

INTERAGENCY COORDINATING COUNCIL (ICC) June 2020 ZOOM MEETING MINUTES



MEMBERS PRESENT

Camila Gutierrez, April Spaulding, Andrea Leon, Sophie Bertrand, Kathy Hughes, Janis Gonzales, Paula Sanz, Lula Brown, Naomi Sandweiss, Angelique Tafoya, Felicia Juarez, Khaki Cooper, Julie Maner, Carmen Armenta, Christie Guinn, Marc Kolman, Rebecca Dow, Autumn Bruton

MEMBERS ABSENT

Justina Stewart, Catherine Quick, Dana Malone

PROXIES PRESENT

Kristi Halus Proxy for Joanne Corwin

OPENING

April Spaulding, ICC Co-Chair, welcomed ICC members and guests and reviewed housekeeping for the ZOOM meeting. ICC members and guests introduced themselves by typing their name and agency in the chat box.. April asked for a motion to approve the Meeting Agenda. ***MOTION: Kathy Hughes made a motion to approve the meeting agenda. Celina Waller seconded the motion. There were no objections or abstentions. The motion passed.***

ICC CONSENT AGENDA

April Spaulding asked for a motion to approve the Consent Agenda which consisted of the January Meeting Minutes and the ICC Financial Report. ***MOTION: Celina Waller made a motion to approve the January Meeting Minutes. Andrea Leon seconded the motion. There were no objections or abstentions. The motion passed.*** April asked for a motion to approve the ICC Financial Report. ***Kathy Hughes made a motion to approve the ICC Financial Report. Celina Waller seconded the motion. There were no objections or abstentions. The motion passed.***

ICC PARENT PANEL

Camila Gutierrez, ICC Co-Chair, introduced the three Parent Panel parents, Erin, Ceslie, and Miranda. The parents have been asked to share how their virtual FIT services are meeting their child and family needs.

Miranda's 3 year-old son, Titus, has autism. FIT early intervention services have been an excellent experience for the entire family and virtual services worked well. Their service providers were Titus's first friends. The family had goals to work on during the week and strategies were most helpful. We were able to discuss concerns and issues with our team. We received lots of feedback, ideas, and

support so we were able to implement strategies.

Erin's son, Dante, will be 16 months old in a week. Dante was two months premature. We began early intervention services a year ago. Our services and team are awesome. We did not want our home visits to stop because Dante is so social but our virtual visits are working. Dante recognizes our developmental specialist's face on the screen. We face time with her. We are working on crawling and tummy time. Dante had a G-tube which delayed his tummy time and crawling. If Dante was younger, our virtual visits would not work well. We use the Ipad and phone as motivators to engage him in activities. Our team has helped us make progress and Dante is now able to roll over and crawl. Our team has been available to us and they are so interested in Dante's progress. We had a UNMH appointment to see a speech therapist and our early intervention SLP joined our appointment via ZOOM. Dante is learning to eat. His SLP uses an Ipad to support us in helping Dante learn to eat.

Ceslie's son is 3 years old and transitioned earlier this month. He was referred to early intervention because he had a processing disorder and was toewalking. He now has an autism diagnosis. Our entire team supported us. COVID hit and our team rolled out a plan and we had Zoom services going within a week. Our Family Service Coordinator checked in with us to make certain services were going smoothly. We were concerned about face to face services stopping and losing momentum. My son does not like the computer but he would sit and attend for ten minutes. Our SLP would listen to our conversation and provide input. Our team met every week to discuss what was working or not working and to make certain my son was not regressing. We worked on goals to help address his behaviors. The team worked individually and then together on his behaviors. Our team included my daughter and it was amazing to see my son and daughter grow together. Our team helped us grow as a family and helped our son use his words and not throw tantrums. I can't say enough good things about how fast our Zoom services started. During transition, my team was there for us. The school set up a Zoom meeting and our whole team participated and helped me advocate for my son being in a least restrictive classroom. Early intervention was a positive experience because we had people who cared.

ICC Comments/Questions:

Sophie Bertrand – How did you hear about early intervention?

Miranda – Our child's pediatrician referred us. We were scared and didn't initially want services. We were referred a second time and did begin services. Our team was so helpful and supportive.

Erin – Dante was In the NICU for 80 Days. The NICU made the referral to FIT. We have always wanted to be a part of anything that could help Dante. We recently brought Dante to Colorado for a second opinion about his continued use of oxygen. Our developmental specialist joined us at the appointment via phone. Our family did not know how to help a baby with special needs so our services are so important.

Sophie Bertrand – How was your transition planning?

Ceslie – We recently went through transition planning. Our family lives in a large school district. I asked my FIT team in March how we could make certain that he was transitioned into a least restrictive class. Our developmental specialist and family service coordinator took care of transition. The school wrote a draft IEP which I did not approve. I called an emergency IEP meeting via Zoom. Our team participated in the emergency IEP meeting. Our son has the best IEP possible.

Camila Gutierrez – Asked the parents if they would recommend early intervention right now because services are virtual.

Miranda - Would definitely recommend early intervention services. Our FIT team became our child's friends. We could talk to them about our problems and struggles and how to get past humps. Their ideas and feedback were so helpful..

Erin – Would wholeheartedly recommend early intervention services. We see our team members faces and smiles over Zoom and we make an electronic connection.

Ceslie – I am currently recommending FIT services to friends whose children have developmental struggles. I suggest they start now and not wait.

Camila Gutierrez – Thanked the parents and stated FIT families are the reason we are here. It was reassuring to hear that virtual services are working for FIT children and families during this unprecedented time. Parents Reaching Out (PRO) has NICU staff at UNMH and a support group for the Lovelace NICU.

EARLY CHILDHOOD EDUCATION & CARE DEPARTMENT (ECECD) UPDATE

Secretary Elizabeth Groginsky & Assistant Secretary Jovanna Archuleta – Thanked the ICC for the opportunity to attend the ICC meeting. Secretary Groginsky thanked the parents on the panel for sharing their experiences with virtual early intervention services. She appreciated hearing that FIT early intervention services are supporting parents in advocating for their children. Secretary Groginsky highlighted key points shared by the parents that included the importance of starting services early and the importance of supporting families to lead their early intervention teams in achieving what is best for their children. She commended FIT families and FIT service providers for their adaptability and flexibility in quickly moving from services that were face-to-face to virtual services. Secretary Groginsky announced that Kathey Phoenix-Doyle was the new Bureau Chief for the Family Support and Early Intervention Division. Mayra Acevedo will be the new Division Director. FIT, Home Visiting and Families First will be in the division. Secretary Groginsky asked the ICC how the ECECD can best support them in their work. Kathey Phoenix-Doyle has been working on COVID safe practices. Providers and families want to get back to face to face services as soon as possible.

Questions/Comments:

Has ECECD considered the impact of masks on speech and social emotional development?

Secretary Groginsky – Kathey Phoenix-Doyle and Dr. Janis Gonzales are researching the use of clear face shields. Caregivers are finding ways to take their masks off when farther away from a child. This issue is especially important for children who are hard of hearing.

Assistant Secretary Jovanna Archuleta – Children rely on facial expressions and we will come up with creative solutions to keep our children developing in a healthy manner.

Autumn Bruton – Works as an occupational therapist in rural New Mexico. Most people understand the purpose of preschool services but there is a lack of understanding about the value of early intervention services. Some physicians will not refer to early intervention because they think the child will “outgrow it”. What are ECECD strategies for promoting FIT services?

Secretary Groginsky – ECECD is focused on the early years. We need to get family stories about the benefits of early intervention services into videos and on our website. The first 1100 days of a child’s life sets the trajectory of their future. We need to be more explicit in what early intervention is.

Assistant Secretary Jovanna Archuleta – We will promote FIT through word of mouth, social media, and newsletters.

April Spaulding – Early intervention programs are concerned that the FIT Program will be lost in ECECD. What efforts will be made to make certain this does not happen?

Secretary Groginsky – Early intervention is “near and dear to my heart”. Has had lots of experience with early intervention services and understands the importance of the services, the role of the family, the role of the providers and the community. The FIT Program will be an ECECD asset. FIT has an incredible team of early intervention programs across the state who are locally embedded in communities. FIT is one of the larger programs in ECECD as FIT serves over 16,000 children. Every program will have a tribal liaison. ECECD Division Directors and Assistant Secretary Aruchuleta will meet frequently with the tribal liaisons. We appreciate how early intervention is so family and community centered. We all share those values.

Kathy Hughes – How close are we to the roll out of face to face services?

Secretary Groginsky – We are close. Protocols will have to be in place.

Kathey Phoenix-Doyle – Will discuss roll out in the Lead Agency Report. We are very close.

Karen Lucero – Asked about the continued ability to provide telehealth at the community rate.

Secretary Groginsky – We will be discussing telehealth rates with our partners at HSD. We want to support flexibility while under the public health emergency. Face to face services mixed with

telehealth is a possibility. Governor Michelle Lujan Grisham wants the cabinet secretaries to come together to address issues that keep New Mexico 50th in child well being.

Julie Maner – Every early intervention program has access to the state schools, the New Mexico School for the Blind and Visually Impaired and the New Mexico School for the Deaf.

Christie Guinn – Telehealth will be allowed to be billed at the home and community rate because that is the location of the child.

Secretary Groginsky – Very grateful to have Kathey Phoenix-Doyle at the helm and in the bureau chief role.

April Spaulding – Providers fear liability for staff and families. Has the ECECD considered support regarding liability waivers?

Secretary Groginsky – Child care asked this question. They were asked to consult with own general legal council, insurance company, and board of directors.

Angelique Tafoya – What are the plans for testing our staff?

Secretary Groginsky – This will be included in the guidance for the face to face roll out. All child care staff have to be tested because of licensing regulations. The Governor is encouraging most people to get tested. It is free of charge. Test only tells us how on test day.

Kathey Phoenix-Doyle – Guidance will be provided. We will encourage everyone to be tested.

Angelique Tafoya – We are different from child care centers. Our staff go from home to home. How often will our staff have to be tested?

Secretary Groginsky – Guidance will be in the roll out. Get tested as often as you want. Guidance will include checking temperature, wearing a mask and staying 6 feet apart if possible, and doing visits outside if possible. You may want to wear surgical masks and gloves.

Kathey Phoenix-Doyle – All the states are looking into this question. States are requiring or strongly recommending testing. Some states are limiting the number of visits during a day.

April Spaulding – How would the ICC like to advise FIT and ECECD on testing?

Secretary Groginsky – That would be very helpful.

Camila Gutierrez - What are the thoughts of the families? Some families have several people in the household.

Secretary Groginsky – We should have the ICC review and edit the draft guidance.

Angelique Tafoya – There are so many programs and It would be most helpful if the guidance is program specific.

Secretary Groginsky – Would you consider home visiting and early intervention the same?

Angelique Tafoya – There are many similarities but we will need to be specific about early intervention.

Angelique Tafoya – We were so grateful to get the \$1 million. Thank you for your support. In thinking about the next legislative session, how can the ICC best advocate for the money that was not secured for the FIT Program? What are your thoughts about advocating in the current climate?

Kathey Phoenix-Doyle – We asked for \$2.5 million and received \$1 million.

Secretary Groginsky – Have families talk with their legislators. Be visible and talk with your legislators early. You have legislative champions. Representative Dow is a great advocate. We already know at least one billion dollars will have to be cut. It is going to be a tough legislative session. What can we trade off? Can we look at our eligibility? We hope to see no cuts but we have to be realistic. The ICC should discuss this and identify where we are willing to cut and where we are not. Rates are a place where we can't compromise. We have to keep improving rates so we have a qualified workforce. There may be changes in other areas to preserve rates and still keep families well-supported in the prenatal to 5 period.

Autumn Bruton – In the last legislative session, we heard money was added to Pre-K. Sometimes legislators don't understand the difference between Pre-K and early intervention.

Secretary Groginsky – We are hoping our new website will help. We need to invest in our infants and toddlers. We have a real opportunity to talk about the importance of the first 1100 days in a child's life as being the most critical for their long term development.

Kathy Hughes – Need to educate others on the purpose of early intervention and what early intervention is.

Secretary Groginsky – Has a transition committee that meets monthly. Membership includes national experts, business leaders, Ericson Institute, department secretaries and Republican and Democratic legislators who are working together to help develop an 18 month action plan. Gaps in development start as early as 9 months. By 18 months these gaps are solid. K-12 is designed to educate children one year at a time. We must use a developmental approach, not a K-12 approach. A child's learning begins at birth with relationships. When babies need extra support, early intervention, home visiting

and Families First programs are there to help. The ICC can help us elevate this message.

Camila Gutierrez thanked Secretary Groginsky and Assistant Secretary Archuleta for coming and for their support.

ICC PARENT PANEL REFLECTION

Kathy Hughes – Enjoyed hearing positive feedback about telehealth and that virtual services are beneficial to children and families.

Celina Waller – Appreciated hearing that coaching families on implementation of strategies is working well.

Sophie Bertrand – Always feels proud of the system when she hears early intervention teams are supporting families. Programs are doing a good job. We need families to promote FIT at a wider community level. We still have work to do on transition. The one family's transition experience was confusing. Concerned about the gap in service between FIT services ending and school services starting.

Autumn Bruton – Families felt supported by their teams and were able to implement the ideas and strategies. I wish my team could hear these stories.

Kathy Hughes – Enjoyed hearing that the team helped the parent make certain the child made progress and did not regress and the sister was included.

April Spaulding – Even when the child does not engage with the screen, the provider can still observe, listen, provide feedback and strategies to the parent. Virtual services are working.

Julie Maner – Early intervention programs were well prepared because we had done groundwork with Larry Edleman on the use of technology.

ICC COMMITTEE REPORTS

Finance & Funding – Angelique Tafoya reported. The committee met in June to review rates. We made no changes to the rates we recommended. The recommended rates are in the committee's report. Angelique thanked the committee for their work. The next meeting is July 16th from 1:00 to 3:00 via ZOOM. Email Angelique or Janis Gonzales if you want to join the committee. The telehealth rate was approved at the home and community rate through August. We can bill for the second hour of service coordination through June 30. The committee is asking the telehealth rate to follow the child wherever the service is being provided. The committee is asking the ICC, FIT providers and FIT families to advocate for more funding for FIT during the legislative session and to increase legislator understanding of FIT services.

Autumn Bruton - Asked if the ICC could develop a position statement regarding the rate for telehealth so that it aligns with the HSD rate.

Christie Guinn – The Medicaid center said the telehealth rate should be billed where the child is, not where the provider is.

Kathey Phoenix-Doyle – The Lead Agency Report will have that announcement in it.

April Spaulding – FIT is in alignment with HSD in that services are billed where the child is.

Autumn Bruton – That addresses my question.

Kathy Hughes – Will this be stated in standards?

Kathey Phoenix-Doyle – Yes, It will go in the standards.

Angelique Tafoya– There is no need for a statement from the ICC.

Rebecca Dow – During the special session, ECECD was given an overall cut. How about we don't do the new expansion of Pre-K slots if it means cuts to other programs such as FIT or Home Visiting. We should sustain what we have instead of adding new slots. We need to keep our base whole.

Quality – Lula Brown and Celina Waller reported – The committee was thanked for all the work accomplished this year. The committee meets monthly. The committee created a draft Child Record Review form and discussed questions about the standards and prior authorization. The committee report includes the committee's notes and recommendation to the ICC. Celina thanked the committee for their review of and work on FIT Service Definitions and Standards.

Kathey Phoenix-Doyle – Thanked the Quality Committee for their hard work aligning FIT documents with service standards and requirements.

Legislative Advocacy – Nikki Ornelas - No work to report. The committee has not met since the last ICC meeting.

April Spaulding – The *Work Force Committee and the Services for Native American Families Committee* had no work to report. April asked for a motion to approve committee reports.

MOTION: Angelique Tafoya made a motion to approve ICC Committee Reports. Kathy Hughes seconded the motion. There were no objections or abstentions. The motion passed.

LEAD AGENCY REPORT

Kathey Phoenix-Doyle reported using a FIT data report. There was a decline in the number of children referred each month. Expenditures and costs per child is taken from FIT KIDS. In

March, April, and May, FIT served fewed children, but because of the second hour of service coordination, the cost per child did go up. The December 1 count is a one day count of all the children under 1 year, and all the children under 3 years, served on December 1. The FIT Program received the determination letter from OSEP. FIT received a meets requirements which is the highest rating. The ICC looks at the APR during the January meeting. The APR reflects everyone's work and congratulations to everyone for achieving the highest rating. We hope to have an announcement soon about resuming face to face services. The first phase will be child care settings, office setting CMEs, and outdoor settings. Kathey would like ICC input on testing. Agencies have been asked how much time would they need to put COVID safe practices into place so they could resume face to face services. Some have said they would need one day and others said they would need two weeks. FIT will be transitioning from DOH to ECECD tomorrow. It has been a long journey with DOH. Marc Kolman was thanked for his support, leadership and going to bat for FIT within the DDS. FIT will be a part of Family Support and Early Intervention Division. FIT's Albuquerque staff will be relocating to the Maloof Building when not teleworking. Email and phone numbers will stay the same for awhile. The toll free number and the fax line will stay the same.

Proposed rate increase – FIT Program was allocated \$1 million for the rate increases and we were able to keep this. Several different rate options were sent to the ICC Finance Committee for review/discussion and they submitted their recommendation to FIT. FIT accepted the Finance Committee recommendation and forwarded it to Medicaid. FIT Service Definitions and Standards were updated so that ECECD replaced DOH and Family Support and Early Intervention Division replaced DDS. Standards were aligned with TA documents and Regulations. The updated standards will go out this afternoon. Telehealth is remaining for audio only. We will go back to audio and video when the health emergency is over. Telehealth is billed at the home and community rate. We are working to get FIT KIDS changed as quickly as possible so we can track telehealth.

RECOGNITION

Kathey Phoenix-Doyle commended Deb Vering for all the work she has accomplished on behalf of the ICC and the work she continues to accomplish for all DDS programs. It has been an honor to work with Deb. She has helped the ICC understand FIT's budget and expenditures and she has been an advocate for the FIT Program.

April Spaulding – The ICC and the FIT Program have been fortunate to have Deb on our team. The ICC had a plaque made for Deb to thank her for her service to New Mexico's children and families. The plaque has art and language from one of the children in early intervention. The FIT Program has been fortunate to have Deb as a champion and the new department has big shoes to fill.

Deb Vering – Thanked the ICC. The plaque is beautiful and she will cherish it forever. She oversees eight programs within DDSD. FIT has always been her favorite program. There have been lean financial years that improved over the past three years. Deb commended the leadership of DOH and the excellent writing skills of Kathey Phoenix-Doyle and Marc Kolman which helped obtain legislative funding. Deb knows the new fiscal manager for the Early Childhood Education and Care Department and FIT finances will be in good hands.

FIT FINANCIAL REPORT

Deb Vering reported. A copy of the report will be emailed to the ICC after the meeting. The top section of the report shows FIT revenue and the bottom half shows FIT expenditures.

FIT Expenditures

Category 200 – Salaries and benefits.

Category 300 - Contracts

Category 400 – There is \$83,600 for Operating costs. The rest is for Provider Agreements which are the biggest expenditure in this category.

Category 500 – State Medicaid Match. This category will impact ECECD in 2021.

In FY19, Provider Agreements expenditures included \$456,236.34 in prior year recoupments due to a Medicaid code error. DDSD received a FY19 Supplemental in the amount of \$2,641,000.

In FY20, DDSD requested a Supplemental in the amount of \$1,000,000 dollars for Category 500 and received \$500,000. Due to the COVID enhanced FMAP Rate, the State Match is much lower than previously projected. In FY20, DDSD requested Rate increases in the amount of \$5.1 million and received \$2,600,000. DDSD receive a FY20 Base Increase of \$2,650,000. Breakdown: Category 400 - \$2,600,000; Category 500 - \$50,000. The FY21 Projected Expenditure Growth is 5.7%.

Since 2008, funding from other DDSD programs has been used to supplement FIT. ECECD will experience this in FY21. The projected shortfall did not happen as March, April and May claims were \$1.3 million. We will have a surplus of SGF and savings from federal funds so ECECD will have a surplus to cover a shortfall. This surplus cannot be used for the state Medicaid match. We have a projected shortfall of \$480,912 in the Medicaid match but the \$500,000 supplemental will offset this. When the \$500,000 supplemental is incorporated, there will be a surplus of \$19,000. Deb recommend that ECECD request a supplemental in the amount of \$1,000,000 dollars. Without this supplemental, FIT will be short \$1,000,000. If ECECD received any cuts, it is hoped that these cuts will not come out of FIT.

Secretary Groginsky –Thanked Deb for the in depth presentation. Asked Deb to meet with the new division director and ECECD fiscal people. Deb was thanked for her service and leadership.

Deb Vering – She and her team will be available to Secretary Groginsky and her team to assure that the transition is successful especially when the invoices start coming in. All provider agreements have been signed and submitted. All of the contracts will be in place by July 1. We are still working on the UNMH addendum. FIT will be able to hit the ground running in regards to services.

Christie Guinn – HSD is anticipating an FMAP increase of 6.2% that will continue for the July to September quarter and maybe beyond that.

Angelique Tafoya – Asked for the documents and forms that Deb Vering and Kathey Phoenix-Doyle covered today that were not sent out with meeting documents.

Kathey Phoenix-Doyle – Will email the PowerPoint and Deb Vering's charts.

Angelique Tafoya – FIT is an entitlement program. I am concerned about what will happen if FIT needs to be bailed out financially by ECECD. Who at ECECD will take Deb's role in communicating with the ICC and the ICC Finance and Funding Committee? Will this person come to ICC meetings?

Kathey Phoenix-Doyle – The plan is for the ICC Finance and Funding Committee Plan to meet everyone. We want the same relationship we had with Deb Vering. We have to know the funding to be able to make good recommendations. The ICC would like to keep a DDSD position on the ICC but this is not in the Bylaws yet.

Marc Kolman – FIT was a DOH program for well over 30 years. The ICC is a testament to this relationship. The Parent Panel is a testament to what FIT has grown into and accomplished. There was profound wisdom in creating ECECD and FIT's status within the department will be elevated. He will continue on the ICC. He congratulated Kathey for her promotion to Bureau Chief. Marc commended Kathey's leadership and commended the work of FIT staff over the past several months to support the transition. Deb Vering was commended for her excellent work to support FIT's transition to ECECD.

Camila Gutierrez thanked Marc Kolman for his support and leadership.

Motion: Kathy Hughes made a motion to approve the Lead Agency Report. Angelique Tafoya seconded the motion. There were no objections or abstentions. The motion passed.

PUBLIC COMMENT

Angelique Tafoya – Would like the ICC to review and offer feedback on program specific testing requirements. ***MOTION: Angelique Tafoya made a motion to have the ICC review***

and provide feedback to ECECD on program specific testing protocols. Kathy Hughes seconded the motion. Following discussion, Angelique amended the motion to have the ICC review the draft COVID protocol and email their input to the ICC Executive Committee to compile and send to Kathey Phoenix-Doyle. There were no objections or abstentions. The motion passed.

Autumn Bruton – Asked about the ICC September Retreat.

April Spaulding – The Executive Committee will plan the retreat in August. The ICC was asked to hold the dates September 23-25.

ANNOUNCEMENTS

There were no announcements.

MEETING REFLECTION

What worked:

ICC consensus was that the Co-Chairs, April and Camila, did a phenomenal job!

MOTION: Kathy Hughes made a motion to adjourn the meeting. Angelique Tafoya seconded the motion. There were no objections or abstentions. The motion passed and the meeting was adjourned at 12:14 pm.

FOLLOW UP MEETING TASK

ICC to review draft COVID protocol and email input to ICC Executive Committee to send to Kathey Phoenix-Doyle.