

## Minutes for Physician Care Group Meeting

**Date:** 01-09-2013

**Time:** 10:15

**Meeting Place:** Hudspeth Regional Center, Whitfield, MS

**Attendees:** Dr. Craig Escude, Lance Sigrest, Tracy Mulholland, Kate Holland

**Conference Call Attendees:** Elizabeth Caldwell, Margaret Wilson, Joye Steen, Michelle Harris, Cindi Thompson, Stanley Devine, Juliette Reese

**Absent from meeting/conference call:** Mary Smith, Amy Bishop, Ann Barnes, Rudy Johnson, Shannon Spooner

### 1. Introduction of team

Teams members identified and introduced themselves to the group

### 2. Review of Balancing Incentive Program

Dr. Escude gave a brief review of BIP to the group and gave those present at meeting a handout of the BIP summary. (See attached document)

### 3. Consideration of team name change

It was suggested to change our workgroup name to Community Medical Support Team. All agreed to the suggestion of the name change.

### 4. Development of Team Goals

Facilitate/develop effective and appropriate community health care services for IDD/Aged to reduce need for/prevent institutionalization

Dr. Escude posed question to all attending regarding direction of workgroup goals (see attached document)

#### i. Education of current medical workforce

Discussed medical disciplines and the care that will be needed for ID/DD population and other potential beneficiaries as well as possible approaches needed for the education of medical providers by building bridges with resources. Dr. Escude discussed using his medical awareness presentation to educate potential providers and start a consultative network of resources for physicians.

#### ii. Incentives

Question was asked of how we can provide enhanced reimbursement for medical personnel. Suggestion was made to use an enhanced reimbursement code/modifier.

#### iii. Consultative Clinic

Dr. Escude discussed developing a consultative clinic for the IDD population that would be modeled after the clinic in New Mexico. Specifically, discussed that this would be a multi-specialty clinic but would not provide routine medical care. This would be a consultative clinic only. Also, mentioned that the clinic in New Mexico is funded by a

contract with the state to provide care and that it was felt that current reimbursement rate would not adequately support the clinic financially.

**5. Consideration of sub-committees**

Recommendations were made to address home based services and education. Medication compliance, medication education for clients and caregivers, education of medical personnel, current resources available in the community such as the mobile clinic used by Region III were discussed. The group members were given the opportunity to choose a sub-committee workgroup that they would like to be a part of. Dr. Escude will assign each member to a sub-committee and email group members to which sub-committee they will be working with to address the goals/ issues that were identified today.

**6. Schedule next meeting date**

The next workgroup meeting was scheduled for **Feb. 6 at 10:00 a.m.** Dr. Escude will notify group of conference call information via email. Dr. Escude preferred the group to meet again prior to the next stakeholder's meeting on February 26, 2013.

**7. Adjourn**

Meeting adjourned at 11:50 a.m.

## Community Medical Support Team Meeting Minutes

Meeting Date	2/6/2013	Meeting Leader	Dr. Craig Escude
Meeting Time	10:00	Meeting Scribe	Kate Holland
Meeting Location	Conference Call	Next Meeting	4/24/13 9:00am

**Attendees:**

Craig Escude	David Elkin	John Damon	Juliette Reese	Cindi Thompson
Michelle Harris	Chuck Terry	Joy Steen	Lance Sigrest	Ann Barnes
Stanley Devine	Tracy Mulholland	Kate Holland	Kristi Plotner	

**Agenda:**

- A. Discussion  
Introductions of team members were done. Review of minutes from previous meeting and motion made to approve minutes.
  
- B. Conclusions  
Minutes were approved by all.

C.

Action Item	Person Responsible	Completed/Needs to Be
N/A		

**Agenda**

A. Discussion

Discussion on team goals took place. Discussion began with home based medical services (Area 1). Cindi Thompson discussed the implementation of NP house calls and the mobile unit. Dr. Escude discussed how to expand this area with the BIP program to serve our target populations. Clarification was made on the target populations that will be served to include the waived programs, Elderly and Disabled (E&D) , Mentally Ill, Intellectual/Developmental Delay (MI/IDD), Traumatic Brain Injury/Spinal Cord Injury (TBI/SCI), Assisted Living (AL) and the Independent Living (IL) waiver.

B. Conclusions

Dr. Escude discussed needing more home and community based care for our target populations.

C.

Action Item	Person Responsible	Completed/Needs to Be
Outline steps to the process of the mobile unit and nurse practitioner house calls and move it across the state. How to incorporate mentally ill population into this area.	Area 1 Group	Outline to be emailed to Dr. Escude before the Feb 26 stakeholders meeting.
Identify resources needed to accomplish the outlined process.	Area 1 Group	A list of resources needed will be brought to the next meeting.

A. Discussion

Dr. Escude introduced Dr. David Elkin, professor of psychology, at UMHC. Dr. Elkin will be part of the Area 2 group. Area 2 is education of medical providers on medical care issues. Discussion took place in regards to continuing medical education as well as educating providers about children with disabilities across the state. Suggestions were made to develop printed educational materials and to develop a website.

B. Conclusions

Assignments were made to carry out tasks needing to be completed. The goal of area 2 is to provide medical education to the providers in the state. New goal was made to determine what resources are already there and to promote them.

C.

Action Item	Person Responsible	Completed/Needs to Be
Develop a list of target populations to educate.	Area 2	List needs to be brought to next meeting.
Develop a list of available CME.	Lance Sigrest	List needs to be brought to next meeting.
Develop a list of funds available for team member's travel.	Kristi Plotner	
Develop a list of needs in regards to expenses	Dr. Escude	

**Agenda:**

A. Discussion

Area 3 is education of patients and caregivers on medication compliance. Stanley Devine discussed items including medication noncompliance, collaborating with and educating providers and forming an alliance between pharmacies and waiver programs. The group also discussed the possibility of a pilot program and a discharge planning process to address sustaining medication compliance post discharge.

B. Conclusion

Dr. Escude discussed having area 3 develop a report highlighting the areas that were discussed.

C.

Action Item	Person Responsible	Completed/Needs to Be
Develop Report focusing on areas discussed in regards to medication compliance	Stanley Devine	Outline to be emailed to Dr. Escude before the Feb 26 stakeholders meeting.

**Agenda:**

A. Discussion

The Area 4-Development of a consultative clinic for IDD individuals was discussed. The New Mexico consultative clinic was discussed. Dr. Escude and Lance Sigrest will be traveling to New Mexico on April 8th through 12th to research the consultative clinic. Dr. Escude wants to combine Area 2 and Area 4 to address education in the consultative clinic. Mobile providers to help with existing clinics and needing a physical location for subspecialties was discussed also along with developing a "one call" routing system to streamline individuals to appropriate available help. Question was asked by Dr. Escude regarding funds available from BIP and if they are sustainable.

B. Conclusion

Dr. Escude said that he would be able to report more on the needs of the consultative clinic once he returned from New Mexico.

C.

Action Item	Person Responsible	Completed/Needs to Be
Prioritize needs that require funding	Dr. Escude	BIP funds available through Sept. 30 <sup>th</sup> 2015

A. Discussion

Development of new goals. Discussed next stakeholders meeting and scheduled next group meeting.

B. Conclusion

Time line for new meeting will be sent out via email. Assignment made to the different groups on future development/tasks. Information regarding group meeting will be sent via email and will be notified of location of stakeholders meeting to take place on 2/26/2013 @ 1:00.

C.

Action Item	Person Responsible	Completed/Needs to Be
Community Medical Support Group Meeting		4/24/2013 @ 9:00
Stakeholders Meeting— Location to be announced		2/26/2013 @ 1:00

## Community Medical Support Team Meeting Minutes

Meeting Date	5/1/2013	Meeting Leader	Dr. Craig Escude
Meeting Time	9:00	Meeting Scribe	Kate Holland
Meeting Location	Conference Call	Next Meeting	6/26/13 9:00

**Attendees:**

Craig Escude	Kristi Plotner	Stanley Devine	Joye Steen	Cindi Thompson
Kate Holland				

**Agenda:**

A. Discussion

Introductions of team members were done. Review of minutes from previous meeting and motion made to approve minutes.

B. Conclusions

Minutes were approved by all.

C.

Action Item	Person Responsible	Completed/Needs to Be
N/A		

## Agenda

### A. Discussion

Reviewed agenda and began discussion on area 1 which is home based medical services. Discussed pilot project to have nurse practitioners collaborate with physicians to help monitor homebound patients through the development of a waiver program. Question posed if GTPDD has had any issues with physicians being concerned with the care of their patient being taken over by someone else. Cindi responded that there have been some similar issues in reference to that but for the most part the physicians are "on board". It was suggested that the nurse practitioners collaborate with the treating physician of the patient. Kristi Plotner asked for the area 1 group to be more specific with what the group is asking for from the BIP funds in reference to funding of the nurse practitioner program. Stated that there does not need to be a duplication of funds and the budget needed to be specific about what is actually needed.

### B. Conclusions

Dr. Escude asked if the proposal should be put forward to the stakeholders group with budget clarifications and it was agreed upon to do so.

### C.

Action Item	Person Responsible	Completed/Needs to Be
Budget for funding of NP program needs to be clarified.	Cindi Thompson Mary Smith	Clarification of budget needs to be sent to Dr. Escude by May 8, 2013.

### A. Discussion

Stanley Devine lead the discussion on area 2 proposal, medication compliance. Proposed using 3 planning and development districts (Northeast MS PDD, North Central PDD, and Golden Triangle PDD) to use for the pilot along with 2 synchronizing pharmacies already located within those areas to address medication compliance with existing waiver patients. A \$25.00 management fee per month was proposed to cover the services of this program. A question was posed if this should be a waiver service or be a component of an existing waiver service. A suggestion was made to make it a component of case management so the fee could be calculated into the rates of case management and the PDD's could contract for this service. This would allow for an easier way to calculate the \$25.00 fee. Stanley also discussed extending the State Health Insurance Assistance Program (SHIP) that would offer information through a call center to

the treating primary care physicians regarding medications covered by the patient's insurance company. Kristi Plotner said that this could not be covered by BIP funds.

**B. Conclusions**

Dr. Escude asked if the proposal should be put forward to the stakeholders group with the removal of the extended SHIP services due to BIP fund criteria not being met. It was agreed upon to submit. Kristi Plotner stated that the pharmacy plan would not be able to be implemented quickly because more research was needed on how to add the services to the CMS plan.

**C.**

Action Item	Person Responsible	Completed/Needs to Be
Investigate how to work the pharmacy plan into the CMS plan.	Kristi Plotner	Ongoing
Amended pharmacy plan with the elimination of the SHIP extension.	Stanley Devine	May 8, 2013

**Agenda:**

**A. Discussion**

Dr. Escude reviewed area 3, consultative clinic for IDD individuals. Discussed the New Mexico trip, funding of the clinic, education, and the consultative team. Other areas explored were medical/dental services for IDD population for both adults and children and investigating avenues to provide adult mental health services and behavioral services for the IDD population. Funding for these services through options counseling and B2I was given as a possible option. BIP funds would be able to provide start-up costs but need to look at other funding options for sustainability.

**B. Conclusion**

Dr. Escude discussed funding, education proponent, and the consultative team for the development of the consultative clinic.

**C.**

Action Item	Person Responsible	Completed/Needs to Be
Summary report for	Dr. Escude	May 21, 2013

consultative clinic		

A. Discussion

Agenda summarized, announcement of stakeholders meeting, next Community Medical Supports Team group meeting scheduled. A new agenda will be sent via email with conference call information.

B. Conclusion

Meeting adjourned.

C.

Action Item	Person Responsible	Completed/Needs to Be
Stakeholders Meeting		May 21, 2013 @ 2:00 Woolfolk Building
Community Medical Support Group Meeting		June 26, 2013 @ 9:00