

EIDBI Advisory Group

Meeting Minutes

Feb. 8, 2019

Updates from Nicole Berning, Kim Hicks, Maychee Mua and Mariam Egal

Providers and recipient update:

- 39 enrolled provider agencies
- 68 Comprehensive Multi-Disciplinary Evaluation (CMDE) providers
- 502 people who receive EIDBI benefits served as of Jan. 1, 2019
- Reference to the [MHCP Provider Directory](#) for a list of Minnesota Health Care Programs providers
- Sign up for MHCP provider news [updates](#) for ongoing provider billing, enrollment and program updates

Billing updates:

- We updated billing codes Jan. 1, 2019, because of Centers for Medicare & Medicaid Services coding updates
- See updated [billing grid](#) for changes
- Question from a provider about commercial plans that do not allow observation and intervention to be billed at the same time. Minnesota Medicaid has not received that guidance. We allow intervention to be billed with observation and direction.

Policy updates:

- We needed to change policies because of the billing changes. The following policy pages have been updated:
 - Added out-of-state providers to the [Rights and Responsibilities](#) page
 - [Family Caregiver Training](#) defined “group” language
 - [Observation and Direction](#) added definition
 - [Coordinated Care Conference](#) Added that coordinated care conference cannot be billed on the same day as other EIDBI services. Only the ITP may be billed on the same day as the coordinated care conference.
 - [Intervention](#) Clarified language about who is required to sign case notes
 - See complete list of updates on [Updates to the EIDBI Benefit Policy Manual page](#)

Variances and modality submissions:

- Form added to submit new modality suggestions, [DHS-3807A-ENG](#) EIDBI Treatment Modality Submission Form. Stakeholders use this form to propose a treatment modality for the EIDBI benefit. Users should provide as much detail as possible. The DHS EIDBI team will respond to the request within 30 business days.
- Reminder to use the advisory group agenda form, [DHS-3807-ENG](#). EIDBI Advisory Group members and visitors use this form to submit suggested agenda topics.
- Level I variance approved and in state plan: Allows for a provider who has a master’s degree or is enrolled in a master’s degree program and receiving observation and direction at least once a month until he or she reaches 2,000 hours of experience, to enroll as a Level I provider. [Level I provider roles and responsibilities policy page updated](#)

Parent meetings:

- The EIDBI team is committed to hearing from parents and caregivers who receive EIDBI services throughout the state, including those from under-represented communities.
- At these meetings, we will provide updates on the benefit and also hear feedback from families about their experiences with EIDBI services.

- We will also be continuing with parent and caregiver outreach meetings throughout the state. We are working to schedule meetings in April, June, August and October throughout Minnesota

Provider meetings:

- Provider listening and feedback sessions
- Dates and times:
 - April 16, 2019, 11 a.m. to 12:30 p.m. at the Andersen Building or via WebEx
 - July 23, 2019, 11 a.m. to 12:30 p.m. at the Andersen Building or via WebEx
 - Oct. 15, 2019, 11 a.m. to 12:30 p.m. Andersen Building or via WebEx
 - [Additional information and registration](#)

Website redesign:

- Added video section to ASD portal: <https://www.mn.gov/autism/videos>
- New content on ASD portal is being reviewed and revised
- Multicultural online training:
 - We have selected [Rivertown Communications](#) of Stillwater to develop the training
 - Middle of April 2019: Collect stakeholder feedback for draft of the eLearning module
 - May 2019: Incorporate changes, feedback, revisions and finalize product.
 - Summer 2019: Launch first live multicultural online training module through DHS learning management system

Provider meet and greets:

- Provider meet and greet event: 5 to 7 p.m. March 20, 2019, at St. Cloud State University.
- Provider meet and greet event: 3 to 5 p.m. April 10, 2019, Armstrong Hall, rooms 23 and 50, Minnesota State University Mankato, 730 Maywood Ave., Mankato. More information is available on this [flyer \(PDF\)](#)
- University of Minnesota Duluth is hosting a Healthcare and Human Services Career Day on March 19, 2019. Here is the link to the "employer preview" with details about how to register and participate: https://app.joinhandshake.com/career_fairs/8301/employer_preview

Modality discussion

- Treatment modalities are identified by their names in statute
- The process for the DHS commissioner to add modalities is outlined in statute
- Adding a modality does not require a change in statute
- Early Social Intervention (ESI) modality is a new modality being considered
- What did we learn from evaluating the ESI modality for addition?
- What was clear?
 - Modality had research basis, clear but not a flexible implementation approach.
 - The requirements in statute are clear along with the 30 day comment period.
 - The forms are clear.
- What was not clear?
 - DHS did not provide instructions for how to submit a modality in November 2018.
 - DHS was not clear about what happens after the discussion and at the end of the 30-day public comment period.
 - There is no information on how to differentiate the new modality under consideration from existing approved treatment modalities.
- What were the questions along the way?
 - How do we remove modalities that research shows are not proven effective?
- Other reflections

- Focus on medically necessary treatment and medical review agent to ensure medically necessary treatment.
- There should be a proper chronological order.
- Diagnosis and treatment sections should be clearly marked and indicated
- Applied behavioral analysis is not a specific intervention. Instead of using this term, do one of the following:
 - Be specific. Some members are against this suggestion as it may delay the approval process of new modalities
 - Use umbrella terms, such as behavioral or developmental. Add certain parameters under umbrella terms.
- Medically necessary treatment required
- Do we need to discuss changes to the wording in legislation affecting modalities?
 - Yes, the word “modality” is not defined in statute.
 - Suggestion to make the language broader in statute to make things more flexible without having to approve each individual modality

Peer mentoring discussion

How might the EIDBI advisory group help advance and encourage adults with ASD and related conditions to apply to be EIDBI providers?

- Have peer mentoring as part of the EIDBI benefit. This could be a wonderful opportunity and could be added as specific modality.
- Provide modalities that people with autism support.
- Post job openings in ways that people with ASD are likely to encounter them.
- Spread the word
- Consider that sometimes providers are limited in hiring those with ASD due to credentials and ability.
- In parent and provider meetings, highlight this as an option to families with transition- age children as well as to post-secondary schools to try to capture the large number of students with ASD who end up dropping out of school and college.
- Encourage providers that such an option exists.

How might DHS or other state agencies encourage adults with ASD and related conditions to apply to be EIDBI providers?

- Community partners such as state agencies and counties
- Information sessions and spread the word
- Trainings about preparation requirements
- Social media
- Explain the qualifications and experience and reach out from there
- Provider qualifications and the process should be accessible and attainable
- Ask the ASD community what it wants and needs
- Outreach for provider capacity

What could providers do to recruit and encourage adults with ASD and related conditions to apply to be EIDBI providers?

- Spread the word and advertise this specifically.
- Expand their services to include older children with ASD so when they transition into adults they know what it is and have a rapport built to encourage them to become the “teachers.”
- Outreach to self-advocacy groups and include broader outreach
- Involve adults with autism in development of services

- Access tax credits and offer incentives
- Mentor through the requirements and application process
- What can families and other adults with ASD do to encourage others to apply or explore this option?
 - This is hard because not a lot of older kids are being served under the EIDBI benefit as current providers are gearing toward younger children.
 - Communicate and use social media

Additional comments:

- The current EIDBI provider qualifications do not prohibit people with ASD from enrolling as providers.
- People with disabilities are the experts in how to live their best lives.
- People with ASD may be an EIDBI provider, at any level, as long as they meet the required qualifications.
- About 50,000 young adults with ASD enter adulthood each year.
- Approximately one-third of these people attend college; about 16,000 people with ASD enroll in school nationally.
- Estimates are that between 15 percent and 20 percent of students who enroll complete their programs. This means there are many people with ASD who are in college or have obtained a college degree.
- These people could be Level I or Level II providers depending on their degrees and experience.
- Reference: <http://www.statepress.com/article/2017/11/spcampus-low-retention-of-college-students-with-autism>
- People who have graduated from high school, are older than 18, employed by an EIDBI provider and complete the provider trainings (which can be done within the first six months post-employment) would be eligible.
- A person with ASD who had not graduated from high school but had one year's experience as a PCA, special education aide, waiver service provider or community health worker working with someone with ASD, would also meet the criteria.
- This means that there are many people with ASD who would meet the EIDBI provider qualifications, should they choose to pursue this career path.
- We should ask what adults with ASD want in their employment and which modalities they support.
- Providers also thought they could increase job postings on places that are accessible and frequented by people with ASD.

Department of Health grant proposal information and feedback

Elise Holmes of the special health needs team at MDH came to talk about a federal grant they are applying for:

- Grant would help improve access to early intervention, screening and care over the course of four years, work to reduce barriers that prevent early diagnosis of children to enable them to get access to services faster.
- Will be serving medically underserved (as designated by the federal medically underserved areas and populations [MUA/Ps])
- Question on how that is defined: It is a mathematical calculation that takes into consideration population-to-provider ratio, infant mortality rating, percentage under federal poverty level, etc.
- Would like to convene an advisory group and get stakeholder feedback from existing groups and communities
- Question on how they are recruiting for the advisory group: will put out a call for members and will likely try to incorporate everyone who is interested. Want a good mix of rural and urban, parents, advocates, providers, caregivers, state agencies, etc.

- Question on how this grant will address diagnosing girls more accurately and earlier. Will note in the needs assessment of the grant.
- Question on preparing people with ASD for the workplace. Will put emphasis on family navigator during times of transition like transition to employment to assist families.
- Question about if this also applies to other developmental disabilities: Will likely start to include other conditions as well. Will be reaching out to birth to age 3 and early childhood providers and schools.
- Trying to streamline the case management and coordination process.
- Direct additional comments and questions to Elise Holmes, elise.holmes@state.mn.us, or 651-201-3773.

Closing led by Gail Dekker

- Updates on member terms
- Next advisory group meeting: 10 a.m. to noon May 3, Room CC14, Conference Center A, Minnesota Department of Education, 1500 Highway 36 W., Roseville
- New member orientation will be 9 to 10 a.m. before the advisory group meeting.

To contact DHS, please email us at ASD.DHS@state.mn.us

Principles to participate

As a member of the EIDBI Advisory Group, I agree to:

- Respect others
- Attend scheduled meetings
- Complete assignments, if any, on time
- Participate constructively in discussions
- Collaborate in seeking solutions that meet the needs of all parties.

DHS commitment

As Disability Services Division staff supporting the work of the EIDBI Advisory Group, we will:

- Distribute agendas and supporting documents in advance of advisory group meetings.
- Provide documents in alternate formats upon request.
- Provide context, communicate clearly, and facilitate effectively at advisory group meetings.
- Be available to answer questions and address concerns between meetings.
- If there are assignments between meetings, allow sufficient time to complete the work requested.
- Consider your recommendations in the context of our legal authority and mandates, alignment with the Department of Human Services' strategic direction, and financial feasibility.
- Report back to the advisory group on the status of your recommendations as decisions are made.