



WCCMH Provider Meeting
April 20, 2021 Minutes 10:00 AM to 12:00 PM
Via Zoom

Meeting Minutes: Delissa Weston

AGENDA ITEM	DISCUSSION POINTS	ACTION/OUTCOME
I. State and Local Updates	<ul style="list-style-type: none"> Trish Cortes 	<ul style="list-style-type: none"> There is a proposal coming out of the Michigan Senate, led by Senate Majority Leader Mike Shirkey, that would shift the management of care for hundreds of thousands of residents from a publicly run program to private insurance plans. Advocacy is continuing to help support the direct care workforce. In some areas of the State, there are concerns that direct care workers and guardians are not taking advantage of the COVID-19 vaccinations. With the increase of Medicaid-eligible individuals (due to the pandemic), the region is doing well financially. MDHHS is moving forward with the implementation of Certified Community Behavioral Health Clinic (CCBHC).
II. CLS Assessment Tool	<ul style="list-style-type: none"> Louise Hayward 	<ul style="list-style-type: none"> There was a presentation on how our clinical teams will complete the CLS Assessment Tool. The CLS Assessment Tool is not required to be completed by providers. However, it can be beneficial for CLS providers to complete it and share with your SC/CSM (if time permits).
III. Telehealth Update	<ul style="list-style-type: none"> teRi Derosé 	<ul style="list-style-type: none"> There was a presentation on how to navigate our website in order to do Medication Reviews with our Prescribers.
IV. Medication Administration Training Update	<ul style="list-style-type: none"> Brandie Hagaman 	<ul style="list-style-type: none"> A friendly reminder that after the staff complete the medication training, please send in testing materials, <u>as soon as possible</u>. To register for the Medication Administration training, please email Lindsay Gibson, gibsonl@washtenaw.org, or Brandie Hagaman, hagamanb@washtenaw.org.
V. ORR Update	<ul style="list-style-type: none"> Leah Raehtz 	<ul style="list-style-type: none"> Please see attached instruction sheet on how to navigate the ORR online training. Please contact Leah at Raehtzl@washtenaw.org if you are having trouble or questions regarding the Recipient Rights' training.
VI. CLS Request Module	<ul style="list-style-type: none"> Sara Hungerford 	<ul style="list-style-type: none"> The CLS module is in CRCT and CLS providers are expected to use it when additional hours are being requested. If you have questions please contact Sara Hungerford at hungerfords@washtenaw.org.
VII. CRCT Reports	<ul style="list-style-type: none"> Sara Hungerford 	<ul style="list-style-type: none"> The following reports are now available in CRCT: <ul style="list-style-type: none"> - Authorization report #1020c - Claims report #1002c - IPOS report #1003b

		<ul style="list-style-type: none"> • Please contact Sara Hungerford at hungerfords@washtenaw.org if you would like your staff to have access to these reports.
VIII. Unbundling Transportation	<ul style="list-style-type: none"> • Sara Hungerford 	<ul style="list-style-type: none"> • The unbundling of transportation is postponed until Fiscal Year 2023.
IX. Say Something Positive	<ul style="list-style-type: none"> • Everyone 	<ul style="list-style-type: none"> • Scott from Renaissance is very optimistic about the change of the weather and offered encouragement to everyone. • Katie Hoener is thankful for the providers who were able to respond quickly in regard to getting clients vaccinated. • Laurie from Synod hired a new staff. • Vicki from Saints is thankful for her team. She also added that even though times are tough right now, "we are still here."
Next Meeting	July 20, 2021, Via Zoom, 10:00am–12:00pm	Future agenda items: None suggested.

**Washtenaw County Community Mental Health
CLS Assessment Tool**



Supervisor Signature

Date

**Washtenaw County Community Mental Health
CLS Assessment Definitions**

CLS	<p>Community Living Supports are used to increase or maintain personal self-sufficiency, facilitating an individual's achievement of his goals of community inclusion and participation, independence or productivity.</p> <p>Coverage includes:</p> <ul style="list-style-type: none"> ○ Assisting, prompting, reminding, cueing, observing, guiding, and/or training in the following: meal preparation, laundry, routine household care and maintenance, activities of daily living, shopping for food, and other necessities of daily living. ○ Staff assistance, support, and/or training with activities such as money management, non-medical care, socialization and relationship building, transportation to community activities, participation in regular community activities and recreation opportunities, attendance at medical appointments, and shopping. ○ Reminding, observing, and/or monitoring of medication administration. ○ Staff assistance with preserving the health and safety of the individual in order that they may reside or be supported in the most integrated, independent community setting. ○ For children and youth younger than 18: This service provides skill development related to activities of daily living, such as bathing, eating, dressing, personal hygiene, household chores and safety skills; and skill development to achieve or maintain mobility, sensory-motor, communication, socialization and relationship-building skills, and participation in leisure and community activities. These supports may serve to reinforce skills or lessons taught in school, therapy, or other settings. <p>Coverage excludes:</p> <ul style="list-style-type: none"> ○ Transportation to and from medical appointments (covered by Medicaid through MDHHS or the Medicaid Health Plan). ○ CLS services may not supplant services otherwise available to the beneficiary through a local educational agency, or personal care provided by DHHS Home Help or DHHS Expanded Home Help. CLS may be used for personal care while the beneficiary awaits determination of the amount, scope and duration of Home Help or Expanded Home Help. ○ For children and adults up to age 26 who are enrolled in school, CLS services are not intended to supplant services provided in school or other settings or to be provided during the times when the child or adult would typically be in school but for the parent's choice to home-school.
Personal Care	<p>Hands-on, physical assistance assessed and authorized by DHHS Home Help and/or DHHS Expanded Home Help in the areas of eating or feeding, bathing, dressing, grooming, moving throughout the home, transferring from one position to another, using the toilet, administering medication, laundry, light housework, meal preparation, and shopping for essential items.</p>
Unpaid Supports	<p>Natural supports or community supports not paid to provide assistance in areas covered by CLS or Home Help.</p>
PERS	<p>Personal Emergency Response System used to monitor health and safety via landline phone connection.</p>
Community Based	<p>Y & F Only - Community Based Education (also known as Comprehensive Community Supports/CCS) uses the same medical necessity criteria as CLS</p>
Skill Building	<p>Activities identified in the individual plan of services and designed by a professional within his/her scope of practice that assist a beneficiary to increase his economic self-sufficiency and/or to engage in meaningful activities such as school, work, and/or volunteering. The services provide knowledge and specialized skill development and/or support.</p> <p>Coverage includes:</p> <ul style="list-style-type: none"> ○ Out-of-home adaptive skills training: Assistance with acquisition, retention, or improvement in self-help, socialization, and adaptive skills; and supports services incidental to the provision of that assistance ○ Work preparatory services are aimed at preparing a beneficiary for paid or unpaid employment but are not job task-oriented. They include teaching such concepts as attendance, task completion, problem solving, and safety. Activities included in these services are directed primarily

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CLS Assessment Definitions**

	at reaching rehabilitative goals (e.g., improving attention span and motor skills), not at teaching specific job skills.
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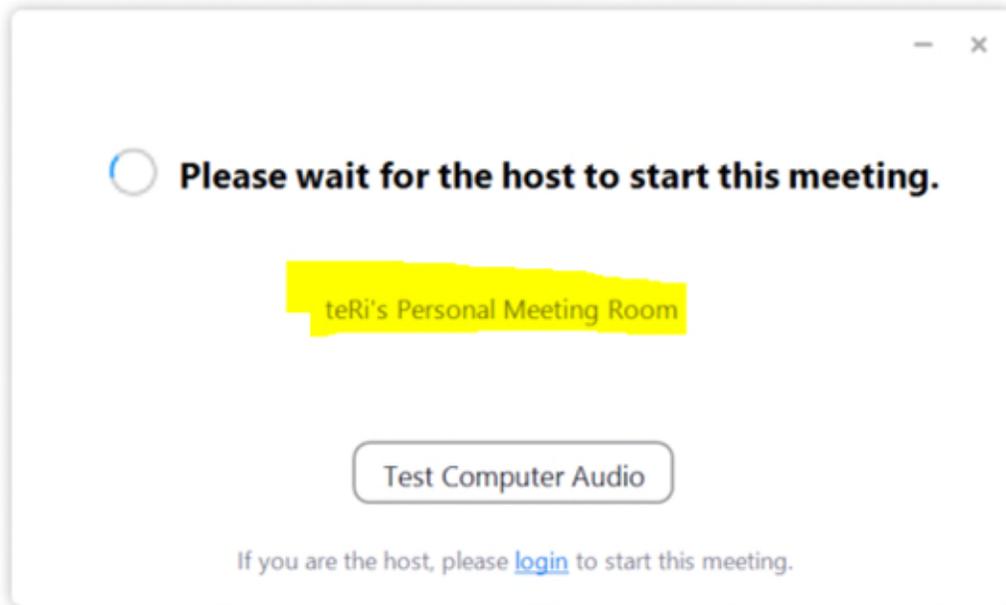
Supported Employment	<p>Provide job development, initial and ongoing support services, and activities as identified in the individual plan of services that assist beneficiaries to obtain and maintain paid employment that would otherwise be unachievable without such supports. Support services are provided continuously, intermittently, or on a diminishing basis as needed throughout the period of employment. Capacity to intervene to provide assistance to the individual and/or employer in episodic occurrences of need is included in this service. Supported/ integrated employment must be provided in integrated work settings where the beneficiary works alongside people who do not have disabilities.</p> <p>Coverage includes:</p> <ul style="list-style-type: none"> ○ Job development, job placement, job coaching, and long-term follow-along services required to maintain employment. ○ Consumer-run businesses (e.g., vocational components of Fairweather Lodges, supported self-employment) <p>Coverage excludes:</p> <ul style="list-style-type: none"> ○ Employment preparation
ABA	<p>Applied Behavior Analysis is provided to individuals under 21 years of age with Autism Spectrum Disorders (ASD) to assure that children receive early detection and preventive care, in addition to medically necessary treatment services to correct or ameliorate any physical or behavioral conditions, so that health problems are averted or diagnosed and treated as early as possible. The goals of treatment for ASD focus on improving core deficits in communication, social interactions, and restricted behaviors. Changing these fundamental deficits may benefit children by developing greater functional skills and independence.</p>

Helpful tips:

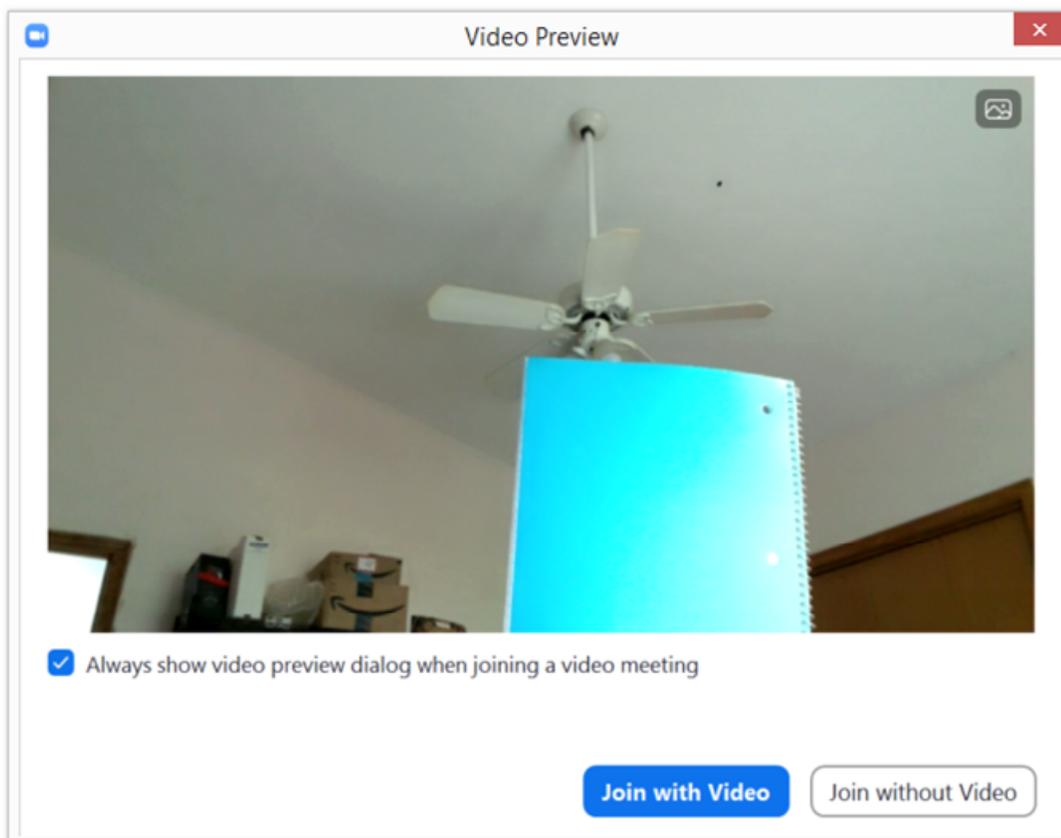
1	Do not use a Time and Task from DHHS to determine Personal Care hours. These should be your best understanding of how much hands-on time is actually needed
2	Do not duplicate hours between the weekly and daily tables
3	The total hours should not go above 168
4	DBL staffing issues should be noted in the notes section not in the body of the assesment
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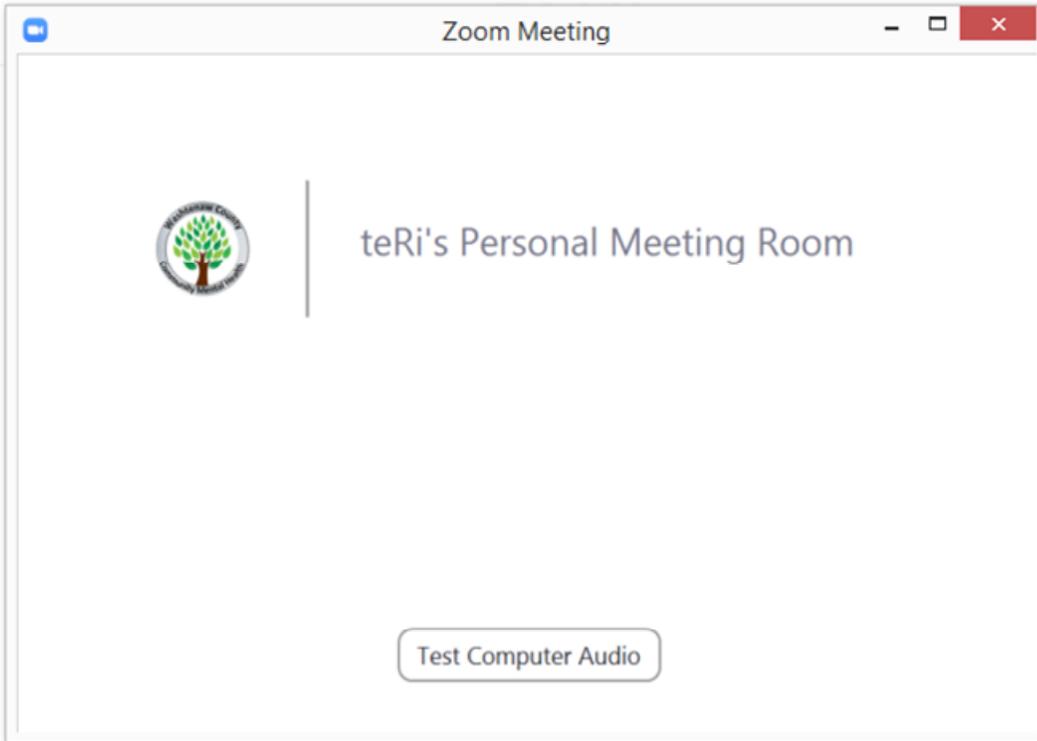
This is the message you will receive if the meeting is not started by the prescriber



This is what your screen will look like if the Meeting has been started by the prescriber
You have the option to join with video (preferred option for all)



Next screen shows that you are in the Meeting Room of the prescriber and they will admit you when they are ready to see you.



The Recipient Rights Training can be found here:

https://secure2.ewashtenaw.org/hosting/CMH_RIGHTS/Online_Training/presentation_html5.html

Before you take the online Recipient Rights training:

- Clear your internet browser's history
- Be connected to a printer in order to print your test results at the end of your training or be prepared to take a screen shot of your test results. Instructions of how to take a screen shot can be found here:

<https://www.pcmag.com/news/how-to-take-a-screenshot-on-any-device>

Tips for technical issues:

- make sure you have scrolled all the way to the bottom of the page (click and drag the scroll bar on the right side of the window all the way down)
- go back to the previous slides and then go forward again
- exit the training and re-enter
- change browsers
- clear the internet browser history and restart the training

If you try to troubleshoot the problem and still can't get the training to work, you can call the Rights Officer of the Day at (734) 219-8519 or Evan George at 734-787-5202.