

Meeting Date: March 22, 2018

Attended in Person: BABH, CMHCM, CEI & Tuscola

Attended by Phone: CEI, Huron, LifeWays, MCN, Newaygo, Right Door, Saginaw & Shiawassee

MSHN Staff: Kim Z. (in person), Joe W. (in person), Todd L (in person), Dan D. (in person), Jill W. (phone)

Not Present: GIHN

KEY DISCUSSION TOPICS

- Review & approve minutes
- Review & approval of agenda for today's meeting
- Performance Measures Update
- Provider Network Adequacy Assessment Project
- Performance Improvement Project
- Retained Contracts Functions
- Policy/Procedure Review
- NCQA Action Plan Feedback
- MSHN DMC Review Process
- Follow up After Hospitalization Review
- MSHN FY19-20 Strategic Plan Review

✓ **KEY DECISIONS**

- Review & Approve Minutes- The minutes from 02/22/18 were approved as submitted
- Review & approval of agenda with no additions
- Performance Measures Update
 - ✓ FY18 Q1 Behavior Treatment Review Summary Report: Kim Zimmerman
 - Question #2 was divided into two questions (2a & 2b) per previous discussion
 - There was continued discussion on the need to identify the measures when "other/unidentified" is utilized...we want to keep this number low as all interventions should be identified
 - There was a question about whether or not ABA plans need to go through the committees for review. It was consensus that if they contain intrusive or restrictive techniques, then they need to go through the BTR committee like any other plan
 - The corrections will be made and the final version will be sent out with the approval date
 - ✓ Reviewed and updated the PI FAQ
 - The updated version will be posted and sent out with the meeting minutes
 - ✓ Diabetes Monitoring for Schizophrenia Diagnosis Report
 - Our percentages are trending upward
- Provider Network Adequacy Assessment Project
 - ✓ Tabled until next meeting per the request of CEI
- Performance Improvement Project
 - ✓ Discussion on FY18 PIP
 - We have not received a response from MDHHS regarding the optional PIP
 - The group finalized using the following PIP as our required project:
 - Patient(s) with schizophrenia and diabetes who had an HbA1c and LDL-C test during the report period.
 - We will begin completing the summary for the PIP project during the May meeting
- Retained Contract Functions
 - ✓ Critical Incident Report: CEI

- Reviewed FY18Q1 data
 - Numbers are staying consistent with some variations up and down
 - Concerns regarding the cause of non-suicide deaths
 - This will be reviewed in greater detail during the next review of FY18Q2 data
- Policy/Procedure Review
 - ✓ Quality Policies/Procedures
 - All Quality policies and procedures were reviewed today
 - No feedback has been provided prior to today's meeting from any of the CMHSP's
 - Monitoring and Oversight Policy: Revised the provider appeal process to reference following the MSHN provider appeal procedure (section I)
 - Medicaid Event Verification Procedure: Revised the provider appeal process to reference following the MSHN provider appeal procedure (section Q)
 - Kim will update all references to years and will update the change log on each policy and procedure to reflect that they have been reviewed and approved
 - All policies and procedures will be sent to Policy Committee and Ops Council for review and feedback
- NCQA Action Plan Feedback
 - ✓ Three CMHSP's have submitted feedback to Kim regarding this.
 - ✓ No further feedback was provided today
 - ✓ Kim will pass on the information provided to MSHN to take to Ops Council
- MSHN DMC Review Process
 - ✓ Melissa reviewed a quarterly report developed by the QAPI staff as a status report for the DMC site reviews
- There was discussion on how this could be utilized or any additions to the report
- Feedback from the group:
 - ✓ Each quarter should be a stand alone and not build upon quarter after quarter
- Looking for a small group of individuals to go through the tools and improve upon them with QAPI staff
 - ✓ Volunteers: Several agencies volunteered to participate: Sandra (BABH), Elise (CEI), Sherry (CMHCM), Susan (Tuscola) will all participate or get another individual from their agency to participate
- Follow Up After Hospitalization Review
 - ✓ Reviewed current data today
- MSHN FY19-20 Strategic Plan
 - ✓ Each workgroup is being asked to review for feedback on goals
 - ✓ The biggest change was the addition of the quadruple aim adding on Better Provider Systems
 - ✓ We reviewed all goals and objectives
 - ✓ The group was in agreement with what was presented
 - ✓ No additional feedback was provided today
 - ✓ The group was given until April 12th to provide any additional feedback by email
- Other:
 - ✓ Tentative dates for the HSAG site reviews
 - HSAG PMV: July 17th
 - HSAG Compliance: June 7th and 8th

• **ACTION/INPUT REQUIRED**

- MSHN FY19-20 Strategic Plan
 - ✓ The group was given until April 12th to provide any additional feedback by email

✓ **KEY DATA POINTS/DATES**

- Next Meeting: April 26, 2018