

COMMUNICATION NETWORK MEETING

April 10, 2025

CYSHCN Communication Network Purpose:

Provide for exchange of information among those programs and entities that serve children with special health care needs and their families and facilitate an opportunity to learn more about statewide policies, programs and issues critical to this unique population.

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Attendees

Due to continued social distancing requirements enacted by Governor Inslee, Communication Network will be conducted entirely in an online format.

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Attendee	Phone	Email Address
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Guests:	
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Nikki Banks, MPH, HCA	nikki.banks@hca.wa.gov

Children and Youth with Special Health Care Needs (CYSHCN) Program Update

www.doh.wa.gov/YouandYourFamily/InfantsChildrenandTeens/HealthandSafety/ChildrenwithSpecialHealthCareNeeds.aspx

Staff Updates

- Learning Journey on Local Health Jurisdiction role in CYSHCN services and systems and CYSHCN Blueprint implementation focused on care coordination continue.
- DOH MCH team are continuing to work with programs on priority and strategy development as part of the MCH Needs assessment
- Next CommNet will be an interactive session focused on these issues

Child Health Intake Form (CHIF) Database

CHIF Office Hours 4th Wednesday of the month at 11am. Upcoming Dates:

- May 28th, 2025
- June 25th, 2025

New **CHIF** materials online including:

- CHIF Intake Form
- A decision map: Should I CHIF?
- Release of Information Form
- MFT Instructions
- Data Collection Template (Please note that this document will need to be saved to your computer before imputing data.)

For more information, contact Amanda Simon at Amanda.Simon@doh.wa.gov.

Washington Statewide Leadership Initiative (WSLI) and DOH Family Engagement

- Held Family Advisory Council (FAC) meetings in January and March.
- FAC report coming soon.
- Nikki is Family Representative to the AMCHP Board of Directors, 2024-2027.
 - Serving as the Chair of AMCHP's Family Leadership, Education, and Development (LEAD) Committee in 2025.
 - Presented as part of family leader session at annual conference
- Promoting Family Engagement in Systems Assessment Tool (FESAT) use within DOH programs through a FESAT Community of Practice.
- Newly elected as a Family Representative to the AMCHP Board of Directors.
- Sign up for the Washington Statewide Leadership Initiative (WSLI) newsletter

For more WSLI or DOH Family Engagement information, contact Nikki Dyer at 360-236-3536 or nikki.dyer@doh.wa.gov.

CYSHCN Program Nutrition Updates

- Food allergy provider document and eating disorder teen document coming soon!
- Bullying resource page for CYSHCN underway
- Updated Tween 2 Teen resource and focus on healthcare transition (HCT) underway. HCT is the change from
 pediatric to adult healthcare services and creating more independence for youth

For more information, please contact Khimberly Schoenacker at 360-236-3573 or khimberly.schoenacker@doh.wa.gov.

CYSHCN Early Childhood and Communication Updates

- New quarterly GovDelivery CYSHCN Communication Network newsletter! Sign up here: <u>Washington State</u>
 <u>Department of Health (govdelivery.com)</u>
- Updated Care Coordination Toolkit available on our website
- New materials for Local Health Jurisdiction CYSHCN Coordinators online

For more information, contact Linda Ramirez at Linda.Ramirez@doh.wa.gov.

Guest Presentations

WA Elks Therapy Program

Noam Gaster, MOT, OTR/L

WA Elks provides home-based Occupational or Physical Therapy (OT or PT) to children with disabilities at no cost to their families. There are 16 units to serve all Washington state counties and regions. Some may experience waitlists at times.

Therapy provided at one hour per week with home activity recommendations between sessions.

- Services are typically provided in the home, but in some instances they can be provided at a park or another relevant location as long as they meet the therapy goals.
- Parents or guardians are required to be present at each session.

Insurance is not required for this service.

- Can be used to supplement insurance benefits, as most insurances limit OT, PT, and SLP visits annually.
- There is no cost to families or payors for a child to receive these services.
- Can provide short-term services for families who are on waitlists for community providers.

A prescription for OT from a doctor is required to begin services. There is a specific form that they use, you can get the form from the central office.

There is an initial evaluation that is done before receiving services to inform therapy goals and treatment plan. These goals are revisited and reported out to the family and the prescribing doctor every 6 months.

Services are provided as long as there is a need, the prescription for services must be renewed annually. Services are available to children 0 to 21 years old throughout Washington.

Sessions can include:

Daily living skills

- Preparation for having a job
- Self-advocacy
- Self-expression through art and music
- Self-regulation skills

waelks.org/what-we-do/therapy/

Questions and Answers

Q: Are you looking to offer speech therapy in the future?

A: Elks Therapy does not have the capacity to offer speech therapy. The Scottish Rite Orient of Washington can provide speech therapy services to families at no cost for ages 2-7. There is some overlap between OT and SLP services, including feeding therapies and help children participate fully in activities with communication support, but this is best when provided alongside the SLP.

Q: Do you accept Medicaid?

A: Elks Therapy does not accept any payment and does not need to look at what kind of insurance a child has or does not have. Everything is covered by funding through the Washington State Elks Association.

Q: How can you help with feeding and swallowing needs?

A: OTs have the ability to address feeding and swallowing needs. It may or may not be in a particular therapist's wheelhouse, and there is only one therapist for each unit of the state. But it is worth reaching out and asking if it is something that your local unit's therapist can address. If it is not, the therapist would help connect a family to a resource that could better fit their unique needs.

Q: Who do we reach out to in order to learn about waitlist times in our region/unit?

A: The best person to reach out to in order to find out about waitlist times would be the Elks Therapist for your area. Feel free to reach out to the presenter or the main office to get connected with the correct therapist.

Q: Are you busier in the summer months?

A: That will depend on the therapist. Some kids will go on vacation during the summer months and free up the schedule. But some therapists may see more interest from kids who are in school during the summer months.

Community Health Worker Medicaid Benefit

Nikki Banks, MPH, HCA

This new benefit is expected to go live in July 2025 as part of a Medicaid State Plan Amendment.

Community Health Workers (CHWs) will be under the supervision of a licensed provider enrolled with Medicaid (ie. Nurse practitioners, social workers, doctors). This supervisor ensures the CHW stays within their scope of work, but does not need to be present with the CHW during client visits.

All payments for the CHW visits will be handled by the clinic or supervising provider.

Rules (WAC) for this benefit were published recently. (link!! Add from chat)

- Benefit is open to all Medicaid enrollees, regardless of age
- Must be recommended by a physician or other licensed provider
- Some of the criteria to recommend this benefit include:
 - An unmet health-related social need or have a positive ACEs screening
 - Having one or more condition that places them at risk of hospitalization, institutionalization, acute exacerbation, or health decline
 - Two or more missed medical appointments within the last six months
 - Have a condition that requires monitoring

CHWs and Community Health Representatives (CHRs) are both recognized with this benefit. CHRs are typically more focused on tribal health.

A licensed provider who can provide a written recommendation for CHW or CHR services to a child during an appointment, this initiates the process.

To be eligible to provide reimbursable CHW services under this benefit, a CHW must:

- Have lived experience that aligns with the community they are serving,
- Have 2,000 supervised hours working as a CHW, paid or volunteer hours, within the past three years,
- Possess the core competencies laid out in the DOH CHW training (FREE), and
- Meet these within 18 months of beginning their role.
- CHWs must complete 6 continuing education training annually.

CHW services covered under this benefit include person-centered assessment and planning and care coordination and health system navigation.

Billing codes have been created to allow clinics and providers to bill for the time the CHW is working with a family, there are facility-based codes and non-facility based codes.

Primary Code

- Covers 60 minutes per month,
- Billable only once per month,
- 60 minutes may be broken into multiple visits throughout month,
- Initial visit under this code must be in-person unless the client is unable to attend,
- Prior authorization must be submitted and approved to allow the initial visit with this code to be performed
 over telehealth.

Add-on Code

- Covers 30 minutes
- Can use 3 times a month
- Must be submitted alongside Primary Code claim

This benefit does not exclude community-based organization (CBO), but more work is needed to explore how to allow CBOs to enroll in Medicaid.

Questions and Answers

Q: Can FQHCs bill under the Medicaid benefit while including CHW salaries in cost-based report?

A: Yes, FQHCs can bill for CHW services under the benefit while also including CHW salaries and benefits in their cost-based reports. Since an FQHC's encounter rate is based on all allowable costs, CHW salaries and benefits can still be included in cost reports for rate-setting purposes, while CHW services are being billed separately under the benefit. Services under the benefit are not encounter eligible.

Q: Could a licensed provider be an RN?

A: Yes, if they are enrolled as a Medicaid provider, they will qualify.

Q: Is there a standardized ACEs screening tool or process to use?

A: No, there is no standard tool for this screening, there are several available online. They can use whichever tool they find that is credible.

Q: Is this benefit also available for people on fee-for-service as well as managed care?

A: Yes, this is available for all children, youth, and adults who qualify on Medicaid plans.

Q: Are there plans to coordinate with the local CYSHCN Coordinator in each county?

A: If there is interest in a separate meeting for this group, they can reach out to Nikki to schedule a webinar session. They are also welcome to join any of the already scheduled webinars.

Q: Are there state credentials required for CHWs?

A: There are no state credentials for CHWs at this time. The DOH CHW training is required, but there is no credentialling process.

Q: Could a CHW begin work and meet the 2,000 hours of supervision within 18 months of employment on the job?

A: Yes. The hours they accumulate while serving in their current role will count to the 2,000 hour requirement. They can bill during this time as well.

Q: Will the CHWs be mandated reporters to CPS and APS?

A: Nikki is uncertain about this.

Q: Can CHWs provide home visits? Is there any coverage for drive time for home visits?

A: Yes. Coverage for this could be through their salaried time or the benefit code. The CHW cannot provide transportation for the client getting to and from appointments, but that is separate from any drive time associated with providing a home visit.

Q: How are you promoting this to provider clinics.

A: The CHW GovDelivery is the best way, but there will also be flyers going out to Medicaid-enrolled providers.

Q: Will the 1 hour limit be removed in the future?

A: The codes are set up through CMS. The initiating visit with the licensed provider for referral to the CHW does not count to the 1 hour. The hour starts with the CHW.

Q: Would any cuts on Medicaid at the federal level impact this benefit?

A: It is uncertain how any funding cuts would impact this benefit. The HCA team supporting this benefit is monitoring things at the moment.

Q: Are CHWs employees of an MCO? Who would provide their liability insurance?

A: No, CHWs are employees of a medical facility or Medicaid-enrolled CBO. Their employer would provide their liability insurance.

Q: Does the initial visit have to occur on a different day than the add-on visit? Could you stack the visit times?

A: You can stack the visits and have a single, longer meeting. The add-on code cannot be submitted by itself, so best practice is to bill for all CHW visits and services once a month.

Q: Are interpreters covered for CHW uses?

A: Yes, there are no plans to change how interpreters are paid. If the CHW is bilingual, they can provide services in either language if they feel comfortable doing so.

Q: How long could a CHW spend with a client total in a month?

A: The total time a month could be as much as 2.5 hours because the primary code covers 60 minutes and the add-on code covers 3 visits at 30 minutes each.

CSHCN Coordinator Updates by County

Gathered from counties and shared on a quarterly basis.

Asotin County Health District Lora Gittins, CYSHCN Coordinator

No updates at this time.

Clark County Publica Health District

Jan Schmalenberger, CYSHCN Coordinator

No updates at this time.

Grays Harbor County Public Health Stefani Joesten, CYSHCN Coordinator

No updates at this time.

Grant County Health District

Janette Garza, CYSHCN Coordinator

No updates at this time.

Island County Public Health
Megan Works, CYSHCN Coordinator

No updates at this time.

Jefferson County Public Health Cynde Marx, CYSHCN Coordinator

No updates at this time.

Pacific County Children and Youth with Special Health Care Needs Brianne Cline, CYSHCN Coordinator

No updates at this time.

San Juan County
Kristen Rezabek, MS, RDN, CD, CDE

No updates at this time.

Spokane Regional Health District

Kristin Lester, CYSHCN Coordinator

No updates at this time.

Thurston County Public Health and Social Services

Bonnie Peterson, CYSHCN Coordinator

No updates at this time.

Yakima County- Children's Village Tracie Hoppis, CYSHCN Coordinator

No updates at this time.

Neurodevelopmental Center (NDC) Updates

Check out the NDC StoryMap: Neurodevelopmental Centers of Excellence of Washington

Peace Health Children's Therapy - Whatcom County Kris Gaggero, Clinic Manager

No updates at this time.

Mary Bridge Children's Therapy Services Kari Tanta, Manager

Rehabilitation & Therapy Services - Mary Bridge Children's

No updates at this time.

Kindering

Kathy Fortne, Director of Operations

www.kindering.org

No updates at this time.

HOLLY RIDGE

Alicia Skelly, Infant Toddler Program Director

No updates at this time.

Children's Therapy Center

Karen Smith Steadman, Early Intervention Program Director and Jodi Van Vleet Center (3-18) Program Director

No updates at this time.

Health Plan Updates

Wellpoint

Derek Steele, Manager, Case Management

No updates at this time.

Community Health Plan of Washington (CHPW)

www.chpw.org

No updates at this time.

Coordinated Care

Sherry Bennatts, Senior Manager, Case Management

www.coordinatedcarehealth.com

No updates at this time.

Molina Healthcare of Washington Kelly Anderson, Program Director, Healthcare Services

www.molinahealthcare.com

No updates at this time.

UnitedHealthcare

Cassie Mitson, Private Duty Nursing Case Manager

www.uhc.com

No updates at this time.

[Coverage Area Incudes: All Counties <u>except</u> Clallam, Cowlitz, Garfield, Pend Oreille, San Juan, Skagit, and Whatcom]

No updates at this time.

Partner Updates

Washington State Parent to Parent Network Tracie Hoppis, Manager

No updates at this time.

Washington State Medical Home Partnerships Project for CYSHCN Kate Orville

www.medicalhome.org

No updates at this time.

University of Washington CSHCN Nutrition Project at CHDD Mari Mazon, MS, RDN, CD

University of Washington – Center on Human Development and Disability (CHDD)

Nutrition Training Contract http://depts.washington.edu/cshcnnut/

Washington State Fathers Network (WSFN) Louis Mendoza

www.fathersnetwork.org

No updates at this time.

Family to Family Health Information Center (F2FHIC) Jill McCormick

www.familyvoicesofwashington.com

No updates at this time.

Open Doors for Multicultural Families Hodan Mohamad

www.multiculturalfamilies.org

No updates at this time.

Washington Autism Alliance & Advocacy (WAAA) Arzu Forough

www.washingtonautismadvocacy.org

No updates at this time.

Office of Superintendent of Public Instruction (OSPI) Nicole Klein, Health Services Program Supervisor

www.k12.wa.us/HealthServices/default.aspx

No updates at this time.

Seattle Children's Hospital Paula Holmes

www.seattlechildrens.org

No updates at this time.

Lifespan Respite Washington (LRW) Linda Porter

www.lifespanrespitewa.org

No updates at this time.

WithinReach Chris Gray

www.withinreachwa.org

No updates at this time.

State Updates

Department of Children, Youth, and Families

Early Support for Infants and Toddlers (DCYF-ESIT)

Lori Holbrook

www.dcyf.wa.gov/esit

No updates at this time.

DSHS, Developmental Disabilities Administration (DDA), Waiver Unit Kari Freer

No updates at this time.

DSHS / DDA, Medically Intensive Children's Program Doris Barret

No updates at this time.

DSHS, Fostering Well-Being Care Coordination Unit (FWB CCU) Autumn Wade and Amanda McCleskey

No updates at this time.

DSHS / ALTSA, Kinship Care and Lifespan Respite Rosalyn Alber

www.dshs.wa.gov/kinshipcare

No updates at this time.

DOH Screening and Genetics Unit Nini Shridhar

www.doh.wa.gov/YouandYourFamily/InfantsChildrenandTeens/HealthandSafety/GeneticServices.aspx

The DOH Genetics program recently published a landing page on Rare Diseases. Rare diseases are more common than you'd expect and are estimated to affect more than 30 million people in the U.S. This means that 1 in 10 people in the U.S. have a rare disease.

In Washington, between 700,000 and 800,000 people may have a rare disease.

The landing page is intended for providers and the community and aims to create awareness around rare diseases. The page also provides several Washington-based resources and other national resources relevant to the rare disease community.

Rare Diseases | Washington State Department of Health

Health Care Authority

No updates at this time.

Attachments

- Agenda (PDF) (wa.gov)
- Meeting presentation slides (PDF) (wa.gov)

• Meeting recording (YouTube)

Next Meeting

July 10, 2025

Virtual Meeting