

Date/Time of Meeting	Wednesday, February 11, 2026, 10:00am - 12:00pm MT Meeting ID: 287 732 212 725 74 Meeting Passcode: u49Vn62j Microsoft Teams: https://teams.microsoft.com/meet/28773221272574?p=Nopvy6aiFvlo435AIW As Needed Only Dial-in by Phone: +1 972-454-4077, 245266779# Phone Conference ID: 245 266 779# In-person Location: PTC, 450 W State Street, Boise, ID 83702, 3 rd Floor, Conference Room 3A
Meeting Purpose	Interagency Governance Team (IGT)
Host	Brittany Shipley: Chair, Ross Edmunds: Co-Chair, Vice-Chair: Patrick Gardner, & Co-Vice-Chair: Adam Panitch
Reference Materials	IGT Guiding Principles Microsoft Teams User Tips Sheet

Voting Members	Attd	Voting Members	Attd	Voting Members	Attd
Ross Edmunds - DBH		Cody Ward - Ada County Juvenile Justice		Kim Hokanson - Parent Representative	
Brittany Shipley - Parent Representative		Megan Comstock - Parent Representative		Ivy Smith - Youth Representative	
Adam Panitch - Medicaid		Marquette Hendrickx - Tribal Representative		Laura Scuri - Provider	
Patrick Gardner - Child Advocate		Brenda Willson - Family Advocacy Agency (FYIdaho)		Shannon Dunstan - IDE	
Howard Belodoff - Child Advocate		Allison Highley - Family Advocacy Agency (IPUL)		Ashley Dowell - IDJC	
Val Johnson - DBH CMH Representative		Jean Fisher - Child, Youth, & Family Services		Ashley Porter - IBHP Bureau	

MEETING AGENDA

#	Length	Topic	Topic Owner/Topic Requestor	Discussion	Decisions
1	10 mins (All times are aspirational & subject to change.)	Welcome, Roll Call, & Approve Minutes (Operational)	IGT Voting Members	Attendees: Update on transition from Webex to Microsoft Teams platform for IGT meetings. - Megan Schuelke ACTION ITEM: Vote to approve IGT Meeting Notes from December 10, 2025, which were sent to the IGT voting membership prior to this meeting.	
2	5 mins	Introduction of Idaho Parents Unlimited (IPUL) as the YES Advocacy, Education, and Support Contractor	Allison Highley		
3	5 mins	Update on IGT Action Items (Operational)	IGT Action Item Owners		

#	Length	Topic	Topic Owner/Topic Requestor	Discussion	Decisions
4	20 mins	IBHP Update (Implementation standing agenda item)	Magellan		
5	10 mins	Implementation Update (Implementation standing agenda item)	Plaintiffs' Counsel & Defendants		
6	10 mins	Update on DHW Organizational Charts	DHW		
7	5 mins	IGT Recommendation Process Updates	Brittany Shipley & Megan Schuelke		
8	20 mins	Update on ICAT Reporting & Recommendation	Laura Scuri & IGT Executive Committee		
9	20 mins	Updates & Status regarding Discussion about School Districts Ability to Open Clinics on School Grounds Utilizing District Staff	IGT Executive Committee		
10	15 mins	Public Comments	IGT Members		
11	--	Dismissal	IGT Members		

The IGT will track action items and their status from the meetings here:

#	Follow-up Items	Opened	Owner	Status
22	FAM Subcommittee - QRT Sub-group: See IGT Meeting notes from August 14, 2024, regarding creation of QRT Sub-group. Additional information from the QRT Sub-group, including the estimated timeframe to gather the survey form data and complete the report, was requested during the IGT Meeting on December 10, 2025.	12/10/25	Kim Hokanson & Brittany Shipley	1/21/26, In Progress. Further discussions regarding next steps will take place in February 2026. Additional FAM Subcommittee - QRT Sub-group Meeting with all members will then be scheduled to discuss outcomes and best next steps.
21	Access to Care Discussion Updates Admission Criteria Clarifications: Schedule a meeting with Kootenai Health, DHW, and additional stakeholders to discuss admission criteria.	8/8/25	Val Johnson	1/21/26, Complete. A meeting was held on October 15, 2025, to address challenges in getting acute psychiatric care for youth in Bonner County. The goal was to improve how Kootenai Health (KH), state agencies, and local schools work together. Key Challenges Identified: <ul style="list-style-type: none"> Systemic Gaps: There are very few local crisis services in rural Bonner County and not enough providers who accept Medicaid.

				<ul style="list-style-type: none"> Operational Constraints: Kootenai Health operates an "open milieu" (not a lockdown unit), meaning they cannot safely admit highly aggressive youth. This has caused confusion when youth are turned away after a long drive. <p>Action Plan & Next Steps:</p> <ul style="list-style-type: none"> Clearer Rules: KH will share specific admission and "no-admit" criteria, so everyone knows what to expect before making the trip. Better Communication: KH created a process for sharing discharge and safety plans with local providers (like schools) in real-time, as long as parents give permission (ROI). Better Support: Magellan will improve care coordination paperwork, and schools will receive an "After Visit Summary" to help support students when they return. Community Outreach: Local groups (Kaniksu and Bonner Schools) will plan a community "Mental Health Night" to support families. Follow-Up: The group will meet again in a few months to see if these changes are helping.
20	Access to Care Discussion Updates IGT - Serious Emotion Disturbance (SED)/Developmental Disabilities (DD) Juvenile Justice (JJ) Meeting Update: Schedule meetings to discuss lack of services and supports leading to incarceration in IDJC/detention to include numbers of youth with SED/DD in detention and IDJC.	8/8/25	Val Johnson	<p>1/21/26, In Progress. The IAP deliverable updates will be included in DHW implementation updates. The DD/SED Juvenile Justice workgroup has been paused to prioritize the IWG's work on Jeff D IAP Objective B.3.e. ii. A formal notice of this pause was sent to stakeholders on December 4, 2025. CMH is currently coordinating a follow-up meeting with stakeholders to ensure these populations (DD/SED youth and SED/complex youth) served in Juvenile Detention Centers and youth served in IDJC custody are accurately represented in the IAP deliverable. While a Doodle poll was provided, CMH is working through persistent scheduling conflicts to ensure this conversation occurs. Stakeholders will be re-engaged through IGT subcommittees once the second phase of the IAP deliverable occurs. The second phase includes developing mitigation plans for engaging the systemically underserved populations identified. There is no definitive timeline for this phase due</p>

				to resources currently diverted to deliverables agreed upon and prioritized through mediation.
19	Have an offline conversation regarding the potential formation of an ICC/Wraparound subcommittee. Share this decision with the IGT members.	12/11/24	IGT Executive Committee	1/26/26, In Progress. Currently discussed in IWG to determine where the barriers are. Once identified, this will be brought back to the IGT Executive Committee and the IGT regarding a status report and potential recommendation.
1	Get together later to discuss the tribal-specific CANS for tribal members.	10/11/23	Karol Dixon & Juliet Charron	1/21/26, In Progress. Tribal members cannot be exempt from the CANS per CMS. Ashley Porter and Medicaid are working to move these conversations forward with the tribal members.