

**IN-ABC Association Meeting
January 19, 2007**

Gail Kahl, IN-ABC President called the meeting to order at 1:00pm.

Representatives, Kathleen Tompkins and Chris St. Paul from IPMG were introduced and provided an overview of the recent changes in case management services in the State of Indiana. IPMG was developed by 6 different companies coming together to answer the states Request for Services (RFS) put out by the State. They were awarded the contract on July 1, 2006 and moved 9,949 individuals into their system on Sept. 1, 2006. Although this may have been a challenging time, many services have been improved since this initial phase. If any Behavior Consultant has a question or concern, please contact IPMG directly so that it may be address!

All Provider informational inquiries should go to Kathy Davidson at (317) 257-7523 or via email at providerinfo@gotoipmg.com

A crisis line has also been implemented. This line should only be used for a crisis that is in need of case manager intervention, NOT for informational purposes.

The Crisis Hotline is: 1 (800) 878-9133

The web address for IPMG is www.gotoipmg.com

At this site, they now have live access to all CCB's, NOA's, case notes, and training. Soon they will be setting up a Provider Portal for providers and families to have immediate access to information they need. IPMG is closely partnering with BDDS and is in full support of the OASIS launch. IPMG is focused on elevating the standards of case management and they are doing so, by creating a Weekly Report Card for internal tracking. Employee turn-over is being closely monitored and is currently at a rate of 9.6% which is far below the national average for this field. Additionally many structural changes were made to how the duties of case management are divided. They have separated out the Intake and Assessment process and have a dedicated number of employees for this function only. This function was determined to take 30% of a case manager's time! So even though caseloads may be higher, workload should be manageable.

As of Dec. 31st, 2006 IPMG began to use the Consumer Choice Statement which focuses on providing an individual with 2-3 choices for a case manager who is both reasonable and available based on case load size and location. A brief biography is included to help the consumer.

Kelly Hartman, IN-ABC Liaison provided the association with an update of her activities and discussed the feedback from the surveys collected at the November meeting. The survey results are as follows: 39 people responded/ 21 preferred the monthly rate. Kelly stress that this rate must be directly tied to needs and consultant must

be accountable! All Behavior Consultants MUST do something for each person they bill for each month and document it! As changes may be coming in the future, we want to assure that we stand by the quality service that we deliver! Kelly requested volunteers for a work group on this issue. Please express your interest to the IN-ABC executive board at: indianaabc@aol.com .

The state is currently voting on the use of People First language.

The Self Advocates of Indiana won the bid to host the annual 2008 Self Advocates Convention!! IN-ABC representative at the Vision 2010 Self Advocates work group will now be Ann Baloski. This group has requested IN-ABC support in developing assertiveness and public speaking skills with the self advocates. This is likely to take place at the time of their annual picnic on July27 and will likely be in the form of several small work groups in the AM. If you are interested in volunteering to help at this event express your interest to the IN-ABC executive board at: indianaabc@aol.com . The Self Advocates also requested we add a link to their website at our website. Rob Westcott will be following up on this.

Department of Justice community survey report was release and behavior management services look good! More work may need to be done in the area of Desensitization protocol.

Rob Westcott, IN-ABC treasurer, review proposed budget for 2007 included discussion of recommendations for annual dues and projected stipend for the liaison. Recommendations were made to 1.) Write up a Job Description for the Liaison position and 2.) to explore options for IN-ABC booth/presentation material. Both of these items were deferred for review/execution by the executive board.

Motion: There was a motion to amend the bylaws to read, “Annual Dues will be established at the annual association meeting with the recommendation of the executive board.” Motion was seconded and voted upon. Motion was passed to accept this change to the bylaws.

Committees: Discussion regarding the Liaison Committee (membership 1) was initiated. The idea that this should be a designated position with a stipend rather than a committee function was discussed. This point was deferred as a discussion point for the executive board at their next retreat.

Adjustments to Annual Dues: The following adjustments to membership dues were proposed: Individual - \$100; Agency employing 9 or fewer consultants - \$400; Agency employing 10 or more consultants - \$600.

Motion: There was a motion to accept this change. The motion was seconded. This change was brought to a vote, and the proposed membership dues adjustments were accepted.

Cost increase for CEU's provided by IN-ABC: There was a proposal to increase the cost of CEU's to \$10 to members and \$15 to non-members.

Motion: this issue was brought to a motion and seconded. The membership voted and accepted this increase.

Volunteer/Committees: There was discussion regarding the benefit of all solicitations and responses for volunteer events, outside committees, and work groups to be addressed to the executive board at indianaabc@aol.com . This was recognized as a good practice and will go into effect immediately.

Meeting Adjourned.

Minutes respectfully submitted by Ann Baloski, IN-ABC secretary Jan. 22, 2007.

INABC INFORMATION ON NPI taxonomy for HIPAA

Website for FAQ and to download the code set: www.wpc-edi.com:

What is it? The Provider Taxonomy is a unique alphanumeric code, ten characters in length. The code list is structured into three distinct "Levels" including Provider Type, Classification, and Area of Specialization.

If you are NOT licensed under a different number you should consider using the following taxonomy code:

Non-individual/ Agencies/ Community/Behavioral

Code: 251S00000X

Type

Level II Classification

Community/Behavioral Health

A private or public agency usually under local government jurisdiction, responsible for assuring the delivery of community based mental health, mental retardation, substance abuse and/or behavioral health services to individuals with those disabilities. Services may range from companion care, respite, transportation, community integration, crisis intervention and stabilization, supported employment, day support, prevocational services, residential support, therapeutic and supportive consultation, environmental modifications, intensive in-home therapy and day treatment, in addition to traditional mental health and behavioral treatment.

If you are an individual – ie not practicing under a group number – but are not licensed otherwise – I would suggest you go to the website and find what you think best fits you.

Codes for licensed individuals

LCSW: Social Worker, Clinical - 1041C0700X

MSW: Social Worker - 104100000X

LMFT: Marriage & Family Therapist - 106H00000X

LMHC: Counselor, Mental Health - 101YM0800X

HSPP/ BMAN1 ONLY provider: Psychologist, Mental Retardation & Developmental Disabilities - 103TM1800X