



*Serving Cabarrus, Davidson, Rowan, Stanly and Union Counties*

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## **CONSUMER/FAMILY ADVISORY COMMITTEE**

**“Our mission is to ensure that Consumers receive quality services.”**

**July 21, 2009**

**MINUTES**

**Members Present:** David Bullins; Andrea Stevens, Co-Chair; Linda Mercado, Sarah Boyd, Jeff Euto, Melanie Frick, John Hufton, Bart Kean, Rick Samuel, Mary Sechler, Kay Jennings, Lemar Underwood, Stephen Brannan, Michael Kinlow

**Absent:** Beverly Morrow; Ann Medlin, Major Sampson

**Guests Present:** Robin Boyd, Peter Euto, Dora Hufton, Norma Anderson, Suzanne Thompson, Leno Mercado, Russell Jennings, Ronnie Helms, Benny Faulkner

**PBH Staff Present:** Pam Shipman, Chief Operating Officer; Steve Tomlinson, Director of Community Relations and Network Operations; Bonnie Schell, Director of Consume Affairs; David Jones, Director of Clinical Operations; Shelby Marlow, Administrative Assistant

### **I. Welcome of Members and Introduction of Guests**

Andrea called the meeting to order at 6:30 pm and welcomed members and guests. She explained to the members an addition to the agenda. There will be a Public Comments time reserved at the beginning and end of each meeting to give guests a chance to make comments.

### **II. Approval of Minute and Review of Agenda**

Bonnie noticed three areas where a word needed to be changed in the minutes. Bart made a motion to approve the minutes as amended; Rick seconded, and all approved.

### **III. Public Comments**

There were none.

### **IV. Report of Membership Committee**

On behalf of the Membership Committee, Melanie recommended Debby Brown be accepted as a new member. The CFAC committee voted and approved her membership. Melanie then recommended Jayne Wallace-Bohannon be accepted as a new member. The CFAC committee voted and approved her membership as well. Jeff's membership term expired June 30, 2009. Melanie recommended he be approved for a new term. The CFAC committee voted and approved his new term.

### **V. Utilization Management**

David Jones spoke on the Clinical Management Department, which includes Utilization Management (UM), Access Call Center, Access Outreach and Decision Support Unit. Approvals or denials of services go through UM. All requests are reviewed for the need of the service to make sure the needs match the services requested. UM processes over 50,000 Treatment Authorization Requests (TARS)

annually with less than 1% of those denied. Requests can be extended in order to obtain more information. Access Call Center maintains the 800# 24/7. Access Outreach staffs one Clinically Licensed Counselor (CLC) in each of the five counties. One of the duties for these counselors is to track follow through of consumers after they have been discharged from hospitals. The Care Management Team is an internal committee comprised of UM staff and representatives from other PBH departments. Their purpose is to identify best practices and gaps in clinical needs. The Clinical Advisory Committee is comprised of clinicians from inside PBH, providers, CFAC and consumers/family members. This committee reviews clinical guidelines, procedures, policies and protocols.

It was asked why Individual Service Plans (ISP, waiver terminology for Person Centered Plan) have to be re-written. The main reason is because the plan does not meet criteria for decision making. UM has 14 days from the time of initial request. If more information is asked for it can be extended by 14 additional days with a lot of information traded back and forth. The goal is to get the best information as possible to make a decision. PBH is working with providers to improve this documentation in order to prevent delay in decision making. The average turn around time for an average case is six days. Consumers may request a reconsideration of the decision made. No one already familiar with a case can review for reconsideration. A third party agency is contracted to review these reconsiderations. UM wants to get the right services to the right people at the right time. We need to get help to consumers when needed but paperwork gets in the way. The goal is to make that smoother. This has been a learning experience and the goal is to keep getting better. The PCP is the individuals plan, not the providers. Letters requesting additional information have been going out to the consumers/family members instead of the providers. There are meetings with DD providers going on to help correct this. Letters have been going to the providers, but to the home offices instead of the local offices the Support Coordinators are housed from. Network Operations is working on correcting these addresses. Support Coordinators can call UM anytime with information.

CFAC requested the Registry of Unmet Needs be made available to them ongoing quarterly. David agreed and informed the members this registry can be made county specific as well. David stated the current registry numbers don't look as high as they should. Providers aren't requesting these services because they know they are frozen. PBH needs these services requested in order to put them on the list, unless other services are working well for the consumers.

PBH maintains best practice philosophies with their employees by maintaining a list of Clinical Guidelines comprised on the latest information on best practices for client services. These guidelines are managed by the Care Management Team and Clinical Advisory Team and reviewed for updates as needed every two years. These guidelines are taught to the care managers as a basis for decision making.

CFAC can have an integral part in communicating with UM when advocating for a consumer by calling the UM care manager with any information the consumer wants released. If the consumer has not signed a release of information for that CFAC member the PBH staff will not be able to release any information to the caller. Continued involvement on the Clinical Advisory Committee would be the best way to remain active in system level decision and policies and procedures. Mary currently represents CFAC on this committee.

Each consumer receiving Enhanced services is required to have a PCP. The Person Center Planning process has been trained to all staff. All staff are trained that reviews are to be individualized based on the particular needs of the individual.

A detailed handout was made available to all CFAC members.

**VI. NCOA Update, Executive Dashboard Report, LME Update**

Pam gave an updated on the Dashboard Report. The Penetration Rate tracks the number of people served by the number of people eligible. PBH is below the state average of 10%. Pam informed the members that complaints are very important to PBH. They are entered into a data base and tracked. Spot visits are made due to complaints. People are encouraged to call with complaints if they have any. PBH conducts surveys to determine if consumers are satisfied with how their complaints were resolved.

Pam asked CFAC what reports they would like to request. They stated they would like all with follow up to care quarterly, but in an easier to read chart form.

Pam informed the members the budget is still not finalized. It appears several reductions will happen. As of last week a \$30 million reduction was anticipated. PBH has kept freezes on for now. Anyone on any waiver and getting state services will be stopped. Community Supports will be largely paired down or eliminated. There are no alternative services available for Community Supports so PBH is looking at Peer Supports for adults. The SOC is meeting to discuss C&Y services to use in place of CS. Level III and IV residential for child and youth will be down or eliminated as well. There will be changes to the Medicaid plan. PBH is starting to prepare although the state budget is not final. Housing is not paid by Medicaid. PBH has not reduced housing funds but they have not added any housing either. Pam will bring the budget for review to the next meeting.

**VII. Statement of Financial Position and Functional Expenses**

These items will be tabled for the next meeting.

**VIII. Reports from State CFAC/CFAC-PBH Committee Assignments**

The proposed stature for SCFAC is still in process in the committee waiting on the budget. Mary inquired about where to get meds for inmates. Daymark works with indigent consumers for their meds, but not sure about inmates. The LME's receive names of inmates from the jails and can try to help if an inmate is already one of their consumers.

**IX. Public Comments**

There were none.

**X. New Business**

To be tabled for next meeting – Update by-laws to new state stature; video; QM reports

The meeting was adjourned at 8:35 p.m.

Respectfully submitted,

Shelby Marlow

**Next Meeting is Tuesday August 18, 2009**

## September, October and November Advisory Council Meetings Schedule

Cabarrus	Sept. 1	300 Copperfield Blvd
	Oct. 6	
	Nov. 3	
Davidson	Sept. 15	Health Dept. – Health Education Room
	Oct. 20	
	Nov. 17	
Rowan	Sept. 24	Rowan Public Library
	Oct. 22	Chamber of Commerce - upstairs
	Nov. 26	Cancelled due to Thanksgiving
Stanly	Sept. 8	Stanly DSS
	Oct. 13	
	Nov. 10	
Union	Sept. 3	UCPC Professional Development Center
	Oct. 1	
	Nov. 5	