

West Virginia Intellectual and Developmental Disability (I/DDW) Quality Improvement Advisory (QIA) Council Meeting Minutes	DATE: 10.8.2025 TIME: 10:00 AM – 1:30 PM Hybrid Meeting
Members Present:	
Marilyn Wolfingbarger Christine Dickson Stephanie White Brett Ballengee Ashley Skeens Shannon Hughart Michael Pushkin Ashley Quinn Stacey Broce Stephen Brady Angela Signore Ken Hudnall Marc Wilson Delmer Davis Emily Proctor Mary Gibbs Tina Wiseman Gillian McCarty Kristy Swartz Misha McShane Rachel Akers Taniua Hardy	
Members Not Present:	
Cynthia Parsons OHFLAC	
Others Present:	
Jason Jones	

MINUTES

Meeting called to order at 10:00 am by Mike Pushkin, Chair

Welcome and Introduction

- 11 F2F, 8 virtual, Jason Jones (as public)
- July 9, 2025, Meeting Minutes were presented, questions and corrections:
 - **Page 4, 5th bullet – Marilyn Wolfingbarger brought to the attention that verbiage needs to be amended in the minutes for errors**
 - **Page 5, RC = Registration Coordinators**
 - **Legislative update, bullet 1 – Putting the detail of the FAQ**
 - **Motion to approve with amendments: Ashley Skeens**
 - **Motion to Second: Angela Signore**
 - **Motion Carried**

Old Business:

None noted/discussed

New Business:

- New I/DDW QIA Council Member applicant, **Shannon Hughart** (in attendance), Provider (ancillary for current year)
 - **Motion to approve: Ashley Skeens**
 - **Motion to second: Stephanie White**
 - **Motion Carried**
- Vice-Chair – Ashley Skeens volunteered as no other nominations were made
 - **Motion to approve: _____**
 - **Motion to second: Christine Dickson**
 - **Motion Carried**
- Secretary position was discussed – have never had this position before. Ken Hudnall indicated that the Council should have a Secretary position as Acentra is dictating meetings, hosting the meeting, and providing TA for all meetings. Conversation was tabled.
- The member roster was reviewed. Will be sent to members for complete update.

BMS Updates:

Angela Signore presented the following BMS updates:

- Still working on policy manual and should not take much longer – draft to be reviewed by Cynthia Parsons this weekend and then submitted to the Governor's Office for review
- Mortality report: June – beginning of August 2025; 6 deaths; 5 natural causes, 1 pending, none required further investigations
- IDDW slots active 6,073 with 1,031 on the waitlist as of 9.30.2025. 50 additional slots will be released in FY2025

Palco Update:

Ashley Quinn/Stacy Broce in attendance.

- No updates

UMC/Acentra Health General Update:

Josh Ruppert provided the following updates:

- Josh presented the Provider Reviews from July, August, September
No questions
- Josh presented the Discovery & Remediation Report FY 24-25 and FY25-26 Q1
 - 88% required in all areas
 - Went through each question and compliance rate/requests
 - Question:
 - **Crisis Plans (27% compliance) – Ashley Skeens asked why this percentage was so low. Josh indicated that there were missing pieces on the old DD5 template that did not set up for success. With the new DD5 template, some are not completing in its entirety. Josh also indicated that the scoring for IMS and Crisis**

Plans is brutal because one thing missed means deficient, hoping to see more flexibility for credit for what was completed rather than what has not been completed

UMC/Acentra Health General Update – ISS/GH:

Misha McShane provided the following updates:

- Finishing up Q1 of 25-26 summary
- Discussed findings from Q4 of 24-25:
 - 181 sites visited, 26% compliant, 74% remediation, 0 sites heightened scrutiny
 - TA provided that require remediation, 30 days to respond with remediation
 - 16 providers reviewed - 3 high risk (more citations – med), 6 moderate risk, 7 low risk (Issues: AMAP training, med admin, trainings, IRs, environmental)
 - Seeing similar issues across the board – AMAP certification, HIPAA, Behavior Intervention Plans, missing certifications, retraining if med errors occurred, observations did not occur by supervising RN
 - Lease and residency issues – 60% met all requirements (Issues: unavailable, incomplete or unsigned, expired leases with zero renewal clauses)
 - Rights and Freedoms – 67% compliance (Issues: lack of access for private phone d/t no phones, privacy of door locks, visitation)
 - MAR – 9% compliance (Issues: missed med doc or passed w/o documenting, no RN verification if needed when given, changes not dated or signed by RN, lack of reason for medication, dosage/frequency not consistent with Orders)
 - Positive Behavior Support Plan – 65% compliant for IHP and Guidelines/Protocols but only 47% compliant for Plan (Issues: lack of person centered, irrelevant instructions, repeat programs across people being served, templates being used, restrictive interventions w/o HRC approval or punishment based, not individualized or not updated/revisited in a long time)
 - Incident Report – 63% compliance (Issues: late, missing, no follow up, no retraining for med errors, cannot produce reports, 11 members with non-submitted critical incidents) Critical incidents identified = med error, contact with a minor, injury, neglect, med emergency, service environment issues like dirty HVAC/excessive lint/mold in bathroom/broken appliances/loose railings/smoke detectors/fire extinguishers/lack of evacuation plan.
 - No APS reports completed this Quarter
 - Issued plans of compliance
- Oral Health Presentation provided at QPM in August. Misha will send to Ken to send out to QIA Council members.
- IDDW site change certification form – added as FAQ in October PC, #232 – when/how to fill out the form if site is closing or new residential site is opening, form submission somewhat low still
- Compiling data for all non-compliance to get to Providers to increase compliance

- Misha will send out all of this information to Ken to send to the QIA Council
- Questions/Requests:
 - Tania Hardy requested that this information be provided to the QIA Council prior to the meeting. Acentra will attempt to do this for next meeting.
 - Ashley Skeens asked what the remediation looks like for medications that are determined “not emergent”? Answer – depends on the specific provider or agency policy. Immediate remediation includes gaining the medication while Acentra is on site.

Bureau for Behavioral Health Update:

Steve Brady in attendance.

- Provided WV FCSP FY2025 Annual Report (briefly reviewed)
 - Gillian McCarty discussed Dental increase requests in the Berkley County area d/t sedation needs – Steve indicated that if a CM shows due diligence that there were attempts to gain coverage and present that to BBH then approval is more likely to be gained
 - Shannon Hughart indicated that providers are reluctant to agree to provide services through the Waitlist Grant. Steve volunteered to be an addition to the Provider Clarification call for training. Shannon also noted that the CM has to pay a vendor fee and the rate is not very high which discourages some agencies from providing services.
- Medley Room & Board Rate is to be distributed in November – rate increase to \$22.75/day (\$1.25 increase) will be effective 1.1.2026 for SFGH, GH – owned or leased by an agency

OHFLAC Update:

Jim Patterson was not in attendance. No update.

Requested Council Discussion Topics:

- Legislative Update – Presented by Mike Pushkin
 - Mike attended the 2025 Disabilities Legislative Symposium
 - Secretary did not speak about rate increases but more about foster care issues
 - News article: 9% increase in HCBS for IDDW – BMS is to disclose information by the end of the week that will retro to 10/1, must go through Gainwell at new rate prior to release
 - WA Legislature Disability Caucus – nationwide legislatures that work in health related fields
 - OK had best program – Mike requested his staff to review OK and see what can be used in WV
 - Workforce issues in all States – WV has lowest rates in the country specifically amongst surrounding states
 - Tiered rate system (based upon severity of PRS) used in other States – concerns with this though for WV noted
 - SUD Waiver has peer-to-peer program where a person with less supports can get reimbursed to work with people with high supports.

- Discussion occurred surrounding this topic such as how reimbursement looks, will this work in WV, gives folks the opportunity to get out and do things with support.
- Policy discussion with doing away with subminimal wage (WV allows) and sheltered workshops
 - No majority member attended from WV
 - MotiveCare Transportation – filed bankruptcy – will not see this affected as another contract will be issued. Jobs for Hope recommended by Mike to take people to treatments
 - Sugar Grover Naval Base (Pendleton County) – CON application for GH for children and adults with Substance Abuse D/O
 - HCA new appointees have approved all CONs since new appointment – if receive CON still has to go through high scrutiny by BMS before opening or providing services
 - Step-down setting denied by BMS
 - Very rural area, hours from a grocery or basic needs
 - No work being done on site
 - Mike indicated that AB campus would be an ideal place rather than this site
 - Gillian McCarty reported that some Natural Families will have 4 family providers with 4-5 PRSs and brin gin over \$100k per household
 - Ashley Quinn indicated that this issue occurred in ADW and had to be worked out with federal assistance – incredibly hard to balance because they get a paycheck and no one can tell them what they can do with that
 - Medicaid eligibility requirements to move to every 6 months – Mike Pushkin indicated that there were no conversations to indicate that this would affect IDD

Newly Requested Council Discussion Topics for Next Meeting:

- Social Security – presentation on guidelines for obtaining (Gillian McCarty)
- Federal government updates
- Provider/Stakeholder Training Updates – depends on how quickly it roles through the Governor’s Office (now goes from Commissioner to Secretary of State to Governor)

Public Comment:

- Asked if anyone was here for public comment. No one responded. Council agreed to adjourn meeting

Action Items	Person Responsible	Deadline
Membership Committee Review	Mike Puskin	On-going
Send applications for review to QIA members	Ken Hudnall	On-going – sent with council minutes
QIA Membership Roster	Ken Hudnall	To be sent immediately for update

Distribute current D&R report to QIA members	Ken Hudnall	With council minutes
Distribute current ISS/GH update to QIA members	Ken Hudnall	With council minutes
Distribute utilization report to QIA members	Ken Hudnall	With council minutes
Coordinating presenters outlined for next QIA council topics	Ken Hudnall/Courtney Sites	Before the next meeting in January 2026
<p><u>Council Meeting Dates and Time:</u> January 7, 2026 (virtual only) Meeting Time: 10:00AM – 2:00PM</p> <p>Motion to Adjourn: Ashley Skeens Second: _____ Meeting adjourned at 1:00pm</p> <p>Minutes taken by Ashley Skeens, Vice Chair</p>		