

Rhode Island Integrated Care Initiative (ICI) Implementation Council Charter

I. Name and Authority	The Council shall be known as the ICI Implementation Council. It is convened by the RI Executive Office of Health and Human Services (EOHHS).
II. Purpose	The Council is established to serve as an advisor to EOHHS during the implementation of ICI Phase 2 and thereafter as needed. It will make recommendations based on a consensus of its membership of consumers, providers, and other stakeholders.
III. Functions	<p>The Council will perform the following functions:</p> <ul style="list-style-type: none"> • Advise EOHHS on issues brought before the Council by EOHHS. • Solicit input regarding ICI implementation from consumers, providers, and other interested stakeholders. • Monitor consumer access to healthcare and critical related non-medical services. • Assist in developing quality metrics to be used to measure ICI outcomes. • Review issues raised through the grievance and appeals process and ombudsman reports. • Promote accountability and transparency, especially for consumers. • Participate in development of public education and outreach campaign materials, as requested. • Serve as the steering committee for the ICI Ombudsman Program.
IV. Relationship of the Council to EOHHS and Mutual Responsibilities	<p>The Council serves at the pleasure of the Secretary of EOHHS, with EOHHS having final authority for all decisions related to the programmatic operation of the Council.</p> <p>EOHHS staff will not serve as members of the Council. EOHHS shall designate a person as a point of contact for the Council.</p> <p>The Council will give its advice to EOHHS in writing as described in Operating Procedures below. The Council will respond to all requests from EOHHS for advice or review in a timely manner.</p> <p>EOHHS will respond to all advice from the Council in writing, explaining to the maximum extent possible areas of concurrence or disagreement and the reasons for its response. EOHHS will be responsible for bringing important ICI information to the</p>

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	<p>Council and responding to Council requests for information in a timely manner.</p>
<p>V. Council Membership</p>	<p>The Council will be composed of 15 to 21 members who reflect the populations eligible for ICI. A majority (at least 51%) of members will be ICI eligible consumers (including family or other volunteer caregivers of those who are eligible for ICI). Consumer Council Members who change health program eligibility status are still considered eligible. Service providers/representatives of trade associations and community based organizations/advocacy organizations shall be eligible to serve on the Council, but preference will be given to consumers and family members with no organizational affiliation. Council members must possess a strong interest in serving the community.</p> <p>Consumers and organizational representatives will be able to apply for openings in writing. Accommodations will be provided for anyone who is unable to apply in writing.</p> <p><u>Vacancies:</u> All initially appointed representatives will serve terms through 2018 unless they resign or fail to meet attendance requirements. A new council will be chosen every two years, and members will serve starting at the first meeting of the new year. Council vacancies will be filled from recommendations by EOHHS with approval by a majority vote of the Council.</p> <p><u>Expenses for Consumer Council Members:</u> Consumer members not paid by advocacy or other stakeholder organizations may be able to receive stipends for each meeting attended. Specialized transportation will be provided, if needed.</p>
<p>VI. Council Structure</p>	<p><u>Officers:</u> The Council will have one chairperson and two vice-chairpersons who are elected by the Council membership through a majority vote. The chairperson will be a consumer representative, unless no member from the Council is interested. Providers and representatives of trade associations are not eligible to serve as chairs and vice-chairs. The chairperson and vice-chairpersons will be responsible for developing agendas, facilitating Council meetings, and ensuring completion of all deliverables.</p> <p>Prior to selection of the chairperson and vice-chairpersons by the Council, EOHHS will select a chairperson and vice-chairperson to serve on an interim basis.</p>

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	<p><u>Subcommittees</u>: The Council will have the power, with approval by the membership, to designate any subcommittees necessary to its work and the membership of such subcommittees.</p> <p><u>Staffing</u>: A staff person or persons designated by EOHHS shall serve as Council staff. The Council’s scope of work will be contingent upon the availability of staff resources.</p>
<p>VII. Operating Procedures</p>	<p><u>Meetings</u>: The Council will meet at least six times annually. Discussion to obtain consensus shall be the preferred style of decision-making. “Minority reports” may be submitted.</p> <p>Meetings shall be held in a convenient accessible location with remote access provided to people unable to attend in person. All meetings shall be announced and open to the public.</p> <p>Written notices of upcoming meetings shall be sent to all members at least ten (10) days prior to meetings. Minutes of each meeting shall be kept and distributed to Council members following a meeting.</p> <p><u>Attendance</u>: Consistent attendance at each Council meeting and chosen committee meeting is a requirement of Council membership. In order for the Council to properly conduct business, the following attendance policy must be followed:</p> <p><u>Unexcused Absence</u>: Council Members must contact the EOHHS staff person as early as they know they will be absent. Failure to provide advanced notice of an absence from a council or committee meeting will be considered an “unexcused absence.” Council Members who miss two unexcused council meetings or committee meetings in the same calendar year, will receive a written warning that their membership is in jeopardy of being terminated. Council members who miss three unexcused council meetings or committee meetings in the same calendar year, will have their continued membership voted on by the remaining Council Members. The Council Member whose membership is in question, will not receive a vote on this issue.</p> <p><u>Excused Absence</u>: An excused absence is that in which the Council Member notifies the EOHHS staff member at least 48 hours in advance, with a qualified reason for missing the meeting. Qualified reasons are determined by the Council and include reasons such as personal or family emergencies that are unexpected, planned work conferences that require travel and cannot be rescheduled, and personal or family sickness which requires the member to remain at home. Council members must</p>

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	<p>take every effort to make council and committee meetings a priority. Some unexpected events that occur, which prevent the Council Member from providing 48 hour advanced notification can be determined by the Council to be considered an “excused absence.” Council members who miss three consecutive excused council meetings or committee meetings will receive a letter from the Council with the purpose to gage the member’s interest on his/her continued council membership. The member will be asked to respond in writing. The Council will discuss the response at the next council meeting and decide if any action will be taken.</p> <p><u>Recommendations and Reports:</u> All Council recommendations and reports, as well as minutes, shall be submitted in writing to EOHHS.</p> <p><u>Public Input:</u> In addition to regular Council meetings, the Council may hold “town hall” public meetings to allow for consumers to share experiences and concerns about the ICI.</p> <p><u>By-Laws:</u> The Council shall adopt by-laws to govern its operations. A two-thirds vote of members, a quorum being present, will be required to adopt or amend the by-laws. For the purpose of adopting the by-laws, a quorum shall be 51% of members.</p>
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