there but

Liz Agboola: But I just want to say though that the deficiency came from licensing, we explained the issue to mercy care and to Arizona completely. And they obviously were very much in opposition to that to the deficiency that we received. So how do we balance? What licensing requires versus what the insured also requires it is not, it's not linear information at all.

Holly Gieszl: Now, we and that's good. That is an excellent point for us to take up and consider as we look at these issues of, the clarifying, the policies and Rachel, you had your hand up.

Rachel Streiff: Yeah, so I had a Person, I advocate for that was at Immanuel campus of care that you were talking about earlier. And indeed, there was almost no programming. Everyone was sitting around doing nothing. In one respect they were being kept safe. This girl was dts Dto had been at Valley Wise on Cot needed a place to Discharged to that would keep her safe, but nothing was happening. I mean, and the mom was like, I'm getting ready to drop off coloring. Crayons or anything. And so a couple things: The heavily restricted first 30 days as, as a parent, I love it. These people are coming out of the hospital to the next level of care.

Rachel Streiff: It's you know the first thing they want to do is come home and get me out of here, you know having that structure. I like it but the second thing is births aren't being Compensated enough. The reimbursement for what services were expecting them to provide from mercy. Care. Is woefully inadequate, right? They're trying to Do I mean it's the same level of care as some of these ALTCs patients and they're getting quite a bit less correct. Liz. and so, If you're gonna provide programming, I mean, my son was in a private program with amazing programming. The cost just to like, run the places \$900 a day

Rachel Streiff: And and if so, if you're gonna be doing groups and have facilitators and have counseling and have all these things, there is no way that that is happening on whatever emergency care is reimbursing with. I can tell you that and some of my son's private insurance and private employer insurance. Paid for my son to be at effectively a great PHP program for a year. I know that access will never do that but Come on. It's woefully inadequate for what these kids need. So

Jack Potts: If I may on that if

Holly Gieszl: Excellent. Excellent input.

Jack Potts: I'm if I may on two things, number one, The problem is on the majority of programs, we have visited. They actually don't deserve any money because they're not providing any services.

Rachel Streiff: Well.

Jack Potts: So that's the problem. There's some good ones out there and that's an issue that I don't think access as Matt pointed out earlier is doing sufficiently. They're not going in and looking at what programs are being done. And number two, I want to beg to differ with Liz and say that our goal is to look at individualized treatment plans. And frankly, if someone doesn't need three days locked up, it should be individualized very clearly in their plan and said, Hey , that it is a violation of human rights by violation. Treat everyone the same way. So that's, and I. So that's what I take, as a physician. That should be individualized, treatment plants. The third thing is the AMPM. I'll give you the site right now, page. Five of 12, let me find the bloody thing. Hang on. I'm gonna read it to you more than under Chapter 300 Section, 310 Coverage Services Regarding real Bachelor services More than one provider agency may bill for skills, training and development services, provided to a member at the same time, if indicated, by the members, critical needs as an invite in the service plan. So, the fiction that you can't have two agencies, billing is a fiction because I just read the AMPM. I gave this site, I don't know what they're saying, but that's something to refer to and that's what the law says. So.

Jack Potts: You know, I think what we're doing is We're not saying, Hey this person does need to go off-site and get some of this training that would the birth cannot do. Because of going 24-hour, 24/7 lockdown, essentially. Then the next step is a big jump. We need to transition in a very measured individualized way so that's what I think. It is a, as a site, reviewer gonna be looking at more and more programs and what fiction it is, and how to individualize. Because, if any of you've looked at many in event, individual, independent treatment plans, they're boiler plates. For example, they shall have individual psychotherapy, quote between one one-time per week and one time per month, that's not individualized, but that's in almost every plan. Anyway, Those are some.

00:55:00

Holly Gieszl: And thank you. I I did not. I I think. what Liz is saying is is consistent with what the AMPM says which is that if you have that as an approved, Individual-wise Treatment Plan and Mercy, and everybody agrees that if the RHBA and the and everybody agrees, then you may be able to but you've got to get that agreement to build by code and you can't if you don't.

Jack Potts: Absolutely.

Holly Gieszl: Yeah, but that is an in and as I understood what Liz was saying, these are people taking their kids out and taking them to the clinic on their own and not telling the birth.

Jack Potts: Well, I agree. No, it's got to be in the plans but that's...

Holly Gieszl: Yeah.

Jack Potts: where they need the groups and everyone needs to be on the plan to look at these plans individually. That's all.

Holly Gieszl: Great and Lori has her hand up.

goldie: Just quickly, we've been in lots of bursts. There are good ones and bad ones. Some of the early ones, there was like they cannot leave, but remember, they're not secure. My son left, so many of them, so often, and usually, if you'd left it used to be life. Well, in that life. Well, I can't remember changing names so many times over the years that if you left, you couldn't come back, then you could come back once or twice some of the other ones. And we have families that have this all the time. If they go out and they use the rule, they come back dirty, or they can tell that they're high. If they are, they send them to community bridges and they detox overnight and then come back. But there's differences between community living births and the rest of them. But I've seen

goldie: The whole spectrum. I absolutely agree that you cannot on your own. Go ahead and decide you want to enroll your loved one in a different treatment when they're theoretically in a program. That's just nuts. But the rules are for general, they're not for specific rule breakers. I mean you have to handle them on a Individual case.

Holly Gieszl: So it's interesting. Well, we will definitely want to take this up in future discussions. If the patient comes back, they're high, they send them to community bridges. And all that means that the birth can't pay for them.

goldie: That's right,...

goldie: And that's what they do. But they do that.

Holly Gieszl: So they're punished for doing the right thing and...

Holly Gieszl: They don't have a bed that isn't filled. They're overhead, and don't go down because the person isn't there. I mean it's not much charge for breathing air. but,

goldie: That's why we need secure bursts for those that really have not gotten the insight and will not stay wherever you put them and they still want to use and they don't want to take the meds.

Holly Gieszl: And so I think and then the alternative is the birth says they can't stay here, so they kick them out. And then where they go. Are they going to go to a sober living or wait? You know, where, I think this issue of how we pay for births and how we balance the rights of patients versus making sure that the services are provided. I think that's such an important area for this group. We've been talking about an agenda item, just for the record, which was the birth issue that Dr. Potts raised, because we're doing it in public session. And when we are in the

Holly Gieszl: A call to the public. We cannot discuss items that are not specifically identified on the agenda. So, I've let this, we've done this discussion because I believe it fell well within the description of Dr. Potts' agenda item births. But just going forward, we always have to do that and you'll learn that in the Public, Open Meeting Law, seminar on June 7th. And so, I think we are at the end of the agenda, Jack, joy. It Laurie. Any other items that we should discuss under new business

Joy: I don't have any worries, thank you.

Holly Gieszl: Okay, thank you everybody. All the health plans for attending Laurie and Dot. I think they're off. Thank you so much. I think having the members here Members of other committees is ad hoc . The chair of the other committees as ad hoc members of this committee is invaluable and it really is probably the best link with that continuum of care for this population that we have. So I'm really excited. This is a great meeting. Thanks everybody. And we look forward to next month, when we'll be looking at voting on the applications for Rachel, Sommer and Liz and then two meetings later for Sabrina.

01:00:00

Holly Gieszl: And in fact you, I'm going to call you Sabrina and ask that you maybe do an overview for us on the CIT program. If not, if you can't get it. I mean, I'm sure you can do it in your sleep, but I think that would be really helpful next month, and we can get lots of people. I know I will be interested in hearing that. I know acne would probably, we would do it, and it's something Laurie is vice chair of acne. It's something that I think, and we would probably love to have you do A stakeholder meeting on and we'll make sure we get it out, everybody hears about CIT but they've never seen it. I'll use a gender specific term but queen of CIT. So it's just really exciting and I will follow up with you and look forward to it. If you could think about maybe doing that, we could take 15-20 minutes.

Sabrina Taylor: Okay, sure.

Holly Gieszl: and at the beginning of the meeting so others who may want to join can join All...

Sabrina Taylor: Okay, sounds great.

Holly Gieszl: I believe we are done and I want to make sure I have the script, right? So I'm asking for a motion for adjournment of the IOC.

+1 602-*-***31:** Emotion.

Joy: I second.

Holly Gieszl: Thank you all in favor. I, We are done. Thank you all and we'll see you next month and expect a lot of information in the meantime.

Fredreaka Graham: Thank you.

Joy: Okay, thank you. Holly.

Holly Gieszl: I thank you.

Meeting ended after 01:02:55 🙌