CCS Coordination Committee Minutes
Madison Central Library, 1st Floor Conference Room
October 19, 2016
12:00-1:30 p.m.

1. Comments about, or corrections to, 9/21/16 minutes. Approved.

2. Progress update
   a. CCS enrollment update (347 total)
      i. Adults=264 (+21 from September)
      ii. Youth=83 (+6 from September)
         Discussed reasons for discharge: death, transition to CCF, moved, didn’t want CCS services.
         Can return to CCS services when ready.
   b. Contracting
      i. Currently in process of contract renewal for all CCS contracts.
         • New contracts cover a 2-year period: 1/1/17-12/31/18
         • 1 agency does not want to renew contract (provider working with different agency now)
   c. Training of CCS Staff
      i. Continuing to offer all CCS trainings monthly due to ongoing provider onboarding and interest
      ii. Providing regular on-site technical assistance to providers as needed.

3. Variance request was denied
   a. Dane County CCS will need to take action on making changes to intake/admission process
      i. Need to “assure that the process for intake into the CCS begins with the consumer completing and signing an application and continues with the admission agreement, authorization for services, and functional screen. The current process obtaining the functional screen, admission agreement, and authorization of service prior to a consumer providing the application is not code compliant.”
      ii. DCDHS CCS team currently working on developing intake process that is code compliant, beginning with application.
         • Are there issues that CCS Coordination would like us to keep in mind as we develop changes to intake process? What is important to consumers when exploring new programs?
      iii. Change will be implemented prior to 1/1/17.
         Significant discussion.
1. Intake can be overwhelming, time consuming.
2. In some ways it is easier to spread it out over time or to simplify so that people aren’t answering the same questions multiple times.
3. Important to work at a pace that is comfortable for consumers.
4. Make sure that everyone who inquires about CCS has all of the information that we do—benefits vs. risks.
5. Make sure people have as much control over which agency they go to (and other factors)—keep the locus of control with the consumer whenever possible. Changing providers is hard.
6. Having the ability to maintain consistency of team members if that is what the consumer wants.
7. Look into having a peer outreach person for the intake process as first point of contact. Does La Crosse County do this?

4. CCS and Medication Assisted Treatment (Vivitrol, methadone, suboxone, etc.)
   a. CCS participants can receive MAT, the medication is covered by MA outside of CCS (CCS does not pay for any medications).
   b. Therapy component of MAT must be provided by CCS providers. This likely limits the providers that CCS participants can use due to requirements of the prescriber.
   c. MAT providers in the CCS Provider Network:
      i. Connections Counseling
      ii. Journey Mental Health Center
      iii. Tellurian

5. Certified Peer Specialist Training Update
   a. There are no dates for Peer Specialist training at this time. It is expected that training dates will be announced by the end of December 2016.
   b. To get on list to receive updates on Certified Peer Specialist trainings contact Alice Pauser at Access to Independence:
      i. alice@accesstoind.org or (608) 242-8484, x224

6. Topics for next meeting:

7. Other issues.
   a. Gayla took Participant Handbook to her daughter and she will work on the cover art with a classmate. Updates to come.
   b. Group decided to change CCS Coordination Committee meetings to every-other-month beginning in January. November and December canceled due to lack of agenda items and holidays.

8. Completion of timesheets.

Next Meeting: 11/16/16, 12:00-1:30pm at Madison Central Library, 1st Floor Conference Room