

Meeting Date: April 26, 2018

Attendees:

Attended in Person: BABH, CEI, MCN, & Tuscola

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

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

Not Present: GIHN

KEY DISCUSSION TOPICS

- Review & approve minutes
- Review & approval of agenda for today's meeting
- Provider Network Adequacy Assessment Project
- MEV Site Review Discussion
- Performance Measure Update
- Performance Improvement Projects
- Follow-up after Hospitalization Review
- Balanced Scorecard
- MDHHS and HSAG Audit Updates

✓ **KEY DECISIONS**

- Review & Approve Minutes- The minutes from 3/22/18 were approved as submitted
- Review & approval of agenda with the agenda items order adjusted
- Provider Network Adequacy Assessment Project
 - ✓ Reviewed project process and topics
 - ✓ Project results will be reviewed quarterly during QIC
- MEV Site Review Discussion
 - ✓ MSHN MEV Site Reviews
 - CAP year reviews will be scheduled as a desk audit
 - ✓ H0032 code
 - The H0032 code was discussed as used within the PCP authorization structure or separately.
 - The question of should the code be mandated within the PCP or remain separate will be emailed for discussion.
 - ✓ Injections code discussion
 - The lack of a separate injection code receiving a citation during a MEV review was discussed.
 - The degree of acceptability for language to be within the PCP narrative versus a separate authorization was highlighted.
 - If injections are going to be billed separately, then an authorization is required was the conclusion.
- Performance Measures Update:
 - ✓ FY18 Q1 PI Summary Report
 - The report was reviewed and approved without any revisions.
 - ✓ Overdue PI plans of correction
 - Submitted Plans of Correction (POC) were reviewed from Box and any missing from prior periods were discussed.
 - CMHSPs were asked to upload to Box any POCs which were identified as needing to be submitted/resubmitted.

	<ul style="list-style-type: none"> ✓ Satisfaction Surveys: MHSIP and YSS Summary Reports <ul style="list-style-type: none"> ▪ Currently on hold and attempts to receive clarification have not received any response. ✓ Diabetes Monitoring for schizophrenia diagnosis report <ul style="list-style-type: none"> ▪ The measure looks at the percentage of members 18 – 64 years of age with schizophrenia and diabetes who had both low-density lipoprotein cholesterol (LDL-C) test and a hemoglobin A1c (HbA1c) test during the measurement year ▪ The data reviewed today was through 03/31/18 ▪ The percentages are going up and have improved by 20%. • Performance Improvement Projects <ul style="list-style-type: none"> ✓ FY18 PIP <ul style="list-style-type: none"> ▪ No response has been received from MDHHS regarding the optional PIP ▪ Moving forward with Patient(s) with schizophrenia and diabetes who had an HbA1c and LDL-C test during the report period. ▪ Current year will be a baseline year. ▪ PIP study form was reviewed, discussed, and the draft submission will be reviewed during the May meeting for feedback. ✓ RAS/RSA <ul style="list-style-type: none"> ▪ Still on hold but continued clinical practice inclusion is encouraged but the official PIP has ended • Retained Contract Functions Update <ul style="list-style-type: none"> ✓ Critical Incident Summary Report Due in May • Policy/Procedure Review <ul style="list-style-type: none"> ✓ No policy/procedures due for review • Follow-Up after Hospitalization Review <ul style="list-style-type: none"> ✓ Summary data was reviewed with adult rate for MSHN as 78% (All CMHSP's were above the 58% standard) and Children rate was 81% (1 CMHSP's were below the 70% standard) ✓ Any CMHSPs below the standards will be required to submit a plan of correction to Box • Balanced Scorecard: FY18 Q1 and Q2 <ul style="list-style-type: none"> ✓ Scorecard was reviewed and each item was above the standard except for the Customer Service Denial of Services standard. ✓ The CSC is working to improve the standard. • MDHHS and HSAG Audit Updates <ul style="list-style-type: none"> ✓ HSAG Audits were discussed regarding the schedule and process of the upcoming audits. ✓ For the MDHHS Audit were encouraged to pay extra attention to the 11-prior regional citations and address any correctable deficits which could lead to a repeat citation through record reviews once the case lists are received from MDHHS.
<ul style="list-style-type: none"> • ACTION/INPUT REQUIRED 	<ul style="list-style-type: none"> • Summary of Action Steps: <ul style="list-style-type: none"> • MEV Site Review <ul style="list-style-type: none"> • Respond to the H0032 code question which will come via email. • PI Summary Report FY18Q1 <ul style="list-style-type: none"> • Complete any necessary POCs using updated form and upload to Box within 30 days. • Review Missing PI Plans of Correction <ul style="list-style-type: none"> • Upload to Box any missing plans

	<ul style="list-style-type: none">• MDHHS Audit<ul style="list-style-type: none">• CMHSPs were highly encouraged to complete record reviews and to address any missing documentation once the case lists are received from MDHHS.
✓ KEY DATA POINTS/DATES	<ul style="list-style-type: none">• Next Meeting: May 24, 2018