

Friday, January 25, 2019
Public Meeting 11:00 a.m. to 1:30 p.m.
PUBLIC AGENDA

A regular public meeting of the New Jersey State Interagency Coordinating Council (SICC) was held on Friday, January 25, 2019 at the Public Health Environmental and Lab building in Ewing, New Jersey. The meeting was called to order at 11:13 a.m. by Catherine (Kate) Colucci, Acting Chair and declared a quorum was present.

ATTENDANCE – *Maintained by the Department of Health*

WELCOME/ANNOUNCEMENTS – Catherine (Kate) Colucci, Acting Chair
Kate welcomed attendees and read the Welcome Statement, Public Event Emergency Evacuation Procedure statement and public comment protocol. Comments will take place at the end of the meeting unless otherwise noted and are limited to three (3) minutes. Public comments may be submitted in writing to the acting chair to read aloud at the meeting. The SICC members are advisors that listen and record public comment; and may respond to public comment during the meeting or at another time.

INTRODUCTIONS – SICC members introduced themselves, followed by the public and the Department of Health (DOH) representatives.

APPROVAL OF MINUTES

Kate reviewed the new meeting minute format. Notes and comments will be summarized along with applicable action steps for SICC members. The previously distributed minutes of November 16, 2018 were unanimously approved. Six (6) Council members that did not attend the meeting abstained. The November 15, 2018 minutes will be posted to the SICC website.

LEAD AGENCY – New Jersey Department of Health (DOH)

Susan Evans, Interim Part-C Coordinator, presented the following information on behalf of the Lead Agency:

1. **Procedural Safeguards Office (PSO)** – A PSO report documented receipt of two formal complaints related to Family Cost Participation (FCP). These matters are currently under investigation. To date, the PSO has received 12 formal complaints and 2,552 informal complaints for State Fiscal Year (SFY) 2019. The DOH has created a technical team to monitor complaint trends to help identify potential training and needed support in the field.
2. **NJEIS Annual Performance Report (APR)** – the APR report is due to The U.S. Department of Education, Office of Special Education Programs (OSEP) by Friday, February 1, 2019. NJEIS experienced slippage in five of the six sub-categories in Indicator 3 – Child Outcomes. The slippage can be accounted due to the new matching

process between BDI Manager and EIMS. Operational slippage can be accounted by the Targeted Evaluation Teams (TETs) and Service Coordination Units (SCUs) due to the transition between the two data systems.

NJEIS Compliance - Chris Nogami-Engine, Monitoring Coordinator DOH, reported that compliance is set by OSEP at 100% and NJEIS must meet that requirement. This year, NJEIS needed to collect data from two systems (Covansys and EIMS).

- Indicator 1 was 97.56% and did not meet the 100% compliance.
- Indicator 2 is a performance indicator and not a Federal target. SFY18, 16 out of 21 counties exceeded the FFY2017 target of 99.89%.
- Indicator 4 looks at Family Outcomes (4A Know their Rights, 4B Effectively Communicate their Children's Needs and 4C Help their Children Develop and Learn). It is a performance indicator and DOH sets the standards. The new data system, EIMS was helpful in part that it had families' emails and as a result increased the response rate. Of the 4,214 surveys, DOH received 14.93%. The data collected showed a slippage in all indicators (4A, 4B and 4C).
- Indicator 5 (birth-one), December 1 Count, NJEIS met and exceeded their target, however below the National average.
- Indicator 6 (birth-three), NJEIS met and exceeded their target and is above the National average.
- Indicator 7 (45-day timeline) – is a compliance indicator set by OSEP at 100%; NJEIS experienced a slight slippage from the previous year.
- Indicator 8 (transition) – is a compliance indicator set by OSEP at 100%; NJEIS met the 100% compliance.

Kate motioned and the report was unanimously approved. Kate Colucci will sign the report on behalf of the SICC and Susan Evans will send to OSEP.

3. **Family Cost Participation (FCP)** – families are receiving invoices. The DOH and PCG will be sending a letter to families on how to read their invoice. The Commissioner of Health is working with the NJ Office of Banking and Insurance to assist families with NJ based insurance, if there are outstanding issues with receiving their insurance benefit. .

SICC members requested a written report on FCP from DOH. Members find the information helpful.

4. **EIMS Update** – Kate said that the SICC did not receive the PCG Priority List or Master Plan as discussed during the January 25, 2019 SICC Meeting; the information will be helpful to understand where EIMS is in their progress. Sandra Howell described the priority list (Deliverables 3 to 5), backlogs, revamping of the modules and the system testing. There are new deadlines for PCG scheduled for March 2019. Sandra stated she will email the details to the SICC. PCG representative, Pam, plans to attend the March 18, 2019 SICC meeting.

Discussion:

Kate Colucci suggested the REIC's compile a list of recommended enhancements for the purpose of understanding that there are certain problems being labelled as enhancements that are currently detrimental to the functioning of the Early Intervention System. For example, discipline specific practitioners cannot see one another's notes. She also suggested to collect concerns of what is working, not working from a wider audience that includes all key stakeholders. Kate also inquired about a timeline as to when functions and/or enhancements will be fixed. The information will be helpful to folks in the field and reduce anxiety.

Sandra Howell commented that DOH collects input from the REICs and gathers information about EIMS as to whether there is a function issue (typically a PCG matter) or an enhancement. Enhancements take time, money and the potential risks of disrupting the system to implement. Many field issues are related to enhancements and are not a PCG issue. At this point in time, the priority is to enter the logs so that folks get paid. EIPs need to send clean records. Records need to be complete and accurate in order for them to be uploaded.

Joyce Salzberg stated that her agency has over 30,000 logs to be entered. She has provided DOH with a list of Sunny Day's concerns. The complaints remain the same over the past 14 months. The glitches in the system impact the agency.

ACTION: *How can SICC further advise and assist DOH about EIMS?*

SICC members advocated the investing in implementing certain enhancements, in particular, those issues that affect quality. The sharing and/or viewing of records between team members are two of those issues, including families having access to their own record. In addition, it was suggested that DOH talk to those in the field about their experiences and difficulties using EIMS. From the SCU's perspective, they have been having issues with assessments and Form-25; it was suggested that someone from the DOH impersonate a SC to get a better understanding of their experience with EIMS.

Susan Evans reported that the original business rules for EIMS were designed eight years ago. The DOH recognizes that there were issues that were not working 14 months ago but are now working. The DOH is assessing all the needs and prioritizing them. Susan reported that the DOH conducted a training for TETs on EIMS and expect the roll out to

be soon. They are also working on Form-25 and plan to visit the Service Coordination Units (SCUs).

ACTION: *Susan Evans suggested that the SICC could hold a stakeholder's meeting which would provide the DOH with recommendations about the enhancements that were to be prioritized. She asked for a volunteer to identify the needed changes in EIMS that can help with the functionality of the system.*

Joyce Salzberg opened the discussion on recoupment. It was her understanding that it will begin in March. From her perspective, the State owes the EIP money. DOH should make a determination of recoupment on a case-by-case basis.

Sandra Howell discussed the plan for recoupment. EIPs will have different options for repayment. In addition, information about the options will be rolled out in different ways. There will be webinars for EIPS in February that will provide the overview of the options and how it works. Every EIP will receive a personalized letter listing their options and the outcome for each option. EIPs will have time to think about each of the options before selecting the one that works for them.

PUBLIC COMMENT - Kate briefly opened up the discussion to Public Comment:

David Holmes, ABCD – asked questions pertaining to the recoupment plan. He asked if there would be a period of time that the money (advances) be returned. He stated that EIPS are only functioning between 60% to 80% return from PCG, and have experienced up to a 30% loss. If DOH no longer provides advances, and EIPs are still not collecting 100% from PCG, how can DOH take money back when the EIPs are not receiving money? The advances was used to the EIP's pay their staff. EIPs are still behind and do not have a surplus in their books. Some organizations are at risk of going under. The system is not functioning as it should. The advances were needed and appreciated.

Sandra Howell explained that EIPs are now able to enter claims, more so than what they were able to do a year ago. The advances were provided based on the claims that EIPs were not able to enter, however, EIPs are now able to. The recoupment plan is individualized and based on the EIPs data. The three options are meant to accommodate the EIPs.

Chris Nogami-Engime explained that The Office of Management and Budget (OMB) had allocated \$44 million in advances and there needed to be a plan on how to return the funds. EIPs are being tracked in terms of their claiming rates. Some EIPs are at 150% claiming.

Yarona Boster, ARC of Essex, provided the following comments. She advocated for Form 25 to be in a draft format before it is finalized so that EIP Administrators have an opportunity to review it. It can provide better quality assurance and practitioner compliance for appropriate service justification and continued service eligibility. EIP administrators when impersonating a

practitioner can view every record in the practitioner's caseload, even those not affiliated with their EIP. Lastly, there are SCUs with high numbers of caseloads that severely limit their time to back enter older IFSP documentation and other events. SCs have been using their personal time (weekends) to back enter logs. The REICs also have limited staff to back-enter events into the EIMS system. She recommended that DOH offer additional staffing to assist SCUs and the REICs to enter back logs.

Eileen Masticova, Arc of Union, stated her agency is trying to understand how the DOH expects recoupment when there are still unclaimed bills since December 2017. The agency owes out more than the cash advances allotted. The EIP appreciates a roll out, but at this point in time, it does not seem possible for the EIP to be able to pay the advances back. Eileen expressed how her agency has already expended so much time and resources while at the same time trying to retain practitioners and still have months of unclaimed bills. The new EIM system and process has been very disheartening.

Virginia (Ginny) Lynn, Children's Specialized Hospital, reported that EIMS is not functional. She has difficulties running reports and it is almost impossible to run effective reports. She suggested that a business person also be on the stakeholder's committee that Susan Evans discussed earlier.

Maria Cassella, Kaleidoscope, stated that it has been an extremely challenging year for her EIP. She stated that it is impossible for her to think about recoupment when her EIP is still not able to bill at 100%. The SCUS are still trying to enter December 2017 IFSPs. The agency still cannot bill for those six months (December 2017 through May 2018). The agency is not receiving the income from billing that has not yet happened. This is serious and disheartening. Writing progress notes is another real issue – everyone is doing different things. EIPs were given the directive to “figure it out.” If the family wants a hard copy of it, the EIP needs to provide it to the family. There were severe design flaws with EIMS which also has impacted families. There needs to be a better way in getting progress notes to families. Agencies cannot generate service log reports or run a query by practitioner. Those of us out in the field need it to work. The EIP had to go to an outside vendor not only for reports but to help reconcile the billing. For newer families coming into the system, it has been better.

Maureen Archibald, Hudson County SCU, described the challenges her large SCU has had to encounter due to EIMS. The unit has had difficulty with the retention of staff and compensating those working over their regularly scheduled time. The SCs need a reduction in their caseload as well as the opportunity to backlog. She suggested the REIC take on more of the entering of the backlogs. Maureen suggested that administrative assistants be given permissions to help enter backlogs; at this time, they are currently restricted to do so.

Mary Thalacker, ARC of Warren County, offered the ARC of Warren as a model since they have all the stakeholders (TET, EIP and SCU) for those to see the glitches each encounter utilizing EIMS.

5. REIC Update

- Child Find Project – The Birth Defects Registry
Jennifer Buzby reported that the REICs have partnered with the birth registry. The Registry provides families with the NJEIS developmental brochure. The purpose is to increase appropriate referrals of children ages birth to one.

SICC Standing & Ad Hoc Committees

1. **Administrative/Policy** – Chanel McDevitt, Chair – no report
2. **State Systemic Improvement Plan (SSIP)** – Rosemary Browne, Chair – no update
3. **Service Delivery** – Joyce Salzberg, Chair – Joyce reported that the committee met on three occasions at Sunny Days Corporate office. The group discussed virtual therapy and concluded it can be a viable option and suggested NJEIS adopt it. The group also discussed issues with EIMS and the financial consequences and impact it has had on agencies, staff and SCUs. The group inquired how other states address the process, documentation and service delivery of services provided and as a result contacted Sharon Walsh. She has agreed to speak with the group on 2/7/19. Comments will be on record.
4. **Higher Education** – Kate Colucci, Chair – reported that the Committee is investigating mentorship programs across disciplines throughout the state. The idea is for EIP practitioners to act as mentors for students. There is a need to identify mentor volunteers as well as assistance for recruitment.
5. **Old Business:**
 1. Ethics Training – needs to be conducted annually and completion document emailed to Carmela
 2. NJEIS Mission Statement – report from Danielle Anderson Thomas (not available) – no report
 3. SICC appointments - Kate Colucci reported that the Governor’s office has been approached to appoint potential members. No word as to when it will happen. Kate stated the SICC needs an official Chair as opposed to an Acting Chair and does not know where that stands as well. The Council also needs 20% family membership representation.
 4. **SICC response to November 16, 2018 public comment**, pertaining to:
 - The committee’s role advocating on behalf of EIPS to approach the Health Commissioner in regard to continuing advanced payments, and
 - Damages to be awarded to EIPs due to expenses incurred as a result of the PCG/EIMS implementation

Kate opened the discussion asking what is the role of the SICC (i.e., advise and assist or advocate on behalf of EIPs/SCUs?)

Joyce Salzberg offered her opinion as an EIP. She stated that EIPs need advances and it should be provided. She asserted that every EIP can demonstrate damages incurred as a result of PCG/EIMS. For example, EIPs have had to hire additional staff.

Susan Evans suggested that if the Council has heard public comments over a period of time in regard to system issues and if it has some advice to provide to DOH, what would the recommendations be?

SICC members discussed the possibility of again meeting with Jackie Cornell to address the ongoing issues with EIMS.

ACTION: *Joyce Salzberg has volunteered to coordinate and attend a meeting.*

Sandra Howell stated that the DOH needs to see details, specifics and need documentation that demonstrate damages from the EIPs. There is a difference between “damages” as opposed to adjustments to a new business model.

Kate Colucci stated that more information was needed before approaching the health commissioner. She inquired if there was anyone who wanted to head up the effort.

ACTION: *Volunteer needed to collect information.*

Joyce Salzberg stated she has gathered information and she has been working with ABCD and other EIPs and zeroing in on the losses they experienced (hiring temps, new staff, loans, etc.). Joyce has agreed to gather information.

- Kate Colucci reported that Cynthia Newman addressed the ACT Early poster at the last SICC meeting (11/16/18) and that Joe Holahan volunteered to address the concerns of the content of the poster. Per Kate, Joe had contacted Fran Gallagher from the Association of American Pediatrics (AAP) and together drafted a response with concerns of the poster for the SICC review. Susan Evans reported that the commissioner had received the letter from the AAP and there are discussions on possible changes to it.
- SICC Retreat - discussion on the date and location ensued. It was determined the July 19, 2019 will remain as is. Sandra Howell recommended a location called, Mate’s Inn.

ACTION: *Need a committee to refine retreat details, to discuss at the March SICC meeting.*

- Part C Coordinator position update – the position has been posted twice and DOH is now on first round of interviews. The hiring process can take a period of time.
- Susan Evans reported the that the recent Federal shutdown has not affected NJEIS and the federal funding remain the same as last year (11.5 million). SNAP and other programs have been affected by the Federal shutdown

- DOH received a letter from OSEP with their three findings in reference to cost-share. NJEIS needs a more proactive approach in monitoring how they collect cost share, how the information is retained in the system. There may be some changes in the FCP Handbook.

6. New Business

- During the January 2019 SICC meeting discussion on creating a committee to address public comment and SICC responses. Joe Holahan and Joyce Salzberg discussed the matter and agreed to leave the policy as is.

7. Public Comment

David Holmes, ABCD, inquired whether or not DOH submitted their budget. He stated that the last increase folks had was twelve years ago and wanted to know if an increase was included in the budget. He hoped that DOH would bring the topic up to the commissioner for the increase.

Sandra Howell responded to David and reported that there is a template with information that is entered. Her office does not always know what has been accepted. The commissioner works from a priority list. DOH advocates and will provide additional information on increases.

Adjournment: 2:40 p.m. upon motion by Kate Colucci, and unanimously carried.