

**Meeting: Regional Compliance Committee**

**Meeting Date:** February 21, 2020

**Attendees:**

BABH\*, CEI, CMHCM, GIHN, Huron\*, LifeWays\*, MCN\*, Newaygo\*, Right Door\*, Saginaw\*, Shiawassee\* and Tuscola\*

MSHN Staff: Kim Z.

Not In Attendance:

\*Attendance by phone

**KEY DISCUSSION TOPICS**

- Agenda Review
- Previous Meeting Action Items
- Draft FY2019 Compliance Summary Report
- Senate Bill 184
- Medicaid Provider Manual
- Disqualified Provider Policy
- Data Mining Activities
- Other

✓ **KEY DECISIONS**

- Additions to Agenda
  - ✓ *No additions*
- Previous Meeting Action Items
  - ✓ No Follow Up
- Draft FY2019 Compliance Summary Report
  - ✓ The compliance summary report for FY 2019 was reviewed. Kim noted that the intent of the report is to provide an overview of compliance related activities including oversight of the provider network for the delegated functions; site reviews of the PIHP completed by external agencies; compliance related training; Office of Inspector General (OIG) reporting; customer service complaints and compliance investigations.
  - ✓ MSHN's Operations Council reviewed the report at their February meeting and the MSHN board will review the report at the March board meeting.
  - ✓ Summary results and recommendations are included on pages four and five of the report. Areas highlighted include items receiving repeat citations during internal and external reviews as well as items identified as high risk.
  - ✓ The group is asked to give Kim any feedback on how the report can be more helpful useful
- Senate Bill 184
  - ✓ Reviewed the section related to behavior technicians particularly the reference to the penal code
  - ✓ Need to decide whether to include detail in the Disqualification Policy or just include in the reference section.
- Medicaid Provider Manual
  - ✓ Kim noted challenges getting clear information from MDHHS when there are exclusion questions, particularly on atypical providers. Inquiries have been getting routed between MDHHS Provider Enrollment or OIG. Kim will bring up at upcoming meeting with OIG/PIHP's. There continue to be questions related to atypical providers who aren't enrolled yet. Concerns were raised about risk exposure if criminal background checks are done at annual or longer intervals.
  - ✓ Bay-Arenac created a grid to be able to give providers guidance.

	<ul style="list-style-type: none"> <li>✓ Janis noted questions she raised to Kim related to interpretive differences on the Medicaid Provider Manual between MDHHS and OIG in terms of what criteria for exclusion applies and when.</li> <li>✓ Group discussion regarding this.</li> <li>✓ Kim will incorporate the BABH grid into the MSHN disqualified provider policy and send out to the group for feedback.</li> <li>• Disqualified Provider Policy <ul style="list-style-type: none"> <li>✓ Rework the policy to who is eligible to provide services with Medicaid funds vs. who cannot.</li> <li>✓ Remove tables and replace with grid (from Bay-Arenac)</li> <li>✓ Kim will make revisions and send out to the group for review and sign-off</li> </ul> </li> <li>• Data Mining <ul style="list-style-type: none"> <li>✓ OIG wants MSHN to identify a data mining activity each quarter. MSHN has looked at high emergency department utilization. The goal of data mining activity is to find any place where inappropriate payments related to the Medicaid program were made. Need to do a different one each quarter. Areas for consideration include: <ul style="list-style-type: none"> <li>○ Death report - pepm payments made for deceased individuals</li> <li>○ UM activities</li> <li>○ Community Living Supports</li> <li>○ Performance measure data</li> <li>○ Overlapping claims</li> <li>○ Analysis of retroactive eligibility and retroactive payments</li> <li>○ Pull out individual parts of the MEV items (e.g., 3rd party payer - coordination of benefits)</li> </ul> </li> </ul> </li> <li>• Other <ul style="list-style-type: none"> <li>✓ Kim noted the hire of a new MEV auditor: Cassen Gates, who will be starting next week. Shannon M is currently providing training and desire is to maintain consistency in the MEV process including scoring of the standards.</li> <li>✓ Corporate Compliance Relias Training: Post-test is not done yet. The training is available in Relias. Expected to have the post-test available sometime in March.</li> <li>✓ Some CMH's beginning to use REMI. A couple of enhancements requested from PCE</li> </ul> </li> </ul>
<ul style="list-style-type: none"> <li>✓ <b>KEY DATA POINTS/DATES</b></li> </ul>	<ul style="list-style-type: none"> <li>• Next Meeting: April 17, 2020 (3<sup>rd</sup> Friday of the month from 10:00am – 12:00pm)</li> </ul>