A regular public meeting of the New Jersey State Interagency Coordinating Council (SICC) was held on Friday, March 15, 2019 at the Public Health Environmental Laboratory Building, in Ewing Township, New Jersey. The meeting was called to order at 11:09 a.m. by Catherine (Kate) Colucci, Acting Chair and declared a quorum was present.

**Attendance:** Maintained by the Department of Health

**Welcome:** Kate Colucci welcomed attendees, read the Welcome Statement and Public Event Emergency Evacuation Procedure statement.

**Introductions:** SICC members introduced themselves, followed by the public and the Department of Health (DOH) representatives and guest speakers, Pam Burke and Kent Stevenson, both from Public Consulting Group (PCG).

**Approval of Meeting Minutes** - The previously distributed minutes of January 28, 2019 were unanimously approved. The January 25, 2019 minutes will be posted to the SICC website.

**Announcements** – Kate Colucci asked for updates from Council members.

1. Joseph Holahan, MD, sent a letter to the Commissioner concerning the new *Act Early* poster’s statement that parents do not need a physician’s permission to refer a child to Early Intervention (EI). He received a written response from the Commissioner stating that nearly 60% of referrals to NJEIS come from physicians. The purpose for the Act Early poster is to let families know they do not need a physician’s approval in order to refer their child to NJEIS in case they are awaiting an appointment or have other issues getting to see a physician. The Commissioner stated he appreciated Dr. Holahan’s point of view and that the Communication Team from the Department of Health (DOH) would again review the content of the poster for possible edits to the statement of concern.

2. Danielle Anderson Thomas reported on the McKinney Vento round table sessions that are scheduled in each county. The Early Intervention Provider (EIP) information has been disseminated to all participants. Information has been received that several participants have contacted EIP providers for assistance.

**SICC Standing and Ad Hoc Committee Reports**

1. **Administrative/Policy** – Chanel McDevitt, Chair – no report
2. **State Systemic Improvement Plan (SSIP)** – Rosemary Browne, Chair – no report

3. **Service Delivery** – Joyce Salzberg, Chair, reported on the Service Delivery committee’s meeting with Sharon Walsh, a consultant, on February 7, 2019, who provided input and direction for future endeavors. Notes of the meeting are on record. The committee will again meet in April 2019. Joyce requested that the DOH provide written Procedural Safeguard Office (PSO) and Family Cost Participation (FCP) reports at the SICC meetings.

4. **Higher Education** – Kate Colucci, Chair – acknowledged Jamie Bergstein of Virtua EIP who spearheaded the initiative to begin a statewide mentoring program for practitioners. Prior to EIMS, the group met with higher education representatives from a variety of colleges and universities. Kate asked DOH representatives if it would be permissible to post a request for ten (10) mentors and ten (10) mentees on the EIMS dashboard. Susan Evans requested that the committee send her information on the request. Jamie Bergstein has agreed to provide the information to Susan Evans.

Kate Colucci also mentioned prior to EIMS, the group met with higher education representatives from a variety of colleges. Kate will contact the college representatives to let them know that EI is still interested in collaborating.

Kate Colucci asked the public members about current student field placements. The New Jersey Institute on Disabilities reported mentoring students from Rutgers while Virtua recruits mentors from Stockton, Temple and Seton Hall Universities.

**ACTION:** Send request to Susan Evans to recruit mentors and mentees via EIMS.

5. **Old Business:**

   - NJEIS Mission Statement – Danielle Anderson Thomas will present the full report at the May 17, 2019 SICC meeting.
   
   - Sandra Howell reported that the interview process for the Part C Coordinator is in the second round; approvals are needed.

   - SICC appointments – Kate Colucci reported that there are many openings; applications from families and others have been received and forwarded to Maria Del Cid-Kosso. Maria forwards to the Governor’s office. Kate inquired if the commissioner can reach out to the governor to discuss the urgency in securing SICC members. Joe Holahan suggested that someone from the SICC contact the governor’s office to let them know the importance of having members on the SICC Committee.

Discussion:

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Sandra Howell noted that it is important to go through the chain of command; the Governor’s office has a protocol. She will contact the legislative liaison, Maria Del Cid-Kosso to get an understanding of the process and timeline. Susan Evans stated that recruiting and securing SICC members nationwide is currently a challenge. At this time, the Governor’s appointment is necessary in appointing new SICC members. However, the I.D.E.A. Leadership team is hoping to change this requirement to more easily appoint SICC members.

- SICC meeting with Health Commissioner - Joyce Salzberg contacted Jackie Cornell to schedule a meeting; she has not yet received a response.

- SICC retreat details – Kate stated that initially the retreat agenda would have included an orientation to new members but since none have been appointed, she asked the SICC members whether a retreat should take place or schedule a regular public meeting. Most agreed to have a regular meeting.

Discussion:
Susan Evans stated that there is no requirement that the SICC have a retreat.

Joyce Salzberg, per Sharon Walsh’s suggestion, recommended the SICC members discuss their roles as well as that of the Public and advocates who attend meetings at the next SICC meeting. There is a distinction between what the SICC members do (advise and assist) and those such as ABCD (advocates).

Susan Evans suggested that perhaps the retreat occur in the Fall after the OSEP conference in July which Kate Colucci is attending and can then provide feedback to the council.

**ACTION:** *SICC members will meet on Friday, July 19, 2019 as a regularly scheduled SICC meeting in lieu of a retreat. Carmela Balacco will email and request DOH to post the July 19, 2019 as a regular public meeting to the SICC calendar so public members are informed.*

6. **New Business:** None

**LEAD AGENCY – New Jersey Department of Health (DOH)**
Susan Evans, Interim Part-C Coordinator, presented the following information on behalf of the Lead Agency.

1. The Annual State Application under Part C of I.D.E.A. has been posted on March 4, 2019. It is available for public comment beginning in March and closes on April 19, 2019. All comments are given to Susan Evans. A report is sent to OSEP in May.

2. DOH will present the SSIP report including OSEP’s recommendations at the May 17, 2019 SICC meeting.
3. **Procedural Safeguards Office (PSO)** – has received two (2) formal complaints since the last SICC meeting. One (1) dispute resolution request was an administrative complaint related to Family Cost Participation (FCP) and billing. This matter is still under investigation.

PSO has also received two (2) allegations of fraud, waste and abuse against two (2) practitioners. These cases are currently under investigation.

The current number of informal complaints received for State Fiscal Year (SFY) 2019 (from July 1, 2019 to March 8, 2019) was 3,101. The office is currently collecting data to examine trends.

4. **Family Cost Participation (FCP)** – the system is behind in collecting funds. Entering claims are connected to the billing system and NJEIS continues to enter backlogs. Suspension is not enforced at this time until billing is accurate. Per OSEP’s directive, the DOH is establishing a way to ensure families understand their FCP and are being charged for services accordingly. The monitoring team will be involved.

5. **EIMS** - Public Consulting Group (PCG) Guests, Pam Burke and Kent Stevenson

- Sandra Howell reported that DOH is working on recoupment plans with EIPs. Some have paid a lump sum, while others will be paying over a 10-month period while others have applied for hardships. A hardship plan was offered to 156 EIPS that met the criteria. DOH will be working individually with those agencies. The data indicates there is an upward trend at the entering of backlogs and claiming.

- Public Consulting Group guests, Pam Burke and Kent Stevenson presented an overview of the EIM system to the SICC and public members. Pam Burke described the events that have taken place thus far within EIMS. For example, over 48,000 IFSP events and 2,000 evaluations have been entered into EIMS. Payments include over $136 million and over one (1) million claims and 42,000 children have been entered into the system.

PCG has experience working in EI and case management in other states. Pam Burke has learned that each state implements their early intervention system differently. For example, New Jersey (NJ) uses the Battelle Inventory-2 (BDI) tool to evaluate children while other states use different evaluation tools.

Pam Burke described the overview of where they started and where they are now. PCG was awarded the contract. They met with DOH and other stakeholders to put together a business plan. PCG configured the design and proposed the model. Once approved, the developers created the program and tested the model. If it met the requirements, it was sent for another approval followed by deployment. That is PCG’s process.
Once implemented, the team looks at the process. Sometimes, the system does not work as expected and therefore is evaluated to see if it requires a system’s change or enhancement. Some changes are made because users cannot utilize the system while enhancements, such as an electronic signature, is something that would need to be added. The families’ ability to view their IFSPs in EIMS was not in the initial business plan.

PCG evaluates changes then reviews it with the State. Once approved, it goes to the developers to design the change, it gets tested, afterward it’s sent into production. At this time, PCG is working with the State on two (2) updates. The following are changes that have made or are under review to allow users better access to EIMS:

1. The time allotted for service logging to be entered was increased from 45 days to 500 days.

2. Permissions were provided to PCG staff, State administrators and a few EI super-users to allow the ability to deactivate records.

3. Ongoing imports (backlogs) of approximately 120,000 records were successfully imported into the system.

4. Developers are currently looking at adding a date for SC caseload reporting

5. PCG is reviewing the “Discontinued Services” to see if changes are needed

6. For the evaluation process, some updates have been made, however it is still under review for any additional changes

7. The FCP statements are also being reviewed. Would like it to be more family friendly so that a family can understand their invoices. PCG recognizes that invoices are impacted by the timing of when the service log is entered into the system. EIMS is a real-time system and is depended on when service logs are entered; it can be a moving target.

8. PCG is currently working on Form-25 with DOH’s change recommendations.

- Kent Stevenson from PCG spoke on behalf of the Call Center. He stated it is a good system, but acknowledged there may be room for improvement. In New York, where they serve as the state’s fiscal agent, they have been very successful.

Kent Stevenson explained that the Call Center (or Help Desk) is a computerized system that offers stability and reliability. A receiving call enters the system and is auto distributed to an agent. Calls wait in a cue and then transferred to an available
agent. The system recognizes how many agents are available, who is on break, and who is on a call with a client. Calls are documented. Agents use their own phones and computers.

Agents are expected to provide a response to each caller. The recorded calls can be analyzed and reviewed for trends and any concerns are brought to Pam Burke.

Discussion:

Joyce Salzberg asked about the educational background of the agents.

Kent Stevenson explained that the agents have college degrees, some have had experience with EI and they train their agents as well.

Joyce Salzberg asked if every conversation (call) is recorded.

Kent Stevenson responded that yes, every call is recorded.

Joyce Salzberg informed Kent Stevenson of her concerns with the agents. She shared that agents have been rude; they have hung up on callers and do not call back. She suggested that the agents receive customer service training. Joyce also expressed her surprise that PCG was awarded the contract due in part of the many complaints with PCG in NY.

Kent Stevenson stated that there are always complaints in any business; however, if she had a concern, she could contact him.

Pam Burke and Kent Stevenson reviewed their call volume data between parents and agents. The call volume is dependent on holidays and billing cycles. Their data showed no peaks in calls over the last 12 weeks. Cases (ticket numbers) are only created for new situations. The average wait time is about eight (8) seconds. There is no industry standard on wait time. Some callers experienced wait time of three (3) minutes.

Joyce Salzberg stated that in a given month, the Call Center may receive 300 calls, however, in NJEIS, there are thousands of practitioners. It seems like a low number (of calls) in comparison to the number of practitioners in the system.

Kate Colucci asked if the data gets communicated to the state; Kent Stevenson and Pam Burke replied that it does.

Susan Evans reported that many of the calls the agents receive are from families. Families often call the Help Desk because of needing (or understanding) their user names and passwords or have questions about their invoice.

**Public Comment**
Sima Rasner from Beta, Inc. stated that some agent’s responses have been wonderful, however, agents may not have been trained in NJEIS, and certainly do not know about NJEIS policies and procedures. She reported not having much faith in the Help Desk. She is concerned that the system shuts down on Sunday; a day that many practitioners use to back enter their logs. It is concerning in part that the State is also looking to take back payments. She asked why monies needed to be returned now at this point in time. It is concerning because there are still many outstanding problems. For example, an enrolled physical therapist (PT) was getting reimbursed at a lower rate (PTA) and the problem took months and months to rectify. The Help Desk stated the problem had to do with how the practitioner was enrolled. The practitioner enrolled as a PT but was registered as a PTA. Now EIMS is taking back the difference, but the EIP is owed the difference. It was incumbent on the agency to fix the problem. Sima also asked at what point can she expect the reports (matching claims to payment) to be accurate.

Pam Burke responded that Sunday was selected as a day to shut down EIMS after an analysis was done of days/times people use the system. The data demonstrated that the lowest number of people entered logs on a Sunday. Pam Burke also stated that if a claim is voided, the payment will be taken back from the EIP. Reports are working, if not, then go to the State.

Susan Evans responded that the reports are now in the audit phase. There were some bugs and kinks in the system and they are working on it. Some reports that EIPS need were not part of the EIMS design. At this time, some reports, such as children who are exiting the system are the priority.

David Holmes, ABCD asked to refer back to the PowerPoint slide, Action Items and referenced the bullet on “120,000 successfully imported records”. He inquired on how many actually still needed to be entered.

Pam Burke responded she was not sure. Sandra Howell stated that there may be about 300,000; she was waiting to hear back from the EIPs.

David Holmes, ABCD reported that often [EI] callers contact the Help Desk, they may receive a ticket number but often wait for a call back. People call and wait for a response multiple times a day. David further explained there is often no automatic loop-back responding back to the caller.

Pam Burke explained that if the Call Center/Help Desk do not/cannot resolve the issue at the time of the call, it gets escalated to Tier 2. If it does not get resolved at that level, then it is sent to her. She discusses the issue with the developers as to whether it is a system’s issue (NJEIS) or an EIMS issue. Pam Burke stated that there should be a call back for each inquiry. She has personally called individuals back to resolve an issue. She stated that some
issues are not within the scope of PCG but that of the State, for example, issues related to discontinued services. When changes are made in EIMS, announcements are made on EIMS.

Janine Pratt, ARC of Warren County recounted that she has never received a call back from the Help Desk. In fact, a call had been escalated three times; it was a developer issue. Until now, she has not heard back. She stated that the EIPs were asked to keep calling the Help Desk and request ticket numbers. The issue the ARC has been having pertains to exit and annual BDIs. The system says the wrong discipline performed the task, therefore, the EIP will not get paid. However, the correct discipline did conduct the BDI.

Karen Oluanrewaju from Sunny Days suggested a different type of data system for calls, one similar to the one her agency uses. For example, all users will contact their Help Desk by email. The user gets an email back with a ticket number, the purpose of the contact, the status of the issue and a timeline to resolve it.

Carolyn Russo-Azer from CPNJ discussed the problems her EIP has had with voided claims. Claims are voided, but she is not sure why it happens. The agency had contacted the Help Desk to inquire why a claim was voided and received a ticket number. She had been instructed to reenter the claim, which she did, but it is still not working. Carolyn would like to understand why the claims keep getting voided; they do not match up with the agency’s records.

Pam Burke explained that PCG never enters the system and voids an individual’s claim. They have voided duplicated claims. PCG can view who entered a service log, IFSP – all events. She asked Carolyn to provide her with the ticket number and she will personally look into it.

Kate Colucci commented on the design system of EIMS. She explained the importance for EI team members, specifically Physical, Occupational, Speech therapists and Special Educators to be able to read each other’s notes on the child they are working with. The State has reported that type of viewing is an enhancement in EIMS. The Call Center conveyed notes can be viewed as a report. However, it is not user-friendly. It is important for professionals to share and view each other’s information in regard to the child and family they are seeing. The other question is why families do not have access to their own records. This is a big frustration and quality issue for providers.

Pam Burke responded to answer those questions, you would need to go back to the original terms and requirements of the business plan. Each state is different in terms of privacy laws. She stated that when the system was developed the rules indicated who would have permissions to view [records].

Kate Colucci asked if PCG philosophically understood the issue. The way EIMS is setup, it forces practitioners to communicate in alternative ways, such as text messages, that can cause issues.
Anne Clark, Institute on Disabilities, inquired on how long EI records stay in EIMS. The EIP has had to keep hard copies of records in their charts due to requests for copies. They are unable to print anything from EIMS. The staff is doing double work (writing hard copies, then entering it into EIMS). Teams need access to every child’s record in EIMS.

Pam Burke stated that she was not sure how many years a child’s records would be stored in EIMS. Access to records depends on whether the child is active in the system or not. She will take a look at it.

Kate Colucci shared with Pam Burke that practitioners need to cut and paste their progress notes and then send them to the family at a different time. Families should have access to their own records. We all have the right to view our medical records; families should have access to their EI records.

Pam Burke stated that very few states allow families access to their portals. Susan Evans cannot comment on the family’s ability to view their portal; she was not a part of the original team that developed EIMS.

Michele Christopoulos asked why it would be an issue for families to have access to their records; she asked if it was a cost issue.

Pam Burke responded that it would be a financial issue to create and implement this concept into EIMS. Sandra Howell stated that DOH is not saying “no”, however, it needs to go through the process of a cost analysis.

Kate Colucci stated the (SICC) are there to advise and assist. This is an advisement.

Sandra Howell noted her comment but also indicated that there is a process.

Pam Burke stated that other states are also looking into this issue. The RFP in NJ was written many years ago and it was not included in the plan.

Bobbi Donados from Southern New Jersey Perinatal Cooperative commented that records of inactive children are inaccessible. Annual IFSPs still cannot be finalized.

Susan Evans acknowledged the concern and also indicated they are also working on Form-25. Once that has been resolved, they will be addressing finalizing annual IFSPs.

Yarona Boster, ARC of Essex, stated that it is important for EIP administrators to view Form-25 before it is finalized in EIMS. She is also concerned with privacy issues as well. EIP administrators have access to their practitioner’s caseload, even when the child is not assigned to their EIP.
Susan Evans stated they are looking at her suggestion for Form 25.

Pam Burke responded to the privacy issue. Initially when designing the system, they determined that each user would have one log-in. They were trying to avoid a user having multiple log-ins should they work for multiple agencies.

Sue Jager, Montclair State University, reported that practitioners that work for multiple agencies often make multiple errors. For example, a practitioner working for MSU, might accidently click on the wrong EIP when logging, therefore the wrong agency gets paid. She asked if it was possible for practitioners to be linked only to the EIP the child/family has been assigned to in the logging wizard.

Pam Burke responded that they are reviewing the issue.

Kim Peto, Bergen County SCU stated that SCU administrators cannot view their staff’s progress notes unless they impersonate the individual. Additionally, as the administrator, she cannot enter any information about a family in the family’s record. Another issue of concern is that EIPs can view SC’s notes. Should a family call the SC, contents of that call will be documented in the family’s record. EIPs have access to the SC’s documented notes, which at times, may have personal information. This is of concern.

Danielle Anderson Thomas asked if there was a time period in which change orders need to be submitted to PCG. She works with DOE and they have a contract with PCG. They have to submit their change orders within a specific timeframe.

Pam Burke responded they accept change orders at any time; there are no time restrictions. However, it does depend on what the change order is about. A big change order, like a family portal, would require a time frame. Others do not. DOE is on a release schedule; it is different for EI.

6. REIC Report
   1. Carmela Balacco, Director of Family Support, Family Link REIC – reported on the statewide plans for EI Week 2019 beginning the week of May 13th. Theme this year is Building Connections.

   2. Sandra Howell publicly acknowledged and thanked the MidJersey Cares (MJC) REIC staff for their efforts in assisting the system with backlogs. They had gone over and beyond. MJC and the Southern REIC are at 90%, while Helpful Hands and Family Link REIC are at 50% of backlogging. 406 periodic IFSPs had recently been entered which allowed 1,000 EIP backlogs to be entered. DOH personnel have been visiting units and hired temps.

7. Additional Public Comment
• Sima Rasner from Beta, Inc inquired if there was State guidance on what student interns can and cannot do during EI sessions, for example, do they need to sit and observe or can they be hands on.

• Susan Evans stated she would need to investigate the inquiry.

• Kate Colluci stated students can provide intervention under the direct supervision of a practitioner and their role is much more than observing. Supervisors need to consult the syllabus given to them from each college or university. Kate asked the State to release any other guidelines or restrictions they have on student internships to the SICC.

8. Adjournment – 1:44 p.m. upon motion by Kate Colucci, and unanimously carried.

    Next Meeting: May 17, 2019
    The Public Health Environmental Lab