

Meeting Date: 12/20/2021

***Zoom Attendance**

- MSHN – Sandy Gettel*
- Bay Arenac –Sarah Holsinger*
- CEI – Shaina Mckinnon*
- Central –Kara *
- Gratiot – Taylor Hirschman*
- Huron – Levi Zagorski*
- Lifeways –PJ Hoffman*
- Montcalm – Sally Culey*
- Newaygo – Andrea Fletcher*
- Saginaw-Holli McGeshick*
- Shiawassee –Becky Caperton*
- Tuscola – Jackie Shillinger*
- The Right Door- Susan Richards*

Guests

- CEI – Shaina Mckinnon*
- The Right Door –Jill Carter*
- MSHN SUD – (quarterly)
- GIHN Pam Fachting
- MCN Joe Cappon
- BABH Melissa Deual
- Lifeways –Cindy Keyes
- SCCMH-Bo Zwingman-Dole
- TBHS- Lindsay Harper
- CEI – Bradley Allen

KEY DISCUSSION TOPICS

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| <ul style="list-style-type: none"> 1) Welcome and introductions- 2) Review & Approvals <ul style="list-style-type: none"> a. Meeting Minutes/Agenda b. Review follow up action items 3) Performance Improvement Projects (January 2022) 4) Performance Measure Updates <ul style="list-style-type: none"> a. Critical Incidents FY21Q4/FY21 b. MMBPIS FY21 Q4 c. FUH d. MEV Annual Report 5) Project Development <ul style="list-style-type: none"> a. Behavior Treatment Data Collection b. Annual Satisfaction Survey Project Description Review | <ul style="list-style-type: none"> 6) QAPIP- <ul style="list-style-type: none"> a. Report b. Plan/Workplan 7) MDHHS/MSHN Updates <ul style="list-style-type: none"> a. Announcements b. MDHHS Follow Up Review Waiver Review – PCP Training Process Discussion c. MDHHS QIC Updates -New structure/agenda d. MSHN Website - Corona Virus MSHN |
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KEY DECISIONS

- 2) Review & Approvals
 - a. Meeting minutes for 11/18/2021 approved with no edits. No additions to the agenda.
 - b. Agenda Approved/Follow up- January 2022 meeting changed to January 20.
- 3) Performance Improvement Projects (PIP)-Study/Design will begin development in January
- 4) Performance Measure Updates
 - a. Critical Incidents FY21Q4/FY21 MSHN demonstrated improvement in the rate for four of the five event types. The rate of reporting within the required timelines has improved. Those that are out of compliance with required timelines will be placed in the CMHSP specific folders.
 - b. MMBPIS FY21 Q4 MSHN met the standard for each indicator. 7 CMHSP participants performed below the standard for 1 or more indicator. The use of the initial assessment code 90791 took effect 10.1.2021. This affects the logic for the indicators. CMHSPs are working with their project manager to address the changes needed to accurately capture the required data. Discussion will continue next month. A request was made to include the ability to identify special cause or common cause variation to drive action plans, and to review the CMHSP who are submitting blanks for the out of compliance reasons. A change will be made to the QIC Action Plan. Additional analysis will occur for the blank records.
 - c. FUH FY21Q4 MSHN met the standard for both the Adults and Children, demonstrating no statistically significant disparity. Full report will be reviewed in January.
 - d. MEV Annual Report- MSHN demonstrated improvement on the performance measures for Documentation of service date and time matching the claim data and time of service, and Services provided by qualified individuals. The area with the lowest performance (95.14%) was Modifiers are used in accordance with the HCPCS guidelines.
 - e. Population Health and Integrated Care Report is included in the folder for review.
- 5) External Quality Review Summary 2021-Reviewed recommendations from HSAG to be included in the QAPIP Work Plan. See Summary or Full report for more information.
- 6) Project Development
 - a. Behavior Treatment Data Collection-Follow up needed related to the caregiver question from the November meeting.

	<p>b. Annual Satisfaction Survey - MSHN will begin process to pursue an outside vendor for administration of the provider and consumer satisfaction surveys for FY23. FY22 surveys will be completed in May/June with the methodology consistent with FY21. If the HCBS Survey process cannot be used for member experience, the MHSIP/YSS or version of will be recommended for use with the IDD population.</p> <p>7) QAPIP-MSHN in process of finalizing the draft FY21 report and development of the draft FY22 plan. These will be sent out in the beginning of January for review and approval during the January QIC meeting.</p> <p>8) MDHHS/MSHN Updates</p> <p>a. Announcements-Steve Grulke accepted the CIO position. The current plan for consumer representatives to attend QIC is in January.</p> <p>b. MDHHS Follow Up Review Waiver Review – Reviewed the repeat findings from the 2020 review. Reviewed the FAQ for additional clarification needed. It is recommended that the SED, CWP, HCBS, HSW Work groups be utilized more for the site review process.</p> <p>c. MDHHS QIC Updates -MDHHS is seeking additional membership for the MDHHS QIC. New membership includes consumers, additional CMHSPs, and other community organizations as relevant. Sandy to send out contact information for the MDHHS QIC and current meeting dates and times. Meeting times are typically the first Wednesday of the month from 10:00 to 12:00. Matt Seager seagerm@michigan.gov is facilitating the meetings.</p> <p>d. MSHN Website - Corona Virus MSHN</p>
<p>ACTION STEPS</p>	<ul style="list-style-type: none"> • MSHN (SG) to proceed with the development of a proposal for the use of an outside vendor for satisfaction surveys (consumer and provider) in FY23. • MSHN (SG) to send out meeting and contact information for the MDHHS QIC meeting. • MSHN (SG) will modify the QIC Action plan to include common cause and special cause variation. • MSHN (SG) to send out the draft QAPIP Plan and Report for review and approval in January. • CMHSPs to complete MMBPIS corrective action before January 20th, 2022.
<p>KEY DATA INTS/DATES</p>	<ul style="list-style-type: none"> • QIC January 20, 2022