

Date October 26, 2021

Meeting Called By	Diane Berth, Chair				
Type of Meeting	Web-Ex				
ATTENDEES					
NAME	Present	NAME	Present	NAME	Present
Dr. Michael Smith Chief Medical Officer Trillium	<input checked="" type="checkbox"/>	Rachel Jordan * ICF/IDD Provider QM Director - Carobell	<input checked="" type="checkbox"/>	Krissy Vestal Head of Performance Improvement Trillium	<input checked="" type="checkbox"/>
Kimberly Ennis * Hospital Representative Vidant Medical Center	<input checked="" type="checkbox"/>	Lucy Wilmer* Central Regional CFAC	<input checked="" type="checkbox"/>	Dee Pankey Thompson* IDD Provider GHA Autism Supports	<input type="checkbox"/>
English Albertson * IDD Provider/Provider Council Representative Director of Program Operations Monarch	<input type="checkbox"/>	Vacant * Network Prescriber	<input type="checkbox"/>	Frank Messina * Southern Regional CFAC	<input checked="" type="checkbox"/>
Fonda Gonzales, LCMHC Director of Quality Management Trillium	<input checked="" type="checkbox"/>	Vacant * SU & MH Adult Provider	<input type="checkbox"/>	Diane Berth * Licensed Independent Practitioner	<input checked="" type="checkbox"/>
Ron Lowe * Northern Regional CFAC	<input type="checkbox"/>	Lindsay Joines * SU Provider Coastal Horizons	<input checked="" type="checkbox"/>	Rashel Lauret * MH Child Provider NC Rapid Source	<input checked="" type="checkbox"/>
Dr. Paul Garcia Deputy Chief Medical Officer (Alternate for Dr. Smith)	<input type="checkbox"/>	David Tart * SU Provider Integrated Family Services	<input checked="" type="checkbox"/>	Deborah Albers QM Accreditation Consultant - Guest	<input checked="" type="checkbox"/>
Jennifer Kelly QM Coordinator Guest	<input checked="" type="checkbox"/>	Meranda Bennett QM Accreditation Consultant - Guest	<input checked="" type="checkbox"/>	Joylet Mercer QM Accreditation Consultant - Guest	<input checked="" type="checkbox"/>
Candace Gibson QM Delegation Consultant Guest	<input checked="" type="checkbox"/>	Ryan Covey QM Delegation Consultant Guest	<input checked="" type="checkbox"/>	Kayla Mikule Head of Health Plan Development - Guest	<input checked="" type="checkbox"/>
Catrice Johnson QM Delegation Consultant Guest	<input checked="" type="checkbox"/>				

*Represents Voting Members

AGENDA

1. Agenda topic: Open Meeting and Introductions Presenter(s): Diane Berth

Discussion	<ul style="list-style-type: none"> • Diane opened the meeting and each participant introduced themselves sharing the role of their agency and population served. • A quorum was present. • Krissy reported that Diane will continue as the Chair for this committee and Frank Messina will serve as Vice Chair.
Conclusions	<ul style="list-style-type: none"> • The meeting was opened and committee member details were shared.

Action Items	Person(s) Responsible	Deadline
<ul style="list-style-type: none"> N/A 		

2. Agenda topic: Agenda and Meeting Minutes

Presenter(s): Diane Berth

Discussion	<ul style="list-style-type: none"> The NCQA Update was reviewed earlier in the meeting due to Fonda having to leave for another meeting. There was one correction to the next meeting date on the agenda noted (next meeting date should reflect 1/25/2022). The July 27, 2021 meeting minutes were presented and approved as written with a motion from Rashel and a second from Frank. 	
Conclusions	<ul style="list-style-type: none"> The meeting minutes for July 27, 2021 were unanimously approved by all members. There were no questions or concerns identified for follow-up or items recommended for corrective action. 	
Action Items	Person(s) Responsible	Deadline
<ul style="list-style-type: none"> Forward July 2021 Minutes to Diane for signature & post signed minutes to Trillium Website 	Susan Massey	ASAP

3. Agenda topic: Follow-up Items

Presenter(s): Diane Berth

Discussion	<ul style="list-style-type: none"> Dr. Smith - F/u with adding the Vanderbilt for ADHD Screening Tool to the Trillium website. Completed. The Vanderbilt for ADHD Screening Tool is in the process of being posted to Trillium's website, if not already posted to the website. Krissy - Update bylaws with committee recommendations. Completed. The GQIC bylaws were updated as recommended. All Members - Share recommendations for changes to GQIC My Learning Campus Training with Krissy or Diane. Completed. A recommendation was made to add the Network Prescriber position to the training as an additional seat on the committee. Dr. Smith shared he has reached out and shared this vacancy, but has not had any responses. Krissy will contact the Training Department to have the Network Prescriber position added to the training. Susan - F/u with reminder to members that have not completed and submitted annual forms. Completed. All members have submitted the requested annual forms. Susan - Send Rachel & Kimberly's email information to English. Completed. English - Send out first meeting invite for Innovations Waiver (IW) Late Reporting Subcommittee. Completed. Rachel reported that this committee did meet as scheduled and discussed the IW Late Reporting Protocol and had questions for clarification in relation to the global pandemic and the impact (staffing shortages) it had on provider agencies. 1) When will the IW late reporting process roll out? 2) When late reporting becomes an issue can Trillium review those cases individually and give feedback on how to improve the process without penalizing agencies who are trying to meet reporting deadlines? Krissy requested these questions be sent to 	
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	<p>her via email for a response and also added that IW late reporting has not been an issue during the pandemic and we have met 85% of incidents reports being submitted within 72 hours. Rachel will follow-up with these questions in an email to Krissy.</p> <ul style="list-style-type: none"> • Krissy - Make correction to the fiscal year date on Activity #3 of the 2021-2022 GQIC Work Plan. Completed. The date on the Work Plan has been corrected. • All Members - Contact Diane if interested in presenting agency QIA for October meeting. Closed. No member responses received. Rashel Lauret volunteered during the meeting to present her agency QIP at the January 2022 GQIC meeting. • Krissy - Re-send the link to the Annual GQIC Survey to members. Completed. The survey link was re-sent as some members reported not receiving the original email and therefore did not respond. 										
Conclusions	<ul style="list-style-type: none"> • All follow-up items from the July 27, 2021 meeting were completed. • An additional recommendation was requested to add the Network Prescriber position to the committee structure on the My Learning Campus GQIC Training. This will be followed-up on by Krissy. • An additional follow-up item for Rachel to send IW Late Reporting Protocol questions to Krissy via email was also requested. • Rashel Lauret will present her agency's QIA at the Jan GQIC meeting. Krissy will add this item to the Jan GQIC agenda. • There were no other questions or concerns identified for follow-up or items recommended for corrective action. 										
Action Items	<table border="1"> <thead> <tr> <th data-bbox="1000 1073 1312 1136">Person(s) Responsible</th> <th data-bbox="1312 1073 1468 1136">Deadline</th> </tr> </thead> <tbody> <tr> <td data-bbox="1000 1136 1312 1241">Krissy Vestal</td> <td data-bbox="1312 1136 1468 1241">Jan Mtg.</td> </tr> <tr> <td data-bbox="1000 1241 1312 1314">Rachel Jordan</td> <td data-bbox="1312 1241 1468 1314">Jan Mtg.</td> </tr> <tr> <td data-bbox="1000 1314 1312 1388">Rashel Lauret</td> <td data-bbox="1312 1314 1468 1388">Jan Mtg.</td> </tr> <tr> <td data-bbox="1000 1388 1312 1461">Krissy Vestal</td> <td data-bbox="1312 1388 1468 1461">Jan Mtg.</td> </tr> </tbody> </table>	Person(s) Responsible	Deadline	Krissy Vestal	Jan Mtg.	Rachel Jordan	Jan Mtg.	Rashel Lauret	Jan Mtg.	Krissy Vestal	Jan Mtg.
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Krissy Vestal	Jan Mtg.										
<ul style="list-style-type: none"> • F/u w/Training Department to add the Network Prescriber position to the My Learning Campus GQIC Training • Send IW Late Incident Reporting Protocol questions to Krissy via email • Rashel Lauret to present her agency's QIA at the Jan 2022 GQIC meeting • Add Rashel Lauret to the Jan 2022 agenda to present her agency's QIA 											

4. Agenda topic: 2021-2022 GQIC Work Plan
Presenter(s): Diane Berth

Discussion	<ul style="list-style-type: none"> • Diane presented and reviewed the updated 21-22 GQIC Work Plan. The Work Plan has been discussed and updated by the Work Plan Subcommittee. Each goal was reviewed and changes/revisions (from the subcommittee) were noted. The correction to the date for the fiscal year for the third activity to 2021-2022 was made. The data for the Training Survey results will be presented at the Jan GQIC meeting. Krissy shared the next Network Training Survey will be out in the Spring. The date (Oct 2021 meeting) for the 5th Goal under the Activity to Ensure Education Related to Quality is Available and Provided to the Network will be updated to reflect review in the Jan 2022 meeting.
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Fonda shared there is currently a survey for Community Education Needs available on Trillium's website that gives opportunity to provide feedback and may be available on-going. All members were invited to share their ideas through this survey.

- Frank inquired if Trillium has received any information or updates from the state on how providers will provide services to their members in regards to the new Tailored Plan (TP), treating the whole person. Are there mandates forthcoming as well as funding to provide these services? Frank, as CFAC Chair, has not been able to obtain any information regarding this from the state and wanted to inquire if Trillium had any insight on this issue. Dr. Smith shared the state informed Trillium that they are looking at their vision for integrated care within the last two weeks. The six MCO's all have different processes for integrated care and the state is amenable to that as long as it meets their visions/guidelines. There are parts of their vision the state is modifying/changing as they go. DHHS is looking at how they can best provide oversight for the six TPs. We are utilizing our Standard Plan Partners in different ways with different levels of intensity to meet reporting benchmarks. Trillium is utilizing our Standard Plan Partner and our Pharmacy Benefit Partner in a way that we feel comfortable in approaching this contract. How the state will monitor integrated care in part is in the RFA. They have added approximately 150 more deliverables that Trillium is working on, most is IT and report driven, getting information from providers through data feeds and back to the department. There are a lot of moving pieces in the Care Management piece and the IT piece that are in-depth. Frank shared that the state has delegated budget cuts and his concern is that they have not given the reason for the cuts other than a formula they have devised. Due to these budget cuts Trillium has had to cut back services along with providers cutting back services. He feels like the state is delegating MCO's to provide services without the means to provide them. Frank is attending the i2iConference in December and will ask these questions there. Frank expressed his frustration with finding services. Rachel Jordan echoed Frank's frustration from the provider perspective sharing they only have guidance from the CMA, AMH Plus application that initially came out from the state. Rachel shared that she heard a lot of those quality measures are still being developed. The funding is related to the complex IT systems that are required to be in place and this is costly and will definitely have an impact related to member services. The state has advised that an allocation of funding of approximately 90 million dollars will be offset to the TPs and it will be up to the TPs to distribute the funding to the AMH Plus and CMA agencies. Diane shared as of Oct 1st and due to budget constraints certain funds are no longer available and the TPs don't kick in until next summer and this gap creates concern of what we need to do. Frank shares information he receives from the committees and groups he attends with other concerned parents to keep them informed.

Conclusions	<ul style="list-style-type: none"> There are many unanswered questions and concerns moving into the TP from committee members, MCO staff and providers. There were no other questions or concerns identified for follow-up or items recommended for corrective action. 	
Action Items	Person(s) Responsible	Deadline
<ul style="list-style-type: none"> Add Training Survey Results review to the Jan 2022 GQIC Meeting agenda 	Krissy Vestal	Jan Mtg.

5. Agenda topic: Trillium QIP/QIA Updates

Presenter(s): Krissy Vestal

Discussion	<ul style="list-style-type: none"> Krissy presented and reviewed Trillium's 5 active QIAs in detail. Interventions were reviewed and updated measurements were shared and discussed. The QIA grid format was updated and includes new graphs and indicators for when interventions started to assess the effectiveness of the interventions throughout the process of the activities. An increase to 12.57% was noted for the Increase in Utilization of MST Services QIA and we are striving for this to continue increasing to meet the goal of this activity. Rachel inquired if the decrease in the population served (TP members) will impact the 1-7 day follow-up percentages. Fonda responded that it is difficult to tell, but Trillium has established a new Emergency Department (ED) Care Management Team to facilitate supporting individuals that frequent the ED setting. Trillium is hopeful even with the reduced numbers we will continue to see progress with meeting our goals of keeping members out of the ED and/or repeat ED visits. In the past, the people who typically used the ED were individuals that were not engaged in services. They would be new to Trillium and it will be difficult to determine if these members will be Standard Plan or TP in the future. Dr. Smith stated if they are new and not in the TP population then they would become part of the Standard Plan population if they have Medicaid. The EDs will have to contract with each of those Standard Plans in order to be reimbursed for that ED stay. He shared that multiple ED use is a factor in TP admission and can get very complex. The ED activity is measured separately by the state currently and ED visits don't connect with the Super Measures. For the Super Measures, Trillium does have a process in place to compare our data with the state's data and traditionally there has been little discrepancy. The state data is very delayed sometimes 5 to 6 months later and Trillium uses local data to get a snapshot of where we are with our goals and to determine if other actions need to be implemented. The data to determine if we do better with discharging hospitals verses FBCs has not been reviewed based on those categories. David shared that the meetings with providers are helping and if there are areas they need to target then they are supportive of focusing on those. 	
Conclusions	<ul style="list-style-type: none"> Trillium continues to strive to meet each goal for the QIAs and then maintain the goals for 12 months before closing the QIA. 	

	<ul style="list-style-type: none"> • A drill down into discharging data was recommended to determine where and if we are doing better for community hospitals versus FBCs. • There were no other questions or concerns identified for follow-up or items recommended for corrective action. • All current interventions will continue. 	
Action Items	Person(s) Responsible	Deadline
<ul style="list-style-type: none"> • F/u on drill down of discharging data (community hospitals versus FBCs). 	Krissy Vestal	Jan Mtg.

6. Agenda topic: Provider QIA Presentation

Presenter(s): Diane Berth

Discussion	<ul style="list-style-type: none"> • There were no volunteers to present an agency QIA. Rashel Lauret volunteered to share her agency's QIA at the January 2022 meeting as reported in the Follow-up Section reviewed previously. 	
Conclusions	<ul style="list-style-type: none"> • Rashel Lauret's presentation to present her agency's QIA at the January 2022 meeting is already listed as a follow-up item in the Follow-up Section previously reviewed. • There were no questions or concerns identified for follow-up or items recommended for corrective action. 	
Action Items	Person(s) Responsible	Deadline
<ul style="list-style-type: none"> • N/A 		

7. Agenda topic: NCQA Update

Presenter(s): Fonda Gonzales

Discussion	<ul style="list-style-type: none"> • NCQA Update Fonda shared re-survey documents were submitted in September and we have also responded to follow-up questions from the surveyors. The Complex Case Management file review is scheduled for November 8th and we hope to hear from the NCQA Review Oversight Committee shortly thereafter in December. Trillium has purchased Health Plan Standards and has hired Kayla Mikule who will be assisting us with migrating from Managed Behavioral Health Care to Health Plan. The TP RFA requires MCO's to become Health Plan Accredited by the end of the third contract year and that will include Long Term Services Supports certificate of distinction. Discussions for the certification are underway and we are determining areas that need improvement and if additional changes need to be implemented. 	
Conclusions	<ul style="list-style-type: none"> • There were no questions or concerns identified for follow-up or items recommended for corrective action. 	
Action Items	Person(s) Responsible	Deadline
<ul style="list-style-type: none"> • N/A 		

8. Agenda topic: GQIC 1st Quarter Data Report

Presenter(s): Krissy Vestal

Discussion	<ul style="list-style-type: none"> Krissy presented and reviewed the GQIC's 1st Quarter Data Report July-September 2021. The average number of grievances per 		
	<p>month is 13 with a running total of 40 grievances (Jul-14, Aug-11, Sep-15) for the year. Of the 40 grievances 33 were submitted on behalf of a member and 7 were not on behalf of a member consistent with previous quarters. Members in the Multi-Disability Category lead in the number of grievances (25% with 7-Quality of Care & 3-Attitude and Service). The difference in Quality of Care and Attitude and Service is that Quality of Care is related to treatment and Attitude and Service is related to customer service. Thirty-three grievances were against providers and seven grievances were against the MCO. There were no grievances for the SU service area reported for this quarter. There were no substantiated grievances against the LME this quarter. Approximately 35% of Quality of Care grievances against providers were investigated (5-Unsubstantiated, 2-Partially Substantiated). Krissy reviewed the definitions for Substantiated, Partially Substantiated and Unsubstantiated. The summary of Quality of Care Concerns was reviewed for July, August & September. There was a total of 593 incidents this quarter (507-Level III, 86-Level III). The majority of incidents were among the Child Mental Health population. The majority of events were due to Restrictive Interventions at 39% and Member Behavior at 34%. There was an average of 20 deaths per month this quarter. Last year's average was 16. The most noted cause of death was due to Terminal Illness/Natural Causes, but 43 deaths from this year are still pending and currently listed an Unknown Cause. These numbers will be revised once the death certificate/autopsy reports are received. There were two confirmed deaths due to COVID-19 (May-2020 & Jan-2021). There were no deaths ruled as suicide this fiscal year. There were three medication errors reported in July (wrong does, missed dose, wrong patient) and a total of nine med errors last fiscal year. The medication errors were reported from three different providers and for three distinct members. There were four Other Events this quarter (3-Expulsions, 1-Suspension), for four distinct members and reported by four separate providers. Routine Monitoring numbers are low due to Trillium's decrease in monitoring providers at this time as a result of the flexibilities related to COVID.</p>		
Conclusions	<ul style="list-style-type: none"> Any additions or deletion recommendations to the data in this report can be emailed to Krissy Vestal. All data shared within this report was requested by GQIC over the years and can be updated as requested. There were no questions or concerns identified for follow-up or items recommended for corrective action. 		
Action Items	Person(s) Responsible	Deadline	
<ul style="list-style-type: none"> N/A 			

Presenter(s): Dr. Smith

<p>Discussion</p>	<ul style="list-style-type: none"> Trillium is well underway for TP implementation. An Implementation Team is in place and diligently working solely on TP implementation. There are some staff that continue to run their departments and work on TP implementation as well. Fonda Gonzales will be joining the Implementation Team while also running the Quality Management Department. Our implementation plan has been separated into 14 work streams with each work stream having one or two different leads. We track our progress weekly with our work leads and consultants in a project management plan to assess where we are and what needs to be completed during specific timeframes. Dates for deliverables are tied to the date of award announcement or from the “go live” date. Some items are due 30, 60 & 90 days post award. Monday, was our 90 day post award due date. Trillium was on target to submit all required information and then on Wednesday the state decided to give an extra month for the 90 day deliverables. Trillium will use this time to review the deliverables again and tweak anything needed; however, some were ready and have been submitted. Envolve is our Pharmacy Benefit Manager Partner and our Standard Plan Partner is Carolina Complete Health. Centene is the parent company for both Carolina Complete Health and Envolve. The Director of Pharmacy has been hired and is Jason Swartz who has many years of knowledge and experience in the pharmacy field. Richard Leissner, General Counsel has taken a new position and will be leaving Trillium at the end of October. This is a wonderful opportunity for him in this stage of his career; however, we are sad to see him go. We will be recruiting for a new General Counsel to take over this role. We do have an Assistant General Counsel currently on staff. Diane asked if there are other states that have transitioned to managed care or like systems of care. North Carolina (NC) was one of the last large states to put Medicaid under Managed Care completely. NC’s model includes IDD and the Innovations Waiver populations and is closely modeled after New York’s model. There are still differences. The uninsured and underinsured populations continue under Trillium and the rest of the country is waiting to see how NC will make this work. Standard Plans for physical health and mild to moderate went live in July 2021 and went relatively smoothly. There have been fewer problems with transitioning members between plans than anticipated. Medicaid is making a change from county of origin to county of residence and this is causing some issues in the TP. Non-emergency transportation has always been an issue and continues to be difficult across the country.
<p>Conclusions</p>	<ul style="list-style-type: none"> Dr. Smith will continue to update the GQIC as updates become available. A variety of minutes are posted on the Trillium Website including our Governing Board Meetings and are available for anyone interested in additional information. There were no questions or concerns identified for follow-up or items recommended for corrective action.

Action Items	Person(s) Responsible	Deadline
<ul style="list-style-type: none"> N/A 		

10. Agenda topic: Annual GQIC Survey Results/Action Items

Presenter(s): Krissy Vestal

Discussion	<ul style="list-style-type: none"> Krissy presented and reviewed the Annual GQIC Survey Results in detail. The survey was implemented through SurveyMonkey and the results are used to help evaluate the effectiveness of the group, assess what we are doing well, what we can focus on for improvement and to gain feedback for additional thoughts and ideas related to improvement. A total of five GQIC members completed the survey. The first five questions were answered positively with either Extremely Well or Very Well. There were two comments submitted as improvements. The first is that it was felt that members don't review the prepared packets ahead of time as requested in an effort to be prepared to come to the meeting to discuss their comments/concerns. The second was a request for feedback from Trillium's Executive group annually to discuss GQIC's progress in meeting their goals. One possibility is for GQIC to receive feedback from the Quality Improvement Committee. Comments as to areas for GQIC to focus on in the future (Q9) consisted of 1) quality improvement measures as outlined for all service areas, 2) Greater focus on "gaps & needs", 3) Emerging issues pertaining to TP and how focus on quality will increase, how to support provider agencies for success, 4) Ideas for improvement. Krissy asked if the committee wanted to take any action measures as a result of the survey responses or if there were additional thoughts or feedback from the group. 	
Conclusions	<ul style="list-style-type: none"> An action item from the survey is to have QIC review and share feedback to GQIC with regard to their progress in meeting goals and suggest ideas for improvement and to document the feedback given. There were no other questions or concerns identified for follow-up or items recommended for corrective action. 	
Action Items	Person(s) Responsible	Deadline
<ul style="list-style-type: none"> Add QIC review of GQIC work plan to QIC Activity Grid 	Krissy Vestal	ASAP

11. Agenda topic: Open Agenda/Round Table Discussion

Presenter(s): All Members

Discussion	<ul style="list-style-type: none"> GQIC Prescriber Vacancy - Diane Dr. Smith is actively recruiting for the open Network Prescriber position. Ryan Estes' seat (SU & MH Adult Provider) is now open as well. He took another position and his service to GQIC was greatly appreciated. Rashel inquired if we will be reaching out to individuals for membership from Halifax and Bladen counties once they are transitioned under Trillium. Dr. Smith shared Halifax will be joining Trillium on December 1st, 2021 and will become part of our Northern Region and Northern CFAC. The state has not given 	
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	<p>us a transition date for Bladen County so it is unknown at this time. Trillium does have a plan in place and the transition will happen when the state sets the date.</p> <ul style="list-style-type: none"> • Funding Cuts - Frank Frank shared with Trillium growing the state needs to recognize this and add additional funding. CFAC members have sent letters regarding funding cuts to legislators and have not received feedback. He hopes to have the opportunity to be able to sit down with legislators and discuss this issue to voice concerns and let them know this needs to be reviewed. North Carolina is growing in population and with this expansion there will be more individuals with mental health and substance use issues in the state in need of services. Frank is appreciative of Trillium and like organizations where parent voices can be heard. • Introduction - Lucy Wilmer Lucy introduced herself and was welcomed as a new member. She is a Central Regional CFAC member as well since approximately 2013 serving as the Mental Health Representative for Beaufort County. Lucy served previously as the Chair for the NAMI Peer Leadership Council and has done a lot with NAMI locally in Raleigh. She is thankful for membership and looking forward to working on this committee. 				
Conclusions	<ul style="list-style-type: none"> • There were no additional topics to add to October's Round Table Discussion. 				
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Meeting Adjourned**Next Meeting Date:** January 25, 2022

(All meetings convene from 10am - 12pm)

Supporting Document/Attachment for Minutes:

Meeting Minutes from previous meeting

Agenda

QIA Grid & Graphs Oct 2021

1st Qtr. 21-22 GQIC Data Report Jul-Sep 2021

GQIC Work Plan 2021-2022

GQIC Annual Survey July 2021

Submitted by Susan Massey


Signature of

Diane Berth, Chair

Licensed Independent Practitioner



Date