

IWUG Online Meeting Minutes

Policy and Partner Issues

March 5, 2015

Topics discussed:

Announcements

Department of Health and Welfare:

Rosie Andueza

New Criteria for Treatment

A new provider notification has gone out talking about the new criteria that has been established for the adult population. The only necessary criteria is falling 100% into the poverty level and requiring clinical treatment. The requirements for IVDU, etc. have been removed. These updates went live on Monday, and already six to eight people have been approved for funding who would not have qualified before. DHW does not know what SAMHSA will do in the future. Currently the funding is available to broaden those served. ATR 4 has lessened the funding coming from the block grant and DHW hopes to be able to continue funding the block grant demographic for at least a year. If this period proves there is a need that is being met that has not been addressed in the past, it will help DHW to prioritize the funding and pursue additional grants. Provider feedback through regional coordinators regarding this change is very valuable. DHW will review and evaluate provider input.

ATR 4 and PWWC

The ATR 4 program is going well. The population served has been increasing. In the PWWC network, there were only three or four clients being served. After the changes to the requirements, now there are upward of forty clients.

SUD Rule Changes

DHW is seeking input from the provider network regarding the SUD rules rewrite. Both chapters of the SUD rule are being reviewed page by page. DHW is considering this a total rewrite. DHW is identifying areas that need work and will be holding a series of public meetings/town halls accessible by phone. At these meetings the high level plans for these rules will be shared for provider network participation. Public work groups will be formed and will aid DHW in making sure everything is included. In June, negotiated rule sessions in each hub will unveil the new language that will be replacing current language. At that time, there will still be opportunity for public input. DHW will provide the language to be published by September/October. DHW encourages everyone to participate. The provider perspective is valuable and appreciated.

Transition of DSM-V

The goal for transition to the DSM-5 and DCI-Legacy is October 1. DHW is currently having conversations with Chestnut and others around the ASAM and the logistics of the transition. DHW will continue to provide updates and will communicate via BPA.

Personnel Changes

John Kirsch has retired. DHW has replaced John Kirsch with Ben Skaggs. Ben currently works for the

division on the 19-2524 team as a clinician. Michael Bartlett has announced he will be moving to North Carolina and his last day will be March 20th. DHW will be announcing and recruiting to fill that position shortly.

Department of Corrections:

Lorenzo Washington

IDOC had a call with the provider network yesterday so there is nothing new to add to this call. The call focused mainly on managing different treatment levels and funding for the felony population.

Idaho Supreme Court:

Lynn Proctor

No updates.

Idaho Department of Juvenile Corrections:

Liza Clinger

IDJC would like to encourage participation with the SUD rewrite rule. No further updates.

BPA:

Sharon Burke

BPA has been working with DHW in streamlining the facility renewal process, site/service and serving a population. The plan is for Providers to come to BPA for changes. BPA will be distributing a communication regarding this change this week. Information will be on the website as well. Changes will be facilitated by BPA with assistance from the regional coordinators.

Expectations in regard to ADA compliance issues

Dana Gover

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Dana Gover is the training and technical assistance consultant for the northwest ADA center in Idaho.

Definition of the ADA

The ADA receives federal money from the northwest ADA center located in Seattle. The ADA provides grants to Idaho, Washington, Alaska and Oregon. The focus is on helping people understand their obligations under the ADA. It is not an enforcement agency. If someone with a disability has complaints or issues, Dana helps them find someone to resolve the issue. The ADA partners with independent living facilities across the state. They get calls from those who need different types of accommodations and aid businesses with compliance. The goal is to educate people.

Dana gave a brief overview of the ADA as covering employment, services in state and local government, public accommodation, and telecommunications.

25th Anniversary of the ADA

This year is the 25th anniversary of the ADA. In each area of the state, celebrations are planned for the

anniversary. The celebration in Boise will take place on the afternoon of July 17th called "Hands Around the Capital". At 12:30, there is a plan to surround the capital with yellow ribbon with a drum core to lead participants. There was a celebration that also took place in 2010. There were disability awareness booths and service providers handing out information. Please let clients you serve know they are invited. There will be music and speakers including Kelly Buckland, the national director for council of independent living. There will also be celebrations in July in Pocatello, Idaho Falls, Lewiston, Moscow and Coeur d'Alene.

Q and A

Q) *Can you expand on the companion animals and whether housing providers have to allow them? For example, safe and sober housing is a program where individuals can live there for 90 days or longer funded by state and federal dollars. It is often 6-8 individuals living in a private home while in substance abuse treatment.*

A) Yes, it depends on the housing and situation. Long term vs. short term treatment may fall under the Fair Housing Act. Dana would look at policy/procedures to see how housing is provided. For example, if the individual goes into treatment in a hospital, the animal is not covered but safe and sober housing may be covered. Homeless shelters where people stay at night and go and come, are covered under the act. If the person has a qualified service animal, they must always be allowed unless animal is not in control or aggressive.

Q) *What is an assistance/companion animal under the Fair Housing Act?*

A) If it is a service animal, it should almost always be considered. As a companion animal, a facility would not have had to allow the animal for a 5 to 10 day stay in a treatment facility because the client wasn't there long enough to be covered under the Fair Housing Act. The classification is very dependent on the situation. We have seen those who have different kinds of animals as assistance animals, dogs, cats, snakes, ferrets, etc.

Q) *For a service animal, how do they become 'bonafied'.*

A) Under the ADA, the animal is not required to have a certification but must be trained to do something for the specific disability. In the 90's, most people who had service animals were visually impaired and had service dogs that would lead them. Now there are many other types of disability that were considered when the 2010 amendments were passed. The amendment states there is no certification required. However, a service animal forfeits its status if it exhibits behavior such as jumping up, growling, or other out of control behavior. Idaho has a service animal law too with one component the ADA does not have in that it states, "service animals in training have to be allowed into business/government entities". Service animals must have a vest on that states, "service animal in training". In the last couple years we have had one call about what training was needed. For example, a service animal was included in a counseling program when the animal was not trained enough and was scary to the other participants. When you have those questions, please call and ask.

As we know, those with disabilities are so varied that what applies to one person with a condition may not apply to another person with the same condition. I am disabled. I am a quadriplegic after a car accident. A friend of mine has experienced a similar situation with same level of injury but we have completely different needs based on how the body is affected. Mental health issues are just as varied. Never stereotype, everyone is different so the situation is important. Please call or send email for information or for additional free training online. Free training in Boise will be happening April 14th/15th. Slots go quickly, so if interested, please be in contact.

Q) *For interpretation for the deaf, who is the one who hires and sets reimbursement rates for client?*

A) Providers would be the one to hire the interpreter. Rates may vary depending on programs. For example, Medicaid pays 12 dollars for every 15 minutes. If the program is going longer than an hour, the provider will need 2 interpreters. Network interpreting services can be called for information. Steven Snow is director of the Idaho Council for the Deaf and Hard of Hearing, and they can also supply a list of interpreters. If an interpreter cannot be located for an in-person session, some services may be done via computer with interpreter. Digital interpretation is a fee based service. If a private business is hiring the interpreter, tax deductions and credits are available for accommodations, removing barriers and providing services for blind/visually impaired. It may be helpful to offer different ways to interpret materials. Many options are available for funding.

BPA:

The process is to receive recoupment for interpretation: The provider hires, puts the claim through BPA, and BPA pays rate for state funded clients. Funding for interpreters is available through BPA. If you are not aware how to access this funding, please call and clarify with BPA. The client should never have to pay, and we have the ability to help.

Next month:

Focus on discharges/how to discharge clients.

Please join us. Materials and Dana's contract information will be sent to the provider network.